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COMMUNICABLE EMOTIONS, CONTAGIOUS INSECURITY: SUBJECTIVE WELL-BEING AND PRO-SOCIAL RESILIENCE IN CARTAGENA, COLOMBIA

A dissertation submitted in partial satisfaction of the requirements for the degree Doctor of Philosophy in Anthropology by Jessica Marie Novak

Committee in charge:

Professor Janis Hunter Jenkins, Chair
Professor Thomas Csordas
Professor Christine Hunefeldt
Professor Milos Kokotovic
Professor Steven Parish
Professor Nancy Grey Postero

2014
The dissertation of Jessica Marie Novak is approved, and it is acceptable in quality and form for publication on microfilm and electronically:

Chair

University of California, San Diego

2014
DEDICATION

The basic thing is that everyone wants happiness, no one wants suffering. And happiness mainly comes from our own attitude, rather than from external factors. If your own mental attitude is correct, even if you remain in a hostile atmosphere, you feel happy.

—H.H. the Dalai Lama
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VITA

2004  Bachelor of Arts *summa cum laude*, University of New Hampshire, Durham

2006-2010  Graduate Teaching Assistant, University of California, San Diego

2008  Master of Arts, University of California, San Diego

2007-2008  Graduate Student Researcher, *Southwest Youth and the Experience of Psychiatric Treatment*, University of California, San Diego

2010  Candidate of Philosophy, University of California, San Diego

2012-2014  Graduate Teaching Assistant, University of California, San Diego

2014  Doctor of Philosophy, University of California, San Diego

2015  Adjunct Instructor, Department of Anthropology, University of California, San Diego
ABSTRACT OF THE DISSERTATION

Communicable Emotions, Contagious Insecurity: Subjective Well-Being and Pro-Social Resilience in Cartagena, Colombia

by

Jessica Marie Novak

Doctor of Philosophy in Anthropology

University of California, San Diego, 2014

Professor Janis Hunter Jenkins, Chair

Over the past twenty-five years, Cartagena has played an important role in facilitating Colombia’s transition from drug-and-arms isolationism to Summit of the Americas host and New World financial hub. Cartagena maintained its reputation for beauty and tranquility throughout the most destabilizing decades of an internal armed conflict that plagued the interior of the country from the late 1980s through the early 2000s, yet since the official end of the conflict, Cartagena has experienced a steady increase in extrajudicial violence and cartel-related investment, influence, and insecurity. My dissertation interrogates the concepts of insecurity, pro-social coping, and subjective well-being
(SWB) in contemporary Cartagena, Colombia. I provide an anthropological response to what social psychologists have called “the Colombia-Japan Paradox,” or the question of why Colombians are unique in reporting extremely high subjective well-being despite their acknowledgment of extremely high insecurity in their immediate environment (Diener 2005; Willis-Herrera et al. 2009). In my interviews with 120 participants, I found it is not well-being and security that are considered mutually constitutive categories in Cartagena, but well-being and health, or the belief that if a person cannot maintain a sense of well-being despite insecurity, then the individual is likely to experience a major health crisis in the form of a chronic illness or a psychotic break. In Cartagena, well-being despite insecurity is maintained through a number of complex collective coping strategies, the majority of which focus on pro-social engagement with others in the community. My research provides further insight into how populations collectively adapt to new forms of violence while rejecting previous “culture of terror” paradigms (Taussig 2005) that misrepresent and stigmatize Colombians as a chronically anxious and socially withdrawn population.
Chapter 1

“WE SWEAT (FOR PAY), THEY LAUNDER (MONEY)” : DEFINING INSECURITY AND WELL-BEING IN CARTAGENA, COLOMBIA

1.1 INTRODUCTION

Over the past twenty-five years, Cartagena has played an important role in facilitating Colombia’s transition from drug-and-arms isolationism to Summit of the Americas VI host and New World financial hub. Traditionally called “the jewel of the Indies,” the Caribbean city of Cartagena maintained this bejeweled reputation for beauty and tranquility throughout the most destabilizing decades of the internal armed conflict and cartel-related violence that plagued the interior of the country from the late 1980s through the early 2000s (Theidon 2007, Sanford 2004; Taussig 2005). As the capital of Bolivar, a state (departamento) consistently held by conservative and paramilitary control, Carta-
Cartagena was spared the guerrilla insurrections, kidnappings, bombings, and street warfare that besieged other major urban centers like Bogota, Medellin, and Cali. Cartagena’s meticulously cultivated reputation for safety, UNESCO-celebrated colonial architecture, and picturesque coast made the city a popular refuge for wealthier Colombians from the interior and the exclusive location for hosting high profile foreign diplomats and investors, a tradition that continues today.

Cartagena was and is the face of Colombia’s post-conflict transition, even as the city itself has become more insecure in the post-conflict era. In 2002, for example, more than 412,500 Colombians became internally displaced persons (IDPs), the highest number in the previous seventeen years, and Cartagena was second only to Bogota as a receiving city, even though Cartagena’s total population is one-eighth the size of the capital. The massive migration of IDPs to Cartagena and the accompanying presence of paramilitary actors have been carefully camouflaged from the well-protected tourist venues of the walled colonial city center (known as the Centro Historico) and the modern beach resort neighborhood of Bocagrande.

Prior to the 2012 Summit of the Americas in Cartagena, the Colombian Ministry of Tourism invested in a months-long advertising campaign, assuring CNN International watchers worldwide and Cinepolis theatergoers across Latin America that in contemporary Colombia, “the only risk is wanting to stay.” In some of the promotional shorts, foreigners provide testimonies about how much Colombia surprised them. In other versions, an anonymous voiceover addresses both the unfounded sense of risk (”You realize that Colombia is not what you thought it was?”) and the mystical allure of the population, specifically focused on Caribbean images (“who welcome you with open arms, the passion of the Colombian people, and the women, Ahhh!”).

In tourist propaganda and international cultural presentations, Cartagena contin-

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1 Including former President Clinton (in 2002) and Senator John McCain (in 2009).
ues to be imagined as ever-colonial Colombia, even as the rest of nation’s major cities march forward in modernization projects, many of which began with handshakes and treaties signed within sight of Cartagena’s colonial walls. While the city has not enjoyed the level of university expansion, biomedical innovation, factory development, or government subsidized parks enjoyed by residents of Bogota, Medellin, Cali, or Barranquilla, Cartagena respondents in my field research reported one significant change over the past decade: a steady increase in conflict and cartel related investment, influence, and insecurity. Residents and Colombian visitors from the interior quickly realize there is little judicial recourse or source of political appeal relating to Cartagena’s lack of development and increased insecurity because the city will always be imagined and promoted as a touristic relic of the colonial past, isolated from the conflict and politics of the contemporary state within the Spanish fortress walls that surround it.

This dissertation interrogates the concepts of insecurity, coping, and well-being in contemporary Cartagena, Colombia. In the chapters that follow, I make three major claims: (1) Despite the city’s reputation for safety, Cartagena residents report a higher degree of perceived insecurity today (including paramilitary activity, extrajudicial violence, narco-trafficking, gang conflicts, unemployment, health concerns, and political corruption) than they did during the internal armed conflict, in part because of the populations and investments drawn to their city during the past two decades; (2) Despite an increased perception of insecurity, the majority of residents in Cartagena continue to report a high sense of subjective well-being, overall. This finding is concurrent with what Diener (2005) reports as the “Japan-Colombia Paradox” where, among the 150 countries surveyed, there was a direct correlation between reported perception of security and reported subjective well-being with the notable exceptions of Colombia and Japan.2 Building on Willis-Herrera et al.’s (2009) suggestion that there needed to be an “ethno-

2Japanese respondents overwhelmingly reported a low sense of well-being despite a high perception of security and Colombians reported a high sense of well-being despite a low perception of security.
graphic investigation of what subjective well-being means within particular Colombian populations to explain this phenomenon,” my dissertation argues that well-being in Cartagena is defined as a type of emotional and physical resilience, a continued willingness to strive (seguir adelante) and quickly recover from the adverse effects posed by insecurity while presenting an optimistic affect to others, rather than perceiving well-being as the absence of insecurity. In my research findings, it was not well-being and security that are considered mutually constitutive or even causal categories in Cartagena, but well-being and health, or the belief that if a person cannot maintain a sense of well-being despite insecurity, then the individual is likely to experience a failure in their health, either in the form of a physical illness (such as cancer, cardiovascular disease, or immune deficiencies) or a psychotic crisis (depression, anxiety, etc.); (C) Well-being despite insecurity is maintained in Cartagena through a number of complex collective coping strategies, the majority of which focus on pro-social engagement with others in the community. This component of maintaining well-being despite insecurity stands in stark contrast to Taussig’s (2005) “culture of terror” paradigm, which would require that women in these situations of intense insecurity and violence live in a chronic state of fear and anxiety where they isolate themselves socially from all those around them.

1.2 ORGANIZATION OF THE DISSERTATION

This introductory chapter provides an ethnographic snap shot of the issues related to insecurity, well-being, and collective coping strategies explored in later chapters. It begins with an outline of the increased perception of Colombia’s security in the global imaginary and Cartagena’s preparation for the 2012 Summit of the Americas. In the sections that follow, I provide a review of the relevant anthropological literature on violence, emotion, well-being, and health that will be expanded upon in the subsequent chapters,
followed by a general overview of my research methods, time line, and considerations of my own positionality among my participants.

The body chapters in this dissertation are each thematically organized around a specific form of insecurity commonly reported by my research participants, and include the following (in order of most frequent response): (1) Insecurity in the Neighborhood (which varied by neighborhood and the respondents’ SES and regional identity); (2) Economic insecurity (which varied by neighborhood and regional identity, but included: personal debt, unemployment/underemployment, and the economic insecurity of Cartagena compared to the rest of Colombia); (3) Insecurity in the family (infidelity, abuse, abandonment, and/or strained relationships with their children).

In each chapter, I elaborate on how participants describe this specific type of insecurity as having the potential to affect overall well-being along with an elaboration of the coping skills and pro-social engagement used within the community to address this issue. Chapter 2: “Healthy Neighborhoods, Complicated Places” compares different forms of neighborhood insecurity in Cartagena based on the specific neighborhood and its relationship to the city/state or the internal armed conflict (drug addiction in the urban center, social cleansings at the city’s periphery, price gauging and extortionists in the squatter settlements). In my interviews, I explore the collective processes of denial, evasion, and forthright resistance female participants alternately employ when confronting the sources of insecurity closest to their respective front doors as well as the discourses they use in elaborating on how they collectively maintain a sense of wellbeing in light of chronic stress. Chapter 3: “Character and Coping: ‘Character’ and Affect Relating to Well-Being and (In)Security” examines two definitions of character (carácter) used in Cartagena when talking about insecurity, both “character” as self/personality, or one who is able to endure insecurity and mitigate stress in order to preserve well-being, and “character” as performance, or demonstrating aggression and cunning when
confronting potential insecurity or violence in order to not be easily victimized. Chapter 4: “The Insecurity of Infidelity and Domestic Violence” addresses the pro-social coping mechanisms and demonstrations of “character” that Cartagenera women employ when confronting a spouse who habitually cheats or abuses them. My interviews chronicle how women in these situations rely on others in the community to cope with the emotional suffering associated with domestic strife as well as assess the type of security the husband provides (economic, family cohesion, physical protection from outside threats, etc.) in deciding if staying or leaving is a better indicator of future well-being and in assessing if other members of the community will come forward to respond to an individual family’s need for these forms of security in the absence of the male partner.

In Chapter 5: “Love and Sadness Grow in the Womb: Emotion-Health Discourses and Collective Responses to un-Partnered Pregnancies and Female Cancers in Cartagena, Colombia” I compare the health and insecurity reflections provided by two women with whom I conducted long range, person-centered interviews. The first woman profiled in the chapter, Miranda, was a coastal (costeña) paramour who, according to the women caring for her, came down with depression over the insecurity of never having a family of her own, got “sick in her womb,” and died [of ovarian cancer] while I was in the field. The second woman, Veronica, was an upper middle class native of Medellín (a paisa), who became pregnant with her married coastal boyfriend’s child and suddenly “lacked zest” (faltaba animo) when her boyfriend refused to leave his wife. Veronica’s negative emotions and faltering sense of “character” continued when she learned her employment and family support system were both in jeopardy and she twice became a target of home break-ins while living alone and heavily pregnant. Everyone from the nurse at the pre-natal clinic to the costeña employees at the hotel she managed warned her that if she did not work to recover her sense of character and well-being despite the insecurity she was experiencing, then these emotions could negatively impact her
developing child’s character and compromise her health. In both women’s cases, I also explore how insecurity within the neighborhoods obstructed access to immediate biomedical support when the women were at their most vulnerable.

In Chapter 6: “Patient and Staff Dynamics: Perspectives on Psychiatric Insecurity and Well-Being in Cartagena,” I close the dissertation with the argument that the attitudes and apparatus associated with Cartagena’s mental health care system offer a parallel environment for examining the systematic tensions between well-being and insecurity for residents throughout the city. Cartagena and its mental health care system are both baited at the margins of a rapidly modernizing state and deep in a lake of extrajudicial violence alongside colonial-era paternalism and socioeconomic hierarchies. In combining notes from my participant observation and interviews from two psychiatric clinics (one rural, open-air asylum at the outskirts of the city, and one self-contained, modern “hospital” in the urban center), I aim to illustrate three points: (1) How the management and organization of the mental health care system in Cartagena works to depoliticize and bio-medicalize mental suffering associated with structural and/or extrajudicial violence; (2) how lower SES patients (and some mental health workers as well) are socialized to behave as if they are beneficiaries of a colonial-era charity rather than as informed, insured, biomedical citizens of the state; and (3) how patients from different regional and socioeconomic backgrounds form social bonds within the hospital to promote a sense of well-being and character despite the insecurity posed by their diagnoses, the hospital staff, and the environment within and beyond the hospital walls. In the conclusion (Chapter 7), I combine the insights incorporated in the individual chapters in order to discuss the implications of this research on future studies of well-being and insecurity in Colombia and beyond.
1.3 CARTAGENA AND COLOMBIA IN LOCAL AND GLOBAL IMAGINARIES

Colombia has slowly, but steadily increased its presence in the North American imaginary since 2006 when I first visited the country as part of a human rights delegation. The careful marketing of Colombia to the world by the national Ministry of Tourism, an increase in Colombia’s cultural presence in the United States, and a dramatic expansion in U.S. airline and cruise services between the two countries have not altogether obliterated the tropes about cartels and kidnappings, but they have added complexity to the image of Colombia for the coffee drinking, entertainment consuming, vacation planning resident of the United States.

Since 2009, for example, Colombian-based Juan Valdez Cafes have sprung up in Houston, Washington D.C. and midtown Manhattan, inviting patrons to “Get to know a space which highlights the origins of coffee and the diversity of Colombia.” The walls in these urban U.S. cafes are uniformly adorned with pastoral scenes of the coffee-growing interior of the country. While patrons sip a wide range of fair trade, organic lattes and cappuccinos or nibble local confections like pan de guava or arepas, they can peruse the extensive merchandise section offering coffee accouterments, clothing, and packaged sweets that all feature various images of a Colombia that is worth getting to know further, without the risks of the past. Small ceramic cups and coffee bags feature paintings of jungle flora, country homes, and proudly dressed coffee growers marching alongside their burros. With more tables and free Wi-Fi than their rival, Starbucks, Juan Valdez patrons are encouraged to linger in conversation with their companions in true Colombian fashion, sampling the friendly and safe cultural atmosphere of what is modern, yet traditional Colombia all while still in the United States.

The opportunity to visit Colombia, principally Cartagena, has also become simpler
and more economical through the expansion of services by U.S. companies- a market indicator of increased security despite the country’s seemingly permanent status on the U.S. State Department Travel Advisory list. Princess and Carnival cruise lines regularly depart Miami harbor for Cartagena immediately at the end of hurricane season and even Disney Cruise Lines added Cartagena, Colombia as a “historical port” on its Panama Canal Cruise beginning in the fall of 2013. Where in the late 1990s, there were few options to fly to Colombia from the United States outside of Colombia’s Avianca airlines or by way of Panama City, today the U.S. budget carrier Spirit Airlines regularly connects passengers from almost all major U.S. cities to Fort Lauderdale, with fourteen flights a week onward to Medellin, seven flights a week to Cartagena, and several more to Barranquilla, Bogota, and Cali, respectively. In the fall of 2012, Cartagena, Colombia became the U.S. domestic airline Jet Blue’s only South American destination, leaving directly from John F. Kennedy airport in New York City to Cartagena two times a week during high tourist season.

Artistic and cultural exchanges have also figured into the increased visibility of Colombia in the U.S. media. Shakira, a Colombian native from the coastal city of Barranquilla, has been an English language radio constant since 2002, alongside multi-Grammy winning performer Juanes, who is from Medellin. In 2007, an English film adaptation of Colombian Nobel Laureate Gabriel Garcia Marquez’s novel “Love in the Time of Cholera,” opened in U.S. commercial theaters, with the characters played by mainstream Hollywood elite. Unsurprisingly, there continue to be notable films for their reinforcement of Colombian tropes about violence, instability and killing, including the 2011 U.S. film Colombiana about a young anti-hero on a murderous rampage in the United States to avenge her parents’ deaths and the bilingual miniseries, Escobar, on Netflix, which dramatizes the life of Medellin drug cartel leader and notorious murderer, Pablo Escobar.
Perhaps the primary disseminator of Colombian culture for commercial audiences in the United States today is the cable sitcom Modern Family, featuring the distinctly Colombian character, Gloria, played by Colombian actress Sofia Vergara. While part of the comedy of Vergara’s character is her role as the seductive younger wife of a wealthy, older entrepreneur in southern California, Vergara plays a character that is specifically not a “stock Latina,” but a Colombian from the northern coast (an area she originally comes from, Barranquilla). Much is made in the episodes about Gloria’s almost equally hyperbolic attachment to family and vanity, yet the script also features opportunities where Vergara (as Gloria) emphasizes that the violence of her country is in the past. In the season five premier[^3], for example, Gloria’s only son, Manny, is packing to leave California for Colombia to spend a month alone with his mother’s family. While Gloria affects the stereotypical role of an overbearing mother, there are no comments whatsoever about the possibility that Manny could be in danger due to conflict or cartels- all such jokes are notably absent. The greatest concern, comically engaged by Manny and his stepfather Jay, is the pressure Manny will feel to dress well in Colombia, given the emphasis on vanity in the country, to which Jay responds, “Colombia is not one of your more formal nations; the guy on their money is sitting in a lawn chair.”

Colombians living in Colombia are hyperaware of the stereotypes about drugs, war, and lawlessness that have been perpetrated in foreign media about their country. Many have described to me the sense of personal they feel when interacting with foreigners at home or when travelling abroad. In first meetings I have had with Colombian residents of Cartagena, Bogota, and Medellin, I have often detailed what I call “narco-image fatigue” or the perceived sense of injustice that Colombia is the worldwide symbol for violence or drugs when many other countries, from Colombians’ perspectives, have domestic situations that are as bad or worse, best expressed when a Colombian participant

once asked me, “Why, why doesn’t Mexico get it (the stigma) as bad as us? Why aren’t Americans afraid to go to Mexico, but they are scared here?”

Over my years in Cartagena, informants would introduce me to new people with a preamble along the lines of, “This is Jessica. She just loves it here!” “Here” in this case did not mean just Colombia per se, but Cartagena specifically. Pride in the coast (orgullo en la costa), and, as I later found, pride in one’s neighborhood (or barrio) were essential to Caribbean identity in Colombia. For Cartageneros, it was never as much about combatting an image of Colombia as a dangerous place, because Cartagena never carried with it the same reputation as the rest of the country. For them, it was a need to promote Cartagena’s exceptionalism. This perceived or at least glorified special status within the country (“Where all the foreign presidents come!”) was the only possible justification I was offered when I asked about Cartagena’s higher-than-national-average housing costs, food and fuel prices, and fewer transportation resources. Similar variations of the previous answer (“It is a special, touristic city, where everyone wants to be!”) were also used to explain tolerance for higher political corruption, the worsening education system, and (in spite of the reputation) the increasing insecurity of their city.

How did this discourse of colonial exceptionalism, I began to wonder, emerge as a justification for the corruption and lack of development in Colombia’s fifth largest, and most internationally visited city? Why did Cartagena’s largest neighborhood still not have a sewage system six years after a Spanish nongovernmental organization first donated the full amount for its construction? Why had three of the community leaders in this neighborhood been killed in so many years? And how did this increasing insecurity and comparative injustice with other urban centers in Colombia affect residents’ sense of well-being? These were questions I continued to ask over the coming years when I talked about Cartagena with Bogotanos (known as cachacos) or Medellin natives (known as paisas) who had either found their way to Cartagena or were simply commenting on their
favorite tourist destination. More times than I could count, cachacos and paisas, from taxi drivers to academics, would respond to my questions about Cartagena with some variation of the following: “Well this, this would never happen in an interior city today, but Cartagena is not really Colombia. And yet costeños are the happiest people in all of Colombia; they are just happy with less.”

1.4 THE SUMMIT OF THE AMERICAS (OR SACRIFICING CITY SECURITY FOR NATIONAL WELL-BEING)

On April 13, 2012, U.S. President Barack Obama, along with thirty other heads of state, arrived in Cartagena for the Sixth Summit of the Americas. Obama was only the second U.S. president to ever visit the country while in office, and the first to remain in the country overnight, which U.S. news media called a sign of Colombia’s “improved security.” Three days after the Summit of the Americas began, Obama returned to the United States, delivering a speech next to Colombian President Manuel Santos in front Cartagena’s colonial fort, San Felipe. Obama promised further U.S. support to improve the Colombian state’s security in the War on Drugs and expressed his optimism about the fortuitous U.S.-Colombia free trade agreement that would be signed in Washington D.C. a month later.

Cartagena as a destination for the 2012 Summit of the Americas was widely praised by government officials and citizens alike, who recognized that the event would have been inconceivable in any other city. At the same time, Cartageneros, the people, and the physical presence of their bodies, had been marginalized beyond their roles in folkloric presentations in favor of the pale skin, delicate accents, and “industrious
attitudes” of Colombians from the interior who arrived in the city just prior to the delegates’ arrival, and quickly replaced airport greeters, hotel staff and even the police force until the foreigners left the city. Even the seven-minute inaugural video for the Summit of the Americas, broadcast around the world, featured a little girl from Bogota leading viewers through the wonders of Cartagena’s colonial streets and state of the art convention center. Coastal Colombia’s only notable representative, Shakira, a costeña from the nearby city of Barranquilla, had been invited to sing the national anthem at the opening ceremony, an event that many Cartageneros watched enthusiastically. When Shakira stumbled over one of the stanzas and the televised Colombian crowd audibly gasped, however, I saw the cleaning women at the hotel where I was staying shake their heads as they stood in front of the lobby television. The Summit of the Americas was just beginning and the only costeña representing the present rather than the folkloric past had embarrassed the nation.

There was much international scrutiny about the 2012 Summit of the Americas from the beginning, given that Cuba had once again been denied participation in order to appeal to U.S. interests and Ecuadorian President Correa refused to attend the Summit in protest. Venezuelan President Hugo Chavez, who long had acerbic relations with Colombia over border tensions and professed sympathies for Colombia’s guerilla fighters, promised to visit Cartagena in order to address Obama, and then cancelled at the last minute, his staff citing additional cancer treatments. With many local news cameras in Cartagena rolling, President Kirchner, from Argentina, abandoned the Summit of the Americas before the final ceremony over her irritation that fellow leaders had not considered ongoing issues with the Malvinas important enough to include in the closing document. Many news roundtables in Colombia and the United States began questioning aloud if the Summit of the Americas in Cartagena, Colombia had achieved anything

4http://www.buenosairesherald.com/article/98264/cfk-leaves-summit-before-final-meeting.
In the week after Obama’s departure from Cartagena, there was a palpable transition in the attitudes of Cartagena’s residents about the sacrifices they had made, and the insecurity they had endured, in an effort to promote the diplomatic and economic well-being of their country. Some of my participants and I simultaneously watched the news coverage and looked up at the sky as Air Force One was reported soaring above Cartagena’s peripheral neighborhoods, not far from the colonial walled city where there had been no work and no transportation for the majority of residents during the week of international diplomacy. Initially, participants had defended the restricted movement of citizens and more specifically, of locals, as a necessary sacrifice in order to reduce risk, to promote order, and “to keep the city clean.” As the relentless coverage of the prostitution story continued, however, there was a strong shift in the discourses among previously apolitical interviewees about how they viewed themselves in relation to Colombia and to the United States in the tense weeks before the signing of the U.S.-Colombia Free Trade Agreement. Many Cartageneros recognized there would be no new business for them, only more “laundered money” (plata lavada) coming to their city from the interior of the country, along with the potential insecurity that came with this coastal investment.

The 2012 Summit of the Americas offers a high resolution snap-shot of the increasing insecurity in Cartagena (both physical and economic), which categorizes Colombians in Cartagena according to their perceived connection to “easy money” (plata facil), to “laundered money” (plata lavada), and lastly, those who “earn by the sweat of their brow” (por el sudor de la frente). As Colombia’s fifth largest city, Cartagena has the highest income inequality, the least diversified employment market, and a transportation infrastructure that is two decades behind other urban centers. Cartagena has brokered Colombia’s transition to global capitalism, but it has been left with few other legal means of earning other than the commodification of the very charm, passion, and docility
associated with Colombia’s colonial period.

Over eight years of routinely visiting and conducting fieldwork in Colombia, including two six-month stretches in 2010 and 2011, I had begun to notice a number of changes in Cartagena, which challenged its reputation for safety. By 2012, tourism was up and new hotels were opening, but former walking vendors (vendedores ambulantes) were now beggars outside the city walls since their licenses had been revoked by the city, and some public schools were on every-other-day schedules to accommodate and increasing population of forcibly displaced migrants. The light rail metro and bus-exclusive lanes, which had eased the daily commute in Barranquilla, Bogota, Cali and Medellín, still had only a half dozen platforms constructed in Cartagena and no service after five years in the making. The mechanics, scrap metal salesmen and rustic furniture businesses at one end of the open-air market had been run into the ground during the course of the bus lanes’ incomplete construction due to road closures and the city construction vehicles taking over the few customer parking spaces that existed near the once booming businesses. Half a decade into the construction of Cartagena’s well-publicized public transportation project, piles of fill were all that remained in front of blocks of now-empty storefronts.

In the peripheral neighborhoods and squatter settlements where I conducted interviews on subjective well-being, my female subjects increasingly complained that the neighborhoods were hot (caliente), referring to the propensity of violent attacks. Social cleansings (or extrajudicial killings of social undesirables by paramilitary and gang members enforcing nightly curfews) were on the rise and published in the yellow tabloids sold next to city’s main bus stop. On my way to interviews in the urban neighborhood of Olaya, 2010 was the first year when I regularly greeted or dodged male and female crack addicts in a constant parade between the main avenue, the clinic, and the alleyways in broad daylight. “We never used to see these viciosos (drug users) in the day time.” One woman told me. “You should see what it looks like here at night. The neighborhood is a
boiling pot.”

While there were more restaurants, hotels, beauty salons and tourist agents, the over representation of ownership by paisas (white Colombians from Medellin) and cachacos (natives of Bogota) was everywhere. In the historically costeño (or ethnically Caribbean) neighborhoods just four to five miles from the colonial center, paisa men and women sat behind counters in tiny neighborhood grocery stores on every corner, at the only bars allowed to stay open past extra-judicially enforced curfews, and at the front desks of pay-by-the-hour motels catering to locals.

A new scene in 2012 were the paisas on motorcycles, zipping up and down the streets of costeño neighborhoods with restaurant ordering pads in their back pockets and knocking on the front doors of what seemed like every third house. The word pagadiario (a daily-paid loan shark) had not been a part of my lexicon during my first five research trips, and now up to 70 percent of my participants in one neighborhood (Nelson Mandela) claimed that they held an outstanding debt (with 20 percent interest from the first day onward) to the paisas who were laundering money (lavando plata) in their neighborhood. The physical signs of the potentially violent economic oppression strained my participants’ faces as they told me. Cartageneros were a captive economic audience. Often blamed in the media and among Colombians from the interior for their inability to manage their money or delay gratification, the source of debt for many costenos was linked to paying extortionists or just the grocer, almost all of whom were paisas, many of whom came from the same families.

While I never spoke to paisas in the peripheral neighborhoods about whether or not they were laundering money or how they collected their debts, the concern about their regional and/or racial marginality in the neighborhoods where they now lived was palpable. In each of the three neighborhoods where I conducted fieldwork there were at least three paisa markets that I would drop by each day, where I was always offered a cold
drink, genuine interest in my well-being and a bit of mutually constructed gossip about how bad things were getting at night. For the grocers, anxiety over the increased visibility of “easy money” in the neighborhoods: drug users, drug dealers, and prostitutes, kept them from allowing their children to even set foot in the street because, as one mother told me, “The street is stronger than the home.” The paisa grocers in these neighborhoods were relatively new to Cartagena, and two of the women expressed disappointment over arriving in Cartagena after the more central businesses were established. In every instance the responses, however vague, echoed the same theme: “It is the easy money that is destroying the neighborhood,” “The people here simply don’t have culture,” or “This is why we need a (social) cleansing.” The laundered-money paisa class was now policing the easy-money costeño class, with those Cartageneros still earning by-the-sweat-of-their-brow struggling to maintain a sense of well-being among the increased insecurity posed by the other two groups.

In the transition to global capitalism, the moral value of earning a living “by the sweat of one’s brow” is rapidly losing cultural salience in Cartagena’s working class and working poor communities because there are so few jobs that require or reward labor and the economy of the poor, especially as the number of renters in the city increases and the opportunities to squat have diminished. On the social media platforms of my female participants’ adult sons, the popular meme “Another day of unemployment thinking about becoming a narco” (Otro dia de desempleo...pienso en ser narco) earned at least a dozen affirmations or re-posts among other youth from the neighborhood whenever it was displayed. In a city where many middle class women paid their full-time domestic workers only half the minimum wage (or 150 USD a month) if the maids came from a supposedly desperate neighborhood, selling your labor for less than the rent was increasingly considered backwards or worthy of ridicule. Many claimed they would rather eat only “lentils and rice” until they could find work in a hotel or as a cook in
a backpacker restaurant. It is worth mentioning, however, that even these low level positions in a hotel or at a restaurant in the colonial center were increasingly all about connections (or palancas) in Cartagena, often brokered between the demarcated “easy money” coastal communities and “laundered money” paisa communities.

For a city glorified for its lack of risk, the efforts to eliminate it entirely and present the “clean face of the city” (reducing or eliminating the presence of everyday Cartageneros) intensified in the days and weeks before the Summit of the Americas. All informal market vendors outside the colonial walls were displaced, and in a massive sweep, the homeless and stray dogs disappeared in a single night (the former locked up, it was later reported in “a comfortable shelter”). A miniature Juan Valdez in a sombrero, poncho and handle-bar mustache peddled through the cobbled streets on a bicycle selling hats to the assistants of foreign diplomats, and the only Palenqueras (an Afro-Colombian ethnic population) and Indigenous Colombians allowed within the walled city were those registered with the Ministry of Culture and wearing their state-issued costumes.

Despite the sacrifices, hotel employees in my temporary residence above a brothel-disco in the colonial center continued to throw up their hands with enthusiasm or point to me in the final days of preparation and say, “Your president is coming here! Can you believe it??!!” The mayor of the neighboring town of Turbaco, who had made national news for his construction of a mini White House (casa blanca) on the town square (complete with replica Oval Office), conceded on the local news that Obama would not visit the White House he had constructed for him, much to his constituents’ disappointment. Instead, the mayor arrived in Cartagena on the day the U.S. motorcade would pass from the Bocagrande Hilton to the Convention Center with a baby donkey named “Demo,” (for democrat), which was dressed as Uncle Sam, offering his gift to each of the darkened limousine windows that passed by him and his crowd of supporters. Speculation about whether or not Obama would take the donkey was splashed in the yellow newspapers
throughout the city and featured on cable. My Cartagenero participants used this example of “Demo” and the mayor of Turbaco, who had invested the public’s money in a structure many falsely believed would be a center for issuing U.S. travel visas, as an example of how the wealthiest and the most powerful in the region continued to be the most guilty of promoting stereotypes about the local population as backward and rural.

Reports that a member of President Obama’s Secret Service had failed to pay a prostitute silenced all discussions of Demo and redirected the cultural divisions between costeños, cachacos, paisas, and foreigners with respect to the Summit of the Americas. There was great indignation among all three Colombian groups about the televised debates over the morality of the transaction- Why should Cartageneros and their city’s reputation suffer over something that is legal in Colombia, even if it is illegal in the United States? As one costeño hotel guard told me, as we looked over the balcony at the brothel across the street, “It’s their job and they must be paid what they are owed. Often foreigners will do with them what they like and then they don’t want to pay.” In the two weeks following the Summit of the Americas, the Cartagenero informal market vendors and paisa hotel employees alike appeared to have collectively united in the fatigue over the coverage. One costeña employee at the hotel told me, “This is it. It is over. And Colombia should charge the United States for treating us so badly.” Her paisa manager, Veronica, echoed the same sentiment.

The income deprivation, restricted mobility, and expanded police force that Cartagena’s residents (native costeñas, paisas, and cachacos alike) endured during the Summit of the Americas all heightened their sense of insecurity and their vulnerability toward violence, along with the indignation that they (the local population) were seen as a threat to foreign visitors. Nevertheless, it was the press coverage of the prostitution scandal, what they saw as an attack on the “character” of Cartageneros and Colombians overall, that began affecting their sense of well-being, snapping off the television or
commenting when asked that “This doesn’t make me feel well” or “I don’t want to think about this anymore.” In the following weeks a new dynamic, a costeño-paisa-cachaco alliance appeared to emerge both in the hotel lobby among employees and guests, and in front of the bakeries and cafes in colonial Cartagena, where Colombians talked about the poor form of the United States in their media coverage of the paisa prostitute. The Summit of the Americas and the impending free trade agreement brought insecurity, but the collective response involved the development of a pro-social, pan-Colombian coping mechanism focused on a united identity that I had never seen before nor would witness again until the 2014 World Cup.

The jokes at the White House Correspondents’ dinner on April 28th, 2012 were played on Colombia’s cable networks Caracol and RCN for days. Obama, who had not necessarily been held culpable by Colombians for the scandal that broke, closed his seventeen-minute stand-up routine with this final joke: “Just to set the record straight. I really do enjoy these dinners. In fact, I had a lot more material prepared, but I have to get the Secret Service home in time for their new curfew.” The cleverness and frivolity of the comment, read in yellow subtitles at the bottom of the screen, did not sit favorably with any of the Colombians, costeñas or paisas, who worked at the hotel where I stayed. The greatest disappointment and anger came from the fact that these words were uttered by a U.S. president who had visited their country, who “even looked like he could be costeño,” one woman told me, and yet would poke fun at the work some women did to survive and the subsequent shame these events had cast on their city.

On May 15th, the U.S.-Colombia Free Trade Agreement was signed in Washington D.C. On the same day in Bogota, a bomb attached to a bus exploded in an assassination attempt of the former Minister of the Interior. Two people were killed, and as I watched the footage several times throughout the day with participants and friends, paisas and costeños, they worried aloud that the free trade agreement might signify a
return to intense conflict and urban terrorism by the guerrillas. “This agreement does not look like it will bring much good to Colombia,” the paisa manager told me as we watched coverage of ambulance crews extracting people from the scene of the attack in Bogota. “But this agreement was never going to benefit Cartagena, anyway.”

1.5 HISTORY OF THE CONFLICT

In order to better articulate the significance of my observations about the complex ways in which insecurity and well-being are perceived among participants in Cartagena, it is necessary to make some general historical, political and regional connections between the city of Cartagena and the internal armed conflict that continues to impact all areas of the country. The fact that Colombia is the number one producer of cocaine in the world certainly has played a role in the intensity of the territorial conflicts between the different guerrilla groups, paramilitary members, and military battalions since the late 1980s, but this explanation alone ignores the complex political motivations of Colombian citizens. It also fails to explain how, despite an ongoing conflict that continues to leave multiple regions of the country virtually ungovernable, Colombia maintains the third largest economy in Latin America, a small but stable middle class, as well as growing industrial and academic centers in all of its major urban centers, except Cartagena.

Officially, the violent conflict or La Violencia (the violence) began when populist and pro-agrarian reform candidate, Jorge Elicier Gaitan, was assassinated during the 1948 presidential campaign. In the three days following his death, peasants who had supported him flooded the capital in a massive and bloody riot known as the Bogotazo. The Conservative Party, now in control of the state, responded in kind. During a six-year period known as La Violencia, the military and state-supported militias murdered over 150,000 Gaitan supporters and suspected liberals all over the Colombian countryside.
It was then that the first guerrilla groups emerged in Colombia, as local peasant associations organized and armed themselves against the wrath of the state. The platform of guerrilla politics and the motivations for assaults on the state changed over the decades, however. It was during the transition from protectionism to the neoliberal market in the late 1980s that the devaluation of agricultural exports and surging market value of cocaine resulted in a series of new territorial and political conflicts over coca production, changing the nature of armed conflicts between various guerrilla groups and the military for territorial, ideological, and market control. As my interviewees’ transcripts reveal, these issues continue to directly and indirectly impact the present day communities, and politics that I study.

Paramilitary groups were first authorized in the department of Antioquia by then governor, turned two-term president, Alvaro Uribe, in the early 1990s. The groups, known as the United Self Defense or AUC (Auto Defensas Unidas) claimed they were organizing to protect private hacienda owners from guerrilla land seizures, while many guerrilla groups claimed to fight for the interests of the exploited agrarian classes. The military, on the other hand, made public declarations about their responsibility for the maintenance of public order (Pecaut 2001: 68). The paramilitary groups gained even greater authority over the rural civilian populations in 1999, when President Clinton authorized Plan Colombia, endowing the Colombian military with millions of dollars, weapons and military aircraft, all in a well-publicized campaign of inter-country cooperation to reduce cocaine exportation and eliminate crops at the source, which often led to the poisoning of rural water tables and the forced displacement of peasants who could no longer survive on subsistence farming.

The intensification of local conflicts, orchestrated by the military, paramilitary members, and the guerrillas, did not occur in a vacuum, however. As my MA thesis

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5The capital of the state (departamento) of Antioquia is Medellin.
about IDP representation reveals (Novak 2008), local populations are constantly caught in the cross-fire of these territorial conflicts, both in the figurative and the literal sense. During intense regional conflicts, rural citizens’ access to outside resources, as well as roads out to sell their products, are completely cut off, making them dependent on the occupying armed group for their basic survival. Forced to pay tribute or turn over their properties to the occupying group of armed actors, thousands of those same citizens are later threatened, killed, or coerced into service when local power changes hands. It must also be emphasized that members of all three groups have been charged with human rights abuses, which include public massacres, torture, kidnapping for ransom and forced disappearances. The majority of those who flee, hoping to find government aid or at least anonymity in the urban slums, eventually end up in one of Colombia’s five urban centers: Bogota, Medellin, Cali, Barranquilla or Cartagena. Of course, as the countryside has emptied out, the cities have become new sites for the political conflict. It is here, in these peripheral urban communities, where residents with lower socioeconomic status (many of whom may have been forced to migrate in earlier decades or sold their land before the conflict reached them), the most recent victims, and armed actors may be spatially separated by nothing more than the width of a street.

This abridged version of Colombia’s internal armed conflict does not begin to explain the wide range of economic and political benefits and repercussions experienced by different regions of the country. Nevertheless, I include a brief synopsis of the current conditions in order to demonstrate that the violence associated with the internal armed conflict has not targeted all Colombians in the same way or at the same time over the past five decades. Unsurprisingly, the politics of some female participants in Cartagena oscillates between apathy (“I don’t know or care about politics”) and embracing the mainstream media’s support of changing the Colombian Constitution so that conservative Alvaro Uribe could have run for a third term back in 2010. Even though many of the
women in Cartagena complained about a lack of economic security, a shortage of job opportunities and the rising cost of food in the city, no connection was ever articulated between their daily hardship and the current national administration. Instead, Uribe was credited with making the country safer and reducing the power of the guerillas, despite the fact that many of the residents came from regions that had been dominated by the paramilitary and few had ever had any contact with the guerillas at all because the coast, with the exception of La Guajira, has always been a paramilitary stronghold.

While Cartagena was largely spared the degree of armed violence other cities witnessed during the most intense periods of the conflict, evidence of sexual, racial, and structural violence in Cartagena abound. Cunin (2003) depicts how the coastal tourist industry in Colombia reinforces the stereotype of the sexualized Black body by displaying “the exotic and sexual black woman for the tourists of Cartagena” and featuring tourist brochures that feature scantily clothed mulatas or boasting an image of Cartagena as a “racial jewel,” playing off its nickname as “jewel of the indies” (Cunin 2003: 111). Peter Wade further argues that the sexualization of Black and mulata women in Cartagena has reinforced the power of white Colombian elite, many of whom have inherited their wealth from the pre-independence, colonial era. Wade argues that marketing Caribbean women’s sexuality, historically considered the sole possession of the male partner, is in fact a contemporary reinforcement of elite white and mestizo male domination over Black men. The structural power systems dictating how sex is being marketed in Cartagena, not sexual identities themselves, is, in Wade’s opinion “at the very heart of racism” and violence in this city (Wade 1997: 103).
1.6 THEORETICAL BACKGROUND

Interest in the psychological and cultural effects of political violence on civilians populations began with Freud’s 1915 (pub.1947) analysis of “non-combatants” in a poignant, if lesser known, essay titled The Disillusionment of War, a complement to the extensive work on “shell shock” and the analysis of soldiers’ repressed fears and motivations, compiled by WHR Rivers (1918, 1919) during the same period. Freud had observed that the noncombatant living through WWI often suffered acute “mental distress,” which included “feeling conscious of disorientation, and of an inhibition in his powers and activities” (1947:246). Witnessing war, Freud has argued, creates a psychological conflict due to the abrupt realization that “we cannot maintain our former attitudes towards death, and have not yet discovered a new one” (p.266), resulting in individuals’ collective attempts to “estrange” themselves from the prospect of their own deaths by “focusing on the desirability of the death of perceived enemies and continuing to insist that death is an impossibility for ourselves and those we love” (p.264). This initial study has suggested that sustained indirect exposure to armed conflict not only has the capacity to disturb the psychological well-being of individual noncombatants, but can also alter social and psychological frameworks for generations to come.

In more recent scholarship on human psychology, Singer (1995) has suggested that repression, defined as the “efforts to ward off from consciousness or from observation a variety of threatening conflictual cognitive contents or emotional reactions” (p.xi) and dissociation, the “motivated forgetting or selective inattention” (p.xiv), are common human reactions to unsettling events. Brenner (1955, 1981) has argued, however, that the causes of an individual’s anxiety are never fully repressed, as they can be evaluated through paraplexes, humor, dream narratives, and an individual’s particular manifestation of psychoneurotic symptoms. Sullivan (1970) has posited that humans consciously
evade topics that may induce anxiety, but that an understanding of the triggers can be effectively elicited by the interviewer through inquiries about a subject’s life history and interpersonal relationships. Spiro (1994) has elaborated upon the model of individual repression and sublimation by arguing that it is not just particular individuals, but entire societies that are embedded with unique “culturally constituted defense mechanisms” (p.145) or “cognitive operations” (p.154) through which individuals can transform and express thoughts or wishes that would otherwise result in cultural sanctions.

One of the primary challenges to psychological anthropology has been voiced by culture and meaning theorists following Geertz (1973, 1986) and discourse theorists (Abu Lughod 1985, 1998; Lutz 1988; Lutz and Abu-Lughod 1990; Kovecses 1995; White 1990) who have argued that it is impossible to ever really know the subjectivity, emotions or psychological state of another person who shares the interviewer’s sociolinguistic practices, much less someone of another culture. Hallowell (1955) has argued that people’s subjectivities cross-culturally can be known, but anthropologists must recognize that while self consciousness is universal, it manifests within the individual’s “culturally constituted behavioral environment” (p.187), and requires an anthropologist’s exploration of the five cultural orientations\(^6\) of self present in all societies.

Contemporary scholars of subjectivity have advocated ethnographic investigations about personhood and cultural systems of meaning that draw on Hallowell’s concept of cultural orientations, but are slightly less laborious for the ethnographer. These ethnographic methods have included: (1) an investigation of a society’s “common sense frameworks” and the unique ways people combine them in order to create meaning (Levine 1984), which is of particular interest for my data analysis; (2) the “mental structures and processes” that people share as a result of interacting within a cultural

\(^6\)These include: self-orientation, principally through language; object orientation through interaction with the immediate environment; spatiotemporal orientation, which dictates local constructions of time and place; motivational orientation, which influences the perception of material desires or life goals; and normative orientation, which instills local values and ideals (1955:89-108).
environment (D’Andrade 1990; Milton and Svasek 2005); and (3) the culturally relative constructions of personhood as unique constellations of ideas particular to an area rather than as rigid, absolutist models of selfhood (Shweder 1984). The latest scholarship on subjectivity has thus focused on its inherently intersubjective properties, for example, the responses of egocentric and sociocentric selves to others in their immediate spatial or temporal environment (Biehl 2001, 2007; Csordas 1994, 2008; Ewing 1990; Holland et al. 2003; Lamb 2000; Linger in Casey et al. 2005; Jenkins and Barrett 2004; Ortner 1981, 2006; Whitehead 1981)

How culture has influenced individual definitions of and reactions to violence have become a central theme in psychological anthropology over the past two decades. Scheper Hughes and Bourgois (2004) argue that anthropologists have a professional responsibility not to treat violence as a pre-cultural phenomenon because, they attest, “Torturing and killing are as cultural as nursing the sick and wounded or burying and mourning the dead” (p.3). One of the primary contributions by psychological anthropologists to theories of violence then has been to demonstrate how cultural knowledge and perception of place result in different articulations of trauma (Das 2000; Good 1997, Kleinman et al. 1997; Jenkins 1994, 1996, 2007; Jenkins and Valiente 1994; Scheper-Hughes 1992, 2008; Aijmer et al. 2000). These studies support the claim that even among individuals who do not consciously recognize their immediate environment as a source of emotional knowledge (following Levy 1984), abrupt changes to and/or forced dislocation from a known environment are universal precursors to trauma. Such events may elicit culturally specific and/or gendered somatic responses such as nerves (nervios) or fright (susto) (Jenkins and Valiente 1994; Low 1981, 1989); verbalized articulations of divided, territorialized or transnational selves (Das 2000, 2004; Zilberg 2004); the emergence of observable practices otherwise regarded in the society as antisocial, such as “running amuk” (Kleinman 1992, 2003) and lack of “mother” love (Scheper-Hughes 1992); or
a spike in violence between members of the traumatized community (Moser and Clark 2001; Moser and McIlwaine 2004; Nelson 1999; Sanford 2008; Theidon and Laplante 2007).

Despite the initial disorientation that violence engenders, researchers have noted that they are “shocked with the ease” with which humans can dramatically alter their logic and “adapt to circumstances that to others might reasonably appear unbearable and unnatural” (Roldan 2002:580). Moser and McIlwaine (2004) have argued that such responses are typical of populations that have been traumatized by but no longer terrified of the violence they witness in their everyday lives. The authors have noted, for example, how poor female subjects in Guatemala City and Medellin expressed greater anxiety over the “area stigma” attached to their violent neighborhoods than the prospect of becoming victims themselves. Long-term exposure to violence has also been shown to result in a shift in witnesses’ primary focus from a conscious recognition of the violence they have witnessed to an emphasis on its relative distance from them (Jenkins and Valiente 1994), a process that Jenkins (1996) later defined as one of several “modes of trauma” (p.284) evident in Salvadoran refugee narratives.

Anthropological research on dislocation and trauma has not been limited to the experiences of IDPs and refugees, however. Biehl’s (2001) ethnography about an impoverished Brazilian hospital and its committed patients reveals how it is sometimes a series of very small moves (from the home to an institutional “dumping ground,” from standing erect to laying paralyzed on the floor) that dramatically alter an individual’s subjective interpretation of his or her “self” and relative psychological well-being. Scheper-Hughes (1992, 2004) has written extensively on what she (and Kleinman 2000, in a different context) calls “the violence of everyday life” or the banality of disease, hunger, stress, and social immobility that can rapidly erode an individual’s sense of purpose or, when experienced collectively, dramatically alter what are widely thought of as universal human
experiences and emotions.

Researchers have found reason to reemphasize the importance of how perceived vulnerability or insecurity contribute to mental illness and how interpretations of insecurity vary across different cultural contexts (Patel and Kleinman 2003). Kirmayer (2008) has demonstrated that a clinician or ethnographer must have some understanding of a subject’s cultural origins in order to properly evince empathy, which, if absent in the interview environment, can lead to a subject’s greater sense of anxiety and self-censorship. Misunderstanding a subject’s “local and moral worlds” (Kleinman and Ware 1992) has often resulted in an ethnographer’s inability to isolate the narrative elements in the interview that would index mental health or mental illness according to cultural context (Good 1997). Like mental health professionals, medical and psychological anthropologists have an important role in rearticulating the experiences of their informants, resulting in coherent, culturally contextualized, and intersubjective narratives that at once affirm the subject’s experience while effectively communicating the theoretical implications to the larger academic community (Csordas 1994; Good 1990, 1997; Jenkins and Carpenter Song 2009; Kleinman 1985, 1992, 2003; Milton and Svasek 2005).

1.7 INDIVIDUAL AND COLLECTIVE RESPONSES TO VIOLENCE IN LATIN AMERICA

Country-to-country comparisons of violence in Latin America have been shown to be useful in anthropological research for the following reasons: (1) Latin Americans often talk about a regionalized “Latin American” identity alongside national identity and share a number of linguistic and cultural traditions imparted by their former colonizers

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7 For the purpose of this study, I will be using Kleinman and Patel’s (2003) definition of security for the World Health Organization (WHO), which is “stability and continuation of livelihood, predictability of relationships, feeling safe and belonging to a group” (p.611).
(Larrain 2000); (2) Latin American countries have undergone many similar political transitions simultaneously or within decades of each other, including wars of independence, industrialization, dictatorship, neo-liberalization and transition to democracy (Periera and Davis 2000); (3) Many Latin American countries share a history of violent legal and de facto discrimination toward the racial and ethnic populations that have been marginalized in their societies since the colonial era (Wade 1997); and (4) Latin America has the highest degree of economic inequality in the world, a gap that has widened in almost every country since 1990 (Buvinic et al. 2000).

Long-term exposure to political violence in Latin America has also been shown to reverberate within the communities of survivors long after the conflict is over, resulting in temporary or enduring alterations in subjectivity. Recent scholarship has focused on the psychological violence rape survivors have endured once stigmatized as “soldiers’ leftovers” in highland Peru (Laplante and Theidon 2007:40); the perceived emasculation of Maya men by soldiers and subsequent increase in domestic violence and control of female domestic partners in Guatemala (Nelson 1999); and the anxiety caused to victims and former armed actors as a result of unsuccessful demobilization and reintegration programs in Guatemala (Green 1999; Sanford 2008) and Colombia (Sanford 2006; Theidon 2006). Hale (2002, 2006) has argued that even those Latin American populations that suffered the fewest casualties during civil conflicts have reported chronic anxiety since the peace accords. Hale has also asserted that in the case of Guatemala, for example, the elite’s fear of reprisal has often been used as a justification for the continued subjugation of the ethnically and socioeconomically marginalized Maya majority.

While men have represented the vast majority of armed actors in Latin America’s civil conflicts, there have been some recent historical and ethnographic inquiries into the experiences of female combatants. Kampwirth (2004), for example, has disproved the theory that female guerillas in Cuba, Nicaragua, El Salvador, and Chiapas were effectively
liberated from gendered inequality through their participation in armed struggle by demonstrating how quickly these female combatants were reassigned traditional gendered positions following the respective uprisings. Huggins’ (2002) research has examined the long-term implications of gender construction for female torturers during and after Brazil’s authoritarian regime. Still, many feminist anthropologists have lamented that the majority of research on women in conflict has been limited to subjectivities constructed out of victimization and powerlessness or the classic perpetrator/victim paradigm (Yuval-Davis 1997 in Moser et al. 2001). These research tendencies have resulted in a void in the ethnographic investigations about Latin American women’s roles in politically violent situations, reinforcing the importance of this dissertation for the new perspectives it provides on how gender, emotion, and health are constructed in conflict environments.

One issue of intense debate in the literature on political violence in Latin America is how it is possible that every Latin American country that signed formal peace accords in the 1980s and 1990s witnessed an immediate increase in homicide and assault rates (Moser and Clark 2001:3). Brinceno-Leon and Zubillaga (2002) have reported that in the 1990s, “violence was the leading cause of death for people fifteen to forty-four years in Guatemala, El Salvador and Colombia” (p.19). What has been clear in anthropological literature about the relationship between the state and citizens in post-conflict countries, but differs in some significant ways in my field research, is that new forms of violence have effectively limited where cultural production can take place. Caldiera and Holston (1999) have labeled the post-authoritarian era in Latin American the age of “uncivil democracies” (p.692), where the extent of an individual’s participation in society is determined by economic access to an “alternative justice” system, such as private security or the ability to contract extrajudicial vengeance (1999:712). In a separate study on Sao Paulo, Caldiera (2000) has observed that the working-class’s access to public space has been strikingly reduced due to their fear of attack as well as the new architectural bound-
aries erected to protect upper class citizens from them, structures which symbolically criminalize entire sectors of the population on the basis of class and urban geography (p.23), much in the same way as Cartagena was sealed off in the days before the Summit of the Americas. These processes have further contributed to the disintegration of social networks across classes, Caldiera says, although this last point is notably absent among the respondents I interviewed in Cartagena.

A number of ethnographic studies in Central America over the past decade have shown that the performance and symbolic representation of violence in Latin America’s post-conflict communities are often highly subjective and culturally specific. Zilberg (2002, 2007) has argued that multi-sited gangs, such as the Mara Salvatrucha in El Salvador and southern California, have provided a “transnational cultural identity” for many Salvadoran youth who, forced to move between El Salvador and the United States over the course of their lives, have never felt fully enculturated in either country (p.39). By contrast, gang members in Rodger’s (2005) ethnographic research in Managua, Nicaragua, defined their neighborhood (rather than their state, region or linguistic community) as the primary site for cultural identification, claiming that the violence they used against outsiders was “primarily motivated by their ‘love’ (querer) for the neighborhood” (p.10). Rodgers has argued that gang participation thus does not constitute a “perverse livelihood” but rather the “perverse contexts” (p.17) of contemporary Nicaragua, where violence (political, economic, racial) is always just below the surface of social interactions, but has varying degrees of social legitimacy depending on the structural position of the perpetrator.

Discourses about violence in Latin American communities have been shown to be just as insightful into post-conflict subjectivities as the performance of violent acts. Moodie (2002) has investigated how urban Salvadorans’ narrative strategies for discussing common crime (violencia comun) ] regularly include “now” and “then” com-
parisons to the political violence of previous decades, revealing how contemporary crime “talk” is simultaneously a method of processing the suppressed narratives about the violence subjects had witnessed in silence during the civil war. The psychological, cultural and political implications of direct testimonies about civil conflicts through public hearings and reconciliation commissions, however, have been an issue of intense debate in anthropological research on women and political violence (Yezer 2007). Some scholars have argued that the opportunities for women to testify about their experience during war have served as “a catalyst for the politicization of women and their conscious decision to participate in political struggles” (Laplante and Theidon 2007:13). In other cases, these hearings have been described as a vehicle for women to denounce the state’s impunity by publicly refusing economic compensation for their murdered or disappeared loved ones, even if the ability to do so is limited to upper-class women, thus magnifying the class divisions within a gendered group of survivors (Arditti 1997, 2002). Nelson (1999) has argued that for the vast majority of her Maya informants, public discourses about race-relations with the dominant Ladino population or offers to give testimonies about their war experiences is metaphorically referred to as a “a finger in the wound,” a horrendous and seemingly unnecessary source of potential pain that could threaten the temporarily stabilized cross-cultural relations in post-conflict Guatemala.

Anthropological interest in women’s coping strategies and responses to political violence in Latin America began in the 1990s with research on female survivors of civil conflicts in Argentina, Peru, Guatemala and El Salvador (Arditti 1997, 2002; Garcia 2005; Laplante and Theidon 2007; Jenkins and Brettell 1996; Jenkins and Valiente 1994; Nelson 1999; Warren 1998). Periera and Davis (2000) have argued that the transition from protectionist to free market economies in the 1980s (popularly referred to as Latin America’s “lost decade”) precipitated uncontrolled inflation, massive migration to urban centers and state destabilization. These factors contributed to disaffected populations’
increased support for leftist guerilla groups throughout the region as well as various forms of public protest (Chasteen 2005; Ekstein 2001; Escobar 1997; Fox and Starn 1997). In each of the aforementioned countries, military and police efforts to purge guerillas escalated into widespread human rights violations (including disappearances, torture and massacres) of both civilians involved in anti-state activities as well as those whose ethnic, regional or professional affiliation came to symbolize (from the perspective of the state) leftist sympathies, resulting in their persecution (Huggins et al. 2002; Nelson 1999; Sanford 2008; Theidon and Laplante 2007; Warren 1998; Yezer 2007). The cultural and psychological trauma that Latin American women endured in these conflicts was analyzed in real time by anthropologists working with refugee populations and in post-conflict ethnographic interviews with survivors who remained in their countries of origin.

The IAC in Colombia is distinct precisely because it has been sustained throughout four decades of regular democratic elections, with no direct connection to dictatorship or military authoritarianism (Aviles 2001). In fact, Colombians have never had the opportunity to process traumatic events in a “post-conflict” era. Only a small percentage of the population alive today was born prior to La Violencia in 1948, the decade-long civil conflict popularly regarded as the true beginning of the IAC (Chasteen 2005; Roldan 2002) and primarily responsible for the “accelerated growth or expanded disintegration” of Colombian urban life over the course of the late twentieth century (Meliguizo et al. 2001:113).
1.8 ANTHROPOLOGICAL RESEARCH ON COLOMBIA AND THE INTERNAL ARMED CONFLICT (IAC)

Over the past two decades, anthropological publications about Colombia and the Internal Armed Conflict (IAC) have been meager in comparison to the ethnographic boom occurring in other Latin American countries. Conducting research during an ongoing conflict has certainly posed one challenge to potential research, but so too have the bureaucratic and funding obstacles associated with Colombia’s seemingly permanent position on the U.S. State Department’s Travel Warning List. It is thus only logical that the few anthropologists who have conducted research in contemporary Colombia have focused on some dimension of the IAC, primarily through ethnographic analyses of victims or armed actors. These studies have been useful for developing my own research questions about coping with insecurity and pro-social resilience in Cartagena because they have focused on virtually all other aspects of the IAC, including: (1) how different regional and ethnic communities have responded to occupation by the military, paramilitary or guerilla groups; (2) the culturally inscribed violence particular to the IAC, including for-profit kidnapping by guerillas or forced inscription by the paramilitary; (3) an overview of how certain groups of IDPs in different areas of Colombia have been assimilated within, violently marginalized by, or collectively resist the culture of urban host communities; and (4) the subjective experiences of armed actors and the traumatic experience of demobilization and isolation that face those who attempt to reintegrate into civil society.

In sharp contrast to twentieth century civil conflicts in Peru, Guatemala and Southern Mexico (Kay 2001), the racial and ethnic composition of the IAC’s armed actors
vary by region. As a result, the indigenous-as-guerilla construction has been virtually absent in Colombia, although Rappaport (1998, 2005) has observed that indigenous populations have become regionally involved in guerilla movements during different periods over the past three decades, particularly when their infrastructural needs were repeatedly ignored by the state. Another aspect unique to Colombia has been the indigenous population’s relatively low commitment to pan-indigenous identity, which Jackson (2004) has attributed to the ethnic communities’ relatively small and scattered populations, their staunch commitment to sociolinguistic diversity, and the positive discrimination they received due to the 1991 Constitutional Referendum (discussed further in Chapters 2 and 6).

While the guerilla groups FARC (Fuerzas Armadas Revolucionarias Colombianas) and ELZ (Ejercito Liberacion Nacional) have both had a national presence in Colombia for over forty years, anthropologists have also recorded the presence of racially exclusive or regionally-specific guerrilla groups since the 1990s. Arocha (1998) has argued that the Benkos Bioho guerrilla group, for example, emerged in Choco as a direct response to the 1991 Constitutional Referendum, which granted indigenous populations exclusive titles to “ancestral lands,” including territories historically shared with Black agriculturalists. In the same department, however, other Black chocabos turned instead to human rights and conservation NGOs for political representation by “recasting their identity in terms of the local ecology” (Escobar, in Fox and Starn et al. 1997). These starkly different responses, both of which were framed within the IAC’s language of armed revolution and human rights, demonstrate how alliances and strategies are often formed to address specific local problems and, consequently, the importance of expanding models for understanding the IAC beyond nationalist, Marxist, and ethnic ideologies alone.

The IAC has also contributed to the reshaping of racial, regional, and gender

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8 Armed Revolutionary Colombian Forces
9 National Liberation Army
identities throughout Colombian cities. Rural insecurity accompanied by expanding tourism along the Atlantic coast, for example, has driven a number of women into the sex work industry in Cartagena since the 1990s (Cunin 2003). Ethnographic interviews with the Colombian women and men engaged in or indirectly affected by this trend (as parents, partners or neighbors of sex workers) have added new perspectives on globalization, racial hegemony, female agency, and sexuality in Caribbean countries (Gregory 2007; Kempadoo 2004). Recently, ethnographers have also focused on sharpening the connections between race and regionalism in Colombia at both the national level and the micro-urban level (recording, for example, discrepancies in how racial identification takes place in different neighborhoods, comprised of different regional enclave communities who now live in the same city) and how these structures have been challenged and dismantled as a result of displacement, economic migration and increased exposure to international media, among the other effects of globalization (Streiker 1995; Wade 1997, 2009, 2010).

This dissertation further contributes to the analysis of how the IAC and neoliberalism have dramatically increased the points of contact between different groups of Colombian citizens, the state, and the international community, by interrogating the tensions and alliances built between native Cartageneros, recent rural arrivals to the coast, paisas, cachachos, and foreigners. Cohen (2006), Castro Caycedo (1998), and Colmenares (1996) have argued, for example, that it was international pressure from human rights NGOs, rather than concerned members of the local elite, which compelled the Colombian state to recognize IDPs formally (through the passage of Law 387 in 1997) as a bi-product of the IAC rather than continuing to label them as economic migrants looking for international representation. Bustelo (2002) and Molano (2005) have argued, however, that the IDP symbolizes something much greater than a mere category of political identification, claiming that these individuals are representative of
the Colombian state’s “unfinished historical process [of] cultural and racial pacification” (2002:72). Examining the conflict as a set of clandestine economic initiatives, Meliguizo et al. (2001) have investigated the extent to which the elite and middle classes have economically benefitted from the perpetuation of the IAC, clear in the power of the recently emerging “laundered money” class in Cartagena. Aviles (2001) has argued that despite expressing apathy or fatalism in response to questions about the IAC, his elite respondents overwhelmingly valorized security over democracy or human rights when discussing the conflict, many of whom even suggested that martial law or other authoritarian measures would be an acceptable strategy so long as these policies would not compromise economic growth.

It is clear from the available research that Colombian IDPs are not simply displaced residents from various areas of the country. They also represent a political-ethnic population that has destabilized tropes about citizenship, culture, and violence, indirectly influencing the moral and emotional subjectivity of those Cartageneros who never even witnessed direct conflict related to the IAC simply by their overwhelming presence in the city. Hunt (2006) has argued that the 3.1 million IDPs scattered across Colombia’s five major cities have posed a direct challenge to the state’s portrayal of Colombian culture as elite, urban, and white, and have mocked the state’s inability to effectively assimilate rural citizens who have since formed large regional enclave communities in their urban host communities, such as the neighborhood Nelson Mandela in Cartagena and the community Simon Bolivar in Bogota (a theme also echoed in Goldstein’s 2005 ethnography about urban Bolivia).

Sanford (2004) has taken a different perspective on the interaction between IDPs and the state, arguing that the “weak state” image is a mask officials use to hide their strategies for “consolidating power in the margins through the use of violence- often in areas it says are not under state control” (in Das and Poole (eds), p.256). Meliguizo et al.
(2001) have added that in the face of Colombia’s massive rates of internally displaced persons (second only to Sudan), the state has mastered camouflaging the evidence of the IAC while doing little to solve the root causes or addressing the principal actors, precisely because both are integral to the long-term political and economic projects of the elite.

The longevity of the conflict and its complex local manifestations has deeply impacted how different Colombian citizens subjectively understand their local worlds. Moser and Clark (2001) have observed that not only are there multiple forms of violence in Colombia, but it has become “routinized” (p.4), requiring the researcher to distinguish between which Colombians have adapted to the trauma of violence and which are living in a chronic state of fear. Martin (2000) has attributed Colombians’ collective tendency to adapt rather than resist violence as part of a long-standing “tradition of violence” (p.170) in the country, apparent in the rural respondents’ vague yet morally incriminating justifications of why certain plantation workers were assassinated during Colombia’s Banana Wars (1985-1987). Framing victims as morally culpable by dismissing them as faltones (someone who hadn’t kept his word) or desechables (throw-aways) (p.171) is a systematic cultural response, Martin concludes, of “society as pure survival, where violence is no longer something that might or should be controlled” (p.181). Sanchez (in Berquist et al. 2001) has shown that chronic politic violence and the collective trauma Colombian families have reported in the aftermath of a kidnapping\(^{10}\) can permanently alter social relations between different family members, many of whom have reported chronic paranoia, guilt, and anxiety even long after the victim is returned to the family unharmed.

Taussig’s (2005) Law in a Lawless Land: Diary of a Limpieza in Colombia is the first ever (and only) full-length ethnography dedicated to the topic of social cleansings in Colombia, even though the particular cleansing Taussig witnessed, as he records it,

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\(^{10}\) In the year 2000, when Sanchez conducted her research, Colombia had the highest number of total reported kidnappings in the world (more than 3,700).
appears to have been a paramilitary purge of potential guerilla sympathizers outside of Cali, Cauca. Taussig’s two weeks of fieldwork in a rural conflict zone has contributed to the ongoing corpus of evidence he has used to support his “culture of terror” (p.26) paradigm, the belief that chronic political violence and rapid globalization in Colombia has produced a population that is chronically anxious, secretive, and distrustful- a society that I never encountered while conducting fieldwork. One of the major challenges to Taussig’s limited definition of social cleansings and the associated culture of terror he has attributed to them, however, has emerged out of his own admission that the types of violence and related political objectives connected to cleansings vary throughout the country. As Taussig explains:

Headlines in Sunday’s El Espectador on how the paras are imposing their morality in towns on the Atlantic coast; no earrings for men, no gay beauty contest, no miniskirts for women, paramilitary prohibitions of longhair for men, of wearing baseball caps backwards, as well as a curfew backed up my systematic assassination of delincuentes (delinquents). Figure out how these things hang together and you have the solution to the whole puzzle (p.9).

What Taussig mentions above, but cannot seem to puzzle together, is precisely what Cartagena’s residents understand to be a cleansing or limpieza (Novak 2010). Whereas Taussig witnessed a paramilitary operation executed by unmasked (but unknown) armed men who wandered through the village day and night over a set period of days, cleansings along the Atlantic Coast have typically been framed around eliminating the immoral, the dangerous, and the drug users (viciosos)11, either through a season (tiempo) of cleansing or through regular, targeted, killings. Chapter 2 in this dissertation addresses some of the apparent contradictions in terminology used by different Colombian populations through an examination of how women relate cleansings to well-being12.

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11 Vicioso (literally, a person who “has vices”) typically refers to drug users (cocaine or marijuana), but it can also refer to young men who abuse inhalants, alcohol or generally spend too much time en la calle (out in the street).

12 Subjective Well-Being (SWB) is a measurement of a person’s overall satisfaction with life according to how
(SWB) is a measurement of a person’s overall satisfaction with life according to how he/she evaluates feelings about interpersonal relationships, careers, communities, etc. in a standardized survey, which may be self-administered or executed by a clinician or researcher. It has been argued that country by country measurement of SWB offers a slightly different (and arguably more comprehensive) view of the quality of life than merely relying on GDP, birth, death and literacy statistics alone (Diener 2009a, 2009b). The specifics of SWB surveys will be further developed in the Research Procedure and Methods section of this proposal.

Theidon (2006, 2009a, 2009b) and Sanford (2003, 2004, 2006) have differed from other ethnographers working on the IAC in the sense that they have focused on how political and cultural boundaries can shift so often and so dramatically that even those Colombians who have not been forced to change their residence are politically and subjectively “moved” by the changing alliances around them, something my research
also reveals among Cartageneros’ coping strategies. Sanford’s work has addressed the micro-politics and cultural hegemony of the IAC, arguing that both IDPs and paramilitary members live at “the margins of the state” in urban resettlement areas (2004, 2006) that are regularly altered by explicit and implicit acts of political violence only perceptible to the local community (again, seen in Chapter 2). Theidon (2009a) has focused extensively on the subjectivities of demobilized paramilitary members, highlighting that one of the primary obstacles for the reintegration of paramilitary members in society include their individual struggles to “reconstruct” a sense of masculinity that is no longer forged in militarism and violence (p.7). Both ethnographers have provided new insights on the subjectivities of armed actors and IDPs in different regions of Colombia, stressing the important contrasts between coastal, interior lowland, and Andean cities. In this sense, these ethnographies have provided me with valuable insight for contextualizing coastal experiences that incorporate populations from all three regions of Colombia, in addition to models for politically and culturally sensitive interviewing methods.

1.9 OBJECTIVES AND RESEARCH PLAN

This dissertation examines how chronic exposure insecurity affects women in Cartagena and the implications of these effects on local cultural practices surrounding subjective well-being and pro-social coping. At forty-six years and counting, the IAC has endured longer than any other war or military occupation in post-independence Latin America and Colombia currently ranks second in the world for total number of internally displaced persons (IDPs), sixth for homicides per capita, and ninth for total number of kidnappings per year. Despite these statistics, Colombians have consistently scored higher on subjective well-being (SWB) surveys than most other countries in the world (Willis-Herrera et al. 2009, 2010; Kahneman et al. 1999). Willis-Herrera et al. (2009)
have argued that urban Colombians’ inordinately high SWB in light of insecurity factors “leads a researcher to think that there are either methodological problems in measurement, or other contextual or cultural variables that had not been considered in previous research, which may explain those high levels of happiness or SWB” (p.215).

The ethnographic chapters in this dissertation explore the “contextual or cultural variables” that influence the discursive and somatic constructions of well-being related to insecurity that might otherwise test the positive dispositions of urban Colombian women. According to participants’ responses to semi-structured interview questions about how they maintained a sense of well-being in light of insecurity, the most prominent potential contextual and cultural variables identified by respondents included the following:

- The importance of “Being known” (Ser Conocido/a)
- “Showing character” or “Having character”
- Possessing a self that stays positive “in spite of everything” (a pesar de todo)
- “Striving” for oneself and/or one’s children (Seguir adelante)
- “Passing emotions onto others”
- “Leaving the past in the past” or “Living in the present” (Dejar el pasado en el pasado / vivir en el presente).
- Knowing when to seek advice / Knowing when to wait / Knowing when to act
- The importance of “mamar gallo” (goofing around with friends) and the importance of being “pechichona” (endearing or sweet to others)
- Avoidance of being seen as closed off (cerrada), embittered (amargada), heavy-spirited (pesada), or guache
- “Negative emotions lead to social isolation”
- “Negative emotions and social isolation lead to illness”
- “Illness leads to an inability to care for one’s family”
- “Illness leads to death”
- “People who are ill often did not maintain a sense of well-being despite insecurity”
My research also ethnographically addresses what Willis-Herrera et al. (2009, 2010) have claimed are the curious anomalies in survey-based psychological studies on Colombians’ SWB by encouraging witnesses to elaborate on their subjective interpretations of violence and well-being in a series of semi-structured interviews with each participant.

The tentative suggestion by Willis-Herrera et al. (2009) that such high reports of SWB among Colombians may have something to do with “methodological problems” (p.218) is consistent with discourse theorists’ caution against universalizing emotional experience. Instead, these researchers have advocated the investigation of how emotion vocabulary is defined, patterned, and attributed to power structures within specific cultural contexts (Abu-Lughod 1985, 1990; Meyers 1979). While the cultural validity of psychiatric tools of assessment poses a challenge to the clinician or psychological anthropologist in a foreign environment, Kleinman (1988) has argued that the appropriate use of a particular analytical tool or emotional category can be established if the researcher: (1) recognizes that psychology is embedded with certain Euro-centric assumptions (although it is also present throughout urban Colombia since the early twentieth century); (2) is willing to make categories of psychological or emotional analysis amenable to the given cultural context; and (3) incorporates quantitative analysis with person-centered interviews focusing on local constructions of the self. Kleinman and Good (1985) have further emphasized that it is important for anthropologists to evaluate the definitional overlaps and incongruities in how particular emotions are objectively defined in the local discourse (for example, “What is well-being?”) as well as the particular embodied/somatic experiences of emotions. While this dissertation draws on a wide range of theorists from psychological anthropology, socio-cultural anthropology, political anthropology, and social psychology, I build the theoretical framework for the overall dissertation on six theoretical premises: My research challenges Taussig’s (2005) “Culture of Terror
Paradigm,” which depicts Colombians as a chronically anxious and distrustful population resulting from decades of exposure to political violence without recourse. I apply Das and Poole’s (2004) theoretical contribution of ethnographically examining “the margins of the state” or territories and populations that may initially appear outside of state influence or ungovernable, but where those with political influence often consolidate power. In examining how Colombians individually cope with chronic insecurity, as well as the mental and physical repercussions of failing to maintain a character of well-being “in spite of everything” (a pesar de todo), I revisit and re-conceptualize Jenkins’ (1991) theory of a “state construction of affect” as it applies along the neighborhood and regional-ethnic borders of different Colombian emotional selves, as well as Kleinman and Good (1985) Kleinman and Ware’s (2009) theory of “local moral worlds.” Lastly, my research provides, if not absolute responses, at least some new areas of research for responding to Diener’s (2009a) “Colombia-Japan Paradox” or why Colombians are unique in reporting such high subjective well-being despite their recognition of high insecurity, which were almost direct corollaries in the other countries profiled and Willis-Herrera et al.’s probe into what the “cultural and contextual variables” affecting these responses may be.

1.10 METHODS AND PROCEDURES

How have decades of exposure to armed conflict influenced the subjectivities and cultural practices of female witnesses in Colombia? My research addresses this question through extensive participant observation, conducting person-centered interviews about women’s interpersonal relationships and the community, and through the incorporation of traditional SWB questions in semi-structured and open-ended interviews with thirty-eight participants in the neighborhood Las Colinas, twenty-five participants in the neighborhood Olaya, and twenty participants in the neighborhood Nelson Mandela, as well as
forty interviews with clinical patients in two of Cartagena’s psychiatric hospitals. In preparation for my dissertation fieldwork, I spent a total of six months at my field site in Cartagena in the summers of 2008 and 2009, which culminated in a seminar paper titled “Barrios Sanos, Lugares Complicados” (Healthy Neighborhoods, Complicated Places): Women’s Experiences of Social Cleansing in Cartagena, Colombia” (Novak 2010). This earlier paper formed the central ethnographic component of Chapter 2. Unlike many of my peers, I did not conduct my fieldwork in Cartagena over a consecutive period of twelve to eighteen months, rather I made a total of nine trips between one month and six months over a period of eight years, continually building larger social networks that began with Colombians I met during my MA fieldwork in Latin American Studies from 2006 to 2008. The dates and length of my trips to Colombia are listed below, along with the corresponding phase of my research.

- August-September 2007 (MA research on IDP populations, Bogota)
- June-September 2008 (Pilot research for Anthropology MA, Cartagena)
- June-September 2009 (MA field research in Las Colinas, Cartagena)
- January-June 2010 (PhD fieldwork in Cartagena, including the neighborhoods Olaya and Nelson Mandela)
- December 2011-June 2012 (re-visiting participants in Las Colinas, Olaya, and Nelson Mandela on SWB and insecurity, plus two days a week over sixteen weeks at two of Cartagena’s psychiatric hospitals)
- December 2012-January 2013 (follow-up with participants in Cartagena)
- July-August 2013 (follow-up with participants in Cartagena and Medellín)
- September 2014 (follow-up with participants in Cartagena)

Although much can be said for the quality of research that comes from remaining in one place for an extended period of time, with respect to the kind of research I conducted and the population I was working with, multiple visits over the years allowed me to evaluate changes in the community and individuals’ responses, as well as build trust and familiarity that led to more detailed responses and reflections as I became increasingly “known” to the women who were participating in my interviews.
Participant observation, or what Geertz (2000) has called “deep hanging out,” (p.107) is the foundation of good ethnographic research and a methodology that I utilized throughout my dissertation fieldwork. At the most basic level, person-centered interviewing consists of incorporating particular theoretical models and discourse techniques present in psychoanalytic or “talk” therapy (Freud 1947) into an open-ended (Levy 1975, 84) or semi-structured (Sullivan 1970) ethnographic interview. This style of interview has been shown to be particularly useful to psychological anthropologists. It has been determined, for example, that when subjects reflect on the emotions associated with certain life experiences or relationships with other members of their society, they also tend to reveal how the unconscious and moral conscience are framed within their particular cultural context (Hollan and Levy 1998). Levy (1975, 1984) has been widely recognized as the creator of the person-centered interview method, mastering a “psychodynamic” style of ethnographic inquiry with his Tahitian subjects. This style of interviewing may include frequent pauses and interjections during a subject’s narrative, pausing to ask how a subject had “felt” at a specific moment in the unfolding saga or, alternatively, asking a subject to narrate a particular life event that best illustrates a particular emotion (1975:xxii) and much of this style is evident in the selected transcripts incorporated in each chapter. According to Hollan (2005), this interviewing method allows the anthropologist to establish patterns of affect around different life experiences and begin building psychodynamic models for different cultures, which is a technique that was particularly successful in Levy’s (1984) work on the cultural constructions of hyper- and hypo-cognized emotions.

Person-centered interviewing techniques have also drawn heavily from interpersonal psychology (following Stack Sullivan 1970), a technique that attempts to isolate the cause of psychoneuroses by asking patients about their relationships with others. Sullivan has emphasized that such interviews are intersubjective events, which require
the clinician’s awareness of how his cadence, tone and body language can influence the subject. Unlike Levy, Sullivan (and Hollan, to a lesser extent) has stressed the importance of guiding an interviewee through a list of pre-set topics of inquiry (known as a semi-structured interview) so that each successive interview shows some degree of continuity with the previous one.

Briggs (1986) has argued that regardless of the clinical or ethnographic context of person-centered interviewing, the method is only possible if the interviewer is deeply familiar with “the metacommunicative structures” (p.3) that encode a subject’s sociolinguistic responses. Briggs has charged the traditional social science interview (which examines content without consideration of form) as an impediment to good ethnographic research because it relies on a style of dialectic exchange that is typically unnatural for both the interviewer and subject alike. In essence, the interview style must adapt to the respondents, requiring that the anthropologists learn the “communicative roots” of the interview in the cultural context, move beyond the communicative barriers (both social and linguistic) and constantly amend ethnographic procedures following careful scrutiny of the transcripts (p.5). Contemporary research on medical narratives and the intersubjective experiences associated with doctor-patient dialogue have also revealed the versatility of person-centered interviewing in a wide range of settings beyond the psychoanalyst’s office.

SWB surveys have generally focused on four basic categories: (1) how a subject defines pleasure or distress; (2) how individuals remember the utility of certain experiences; (3) a subject’s general level of satisfaction with their lives up to the present point; and (4) the extent of a subject’s coping mechanisms and his or her general sense of being integrated in the local community. According to Kahneman et al. (1999), these four subsets of assessments combine to form an individual’s overall sense of happiness or SWB (p.4). Despite the prevalent use of SWB surveys throughout the world, SWB
theorists have been criticized by certain psychological researchers who have argued that SWB scores are dramatically affected by an individual’s mood at the given moment the study is conducted. When I incorporated the five separate SWB questions into my semi-structured interviews, I purposefully asked participants for more elaborate justification of their answers (“You say that your domestic relationship is going well right now. Is it remarkably better than it was six months ago? Is there something in particular that has changed in your relationship recently?”). Campbell (1981) has posited that regardless of mood or other momentary biological experiences (physical pain, hunger, etc.), individuals are capable of remembering and self-reporting what their general emotional dispositions have been over a long timescale.

Even though the study of SWB has been dominated by social psychologists, Diener (2009a) has challenged anthropologists to consider how happiness and culture interrelate, stating in a recent publication: “One would think the well-being of people around the world would have been assessed by anthropologists. However, the direct study of well-being among anthropologists has been rare” (p.1). It is, in fact, quite surprising that so few anthropologists have conducted ethnographies that could corroborate or challenge the results of cross-cultural SWB surveys, especially because the kinds of results that SWB theorists have the most difficult time explaining (such as the “Japan-Colombia paradox” (p.58), where perceptions of security and relative SWB do not correlate as they do in most other studies) would be best explained through ethnographic evaluations of the individuals’ culturally constituted behavioral environments (Hallowell 1955). While SWB questionnaires have previously been conducted in Colombia in social psychology studies (Willis-Herrera et al. 2009, 2010), the cultural validity of this assessment tool (Kleinman 1988) has not been adequately explored in the Colombian context. A major part of this dissertation focuses on illuminating the possible “cultural and contextual factors” that influence positive emotions in Colombia, but also directly
the social relationships that allow women to maintain a sense of well-being and adapt
to the myriad forms of insecurity that affect their lives at the psychological, physical,
romantic, interpersonal, neighborhood, and national level in a Colombian city less safe
in the post-conflict period than ever before, more internationally recognized than ever
before, and increasingly behind the rest of the country with respect to modernization.
Chapter 2

NEIGHBORHOOD AND NATION:
DIVERSE DEFINITIONS OF
WELL-BEING AND INSECURITY IN
LAS COLINAS, OLAYA, AND
NELSON MANDELA

2.1 INTRODUCTION

The experience of violence and its ability to fragment collective and personal identity is a fundamentally important question for both mental health professionals and psychological anthropologists. Over the past twenty-five years, scholarship has expanded on how individuals embody and articulate their responses to psychological, structural and political violence (Good and Good 1988; Jenkins 1994; Jenkins 1996; Jenkins and Valiente 1994; Kleinman 1992; Lengermann and Niebrugge 1995; Patel and Kleinman
2003). Such publications offer new definitions of violence cross-culturally by addressing both its concrete and symbolic manifestations, inviting new interpretations about how violence affects individual representation and interaction within local communities. These case studies also furnish further ethnographic detail into the implications of what Jenkins (1991, 1996) labels “the state construction of affect,” described as “a political ethos, the personal emotions of those who dwell in that ethos, and the mental health consequences for those who dwell in that ethos” (1996: 281). This chapter focuses on the state construction of affect in Cartagena, Colombia and, more broadly, the collective coping mechanisms that result in women’s pro-social resilience in the face of chronic violence and insecurity. I examine how women in three distinct, but interrelated neighborhoods define and cope with violence and insecurity, as well as how they compare their immediate street, sector, or neighborhood with other parts of the city in defining themselves culturally, morally, and politically. Interviewees’ transcripts reveal the nuanced and at times contradictory state construction of affect present in Cartagena, Colombia, through narratives about insecurity, violence, and crime that reflect individual participants’ life histories and their particular neighborhood’s position within or at the margins of the city, within or at the margins of the state. The ethnographic data in this chapter is drawn from interviews conducted in Olaya, the city’s largest urban neighborhood with the highest homicide rate; in Nelson Mandela, the city’s largest squatter settlement, populated by residents displaced by the internal armed conflict; and in Las Colinas, a neighborhood geographically and culturally between: a semi-urban, semi-rural community of economic migrants sandwiched between the squatters of Nelson Mandela and a gated condominium complex populated by many recent migrants from the interior, those who have already economically surpassed Las Colinas residents, many known to be among the “laundered money” class.

In comparing women’s impressions of insecurity from these three neighborhoods,
I aim to show how the ways in which violence and insecurity are conceptualized, experienced, and contested in a given neighborhood says as much about the cultural specifics of maintaining well-being as it does about how certain neighborhoods are identified in relation to the city, to the state, or to the internal armed conflict (and, by extension, international intervention in this conflict). Even with a small sample of eighty-three participants, my data complicates Taussig’s culture of terror paradigm, which, I argue, sensationalizes and reduces individuals’ lived experience of violence in Colombia to a chronic state of fear, anxiety, and silence - affective responses that are not entirely absent in my field site, but certainly not the dominant forms of emotive expression in everyday life. In illuminating, even in a small way, some examples of what Moser and Clarke have called “a lack of attention to the gendered costs and consequences of violence in Latin America” (2001) this chapter shows the diversity of coping mechanisms, attitudes, and alliances that emerge from women’s exposure to chronic insecurity in Cartagena as they relate to the protection of the “self” as well the protective social barrier formed by the neighbors around them and maintained through participants’ continued social engagement with other women in their communities.

2.2 THE POLITICS OF PLACE AND VIOLENCE IN CARTAGENA

What I knew at the outset of my data collection was that the generally positive dispositions of female residents in Las Colinas, Olaya, and Nelson Mandela easily challenged Taussig’s “culture of terror” tenets, which would require residents to socialize in the direct vicinity of their homes, to speak in fearful tones about the violence, and to live in a social environment where “normality crumbles, all over again” every time another person in the area is killed or disappeared (Taussig 2005: 26). Below, I give three
prototypical examples from my field notes of this resistance to the culture of terror theory in response to the specific forms of insecurity found in each neighborhood:

- In Olaya, immediately after witnessing the attempted stabbing of a police officer in front of the clinic by a crack user, the assailant was thrown sideways over the police motorcycle and hauled away, head down, leaving the neighborhood in the opposite direction of the police station. Female bystanders, who moments before had grabbed their children and stepped toward their front doors, just as quickly pulled their plastic porch chairs back out on the alley, reenacting the scene while laughing (March 3, 2011).

- In Mandela, during a stick and knife brawl between multiple men in front of the billiards hall and a paisa market, a camouflaged military vehicle and four armed, uniformed men drove full speed onto the dusty commercial part of the avenue from an adjacent field. My interviewee threw a garage door over the glass front of her internet cafe and then handed me a small beer as we watched them “restore order” (as she called it) from her porch, claiming, “Cheers to your adventures in Mandela- you must love them!” It was the first of four times I saw these same uniformed men appear out of nowhere in the course of a month (May 27, 2012).

- And in Las Colinas, the morning after a social cleansing (limpieza) left two boys dead at a billiards hall a block from my apartment in 2009, women could be seen leading their sleepy sons down the street for soccer practice in the stadium right next to the crime scene. “When it’s over, it’s over,” one resident told me simply when I acted surprised that the neighborhood’s rhythm resumed so quickly. The suspects had not yet been caught (and it was apparent no one was looking for them, either) (July 20, 2009).

Were these observations evidence of apathy or resilience? Fatalism or denial? Specific modes of trauma? In the course of twenty-four months of fieldwork, spanning six trips over four years, there is no doubt that violence and insecurity in Cartagena escalated substantially, yet coastal culture and public socialization appeared to continue, unabated, or even intensify among the women I interviewed.

As urban infrastructure in Cartagena expanded from 2005 to 2012, investments from wealthy Colombians from Medellin and Bogota increased, and foreign tourism
climbed. In spite of, or perhaps because of these changes, security immediately outside the immediate perimeter of downtown Cartagena became less predictable. By 2011, even participants in Las Colinas would admit that the city was more dangerous or “hotter” (mas caliente) than ever before. Yet when women in Olaya and Nelson Mandela discussed insecurity and violence, their narratives focused on naming conditions and listing the individuals and strategies they had or would employ to address insecurity. In Las Colinas, by contrast, women continued to cling to moral arguments justifying who was the target of violence or “problems.”

One reason for this distinction, I argue, may be as simple as resource allocation. In Olaya and Mandela, women regularly appealed to different sources of support that were simply lacking or absent in Las Colinas (public health services, civil servants, and media organizations in Olaya; churches, NGOs, and extrajudicial armed groups in Mandela). In some ways, the ubiquity of specific resources in Olaya and Mandela and the lack there of in Las Colinas paints a picture of three neighborhoods with very different connections to the state. One neighborhood sees itself as rightful heirs to the city even as it is crushed by new urban problems like drug abuse and gangs (Olaya). One neighborhood sees itself as a living legacy of the internal armed conflict, yet also receives recognition as a population of internally displaced persons (IDPs) from NGOs and churches, even as it continues to deal with the parallel system of justice that governs the countryside (Nelson Mandela). The third neighborhood is, at times, an uncomfortable hybrid of both (Las Colinas).

In clinging to the identity of being a peaceful town (pueblo) of ambitious economic migrants in the city of Cartagena, many Las Colinas residents faced the insecurity of increasing rent and utilities fees between 2008 and 2012 without the improved urban transportation or city services of Olaya or the tuition fee waivers, free school uniforms, or foreign big brother / big sister sponsorship in Mandela. The luxury complex along Las
Colinas main avenue, completed in 2011, was now home to many of the noveaux riche from Medellin and other economic migrants from the interior state (departamento) of Antioquia: hotel owners, shopkeepers, money lenders, money launders, sometimes all in the same family. Around this resort style complex, Portales de Las Colinas, a physical wall was built between the recently arrived, upwardly mobile small business owners and the community of Las Colinas, even as Las Colinas residents themselves continued to build a moral wall between their neighborhood and the residents of Mandela, just a few blocks behind them.

While sitting in her semi-finished, two-story home with attached apartment and seamstress shop, one IDP mother in Nelson Mandela responded this way when asked why some people in her neighborhood continue to be stigmatized by other Cartageneros. “My daughter attends the Catholic school in Las Colinas and sometimes the children tease her for living in Nelson Mandela. When this happens, I tell her to ask them, ‘Do your parents rent or own their home?’ And then the teasing stops.” Land titles in Mandela, city pride in Olaya, and moral exceptionalism in Las Colinas. An economy of security, morality, and well-being circulated throughout each neighborhood, yet the state construction of affect was undeniably specific to the place and the population.

### 2.3 ECONOMIC AND HISTORICAL ORIENTATION OF NEIGHBORHOODS IN CARTAGENA

Throughout Colombia, neighborhoods are bureaucratically stratified, meaning that city officials assign neighborhoods or sections of neighborhoods a numeric level (estrato) one through six on a rubric that reflects the relative standard of living and property value in the area. This number corresponds to the price per unit that residents pay for electricity, gas, and water. In Las Colinas, the front part of the neighborhood
is “level two” and the back part of the neighborhood, which borders Nelson Mandela, is “level one.” All of Nelson Mandela has been demarcated “level one” or “without level” (sin estrato), the latter identity meaning that section of the neighborhood is not yet connected to electricity and/or water. In Nelson Mandela, all of the roads are unpaved, more than a quarter of the houses are made out of recycled materials (tin plates, fiber board, paper), and sewage often ran through the streets when it rained.

The neighborhood of Olaya, north of Las Colinas and closer to downtown, was almost exclusively “level one,” with some sectors closer to Cartagena’s main avenue categorized as “level two.” Cartagena’s “level four” and “level five” neighborhoods encircle and include the central historic neighborhoods of Centro, Getsemani, Manga, and Crespo while “level six” has been assigned to gated condo communities in Cartagena with 24-hour security and housing values exceeding 500,000 USD, mostly in Bocagrande, all within a kilometer of the coast. As late as 2008, however, I was surprised to learn that two particular sections of Bocagrande enjoyed a “level 2” designation and subsidized utilities prices because residents had, as I was told, “personal connections” (palancas) with the electricity conglomerate, Electro Caribe and city officials, even though these blocks had some of the most costly condos along the bay.

Although Las Colinas has been designated a “2” in the front and “1” in the back, the salary range, income security, level of education and objective quality of the homes within the neighborhood vary widely. Even though the original inhabitants had squatted on what was then farmland in the 1940s and 1950s, by the 1990s all lots were titled and within the past eight years the last lots were sold. Many people who rented out their homes in Las Colinas no longer even lived in the community; they had moved to more central and established neighborhoods closer to Centro, Cartagena, but continued to rent to later waves of economic migrants, some from their families’ original pueblos. The most common structure was a one-story, single family home or duplex built out of
cinderblocks with a wood beam enforced tin roof. As the floor plans and size of the dwellings are often the same in Las Colinas, Olaya, and Nelson Mandela, I determined my interviewees’ relative level of economic comfort according to five variables: the type of floor (dirt, cement or tile); the number of people sleeping per bedroom; the quality of the bathroom (if there was a sink and shower or just a spigot); the common use furniture (plastic chairs or wooden rockers); and the presence or absence of the ultimate prestige item: un juego de muebles (an upholstered furniture set) that people almost never used, but was pushed against the wall, taking up half the living area yet highly visible to visitors at the front door. I considered sophisticated electronics like computers, flat screen televisions or pico (waist-high PA stereo speakers) as faulty indicators of an interviewee’s standard of living because these items consistently turned up in households that otherwise had no material comforts whatsoever.

Cartagena is the only major Colombian city that is not organized on a grid system with numbered avenues and streets. As a result, Cartagena residents (or Cartageneros) conceptualize space and orient themselves according to landmarks rather than street names or cardinal directions. When I travelled back to my first apartment in Las Colinas in 2009, I would inform the taxi driver that I lived “in Las Colinas, two blocks from the Red Cross and before the elementary school.” I informed potential interviewees that I lived “two blocks from the main avenue, in front of the new Paisa market.” Many of the adjacent streets were not referred to by their official names, but by the street’s particular history: La Calle del Perro (the Street of the Dog) referred to a previous neighborhood character known only as “El Perro” who had built a reputation in the neighborhood long before most of the current residents lived there. By contrast, La Calle de los Palenqueros (Palenqueros’ Street) replaced the street’s official name in local parlance after a large

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1Palenqueros are descendants of or residents of the town of Palenque de San Basillo, located about 1.5 hours from Cartagena, where runaway slaves formed a maroon community in the sixteenth century and a distinct culture and language (Palenquero) developed. Today, traditional Palenquero dress has been adopted by many Black Colombians (particularly women) either out of a sense of ethnic identification or as a costume.
population of Colombians from the village of Palenque began renting there.

2.4 OLAYA AND NELSON MANDELA: URBAN AND RURAL INSECURITY, URBAN AND RURAL STRATEGIES

Where chronic insecurity in Las Colinas\(^2\) was often vehemently denied and the local violence cloaked in the darkness of night and packaged in a discourse of moral protection from outsiders, the same could not be said for Olaya and Nelson Mandela. The evidence of insecurity and potential for violence in both neighborhoods was palpable from the moment that someone stepped off the bus, or even before disembarking. Below, I give two examples:

On a bus ride to Olaya in 2011, as we passed through the bottleneck of the main market, a competing Olaya bus driver attempted to cut us off, our bus driver swerved several times within inches of the other bus and then slammed the other review mirror with his fist, shouting “I have something under the dash for you, a couple of slashes to your ugly face when you return home tonight if you don’t let me through.” I soon learned that offering “puñaladas” (stabs) in Olaya was common, and rarely considered an empty threat. There were only five of us on the bus (owing to the fact that we had been trailing the first bus on the same route), yet I sat frozen in the third row as the interaction intensified. The moment we lurched to a stop, three people in the rear of the bus exited the back door and a man who had entered the bus moments before to sell water and juice when selling food or crafts to tourists. Palenquero is now used for Black Colombians along the coast, regardless of origin.

\(^2\)The name of the specific neighborhood sectors have been changed to protect the anonymity of the residents, but all other reference points within the city Cartagena remain unaltered. All individuals represented in this document were assigned pseudonyms at the time they were recruited. All Human Subjects Protocols were followed in accordance with the University of California, San Diego Internal Review Board.
quickly touched my arm and the woman next to me, covering us as we hurried out.

A year earlier on a bus to Mandela, the bus was stopped at a traffic light when a man got off his motorcycle parked at the light and boarded our bus, demanding the driver give him all he had in his drawer for a debt the driver owed. This time, I was in the back of the bus, and as I exited with some other passengers a man joked to us, “How do bus drivers think they will escape their debts when everyone knows their route?” Everyone in our newly formed party laughed. The simple joke under such tense circumstances was both a typical pro-social coping response in Cartagena and a public demonstration of “having character” (tener caracter) or acting unafraid in the face of insecurity, described below and further in Chapter 3 and reminiscent of Goldstein’s (2003) ethnographic work on impoverished Brazilian women’s political use of humor. Everyone in our ejected group continued to comment on the stupidity of the bus driver as two male passengers led the older women by the arm to navigate through the two lanes of traffic still stopped at the light. Together, we were laughing at the expense of our bus driver, who presumably was still under threat. Despite the potential danger we had just encountered, we were united in a micro community of stranded passengers trying to get to Nelson Mandela, waiting for the next bus where we would all be forced to pay full fare again, relaying stories to one another like new neighbors on the side of the road.

It was first in Olaya where female participants taught me about the importance of showing character (mostrar caracter), which loosely translates to paying attention to one’s surroundings, recognizing the type of insecurity present, and being willing to use one’s wits or show aggression (but only when necessary). In early 2011, three young men from a gang that operated in the sector of Olaya where I had been researching stopped me on my second round of interviews in the huecos (holes or alleyways) in front of the main clinic. Nervous and scratching, the three young men blocked my path while women watched from the porches behind them. “What are you doing here?” They asked. I
paused. “Waiting to see if you wish me a happy International Women’s Day and then going to gossip with your mothers. Did you wish them a Happy International Women’s Day yet?” I responded, smiling. A moment passed. They laughed. “Cabrona!” (female bastard, affectionate) one said. Over the next year of coming and going in the alleys, none of the young men gave me any trouble, sometimes they would just shout “Happy International Women’s Day!” as I passed by to tease me. When I told other women about the confrontation, they would say something like, “It’s good that you showed character. This is the insecurity of this area, but you are not in their business and they now know it so you are okay.”

In the last month of my fieldwork in 2012, both my confidence and familiarity with Olaya and my sense of “character” were abruptly refocused by a girl friend from Medellin, Veronica, whose advice I had sought after being attacked in Olaya. On a bus trip back from one of the psychiatric clinics, I was staring out the window as we passed the particular sector of Olaya where I conducted interviews when the bus stopped, briefly, and I felt my neck pulled back over the bus seat until my gold chain and pendant broke free. The young thief darted out the back door of the bus and headed to a neighborhood on the opposite side of the avenue from my research sector, where I knew a different gang operated, as confrontations between the two known groups often occurred in front of the cemetery. Since the necklace had sentimental value, and I increasingly considered myself to be “known” (conocida) in the community, I resolved, if only for a moment, to get it back. “I will just go into the alleyways tomorrow in front of the clinic and ask the boys if they know who took it and offer to buy it back,” I told Veronica that evening. “Absolutely not,” She told me. “It is true that you are known (conocida) now in that neighborhood, but if you offer to pay those boys to get the necklace back or they find out from a witnesses who recognizes you that you were robbed in front of their territory, the thief could die. You can’t tell anyone from Olaya about the necklace and you can’t go
back to Olaya again this trip.” That was my last visit to Olaya, in June 2012. Although I have returned to Cartagena three times since then, I now only meet my Olaya participants in Cartagena’s colonial center or Bocagrande, as I learned that gossip had indeed spread throughout Olaya’s holes (or huecos) that I had been robbed in front of the sector by someone from a rival gang.

2.5 DEFINING (IN)SECURITY AND WELL-BEING IN LAS COLINAS

In 2009, I moved into an apartment in Las Colinas with a primary informant turned friend, Alicia, along with her common-law husband and two sons. I had first met Alicia in 2006 when she was the hotel receptionist where I was staying on a two-week holiday, but our friendship formed two years later, in 2008, when I negotiated a three-month rental at the same hotel while I did preliminary fieldwork. I moved to Alicia’s neighborhood in 2009 knowing that her neighborhood, Las Colinas, was surrounded on three sides by zones with a significant population of gente de invasion (squatters), including the neighborhood Nelson Mandela. The majority of recent arrivals were internally displaced persons (also known as IDPs), rural squatters who were forced from their property by soldiers, paramilitary members or guerillas over the course of Colombia’s ongoing internal armed conflict (Pecaut 2001). During the worst period of forced migration, between 2000 and 2003, rural citizens were being displaced at an average rate of seven people per hour (Osorio 2003: 57). Although forced rural to urban migration slowed significantly by 2006, Cartagena continued to receive the largest number of IDPs per capita into 2010. This fact was not widely discussed, precisely because Cartagena depended on a reputation of safety to continue growing its touristic sector.
Las Colinas, for all intents and purposes, is today a suburb of Cartagena, located forty minutes by bus from the city’s beautiful colonial center and fifty minutes from the modern resort neighborhood of Bocagrande. Bocagrande features a short strip of towering condos, an overcrowded beach and five blocks of hotels, air-conditioned fast food restaurants, high-end jewelry stores, a Hilton, a Hampton Inn, and a military base. While the police regularly set up checkpoints to monitor traffic going to and from the beach peninsula, the colonial city center less than three kilometers away is surrounded by a fortress of walls the Spanish built to protect the port’s most elite residents from attacks by British pirates during the colonial period. Today, these walls form a seal of protection around the tourists taking horse-drawn carriage rides over the cobbled streets at night and offer only a dozen or so places where people can enter or exit the colonial center. When politicians, foreign dignitaries or celebrities visit Cartagena, this is where they convene, El Centro Historico, where police guard the entrances and search locals and tourists at will.

After staying in a small hotel in the colonial center in 2006 and 2008, I returned to the same bakeries, beauty parlors, and cafes in 2009. I responded to inquiries about why I was no longer staying at the hotel by mentioning that I had moved to Las Colinas for my ten-week stay. Everyone greeted the news with a big smile or a nod of approval. Las Colinas is well known among Cartagena’s working class; and many of those who have steady work in the service industry or low-end retail live or at least make regular visits to family there. For the many who work among the foreign backpackers and Colombian vacationers in Bocagrande or el centro, Las Colinas is the real Cartagena, humilde pero decente (humble, but decent), like its residents. If I stopped to buy coffee next to the hotel where Alicia worked while waiting for her shift to end and a street vendor offered to exchange currency or book me on a tour, the bakery owner would laugh and say something like, “She’s a gringa but she lives in Las Colinas,” implying that I could not
be fooled by the typical rouses of counterfeit bills or commissioned tour guides. Many Cartageneros (all of them Las Colinas residents, of course) claim that the neighborhood has its own culture because the people who live there “son muy del pueblo” (are very much from or typical of a small town) and “siempre se colaboran”3 (always collaborate or help each other).

I initially chose Las Colinas as a field site because Alicia had informed me in 2008 that her neighborhood was one of the last barrios sanos (loosely translated as “healthy neighborhoods”) in Cartagena as one headed away from the coastal city center and toward the interior of the country. From Las Colinas to the city’s outlying bus station, the neighborhoods became increasingly complicado (complicated), she told me. The linguistic choices that Colombians make when describing their surroundings, using expressions like barrio sano (healthy neighborhood) and barrio complicado (complicated neighborhood) are much more complex and culturally specific than simply identifying neighborhoods as bueno o malo (good or bad), which represents a widely agreed upon economic classification of a particular area. A barrio sano does not refer to the infrastructural quality of the neighborhood, but instead to the character or cultural attributes of the people who live there. A barrio bueno, by contrast, may indicate simply that the residents are well-off, but offers no real moral evaluation of the residents. Just as the Salvadoran interviewees in Jenkins’ study used the seemingly banal expression “la situacion” (the situation) to describe a horrifically violent war that had led them to become refugees, the residents in Las Colinas in 2009 favored the adjective delicado (delicate) or complicado (complicated) over peligroso (dangerous) and conflicto armado (armed conflict) over guerra civil (civil war) to describe any area of the country where they believed a person’s life was at risk—whether they were describing the entire department of Meta now under guerrilla control or a street located a couple blocks from their home in the neighborhood

3Interview with Ida.
As I learned during my M.A. fieldwork in Bogota, IDPs in many Colombian cities are often stigmatized and suspected of guerrilla involvement, leading established residents of the host communities to construct greater physical barriers to protect themselves. Yet in Las Colinas, I did not see these physical barriers at all. The houses had low gates, but almost every house had the front door open to let the evening air pass through as they sat and watched television or congregated in plastic chairs on the sidewalk, talking to neighbors. The casual, social, and collaborative culture of the neighborhood was best expressed by one participant when she said, “Cuando estoy en mi barrio, me siento que estoy en mi casa.”\textsuperscript{4} (Whenever I am in my neighborhood, I feel like I am in my own house). Las Colinas women, I soon learned, regularly celebrated what they call their cultura de la costa\textsuperscript{5} (coastal culture) through their enthusiastic affinity for their neighborhood as well as a seemingly limitless economic and emotional generosity extended to others, the extent of which regularly resulted in time and money shortages in their individual homes.

I began recruiting participants in Las Colinas in 2009 because I wanted to understand what everyday life was like in a Colombian neighborhood where the majority of residents were economic migrants, not IDPs. Focusing on ethnography in Colombia that was not centered on the victimization of presumed innocents connected to the internal armed conflict or the condemnation of armed actors was my primary goal. Las Colinas residents’ interest in participating in my study, they insisted, came from a desire to express why Las Colinas continued to be a barrio sano (a healthy neighborhood) despite the fact that it is surrounded by barrios complicados (complicated neighborhoods). Some women commented with traces of envy that there were often foreigners in Nelson Mandela.

\textsuperscript{4}Interview with Alicia.
\textsuperscript{5}Which is always contrasted with la cultura del interior (the culture of the interior), which they claim is fria (cold) and cerrada (closed), typified by their stereotypes of bogotanos (from Bogota) and paisas (from Medellin or the department of Antioquia, generally.
Mandela (less than three blocks from the back avenue of Las Colinas), an area full of, from the perspective of many Las Colinas residents, gente maluca (people ugly on the inside) and gente de malas costumbres (people with bad customs). Despite Las Colinas’ buena reputacion (good reputation), the women complained that no one: researcher, aid worker or otherwise, had taken any interest in Las Colinas because, as several women informed me, “Aqui no pasa nada” (nothing happens here). As the women reminded me again and again, Las Colinas is a neighborhood where “people are hardworking” (gente trabajadora); children are “raised well” (hay buena crianza); and people have their “projects” (proyectos, in this context, life plans or goals).

It took approximately two weeks and six interviews for my research questions to shift from the everyday life of economic migrants in Cartagena to the coping mechanisms surrounding social cleansings or limpiezas sociales and the definition of individual and collective well-being in light of these events. It came about when I asked an older interviewee my standard question, “So why do you think Las Colinas continues to avoid problems like drugs (vicio or vice) and gangs? Why does Las Colinas continue to be a healthy neighborhood?” The woman responded as if she was almost confused that I did not know the answer myself, “Well, because of the social cleansings.”

I began analyzing the completely different language that women in Las Colinas use to describe their community when discussing social cleansings compared to when they described all other events pertinent to their everyday lives in the neighborhood, extending Holland’s (2006) argument that all individuals are members of several figured worlds, reflecting the different roles they have in society. In Las Colinas, I concluded, women simultaneously represent two disparate figured worlds: one for fully participating in local social life (as members of the coastal culture or cultura de la costa) and one that is culturally relevant for actively disengaging from the local violence associated with social cleansings (as dissociated bystanders). This second figured world, whether
fully embodied or simply articulated in the day-to-day descriptions of the neighborhood, I argue, mitigates the anxiety about chronic violence through denial, an imaginative restructuring of space, a lack of empathy and a violence-centered construction of morality, which I later found to be absent for the most part in both Olaya and Nelson Mandela. The first figured world, which clearly formed the framework for the majority of intersubjective experiences in Las Colinas, is evident in the neighborhood’s active hustle and bustle and the continued importance of knowing and being known in the community, all while demonstrating empathy for others.

As dissociated bystanders, women in Las Colinas stressed both their ignorance about these extrajudicial killings while simultaneously emphasizing that the social cleansings (limpiezas sociales) were necessary to rid the neighborhood of the “gente mala” (the bad people), individuals who could be morally identified, the women told me, simply because they were the ones who had been targeted. Despite certain similarities to Jenkins and Valiente’s (1994) research with Salvadoran refugee women, who routinely emphasized their distance from the violence they had witnessed or denied it altogether, my interviewees’ accounts of political violence in Las Colinas differed from the Salvadoran women in some significant ways. Only three out of thirty-seven women in Las Colinas, for example, ever mentioned feeling afraid in their communities and not a single one cited fear (susto) or nerves (nervios) as caused by organized violence. The lack

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6 Scheper Hughes (1992) describes a similar phenomenon of postmortem identity classification in her chapter entitled M(O)ther Love: Culture, Scarcity and Maternal Thinking. She describes how women living in the abject poverty of a Brazilian favela describe newborns who exhibit failure to thrive to thrive as “little angels” who are just visiting the world (1992: 361). Through such collective discourses, these women articulate a collectively constructed response to constantly losing babies to malnutrition and disease even if sometimes this trope means that not everything possible is done to save the child in question.

7 Susto (a much more complicated condition than its literal definition as fright) and nervios (nerves) are very common diagnoses in Latin American folk medicine and are explored at length in Jenkins’ work with Salvadoran refugees and her discussion of the biomedicalization of trauma and criteria for Posttraumatic Stress Disorder (PTSD). While el calor (the heat) seems specific to the Salvadoran case, susto and nervios were discussed by some of my interviewees, but never as reactions to limpiezas sociales. The one woman I met who was described as having a permanent case of nervios had suddenly developed impaired cognition and extreme difficulty with speech (which looked like partial facial paralysis) as a teenager. My primary informant in Las Colinas, Alicia, informed me that her son suffered from susto because at four years old,
of stated trauma may indicate either the depth of the denial represented in this figured world of dissociated bystanders or the strength of this figured world’s employment as an embodied practice for collectively coping with insecurity and maintaining well-being. By regularly performing and apparently internalizing apathy, immediately absolving the perpetrators and dehumanizing the victims with their comments, I argue that it was possible for women in Las Colinas to live in a neighborhood where every member of the community is known and the distinction between private and public knowledge is constantly erased through active concern and unsuppressed curiosity about other residents’ lives, all while they simultaneously maintained their emotional distance from the victims of violence that they routinely labeled as morally deserving.

In the neighborhoods Olaya and Nelson Mandela, by contrast, women talked more freely about violence as it related to what they perceived as its causes: a lack of employment, an increase in substance abuse, and the role that opportunists from the interior department of Antioquia (known as paisas) played in debt cycles, in high interest lending, and in extrajudicial violence. Some women from Olaya and Nelson Mandela were so open with this information that they wished to give me a list of the names of the armed actors, labeling them, specifically, as paramilitary members or drug dealers that lived in their immediate vicinity. Violence in Olaya and Mandela was very much a part of social hegemony and local habitus, yet these same women continued to live active social lives, surround themselves with company, share their problems, and offer advice to new and old neighbors.

his aunts had forced him to look at his deceased father at his funeral. The boy’s father had died of a type of cancer that had disfigured his face and she blamed this for the boy’s nightmares and unwillingness to play with other children, but at the time of my fieldwork, she was taking her son to a school psychologist who treated susto as a psychological condition.
2.6 INSECURITY IN OLAYA AND NELSON MANDELA

It would have been difficult for Olaya or Nelson Mandela residents to flat out deny that violence was persistent in their neighborhoods as they did in Las Colinas, especially because the names of both the latter neighborhoods were routinely featured on the front page of Cartagena’s yellow tabloids like “Q’Hubo?” (What’s Up?) and “El Teso” (The Ugly) with a colon and a descriptor like “Eight Bullets to the Head” in Nelson Mandela or “Dead for a Cell Phone” in Olaya. Olaya and Mandela residents did not reject that violence regularly occurred in their neighborhoods or that innocent people could possibly be targets, but their narratives almost always featured observations that violence was on the rise everywhere in Cartagena; they were no exception. Furthermore, women in Olaya and Nelson Mandela routinely stressed that it was ignorant to argue that residents in one neighborhood or another were morally or culturally better or worse. “This neighborhood has its problems just like any other.” I was often told. In response to me raising the issue of a violent attack the week before when talking to one Olaya resident, the woman responded, somewhat defiantly, “There is danger here just like there is danger everywhere, Jessica. Look- they shot a priest in Gaviotas (a richer neighborhood) just yesterday!”

2.7 ANALYZING RESPONSES TO VIOLENCE: LAS COLINAS

To characterize my interviewees in Las Colinas specifically, I use the term disassociated bystanders to demonstrate how many female residents emphasize their active disengagement\textsuperscript{8} from the violent aspects of their surroundings through creative de-

\textsuperscript{8}Including physical, emotional and psychological disengagement.
scriptions of moral behavior and physical space, which may be inconsistent with their reflections on the same behaviors and relative distances when talking about positive aspects of their neighborhood. For many women in Las Colinas, the strongest characteristic in their narratives about social cleansings (limpiezas sociales) is how they dissociate\(^9\) from the violence in their immediate surroundings by identifying the immoral people as anyone who has been killed, insisting that the evidence of an individual’s death alone is enough to prove that he or she was mala gente (a bad person) and therefore, unlike the rest of them.

While the basic construction of morality in the first figured world of Las Colinas focuses on what makes people good (being generous, pro-social, etc.), the construction of morality in the second figured world of Las Colinas is always based on contrasting oneself to “the bad people,” which could focus exclusively on those who are killed during limpiezas in Las Colinas or incorporate commentaries about the uncivilized or immoral nature of residents living in neighborhoods like Nelson Mandela or Olaya.

In Las Colinas, for example, I began my interview about the first figured world, by asking Lilia, who had three children, what makes Las Colinas such a good place to live. She and her common-law husband had a small kiosk attached to the front of their house where they sold beer, soda, and limited sundries. Like many residents, she was eager to tell me the story about how they had improved their lives simply by moving to the neighborhood, justifying the costs and economic sacrifices Las Colinas residents make as a testament to the neighborhood’s moral desirability.

Jessica: That is good. So you like this neighborhood?

Lilia: Yes, this neighborhood is very healthy (sano).

Jessica: And in your opinion, what are the positive aspects?

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\(^9\)In the context of this paper, the words “dissociate” and “dissociation” refer to the female residents’ active social and psychological disengagement from anyone and any place connected to the limpiezas sociales or the denial that violence exists through the apparent creation of emotional and psychological distance.
Lilia: Look, this is a neighborhood that in reality has many different features. Notice that practically all of the estratos (sections ranked by property value) are going up. Yes, because this is a neighborhood, this is a neighborhood that really all the people are seeking to live in. The rents have gone up because, because this neighborhood is healthy. You find yourself here at whatever hour and you, calmly, it is a question of the neighborhood’s health.

Next, I asked about why Las Colinas is so special and how it has avoided what I vaguely refer to as “all of these problems” or problems of “vice” that the other neighborhoods have suffered from. Her response is an amazingly well detailed illustration of Las Colinas presented through the figured world of coastal culture (cultura de la costa), one that secures everyone who is a part of it, while briefly touching on the moral superiority of a population that is neither urban (like Olaya) nor displaced (like Nelson Mandela).

Jessica: And so how is it that the neighborhood has avoided all of this [problems of drugs and violence]? Because there are many good neighborhoods where this is still a problem, like those who sell drugs (vicio) and all of that, but here the people have told me...

Lilia: No, no, no. Around here it is quite healthy, but you know what? What happens is that around here there is so much kindness toward strangers. There are many people from small towns. You know that all of these people have their good customs, that they pass on their amazing customs and manners, their race [as in origin], and, eh, there are many things, in truth. For example, the customs and manners of the people from small towns are different than those from the city.

It is notable that Lilia differentiates the customs present in Las Colinas as “customs and manners of the people from small towns” which are positioned as distinct from “those from the city,” which would presumably include residents from Olaya. Even though many Las Colinas residents were raised in the neighborhood since birth, Lilia includes them as part of this continued rural enclave community, a group unaffected either by the trauma and violence of the internal armed conflict or by urban vice.

In a different interview with Penelope, as with others in Las Colinas, there is rarely a mention of “bad ones” in the neighborhood until someone has been killed and
then the individual’s guilt can be confidently declared based on the fact that he or she has been killed, a kind of logic that echoes previous centuries’ witch trials. Certain behaviors (for example, excessive drinking, loud music, prostitution, borrowing, etc.) that may be considered morally neutral or not a concern of Las Colinas residents when they are positioned in the first figured world suddenly take on a strong collective significance in the second.

Jessica: And do you think that these groups (that conduct the limpiezas) are good for the neighborhood or are they dangerous or what is your opinion on this?

Penelope: For me it is good, because the people that they get, these gang members, [there is] much more calm, because sometimes, they sometimes, yes, they stop doing this. Well, they kill, you know that in these get-togethers with the speakers (pico) and all that, that the ones left dead, [those] that they murder, and when they do this, things get quieter.

Jessica: So have you seen like, um, like dead people in the street in Las Colinas?

Penelope: No, no, I haven’t seen them. One day I was coming on a micro (a small bus), and the bus had to swerve to the other side of the road because they had killed one over there, and so the bus took the other side and there was a dead one there because they had murdered a boy but like that, no, I couldn’t see.

Penelope: Yes.

Here, Penelope describes the need for limpieza groups to “clean out” the problems of youth get-togethers around pico (the waist-high stereo speakers that women in previous interviews had said was one of the defining characteristics of bad neighborhoods outside Las Colinas, and nonexistent in their own neighborhood). In all the interviews where women mentioned the problem of pico, they talked about how it was important that limpieza leaders got rid of these kinds of people because they often end up killing each other. The question remains, of course, whether these women see the issue of pico get-togethers as an actual physical threat to their well-being, since they stress that the
youth are killing each other and no one else, or if they are claiming that the activities surrounding pico parties are morally reprehensible and therefore out of place in Las Colinas. Either can be viewed as a strategy for distancing themselves from empathizing with the victims or subjectively reflecting on and internalizing, as Freud (1947) argues, that they could be the next ones to face death because death in armed conflict can touch anyone.

Many women in Las Colinas who talked about the threat of violence or limpiezas sociales in the neighborhood did not consistently stick to emphasizing alterity or restructuring distance in a coherent fashion throughout their narratives. This often resulted in opinions and narratives that appeared fragmented and self-contradicting. For example, they would deny that limpiezas took place anywhere and then later comment that yes, they thought that limpiezas sociales were an important weapon in the community to combat gente viciosa (drug users). Likewise, many women in Las Colinas restructured time, space, and knowledge of previous events several times within the conversation, each time accentuating how morally, temporally, or spatially distant they were from what was happening even as they supplied more detailed descriptions about the particular events. Such ruptures in how Las Colinas women pattern their narratives about the community led to serious inconsistencies in the overall narratives, but provide excellent examples of how these women may not experience the apparent incongruities in the two figured worlds as contradictory, but rather as psychologically complimentary subjectivities.

Mercedes, for example, imaginatively restructures space and initially denies that she has witnessed violence in her immediate community. Later in her narrative, she retracts (without being prompted) her initial statement about there being no violence within Las Colinas and shifts to focusing on perpetrators and victims who “are from other neighborhoods.”

Jessica: And so are you afraid of violence in your neighborhood or has this not been a problem since you arrived here? Like, have you heard about
attacks or robberies within the neighborhood or not?

Mercedes: No. Around here? No. For example, this street and the next, since being in the neighborhood, I still have not heard of an attack. Sometimes fights form, but those are the ones who come from other neighborhoods (gestures toward Mandela) and finish here.

Jessica: So then it is a fight that starts over there and they end?

Mercedes: They end here.

Jessica (Slight laugh)

Mercedes: But those from the neighborhood (Las Colinas), I have never known that they were fighting or anything.

Mercedes: Up until now we have not had these problems. Since we moved here, we have not had any of that here.

Jessica: And do you have, or have armed groups become involved here or no?

Mercedes: No

Jessica: So since you arrived, in spite of the armed conflict and all of that, you have never seen, like, a uniformed boy (un muchacho en uniforme) that has passed through here or something like that?

Mercedes: There are times when they pass through here, but they pass through here on their way up there (indicates towards Nelson Mandela).

Jessica: And they never stop here?

Mercedes: No.

Jessica: And so, well, normally we would think that people come from poorer neighborhoods in order to rob in better neighborhoods (barrios mas sanos), but why do you think that the problems you mentioned from Nelson Mandela, that these problems stay in Nelson Mandela and never come down here?

Mercedes: I say it is because of how far away they are, they are always, like, distanced, maybe. Like I say, the mentality of over there is different than it is here.

Jessica: Umm-mm. In what sense?
Mercedes: In the sense that, for example, those of us from here, you don’t see the boys so involved in all of this with the pico\(^{10}\) and by contrast, over there they are really involved in the pico and all of that.

In this short selection from her transcript, Mercedes denies, affirms, and then denies again that there is violence in the neighborhood within a few sentences. She also responds differently about the presence or absence of violence based on the prompt that I provide. When I ask her if there are armed groups (grupos armados- one way of describing either paramilitary or guerilla members) involved in the area, she replies, “No.” But as soon as I use a locally understood euphemism for a paramilitary member (“a boy in uniform”), she simultaneously confirms that she understands the meaning I am giving to the phrase while validating that she has seen them by explaining that they only “pass through” on their way to Nelson Mandela, where the bad people reside (again, a stress on moral alterity).

In one sense, Mercedes seems to lay claim to seeing without actually witnessing. There is both a physical and moral distancing in how she describes the people that are the targets of the “uniformed boys” (muchachos en uniformes) who pass through Las Colinas on their way to Nelson Mandela. She dissociates with them spatially, saying they are “distanced” and “how far away they are,” clearly echoing the spatial dissociation Jenkins’ interviewee employed when discussing the massacre “clear across the street” from her house (Jenkins 1996: 284). The Las Colinas narratives are unique, however, in that they also feature a strong emphasis on moral distance. There is much discussion

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\(^{10}\)Pico refers to a large, usually waist-high stereo speaker, which are common in many houses in economically marginalized neighborhoods throughout the coast. To be “involved in pico” means to frequent parties where people put these gigantic stereo speakers outside their homes and blast music all night long, drawing groups of young people to file in and drink, use viciosos, etc. Even though the music also blasted in Las Colinas from 5 in the morning until midnight, the women often commented about how little pico there was (music was blasting from regular size speakers located inside the house). Another important attribute about the neighborhood was that “people listened to their music with the volume low.” As one teacher from Nelson Mandela told me, “Where there is pico, there are problems.” Of course, the whole stigma associated with pico was seen as irrelevant at three parties I went to where the family had borrowed a pico for a birthday party, but did not actually own one.
about “the mentality of over there” in contrast with “the boys from over here” who are not as involved in pico (something that is, in fact, very much a part of the weekend culture in Las Colinas and morally questionable only when it is included in a story about drugs or violence—mostly stories about the surrounding neighborhoods).

Of the Las Colinas women who do recognize that limpiezas sociales occur in the community, there is often a clear focus on what they consider reducing “immoral populations.” The immoral populations in this context may include prostitutes, homosexuals, and drug addicts; individuals who “do damage” to the neighborhood without necessarily posing a threat of physical violence to the residents. Similar to Taussig’s puzzlement over the moral standards imposed along the Atlantic Coast during the social cleanings he recorded in 2005, there was not a single woman I interviewed in Las Colinas who said the current limpiezas had any connection to the internal armed conflict. In all cases, women identified those killed as “delinquentes comunes” (common delinquents). It is interesting then to look at how in this second figured world within Las Colinas, women are not exclusively condoning the use of violence against those who are violent themselves, but also condoning the use of deadly violence as a socially approved sanction against those whom they define as immoral.

Jessica: Some people have told me about cleansings in the neighborhood (limpiezas del barrio) that have been passing through here and other sectors.

Edilma: Well, this happens in Las Colinas and in a lot of sectors lists appear of boys that are consuming drugs, of women who are prostitutes, of homosexuals, people who do damage to the community and that are doing damage. Maybe he consumes drugs and then he makes problems, they are stabbing one another, the same with prostitutes - the prostitutes are going around and they carry off a young girl and trick her. Look, that they give you a pair of jeans and this one is going to give you to another and the gays also prostitute the girls, the gays carry off the girls. There was a case of this in Las Colinas.

Jessica: Homosexuals are carrying the girls away?
Edilma: Well, they get them and then they set up meetings between men and the girls, the little girls who are 13 or 14 years old, and you know that this get-together is not for sitting and chatting, it is for sex and that, and they pay for the services of the young girls. Here there was a case of a gay who was prostituting a girl who was 13, 14 years old and they were even thieves.

Here, Edilma readily volunteers that she approves of limpiezas sociales mainly for their moral function rather than increasing physical security in the neighborhood. She briefly mentions that “druggies” might stab each other, but even this example does not communicate that she believes that this population represents any direct threat to her physical well-being. She mentions one case of “a gay” (un gay) who prostituted a young girl from the neighborhood (although she never mentions that she knew the girl and the story quickly falls off). Either way, Edilma’s dissociated bystander narrative emphatically distances her from ever being a victim because she is a good Christian and does not drink. Paradoxically, she did not see any ethical conflict with the fact that she and her husband met while working for one of the country’s largest beer distributors.

I never directly asked my interviewees why the limpieza leaders would feel any kind of moral obligation to their particular community or what kind of morality they were trying to enforce, in part because I was investigating how women construct their figured worlds and manage their everyday lives in the context of this chronic threat of violence and insecurity and not how they morally construct its perpetrators. Prostitution and sexual tourism are rampant in Cartagena, but in all other contexts when I talked to women about those in the sex industry, the worst most women would say is that that these girls simply did not have dignidad (dignity) or that they were looking for plata facil (easy money). It should be mentioned that prostitutes were never mentioned as a threat to these women’s households because their husbands simply did not have enough money to pay for them. The main clients in Cartagena are foreign men or local Cartageneros who have enough to also pay for an hour or two at one of the centrally located downtown motels.
Homosexuality, on the other hand, is still a much more closeted issue on the coast than in Bogota and the evidence and degree of homophobia that I saw in Las Colinas was most present in the names fathers called their young sons when they cried or got tired on the soccer field: “Marica!” (faggot). The fact that Cartagena’s economy is dependent on tourism means that many of these women had come into contact with same-sex couples traveling from Bogota or from abroad. My primary informant Alicia, for example, would report with a barely repressed smile whenever a “pareja gay” (a gay couple) had checked into the hotel, but then quickly add something like, “but they are very decent people.” The main point that I want to stress in addressing the issue of alternative moralities present in the dissociated bystander narratives is that while homophobia does exist in Cartagena, the only time I heard it discussed as a “moral” problem worthy of violent retaliation was in Edilma’s dissociated bystander narrative, contextualizing a different kind of morality when justifying the reasons for social cleanings in Las Colinas.

Marisa owned a small salon that she ran just one block from my apartment in Las Colinas in 2009. She was a beautiful but formidable looking woman in her mid-thirties, who readily described herself as a “violent woman” who was unafraid of using physical force against her boyfriend for any indiscretion. She was open about the fact that she was dating a married man, the first of only two women I met in Las Colinas who openly admitted to such an arrangement, another difference between Las Colinas residents and the women I met in Olaya and Nelson Mandela. In our interview, Marisa was quick and articulate. Unlike most of the women I interviewed in the neighborhood, she had been raised in Las Colinas and was desperate to get out, “to see something new.” Her desire to leave Cartagena may have been part of the reason that she charged much more at her beauty shop than the handful of other salons nearby. When I asked other women about whether they had ever gone to Marisa’s salon, the general response was, “No. Marisa es muy muy de su negocio (No. Marisa is all about- too much about- business). She
charges more than some places in the city center.” Simply the act of charging women in the neighborhood more than what was considered a fair price made Marisa a bit of an outsider within the neighborhood according to other women’s gossip, even though she was an original resident and almost all of the other women had moved there within the last twenty years.

On the topic of limpiezas sociales, Marisa also offered a perspective that deviated from the typical dissociated bystander narrative. She attested that not only do regular limpiezas occur in the neighborhood and that sometimes limpieza leaders enter people’s homes, but also that there has also been at least one “limpieza mal jugada” (a poorly played or false limpieza) in recent memory

Marisa: In the past there was a cleansing like three years ago where they practically were pulling people from their houses and they were giving it to them, for example, they were killing them.

Jessica: Like people who were living here?

Marisa: Yes, but in general they were doing it practically over there near La Sierrita, Mandela, but, that year, that year, last year it was that in general the cleansings, [there were] some cleansings that were supposedly social cleansing that I do not believe were such cleanings that they, they discovered people that I believe, innocent people that fell under these suspicions of cleanings for doing things, for example that, um, that to see it poorly played out (mal jugada), and as a cleansing, all of this they chalked up to the cleansing.

Jessica: But it was something personal and that?

Marisa: Exactly. Something personal.

Like other dissociated bystander narratives I recorded, Marisa’s narrative is characterized by both an emphasis on the limpieza taking place some place conceptually or spatially far away from her, “practically over there near La Sierrita, [Barrio Nelson] Mandela,” (“practically” insinuating that it was still within the neighborhood of Las Colinas, but at its edges). There are also conflicting statements about when the social cleansing occurred,
with each successive sentence implying it was even more recent than the one before: “like three years ago” and later, “but, that year, that year, last year” indicating that the cleansing she is about to discuss is much more recent than she originally remembered or was willing to admit. Lastly, her description of how “they were practically pulling people out of their houses” is a direct challenge to the safety that the other women guarantee exists behind closed doors. Later in the transcript, Marisa does say she agrees that true limpiezas are necessary, yet her statement about the poorly played or false social cleansing also challenges the local morality of the first figured world in Las Colinas. She indirectly accuses those around her of exploiting what limpiezas are meant for and posing as limpieza leaders in order to act out their own vendettas, an immoral use of an essentially moral act.

The last interviewee from Las Colinas to appear in this section is Rena, a spritely, lithe, ninety-year old volunteer cook at a local recreational facility for senior citizens in Las Colinas. Rena directed the kitchen Monday through Friday and all fifty-odd people she cooked for were younger than her. Rena said she became involved with the recreation center ten years earlier because she simply “loved all the people” in her neighborhood and said that in the past, when she stayed alone at home all day while her daughter worked, she felt lonely, old, and too involved in the stress of her daughter’s marital problems and her grandson’s unemployment. Rena said that her physical stamina (standing for hours at a time in the hot kitchen, hustling up and down the stairs) was possible because she had never been sick a day in her life. She had grown up in a family belonging to the Conservative Party in the nearby department of Cordoba during the six-year civil war known as “The Violence” (La Violencia) from 1946-1952. She recounted, with great detail, how many residents in her hometown would hide in grave plots when the guerillas, sometimes dressed as soldiers, would sweep through the area. Once, when she was a girl, she convinced her friend to run away from a soldier she believed was a guerilla in
disguise who had promised to show the girls a shortcut through a farm. To this day, she is certain that she was right and that he would have killed them both if they had followed him.

When Rena’s attention turned to the limpiezas in Las Colinas, however, she did not seem to question the judgment of those who did the killing. In the course of the interview she talks about several social cleansings, but her description of another volunteer’s grandson who was killed in a cleansing, as well as an attorney neighbor who was killed, are particularly illustrative of Freud’s argument that during wartime, non-combatants have an eagerness to assign death to the enemy or, in the case of Las Colinas, dissociated bystander narratives are used to “other” anyone who has been killed in a limpieza by automatically assuming their moral guilt. Morality, in this figured world, can be maintained by simply not being a target in the limpieza social; that is, one is innocent if one is alive.

Jessica: Wow, I did not realize that there are so many social cleansings in Las Colinas.

Rena: Oh, plenty. The woman who was just talking to you here? They killed her grandson. Yes, that’s how it is.

Jessica: Really? Rocio’s grandson? They killed him? [break] In front of the house?

Rena: Farther over there, it was a dance over there where they killed him.

Jessica: But isn’t he a little boy?

Rena: No, big! I would say he was about eighteen years old. He had to have been with someone doing something. You know that if one isn’t doing anything, how are they going to kill him?

In this short excerpt, we see three aspects that I argue are essential characteristics of dissociated bystander narratives: First, Rena stresses alterity through convicting the victim of guilt solely based on the fact that he is dead ("He had to have been with
someone doing something. If one isn’t doing anything, how are they going to kill him?”).
Second, she stresses distance (saying “Farther over there” and gesturing, even though it was only a few blocks away). Lastly, (and perhaps most importantly), when Rena is discussing the death of Rocio’s grandson, Rena never says Rocio’s name, dissociating herself in this moment from a woman she knows well by only addressing her as “the woman who was just here,” a woman Rena has seen five times a week for more than five years and routinely called by name when I sat and observed them in the recreational center kitchen.

When I asked my female interviewees in Las Colinas who it was that conducted the limpiezas in the neighborhood and the surrounding areas, the majority responded either nadie sabe (nobody knows) or identified them as gente desconocida (unknown people) or gente de otras partes (people from other areas). One woman suggested that they might be the local business owners themselves and some briefly alluded to the fact that they might be informally connected to the police who rarely, if ever, were present in the neighborhood in uniforms or patrol motorcycles. When women responded that they had no idea who the limpieza leaders were, I often followed up with a question about how people who were unknown would be able to tell the “good” from the “bad” in a neighborhood where they did not reside. Asking the women to subjectively reflect on the accuracy of these supposedly unknown individuals and interpret how they could identify “good” from “bad” resulted in narratives that seemed the most conflictive within the second figured world. While the women stood by their elusive structure of “bad ones” in and around Las Colinas that were eliminated during limpiezas sociales, there were points in some women’s narratives where they momentarily wavered about whether or not these “outsiders” in their community (a trope that they have to use in order to emphasize that no perpetrators exist within the community) were in fact capable of distinguishing those who were merely walking home from the ones who truly did not belong in the neighborhood.
Jessica: And so they can distinguish between the good and the bad people?

Laura: This is what I don’t understand. How are they going to distinguish between the good ones and the ones who were bad? And that they know who they are going to give it to (to kill) and who they are not going to give it to? And so the papers that they threw under the doors, they were saying that they knew who the good ones were and who the bad ones were, but “please do not abuse our confidence by being in the street, nor in the terraces of your houses,” encouraging everyone to go to bed early because they were getting rid of the bad people, this is who they going after.

Laura never questions the idea that there are good and bad people, nor does she voice any opposition to the idea that “they” (the limpieza leaders) “give it to them.” She does appear to question, however, whether or not the methods these “outsiders” use to determine morality and recognize immoral characters within Las Colinas can always be accurate. Similar to the most basic dissociated bystander narrative, she does restructure space when talking about limpiezas, emphasizing a world that is inside, nuclear, cut off from the rest of the community, psychologically distanced (through a lack of empathy) and physically isolated through the vacating of porches, the shutting of doors, and the closing of curtains. In the first figured world, as we saw in previous sections, social and psychological subjectivity in Las Colinas routinely takes place outside, in public, where everyone is known, where there are parties in the street and everyone looks after each other. The community is, as Lilia stresses, a family. In the second figured world, the one constructed during limpiezas sociales, the subjective world temporarily takes place inside; immediate concerns are addressed strictly to the family, those who inhabit the space inside the home. The walls of the home become the last barrier (physical, mental, and moral) from the violence transpiring outside.

Jessica: And do you think that these cleansings are necessary or do you think they are unnecessary?

Aida: Well I think that, I think that no one has the right to take the lives of others, but the truth is that I don’t know because sometimes they behave
badly, but the truth is that they do not get involved with the people that are in their houses, but rather with the people who are out in the street, taking things from people that work and all of that.

Jessica: And do they get confused? Have you ever heard that they get confused from time to time?

Aida: I have never heard that they get confused, nor have I seen a dead one so that, someone that I know, the truth is that...

Jessica: So it is always someone who is not from here?

Aida: Exactly, but for me to tell you if he were bad or good then I don’t know thank God that I have never had any acquaintances or family members in those problems.

This interviewee recognizes that the limpieza leaders sometimes “behave badly,” but follows up her comment with the source of her protection: “the truth is that they do not get involved with the people that are in their houses, but rather those who are out in the street.” The street, any part of it, even the area directly outside the house, temporarily becomes dangerous and outside of social reference. The places that one knows so well (as Lilia had described) immediately become unknown, but only during a brief period of nighttime hours, over the week or two when these cleansings take place, yet as soon as it is day break every household returns to the first figured world. The figured world of coastal culture (la cultura de la costa) thus does not cease to exist during social cleansings, but it becomes subjectively constructed as a daytime phenomenon. In other words, the culture does not fundamentally change when social cleansings occur, but the gaze within the figured worlds alternately and adaptively changes: At night, it is a gaze from a closed front door, a draped front window, and the primary defense against not being traumatized is believing that you are a “good one” and only the “bad ones” will be killed. The ability to shift their gaze from day to night, a neighborhood that is known to one that is full of unknown, is the greatest support that this practice is in fact a culturally constructed defense mechanism and not merely a locally adopted narrative practice. It is precisely this
collective practice that allows women in Las Colinas to open these doors, both literally and figuratively, the next day, immediately returning to the physical and conceptual figured world of the culture of the coast (la cultura de la costa) in their daily lives in much the same way that they switch back and forth in their narratives. All of these factors, I believe, minimize the outward experience of trauma and debunk the theory of a culture of terror in which individuals have no social resources or psychological tools to prepare themselves for environments chronically threatened by violence and insecurity.

2.8 WHEN A LAWYER IS KILLED: A TWO CASE COMPARISON IN LAS COLINAS AND OLAYA

In Colombia today, the legal profession continues to be extremely hazardous, particularly for those involved in criminal cases. In some cases, judges still appear capuchado (their faces covered) or they sit behind walls where they cannot be seen while listening to evidence. I encountered two ethnographic narratives from participants about attorneys who were murdered, one from Rena, the 90-year old Las Colinas resident mentioned in the previous section and one from an Olaya participant named Ariel. Rena was the neighbor of an attorney whom she says was killed in a social cleansing in Las Colinas and Ariel was the nanny for an attorney who was killed at her own home in a wealthier neighborhood along with the son Ariel cared for. In both cases, no suspects were ever arrested. While there were several dissimilarities in these two women’s particular relationships to the attorneys, a great deal is revealed in the speculation and the emotional hardship elucidated by Ariel and the complete lack of empathy on the part of Rena in Las Colinas, even though Rena had previously claimed to have a great affinity for and knowledge about all her neighbors in earlier sections of her transcript. The same dissociated bystander narrative structure is present in an excerpt where Rena describes
“the lawyer” (whom she never names) who was killed by suspected limpieza leaders up the street from her. She at once admits that the lawyer was in fact a Las Colinas resident (contrary to many residents’ reports that limpieza leaders only kill those who do not belong to the neighborhood) and justifies the act by saying he must have been in the moral wrong.

Jessica: And do you hear about these (social cleansings) on the news or through gossip or?

Rena: Yes, and sometimes I go to see the bodies [after a limpieza]. When is a day that someone doesn’t see anything?

Jessica: Sure. To see the one who died?

Rena: The one they killed.

Jessica: And this was less than two weeks ago?

Rena: And it has to be about a year since they killed the lawyer.

Jessica: Oh, a year ago?

Rena: [Nods] And that one [a previous example] who they killed in front of that house has to be a year and a half and that one that they killed right there in the road [the lawyer] has to be about a year.

Jessica: And does it ever have to do with jealousy or something to do with a woman?

Rena: Of course, do you believe that they are going to kill a person because...If they have to kill him it is because he has done something.

Jessica: It has to be because he has done something.

Here, Rena emphasizes that the lawyer who was killed must have done something to deserve it because in order for “them” to kill, you have “to have done something.” The killing of these individuals is described almost as a duty (a deber), something that has to be done. Secondly, Rena distorts time in this dissociated bystander narrative. She briefly referenced the particular killing of the lawyer earlier in the transcript as having
occurred “el otro día” (the other day), which is why in the part of the transcript shown here I ask if it occurred within the past two weeks, to which she replies, “No, a year ago.” Interestingly, Rena does not subjectively dissociate herself from the violence in the way that many Las Colinas women do- by saying that they have not seen anything. Instead, she stresses the banality of it and even her curiosity in wanting to see the ones who deserved to be killed, using the chance to see a dead body as a motivation to go out in the street (safe in her own moral conviction) and take a walk, rather than hide at home, afraid.

Ariel’s reflections about the death of her previous employer (also a lawyer) and the woman’s son are strikingly different than the matter-of fact moral condemnation provided by Rena from Las Colinas. Of course, Ariel’s relationship with her employer was quite intimate given that she worked directly in her home, however, the majority of participants in my study claimed a much stronger emotional affinity for their neighbors than their wealthier employers anyway, and Rena’s lack of details or emotional response is clearly at odds with the adage “Whenever I am in my neighborhood, I feel like I am in my own house.” In the first two sentences of Ariel’s retelling of her employer’s murder, she attributes the fact the woman was targeted to the conditions of her job, not a moral fallacy, immediately declaring that her attorney employer was a victim despite being moral, despite “not having any problems” in the local vernacular.

Jessica: So you left that job because your employer was killed [sic]?

Ariel: It was that she was a lawyer, but, how do I explain? She was an amazing lawyer and I tell you that she must have won a case or something that, you know, the person who lost must have gotten hurt badly (by the verdict). Maybe that was it because she never had any problems.

Jessica: So it was because of sicarios (hired killers)? It wasn’t like something in the street that happened to her?

Ariel: It was in her house. They caught her and they tortured her, they choked her, they hit her, they tied her up with the, the, the cord from the iron, they tied the son up too, and they killed her son next to her.
Jessica: And how old was her son?

Ariel: Back then he must have been like 13, a young kid.

Jessica: Was this hard for you?

Ariel: Yes, because imagine- four years ago, my own little ones were still so dependent on me, but this little boy was too, he was so very attached to me. Sometimes I brought him to my home, when I didn’t live here, when I used to live with my mom. I used to bring him there when I would come in the afternoon and he would arrive (from school) and begin looking for me in his house. After she (the lawyer) died they (the family) came to look for me in their car because I hadn’t gone to the funeral. A man arrived and said, “I am here on behalf of Señor [last name, the lawyer’s husband] because whenever they call, we go. So let’s go, because he needs you there.”

Jessica: And did you go to the funeral?

Ariel: No, I didn’t go because they, they were going to have a nighttime vigil over there in her neighborhood. And for me, it was very difficult. I was afraid of going.

Jessica: That the people that had done that to her would see you there?

Ariel: Yes, it made me afraid because imagine, because I know that in this case, if I were there and they had realized. Because if I had been there (on the day of the murder) they would have given it to me as well because they were in the workshop. The house itself was unattached, but behind it there was a workshop and they had been hiding there. The ones that did that to her had been hiding behind all the tools. [Trails off, stops completely]

Ariel reported that she went through “a long period of sadness” following the death of employer as well as an increased sense of insecurity both with respect to her personal safety (or fear that her employer’s murderers might recognize her and retaliate) and her future employment. Shortly after her employer’s death, members of the deceased woman’s extended family recommended Ariel to a group of three medical students who rented a house in Bocagrande and were seeking a daily cook and cleaning woman, a home where she continued to work at the time of our second interview in 2012. Ariel’s reflections on the conditions surrounding her employer’s death, including the
traumatic yet detailed recounting of the torture both the lawyer and her son endured, is significant in demonstrating the different constructions of affect with respect to how women from different neighborhoods in Cartagena and different regional and cultural traditions, interpret extrajudicial and political violence, as well as how they cope with the sense of insecurity such events can provoke. Ariel at once asserted her employer’s moral innocence and attributed the woman’s murder to the dangerous conditions associated with working in Colombia’s judicial system, yet it is also noteworthy that Ariel does not offer any damning moral commentary about the murderers themselves.

2.9 OLAYA AND NELSON MANDELA: ADMISSION OF INSECURITY, REJECTION OF MORAL CAUSE

The main difference between how women in Olaya, Nelson Mandela, and Las Colinas talked about violence is that in each neighborhood the main source of violence and insecurity was conceptualized differently, even if some elements overlapped. These differences were evident both in popular discourse and basic participant observation. In Olaya, gangs, drugs, and police violence were the biggest sources of insecurity. In Nelson Mandela, extortion, loan sharks, massacres (matanzas) of community leaders, and utilities gauging were discussed the most often. In Las Colinas, the neighborhood that served as the pilot study on insecurity and the central focus at the beginning of this chapter, interviewees claimed the neighborhood was extremely safe or “healthy” (sano) compared to Olaya and Mandela. In fact, Las Colinas residents routinely named the latter two neighborhoods specifically for a negative comparison with the quality of their own neighborhood. Nonetheless, Las Colinas residents attributed the safety and health
of their neighborhood not only to a superior set of cultural practices they had inherited from Colombia’s small towns or pueblos (cultural traits they claimed were not as often shared by urban Olaya residents or internally displaced Mandela squatters), but also to the routine social cleansings (limpiezas sociales) in Las Colinas, or the organized extrajudicial killing of so-called social undesirables by what most residents claimed were unknown armed actors, out to rid the neighborhood of “the morally corrupt.”

What the groups had in common, among other things, is that the violence and insecurity that residents experienced in their neighborhoods was chronic, yet only four of the eighty-three women interviewed stated that this insecurity had ever significantly impacted what they described as the local practice or even social duty (deber social) to enjoy (gozar) socialization with other women in the community. To avoid socialization due to insecurity was simply not part of how they defined their personality (personalidad), their character (carácter), or coastal culture (cultura de la costa). According to my interviewees, women who resorted to social isolation out of fear were routinely classified as overly serious (seria), heavy spirited (pesada), bitter (amargada), or ungrateful (desgraciada) for their lives. Participating in social events (birthday parties, baptisms, beers on the front porch with neighbors when their husbands were out with their mistresses) was seen as essential to being a part of the community in all three neighborhoods, to “being known” (ser conocido/a) and protected by fellow residents. Regular socialization was also discussed as one of the most important ways women could protect themselves from negative emotions (anxiety, nervios, depression, lethargy) during periods of insecurity and violence, emotions that they believed could lead to physical illness and later result in the inability to provide for themselves and their families, or in extreme cases, lead to cancer, heart attacks, fevers, or death (a topic further discussed in Chapters 3, 5, and 6).

In Olaya and Nelson Mandela, there was far less abstraction in participants’ narratives about violence and insecurity than the women I spoke to in Las Colinas.
In Olaya, some participants occasionally tried to label their particular sector of the neighborhood as safer than others, using some of the strategies of alternately constructing spaces as near and far, like Las Colinas residents. Pico parties on Thursdays, Fridays, and Saturdays were a major source of concern for Olaya residents because gang members from their sector often congregated in the street during these events. Waist or chest high PA speakers, blasting reggaeton or vallenato music, were often dragged into the street just as the sun went down on Thursday or Friday afternoons as I was walking past the clinic toward to the main avenue to catch my bus to Centro, Cartagena. In these parties, youth would gather to drink, dance, and consume crack, cocaine, and marijuana, blocking the paths for taxis and motorcycles.

As female Olaya residents explained to me, it was the illicit sales, along with the volume of the music and the size of the crowd that made the group at a pico party easy targets for gangs that wandered in from neighboring sectors “to start problems,” making residents feel at risk or insecure on their own streets. In one interview with a young mother from Olaya, Sandy, I ask her about how close the pico parties come to her house. In this section of the transcript, Sandy directly denies that a pico party is going on during our interview (it was late on a Thursday afternoon), even though the volume of the music from the nearby pico was making it difficult for me to hear her.

Jessica: And are there problems with drugs (vicio) in this tiny piece of the neighborhood or not so many people like that pass by here or?

Sandy: Well there are young people from this very neighborhood that smoke (crack) and drink. They like very much to be a part of the pico and drinking. You know that in the pico parties, gangs form.

Jessica: And do they put pico in this part of the neighborhood or no?

Sandy: No, in this part of the neighborhood? Practically no.

Jessica: But there is a vallenato pico going on right now, but maybe it doesn’t seem like a pico party?
Sandy: That is going on at a house, but further over there (gestures afar).

Participants like Sandy, and many others in Olaya like her, were honest (if desperate) in acknowledging that “young people from this very neighborhood” were involved in the kind of activities that made the neighborhood insecure. The areas recognized as “safer” sectors in both Olaya and Nelson Mandela were areas outside of a two-block radius from their respective clinics. In each neighborhood, the clinic was considered doubly dangerous because it was a location where those recently attacked might be left at the front door, with their assailants close behind them, and where illicit drug sales took place. Nonetheless, even residents who considered their zones to be safer were cognizant of the fact that the sources of insecurity could easily traverse the neighborhood either on foot or by motorcycle, while Las Colinas residents often rejected such descriptions, claiming that the zones they lived in were completely insulated from insecurity.

In Olaya, the majority of female residents I interviewed said their main goal was to get ahead in life for their children (seguir adelante por los niños) and to stay healthy. Even though these women lived on the same streets or travelling paths of those who those they recognized as potentially “problematic” or “dangerous,” they rejected the classification of their neighborhood as a place that “lacked good customs” or “lacked culture” as Las Colinas residents often described them. Graduations, marriages, and adult birthdays in Olaya often included a monetary collection between women in order to bring Mariachi singers to the neighbor’s house, or buy her a new blouse from all the women on the street. There was not a single Saturday that passed in Olaya when I did not see a youth birthday being celebrated out in the open. All the children in the immediate vicinity would sit patiently on small, rented plastic chairs in front of the house of the birthday boy or girl, who would distribute rice, sausage, chips, and cake to his or her guests in waves, never sitting until all the children had been served each course. The
mothers often stood behind the children and chatted, waiting for the party favors (a ball or a small doll) to be distributed, which signaled they could take their children back home to the grandmother or older sibling and return for the adult portion of the party. As night fell on any birthday home, the plastic chairs in front of the house were later occupied by the mothers of earlier guests, and the men arrived with cases of cold beer while the exhausted birthday boy or girl fell asleep in front of the television in a back bedroom.

There was clearly a great degree of insecurity in Olaya related to gangs and drug violence, but residents employed various pro-social strategies to cope with the insecurity that surrounded them, including directly or indirectly engaging socially with the individuals they believed were the greatest threat. This, of course, required openly recognizing individual neighbors who had the power to cause harm. One strategy that female residents of Olaya used to pro-socially cope with insecurity included feeding the children of the potentially problematic neighbors. Childhood hunger was definitely an issue in Olaya, even though a greater percentage of women in Olaya participated in the nationwide program “Families in Action” than the other neighborhoods in my ethnography. Physical evidence of malnourished children included bloated bellies, stunted growth for their age, and rotting teeth in babies routinely given sugar water solutions. “Families in Action” was a state-subsidized nutrition and education program that provided basic ration coupons at Cartagena’s largest commercial grocery store, El Exito (Success), and a monthly stipend to families that attended parenting classes and could demonstrate that all of their school age children were matriculated and regularly attending classes.

There were plenty of justifications, however, as to why a family in Olaya might not want to participate in Families in Action, even if they qualified. I inadvertently observed a host of structural and racial problems with the program one afternoon while shopping at the Centro Exito for my own groceries. Beneficiaries of Families in Action (FA) would line up outside this one store, one afternoon a month, with their identification cards and
FA paperwork. While the store was air conditioned on the inside, FA participants were only allowed to enter in waves of a half dozen or so at a time. The hours they were assigned to collect their rations were always during siesta (1-3pm), which meant that FA participants were not home to pick up their children from morning classes, take their children to afternoon classes, or prepare lunch for their families on the day they received their rations. The women were forced to stand on the concrete sidewalk outside during a period of the day when the Caribbean sun was the hottest, or in other seasons, it was torrentially raining. The first time I saw this line forming outside El Exito grocery store, I thought that the store had been temporarily closed due to a power outage and we were simply waiting to enter, so I got in line behind everyone else. When I was spotted by the security guard, however, he apologetically informed me that I could pass right through, that these were women from Families in Action so they could only enter a few at a time, “to keep order for the regular customers.”

Ration day at El Exito also caused discomfort and humiliation for patrons who were not a part of Families in Action, but were assumed to be because of their racial or socioeconomic profile. As I stood in line at the checkout, a female Cartagenera shopper in shorts and flip flops, her hair wrapped in a scarf, began loading a few items on the conveyor belt while she swatted her two young children away from the candy rack. “This is cash or card only.” The paisa cashier told the woman, who nodded, a little perplexed, and continued unloading. “This line isn’t for Families in Action,” the cashier offered again, now visibly irritated. “I am not in Families in Action,” the woman told her. “I am paying with cash.” All five of us, even the children, put our heads down as the cashier rushed through the rest of the transaction. No apology was issued.

There were other complaints about Families in Action in Olaya, even among women who claimed the rations were worth the round-trip busfare, the lines, and the fact that the prices were twice as high at the El Exito grocery store than the general market
that was closer to Olaya, meaning the state subsidized program in turn lined the pockets of the largest private grocery chain. Some women in Olaya claimed that Families in Action continued to support their female neighbors who never attended meetings or sold off their rations for drugs or card games. Nonetheless, many of these same women used their own rations to feed their neighbors’ children out of duty and, more importantly, to make themselves known (conocida) in a positive way to families with sons involved in gangs or the sale, distribution, or consumption of drugs.

One Olaya participant, Maria, who lived in the alleyway in front of the Olaya clinic, expressed that she felt conflicted about continuing to feed the neighbor children. It was clear she did not want to see them suffer, but she also wanted to be in the good graces of their mothers. Violence between women in different sectors of Olaya was on the rise, not just over interpersonal relationships, but also women representing their sons from competing gangs on either side of the main avenue. As Maria explained it, “Because now there are even fights between women in different areas- women from here and women from Liberia (a sector of Olaya across the avenue). They come here in big groups, in bunches (bonches)” so she needed the protection of her female neighbors, which she secured indirectly through pro-social engagement with their children, even if she disapproved of the family’s behavior. Still, she worried she was promoting a continuation of negative behavior in her immediate sector for the next generation of Olaya residents by giving handouts to the children of families involved in drugs or gangs.

Maria: What happens is that it is time and time again (children are asking for food). Because, imagine that they, they get in the habit of begging for food from me, and they (their mothers) bring them every day so that I am, I am giving them food. And god is not going to punish me for saying this but seeing that their mothers are sitting right out there and playing (cards). It is not because they don’t have money.

Jessica: Umm-umm.

Maria: Because to simply make food for your daughter rather than feeling lazy about it. It is because she is addicted to the game because many mothers,
simply out of their own laziness don’t cook any food. They don’t cook well for their own children, not even rice and something like beans or an egg, even if they do not have meat, because beans have been replaced by the game so that they give their children soda and bread and things like that. This nutrition is fundamental. And that they send their child to bed with an empty stomach...

Maria was employing a clear pro-social tactic for the protection of her family by continuing to feed her neighbors’ children. She acknowledged that it was not a long-term strategy because she did not want to, and probably could not afford, to continue feeding them forever. In the meantime, however, she knew her children could go back and forth to school without fear, and she knew that she would be safer the next time women from the sector Liberia arrived in the alleyways to start problems with the women whose children she was feeding.

2.10 THE POLITICS AND ANTI-POLITICS OF VICE AND STREET CULTURE IN OLAYA

With the exception of Cartagena’s open air market, where crack and heroine were plentiful and users could be seen collapsed in the trash along the bay by the fish vendors, or entering pay-by-the-hour motels by the market’s underpass, Olaya was the most central and frequented area where the poor could buy drugs. The foot traffic of drug consumers increased dramatically along the alleyways around the Olaya clinic between 2009 and 2012. In 2010, the city expanded and paved a number of streets that connected the back section of this sector of Olaya to an avenue that ran parallel to the front of the neighborhood. Initially, residents had wanted the street to be paved and the immediacy of the public works project resulted from a clientelistic favor in return for local votes for a particular city politician that year. In previous years, I had heard about free tubal
ligations in exchange for votes being offered to female voters in another sector of Olaya. What the new paved street meant was that Olaya residents who lived in the back section of this sector of Olaya no longer had to walk five or more blocks to get a bus to the Centro on the main avenue near the cemetery and the clinic, but the additional access to an avenue on the opposite side of the sector provided easier escapes for thieves, more entrance points for rival gangs, and a great intersection of public transportation options for drug users who previously went directly to the central market. Motorcycle police also routinely used this new paved shortcut between the two avenues to apprehend drug buyers and bother local residents (but never arrest the dealers themselves). The public cemetery in Olaya, two blocks from the clinic, had always had a night guard, but in the last three years the city had installed a guard during the day as well since rival gangs, separated by the avenue on which the cemetery was located, now regularly attempted to steal the bodies of their enemies or their enemies’ relatives directly from the tombs. In the upper class neighborhood of Manga (near El Centro) in 2014, the city enacted a law that Manga’s neighborhood representatives had the right to refuse certain burials that were considered “high risk” for robberies or corpse abuse. Wealthy Manga residents had claimed tombs had been raided and they were increasingly attacked or harassed by “problematic youth,” many of whom came from the nearest peripheral neighborhood of Olaya.

Lola was a single mother that lived on the clinic’s main avenue, adjacent to the alleyway where the majority of the drug traffic came and went. I asked her what changes she had seen in her neighborhood over the past few years and whether she thought the area was getting better (because of the infrastructural improvements) or worse.

Lola: Now things are worse than last year.

Jessica: And why do you think?

Lola: Because now there are gangs even around here that are attacking and robbing.
Jessica: And are they from here or from other places?

Lola: Well there are three boys from here and some of their friends from another area. They bring them here to this neighborhood through there (the paved street).

Among many participants in Olaya, one of the major differences in how the same women responded to questions about the neighborhood from 2011 to 2012 is that women said things like “Now, now I am afraid in this neighborhood” or “I am afraid because the attacks are getting closer,” the idea being that it was not just the transients who passed through the community to sell or buy drugs that could cause harm, but permanent residents in adjacent sectors that contributed to the insecurity of their neighbors.

When I asked another mother I had been visiting in the alleyway what she thought about changes in the neighborhood, she told me to look for a bicycle on a porch half a block down from her house as I was leaving. The bicycle had belonged to her child. It had been locked on her front porch a couple of months ago, but then it was stolen and the neighbors were bold enough to let it sit on their own front porch, unlocked. The participant told me that she continued to smile and say hello to the woman who lived there because she wanted to be able to come and go from the alley as she pleased, visit with the other women who were her friends, but she was glad that her daughters were old enough that they could no longer be contaminated by what was routinely called “the street culture” (la cultura de la calle) of Olaya or “jobs for easy money” (plata facil) like prostitution and drug dealing that were now emerging all over Cartagena, and in Olaya, more noticeably than ever before.

Many women in Olaya worried aloud that “street culture” would eventually contaminate their children, sometimes providing evidence of how one child was developing “too much character” (i.e. aggression). Some of this influence could clearly be seen in children who spent a great deal of time around the clinic, even if they did not live in the immediate vicinity. When the police pulled around the corner by the main avenue,
groups of small children, often without shoes, would gleefully attempt to outrun each other en route to the clinic, screaming “Agua! Agua!” (water) or “Aguacate! Aguacate!” (avocado), code words specific to the neighborhood that warned crack vendors and users to hide their product. I saw other children jumping on, throwing pebbles at, or trying to pry open the eyes of heroine users who had collapsed next to the alley adjacent to the clinic. Another time, I sat and interviewed a woman closer to the main avenue where a user had evidently collapsed on his way to buy product. We sat and chatted pleasantly as we watched neighborhood children between six and nine years old kick the man repeatedly, who was generally unresponsive. At the end of our interview, an hour later, the man slowly stood up, looking around, bewildered, and then headed in the direction of the clinic without acknowledging us. “Haha!” Josefina, my participant, exclaimed, clapping her hands. “It looks like the sun did him good!”

Transient crack users who entered the neighborhood (labeled by local residents as crustaceos- crustaceans for their exoskeleton-like thinness), would often be the subject of young children’s taunting. The children ran after them, encircled them, or shouted “Vaya carbon!” (Get out of here, black as coal!) “Vaya, crustaceo!” (Get out of here, crustacean!). The transient user, often slinging a trash bag of paper or cans over the other shoulder to sell at one of the three recycling centers on the other side of the avenue, would attempt to reach quickly for a 2,000 peso (1 USD) note, pay one of the young women who sat with fanny packs overflowing with crack-filled gel-caps and dirty bills, along the south side of the clinic, and be on his way. The transients knew not to respond to the children, or in some cases, the children’s dogs, which occasionally followed behind them, growling. While there was insecurity for everyone in Olaya, the greatest insecurity was for those who were unknown.

One participant, Lena, who lived a few doors down from the clinic, said she was eager to get her daughter out of Olaya before she was a teenager and move to one of
Cartagena’s better central neighborhoods. “Look,” she told me. “There are kids around here now as young as two years old that are already saying bad words and offering to stab people that pass through the street.” Another woman told me that recently two younger boys had struck her nine-year-old son on the head with a board that had two nails exposed. She was afraid that this act of violence had left him with some residual anger (rabia). “It scares me that these bad customs might contaminate my son,” she said.

Despite residents’ often grim perspectives about insecurity in Olaya, participants’ declarations about fearing for their children’s future were often followed by a list of the support services (granted by the city and state) that women were employing. The public schools in this sector of Olaya all had part-time social workers that provided monthly one-on-one therapy sessions with students when it was requested by the parent or suggested by the teacher. Ten participants mentioned without prompting that they had sent their child to a social worker or spoken to one themselves in the last year. Olaya residents also routinely sought support from the Bien Estar (Well-Being) organization, a national social services agency that had numerous Madres Comunitarias (trained community “mothers”) assigned to each sector of Olaya where residents could go for advice about nutrition, early childhood education, or report domestic violence.

While many mothers claimed that raising their children involved a constant battle against the “culture of the street,” two mothers were defiant when I stated that some women said they had no control over their children or that the neighborhood was becoming “too strong” for them to do anything. Both claimed that mothers who said such things simply refused to acknowledge that a child becomes good or bad because of how the child is raised, the participation of the parents, and the development of the child’s character. For them, the neighborhood itself is inconsequential to the development of the character of the child.

Jessica: There are some mothers who have told me that it does not even matter what mothers do, that street culture is now stronger than home culture,
and there are other mothers that?

Sandy: This is a lie! It is a lie. I can say it as someone who has raised her son, and this, this (behavior) does not come from the street.

Jessica: And do you see that now, are there friends who?

Sandy: [Interrupts me again] Because I have seen well-off people, from well-off neighborhoods who are also like this. And I say that it is not coming from this, rather it comes from the personality of the person.

Sandy in no sense was a moral champion of Olaya, but she did have little tolerance for the mothers whom she said “no longer even pay attention” (ya no paran bolas) to the well-being of their children. Sandy was twenty-seven (the same age as me) when we first met and she had a ten-year-old son and a two-year-old daughter. I would pass by Sandy’s second story apartment on my way to the bus and often look up to see if she was home at the end of the day. Sometimes she would see me while sitting on a neighbor’s porch and call me over or the neighbors would recognize me and tell me she had headed down toward the clinic to visit her son’s godmother. Wherever Sandy was, her two children were always with her. She felt safe enough to move through Olaya without fear, but her children were always with her or in the company of the women she trusted, never alone in the house and never alone in the street.

2.11 PAISAS, POLICE, AND JUSTICE

Social cleansings did factor into some women’s descriptions of insecurity and violence in Olaya, however they were less common in the particular sector of Olaya where I was conducting interviews because of the neighborhood’s close proximity to the central Olaya police station. It would have been difficult for unknown armed actors to post lists of names all over the neighborhood or organize mandated curfews without the police taking some interest (or being held accountable by the city for allowing it to occur).
Furthermore, a significant minority of Olaya’s residents near the clinic were directly employed in the narcotics industry and the business was more or less self-regulating given how other community members handled the distributors, vendors, and consumers. To arrest all of these individuals not only would be extremely dangerous for the police officers and make it difficult for them to return safely, but it would cut many residents off from their primary source of income in a neighborhood where residents all received electricity, gas, and water bills through the city.

The police typically patrolled the two sectors of Olaya where I worked at least every three hours in combos (two officers on a motorcycle) during the weekdays. Occasionally, during raids, the police would enter the alleyways in front of the clinic, but as one participant, Yari told me, the police never went to the end of the alley, near the park, where the highest level drug dealers and the most dangerous members of the local gang spent most of their time. One day I asked Yari why the police always seemed to just go up and down the main street in circles.

Yari: Last year I lived farther up (the alley), and then you turn to go even farther up.

Jessica: Yes, because, imagine, last year you made me walk all the way out with Jairo (her husband) because you were afraid of me walking alone (at the end of the alleyway).

Yari: Exactly, because of the park.

Jessica: And is it still extremely dangerous (caliente) up in that area?

Yari: It is the same.

Jessica: And so why do you think the police, the police take every opportunity to come down this way (by the clinic) instead of going up that way (by the park)?

Yari: Because some of the same drug sales that go on up there also happen down here (by the clinic).
Jessica: But the people, is it that over there by the park the people are better (and don’t deserve to be arrested), or that they sell the drugs here but no one is afraid of the ones around here, but the police are afraid of the ones over there?

Yari: It is because over there the people are a lot more dangerous (heavy) than the ones around here.

Although members of Yari’s family had been harassed by police when they entered the front portion of the alleyway on what Yari called “false raids,” she acknowledged that the police officers targeted the area that encircled the park where she had once lived– the border or margins of the truly ungovernable drug activity as the only way police officers could maintain a degree of security for themselves. While the police were certainly paid bribes by lower-level dealers in the front section of the alleyway, no bribes needed to be paid to police by those who operated near the park because those who were unwanted would rarely be allowed out. I had probably only entered and exited safely because I had been approved by the younger distributors’ mothers and had been in the company of Jairo.

This is not to say that police officers were welcome in the neighborhood, least of all when I returned to Olaya in 2012. Two sectors of Olaya now had a completely new set of police officers. In the months before the Summit of the Americas in April 2012, the city of Cartagena underwent a massive police exchange between officers along the coast and those from the interior of the country (mostly the department of Bucaramanga, closer to Bogota than Medellin). The exchange was described in local newspapers as short-term, or less than a year in the peripheral neighborhoods. In the city center, five hundred additional police from Bogota and Bucaramanga (a group from the interior collectively referred to as cachacos) were brought in and housed in colonial hotels downtown in the month before and the two weeks following the Summit of the Americas. In addition to their interior accents and mannerisms, the cachaco officers also sported crisp modern
uniforms, brand new motorcycles, and a gender integrated anti-riot team that encircled the colonial city walls.

The purpose of the exchange of police from the interior of the country in the neighborhoods was described in the newspapers as a way to reduce corruption and lead to greater reporting by officers who had no local knowledge or profitable connections (palancas) to the communities where they served. Nevertheless, the officers I met near the Olaya police during random bus raids and once when I was stopped and searched, were clearly not happy about being there. Many of them had been sent to the coast because they were younger, junior officers (the two that stopped me were twenty-five and twenty-three years old, respectively). They complained to me openly about how their salaries did not go as far on the coast as it did in their hometowns, how they had to leave young wives and children back home, and how they were shocked by the “disorder” and the “lack of culture” they encountered in Cartagena compared to Bucaramanga.

Prior to the police exchange, Olaya residents told me, there had been fewer patrols during the day, but there was a greater sense of security early in the morning, when domestic employees had to leave for 6 a.m. shifts or walk their children to the bus for 7 a.m. classes. With the old police force, the large congregations of drug users and vendors would be greatly reduced or out of sight at the entrance of the sector before the sun came up, and as Lena told me, “Now the working people leave their homes at even seven, seven-thirty in the morning and there is still a big group of transients consuming right next to the clinic.” One speculation about the former police officers is that they had worked directly with the paisa shop owners (and there were at least eight Paisa markets and bakeries just in the ten block radius where I conducted interviews in Olaya). The paisas had a vested interest in the streets being secure early in the morning since that is when they were arriving to open their businesses and receive deliveries or, if they lived above or behind the business, to drive their children to private schools closer to
downtown, which required navigating through the neighborhood and to the main avenue. While the speculated paisa-police relationship may have led to fewer transients in the morning before the police exchange in 2012, both the police and the paisa shop owners were thought of as outsiders in the neighborhood by Olaya residents. Even though the neighborhood did not have direct social cleansings, Georgina, for example, believed the police and the paisa shop owners organized some of the shoot-outs that regularly occurred in Olaya. As Georgina explained, one shoot-out occurred very close to her house on a night when there was no pico party where gangs might have formed, yet the police were immediately on the scene to arrest local youth. Jessica: And do you think all the shootouts start because of the pico?

Georgina: Sometimes I think, maybe, sometimes I think the police orchestrate the gunfights, but I don’t think that anyone has the right to take someone’s life except god, because it is god who gives life. One time there was one, and everyone was running towards it. Ay, no! I was so scared, it was a shootout, but it was in the middle of the night.

Jessica: And this was when?

Georgina: This was, it was back, it was in November of last year [current month is February].

Jessica: And there were also shootouts, in those streets over there?

Georgina: Everyone had gotten involved, but nobody was hurt because the police were already there, or like, they (the police) came running at the boys from every direction right away. I don’t know. I got out of my bed, but there was no light- just darkness.

Jessica: Is it because they cut the electricity?

Georgina: Here there was no light anywhere in the neighborhood.

Jessica: Was it a coincidence?

Georgina: It was just a coincidence that there was no light in the neighborhood.
In this interview with Georgina, I pressed the issue of whether or not she thought the police had cut the electricity because in the alleyways near the clinic, residents had informed me that it was a common practice that the police would cut the electricity and sometimes threw smoke canisters into the alleyways before a raid. In the alleyways, residents also claimed the raids were “orchestrated” because when the Cartagena central police called for a raid in Olaya, the police officers that patrolled the neighborhood during the day accompanied the other officers and purposefully entered the homes of individuals that they knew were not involved in the narcotics trade, leaving either empty handed or arresting only one or two users or lower level distributors. Once, an eight-year-old girl from the alleyway, Jemina, interrupted my interview with her grandmother when I asked about the police to show me a large burn on her arm. It had happened when the police cut out the lights and raided her section of the alleyway. Her mother had left a hot iron on the table, but when her mother grabbed her to pull her under the bed while they waited for the police to pass through, the iron fell off the table and directly on top of Jemina’s arm. She told me the whole story with such detail, I would have thought it happened only a month before. Jemina was deeply afraid of the coastal police who used to operate in the neighborhood, but even more suspicious of these new “cachacos pelados” (interior youths) who were roaming the neighborhood now, her use of the word “youth” to describe them given she was only eight-years old caused a suppressed laugh from both her grandmother and me, but also signified the ways in which she knew she was more knowledgeable and part of the neighborhood than they were.

Residents in Olaya were as suspicious of the paisa shop owners as they were of the police. Both residents and the major Cartagena tabloids in 2011 and 2012 regularly reported on the activities of two major Antioquia (paisa) gangs who were increasingly active and influential in the peripheral urban neighborhoods of Cartagena, demanding such high monetary “protection” (vacunas) from local business owners that many were
then forced to take loans from other high interest loan sharks or pagadiarios (who also happened to be paisas) in order to keep their shops, bars, or restaurants open. Often when a Cartagenero business owner eventually succumbed to the debt, or gave up and closed, I was told, another paisa business would take its place.

Unlike the majority of my interviewees in Nelson Mandela, in Olaya, only two women I interviewed currently had outstanding debts with paisa loan sharks, compared to sixteen out of twenty in Nelson Mandela. One of the major differences between Olaya and Nelson Mandela residents in this respect is that many Olaya residents had finished homes, with no improvements needed, so there were many women in Olaya who could continue to lend to each other. Two older women I interviewed used their lending businesses as their primary sources of income and each had less than five hundred dollars in circulation at a time. In Nelson Mandela, by comparison, almost everyone I interviewed had either very little savings or a long list of structural improvements for their homes and so could not spare anything to their neighbors.

When I asked Josefina in Olaya, as we watched the sun-cured young man rally in front of her front porch, if she had any debts with paisa loan sharks (pagadiarios) or if she thought a social cleansing would improve the safety of the neighborhood, she scoffed at me. “My husband works in Costa Rica so I don’t need their money,” she told me. “And they say the Aguilas Negras (Black Eagles from Medellin) are going to do another cleansing here soon. Everything here has gotten worse since the arrival of the business paisas.” Josefina acknowledged that paisas were largely behind the social cleansings in many of the neighborhoods, but she also attributed the causes for the violence and insecurity that triggered the social cleansings to paisas as well. Olaya had always been a neighborhood that struggled with urban poverty, but it was the paisas investing in money in these neighborhoods and gaining influence that made many Olaya residents the most nervous. Unlike the transient drug addicts or youth gangs that confronted each other on
the main avenue, armed with sticks and rocks when it rained, the intentions of paisas were often unknowable, but business owners were believed to be gaining palancas (favorable connections) within the city that Olaya residents—true Cartageneros—no longer had access to.

In February 2012, I was walking in the back sector of Olaya when the two young Bucaramanga police officers assigned to the sector stopped me, searched my bag, and courteously asked about my purpose in the neighborhood. When I gave them my card and explained I was researcher, they gave me a business address with the Olaya police phone number and asked me to report every day when I was entering and when I was leaving the neighborhood. There were only two types of foreigners that entered Olaya, they told me patiently, “those who are here to buy vice and those here for good reasons, but don’t realize how dangerous it is.” I politely explained to the police officers, as I saw a couple of curious female faces look out their windows at me, that the greatest danger for me in Olaya would be if the community thought I was working with the police. I pleaded that they never acknowledge me again in the street. After I imagined aloud a situation where I might enter the alleyways in front of the clinic and never return as a result of this obligatory reporting, they agreed to longer acknowledge me when they came through in their combos. By the time I reached the clinic, a mere five blocks away, the word had already spread that I was talking to the police. Jairo, Yari’s husband, stopped me, and asked me what he should tell “the boys” in the alley if gossip started that I was a sapo (a snitch), so I repeated my entire conversation with the officers, verbatim. Upon hearing the conversation, Yari, his wife, laughed. “They obviously just don’t know yet how things function here. Don’t worry, Jessi. We know you.”

Two months later, I was sitting in Olaya with a participant, Nancy, on her porch across from a paisa market when two other paisa young men arrived on a motorcycle. They looked around, and I initially thought they were lost, but Nancy and I saw them
quickly change directions, charging at a Cartagenero dairy deliveryman in front of the paisa market, with a gun drawn. The dairyman been just been paid for a delivery and was attempting to climb back into his truck when he was attacked. My participant, Nancy, pulled me into the back of the house with her daughter in tow, emerging just moments after the warning shots were fired, where we saw the dazed deliveryman sitting with his head in his hands as the paisa shop owner continued to calmly stock his shelves. Women up and down the street had already gathered in front of Nancy’s house to relay their accounts of what had happened. “Orchestrated,” one woman muttered aloud. After twenty minutes of standing around and chatting, I asked where the Bucaramanga police were now. Why hadn’t any of the combos of police officers come through, at the very least for their patrol hour? Nancy raised her eyebrows and crossed her arms, “It looks like those young interior boys (pelados cacachos) are learning.”

2.12 RURAL INSECURITY, RURAL COPING IN NELSON MANDELA

In 2011 and 2012 when I conducted interviews in Nelson Mandela, there were between twenty-three and twenty-five named sectors of the neighborhood. The bus route for Nelson Mandela was singular, cutting through one of the outer sectors of Las Colinas and climbing the hill behind it, as housing materials turned from cinderblock to wood to recycled pallets and plastic tarps, and the pavement ran off into gravel and then into dirt, blowing huge clouds of dust along the bus’s path. Every morning, I watched from the bus window as residents attempted to combat the dust clouds by sprinkling water on the piece of road in front of their homes while they swept the dust off their porches from the day before.

The main avenue of Nelson Mandela was defined by two limits: the billiards
hall at the top of the hill and the clinic approximately two miles down the same road. Named sectors of the neighborhood spread out directly behind the avenue, but beyond the clinic, the dusty path quickly turned into pastoral land. The residents generally referred to this area as “the farms” (fincas), but in practice they were multi-use lands, with dense vegetation. Both farmers from the neighboring village of Turbaco and Nelson Mandela residents who owned horses or burros would let their animals graze there, in the same area where some new residents were attempting to squat, and where every kind of business was suspected of happening, and many bodies were often found and reported in Cartagena’s yellow tabloids. “Mandela might look a village,” a Las Colinas resident told me once. “But it is the kind of place where anyone can hide out forever; guerilla, paramilitary, whoever, and never be found because the police are not going up there.”

In 2011, I conducted interviews along the two blocks immediately behind the main avenue, stretching two miles from the billiards hall to the clinic. When I returned in 2012, however, I stopped short of the clinic altogether because Enzo, a motorcycle taxi driver who rented his motorcycle from one of my participants, no longer would take me beyond the commercial area to the clinic. I could take the bus and walk the last two blocks on my own where the bus turned, or take another motorcycle taxi that might not return to pick me up at the end of the day. I trusted Enzo’s judgment. If he would not take the rented motorcycle down that piece of the neighborhood anymore, I would not go either.

In Nelson Mandela, where the majority of the residents had been internally displaced from rural areas, the clinic was not the gateway to the neighborhood and its urban problems as it was in Olaya, but an urban service that stood at the geographic gateway into the rural insecurity they had escaped from, “the farms,” visible from the clinic porch, and their peripheral position within the safety of the city. A lot of Mandela residents I interviewed avoided the clinic at all costs, going to great lengths with the help
of members of their church or other NGOs to figure out what other clinics in Cartagena they could attend once they were enrolled with the state subsidized insurance. The expression “Over there, out beyond the clinic” (mas alla que la clinica) was the most common response I received when I asked Nelson Mandela residents if they were afraid of any particular areas of their neighborhood.

The fact that many Nelson Mandela residents wanted to avoid the clinic led to a cooperative healthcare industry in other sectors of the neighborhood. In each of the three different sectors of Mandela where I conducted interviews along the avenue, I saw a different home with a sign that said “Injections and Blood Pressure.” In each of the three homes there lived a young woman in a technical nursing program. They each charged 1,000 pesos (fifty cents) a visit to provide the same basic services to their neighbors that the clinic offered. Another young man, who had no formal healthcare training, could also be seen riding his bike through Nelson Mandela each morning with an arm cuff and stethoscope in a plastic bag, offering to take the blood pressure of older women as they sat on their porches for 500 pesos (or twenty-five cents). Many times, as I walked along the main avenue, the young man was getting back on his bicycle in front of one house and headed to his next appointment. Some of the women relied on his services, but others I spoke to said they invited him to take their blood pressure once a week, just to “collaborate” (colaborar) or help him out with his honest form of work.

Two doctors, a dentist, and three or four nurses staffed the clinic. During the six weeks I attended the clinic in 2011, either sitting in the waiting room, talking to patients or chatting with the staff in the cramped but air conditioned office on the second floor, it was clear that the clinic staff was far more open to talking to me than the clinic staff in Olaya, but also far less equipped to treat their patient population. They could assist with natural childbirths but not caesarians for women who arrived in labor without ever having received prenatal care. They provided basic emergency services (fevers, wound
care) and basic dental services (tooth extraction with Novocain, dental fillings without it), but they operated with little functioning technical equipment, sometimes without even a working refrigerator.

During my first week in the emergency waiting room, a mother arrived with her eight-month-old child, who had fallen off the bed while in her husband’s care. When she returned home from her errand, she found the child face down on the floor, conscious but not crying. She handed me the child in the waiting room as she filled out the paperwork. As I attempted to cradle the baby as it faced me, I could see the baby’s eyes rolling back and forth, out of focus. The nurse informed the mother that the nearest MRI was at the main hospital, more than thirty minutes away, the x-ray machine was broken, and there was no ice even, given that there had been a four hour black out at the clinic earlier in the morning. Ten minutes later the mother left the clinic, carrying the child back out into the sun and towards the farms, with simple instructions to keep the child awake as long as possible or take it to the main hospital.

Another day I was sitting behind the gate on the clinic’s front porch with Raul, a part-time law student and part-time clinic guard, who was also from Nelson Mandela. It was still siesta, so the mothers who had come with their children were lined up on the road leading to the farms, occasionally pressing themselves against the closed clinic gate to avoid motorcycles that were passing through. A taxi (which I had never seen in this section of Mandela) swerved toward the clinic, and a woman in her forties jumped out from the passenger side, throwing some bills at the driver, and opening the back door where her husband stumbled out, shirt unbuttoned, clutching his chest. “It’s heart attack!” She yelled. “Please, open the gate!” Raul quickly grabbed his keys and led them through, shouting for the nurses. A couple minutes later the woman ran out of the clinic again, and looked at Raul and me with desperation. “Where can I buy aspirin?” She asked. “Where is there a pharmacy?” There was no pharmacy in Nelson Mandela, but Raul told
her she might try the small house up the street, that sold limited sundries, one of the few places not staffed by paisas. She returned empty handed. Paisa stores were always open during siesta, but markets run by costeños tended to close. The kiosk was closed and no one along the way had any aspirin, only ibuprofen. I learned later that the man’s heart stopped while in the clinic, but their defibrillator (one of the simplest models, like those found on airport concourses) had stopped working the month before and the clinic was on a waiting list for a new one.

Between the time that an ambulance came through to pick up the woman and take the man’s body away, the siesta ended and the clinic reopened, but the mothers holding their babies on the street no longer wanted to enter the clinic. “My baby is only one month old,” one of the women complained to Raul. “I cannot bring her in there because she might catch the cold. Do you know what room he died in? Have the doors been closed?” Two other women nodded in agreement. Raul, empathetic if exhausted, clung to the gate with one hand and said, “Señoras, I only have control of what happens outside the clinic, in this little tiny piece, right here. I have no control over what happens inside the clinic. If you want to come back tomorrow, you can give me your names, but I cannot tell you what they did inside because I have been outside the whole time, just like all of you.” Three of the women wandered away toward the farms while the other half dozen or so entered.

I asked Raul about “the cold” and he said, without any skepticism, that the cooling body of a dead person could be unsafe for very young children or pregnant women. Developing fetuses could catch fright (susto) or later have walking troubles if exposed to death before they were fully formed, the cure for which was digging a hole in the earth where the one or two year old would be buried up to the waist, naked, so the earth could restore strength in the legs.11 Young babies exposed to the cold of a

11I had also heard this explanation among families in Bogota.
cooling corpse could develop respiratory problems. Whether these women returned the next day, I do not know, but between the insecurity they experienced outside the clinic, waiting along the pathway to the farms under the afternoon sun, the insecurity inside the clinic, with the presence of death that could harm the development of their children or pregnancies, and the lack of guarantee that they would emerge from the clinic any healthier than when they entered, I began to have a greater understanding of the distrust that many rural residents felt for this entire sector of Nelson Mandela and state-regulated biomedical interventions, more generally.

While good health (salud) was the primary definition of well-being in Nelson Mandela, followed by secure housing (techo) and work (trabajo), a number of interviewees in Mandela claimed they gave up on biomedical treatments before completion or refused to seek treatment because the entire process of securing insurance through the state was complicated, discouraging, time consuming, and stressful, quite the opposite of women I interviewed in Olaya. One woman I visited for a second time in Nelson Mandela in 2012 lifted her wrist gingerly from her lap when she stood up from her rocker to greet me at the door. When I asked her what was wrong with her arm, she told me she had fallen and broken it a couple of months ago. They had put pins in her wrist, but once they came out she continued to have pain, but no longer wanted to go through the trouble of working with doctors closer to Centro Cartagena. “Every time I go there (to the specialty clinic), they look up my insurance card in their computer and tell me that the woman with my name is already deceased. And then I have to wait and explain to them that there are two women with my name, that there was a problem with my ID number, but I am not deceased. Do I look dead to you? Haha! By the time they figure it out, my appointment time is over and I have to reschedule. There is someone new at the desk every time. I am not going through that again.”

At another home I re-visited in 2012, I was shocked by the putrid smell when
I entered the front door. Neris’s elderly husband was lying in a hammock in the living room, a catheter connected to a full bag of urine on the floor. Neris’s husband had been diagnosed with prostate cancer, but the clinic that was treating him would only provide one new catheter at a time even though his son had learned to insert them himself and it was difficult for the elderly couple to leave their home. Each time, they had to take an hour long bus ride to one doctor, another bus trip to get the insurance paperwork stamped, and then a third trip to the specialist that inserted the catheter. “We are not doing that anymore,” the wife told me. “He is too sick and I think that same clinic is the reason I got sugar (diabetes). When I had my hysterectomy five years ago they gave me a blood transfusion and that blood was so full of sugar, it gave me sugar. Now, we just give him extra antibiotics to prevent infection (which they bought without a prescription at the pharmacy), but we don’t make him travel to all those offices.”

Neris’ family belonged to a Christian evangelical church up the street and they regularly sought the blessings and advice of their pastor. In the fifteen years they lived in Nelson Mandela since being forcibly displaced from the department of Cordoba, their adult son who lived with them had been treated for schizophrenia in one of the clinics in central Cartagena (profiled in chapter 6), but they had discontinued treatment three years ago under the guidance of their pastor. The twenty-five year old son, who only had a fifth grade rural education, was present all three times I interviewed his mother and each time asked me questions about current events, about visiting Europe, about wars going on in the Middle East, about comparisons between the U.S. and Colombian government. His primary source of income was from recycling, but he used some of this money to buy second hand books from the general market, which he read voraciously.

“You are the only person who has entered our house in three years because of him,” Neris told me during our second interview in 2011. The pastor had convinced Neris and members of the congregation that the son was afflicted with a demon, which
explained why he had tried stabbing himself twice in the past two years and regularly had arguments with individuals who could not be seen. People in the congregation were afraid to visit their house because they did not want to be afflicted by the demon themselves. At the very least, the son told me, he was no longer hospitalized and forced to take medications that only made him sleep. Instead he prayed the misericordia. Of the seven living children they had, four were in Venezuela, one daughter was estranged in Las Colinas, and another son had been killed in 2004 by his girlfriend’s ex-husband. This afflicted son was the only one they had left; the only source of physical and financial support in their household beyond their meager pension. Church intervention within the community was easier than seeking help from state funded hospitals that might once again admit their son involuntarily only to return him to them incapable of performing basic daily tasks.

Distrust of state subsidized clinics and hospitals extended beyond the elderly in Nelson Mandela. At Merelbis’ house (my interviewee with the internet cafe who rented a motorcycle to Enzo), I arrived one day to see that her four-year-old daughter had a large, infected sty under one eyelid, the entire eye almost swollen shut. “Go wash your hands,” Merelbis yelled at the daughter as I dropped my bag in their living room. “It is not going to get better if you keep touching it!” “Oh god,” I said when the child returned from the bathroom and I first saw her. “Are you going to the doctor or the pharmacy to get some drops?” I asked. “Absolutely not,” Merelbis’ mother-in-law Lido responded as she entered the living room. “Did you see on television about how they were accidentally giving some poor people, like, magical eye drops? Causing them to see things? She just needs to wash her hands and not touch that eye for a couple of days.”

Lido’s distrust for the state-subsidized biomedical services in Cartagena extended as far as the birth of her daughter-in-law’s first-born son. Lido had purposefully waited as long as possible while Merelbis labored at home before calling a taxi in the middle of
the night to take them to the hospital. The taxi arrived so late in Nelson Mandela, that Merelbis’ son, Jose, was born in the taxi on the side of the main avenue with Lido and the driver assisting with the birth. Lido said she used this experience of Merelbis’ easy delivery in the taxi to argue three years later that her daughter-in-law could not possibly need a caesarian for the birth of her next child, a daughter. “Merelbis was only twenty years old and the baby was head down. What does that mean to tell you? All the poor women are getting caesarians these days because they (the doctors) get more money. She did it the first time with me, no problem.” Lido was insistent with the doctors, but her distrust remained, and again she took Merelbis to the hospital as late as possible, too late for them to insist on a caesarean. Merelbis again delivered naturally without any problem.

2.13 DISTRUST OF STATE SERVICES INCOMPATIBLE WITH RURAL COOPERATIVE PARENTING

Even though there were sixty-nine Community Mothers in Nelson Mandela assigned by the Social Service organization Bien Estar, residents were far more hesitant about exploiting the free services offered than their counterparts in Olaya. One of my interviewees, Aurelia, had been one of the first Community Mothers in Nelson Mandela, and said that she continued to struggle to gain the trust of families in the area, even though she was also from the rural area of Magdalena where many of them came from. If one particular family began to trust her and then brought friends from another sector of Nelson Mandela that should be assigned to a different Community Mother, Aurelia said that convincing them that the day care and nutrition program was the same with each
Community Mother was a difficult if not impossible task. “Even though the people in this neighborhood are generally very good and want to help their children, they don’t really understand the system or there is some, maybe, distrust,” she concluded.

One issue that prevented women in Nelson Mandela from using the state social services agency Bien Estar is that many Nelson Mandela children did not have official birth certificates, either because they had been born at home or because the family had fled their home without taking the required documents, and then delaying registration of the children when they resettled in Cartagena, instead getting the children baptized and using a baptismal certificate to enroll them in school. Another issue is that there was a number of ninos regalados (given away, or informally adopted children) in Nelson Mandela that women reported, meaning that a child is being raised as the son or daughter of another family member or friend. In one case I recorded, an infertile woman from Mandela, Elisa, and her husband had returned to her village to pay a young mother for a baby that the woman could not support financially, using Elisa’s sister as an intermediary, and then unofficially “adopting” the child. Elisa had been working with Cartagena’s adoption agency for over four years without receiving a child, despite numerous application fees, and improvements they made to their home in order to convince the agency they were suitable parents even though they lived in Nelson Mandela. By 2011, when I first interviewed her, Elisa told me she was less and less enthusiastic about adopting a child from the city of Cartagena anyway because there had been cases she heard of where the biological father or other family members would find the adoptive parents and kidnap the child. By 2012 she had a little girl on her lap when I came to visit her, but the child had no registration number or official last name.

In the cases of ninos regalados, which existed in Olaya and Las Colinas as well among the older generation (as in some interviewees had been nenas regaladas), the fact that they were informally adopted was rarely a secret in the community. Rather,
the biological mother was identified as the “Madre” and the one who raised the baby was the “Mama.” Families currently in this situation with babies or toddlers in Nelson Mandela felt justifiably insecure about the Bien Estar organization and the local network of Community Mothers in their neighborhood, because if discovered, they feared that they would be forced to temporarily relinquish their children and participate in a formal adoption hearing. A basic cable expose on Bien Estar in 2011 about the corruption at the national headquarters in Bogota, where three families whose children had been put in a temporary foster program were later adopted by international couples for profit, did not add to women’s confidence in the organization. They often brought up this documentary whenever I asked about their participation in Bien Estar, even if they did acknowledge that the Community Mother in their particular sector was a kind and competent neighbor.

2.14 THE INSECURITY OF EMPLOYMENT IN NELSON MANDELA: NO ADDRESS, NO CONTRACT

Whereas in Las Colinas and Olaya, women in their thirties and forties actively sought salaried work if they could find it, either in the tourist industry or as domestic workers, in Nelson Mandela most interviewees claimed that the greatest security came from owning one’s own home and then being self-employed. For the older generation and the recently internally displaced, the employment market in Cartagena offered them very little, especially the men. One participant, Carmelina, lamented that in the countryside, her husband’s skills were honorable: he could plant, he could tend fields, he could feed people in the community with the food that he grew and sold. Now that he was in his forties, the only jobs for him were in low paid construction or recycling; even janitorial
work jobs were hard to find if one had an address in Nelson Mandela and often required connections (palancas) that only the urban population had access to.

The few domestic workers and nannies I met in Nelson Mandela were all “internada” (interned or locked in, 24 hours) and paid as little as 150 dollars a month (the minimum wage was 360 dollars a month) with only one day off every eight or fifteen days. The reasons for this kind of employment abuse compared to domestic workers in Olaya and Las Colinas is that in the latter two neighborhoods, women had addresses that their employers could find, or at the very least, addresses that existed. If domestic workers from Olaya or Las Colinas stole from their employers, they could be found, whereas employers knew that the police rarely entered Nelson Mandela, so the women who employed Nelson Mandela residents as domestic workers tended to pay them less, restrict their movement more, and often came from lower socioeconomic classes themselves. One domestic worker in Nelson Mandela I met worked for a local teacher and another worked for a woman who was a cleaning woman herself in one of the hotels in the Centro Historico.

2.15 URBAN DEBT/RURAL CONSEQUENCES: BORROWING AND UTILITIES IN MANDELA

Both economic insecurity or a lack of steady employment and attempts to create economic security through self-employment led many women in Nelson Mandela down the path of borrowing from loan sharks, or in the local vernacular, “daily paid” (pagadiarios) or daily lenders (prestadiarios). Female participants in Nelson Mandela routinely cited outstanding loans with paisas pagadiarios as their greatest source of stress. Cindy, who lived behind the billiards hall with her mother, her four sisters, and her sisters’ children, told me she had outstanding debts with loan sharks in part to pay for
her transportation and books for her technical nursing program. Cindy had tried working part-time as a nanny while she attended classes, but the woman she worked for routinely showed up late, forcing her to miss her class (lest she abandon the woman’s child and be arrested), delayed her pay or treated her condescendingly even though her employer had not even completed high school herself. Cindy then had two choices: drop out of nursing school and become a fulltime domestic employee (possibly forever) or take loans from the pagadiarios that were coming through the neighborhood with more frequency. I asked her why she decided to take the debt rather than follow in her older sisters’ paths as domestic workers, especially given that paying the debt was a constant source of stress and insecurity for her.

Cindy: I think it is because, I think it is because when someone, or maybe it is, I want to develop as a person. I want to have a source of employment that is better. I don’t want to be enslaved in a family home as a domestic worker, to endure all of that humiliation and everything. Or maybe, what I want by getting ahead, or I don’t know, that is to say, I don’t know why the rest of them (her sisters) didn’t have this, this, this spirit of, how to say the word, of something inside you wanting to get ahead, to study. I sincerely don’t know or maybe, I don’t know, maybe there wasn’t the opportunity for them.

Jessica: Do you think part of is because you never got pregnant? (Her boyfriend of five years was infertile and she planned to leave him after she finished her nursing program).

Cindy: No. I think that even if I had gotten pregnant, I would have kept studying. I don’t think having a child would have stopped me from studying.

While the loan shark that lent Cindy the money for her nursing program was a paisa, the collector who came on a daily basis was a local costeño. I once saw Cindy teasing him like a neighbor or a brother when he got on his motorcycle with her full daily payment. “Hey, you, bastard! If you are not going to give me back at least the 1500 pesos (almost a dollar) that I need to take the bus downtown, at the very least you could give me a ride!” “Not allowed!” He shouted, laughing and waving as he negotiated the ruts running down the hill. All of Cindy’s sisters, her mother, and her boyfriend, contributed
to paying Cindy’s debt with their pagadiario. “He’s a bastard, but he’s good.” Cindy said, laughing, as she returned to talk with me. “But he takes all our money so I like to fuck around with him.”

Cindy’s family was the only one I observed in Nelson Mandela that had such an easy relationship with their pagadiario. Women from Olaya had told me that the pagadiarios in Nelson Mandela and the squatter neighborhoods tended to be the most dangerous. They often lent less money and at higher interest rates, coming around every day (true to their name) to begin collecting ten to thirty percent interest from the first day onward. In Olaya, they often lent greater quantities of money, and collected weekly. Leda in Olaya explained: Because in Mandela the people (the pagadiarios) are a little bit harder working (in collecting their debts). I don’t know but I have seen people who get involved in this and...that’s it, well, umm-mmm, they maybe want to charge justice by their own methods, as we say, but not to murder. This, this has happened to me in the past that I have been late with my payments and I tell him, “Ay, what has happened is that I don’t have the money.” “Relax” [He will say] “I don’t have the money today, that’s it.” But sometimes they do respond there (in Mandela) [with violence].

In Mandela I witnessed three cases where participants did not have the money to pay the pagadiario that showed up, and two different strategies were employed. While sitting and chatting with one participant, Reina, on her front porch, just three blocks down from the billiards hall and a block behind the main avenue, we watched as her neighbor and friend, Lola (also a participant) quickly exited her house, looking up at us but not smiling, with her two boys in tow. Lola crossed the path and entered Carlota’s house, to our left. The door of Carlota’s house had been open, as it habitually was, since Carlota’s children often passed between the three homes as if they were all their own, but this time Carlota looked down the path and quickly shut the door as Lola and the boys entered. Not two minutes later, a paisa pagadiario on a motorcycle pulled up through
the alley and took out his stack of restaurant receipts, on which the debts and payments were recorded. He stood at Lola’s door, banging for a minute, never acknowledging us, as Reina and I kept talking, watching him. When no one responded, he stuffed the pads back in his bag and got on is motorcycle again.

What is interesting about this micro pro-social interaction in response to insecurity is that Carlota was also a paisa, and her husband, along with his brothers, owned the market at the end of the alley and across the street. There was a clear enough path and close enough proximity between Carlota’s husband’s paisa market and the homes of these two women that Carlota’s boys could shout back at her from the store when she sent them to get something. The three women and Reina’s mother, along with another woman who lived directly across from the paisa store, were all extremely close, even though none of them had lived there longer than seven years. The women regularly traded childcare services, drank soda together in a circle in the afternoon, or beers if one of them had procured a few bottles from a different store so that Carlota’s husband would not know they were drinking during the day. Reina told me that the entire strip where they lived was safer precisely because of Carlota and her husband’s business at the end of the alley. The women on this alley had formed an alliance, a friendship, with a paisa family that protected them in the same way they might have in the countryside. In turn, Carlota informed me that she was taking part in a public health training program offered free of charge by an NGO that other women told me was supposed to be exclusively for internally displaced people, but the costeñas who cared about her in the sector had helped her get her enrolled. Here, the relationship between paisas and costeñas was symbiotic, and their pro-social engagement was recognized as the cause of their greater collective sense of security.

Jessica: And in this neighborhood are there extortionists (vacunadores)?

Reina: Sometimes, it has been a while since they came around the last time.
Jessica: But because none of you have a business, they never charge you, right?

Reina: Ah no, but businesses based on extortion, or on vacunas, they aren’t rare. But from what I know around here, no. I don’t believe they are around, right around these sides around here, no, like, it is very rare that someone sees that anymore. Because the girl from right there (her neighbor, Carlota), she has her business there and, no (because they are paisas who are friends with the women on their street).

Jessica: So nobody bothers you.

Reina: No.

Jessica: Oh, good. And where does this come from? Where does all this money come from, all this money that the pagadiarios lend out to other people?

Reina: It comes from these same businesses (the paisa markets). But it has been a while since I have heard any of this. A while.

Jessica: But from your knowledge, has this happened in Mandela or no?

Reina: No, no. I always hear a lot about it, but I imagine that these have to be people that already have huge debts, in millions of pesos, it has to be (that level of debt). That they are going to murder somebody here? Yes, I have heard about in Mandela, that there are these kind of extortionists, but I don’t know specifically in what part (they are operating) anymore. It is not here [gestures up and down her street].

On the alleyway where Lola, Reina, and Carlota lived, the affection that the women had for each other, regardless of their different identities as paisa entrepreneurs and internally displaced costeñas, helped protect them from the specific types of insecurity they could experience as a result of their cultural and socioeconomic positions within the community, at the far margins of the state. This was illustrated in the case of Lola hiding in Carlota’s house on the day she could not pay the pagadiario, and in the long-term, with the costeña neighborhood women helping paisa Carlota qualify for an IDP program and her husband’s business acting as safeguard against other types of possible insecurity by outside paisa loan sharks and extortionists.
In the other case of a participant, Jade, I recorded an instance when one participant could not make her payment and there was nowhere to hide since he approached the house as we were both inside talking. I was in the middle of interviewing Jade, and her husband about the new grandchild they were caring for when their paisa pagadiario (a different one than I had seen at Lola’s down the street) showed up on his motorcycle and banged on the grate with his keys. “Wait just a second,” Jade told him, standing up to get cash from the kitchen counter. I noticed then that the gate was locked where it had been open other times when I came through. She handed him a stack of bills through the grate and waited as he counted. “It is 5,000 dollars (2.50 USD) short.” He said. At first she feigned surprise, but quickly said, “No, tomorrow. Tomorrow I will have it all.” The pagadiario turned and walked away without a word, while her husband just kept rocking back and forth in his chair and staring off to my side. “What was I saying?” She asked, sitting down again, and smoothing her skirt.

I had seen many cases of pagadiarios pass by, many cases of women avoid pagadiarios, and many cases of pagadiarios get paid before I found myself in a situation in Mandela where I was in the house of an interviewee where her pagadiario had taken up residence, refusing to leave until her husband returned and paid him. Selena and I sat in her living room while her two children (whom I recognized) played on the floor. When I entered the house that day for our scheduled interview, I noticed a man in his early twenties (I thought maybe her cousin) sitting slumped on an upholstered chair, watching cartoons and drinking a coke. As I reached the questions about debt and the character of pagadiarios in her neighborhood, Selena’s praise of the pagadiarios seemed a bit out of place given how cynical she typically was. It was not until a full minute into our dialogue that I realized he was in the house with us. The jokes and coquetry used by both Selena and myself to transition out of the tense insecurity of the moment is most evident in the following selection of the transcript.
Jessica: How many years have you been taking out loans with the pagadiarios, for a while?

Selena: Yes, almost a year, almost a year.

Jessica: And was there as much of this when you first moved here, was there much of this or no?

Selena: No, no, no.

Jessica: And is it that you search them out or that they come to you offering loans?

Selena: Well, when this started, they came around giving out dolls and stuffed animals, big dolls, so this is the way that they gained people’s trust and got to know them, and then they offered them their services. This is how it happened.

Jessica: And they are always the same ones that pass through here?

Selena: No, there are different ones, there are many!

Jessica: And the one who works with you is a good person?

Selena: Yes.

Jessica: He has never threatened you or anything?

Selena: No, thank God, no. Up until now, no.

Jessica: And are there others in the neighborhood who have had these kind of problems?

Selena: (Gestures, shaking slightly, at the young man lounging on the chair who I assumed was her cousin). It is him. He is the pagadiario. The ugly one right there! Hahaha.

Jessica: (Momentary silence, then playfully): Oh, well he does look like a good person! (laughing) I would borrow money from you!

Selena: But he is bold (atrevido). He drinks our water, he uses the bathroom.

Jessica: But you aren’t a cachaco, are you?12

12Cachaco typically refers to Bogotanos, but in this neighborhood anyone from the interior can be referred Cachaco, especially if they don’t have the very Spanish paisa appearance.
Paga: I am, yes.

Jessica: A paisa? From Medellin or from Santa Fe or from where?

Paga: A town. [Silence]


Selena: You think he is beautiful? (playfully, relaxed now)

Jessica: Yes, well he is certainly not ugly! Hahahahaha! (Everyone laughs).
[We change the topic immediately to her children]

The potential danger and consequences of the exchange between the pagadiario, Selena, and me did not fully register until the day my transcriptionist, Nina, finished typing up the interview. I arrived back at my hotel room where Nina was working, after having spent the day at one of the psychiatric clinics. It was a full month since I had interviewed Selena, and when I dropped my bag at the door and Nina pulled her ears phones off, I had forgotten which interviews I had asked her to transcribe that day. “Jessica, this interview with Selena- you two were quick, but I am glad I wasn’t there.” She told me, shaking her head. So many other things had happened that I almost had forgotten about the interview entirely when she replayed the above selection of the transcript. This time I sat frozen as I listened. Selena had first invited and then implored me in the discourse to engage in a coquettish banter, to mamar gallo (to joke around) in a way that might ease the potential tension with the pagadiario who was occupying her house and awaiting her husband. We both demonstrated caracter, but through our use of humor rather than defiance or aggression. And it worked. By the next time I visited Selena she was more relaxed as her husband had been able to pay off the pagadiario. Another time when I stopped by for a brief visit and she saw the same pagadiario walking up the street with a debt record in his hand, she even shouted out from the from porch. “Hey! The gringa still doesn’t think you are ugly!” Selena was free from the insecurity of debt in the moment, but maintaining a friendly rapport with this particular pagadiario
was important in the event that she ever needed to borrow again, and from someone who would not directly threaten her, someone with whom she had at least once shared a laugh. Selena had a higher degree of security during our last visit, but she knew that economic insecurity and the stress of borrowing again was always on the horizon.

In addition to start-up businesses, the costs associated with children (food, clothing, medical expenses) or an inability to pay utilities were other major reasons people in Nelson Mandela listed that they took loans from pagadiarios even though it caused them a great sense of insecurity. One participant in Nelson Mandela, Yulisa, who did not have any loans with pagadiarios said she thought it was preposterous that people would take out loans from paisa pagadiarios (who could due direct harm) to pay their bills to the electricity or water company.

If I can’t pay my electricity bill, I don’t pay it, and Electro Caribe will simply cut out my lights. But if I take a loan to pay my electricity bill and I can’t pay the, the pagadiario, I don’t know what is going to happen (to me). Why would these people (in Nelson Mandela) take loans from pagadiarios to pay their electricity bills? Most of them did not have electricity all the time in the towns (they lived in before) anyway.

For many, the issue of having “a house without lights” (una casa sin luz) at night was a source of public shame more than anything else, motivating women to take loans from the pagadiarios rather than have neighbors know they could not pay their bill (because their home was dark at night). The cost of electricity was an increasing source of insecurity for everyone in Nelson Mandela as the neighborhood became more and more connected to the overall city grid. During my first round of interviews in 2011, there were still no individual electricity monitors on homes in Nelson Mandela. All the homes in a particular block or sector were hooked up to the same electric gauge. Representatives from Electro Caribe went into each home to assess how many appliances people had and ask them questions about their daily usage. They would then charge a
slightly inflated flat rate to each home under the “Level 1” price system, dividing up the monthly charge of the single gauge transformer more or less evenly, and collecting the payments door to door (since there was no mail service in the neighborhood). At that time, respondents told me each household was paying an average of 30,000 to 40,000 pesos a month (fifteen to twenty dollars) for electricity.

When I returned for my first round of interviews in January 2012, every home had recently received an electricity gauge, but residents from the billiards hall all the way to the bottom of the commercial sector were convinced that the gauges did not work properly. One participant, who only had a fridge, a television and two light bulbs in her home, said she had been charged 100,000 pesos the month before (over fifty dollars). Her neighbor had revealed that she had been charged only 20,000 pesos last month, but 70,000 pesos the month before that. Two months after I arrived in 2012, the women in the sector of Nelson Mandela by the billiards hall collectively staged a protest and removed all of the gauges from their homes, dumping them in a pile at the top of the hill, next to the transformer. From March to June 2012, no one was cut off from their electricity entirely and Electro Caribe reverted to the old system.

Walking from interview to interview, I regularly encountered Electro Caribe representatives in their white and red jumpsuits roaming up and down the hill, knocking on doors, interviewing women about the problems, explaining possible solutions, and furnishing never fulfilled threats that the electricity would be shut off permanently at the doors that refused to open. “After Olaya, we are the biggest neighborhood.” One woman said. “They are not going to shut down the electricity here.” The optimism was palpable with respect to the Electro Caribe issue, as if they knew that a private company (neither part of the state system nor the para-state or extrajudicial system) would eventually have to correct itself, to run professionally in the same way they someday hoped to run their own businesses. As Mayra explained to me, I imagine that they are going to put in a new
system. What happens is they had a system for the electricity that was charging people with these chips that they had installed, but in the beginning some houses were selected to have the chips installed and other houses were not selected. For example, my house was not selected to have the chip installed, so some houses had chips and some houses didn’t. And so some were supposed to be charged by what they were using from the transformer (because it was measured). I don’t what they were doing. If what they charged people (with the chips) for their electricity consumption was real or not because one time my bill came and it said I had not consumed anything, but I had used the electricity all month, I was here every day.

The issue of sewage was another source of insecurity in Nelson Mandela, but the discourses surrounding it were not just a question of public health. Protests to install a neighborhood-wide sewage system had not resulted in the gentle coaxing of Electro Caribe representatives, but in the disappearance and death of three community leaders who acted as the voice of the project between 2004 and 2010. The nonchalant tone many Mandela residents used when talking about Electro Caribe turned to one of fear when they discussed the installation of a proper sewage system (a canteriado). Although the majority of the homes in Nelson Mandela had city water piped into them and most houses had toilets, they were all gravity fed through tubes that ran into two deep cement gutters on either side of the main avenue. Rain and buckets of water continued to be thrown in the gutters by avenue-facing residents to push the waste water down toward “the farms.”

According to Merelbis’ father-in-law, the city informed residents in 2003 that because there was an ongoing dispute about whether Nelson Mandela was fully in the jurisdiction of the city of Cartagena, or partially part of the neighboring village of Turbaco, neither local government would install the sewage system unless it was paid for by the residents themselves. The first time the residents raised the money themselves, but the money quickly “disappeared” he said. The second time, a Spanish NGO that had
been working in the community raised 100,000 dollars, but that money remained frozen in an account at Banco Santander (a Spanish bank with a branch in Cartagena).

In 2011, the newspapers announced that the queen of Spain, Sofia, would visit Nelson Mandela on her tour of Cartagena. One of the most common topics of speculation among residents was how embarrassed city officials would be when the Queen noticed that Nelson Mandela was still without a sewage system, because certainly she was aware of the Spanish NGO project and would question the delays. I did not attempt to enter Nelson Mandela on the day she was there, but the following week, a number of my participants exclaimed enthusiastically that they had heard that “La Reina Sofia” expressed her disappointment that the sewage system had not yet been installed and that she would follow-up to make sure the money from the Spanish NGO was released. When I returned in 2012, I was so disappointed to see the black waters (aguas negras) of sewage still bubbling over the gutters on either side of the road as the rain came down. I asked Merelbis’ father-in-law about what residents had said about the queen’s promise. “We have the Laura Bush School, the queen of Spain, Spanish NGOs, and my son got a micro loan to start this internet cafe because we live here, in Mandela. Because we are displaced. But the three community leaders who have pushed for this sewage system in the last ten years have all been killed. What does that tell you? We are not part of Cartagena.”
2.16  THE WARINESS OF URBAN VIOLENCE AND
THE PREDICTABILITY OF THE CONFLICT IN
NELSON MANDELA: INSECURITY WITHOUT
DENIAL

A clear trend in the discourse about insecurity and the maintenance of well-being in Nelson Mandela was that the insecurity these women experienced was not defined as urban in nature (as it was in Olaya), but rather as a residual expressions of the internal armed conflict from which most residents had escaped, and all residents were at least familiar with. Similar to Olaya residents, women in Nelson Mandela disregarded the idea that some neighborhoods were morally or mentally superior to others. What many of them did state when comparing their neighborhood to Olaya, however, was that the nature of the urban insecurity experienced in Olaya (gangs, drugs) seemed more unpredictable to them given their own cultural orientation of insecurity in rural areas, using this as the reason they felt a greater sense of well-being living in Nelson Mandela than they might feel living closer to the center of Cartagena, where most Las Colinas and Olaya residents aspired to be.

Jessica: And so would you say you would like to raise your family in this neighborhood or would you prefer to move to another neighborhood. For example, do you think that Olaya is better or worse than Nelson Mandela in this sense?

Idalba: For me, well, in this sense, I think that Olaya is worse because over there they have gangs, it is worse over there, if we were to live over there it might be worse, or maybe for me it would be worse because there are gangs, and they are always clashing with each other, they are always shooting one gang at another, and in this sense, yes, I think it could be worse, I think it could be worse than here.

Jessica: So do you like Nelson Mandela or do you think Olaya might be a
Idalba: Well, for me, here, in my neighborhood, it seems good to me. That is to say, I don’t know if is because maybe we have been living here for a while, but I feel well here, healthy, just like, well, they murder here, you can say that, just like in every neighborhood, the normal amount, because in every neighborhood people are murdered.

Jessica: And who is getting murdered?

Idalba: People that are like...[trails off, won’t disclose]

Jessica: And who does it? Sicarios? (Hired hit men, often associated with organized crime)

Idalba: Yes, Sicarios, and others murder like that too, maybe someone can never know the problem that another person is having, but yes, they murder in this neighborhood just like any other neighborhood.

Jessica: So are the problems like, between lovers, or is something political or are they paramilitary members? Are they gang leaders that are attacking each other or is it because there are sicarios here?

Idalba: Well, I guess in this exact respect I don’t know because the truth is there is so much bad out there, no one knows why it is that some people murder others. Maybe it could be, I guess, they murder people who have debt and the person gets angry and wants to take everything away from that person (the borrower), like that, well, it is that there could so many different motives that we might fail to recognize. One never knows really why they are murdering others. Because maybe the person had been, or he was involved in something, maybe he worked in something that no one else knew about. Who knows what some people do that results in them being murdered. Because they often say, “They are not going to murder a person just for the sake of murdering them. They had to do have done something bad.” But then one might think that some people just get jealous of others, of a particular person, or the person makes them so angry for nothing more than having something that they do not have or so many other things that leaves one asking “Why would they kill that young person?” If he were good and he never was involved with anyone. You understand what I mean when I say that I don’t know?

Jessica: And have you seen bodies here in the neighborhood or never?

Idalba: Yes.
Jessica: In this sector or another sector?

Idalba: Precisely right here, in this sector right around here, they killed someone in the corner by the billiards hall, an old man.

Idalba claims to have a sense of well-being, to feel healthy in Nelson Mandela (although she does not claim Nelson Mandela is a “healthy” or sano neighborhood) not because she views the neighborhood as necessarily safe, but because she has experience living there and she is accustomed to the type of insecurity that is present. Her comment that “they murder here like other neighborhoods” but “just the normal amount” is both a rejection of the moral hierarchy of neighborhoods seen in Las Colinas as well as evidence that individuals can adapt to chronic violence by quantifying the murder in their immediate neighborhoods as existing at “normal” or “abnormal” levels. Unlike the trend of morally vilifying those who are killed in social cleansings in Las Colinas, Idalba specifically cites and then rejects the adage so often heard in Las Colinas, that “They are not going to murder a person just for the sake of murdering them. They had to do have done something bad.” She cites jealousy, among other reasons, as probable causes for unjust murders, but claims no one can ever know (or fairly judge) whether or not a death was justified, using the example of “an old man” who was shot right in front of the billiards hall as an example of how diverse the victims and causes of murder may be.

In another section of the transcript, Idalba refers to rural knowledge about maintaining her well-being or safety in Nelson Mandela, using language that is specific to the illicit drugs involved in the internal armed conflict, language more often used in the countryside, rather than the city. Unlike Olaya and even Las Colinas, where women talked about drug dealers as “vendedores de vicio” (drug dealers) or simply drug users (viciosos) being problematic for security, Idalba talks about how there is open trafficking (presumably of cocaine) happening in Nelson Mandela, alluding to a much grander operation with higher level individuals and a greater movement of product.
In this case, she justifies her confidence about her own safety because she claims she no one is ever going to get her because she has not done anything wrong. Unlike Las Colinas, however, where “doing something wrong” meant being involved with drugs, gangs, or other behaviors the community deemed morally reprehensible, in this context in Nelson Mandela, “doing something wrong” means doing something against the interests of the traffickers, as they are they are the ones who rule the neighborhood at night.

Jessica: So in general, do you feel safe in the street, do you feel like you can walk, you can go where you want and you are not afraid? You’re not afraid?

Idalba: No, I am not afraid. Because thank god, they have never, never attacked me, to say that they are waiting for me on a particular corner or maybe to attack me, no. Because sometimes late into the night they are trafficking and never, thank god, nothing has ever happened to me. I can walk freely around here because I know that I have not done anything wrong. No one is going to get me and they are not going to do anything to me. They are never going to attack me. I can say that they have never done any damage to me, nor to anyone in my house, thank god.

This selection of the transcript is unique to the experience of insecurity in Nelson Mandela. In Idalba’s discussion about her sense of security (despite the trafficking that goes on in the neighborhood), she indirectly admits that the possible perpetrators of violence in the neighborhood are known (because she is out in public at night and therefore aware of their activities) but that she is also known to them (because she is confident that precisely in them knowing her that they will never do anything to her). Unlike the women in Las Colinas, she does not feel the need to be inside her house at night nor that “outsiders” are the ones responsible for the violence that occurs in Nelson Mandela. In Nelson Mandela at night, there is a similar para-political system that existed in the countryside during the internal armed conflict. If one knows the system, as they do in Nelson Mandela, there is little reason to deny that it exists or feign ignorance about how it works.
One might assume that in a Colombian neighborhood where the majority of residents are internally displaced, the population would seek increased security through the end of drug-related trafficking and laundering. For those who earned their livelihoods on the expendable income of their neighbors, the arrests of mafia leaders (capos) and the War on Drugs have often resulted in a trickle-down disappearance of jobs in the service sector, hitting the lowest economic quintile the hardest (even though these same individuals were the most often victimized during the armed conflict). On my last day in Nelson Mandela’s clinic sector in 2011, I secured an interview with an elderly paisa couple, Ana and her husband, who operated the most sparsely stocked neighborhood market I had seen anywhere in Cartagena, right at the edge of the clinic sector and the beginning of the farms. Before the paisa couple even signed the release forms, they wanted assurance that I did not work for the press, the only interviewees who had ever asked such a question. Ana and her husband sat in front of their market on the porch when I first approached them, but with the protective garage door halfway covering their merchandise.

When I asked Ana about their business, she laughed. Ana told me that they had arrived in Nelson Mandela in 2005 from Medellin. There had been nothing but squatters in the sector at that time, but there was the promise of electricity when the clinic was constructed. They could bring their goods directly across the farms from the bus station near Turbaco. When registered IDPs first settled here, there were jobs for them, working for the same class of individuals (paramilitary members and narco-traffickers) who had displaced them from their villages, although not the same individuals themselves. “They (Nelson Mandela residents) worked in construction projects for the narcos, as nannies, gardeners, couriers. People right here, in Mandela. There was a good job (in this line of work) for almost everybody before. Now our store only has oranges, Coca-Cola, some beer. People used to buy (beer) by the case and now they fight violently in front of our
store and sometimes steal from us.” “The same kind of people who used to buy from you by the case?” I asked her. “The same ones.” She told me. “There are many people here now and fewer jobs than ever before because they are getting rid of the narcos. This is why the gangs are forming in the farms.”

In Nelson Mandela, there was a collective understanding among residents about paramilitary members and their goals, and while residents named paramilitary members in the neighborhood and did not actively engage with them because they mostly “kept to themselves,” there was not an extreme level of fear expressed toward these individuals, even among IDPs, because these paramilitary members were not from the same towns where they had been displaced, nor could they economically gain from the meager parcels that residents now occupied. As Denise explained,

The issue is that the paramilitary members were never confronting the guerilla fighters. The paramilitary members went against the farmers, they killed all the farmers who lived there (in the rural sectors). Whatever they wanted, they killed for, those who had farms like Vivian (her neighbor), they evicted. They cast all of them out. Many said, “I will give you 24 hours to get out and if you do not leave then I will kill you.” And the people came here (to Mandela), running away from the villages and towns that they came from and well, they abandoned everything they had.

Denis was a fifty-two year old woman from the village of Maria del Monte, who lived near the clinic. She had left the coastal countryside voluntarily in the 1990s before the conditions became “unbearable,” she told me, moving first to Olaya with her husband and son. Twelve years later she had been driven to the squatter settlements of Nelson Mandela with her adult son, this time she was the one “displaced” from Olaya, as she called it, out of fear that her husband would kill her after he stabbed her in the ribs and attempted to cut off her ear in a jealous rage. She had no formal animosity toward paramilitary members per se, although she did provide me with a list of all the ones she knew of that lived directly in the vicinity of her home, including a couple that lived across the path.
In Nelson Mandela, Denis fondly recalled how she rekindled her former rural pastimes that she had lost while living in Olaya. She liked her female neighbors very much and had even met her married boyfriend through women in the same sector. Her boyfriend owned a small farm less than an hour from Nelson Mandela by bus. Denis spent her weekends on his farm, riding horses with him and tending to the animals while he cared for his invalid wife, who knew nothing about her. He supported her economically with the money he could, and she subsidized her income by renting out a room to the sector’s cobbler and making jewelry that she sold both to women in the sector and to staff and visitors at the clinic.

Denis had not escaped violence entirely by moving to Nelson Mandela, however. In 2007, her adult son was killed on a Saturday night while walking home, close to the clinic. It had been a social cleansing targeting “gangs from the farms” she insisted, on a weekend when both she and the paramilitary member’s family who lived across the path had both been out in their respective rural villages. “They got it wrong.” She concluded simply but painfully about her son’s death. “But I am still safer here than I would be in Olaya, so I stay.”

Social cleansings (limpiezas sociales) did occur in Nelson Mandela, but residents informed me that the way a social cleansing occurred in Mandela was different than those that occurred in Las Colinas, in other urban neighborhoods, and in the zones closer to the farms. In Las Colinas, residents claimed that the individuals who were targeted were not from Las Colinas, but transients or people from neighborhoods like Mandela “where the mentality was different.” In Mandela, residents acknowledged that the cleansings were to rid the neighborhood of problematic residents, but murdering these individuals was not the first option. Instead, the lists of the individuals’ names were posted in public view with a warning that they would be forced to relocate (which they often did simply to the area beyond the fincas) within twenty-four to seventy-two hours or risk being murdered.
I knew of two households, comprising one extended family, that were forced out of Nelson Mandela during my two-year period of conducting interviews there. The homes existed at the end of the eight-home path where Reina, Lola, and Carlota lived. Both Reina and Lola were internally displaced themselves, and as I mentioned earlier, Carlota was a paisa who had come to Cartagena relatively late with her husband and his brothers. By 2004, Carlota told me, the majority of the more central paisa stores in Cartagena were already taken, so her husband and his brothers branched out into the squatter settlement of Nelson Mandela.

The three-house family at the end of Carlota, Lola, and Reina’s path, I was told, was originally from Olaya. They had moved to Nelson Mandela only three years after Carlota, two years after Reina and Lola, yet their homes continued to be made of pallets and plastic sheets, with a dirt floor, while all the other families on the street had at least one basic room now made out of cinderblocks, including Reina, who supported herself by doing manicures and pedicures for women in the neighborhood. The extended family that occupied the three shacks was obviously poor, Carlota told me, but the problem was that they were also “poor of spirit,” blasting a pico inside the house at such a volume that Carlota often sent her sons, along with Lola’s sons and Reina’s daughter, to do their homework in front of her husband’s store, or take their siesta in the backroom of the store since the brick wall on her house often vibrated with the neighbor’s bass. The six children from this family, all under the age of ten, often walked naked and shoeless past Lola, Reina, and Carlota’s homes. Mucus crusted on the little ones’ faces.

In 2011, I had my first interaction with two of the boys in this family while interviewing another participant, Carmelina, who lived a block away. Carmelina rented an empty lot next to her house to another resident who grazed his horse on her property before taking his cart into town to collect scraps and recycling at night. While conducting an interview with Carmelina, a neighbor came and knocked on the door, notifying us that
two “problematic youth” (pelados problematicos) from up the street were throwing rocks at the horse, which was tied to a post. When I returned for my first round of interviews in 2012, all three of the Olaya family’s homes were still occupied. In our first interview in February 2012, I commented to Carlota that I had seen one of the toddlers wandering naked down the path, and she responded that she thought the family would be leaving soon. The whole family, she told me, had shown up on a social cleansing list at the beginning of December (it was now February) but only one of the houses had vacated. The young men in the other house now brazenly smoked crack with the door of the house open precisely at the hour that the school children were wandering up and down this stretch of path on their way home for lunch.

Jessica: Lola told me that the family over there came out in the list, how long ago was that?"

Carlota: My neighbors? It was in December [It is now February 14th].

Jessica: They came out in the list and they didn’t move. And now what?

Carlota: They are even worse now.

Jessica: Did they realize they were on the list?

Carlota: Of course.

Jessica: But at least they aren’t putting pico today, but they lowered the volume of the pico and then they became worse?

Carlota: No, those with the pico were on this side (of the path- the other family). They have moved.

Jessica: How long ago?

Carlota: About eight days ago. They put their names on a list on a pole right there.

Jessica: And Lola told me they sell drugs? Are they drug dealers or is it just about the pico?

Carlota: No (they don’t sell), but the children, they have their children and they are completely neglected. They smoke crack, but they don’t sell.
Jessica: The kids are neglected because they don’t have anything to give them? Or it is that it is not important to them or what?

Carlota: Well it is, like, the people have a very poor spirit. No, they don’t want to get ahead, rather they just want to have children and have more children and that’s it.

Jessica: And would you say the neighborhood has gotten more or less complicated?

Carlota: I would say that I see it as the same, the only good thing that has happened is that on family left.

Evidently, the major pico was gone, but a smaller stereo still loud enough to disrupt our conversation began to blast across the path. Carlota pulled her chair towards me twice more so she could hear me better. When I finally abandoned the idea that my recorder would capture any of Carlota’s voice between the thumping reggaeton and the fan, we looked up to see Lola at Carlota’s front door. She had walked up the hill to retrieve Carlota’s boys from their morning session along with her own. Carlota’s two boys slipped around Lola and headed to the backroom to take off their backpacks. Lola ducked her head in, one hand on the door jam and shouted at us in a voice that could have passed for a whisper given the volume of the music. “We have to get rid of them!” (Tenemos que acabar con ellos!) she said, shaking her head, and grabbing her youngest son by the arm before he could wander off.

Two weeks later the men from this family were also gone, along with the house, all of it packed up and hauled off down the hill toward the farms, the women told me. The family was not dead, Reina assured me, because she had seen two of the young men and one of their wives come up and visit the last remaining house only a week before. The last house standing belonged to the grandmother, who now had the two youngest grandchildren in her care. Here is a selection of my field notes on the day I saw that the second house was gone. Who did it? I asked. Nobody knows. Nobody saw them? No. The signs appear early in the morning and then they are taken down by mid-day. I need
to get my hands on one of the lists. Where did they go? Everyone knew the answer to that question, to an area of invasion further down the hill, towards the clinic, towards (the sector known as) Las Vegas. The pico was also gone. The grandmother, screaming at her costeña grandchildren, the grandchildren, dirty, half-starved, continue to wander back in forth in front of Pablo (Reina’s infant son), Reina, Lola, Carlota’s children, and me. They eye us warily. They never smile or respond when I say hello like the other children in the neighborhood do. (March 15, 2012)

2.17 WELL-BEING AT THE MARGINS OF THE STATE AND THE MARGINS OF THE CONFLICT

For female residents in Nelson Mandela, well-being in light of insecurity was defined in much the same way as it was in other neighborhoods: creating and maintaining positive social relationships with other women in the neighborhood to protect themselves from the negative emotions that were inevitable in an environment of insecurity, and to make themselves known (conocida) as a form of physical protection. For some women in Nelson Mandela, this sense of community was forged in the afternoon shade of palm trees where they sipped beer or played cards together, trading self-help books or studying public health training manuals, passing a sweaty toddler from one neighbor to the next when his weight became too much or making a plate for a friend’s crying toddler. Not all women, however, sought informal social networks. For an increasing minority in Nelson Mandela, well-being was found in the salvation of an Evangelical Church or Jehovah’s Witness Kingdom Hall. More than once I sat with women in Nelson Mandela playing cards as groups of female parishioners in long skirts and long sleeves passed by us to
say their blessing or warn us of eternal damnation. Neither group in Mandela treated the other badly, however, as the card playing or chatting participants would often wave or bless them back, later throwing their hands up and saying “They are our neighbors and they have their particular beliefs,” with Jade once adding, as she sent a missionary away who had come to talk to me as we conducted our interview, “Any ignorant Catholic is a future Protestant” with a laugh.

2.18 CONCLUSION: NEIGHBORHOODS, NATION, INSECURITY, AND COPING

In Cartagena, individual neighborhoods were often associated with specific micro-local forms of violence and insecurity. The type of violence hyper-cognized in an individual neighborhood did not mean that the neighborhood itself was more or less dangerous than any other neighborhood- a social cleansing could be as dangerous as a massacre, a gang of drug dealers could be as lethal as a single narco-trafficker. How women talked about the specific forms of violence in their neighborhood then said more about the identity of the neighborhood’s residents and their perceived positionality with respect to the city of Cartagena, the state of Bolivar, and the internal armed conflict than it did about an absolute spectrum of safety and danger. At the simplest level, women in Olaya perceived local violence as an “urban problem” taking over the city because these women saw themselves as urban, part of the living legacy of the city of Cartagena. As urban residents, they were willing to complain publicly about a lack of bureaucratic and police accountability and take advantage of city services like food subsidies and free counseling with social workers, alongside the para-judicial protection of local gangs. In Nelson Mandela, residents recognized that they lived at the border of the city and the border of the conflict and their collective coping mechanisms revealed
this acknowledgment. Most residents of Nelson Mandela had been forced from the countryside as a result of the internal armed conflict, but quickly settled in a neighborhood that mirrored the same politics of the area they left. Rather than feeling traumatized by this reality, however, residents were able to employ many of the same coping strategies they had in their villages of origin, making alliances with local individuals in power for protection, as in the case of Reina, Lola, becoming friends with their paisa neighbor, Carlota, and her business owning husband or Idalba claiming she was never as afraid in her neighborhood as she would be in Olaya, because narco-trafficking violence in Nelson Mandela had more rules, whereas urban gangs were disorganized and “always shooting” without predictability. These two neighborhoods make Las Colinas in many ways seem like an outlier, which it was, as were its residents.

As a neighborhood established by rural economic migrants before the most intense period of IAC violence in the 1990s and 2000’s, Las Colinas residents were neither urban Cartageneros who could balk at the police or stage urban transportation protests like Olaya residents or in the special class of IDPs like Nelson Mandela residents, who despite their lack of police protection did receive the aid and support of numerous international NGOs and church organizations. Since violence in Las Colinas (in the form of social cleansings) could not be considered an urban problem or an IAC derivative, respondents in Las Colinas examined the cause of violence in their neighborhood through a moral lens, dissociating themselves from the victims through a discourse that assigned moral blame to anyone who was killed and defended the unknown perpetrators as the invisible protectors of a neighborhood that had neither visible police nor visible para-judicial support.
Chapter 3

CHARACTER AND COPING:
“CHARACTER” AND AFFECT
RELATING TO WELL-BEING AND (IN)SECURITY

3.1 INTRODUCTION

In this chapter I explore the various dimensions of the Colombian concept of character (caracter) as they relate to personal narratives about subjective well-being and resilience in environments that feature the types of chronic insecurity described in Chapter 2. I introduce ethnographic evidence that suggests it is not a low incidence of stress or insecurity in Cartagena that correlates to high reports of subjective well-being (bien estar), but rather the combination of three elements: (1) an individual’s appraisal of her innate coping skills as a reflection of a highly valued, resilient “character” (caracter) synonymous with self or personality; (2) the ability to manage stress and anxiety through
pro-social engagement and collective processing as both a giver and receiver of advice (consejos); and (3) the individual management of locally defined negative emotions (anger, anxiety, depression, nervios) relating to insecurity through exercise, meditation and/or prayer to preserve health.

In the second half of the chapter, I explore the second definition of “character” (caracter) in Cartagena, which I touched on briefly in Chapter 2. This second definition of character is not used as a synonym for self or personality, but as a specific performance of potential or active aggression - usually public - when a woman states she must “get a little character” (ponerse un poco caracter) or “demonstrate some character” (mostrar caracter) in order to walk through an insecure area of a neighborhood or confront someone who has wronged her. In this definition, “getting character” or “demonstrating character” is a temporal and performative state, one used for specific situations. This performance of “character” is often explained and contrasted with the types of individuals who are known to be habitually aggressive, an individual who would be described as a person “with a lot of character” (tener mucho caracter), or someone whose primary quality is this element of aggression of being very marked by character (ser muy caractosa). In this former case (having character as a temporal state), the individual definition of character is demonstrated and reinterpreted as an affect or act of vigilance, protest, and (when necessary) aggression against perceived injustice or possible violence.

The ability to “show character” when necessary, then, is a corollary to the collective coping mechanism that aids in the preservation of a resilient or positive character (as self), while demonstrating an offensive stance adapted to conditions of chronic insecurity and injustice. In Cartagena, a woman’s ability “to show character” (as aggression) in order to preserve character (as a pro-social, resilient self) demonstrates intelligence, self-reliance, and perseverance, making her a desirable member of the community with whom other women will want to share emotional support and resources. Character, both
as the subjective definition of the self and the affective expressions of wit and aggression, demonstrates that even under the most insecure conditions, Colombian women continue to see themselves as independent agents in their own life projects, or in the local vernacular, “never just the peel of anybody” (nunca ser la casacara de nadie).

It is widely documented in social psychology that chronic insecurity and violence have a negative correlation with subjective well-being (Das 2010, Kleinman and Patel 2003, Frank and Frank 1985). A more in-depth analysis of how chronic insecurity and violence have negatively impacted the economic and psychological well-being of my participants is further examined in Chapters 1 and 6. In this chapter, I do not argue that residents of Cartagena are immune from the effects of insecurity and violence or that “happy talk” is the only acceptable social discourse. Instead, I aim to show the social value placed on being able to “endure” (aguantar) insecurity and violence and remain a positive person “in spite of everything” (a pesar de todo) through a series of socially inscribed coping mechanisms. In other words, it is not the denial of one’s experiences of chronic insecurity or violence that may contribute to overall high reports of subjective well-being, but an ability to demonstrate that one has lived through these experiences and then provide emotional support to others. In turn, this ability to endure and remain positive reduces the social threat of being viewed as a bitter woman (amargada) who could either become sick and die as a result of her constant stress or contaminate those around her with her chronic negativity and thus become socially isolated.

In the community of women I interviewed in Cartagena, the concept of expressing positive affect as an insincere reflection of one’s interior emotional state did exist. Nonetheless, this performance of positive affect was widely recognized and interrogated by female participants as a courtesy expected in social interaction. This is to say, these women were not in denial of their suffering when they smiled or acted exuberant around friends, even as they shared stories of hardship. Rather, this positive affect symbolically
expressed gratitude to those who were consoling them, so that their friends would recognize that their presence was appreciated. As Alicia explained to me once, “If I am happy (gestures as an outward expression with rotating hands coming from the chest outward), then you feel it and you give it back to me. But if I am sad, sad, sad all the time (repeatedly presses palms down), then you won’t want to be around me anymore and my situation will be worse.”

3.2 EMOTION AS A COMPONENT OF CHARACTER

In Cartagena, female interviewees did have a regional construction of subjectivity although they often tacked back and forth between talking about emotional characteristics as something that could be transitory states or firm elements of an individual’s character. Local constructions of emotional elements that factored into individual personalities did not run the gambit from “happy” to “sad,” but from groups of individuals that were characteristically described as “serious” to those who were “happy,” meaning that “they live so much for today” or “they live too much for today,” implying that such “happy” individuals did not care enough for their long-term economic or physical well-being. On this spectrum, both native cartageneros and paisas (individuals from the state of Antioquia and the city of Medellin) identified paisas as the most serious within the regional groups and people from Barranquilla as the most happy. One cartagenera, Yuli, when I asked her why she moved back to Cartagena after only two years working in Barranquilla, explained the character of Barranquilleros this way: “I don’t want to say that I am a serious person, Jessi, because I am not. I do like to have fun, to joke around even if I take responsibility for my family, and I think about the future of my children. But in Barranquilla, the people are just too, too happy.”

Despite a reticence toward being defined as an “overly happy” character, daily
affirmations of optimism and positive thinking were a ubiquitous part of gift giving and home decor in Cartagena. It was typical to see posters, placards or plastic trinkets in the bathrooms or on the walls of living rooms and bedrooms in Cartagena emblazoned with non-specific religious messages ("Thank you god for this new day"); inspirational messages ("When we reach the top, the issue is no longer about overcoming the strengths of others, but overcoming the weaknesses in ourselves"); or affirmations about the value of interpersonal relationships ("My greatest treasure is my family: They may not be perfect but I love them with all my heart!" or “A good friend is there in the good and the bad”).

Inspirational gifts, always shrugged off as “just a little detail for you” (es solo un detalle) were often exchanged between couples, friends, and neighbors. These positive message gifts often included business-size cards decorated with flowers or cartoons that had personal affirmations on them or reminders of how the recipient was a good friend, a good leader, or a good mother. Optimism was a business, not just a happy face to be marketed to tourists. Upon visiting female participants for a second or third time, they often would show me a small card that a friend had recently given them or give me one of these cards themselves.

In general, happiness (felicidad) was not an emotion that people used to describe as a character definition for themselves. It was much more likely that someone would say that they were happy for someone else because to be happy alone, for one’s own good fortune, was considered selfish (egoista), spoiled/self-centered (conchuda), or irresponsible, as in the case of the Barranquilleros mentioned earlier. The ideal feeling in Cartagena, then, was tranquilidad (tranquility, calmness). Happiness was often cited as one of the most difficult feelings to sustain, even though female participants were careful to make note of it when it was present. The ability to recover from a difficult emotional period and regain tranquility was a hallmark of how women described struggles in their
past. When female participants admitted that they had experienced depression in the past, as a period of days or weeks, they quickly transformed their answer by stating how depression had been a problem they had “travelled to the other side of” (pasar por el otro lado del problema) and found a way to restore “tranquility” to their minds and spirits again, often through the help and support of friends and loved ones.

In day to day life, the most common negative emotions that were listed by participants included the feelings of laziness or boredom (tener pereza, tener flojera, or estar aburrida). The strongest form of anger (coraje) was not once described by participants as something that they held on to for very long. Laziness and low energy were considered precursors to depression, and women would describe the need to find a way to restore their energy once again, regain their “zest” before it became a permanent state and could affect their health. Below are some transcript excerpts of this: Sandy: I have days that I don’t go to exercise, that everything makes feel lazy. I tell you, some days everything makes me feel so lazy, that I don’t even want to get out of bed. I get up because, well, I have to get the children ready, take them to school and all of that. Jessica: And do the children give you energy? Sandy: Yes. Leydis: Sometimes, sometimes one feels so tired (cansada), one doesn’t want to even stand up (ni quiere parar). You don’t want to do anything. Laura: Sometimes we feel stressed about the situation in this country, about the economic situation. For example, that we had wanted my husband to be able to find a good job in a company, but with his age (and age discrimination), there are times, there are days, when I wake up, when it is like, it is like, I am like sad. I sometimes, I say to myself, “I don’t have it in me to keep struggling to get ahead. It just can’t be done.” That is to say I start to allow myself to fall into a depression and nothing. This has maybe also affected my daughter because my daughter is a young girl that doesn’t go out much, and doesn’t have a lot of friends or anything. Sometimes she says to me, “Ay, Mommy, I feel sad.” She says, “Ay, Mommy, why are you like this if I give you everything?” So I think then that maybe this is something that has affected my whole family and I have to start consulting with someone who can treat all of us, that’s the way (to do it).
Female participants often claimed it was very important to share their problems with others in order to unburden themselves or, literally, to unchoke themselves (desahogarse). Balancing the frequency of being an empathetic listener/advice giver and a confessor/advice seeker was critical in interactions and maintaining positive social networks more generally. No particular woman would ever be expected to be the empathetic listener or advice giver in every instance, and likewise, women often mocked other women in the community who were known to be constant complainers/criers (lloronas), conceited (conchuda) or bitter (amargada). Furthermore, although some problems (domestic, economic, etc.) may be ongoing, it was socially expected that a woman would not constantly complain to her friends about the same specific element of the same problem over and over again. Such repetitive complaints would ultimately make her friends become tired (cansada) or bored (aburrida) in her company, assuming that she refused to heed their advice or that it was impossible for her “to move past the problem” (pasar por el otro lado del problema) or “to leave the past in the past” (dejar el pasado en el pasado).

Collectively processing one’s experiences of insecurity and violence also decreased the threat of physical insecurity in the immediate community by continually making oneself “known” (conocida) to others. Sharing stories of personal problems (economic, parental, marital, etc.) was a currency of confidence and intimacy that circulated between women in the three neighborhoods where I conducted fieldwork. Regularly sharing one’s hardships and listening to the problems of others increased the likelihood that a woman would self-identify and be identified by others in the community as someone who was “known” (conocida) by her neighbors, an essential element to social inclusion and the perception of safety. Female participants often premised their stories of social gatherings or errand running in different areas of the neighborhood with a statement like, “I can walk in that area because I am known.” Alternately, they would assure me that I could safely travel from one area to the other either because “You are known over there
so you should not have any problems” or that the participant was “known” in the area and
other residents would identify her with me, indirectly contributing to my overall safety
because knowledge about my character had preceded me.

The circulation of emotional information and personal narratives was also an
important social currency within a regional culture where being labeled as an “open”
person (abierta) was valued and habitually private people were considered “closed off”
(una persona muy cerrada), “tight lipped” (super callada), or “cold” (fria). The rate of
success I had in attaining ethnographically rich data was due in large part to my being
labeled an “open” person, given that I would answer any personal question I was asked. I
further became known to other members in the community through other women talking
about the personal details of my life that I had shared with them. Often, prospective
participants who knew other women I had interviewed would begin our first appointment
asking me more details about a certain estranged family member, my rural childhood, or
my roommate at the university before I even got their demographic information down
in my notebook. I was “known” before I arrived and, in many cases, it was an expected
payment for the interview itself: story for story.

In interviewing women about how they managed personal stress and in participateing in gatherings with women where we often drank until we staggered as a group
to someone’s cousin’s taxi, I witnessed many instances of how women divulged their
personal problems or sense of anxiety to other women in the group. In these cases, the
women listening would often relate stories about a similar period in their own lives and
how they either identified the problem as something they needed to overcome proactively
or how they identified the problem or the emotion that resulted as something that would
pass with time. A 34-year-old mother of one in Olaya explained the connection between
emotion, character, resilience, and patience to me this way:

Juanita: Well, I say that it is something that comes from inside the person
because if one feels well and doesn’t have any problems or anything, then
one is happy, but there are moments when one gets depressed, maybe they remember something or they have a problem in that moment that is happening to them and it is a difficult situation and the person is a little bit sad, but then it is over. Right in the middle of it things begin to pass, and, well, the person returns to feeling normal, at least I am like that. I have problems and everything but in the moment and, in the moment I am sad, but then it is over. Whatever happens I will continue to be the same. I say that yes, this comes from inside with one’s character (the ability to bounce back). This doesn’t depend on where one is raised or anything, rather one is born with this.

Jessica: So even if violence happens to someone, or anything, no matter how bad, the person, their character, is going to be the same?

Juanita: I say that they are going to keep being the same.

In some ways, processing problems collectively demonstrated to others proof of a type of resilient character that many women also agreed was predetermined or genetic (either “in the genes” or “in the blood” of a given individual) and also reflected in the behavior of the individual’s siblings or parents. From a psychological perspective, it is clear how these exchanges reinforce pro-social engagement rather than self-isolating behavior during periods of personal turmoil or widespread insecurity and violence, which could lead to more serious mental suffering.

For this part of my research, I conducted forty-two semi-structured interviews with female participants in two economically marginalized neighborhoods of Cartagena. More than 2/3 of the participants I interviewed or visited multiple times over the course of eighteen-months of formal fieldwork and a total of nine trips coming and going to the region. In Cartagena and throughout coastal Colombia, the term “well-being” (bienestar) was a locally meaningful and ubiquitous category already, so many of my questions focused on how participants defined well-being and how the term well-being was used when women compared the quality of their lives to those around them. In the interviews, I also asked women to reflect about periods in their lives when they felt they had a greater or a lesser sense of well-being in the past, and what they felt they still lacked or needed.
to have a “complete sense of well-being” or to have “one hundred percent tranquility” in their lives. What became very clear over the course of my fieldwork, however, is that well-being was much more often assessed in terms of how one viewed her own or others’ resilient “character” (carácter) in response to adversity and her ability to maintain positive social relationships and personal health during periods of perceived insecurity.

Jessica: So is it true that some people just have a happy character, and others have a sad one?

Lidia: No, because if you are happy or you are sad that is something emotional, that’s it, it is something emotional because character is who you are after the circumstances, or better said, in spite of the circumstances.

Jessica: So the feeling in the moment is not something that you can just choose, or you can decide, like, “I am going to be happy.” It is not that easy?

Lidia: Sometimes the circumstances get to you, or maybe I am feeling well, and then I am sad, or I am angry and then it is over. That’s it. So the emotional state, but not the permanent state, the character, depends on how the person gets through it because the personality of someone is so, like maybe today I am content and tomorrow I am sad, and it goes on like that, these feelings change constantly.

In the excerpt below, Yari (age 37, Olaya) acquiesces that some people are more susceptible to change in their character than others, although her character is strong so she has never changed. She consciously prohibits insecurity from staying “in her chest” (where all fear and anxiety reside) where it could damage her. Yari also refuses to ruminate on the past although she often talked about past problems matter-of-factly with others going through similar experiences when she thought it would help them.

Jessica: And if you had to describe your personality what would you say? What would you say your character is like?

Yari: I am uncomplicated, easy-going, that’s it. I don’t like problems. I have my character\(^1\) when they look for it, but I don’t fight with anyone. I have a volunteering nature. I like to help people.

\(^1\)This is the second definition of “character” or carácter here, which will be explored later in the chapter, but she reverts to talking about character as personality as she continues talking.
Jessica: And do you think this is born inside us or it develops in us over time?

Yari: We are born with it in us.

Jessica: And our experiences don’t change us much then?

Yari: Some yes, but some no.

Jessica: And do you think that you are the same person that you have been since you were young in spite of all your experiences?

Yari: I am the same, the same.

Jessica: And why do you think some people are like you and they keep being happy in spite of everything and there are other people who get thrown by even little things and they can spend time in bed without eating or sleeping?

Yari: Because they take things too much to their chest, they carry things a lot in their chest.

Jessica: And you don’t?

Yari: No, I don’t pay attention to those kinds of things.

Jessica: And do you think about the past a lot or no?

Yari: What has happened, happened. I live in the present.

Yari’s approach to life was epitomical, even stereotypical of how Colombians from the interior would describe the carefree, northern Caribbean population, yet at thirty-seven years old, Yari’s day-to-day life was as marked by intrusion, insecurity, and discord as the trauma of her past forced displacement by armed actors when she was a teenager. Over a period of three years, I walked past Yari every time I visited my interviewees in one section of the neighborhood Olaya. A heavy-set, Afro-Caribbean woman, I would see Yari sitting in front of a small wooden cart with fruit or bread for sale next to the Olaya clinic. A stained apron on, a flip flop dangling from one foot, and eyeing the children that might dare steal a piece of fruit without paying, Yari was a fixture
on the street that led from the main cemetery on the avenue to the clinic, a tiny artery where buses and taxis would drop people off, but rarely enter.

A lot of Olaya’s stories got exchanged at Yari’s cart. As I approached from the avenue, I could often see her engaged in conversation with one woman or another, listing on her fingers the number of things someone had told somebody else, pointing in the direction that she had seen someone run, shaking her head and laughing while recounting how someone had gotten away with something again. If I mimicked her pointing gesture as I passed by and said, “Who went where?” She would tell me to come back at lunch to fill me in. In the first two years of my fieldwork she sold fruit (peeled mangoes, orange slices). Many of her customers were adults and children waiting around for news about their family members inside the clinic. Some were brought to the emergency entrance after fights between “problematic youth” (pelados problematicos) involving sticks (palos) or rocks. Increasingly, in 2011 and 2012, I saw victims of gangs or professional armed actors, with knife or bullet wounds. Often, the victim would be dropped off and the person accompanying him would leave, not wanting to be present if the aggressor(s) returned to finish the job. In 2012, the local tabloid “Q’Hubo?” informed residents that Cartagena’s major hospitals would no longer admit unaccompanied victims of violent crimes. The smaller clinics in the barrios including Olaya and Nelson Mandela still took them in so long as the aggressor was not right behind them, but the door of the Olaya clinic was always locked behind patients immediately after they entered.

Yari occasionally sold fruit and bread to the nervous crack addicts who waited for the young female vendors (usually three or four) to appear outside the east wall of the clinic from mid-morning to mid-afternoon. The vendors were young women between sixteen and twenty years old, who dug through fanny packs of grainy, white-powder filled gel caps for change while they reached for a breast to feed their babies with the other hand. Yari desperately wanted out of the neighborhood, but her mother owned a house
behind the clinic and her common-law husband, Jairo, lived with his sister in a house on the other side of the cemetery. Jairo was an addict, usually using around 6,000 pesos (three dollars or three hits) a day. Yari’s three children from a previous relationship lived with her mother and she did as well, except during a brief period of six months when I interviewed her and Jairo in a small one-room house they rented in one of the alleyways in 2011. During the time she lived with Jairo, Yari’s mother banned her from even seeing or speaking to her children, even though she continued to sell fruit less than a hundred meters from her mother’s front door. Jairo was selling plums and working as a courier for some of the more hidden dealers who sold through the female vendors in front of the clinic, but he got caught so often using the product he needed to be distributing that he lost that job as well.

Jairo always treated me sweetly, but with a respectful, professional distance. He regularly announced my presence to all within earshot when he saw me trudging up the avenue, “Oye, Jessi!” He would shout, pulling his cap off his head and waiving it in the air. This small act in no small way furthered my security as I passed by nervous patrons because he was making me “known” (conocida) before I entered the potentially problematic crowd of transients and patients’ families that gathered around the clinic. Yari would often shake her head and smile. “He is like a child.” She would say in front of both of us. “Where are you headed to day?” She might ask. If I responded that I was going into the “holes” (huecos) of the alleyways, she would send Jairo to accompany me. He would wait outside the house where I interviewed, and lead me back out for 2 dollars. “All he is going to do is spend my money if he is around me,” she would say. “He might as well watch over you and earn something.”

Jairo did a lot, I believe, to keep me safe, owing that I was not seen as someone who could “show much character” (as I will describe in the second section of this chapter), but the same was not true for Yari. Before Yari and Jairo were unable to pay rent, leading
them to be evicted from their home and Yari returning to her mother, Jairo had beaten Yari several times to the point of semi-consciousness. Each time this happened when he would come home in the middle of the night and demand money to buy crack that she had already given to her mother to feed the daughters she was prohibited from seeing. In 2012 when I interviewed her for the fourth time and she provided the excerpt above, she was more content, at least living back with her mother, but she proclaimed quite strongly that she was unchanged, she refused to be changed, by the experience of living with Jairo. She could not leave Jairo completely, she told me, unless she had enough money to get herself, her daughters, and her mother out of the neighborhood. She was convinced Jairo would make good on his threats and kill both her and her mother (but not the girls) if she left him and continued to live in the area. Given the sharp increase in drug and gang violence, she knew it would be impossible for her mother to sell her home for any amount that would allow them to buy something comparable in another neighborhood.

Yari had to “take things lightly” (tomar las cosas suave) she told me, because if she let the problems become too much and it affected her health then there would never be an opportunity for her to help her daughters. At the very least, she told me, she was now employed on commission with a bakery run by paisas from Medellin, selling bread from a small cart instead of fruit, from which she collected 20 percent of the profits. She also knew full well (which she told me with a small smile) that Jairo knew better than to steal the profits of the paisas she was working for. In this brief exchange she showed a “character” of resilience, a self that refused to become embittered by her own hardship, one that actively exchanged advice and laughs with other women who were in similarly insecure situations. But in her commentary about the potentially violent paisas she now worked for, those that might kill the boyfriend who beat her if he dared to steal from her, she raised a brow as she smiled. This was her way, however subtly of “showing character when they look for it” as she described in her transcript. The “they” I came to understand,
was always a code for Jairo.

In general, the stress of insecurity in every form (unemployment or underemployment, neighborhood violence, domestic abuse, past experiences of trauma related to the internal armed conflict and/or fears associated with the conflict today) was perceived by female participants to be a great threat to one’s physical health. The connection between not managing stress well or being too anxious and then developing diabetes, high blood pressure or cancer was so high that women often attributed too much tension, too much pressure, or too much stress as one of the primary contributing factors to their diagnoses. Illness in this sense was considered partially the fault of the infirmed because it was evidence that they did not effectively manage their stress. In many cases, older female participants emphasized that even though insecurity continued to exist in their day-to-day lives, they no longer had the physical constitution, or the robust health of youth, that would allow them to worry or stress without getting sick. Worrying and stress were a luxury of the youth that they could no longer afford. Bella (age 62, Olaya) describes the connection between heart attack and negative emotions in the excerpt below, as well as the role that her innate “character” has in preventing her from experiencing too many negative emotions.

Jessica: Okay, good, and have you ever gone through a period of negative emotions or some time when you felt angry or that you were out of control and that made you get angry?

Bella: [Weighing the question]

Jessica: And what makes you angry?

Bella: [Brief silence]Anger? What happens is that a person who suffers from blood pressure cannot get angry. It can give you a heart attack. I control myself. There are a lot of things that I see but that, umm-mm, I have to control myself.

Jessica: Umm-mm.

Bella: To take things lightly, to ask God to intervene.
Jessica: And when you do feel angry what do you do to lessen the effects?

Bella: No, I just control myself, I control myself.

Jessica: And in your opinion what does a person need to feel well in the world, to feel good about their lives, or to have a sense of well-being? Where does this come from, like how you say that you feel well? What does one need to feel well?

Bella: Tranquility.

Jessica: Umm-mm. And you have this sense of tranquility?

Bella: Me, here, just sitting here? Yes. Tranquility, relaxation, quiet. It is that an old person has to find ways of? [trails off]

Jessica: And have you always had this in your life or is this something new?

Bella: Since I was little. It is my way of being. It is part of my character.

In many cases, older female participants emphasized that even though insecurity continued to exist in their day-to-day lives, that “there are a lot of things that I see” as Bella puts it, their characters were developed enough that they had learned to cope with it without resorting to negative emotions for long periods of time. The excerpt below from Rosalva (age 52, Olaya), further describes these self-imposed prohibitions of stress as a safeguard for health and her dependence on the community around her in maintaining her positive outlook.

Jessica: And well, in your life today would you say there is stress or do you ever feel tension or stress?

Rosalva: No, no. I have left all that behind because this only brings illness and in my case, if there is no money, for example, if I have no money for, for, for breakfast for example, I am not going to get myself stressed and say, “Ah! Why isn’t there money?” I wait maybe a couple of hours. I direct my needs to god in some sense, I don’t know, but someone always brings me something because I sell from catalogues (like Avon) or he [her husband at her side], he finds some work and I am selling from catalogues and someone brings me a payment or I get back something that I have lent to someone else.
In this excerpt above from Rosalva, we see the response of “waiting for the stressful situation to pass” in the same way that Juanita described acknowledging even in her saddest or most depressed moments that she was confident these feelings would eventually pass, or the idea that when it is at its worst, you are already half way through it. Additionally, Rosalva, who was not a particularly religious woman, said she took a moment to direct her needs to god, but in the same sentence she acknowledges that the intervention that will save her from the insecurity will come from the women in the community; that someone will finally repay her for one of her catalogue sales or that a neighbor will suddenly remember to pay a small debt. A confidence that those around you will know when you are most in need or most insecure comes from the practice of “being known.” Rather than simply religious conviction, then, it is a combination of consciously choosing patience and redirecting ones thoughts away from stress, and confidence in the integrity of the relationships built in the community despite chronic insecurity, that gives Rosalva peace of mind in the moments when she might otherwise feel the most insecure.

In addition to reminding themselves that difficult moments always pass, or directing their needs to god, many women actively sought distraction from their problems and explicitly labeled their favorite activities as their daily “distractions” (distracciones o actividades para distraerse). Women who felt stress and anxiety often described the symptoms as “a feeling of wanting to get out, to leave (salir)” or, in more extreme cases, “a feeling of wanting to flee (huirse).” Some women said that anger that was kept inside too long or, in turn, keeping themselves in their home too long with these feelings could turn into depression. If one could not get out and talk about these feelings, then the depression was a risk for the whole family. One woman, Lena, described how her husband had promised that they were going to finish putting the new roof on their home, yet he failed to pay the workers enough so it got delayed and delayed. For months, Elena
told me, she and her daughter, along with her cousin, slept only partially covered by a makeshift roof in their cinderblock home, while her husband went to sleep at the properly appointed home of his mother in the adjacent neighborhood. For weeks, Lena told me she felt constantly nervous and insecure at night because she was living in a home without proper protection. Rather than being able to socialize with her female neighbors after work, she was trapped in a roofless home, afraid someone would jump in and steal her few belongings, all the while knowing her husband had the money to complete the job, but let her remain there, isolated, and this caused her to become depressed.

Lena: It was when they began working here (turning the home from a crumbing structure to one constructed with cinderblocks and a roof). I got depressed because I spent so much time with anger (rabia) because the house was constantly getting wet inside, all of this earth falling in everywhere—disgusting—this mud! Every day I arrived home (from work) and I found the house still like this, every day the same story.

Jessica: And what did you do or how did you feel? How did you know you were depressed?

Lena: I felt bad. I don’t know. I wanted to get out of here and not be here, like that.

This combination of feelings, fear and restriction, turned into anger when it went on for months, and when her expressed anger did nothing to encourage her husband to finish the roof, she said she eventually became depressed and lost her job.

Women who were able to leave their homes often did so, seeking out other women to talk to, but those who could not leave their homes, either because they were waiting on children, or their husbands were home, or it was too late at night, often described the need to get involved in some physical activity that could distract and exhaust them. Janet (age 28) had two school-age children and a toddler. The principle cause of her stress was the insecurity of her housing situation imposed by her extended family. Janet’s paternal grandmother had died four years earlier without a will, leaving behind a cement-block
four bedroom home that Janet’s family and her cousin’s family both claimed as their own. Afraid the state would seize the house if they petitioned the court, she and her cousin divided the house in two with a large cement wall, continued to pay the utility bill in their grandmother’s name, but refused to speak to each other. Janet was convinced that her cousins were also visiting a specialist in witchcraft (brujeria) because she said her furniture was constantly breaking and sometimes in the morning she would see little piles of herbs outside her front door. In this case, even though her home was the cause of her insecurity, working on the house was precisely how she relieved her stress, trying to make the home even more “hers.” Unfortunately, she rarely left the house unless her husband was there to watch it because there was so much distrust with her cousins, and without any outings as a couple, their relationship was increasingly tense.

Jessica: What do you do when you feel stressed?

Janet: I get myself to working on something, or I start doing something to get rid of the idea, just to get rid of it.

Jessica: Ah-hah. And this helps you? Like cleaning the house or?

Janet: Cleaning the house, or working on a project, or helping to clean up the street in front of the house, or organizing something. But I get myself to doing something.

Jessica: And what are the symptoms when you feel stressed?

Janet: Anxiety. Or better put, I say that when I am stressed it gives me anxiety and then I don’t feel like eating anything.

Decreased appetite and/or weight loss paired with increased fatigue were the most reported and visible indicators of stress, anxiety, and depression among female participants and likely contributors to worsening physical health when they were endured over a long period of time. Whereas either rapid weight loss or weight gain might be symptomatic of anxiety or depression elsewhere, overeating as a response to stress or anxiety, particularly when the cause was economic insecurity, seemed preposterous to many of my participants.
Those who gained a noticeable amount of weight in a short period of time would be accused of having “too much fun” rather than being suspected of suffering from stress or depression. Yet even when insecurity caused women to lose their appetites, they still made the effort to engage with other women around them to stave off depression and the long-term effects on their health.

Jessica: Was there ever a time you felt stress or you suffered anxiety or nervios? Did you ever go through a particularly insecure period?

Carmelina: My husband and I weren’t working. He had started a business, selling pots, and with that money we were able, we had enough money maybe for breakfast or dinner, or we had dinner and not lunch, like that, there was always two meals, or one meal a day, it was difficult. It was a very difficult year.

Jessica: And what did you do to feel better? How did you manage?

Carmelina: No, nothing, because on top of that, to add to that I had my last son and we did not have any money. We were both out of work and we didn’t have money and I got pregnant. And you know when both people are unemployed and pregnant. Well, I said (to him), “I can’t, I can’t abort it (votarlo). I can’t because, umm-mm, because it is taking a life so we have to wait for the situation to get better. No.” And that was that.

Jessica: And did you suffer during the pregnancy due to stress, or was the baby underweight? Did you receive any medical attention?

Carmelina: For the third son, yes (she did receive medical attention). I don’t know, that he, what it was, but I was not eating. For about three months I was not eating.

Jessica: Were you not eating because there was nothing to eat?

Carmelina: No. I was not eating because I had no appetite.

Jessica: And when you were stressed, what did you do?

Carmelina: I went out and I talked with my girlfriends. Sometimes I slept.

Jessica: And did sleeping or napping help reduce the stress?

Carmelina: Yes, or watching television. All these things. Distracting myself.
Carmelina knew that the stress was getting to her precisely because she had lost her appetite and then made an even greater effort to engage with the neighbors around her and distract to herself in order to increase her energy (levanter su animo) again. She knew, she told me, that the next stage of negative emotions (depression) could affect the character of her unborn child, part of a medical ideology of character transmission en utero that I also heard a nurse communicate to my paisa friend, Veronica, when she cried in the doctor’s office. Finally, in paraphrasing what she communicated to her husband “I can’t, I can’t abort it. We have to wait for the situation to get better. No.” Carmelina also demonstrates her willingness to “show character” before her husband and to exercise agency over her reproductive health.

Below is a case of an older female participant who consistently coped with stress by leaving the house and seeking the company of other friends at the first sign of what she described as nervios. She claimed that the act of getting out of the house was an integral part of her health routine and part of her character, but corroborated as positive by her doctor, giving her social rituals medical legitimacy. In the section below, seventy-year old Marta, who is both widowed and estranged from her daughter, talks about the importance of getting out and, more generally, the health risks of those who lead a solitary life.

Jessica: Was there ever a time, or a period in your life when you felt more sad or more depressed, or that you lacked energy?

Marta: Yes, sometimes I get like that and I go to my girlfriends and I talk.

Jessica: Okay, so when you feel that way you get out of the house?

Marta: Yes!

Jessica: Okay, good. And does this help you?

Marta: I talk with my girlfriends. I go to Marisa’s house. I have a friend over there in Las Palmeras (an adjacent neighborhood). I talk with them, yes. Then I come, I come, then I come and I go to sleep here (at the house) with my son (when he returns from work).
Jessica: Ah-ha. So distracting yourself, this helps you?

Marta: Yes, plenty!

Jessica: Okay, and who?

Marta: I cannot be solitary. Solitariness is very damaging to me. Solitariness is very bad. Now my son and I are getting along okay. And I am never alone now because there are the grandkids. “Grandma!” (They yell) And “Here I am, I am here!” “Take this, grandma!” (They say). And I put on the television. But there are days that I have to get out, uh, to see about who I can talk to. Sometimes the grandkids come over here and they get to talking with me. We talk about how things are going in school, and the problems, they start going away.

Jessica: And who taught you to do this, you, yourself?

Marta: Me, myself! I do my part because the doctor told me that los nervios didn’t have a cure and I have to do my part, and he wrote me a prescription for sedatives, but I had to learn to control myself. I had to get out, to go out, I had to talk with other people, to distract myself, because the sedatives, yes, but well, my son told me that he was not going to give them to me because I was going to, because he didn’t want (sic) me to get a habit of taking sedatives. I have to do my part.

Jessica: And are you in agreement with that?

Marta: Yes, of course I am in agreement because I have to take so many pills, anyway! I do it when I feel that way, I go to Marisa’s house, I go to my friend in Las Palmeras, I have another girl friend over there in Nariño. It is good!

Strategizing about how to maintain a sense of well-being and cope with stress during periods of insecurity (and thereby protect long-term damage to physical and mental health) especially when diagnosed with a condition like nervios was a much stronger model for the relationship between well-being and insecurity, than looking at the two as mutually constitutive categories. What is further exposed in Marta’s transcript is that well-being and/or controlling one’s emotions is seen as both an individual and a collective responsibility, one for which the doctors have informed her she must “do
her part,” but “her part” is dependent on being in a large social network: she talks things over with her friends in other neighborhoods and in turn, they come to her, and she is there for her grandchildren. Her son’s refusal to allow her to take the sedatives she is prescribed even though he allows her to keep seeing the same doctor is also quite representative of many Cartageneros’ relationship with the professional medical community since the expansion of public healthcare since the early 2000s. It is also reflective of the medical community’s position that the best way to manage the stress and insecurity in Cartagena’s economically marginalized neighborhoods is with sedatives and anti-depressants, actively depoliticizing the causes of insecurity by only treating the symptoms expressed in individual patients (for more on this, see Chapter 6).

When I interviewed Marta in 2012, my last interview with her, her son had taken a further step in promoting his mother’s social engagement and stress reduction. He had bought her a small wooden chest full of candy, crackers, chips, and filled their freezer with ice and popsicles so that during the hours it was too hot for Marta to walk to her friends’ homes to visit when she felt nervios coming on, she could be engaged with the community through her small sales conducted from her front porch. Not only was Marta pleased with her modest additional income, but I noted during our interview that she had also gotten to know transients in the neighborhood, namely, two female crack users who shouted “Hello Marta!” as they passed by her window on their way to the clinic to buy product during one of our interviews. “They say hi to me on their good days.” Marta told me, beaming. “Everyone wants to talk to me.”

Similar to other studies of well-being, my female interviewees cited stress and insecurity (economic, domestic, political) as some of the greatest predictors of poor health. Many older women also said they were prohibited from feeling angry, depressed, sad, or anxious because of their weaker health and the direct connection between emotion and organ function.
Jessica: I have heard that some people around here say others have died of sadness. What is this?

Ines: Yes, they say that it is sadness. But really what happens is that it comes from depression. “Ay! She died of sadness because her husband died.” What happens is that when you fall into depression, the depression itself can affect certain organs and the person suffers, when the person suffers from stress and depression because you, you are exerting yourself in this, you don’t have the energy for seeing, you don’t eat, so that, there are certain parts of the body that are more affected. It is the heart and your other organs and so what happens is that the heart is not well, it is not functioning normally, and you can’t breathe well. Your liver and your pancreas, they can’t carry oxygenated blood, um, um, that is what leads you to, or that can result in a death. You go to bed and you get up like this over and over again, and then one day you don’t get up because you are dead because you have died of a heart attack or something has happened. But really you do not die of sadness. They tell people it is sadness because that is what people just assume, but from sadness emerges depression, but you can’t die from that alone.

Ines’ commentary on how chronic negative emotions lead to death illustrates one of the principle emotion-health ideologies present in Cartagena. Similar to Rena and Marta, Ines sees a direct correlation between negative emotions, social isolation, and illness, but she also outlines the process of degradation that leads an individual from a temporary state of sadness (an emotional state that can be remedied with greater social support) to depression (an illness that leads to delusional thinking or “an inability to see”) to organ failure (as a result of the physical stress of depression).

3.3 THE RELATIONSHIP BETWEEN MUTUAL UNDERSTANDING AND WELL-BEING DURING PERIODS OF INSECURITY

Contrary to Taussig’s (2005) findings about how extrajudicial violence in Cali, Colombia led to participants in his field site to live in states of semi-permanent confusion
and distrust of all those around them, the women I interviewed in Cartagena consistently emphasized that mutual understanding (comprension) both in their individual households and with the women in their community was the foundation for overall well-being and an important part of being known (conocida) within the community. With the notable exception of substance abuse, the primary cause of discord women cited in their domestic lives was a “lack of understanding” (falta de comprension), which they consistently assured me could be resolved through “more dialogue” (mas dialogo) paired with assurances from their friends that rebellious teenagers and husbands all go through stages that sometimes must be waited out. I asked one participant why she had a greater sense of well-being in 2012 than she did during our first interview in 2011 and she replied that it was because there was “more understanding” in her relationship with her husband. When I speculated that it was because he was drinking less, the following exchange ensued:

Jenni: No, he drinks the same but is that he is no longer as conflictive.
Jessica: And why is that?
Jenni: There is more dialogue between us.

For ways to approach this dialogue, some read self-help books that now appeared in paperback in the grocery aisles of the major supermarkets, but most sought the advice of others or allowed other women to intervene on their behalf.

As a participant observer among many and a friend to a small group of women in Cartagena, I was struck by how rarely any woman ever complained that someone was simply “wrong” (equivocado/a). It was almost always a case that the person simply “did not understand.” In the case of a female interviewee whose friends regularly spotted her daughter hanging outside the one brothel in Cartagena’s colonial center, their judgment consistently included the complaint that their friend’s daughter simply “does not understand” the opportunities afforded to her as the daughter of a retired military officer; that
she wanted “easy money” (plata facil) because “she did not understand” (or had never been taught) how to do “true work” and that she simply “did not understand” the risks of her current lifestyle. Moral judgment was consistently withheld or at least veiled.

Mutual understanding following violent attacks in the neighborhoods was also monumentally important and provided a temporary sense of security through dialogue about an event that might otherwise destabilize the community. Once, in the middle of an interview with a participant, Nancy, on her front porch, we saw two young men with very fair complexions ride up on a motorcycle, casually abandoning the bike in front us before rushing with a gun drawn at the dairy delivery man across the street, who had just received payment for his delivery at the paisa bodega and was climbing back into his truck (an example I referenced in Chapter 2). Somehow, Nancy grabbed my wrist and her daughter at the same time and I was between the wall and the bed in the backroom with the little girl next to me before I began to fully register that a robbery was taking place just outside my participant’s house. Moments after the warning shots rung out and the motorcycle revved and sped away, I could hear the clamoring of women rushing to the street. Nancy looked in on me and laughed. Her toddler was trying to pull me up so we could join all the women exchanging stories of what they had seen as the dairyman sat dazed in front of the bodega, while the bodega owner, who most likely had organized the hit, kept stocking the shelves with the dairy products he had just received. “Everyone is going to want to understand what happened, and we were the closest ones.” Nancy told me, laughing, but a bit exasperated. “Plus this is one of the safest times to be in the street. Once something like this happens, it won’t happen again for at least two weeks.” Security and well-being were immediately restored, even elevated, immediately after the event.

Understanding (comprension) was also essential in maintaining healthy domestic relationships (further discussed in Chapter 4). Balancing stress within the household
first was thought to improve the health of individual members, in addition to making neighbors feel welcome to visit homes where there was not constant shouting, which could be heard by everyone in neighborhoods so densely populated. In other interviews about domestic violence, women would often just point to the houses where they knew it took place and could quote the accusations verbatim. In the transcript below, I ask a woman in her late forties with high blood pressure what it feels like when she is stressed. In previous interviews, she had told me that her husband’s infidelity had been a major cause of stress and insecurity in her household in the past, but they had formed a much stronger bond since losing their only adult son to a fever seven years before, a fever that came over him during a period of sadness after his girlfriend left him. In this section of the transcript, Renata and her husband talk about the necessity of balancing each other’s emotions, particularly when there is insecurity, so that they maintain their health together.

Renata: No, I tolerate a lot, but maybe one moment I have been filing up, I am filling up, the tiny drop is filling up the cup and when the cup is full, it spills over and so there! (gestures an explosion)

Jessica: And do you yell or break things?

Renata: No, I don’t break things. It is the tone of my voice that raises. No, no because I am not one who is going, or rather, one that someone would call “rabiosa” (angry-like a dog).

Husband: And what for? Because I just keep laughing!

Renata: He laughs! He is the opposite of me. He laughs and he laughs, but when he explodes, he explodes triple what I do! Haha!

Jessica: (Laughing slightly) So you just laugh when she explodes?

Husband: Yes, because I can’t follow her in her episode, I have to be the other pole.

Jessica: Two opposite poles².

²Confusion here about the physics of how opposites attract. He means two positive individuals attract each other.
Husband: Two positive poles.

Renata: They attract each other.

Husband: That’s what makes the biggest spark!

Renata and her husband’s interview revealed several dynamics about maintaining emotional balance amid insecurity and the role the community plays. Renata ran a bustling tutoring business on her front patio, which was nothing more than a slab of concrete with a blue tarp stretched between her roof and the neighbor’s retaining wall. For 1,000 pesos (or fifty cents) per child, per day, she would help local students with their homework immediately after they returned from the morning or afternoon session of school. She had no formal training, but she was one of the few women of her generation in that section of Olaya who had finished high school. She saw her work as half business / half service. The paying mothers had helped contribute to her finishing her living room, but she also tutored several children who did not pay. Some had started as paying clients and could no longer afford it. Others were invited directly if she knew they had parents who either threatened to beat them if they got the answer wrong or would allow them to fail their grade (perder un nivel). Renata’s statement that “I am not one who is going, or rather, one that someone would call “rabiosa” is telling in that if she were rabiosa, she knows others in the community would know about it because they would be able to hear her. Even though “she fills up” sometimes, as she says, she wanted others in the community to see her as having a character that was giving and tolerant because these were the traits she was also trying to pass on to the children in the community through her tutoring sessions.
3.4 LIFESTYLE AS A REFLECTION OF CHARACTER AND WELL-BEING

In Cartagena, the expression “to live well” (vivir bien) constitutes the ability to meet one’s basic needs, to live with dignity, a life that others in the community can witness to be humble but decent (humilde pero decente). The locally constructed category of living well was also a category that female participants used to position themselves in the ever-narrowing space between absolute poverty and extreme wealth. Both economic extremes had within them categories of moral reproach or an attack on one’s “character” (as self or personality): beyond simply being poor (pobre), which any individual could lapse into at one time or another, I was assured, there were the categories of people who were indigent (indigentes) or worse, those labeled “muertos de hambre” (starving to death). The latter insult did not indicate so much that a person was literally wasting away from poverty, but a person who had nothing and (perhaps more importantly) had no one that they depended on or responded for, and therefore was a drain on those around him/her and possibly a threat to the social community at large.

In Olaya, it was interesting to note that some transients that entered the neighborhood to buy crack were labeled “muertos de hambre,” especially if they were vulgar, crudely dressed, or threw rocks at the neighborhood dogs, while others were called “crustaceos cariñosos” (caring or lovable crustaceans, crustaceans after their exoskeleton-like thinness resulting from their addiction) or “viciosos cariñosos” (lovable addicts) if the person regularly said “good morning” or “good afternoon” to the women sitting outside their homes, if they bought water, fruit or sweets from female vendors outside the clinic, or if they ever made an effort to engage in conversation without asking for money.

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3 An insult often used by women to describe both potentially violent or unknown. Crack/cocaine/heroin addicts that traversed their neighborhoods as well as men who did not emotionally or financially support their children.
effect, if they made an effort to make themselves “known.”

At the other economic extreme, among those who were economically secure or even wealthy, there were “people of luxury” (gente de lujo), often characterized as being advantage-takers of the poor (aprochvechadores), “cheap” (tacoño) and condescending. It was conceivable that a person could be economically well-off or “a person with money” (gente con plata) and still cast in a morally positive light if the person was also described as humble, decent, simple, uncomplicated, or generous (humilde, sencillo, no complicado, generoso). Individuals described as people “with money” rather than people “of luxury” were those who demonstrated pro-social behaviors and engaged with their community; someone whose personality and character could be known (conocido) even though they may be removed by economic class difference.

Economic insecurity was viewed as a serious harbinger to mental health and overall well-being and one of the most difficult forms of stress to manage, particularly for a younger generation where there were fewer agricultural opportunities, little industry, more language demands in the tourist industry, and far fewer places in the vicinity of Cartagena where one could squat or invade a piece of land and eventually build a home over time. Ines, a 42-year-old woman originally from Barranquilla, says that it is not the insecurity of violence, but the insecurity of the economy, the immobility within the classes, that is the greatest contributor to decreased well-being.

Jessica: What does someone really need to live well, or to be happy?

Ines: Well, first and foremost, they have to improve the level of absolute poverty because I will tell you that poverty, because poverty affects the, the economy of the mind, if there is poverty then there isn’t good education for the person, there isn’t good nutrition for the person. Poverty is one of the primary elements that effects the mental health of a person and, to tell you that the development of the person- if the person is born feeling poor and dies feeling poor- their mental health is not the same as a person who begins life poor and passes on to a more comfortable economic class. It seems to me that a poor person does not have, does not have the opportunity to attain
certain things. I believe that if we are born into poverty and we die in poverty it is very difficult that this person is able to maintain perfect mental health.

Ines took the preservation of signs of economic mobility very seriously as they related to her own sense of well-being. She worked as a hairdresser particular, meaning that she did not work in a salon, but went to the homes of middle class and wealthy women in beachfront neighborhood of Bocagrande and visited the colonial mansions and condos in the neighborhood Manga, near Centro Cartagena. She had gone through numerous economic ups and downs over the course of her life, which resulted in her and her husband constructing a lovely, but small, white washed cinder block home, across the street from Janet and her warring cousins, at one end of Olaya. Although Ines was a very friendly woman, and often sat outside her home to converse with others, she never left her front door open. Inside her living room she had air conditioning, a furniture store quality living room set, and a dark stained dining table. “When I am outside my house, I am in Olaya and I am in Level 2. All of this outside my front door is Olaya, here there may be insecurity, but inside my house, I am in a different estrato (economic class of neighborhood). I feel well in my house, and that is very important to my health and well-being.”

### 3.5 ALTERNATIVE DEFINITIONS OF “CHARACTER”:

HAVING CHARACTER IN ORDER TO PRESERVE CHARACTER OR TO BE A PERSON “WITH CHARACTER”

“Character” in Spanish translates much like the English synonyms “character and personality,” however, the word character in Colombia can have two separate meanings.
The second definition, “to have a lot of character” (tener mucho carácter) or “to be very marked by character” (ser muy caratós), tends to refer to individuals who are known for confrontation, defiance, or aggression. In the context of this definition, “having a lot of character” is considered a permanent (an anti-social, undesirable) personality trait. One participant in Nelson Mandela, Belen, told me that her main motivation for attending the evangelical church was that she needed to find a way to manage one of her daughters who had “too much character, an explosive character day and night.” Women with abusive husbands also often described their partners as having a lot of character, but it was also used as a term to scold insubordinate children who might be pouting or pulling on their mothers during our interviews with a question like, “Why do you have so much character today?” Below is an excerpt of a transcript where one woman from Nelson Mandela, Marlena, describes how she can have character when needed, but she is not marked by character as in “being a violent person.”

Marlena: Well, I don’t have a character that is to say, it is not so strong or rather it is normal, I am not vulgar (grosera). That is the truth.

Jessica: Never?

Marlena: No...I always have the problems that I have, always, but I have never been grosera and I am always the same (as I am now).

Jessica: With everyone?

Marlena: Yes, I am a passive person. I don’t like to be with, I don’t like violence.

By contrast, knowing when “to have character” or affectively show that one can “have character” was also considered a positive part of individual development and essential for surviving in a community marked by insecurity and structural violence. When I told female participants that I had an interview scheduled in one of the alleyways known for gang violence and illicit drug sales, participants would warn me that it was necessary that I “had a little character” when walking alone in those areas (ponerse un
poco caractosa). Showing I had a little character as I walked the streets would make it less likely for others to see me as weak and therefore reduce my chances of becoming a victim of street crime.

Apparently, my participants’ guidance about “showing character” influenced me over a period of months. Once, as I headed up an avenue in Olaya, I crossed paths on the sidewalk with a female participant without seeing her. She stopped, turned around, and shouted my name. Upon recognizing her, I turned and smiled. “Jessi!” she exclaimed. “I didn’t even recognize you when you walked by because your face looks so different. You have a lot of character when you are walking on the street.” Using this participant’s observation of my own public affect as a platform for interrogating other women’s level of consciousness about their public and private displays of “character,” I began asking female interviewees to show me “their face on the street” and “their face when they encounter a friend” during the course of my interviews. Albeit between laughs, female participants would routinely show how they consciously changed their facial expressions when they felt they needed to “demonstrate character” and when they “put on the friendly face” used around “trusted people” (gente de confianza).

In the gendered political construction of affect in contemporary Cartagena, to demonstrate character (mostrar caracer) falls most clearly on a spectrum of affective expressions between being a woman considered “guache” or “grosera” (vulgar) and being a woman considered extremely “pechichona,” (sweet, adoring, and dependent, but possibly also nave). While grosera is a standard Spanish expression, guache is particular to Colombia and Venezuela and pechichona is particular to the northern Colombian coast. In my experience of observing men and women describing other women as “guache” or “pechichona” the former expression tended to have strong regionalized/racialized associations in how it was used (particularly with Afro-descendent or ethnically mixed Caribbean women or coastal women with fairer complexions but lower comparative
socioeconomic status than the speaker). The expression “pechichona” (meaning, literally, always close to one’s chest), was used most often for children, female patients who were cooperating with hospital staff, and women in sex work that treated the hotel staff well and/or acted child-like and innocent for their patrons at the hotel where I lived above the brothel in 2012, expressed by the cleaning women or manager with the expression “that pre-paid (prostitute) is at least pechichona.”

3.6 A LACK OF CHARACTER IN EARLY FIELDWORK AND SOCIAL CENSURE

In 2009, I arranged to share an apartment with my primary informant, Alicia, her two sons, and her common-law husband in her neighborhood Las Colinas, where I had determined to do my master’s thesis research on social cleansings. At this point in my fieldwork, Alicia and I had known for over two years. In 2007, I had been a guest in the hotel where she worked as a receptionist for two weeks and the following summer I rented a room in the same hotel for ten weeks, which was when we became good friends. In the summer of 2009, Alicia’s husband agreed I could share their new apartment and half the rent with them because, as she told him when he first met me, he found my character to be “uncomplicated,” meaning that I would not bring discord to their domestic arrangement. Also, the novelty of my presence, Alicia assured me, would make the transition of Alicia’s adult son returning to live with her after a seventeen-year absence a bit less awkward for him and her common-law husband since I could unite them through my humorous cultural missteps, mispronunciations, and silly opinions that they could observe and then laugh about together.

Two weeks into my stay with Alicia in Las Colinas, I woke up with a fever and white spots in the back of my mouth- I had strep throat, but I had promised my research
assistant, Nina, that I would help co-teach her Saturday morning English class in an adjacent neighborhood. Nina picked me up at Alicia’s house, the bearings of which were still new to me given that there was not a specific address in this particular neighborhood for the apartment (Did I make a right at the Red Cross and go up “the street of the dog” or did I ask for the second paisa store where the old mechanic used to be?). As we walked the four short blocks to the school, I told Nina I felt ill, but she quickly assured me that she would have me home by noon.

When we entered the school so she could sign in for work, however, the well-dressed male director in his mid-fifties immediately informed rather than invited us to lunch at his home so he “could present some ideas” to me. Nina looked at me pleadingly, as if rejecting his invitation could put her minimal salary in jeopardy, so I agreed to join them after the class. At noon, we exited the school to see him sitting in his car, idling. He drove us from street to street, across two avenues and into a completely different neighborhood. After giving us a tour of his three-bedroom home and curtly introducing us to his domestic worker, who handed us each a bowl of soup and a glass of juice, I was instructed to sit down with his fifteen-year old daughter in the living room to “practice English” while he reviewed the roster for incoming students with Nina in the adjacent room. Another woman, who must have been in her mid-twenties, peeked out behind a bedroom door and eyed me warily from the door jam, then stepped back in the room silently.

Increasingly dizzy from the fever, infuriated at having been brought so far, alarmed that the school director had locked the front door gate behind him when we entered the house, and uncertain how to properly exit the situation without jeopardizing Nina’s employment (which was steadier than the work I was giving her), I waited an hour, asking the daughter basic questions in English. When neither the director nor Nina made any move as the living room clock struck two, I tentatively stood up and entered
“Sir, I need to leave.”

“No,” he told me, “I was just about to come in and tell you about a school program that requires your help.”

“No,” I said. “I need to leave. Nina, if you want to stay here that is fine, but I need to leave and I need you to open the door for me.”

The words must have exited my mouth a bit forcefully because the domestic worker looked from me, to him, to Nina as she watched us from the kitchen hatch, where she was drying plates.

“Whatsoever you want,” he told me curtly. “You’re not under any obligation here,” he said as he opened the door and let me out on a residential street, locking the door behind him.

I hailed a taxi and asked the taxi driver to take me to Las Colinas. “Which part?” he asked. I repeated the directions as I had heard Alicia tell them, but the driver had never heard any of those references. “A strip where there is a butcher, and then a commercial pharmacy, and then a small soccer area.” The driver got me close, as close as I could make him go given I only had 5,000 pesos (2.25 USD) on me and no phone number. “Here’s a commercial pharmacy,” he said, pulling over. I stumbled out of the car and scanned the area for a familiar place. I was on the other side of Las Colinas. The sun was blazing and I was shaking with chills when I finally found the apartment 45 minutes later. It was almost 3:00.

By the time I arrived at Alicia’s front door, I was in tears, a little delirious and dehydrated from a fever that was 102 degrees by the time I got a thermometer. Alicia was in the kitchen, drinking a small beer and stirring a pot as the vallenato music blared and her husband, Lorenzo sat in a rocker watching a soccer game. When she saw me through the gate, swollen faced and teary eyed, she threw her drink down on the counter
and ran toward me. “What happened? What happened?” She shook my shoulders with both hands. I was so happy to be home I couldn’t stop crying as she scanned my arms and legs for any clues. “Where is Nina?” She asked. “Did you get attacked?” Lorenzo got out of his chair immediately and directed me backward, pushing my shoulders gently down into the chair where he had been sitting. “Nothing, nothing happened.” I told her, she had my chin between her thumb and knuckle, searching my eyes. “I just feel horrible. I have a fever. Nina’s boss made us go to his house and I got lost on the way home. I’m fine.”

In an instant, Alicia stepped back and righted herself. She looked down at me, shook her head and cuffed me (hard) across my shoulder. “My god, Jessica.” She told me with a mix of disgust and disappointment in her voice. “I thought you had been raped, attacked. This is not an appropriate response [to what happened]. Do you know what I felt when I saw you looking like that at the door?” The whole previous interaction had been less than a minute. “My god,” she said again, and walked a way to take a sip from her beer.

As the full story came out in the hour that followed, my narrative revealed several undesirable or weak facets in my character that Alicia continued to mention through interjections. First, I had lacked “character” (in the second definition of the word) in that I had proven to Alicia through my actions that I was defenseless, easily manipulated, someone who had to be watched over and, as a result, more of a burden to her than she had initially anticipated. I had allowed myself to be persuaded into doing something I did not want to do, persuaded by Nina, no less, who Alicia had already warned me was known to be conchuda (someone who whines or takes advantage). Alicia was aghast that a woman of my age and education level would allow myself to be driven by an unknown man to an unknown neighborhood, and locked inside his house, giving a free English lesson to his daughter. “You are university educated.” Alicia said. “You have to have
a little character. You have to think!’” she told me as she went back to cooking. I sat in the chair with my head down, acting the role of the chastised child she now thought I was, even though she was only eight years older than me. Lastly, and perhaps most importantly, the negative emotional affect I expressed when I did return to Alicia’s home was not only inappropriate for the social and cultural context, but the severity of this response (open sobbing, shuddering, temporarily struggling to speak) had caused undue emotional anguish and confusion for those who cared about me, demonstrated both in Alicia cuffing me, but more so when she asked me, “Do you know what I felt when I saw you looking like that at the door?”

In the years that followed, Alicia often repeated this story to new groups of people when we were drinking or when they asked what it was like when we lived together that summer. It was one of her favorite stories about me, not so much that I had been foolish enough to go to the school director’s house, but that I had been crying “like she had been attacked or raped” when I just had a fever and had gotten lost. The end point of my emotional expression, by the time I reached the door, should have been happiness or gratefulness that I had arrived home; the part about being lost should have already been forgotten. “You have to find the positive side,” Alicia often told me. “And when you find yourself in a particularly difficult moment, the best thing to do is to distract yourself.”

Just as Yari assured me that she “had her character when they looked for it,” female participants who described themselves as habitually “passive” or “without much character” occasionally divulged how this “lack of character” when it was needed had negatively impacted their lives in the past. Reina (age 39, Nelson Mandela) was one of these cases. I got to know Reina over three years in Nelson Mandela, as well as her daughter and son who were fifteen years old and six months, respectively, when I first met them. She lived in a house that she and her mother had built in Mandela with money they had earned after being forced to sell their house to armed actors in the countryside.
Reina did manicures and pedicures for two dollars in the neighborhood and her mother earned money from a one-room studio they had added on the roof of their house. Her infant son’s father was a motorcycle taxi driver in his early forties, and even though they only dated two months before breaking up and discovering she was pregnant, he was a very attentive father. Leo was his only son. Any afternoon I passed by Reina’s house around lunch I might Leo’s father driving up to sit on the front porch and pass the grandmother a wad of bills if Reina was out working.

Reina lamented that she “lacked character” (me falta mucho caracter) when she needed it and this was part of the reason she was reluctant to formalize a relationship with Leo’s father. Despite her ability to “endure” (aguantar) all the difficulties of her life and provide for her children, she partly blamed the abuse she suffered in her previous relationship with her daughter’s father to her “lack of character” or her “lack of strength.” In the except below, she uses the example of her ex-husband’s new wife not tolerating abuse as evidence that this woman simply has the ability to show “more character” than Reina in a way that she admires.

Jessica: And was there every a time in your life when you felt sad, or nervous, or stressed?

Reina: Yes, there was a time when I was pretty depressed. It was when I lived with my daughter’s father because he abused me, he used to hit me, he used to yell every time that he got drunk and he used to try to damage me. I used to wake up, I would wake up first and she (the daughter) would wake up too and see the horrible way that he was treating me.

Jessica: And since your daughter still sees him, do you know what he is like with his new wife? Is he the same? [sic]

Reina: In the beginning, yes, he used to hit her, but the thing is that that she is stronger (than me). She has a lot of character, I think, and now, she is the one is controlling him (es que ella es la que opera a el) so, I don’t know. That’s it. At least that part has changed.

Unlike common scripts of abuse that involve victim self-blame for not being more obedient or attentive, Reina blamed herself for being incapable of standing up to him
and forcing him to stop, while recognizing she could not endure (aguantar) and had to leave. Reina in some ways appeared to be pleased that her ex-husband’s new wife had an ability to demonstrate character because the new wife’s performances had had a positive impact on Reina’s own daughter, who no longer was awoken by violent assaults. Reina contrasts the new wife’s perceived character with her own ongoing fear of her ex-husband, whom she assumes was violent toward both women in a similar way. At the time of the interview, Reina had seen her first husband numerous times, occasionally when he drops their daughter off after visits, but she also volunteered a story about the first time she saw him after the separation, describing with great disappointment in herself how weak she felt, and taking this as a sign that she simply was not quite as strong as other women, that she lacked having character when it was necessary. As Reina explained,

I saw him once when he was walking, he was coming and I was going, for the first time since we had separated. I, um, my feet began trembling because I had always been so afraid of him, it was like I was feeling the abuse in the same ways as when he used to beat me so then I found myself like that again when I saw him. And that’s it. That’s how I was [shakes her head].

“Having character” with one’s husband was also mentioned in an interview with Janet from Olaya. When I asked her if she ever suffered mistreatment from her husband, she told me that the first time he raised a hand to her “I raised a pan at him” and he never touched her again. “Having character” was also about knowing what resources were available to you that could give you greater agency. For Janet and Reina, character was the ability to directly threaten a husband with the same kind of physical violence he threatened you with, for Yari it was aligning herself with others who could pose a threat on her behalf, for Alicia and Carmelina it was defined as saying “No,” to those who tried to intimidate or pressure you into doing something you did not want to do. For all the women interviewed, an ability to have character when necessary was about having
awareness, a willingness to defend oneself when traversing insecure environments, yet maintaining a character of optimism and warmth to those who deserved it.

### 3.7 CONCLUSION

It is impossible to discuss the relationship between subjective well-being and insecurity in Cartagena, Colombia without the conversation centering on the interrelated categorical definitions of “Character” (caracter). “Character” is the definition of an essential self (to be someone with a weak or resilient character, demonstrated to others by how one recovers from adverse conditions). “Character” is also a public affect (to show character), or the ability to walk into an insecure situation without showing fear, a willingness to stand up for oneself publicly. “To have character” in a particular moment also refers to the ability to think quickly and tactically, to prove a shrewd intelligence in confronting insecure situations (something I had failed at miserably, from the perspective of my host family, in 2009). While these last two definitions of character were important to my respondents in describing how they maintained a sense of well-being despite insecurity, they were careful to warn me that such demonstrations of character (as aggressive public affect) should be used strategically and in appropriate situations in order to preserve a strong, resilient, essential self (or character). When public displays of character became the central facet of a person’s identity, the person came to be known as a person “marked by character” (una persona caractosa), a negative, aggressive, and potentially violent person who risked social isolation. Despite the tactics of public affect that Cartageneros used to manage insecurity, coastal culture most valued a person whose character was essentially open (abierta), generous (generosa) and endearing (pechichona).

Preserving a resilient and positive character despite insecurity in Cartagena was seen as essential to maintaining physical and mental health, but this resiliency was not
an individual project alone. My female respondents believed that coping with every kind of insecurity they endured (extrajudicial violence, debt, underemployment, spousal abuse or infidelity) required actively maintaining social contact with other women in the community. One should not wait for the period of violence in the neighborhood to pass or the feelings of depression to subside before emerging from one’s house. On the contrary, it is in the moments that one feels the least secure, my participants assured me, when the individual should seek out companionship with others, unburden themselves of their problems, and ask for advice through the network of reciprocal relationships that existed in every sector of Olaya and Nelson Mandela where I conducted interviews. These strategies to maintain a sense of well-being despite insecurity were thought to stave off the possible irreversible health consequences associated with negative emotions like fear, anxiety, or depression. Cartagena is not a city that has avoided insecurity or violence, but as my data demonstrates, it is far from the “culture of terror” as Taussig (2005) describes. Resilience instead is seen in Cartagenera women’s unwillingness to isolate themselves when the insecurity within their household or on their streets it is at its worst, when they see the symptoms of lethargy and appetite loss but force themselves out of the house and into the streets to participate in the social world around them and then later use these examples as a testament of the strength of their “character,” their self.
Chapter 4

BALANCING THE WELL-BEING OF THE FAMILY WITH THE INSECURITY OF INFIDELITY: WOMEN’S PRO-SOCIAL COPING STRATEGIES OUTSIDE THE HOME

4.1 INTRODUCTION

In Cartagena, opinions varied among female participants about the ideal form and function of a family unit, as well as an array of descriptions about who was included in the definition of “family.” When some women were asked to talk about their family (familia) generally, they restricted their descriptions to the individuals who currently lived in their home (hogar), while others spent an extensive part of the interview talking about their extended family (parientes), including parents, siblings, aunts, uncles and
cousins who may live down the street, in another neighborhood, in their village of origin, or may now be deceased.

Overwhelmingly, the familial relationship that most impacted a woman’s sense of well-being (bien estar) or inner peace (tranquilidad) was the current state of her relationship with her male romantic partner, particularly if they were cohabitating. Interviewees who had been sentimentally involved with more than one man often freely compared their current relationship with men from their past, even more so if we were in a group of three or more women, gossiping (chismoseando) and drinking. Women over the age of twenty most often referred to a male partner as her husband (marido or esposo), especially if they had children together. Identifying a male partner as a husband did not necessarily mean the two were formally married either civilly or religiously, however. As a result of this practice, I often followed up with the question, “Does this mean you are married?” to which all but fifteen of my forty-two participants either corrected me matter-of-factly or conceded demurely (depending on their degree of religious observance), “No, we live in free union” (union libre). The term “boyfriend” (novio) tended to be reserved for less formal commitments among those at the early stages of dating, among childless women in their early twenties, university educated women, or women who were la otra (the other woman) and had a formal relationship with a married man.

There are multiple sociocultural and economic explanations as to why women in Cartagena are more likely to be in committed relationships but are not married, compared to Colombian women in other urban centers, like Medellin and Bogota. Anecdotally, women who identified as Catholic often told me that the only type of wedding that would matter to them would be a religious one, but there were too many requirements. Most women who identified as Catholic did attend mass occasionally (New Years and Easter, baptisms and funerals), but even if they could convince their male partners to attend premarital classes with them, it was also a requirement to present a baptismal certificate.
Given the fluidity of many of their housing situations over the first two decades of their lives, including a number who had left their towns during periods of paramilitary violence, many had lost their baptismal certificates along the way and had no plans to return to their village of origin. Others claimed that they had been informally baptized at home, their mothers or grandmothers sprinkling holy water on them. Women who had converted to Protestantism and had been baptized in that faith were allowed to marry in their new churches, but only after their husbands had completed the exhaustive period of conversion as well, which sometimes took up to a year.

Women who were not legally or religiously married also often expressed that they did not wish to marry, ever. Some believed their spouse might take them for granted after marriage, that it would make it more difficult for them to leave if the quality of the relationship declined, and, for those who had property or parents with property, that marriage would make it impossible for them to pass their property on to their children exclusively or create quarrels within the family if both partners had children from previous relationships.

After many years in free union, I was told, it is often the husband who wants to get married, especially when he becomes less attractive to other women and begins to worry about who will care for him in his old age. This is precisely the decade (in their late 30s and early 40s) when many costeña women are done baring children and are the primary wage earners, particularly those in domestic work and tourism. Marriage then offers little economic security and much less romantic appeal than it might have when they were in their late teens or twenties and a reason why so many women are reticent about the insecurity that could come with making such a commitment. A 45-year-old woman in Olaya, Debra, had been with her partner for 22 years and explained it to me this way:

Jessica: And are you married or?
Debra: No, single. He wants to get married (laughs)

Jessica: He wants to get married? And what do you say?

Debra: Hahahaha! It is him who wants to get married! All the time he says, “Mi’ja, let’s get married, let’s get married, let’s get married.” But I just don’t pay attention (yo no le paro bolas).

Jessica: And why do you think? Is it that it isn’t worth the effort or because you still feel pain? (From past infidelities).

Debra: Yes, it is that at some point all men are going to say, “We are going to make a commitment.” Right now, he is doing well by me: He doesn’t have another woman, he doesn’t have anything going on, but maybe he gets married to me and he is going to make regulations for me, that I can’t walk out in the street alone, that “no” to this, that “no” to that, and for that I reason I want to be, because I say that maybe someday he could fall in love, he could fall in love, and if we are married, he has an obligation to be here, because I am the wife, I say that someday he could fall in love with someone else.

Jessica: It could happen to anyone.

Debra: Just normally, maybe yes or maybe no, but he could, so for that reason I don’t, not like that. For that reason I haven’t wanted to get married because right now he is calm and maybe he would look for a woman that pleases him more than me and then he leaves me and then...

Jessica: You would be a divorced woman.

Debra: Yes, and I don’t to be that.

Jessica: And is he still trying to convince you?

Debra: Yes, every year around December he tells me, “Mi’ja, let’s get married, let’s get married, but I...Well, I tell him, “Ay! But you really don’t want to.” But I don’t answer him definitively, ever. I keep my mouth shut because my daughters are mine (alone). They are not his, they are from my first boyfriend that I went out with before him.

Jessica: Umm-mm.

Debra: And you know that there are men who sometimes don’t love their stepdaughters because they aren’t theirs, they aren’t his daughters so maybe he will stop getting along with my daughters: “No, your mother is my wife, and you two are not going to make the rules around here. The one who rules around here is me!” and then for that reason, I don’t want to because...
Jessica: Are there men who get married and then they become that way, or more that way?

Debra: Married men want to be even more manly (quieren ser aun mas hombres), they want to be more manly so that they...Well, the hope is to leave the house to my daughters, so that if I get married to him and the daughters are not his, then I get married with him and he is going to force me to say that all of this is his, so that is not something I want.

Debra’s transcript reveals both the sentimental and the practical obstacles that marriage (whether civil or religious) could pose for women who had become accustomed to governing their own lives. Many other female respondents had similar positions to Debra, that marriage was an institution for the young, and by consequence, the nave. Even though many women I interviewed had been in long-term domestic partnerships with men for ten years or more, the general belief was that a man proposing marriage many years into the relationship was not symbolic of him suddenly desiring commitment and fidelity or providing any additional security, but a desire to legally or religiously oblige his female partner to support and tolerate him as he aged regardless of how he had treated her in the past or what little economic means he now had to provide for the family compared to her.

The sanctity of marriage (or rather the moral scourge of divorce) also factored into Debra’s decision to delay marriage indefinitely. there was little stigma against women who lived in free union, but to be a divorced woman, as she says, “I don’t want to be that.” Few if any women I met in Cartagena believed that the patriarchal nature of marriage could ever be changed, demonstrated in Debra’s admitted fear that if she married her partner he might become more controlling or that he might steal her daughters’ inheritance if she died. The option that Debra and many other women in free union had was to reject or attempt to coquettishly delay late proposals of marriage altogether, thus maintaining the security of their continued personal agency and the well-being of both their relationship and their individual economic power.
4.2 COPING WITH INFIDELITY

Among the forty-two women I interviewed about their sentimental lives, thirtyfive admitted to having been in relationships where there was infidelity in the past and many talked freely about experiences of infidelity in their current relationships. De facto, cases of “the double home” (casa doble), or the practice of having a primary wife and family and simultaneously having a second steady girlfriend and children where the husband may spend weekends, still exists among men from lower socioeconomic backgrounds. In contemporary Colombia, however, it is most common for men to have children with different women as a result of successive rather than simultaneous relationships (similar to other secular countries). One woman in Nelson Mandela, Merelbis, when asked about double home, told me that if this practice exists it all, it should be for men have enough money to support two homes, but in her observation, in the current period it was “the less money they have, the more women they want to have.” She included her father-in-law but not her husband under the umbrella of this theory. Her father-in-law, who was sitting on a rocking chair next to us, exclaimed, “I have plenty of children everywhere, but I had them all before I was thirty!” He looked right at me and laughed with semi-mock warning, indirectly commenting on my own irresponsibility for delaying childbearing, as he shook his head.

From the primary wife’s perspective, the prospect of enduring “double home” or a husband who has la otra (the other woman) leads to much greater anxiety about economic resources and stability for her own children than a husband who simply has trysts or as they are called, “adventures in the street” (aventuras en la calle). Even among couples that are not legally married, the children that are born unto the primary partner are considered the man’s real or desired children (niños deseados) unless he formally enters a new relationship with the second woman and breaks off his relationship with his
previous partner. The other children are often called “the children a part from the real family” (los niños aparte) or (especially among women from rural sectors) “the natural children” (los niños naturales). In these cases, as I found time and time again, it is very rare that a woman of low socioeconomic status makes any legal claims for child support. Regular payments are largely dependent on the goodwill and economic stability of the father, which does happen often with desired children and much less often with children born from affairs, or natural children.

If a wife discovers that her husband begins spending many nights at the home of another woman, or worse, this woman becomes pregnant, the typical action of a wife was to leave the family home with the children in tow or ban the husband from entering the house (in the case that she or her family owned the home). The hope in this situation was that the shock of being stripped of the “real family” would put the second relationship in perspective. As 30-year-old Ariel described to me:

It was just an adventure in the street, but he wasn’t even her boyfriend, he was never her boyfriend. And she thought that he would, she thought that I would eventually separate from him. She let herself get pregnant and even her mother told her, “Don’t believe that just because he let you pregnant...I don’t know what you are going to do because he is not going to leave his wife for you. You are the one who is going to fuck herself over. He can fight with his wife, but no (he won’t leave her). And yeah, he didn’t want to go for good, so it was me who came and took my clothes, and took all of my clothes out of here so he thought that I would never return. He was there in the house of la otra and I took all of my clothing from here and I left him his clothing there and he could see that I was never going to return or anything. He was there in the house over there, over there like, a week, to see that I was not going to return and he took his clothing and left her.

In a number of cases where there was infidelity, the act of leaving their husbands was not so much a test of their husbands’ love for them, but a test of their husbands’ commitment to their own children and the future support they would provide them. In these cases, the same women told me that their primary motivation for going back to their husbands was for the well-being children. While adulterous, the husbands in these
cases had proven that they were good fathers because during the period that the wives insisted they live apart (in some cases, up to three months), the husbands continued to send money, food or presents to the children and/or send relatives (sisters or mothers) to pick the children up so they could visit with them while they were away from the family home. Of course, if the women separated from their husbands completely and the husbands started a new life with the second woman, this support for the children could be in jeopardy, but the gestures during separation proved the husbands’ commitment to their first family. When I asked Ariel about her decision to return to her husband, she claimed that the overall well-being and security of the family was her primary motivation. As Ariel said,

In spite of everything, the children, when things are like this (gestures at the alleyway of the neighborhood where we are interviewing in Olaya), they need a man in the house because here in this neighborhood, here now I have one voice, one person with character. I mean, with a man in the house, one wants, clearly I have also socialized them well because I talk to them about what is right and wrong, but in spite of everything, something was missing without their father here.

Thirty-year-old Sandy had a similar reflection about what motivated her to reunite with her husband, even after he shamed her publicly by dating a woman who shared the same office that they did and he left Sandy to live with the other woman for a number of months, while all three of them continued to work together in the same space every day.

Jessica: And did you think about leaving him forever?

Sandy: Yes. I don’t know even how we got back together because I had already decided not to live with him anymore. The truth is that I believe I did it more for the boy (her son, Cesar), because it was so hard on him also, because in this situation, when Cesar was like Sarita is now (the two-year-old daughter) with her father, they are always absorbed by the father’s love when they are small. Now that Cesar is older and he is out and about. It would be easier to leave, but now there is Sarita.

Jessica: He would understand the situation better.
Sandy: But when they are little they are always with their dad and their mom, everywhere they go, like Sarita is now (smiles). I say that maybe I did it more for that reason.

For women whose husbands had adventures or girlfriends, the primary concern among lower SES women was that their husbands were spending what little money they had on food, alcohol, motels and “detalles” (accessories or little gifts) that they should have been spending on their own household, jeopardizing their family’s well-being. The economic aspect of infidelity often elicited strong responses about the nature of the injustice, one woman saying “He was out with her, la otra, doing I-don’t-know-what. And you could not find a peso in this house.” Only two women I interviewed admitted that their husbands had given them a sexually transmitted disease (which they both described simply as an “illness” - enfermedad- that they treated with antibiotics).

The dividing line between an adventure and a sentimental extramarital relationship was marked first by whether a husband stopped having sexual relations with his wife, but more importantly (and publicly) was if he began sleeping away from home. Eunice, a young mother in Olaya told me, you can tell the difference between an adventure and a sentimental relationship because when a husband is no longer just having an adventure, when he has formalized the relationship with a second woman and she has become “la otra” (a steady other woman) he exhibits “much colder behavior around the wife” (es mas frio en su manera de actuar con la esposa).

The general opinion among my female participants in Cartagena is that permanent affair, where a husband was routinely away from home, not only jeopardized the primary household in terms of security (through the absence of a man in the house at night when the neighborhood was the most dangerous) and the well-being of the children (through the absence of a strong male figure, as Ariel describes), but also effected the self-worth and mental well-being of the wife due to the shame she experienced before her peers. This nocturnal absence was often considered the most extreme form of disrespect, more
so than even the affair itself, a way that men allowed their spouses to lose face before other women in their immediate community and showed disregard for their physical well-being. Often, when I asked female participants if their husbands were currently having affairs, the response I received was not a definitive yes or no, but an affirmation that whatever the husband was doing, he was fulfilling his primary responsibility of sleeping in the house at night. For example, one woman responded simply: “He sleeps at home so I don’t pay attention.” (El duerme en la casa entonces ya no paro bolas) and another woman told me, with some disinterest: “Who knows? He goes out sometimes, but he sleeps here.” (Quien sepa? Sale en la calle, pero duerme aqui).

Regardless of infidelity or unemployment, the role of a father figure (so long as they were not physically abusive to their children) was considered essential to the full and proper development of a child’s character. Many women whose husbands were unfaithful feared that the children would resent them later if they were alienated from their fathers when they were young. Costeña daughters in particular were fiercely protective and adoring of the fathers who lived with them. At the age of four, one little girl who had been playing quietly throughout my interview with her mother interrupted us the moment her father came home from work and commanded, “Mama, go bring my father his food.” In the case of Lena, a 34-year old woman from Olaya, I asked her if her twelve-year-old daughter Astrid had alienated her father as a result of her father’s blatant adultery. “No.” Lena informed me. “We fight about it because she does not want me to complain about him at all. She tells me that if he looks for another woman she will support it.” Over the three years I visited and interviewed with Lena, she was increasingly convinced (as were her cousins and neighbor) that she was losing her daughter’s respect and affection. This was considered compellingly tragic because Astrid was Lena’s only child, there was no son to adore her, and the collective explanation for Astrid’s emotional retreat was that she spent so much time with her own half sister and her father’s otra at the paternal
grandmother’s house, a house where Lena was not welcome to enter.

In some cases, even if the husband leaves the wife permanently, women said the children might grow up to resent their mothers if the mother found a new spouse, as was the case with Debra. The father of her children, who she remembers as the love of her life, abandoned them shortly after her second daughter was born. One evening in her twenties she left her daughters in the care of own parents and went out with the man that ended up being her partner for over two decades, but she did not return to her parents’ house until the next day. Debra claims that her decision to commit to a new partner (even though she never had another child with this man and he had supported the two girls in addition to his own children during the time they were minors) is something that her own parents held against her (revoking her right to take custody of her own girls). Her daughters, Debra says, inherited some of this resentment from the grandparents who cared for them, even after they moved back in with her.

So the next day (after leaving her girls with her parents to meet this new man), I went to get my daughters but my parents refused to give them to me. But now, now they are grown and they seek me out because they know that I am their mother, but I always, always provided for them economically. I paid for their schooling, I brought them money to buy food, I bought them clothes and I bought them this and that, and then when they were living with me I paid for their school. One graduated, the one (in the photo) over there is Roberta, the little one also graduated and left. That’s it, they left just like that, and they left me alone and that’s it. Because one is always alone in the end. One raises her children and they just up and leave you alone. I am left alone now with no one else other than my señor, no one else. We live here just the two of us, no one else.

According to Debra, even though her parents let the girls move back in with her when they were in middle school and it was clear that the man she had met that evening would be a steady relationship, the girls continued to carry resentment toward her that she had abandoned them for a man who was not their father. In this case, where the mother sought another relationship and the maternal grandparents refused to let her have
custody of her children until she had proved her love through years of economic support and visiting, the mother is almost cast in the role of adulterous father, even though it was she herself who had been abandoned by her first husband (the father of her girls).

Debra comments with a certain level of irony that her daughters continue to harbor these negative feelings toward her, even though they are single mothers themselves, and she wishes they could have a more collaborative relationship together. The daughters regularly send their children (Debra’s grandchildren) to her house to visit her and she is the primary caregiver of the children when the girls are working. Nonetheless, they refuse to enter the house themselves, insisting that Debra and her husband should visit them in their respective apartments.

They tell me to go over to their homes and I just cannot go. They have to come here because I am their mother. I should not have to lower myself to them. They have to come here, yes or no? So if they don’t come here then I am not going over there either. They send their children over here and they call me, but they haven’t come over here anymore. I haven’t seen either one of them.

Debra sees a generational change in how infidelity and serial monogamy are treated among women in her daughters’ generation, but also (to a negative extent) a lack of respect in how daughters show deference to their mothers. As a young woman who took up with another man after being abandoned by her husband, Debra continued to “lower” herself, as she calls it, in going directly to her parents’ house in order to pay for the food, clothing and tuition of her girls who were living with their grandparents. Debra’s own parents had turned her out, and even though she never stopped providing for the girls economically, never abandoned them, she believes that they in a way have abandoned her in their adulthood. They will use her, by sending their children over to her house to be cared for, but they do not show her the respect of ever paying her a visit inside her home, a home which Debra has every intention of passing on to her daughters.
when she dies.

As discussed in great detail in Chapter 2, in Cartagena, the neighborhood is often seen as an extension of the four-walled home, given that the majority of socializing is done between women on porches, balconies, or in the street. It was thus considered the ultimate lack of respect, even greater than spending the night away from his home, if a man ever brought a woman with whom he was having an adventure (aventura), or a woman who had become la otra within the territorial confines of his wife’s sector of the neighborhood.

What constituted the wife’s realm of influence within the neighborhood was subjective, of course, and it is interesting in this excerpt of Debra’s transcript that her neighbors believe her husband and his mistress have entered her sector of the neighborhood, but she disputes it, telling me that according to her, her husband was spotted by an acquaintance of hers in an area she still considered “far away”:

I don’t know if when he goes out, as a man, he is free, certainly, I don’t know if when he goes out he sends his arrows this way and that, but I am not seeing it. It is true. Around here they call me “Chiqui,” and they say, “Chiqui, way over there your husband was seen with another woman.” If it is far away, I am not going to be looking for it and I am not going out in order to fight, either. I tell him, “What you have to do is respect me here in this neighborhood.” Whether or not he does it far away isn’t important.

Here, Debra reports that she rejects her neighbor or friend’s insinuation that her husband and his mistress were too close to the family home. The least a decent husband would do for his wife if he were having an affair, most women told me, would be to keep the relationship far, far from the view of anyone who might know the wife. In Cartagena, this would mean only seeing la otra or the mistress at her home, at a secure entry motel, or at a bar in a far distant neighborhood. A decent husband, women often told me, would never take la otra out to one of Cartagena’s central malls (where families often spent time together and mutual friends might see them), to the beach, or to walk to through the colonial city at night. Least of all, a husband should never invite a mistress to visit with
him when he is with his wife’s children.

In all three neighborhoods where I conducted interviews, there were older women who told me stories of moving permanently from their neighborhood or a sector of the neighborhood after a husband’s affair, not to keep their husband away from the particular woman, but because they had been so ashamed in front of their female neighbors when the husband was caught with la otra close to the family home. One woman in her fifties told me she began taking a bus that had a stop on a different avenue so she could avoid seeing the female neighbors that had seen her husband and la otra on her street.

One of my participants and friends in Cartagena, Veronica, was la otra. Over the course of the seven years I knew Veronica, we often socialized in Cartagena’s colonial center or the resort area of Bocagrande, walking through the cobbled streets at night, gossiping, going to the mall, having a drink near the beach. During the entire time I knew Veronica she was on and off with her married boyfriend, but regardless of the particular phase of the relationship, she always took great pains to respect (i.e. avoid) her boyfriend’s wife’s neighborhood (which was adjacent to the colonial center, and a clear short cut to one of our favorite restaurants). She also avoided walking in the area of Bocagrande where her boyfriend’s mother-in-law lived. Even though Veronica spent time with her boyfriend and occasionally his young daughter on Saturdays at restaurants, the mall or at the beach (meaning that the wife knew who Veronica was and what she meant to her husband), Veronica would never walk down the street or pass near the house where the family lived because, she told me, that would be “cruel” and would only bring about “more problems.”

It often struck me that Veronica took more pains than her boyfriend to show his wife a degree of respect and help her save face. Once when I was visiting Veronica at her apartment while her boyfriend was over, it was Veronica who encouraged her boyfriend to return to his primary home in time for dinner because she knew that the mother-in-law
would be there and expecting him. Of course, the mother-in-law certainly knew about the ongoing affair as well. Veronica and I had even crossed her path briefly on two occasions while walking in the commercial district of Bocagrande, the wave of recognition that passed over the older woman’s face as she looked at Veronica was evidence enough. On the other hand, Veronica knew many women who were the wives in such situations and recognized that the situation was not easy for either one of them. In a way, Veronica’s conscientiousness was a kind of indirect pro-social engagement with the wife. She took on the responsibility for the wife not losing face by encouraging the boyfriend to keep the time commitments he had with his primary family, especially when those outside the family might be present.

Of course, not all relationships between the wife and la otra are so respectfully evasive. Many women, especially those in Olaya, used the word “problems” with la otra to refer to everything from veiled threats and intimidation to violent confrontations. In the case of the sector of Olaya where I conducted my fieldwork, these fights are increasingly recorded by bystanders with videophones and then posted on YouTube. The most recent one, which was shared across the Facebook walls of a number of my participants, was tantamount to a lynching. In the video, the named otra, confronts the wife near a home where I had conducted fieldwork in Olaya, as a male bystander begins filming. While the visiting woman had some female friends with her, at least six women wander in the direction of the fight or exit their homes upon hearing the commotion. As several women engage, striking each other, pulling hair, two men briefly try to intervene while the others begin cheering them on. In the last scene before the video ends, we see the interloping woman lying in the street, unconscious or semi-conscious, her head partially split open and bleeding by the large stick (un palo) one woman had used to beat her three times over the skull. The crowd, which had been cheering for the large part of the fight, soon disperses, and the video ends with the scene of one woman coming over and struggling
to lift the victim or at least drag her from the avenue to the sidewalk as cars pass by.

Over the course of my fieldwork, I witnessed a handful of confrontations between the wife and la otra in public venues, thankfully none as violent as the one described above. Alicia, with whom I had lived during two phases of my fieldwork, owned a small patio bar that had the reputation as a place where men would bring la otra, on Saturday evenings or Sunday afternoons. These small bars or kiosks were plentiful in the low to middle income neighborhoods (Level 2 and above), and they were widely referred to as either “bars for male youth” (bares para pelados), featuring reggaeton music, and where fights would sometimes start in the early morning hours, or bars for la otra, meaning the entrance was well covered, there was a place for men to discreetly leave a motorcycle, and the lights were often dim, with vallenato music playing.

Alicia’s bar was always filled with couples on Friday and Saturday nights, each table respectfully ignoring the patrons around them rather than engaging in conversation, as would be the coastal custom if they were not socializing with some degree of secrecy and shame. On one occasion, while Alicia and I were sitting idly outside the entrance of the bar, guarding the motorcycles of patrons who had parked them illegally on the walkway, a wife recognized her husband’s bike and stormed through the front door, clearing all the bottles off the table between him and la otra. I stayed outside as Alicia went in to intervene. The other couples briefly paused, frozen, and looked up at the wife screaming and pointing at the husband as la otra stood up, backed away, and exited silently in front of my chair. This was common, Alicia said, and in the past, she told me between laughs, the same men might try to return to the same bar with la otra the following week. Even though the wife had caused “the problems” and the husband might have been a loyal patron, it is the husband who is formally banned from the business henceforth because such “scandals” (escandalos) tend to repeat themselves, Alicia told me, and are bad for business because “they make the other couples nervous or think
about their own situations.” Her second year in the business (2012), she hung a sign near the bar that I had seen at some of the other small bars and kiosks that served as lunch counters during the day and romantic rendezvous locales at night. “No Scandals” was all the sign said.

On another occasion, I was spending the day at the hotel where Veronica worked as a manager, when a wife caught her husband exiting the hotel during siesta (when the hotel charged by the hour for affair meet-ups). The wife confronted him on the sidewalk, and Veronica and the cleaning women quickly overheard the wife’s plan to confront la otra in the hotel, so they rushed to lock the gate at the top of the stairs, at the entrance to the lobby. They were able to persuade the wife to wait outside the hotel (the husband had since left, separately) by informing her that they would call the police or the owner if she continued to obstruct the hotel entrance. After knocking on the bedroom door where la otra was hiding, the cleaning women gathered the information that she was completely unknown to the wife. An hour later, they dressed her in one of the maid uniforms and had her exit carrying some sheets and towels to the other hotel that they owned across the street, behind a group of foreign backpacker guests. The cleaning women, Veronica, and I laughed to the point of tears when it was over and several more times when the story was recounted to others. The story was as funny as it was familiar to some of their own accounts of catching their husbands with their own mistresses.

For younger women who have access to social media like Facebook, one strategy for coping with their husbands’ infidelity included commenting vaguely or condescendingly about the cheating spouse or la otra. Below are some comments posted on Facebook from different female participants who were going through periods of “separation” from their spouses during the course of my fieldwork.

And how do you feel now, little darling (feminine), after you have planted so much happiness in bad soil? And after all that he walked out on you. What a tremendous life lesson about how you shouldn’t waste your time on things
that aren’t meant for you, but for their owner. Be advised, with this you can trip once, but not twice.

I regret everything but my children.

What is mine no one will take away from me. Only when I decide, okay?

There is no better phrase then: “A man is not he who has many women, rather he who has one and keeps her happy.”

In the cases illustrated above, the women are coping with estrangement from their spouses by publicly making moral arguments at the same time that they are attempting to elicit support from others who see their posts. Often, other women responded to these posts by selecting “like” (me gusta) or offering a comment about love, gratitude, or the power of god. In none of these cases was anything disparaging ever said about the other woman in question, reinforcing the intuition that many women have sisters, friends and neighbors who are themselves in the position of being la otra so while an alliance of support is forged with the friend who is suffering, condemnation of the other woman, simply for being the other woman, is not viewed as appropriate.

Another form of confrontation between the wife and la otra can occur as threats or harassment over the phone or either woman soliciting the services of someone who uses witchcraft. In the case of Lena, for example, her husband’s mistress used to call her in the middle of the night, and then put the phone up to his mouth so that Lena could hear her husband breathing as he slept at the mistress’s house. The worst, Lena told me, was when la otra found out that Lena was pregnant with a son (both women had previously born only daughters), she began calling more often so that Lena had to hear la otra’s voice while she was sitting in her own home. Shortly thereafter, Lena suffered a late-term miscarriage, which blamed on the stress of her situation with her husband and

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1 While the term “brujería” (witchcraft) was understood by all participants and they agreed that these practices exist in Cartagena, they usually responded to questions about witchcraft with a moral generalized statement like: “Yes, there are people around here who do bad” ( hacen maldad).
la otra. To add even further humiliation to Lena’s case, her husband even refused to leave his mistress’s house when he learned she was having a complicated miscarriage and had to be rushed to the hospital. Women in the neighborhood gathered the money to take her the hospital to have the fetus extracted. “Two blood transfusions,” Lena’s cousin told me. “And Dominic did not come to the hospital once. He stayed with la otra the whole time. And it (the fetus) was a boy.”

While few women talked openly with each other if they suffered from domestic violence, talking about their husbands’ previous trysts or affairs was a common joking matter among participants in the neighborhoods. While waiting to change the linens in the rooms used by couples who had come to the hotel for a quick tryst on their lunch hours, a group of clientele known as “by the hour couples” or “quickie couples” (gente de rato o parejas de rato), the maids, Veronica, and I often joked about men’s sexual predilections and propensity for affairs. In similar cases of joking about infidelity in the neighborhoods, what was particularly important in the discourse was how female participants demonstrated to each other (and to me) that they were neither ignorant of their husbands’ behavior, nor victims. In the cases when we gossiped about a woman who was not present and problems she was reportedly experiencing with her husband, other women in the group often defended the agency and strength of character of the absent friend. In one situation, Veronica, the other cleaning women, and I were talking about Lena (who lived in Olaya but worked as a cleaning woman in one of Veronica’s uncle’s hotels). I commented that I could not imagine how much she was suffering now that her husband had informed her he had taken a third woman (one in addition to la otra). “Well, don’t worry about Lena,” Veronica told us, defiantly. “She is not the peel of anyone. She doesn’t let anyone make her the peel.” (No es la cascara de nadie. No le permite que nadie le haga la cascara.).

Veronica, of course, was la otra in her own sentimental relationship and often
worried that her boyfriend might take another girlfriend if he became bored with both his wife and her. In this light, it is clear that Veronica’s defiant protection of her friend was also a projection of her own insecurity that she was seen as gullible or manipulated for being with a man who is unfaithful. Despite how difficult or insecure the circumstances, Veronica was arguing that a woman with character (like Lena) should never be pitied for not having agency. Even though her situation appeared difficult to us, we owed her the respect of believing that she was making a deliberate decision about staying with her husband, because to pity her or make it seem as if she simply was “the peel” would be to strip her of the last degree of respect that she maintained.

4.3 ENVYING MEN FOR THEIR ABILITY TO LOVE FREELY

Some women of unfaithful partners expressed jealousy, not toward the other woman so much as toward their partners, in particular, that the partner could enjoy the romantic company of others without earning a bad reputation (mala fama) in Cartagena and that women could not. Josefina, a 22 year old nurse’s aide in Mandela, lived in one of the most nicely appointed homes on her block. Her husband had a woodshop in the back of the house where he made doors and cabinetry with his brother. He worked all day at home, Josefina told me, but occasionally went out at night without her. When asked if she knew any women who managed to have an affair or “adventure” (aventura) from time to time in addition to their spouse, she balked at me:

No, no, no. You are asking if we can ever have the same liberty as men? No. Because if someone has her boyfriend and then has a second one, people are going to say, “She is cheating on the husband. She is cheating on the husband.” (le esta metiedo cacho). It is to say that no one is going to see that woman in a good light. It is likely that they are going to say, “That woman is a slut.” (esta mujer es una perra). Umm-mm. So for example with the men
they may say, “He has la otra in addition to his wife.” That is the only thing that they are going to say, but above all the man never gets a bad reputation, he counts on his good luck (of being a man) that he will never have a bad reputation simply for having other women.

Lena believed that at least elsewhere (like the United States), even if the men were also cheaters, the women at least had a little bit more permission to do as they pleased when their husbands were gone, and she often pointed to me as an example of such a free married woman, despite the fact that I was in a committed relationship with someone back in the United States.

It seems to me that all men are like this, unfaithful, that there isn’t one who is good, but I say that at least there the men, like in the United States and out there?it seems to me that it is more liberated, and if a woman has her husband she can still go out with her friends. But not here, here they are generally cachos (cheaters) and there are more cachos here than anywhere else. I say that here there are more cachos than there. Yes, I say that here there are more cachos than there even though there (in the U.S.) there is more liberation than here.

Many native costeñas and even some paisas (who reported far fewer incidents of double home), believed male infidelity was universal, that there was not “a single faithful man in the world,” and, more importantly, that adventures alone were not something worth spending a lot of emotional energy on. Both groups (paisas and costeñas) agreed that the social acceptance of male adultery was greater along the Caribbean coast than it was in interior cities like Medellín and Bogotá. Over the years, I have heard many arguments from individuals from the interior of the country that the issue of infidelity along the coast was a essentially an issue of the opportunities created by the climate: People wore less clothing, it was warm enough for people to socialize and linger outdoors, and this is what led to greater infidelity. One paisa woman I met in the Andean city of Boyaca asked where I was coming from. When I told her I was living in Cartagena,
she immediately told me that although the weather was unbearably cold in Boyaca, she would never move with her husband to the coast because it was better to live in an area where women were “always covered up” in coats and people had to rush from one place to the next to avoid freezing.

The only arguments about ethnicity attributed to rates of infidelity by participants were articulated by costeñas who explained that paisa men cheated less because they were always locked in their businesses and that many paisas continued to marry within their families (marrying 2nd, 3rd, or 4th cousins) so the husbands could not simply leave their wives and take the business with them to a new family. One female respondent, Alcira, was from a rural costeño town, but both she and her husband (who was also costeño) had spent their childhoods in Caracas where their parents had worked during their youth. She attributed the different education they had received in Venezuela to the reason her husband was costeño but very faithful and very much a homebody (casero), even though Caracas was also on the coast. “In some ways we are more Venezuelan,” she told me, when I asked about why she thought her husband had always been faithful. “And I think that may be why he is not like a lot of the men around here.”

In Cartagena, women attributed the reasons for high rates of infidelity to mothers who had not socialized their sons well or the genes of the particular family. As Yari explained, “I say it is because of the way his mother raised him, she gave him everything, but since she has died, he is not accountable to anyone.” When I asked Lena why she believed her husband had taken a third woman in addition to la otra, she responded, “I say that yes, it comes from a person’s genes, because his father was like that and all of his brothers are also cheaters (cachones).” Her husband had explained his adultery to her in a different way the year before, however, telling her that sleeping with one woman for the rest of his life would be like “Eating just white rice every day and nothing else.” As resilient and impervious as Lena appeared publicly in joking about the ugliness of her
husband’s lovers, privately she confided to me that it was an extreme form of emotional suffering, worse than her personal poverty, the meddling of her mother-in-law, or the insecurity of her neighborhood.

Jessica: So what would you say is the most difficult aspect of your life?

Lena: Ah-hah. The cheating (el cacho) [laughs quietly]

Jessica: Umm-mm.

Lena: I have endured so much cheating, truly. So...it is the most difficult, this infidelity, because they are extremely unfaithful and it makes a person suffer so much and it is something that is so difficult. I have lived through this difficult situation for a while and...

Jessica: And he is now with la otra and the other one?

Lena: Yes.

Jessica: So he has three now.

Lena: [brief silence] Three.

The indirect effects of infidelity were also present in her description of what made her feel anxious in her day-to-day life in a separate interview.

Jessica: So in your life, in your life now is there stress or tension? Is there anything around here that makes you feel nervous?

Lena: What makes me feel nervous? The, I don’t know, having problems with my husband and sometimes I think that everything could end from one moment to the next.

Lena experienced profound discord in her home as a result of her husband’s infidelity so much so that she often claimed she “did not even want to be in the house.” Lena lived right next to the clinic in Olaya and across the street from the neighborhood matriarch, La Morena, so all of the women in the area were aware that Lena’s husband had a second daughter who was only four months older than the daughter he had with Lena, in a local culture context where getting another woman pregnant while your first
wife is pregnant (and you should be caring for her and providing for her economically) was considered especially spiteful. Lena's husband was a talented contractor ("with more than 30,000 dollars in the bank," her cousin Alicia often reminded me) yet he allowed his wife, his otra, and his two daughters to live in relative squalor while his mother's home (next to where his office was located in the neighborhood Las Colinas) was immaculately maintained, with three bedrooms, tile floors, and a large front porch, not unlike any middle class home one might find in southern Florida. Lena slept alone in her house so often and feared so much for her own security that she had been reduced to inviting her twenty-year old male cousin to come and live with her so there would be a man in the house at night.

Women who claimed to have consistently faithful husbands tended be evangelical Christians whose husbands had learned "to live in Christ" or the paisa wives of small business owners who never strayed far from their stores. The paisa men, their wives told me, would often drink on Sundays, but the difference between them and the costeños is that they did their drinking at home or at the home of a male relative, never at outside bars or billiards halls. Paisa men’s wives would almost always be present when they were drinking, as well, preparing a big pot of soup for them while they sat in the living room and talked about their businesses or watched soccer.

It was the two palenqueras (a subnational ethnic group of Afro-descendent women from the village of Palenque) in Nelson Mandela who claimed that infidelity was not a problem in their household precisely because of their subculture, that there was greater equality between the genders among palenqueros. Also, women from Palenque had the tradition of always working and never depending economically on their husbands so their relationships were always based on "free will" (voluntad) rather than economic dependency (necesidad). One of the palenquera women shook her head and laughed when I asked if her husband was ever unfaithful, as if the question were preposterous.
When I told her it seemed like a rarity in her neighborhood, she responded:

Yes. Haha! This is an extremely rare household. I mean, I consider my household extremely rare because sometimes my daughter will say to me, “Mami, why are you this way?” And I tell her. “No, it is because we have to, we have to share everything that is going on between us, we have to share everything, we have to share all things and that includes knowing what the others are doing.” These days everywhere what you see is a lack of respect, because I consider it a lack of respect, having so many different households at once, and I tell him (my husband), “The day that you fall in love with someone else you just tell me and I, like a little saint (muy santita), will set you free.”

Women in committed relationships certainly did not have the same social latitude as men to have adventures, but as evidenced by the prevalence of women who had been in two or more committed relationships that included forming a household, it was not impossible for them to meet a new potential suitor while they were still with their current partner. The likelihood of such a meeting was greater if they worked outside the home and their partners were often absent from the family home in the evenings. By my third round of interviews, a number of costeña participants began to tease me about whether or not I had any “admirers” (admiradores), a term I also heard used by women from rural villages at the psychiatric clinic to talk about potential suitors. Simply put, an admirer was a flirtation. Some women talked about having admirers at the central market, a vendor that they regularly visited because he commented on their beauty. Single women often talked about an admirer as a prelude to a boyfriend (novio), someone who called them on the phone, sent them messages or visited them at home, but where there had been no sexual contact. For many women, joking about their admirers or whether or not they had admirers immediately elicited smiles and slaps on my knee, establishing a connection for us collectively about the need to continue feeling attractive even though we were all in long-term relationships.
Especially among women whose husbands were regularly “out in the street,” an admirer could be described as a legitimate threat to their relationship or a felicitous escape. The difference between men and women in these cases was that if a woman left with her suitor, she was unlikely to return to the first partner in part because her decision was more definitive and in part because the original partner would have been completely emasculated. Some men suspected their wives of having admirers even when they did not, as Paloma explained:

Paloma: He asks me, he says to me, “What’s wrong? What’s wrong? What is going on with you? Tell me.” But the words don’t come out for me, no. I am sometimes...I am sometimes like that.

Jessica: Do you feel like he is jealous or he wants more affection?

Paloma: He tells me that yes, he sometimes gets jealous. I don’t know, for me, it makes me laugh. Haha! It makes me laugh immediately because, well, I don’t know how to respond to him because sometimes it is his actions that have annoyed me so much and, you understand me? And he thinks that he should be jealous. He thinks that I am thinking about somebody else!

With Cindy in Mandela, one of her admirers was quickly turning into the prospect of a boyfriend. He had always been a friend of hers, but while she did not think about leaving her current boyfriend of five years due to his adventures, she had recently found out that he was sterile. Since she wanted children, the admirer offered her the exit that she needed.

Jessica: And are you ever afraid that he is going to leave you for another woman?

Cindy: More like I am going to leave him! Hahaha! Due to our most recent problem (his infertility), we can’t go any further.

Jessica: And have you met another boy or not yet or maybe there is a friend or admirer?

Cindy: Yes (silence).
For some women, it is when an admirer, who had simply served the purpose of making the woman feel attractive turns into a real possibility that the woman is forced to weigh the prospects of greater security for her children against her own dissatisfaction with her husband. This disruption, an admirer who wishes to be something more, can lead to periods of sadness, depression, and, even years later, a questioning about whether or not they made the right decision to stay. Also, there was a clear differentiation in the transcript below between admirers, friends, and sentimental relationships.

Jessica: Have you had admirers?

Lena: Well, yes, I have had a lot of admirers, but I got sentimentally involved with someone more than a year ago and this is what got me so...(crestfallen expression)

Jessica: When you separated from Dominic?

Lena: Yes

Jessica: The one who lives in Los Alpes (a nearby neighborhood)?

Lena: No, not that one. He is my friend. I have never had anything going on with him. He flirts with me sometimes I met him when my daughter was two years old. He always pesters me but I have never...

Jessica: So what happened with the other one, did he get married or did you think about taking the opportunity to leave Dominic and never went through with it or?

Lena: Well, it is that I realized I was making a mistake and that things just weren’t like that, in spite of this I, he, maybe...

Jessica: So are you still in contact or not anymore?

Lena: No, he left a year ago for Venezuela.

Jessica: So were you sad when he went to Venezuela because you realized that there was never a real opportunity?

Lena: He wanted me to go with him but I didn’t want to go to Venezuela because I would have to leave my daughter and I couldn’t do that, so I decided it was better for me just to leave things as they were. I have endured a lot here.
While married women certainly would not talk about their admirers in front of their husbands and stir unwanted jealousy, the topic brought lots of laughs and teasing between women when we were in an all-female group or in a group with women and their male relatives. Joking about infidelity between male relatives and female relatives (when they were out of earshot of their respective partners) was also something I witnessed among my closest group of informants. It seemed to build a kind of intimacy and gender equality that did not exist between male and female romantic partners.

Following the funeral of Miranda (discussed in Chapter 5), for example, I was standing with Alicia, her brother, Leo, and her female cousin, Lena. After days marked by our somber public demeanor while we waited for Miranda’s suffering to end, it was with great delight that Alicia’s brother asked to me in front of the other two women, “So, Jessica, do you have a boyfriend around here yet?” And I joked back, “Come on, Leo, I am an extremely faithful wife.” He responded, pushing me lightly, “What’s wrong with the costeño men?” And I said, “They are handsome, but there are too many cheaters.” He laughed so loud the mother of the deceased looked up at us. He then pushed his female cousin playfully and said, “In this family we are all cheaters (cachones), but no one is worse than her!” Lena covered her smile with her hand.

Humor and speculation about sexual behavior also often marked a wife’s description and conjecture about her husband’s paramour.

Belen: I always wonder what it is that a man looks for in the street that his wife cannot give him? That is what I don’t understand about men. I would like to ask them this because I do not understand why they leave their wives so other women, “the other woman” (la otra) as they say here, the other super insipid one is what I say! Hahaha! Even though no woman, no woman can get the ugly bastard to leave me, whatever, she must have had something that he likes, I say. Because I say that a man, that is to say a man, like my husband, who tries to woo another, she must have something that pleases him. There has to be something that she has. I don’t know, there has to be something that he likes about her.

Jessica: Could it be that they just want to distract themselves from their
responsibilities?

Belen: Or it could be...it could also be that they want to experiment, doing things that sometimes with the wife, things one doesn’t do with the wife.

Despite the prevalence if open (albeit coded) discussions about sexuality with a number of female participants in their twenties and thirties (so long as they were not Christian), this was the first time that I had heard any speculation that the role of the paramour was for sexual behavior that would be considered deviant or taboo for the wife. Sitting with the hotel cleaning staff and Veronica at night, we would often talk about sexual acts, which, apparently, were not considered deviant for the women, as wives. If one of the woman yawned and her jaw cracked while we were joking around one of the other women might tease, “Did you have to open your mouth too wide last night, Denis?” And all four of us would roar with laughter while she hit us with a towel and yelled between laughs “You are bad women!” (Son malas!). One Monday, Denis was doing hotel laundry while I was washing my clothes in the other machine when Yudy arrived in the backroom to change into her uniform. “How was your weekend?” Denis asked her. “Another early night where I got out of bed afterward and had to ask him, ’What about me?’ ” Denis laughed. “Well that’s nothing new!” she said. “But then there is Jessica, here, and she’s all alone so we can’t feel too bad!” Seeing as these women worked in a hotel that was, by day, a by-the-hour motel (motel por ratos), their perspectives on the affairs conducted there were especially interesting and complicated. While waiting to change the bed linens between lunch hour guests, the cleaning staff often mimicked the hotel guests whose groans could be heard through the thin doors or rolled their eyes at the men over fifty years old who entered the hotel with significantly younger women (who were often assumed to be paid).
4.4 CONCLUSION: COPING WITH JEALOUSY, COPING WITH INDIFFERENCE: TREATING THE WIFE LIKE LA OTRA

While there might be speculation about the sexual behavior between husbands and paramours, for a wife to be treated like “la otra” in terms of an invitation by her husband to a by-the-hour motel was considered a great honor among costeña women. Between the married cleaning women and female managers at the hotel, a great deal of bragging ensued when a participant revealed that she had been invited to a lovers’ motel by her husband. Women would report on the decorative aspects of different lovers motels around the city to prove to each other that they had in fact been there with their husbands.

In one conversation between two of the hotel cleaning women, Denis and Yudy, and the night manager, Lupe, they teasingly described elements of the hotels that they had visited with their husbands with phrases constructed like the following: “Some people have told me” (laugher) that there is a sofa bed in the Motel Congrejos that is extremely good, I guess, for taking a nap, ah-ha, on one’s side!” or “I have heard (laughing) that rooms in the Mermaid Motel have mirrors on the ceiling, but I don’t know who told me! (laughing).” Lupe also described to all of us seeing a gynecological folding table with stirrups in one of the motel rooms and how at first she had no idea what it was because she had never had a pelvic exam before because she had never been pregnant. All of the highlights of the hotel, minus specific details about sexual behavior, were reported in these conversations, including: How many hours they stayed (revealing how much their husbands had spent on the accommodations); whether they took a taxi or a bus to the motel; how many beers they bought from the minibar or if they had rum instead; even the kind of snacks they ate. At 15,000 pesos an hour on average (7.50 USD or almost
half a minimum wage salary for a day) the details of the hotel and the amount of money
their husbands spent on them there was an indirect report on the quality of their personal
relationship. These stories directly signaled to other women how their husbands still
valued their sexuality to an extent that he would indulge her in the same way one might
with la otra, even though he could simply have sexual relations with his wife at home
without cost.

At first, I was flummoxed about why women who worked in a motel/hotel six
days a week would ever want to spend their few free hours in a motel that was much
lower quality than the one where they were employed in the colonial center. “It is a
special occasion, Jessi. A mini-vacation,” Yudy told me. Yudy reported that her husband
could not afford to go to a motel often, but they tried to go on anniversaries, the day of
love and friendship, and after fights. “It makes you feel special because they take you
there even though they do not have to,” Lupe said. To make the wife feel desired like
the mistress, to take her away to a place that was a luxury, not a necessity because the
relationship was not secret, was the ultimate demonstration of commitment and seen as
a commitment to maintaining the well-being of the relationship. Knowing the inside
of a local motel was worthy of bragging about to friends in order to build common
experience, a testament to the well-being of the relationship. Through these stories,
the women also communally coped with the disappointments and insecurities in their
domestic relationships that lingered between and beyond invitations by their husbands to
the area local motels.
Chapter 5

LOVE AND SADNESS GROW IN THE WOMB: EMOTION-HEALTH DISCOURSES AND COLLECTIVE RESPONSES TO UN-PARTNERED PREGNANCIES AND FEMALE CANCER(S) IN CARTAGENA, COLOMBIA

5.1 INTRODUCTION

This chapter explores intersubjectivity and local explanatory models related to insecurity, well-being, health, and the womb (la matriz) in Cartagena, Colombia.
I examine two case studies: the declining health and eventual death of Miranda, a local nanny diagnosed with ovarian cancer, and the pregnancy and early experience of first time motherhood for Veronica, a well-off hotelier’s niece from Medellin whose boyfriend was a married man born in Cartagena. Although Miranda and Veronica were only acquaintances (Veronica did attend Miranda’s birthday, her funeral, and her eight days mass), the two women had in common a number of the same female friends who accompanied each of them as they navigated biomedical and local knowledge about their conditions in the absence of a spouse. Through participant observation and interviews with Miranda and Veronica, as well as accompanying them in the biomedical institutions that treated them, discourses that correlated emotional well-being and womb health became pervasive; where longing for a married boyfriend would necessarily produce a sad or serious child by transmitting negative emotions through the womb, and depression over a childless middle-age could result in “illness of the womb” (enfermidad de matriz), a term the community used for ovarian cancer, uterine cancer, or endometriosis. In situating these cases through the lens of DelVecchio Good’s biomedical imaginaries (2010) and Kleinman’s local explanatory models (1988), this chapter positions “the womb” (la matriz), as a contemporary cradle where colonialism and modernity, emotion and health, and (in)security and gender continue to lie side by side in Cartagena.

5.2 MIRANDA

My association with Miranda’s community in Olaya and her health condition, if not Miranda herself, began long before I met her at her birthday party on January 15th, 2012. I had known Miranda’s older sister, Matilda, affectionately known as “La Morena” by her friends and family, for over five years. I met Matilda on my first trip to Cartagena in the summer of 2006 when she worked as a cleaning woman with her best friend, Alicia,
at the hotel/motel that Veronica managed downtown, just across the street from the only brothel within the city walls, Mangos (Mangos). Two years later, I stayed two months at the same hotel where Matilda, Alicia, and Veronica were working while I looked at possible field sites.

Holed up in my room watching television in the evenings rather than returning to the hotel with local waiters or bartenders like many ex-pat female travellers or, in the case of male travellers, prostitutes (the cost was 30,000 pesos or 15 USD extra for an overnight guest, the front desk sign said), the nightshift cleaning women and Veronica started regularly knocking on my door at night to invite me down to the lobby for arepas (Colombian pancakes) and soap operas. I, in turn, bought all of us plastic coffee mugs so we could share wine without the paisa hotel owners (Veronica’s uncle and aunt) noticing on the video surveillance that streamed to their home computer.

The following year (2009), I shared an apartment with Alicia, her partner, and her two sons in the neighborhood Las Colinas for ten weeks in the same complex as Veronica, while I worked on my MA field research on social cleansings (limpiezas sociales). Veronica had been living in one of her uncle’s other hotels for very low rent, but she took up Alicia’s suggestion to move to Las Colinas together because she had reconnected with a former boyfriend who had since married. If she wanted to see him without any of her uncles or their dozens of employees recognizing her (much less his own family in the established downtown neighborhood of Getsemani), she had to live far from Cartagena’s colonial center.

By January 2011, when I returned to Cartagena for what I thought would be my year-long study on subjective well-being and insecurity, Matilda invited me to use her home in Olaya as my home base for that particular field site: a place to check in in the morning, leave my lunch, and relax with her family in between interviews. Matilda had stopped working at the hotel by then and Alicia had as well, but the three of us, along
with Veronica, who had continued as hotel manager, socialized together regularly. In 2011, none of us lived in Las Colinas anymore. Alicia had opened a small bar with her husband closer to Olaya and Matilda had purchased a hamburger/hotdog cart that she set up on Friday and Saturday nights outside Alicia’s bar. Every other weeknight, I would walk from my new apartment just outside the colonial center to watch soap operas and comedies with Veronica in the lobby of the hotel during her 24-hour shift. On the weekends, all four of us women: one American in a committed relationship with someone abroad (me); one “happily divorced” costeña (Matilda); one IDP in common law marriage (Alicia); and one paisa paramour (Veronica) would meet at Alicia’s bar, have Sunday lunch at Matilda’s house, go out for chicken and beer near my apartment, or visit the new apartment Veronica was renting from her divorced aunt (in a neighborhood her uncles would never visit). There, we regularly ate “paisa pasta” (spaghetti, alfredo sauce, and tuna) and consume a one-liter box of wine, the same brand that had brought us together as friends over three years earlier. Usually after a Sunday afternoon at Veronica’s, Alicia, Matilda, and I would head back to Alicia’s bar or walk the air conditioned mall, but Veronica would never accompany us. A reserved plate of pasta and her furious dish washing always meant that “He” (she rarely said his name) had told his wife he had a night shift at the docks and Veronica would be calling him moments after we hugged goodbye.

In the summer of 2011, having finished my first round of interviews with participants in Mandela, Las Colinas, and Matilda’s sector of Olaya, I went to Bogota for one week to renew my academic visa. It was during this trip that I learned my mother’s ovarian cancer had returned after a brief but optimistic period of remission. Following emergency surgery, I was told the next day that the surgeon had managed a gastric bypass around the tumor, but she had been given less than six months to live. I flew back to Cartagena immediately to pack up my apartment and return my keys with a one-day
layover, before heading onward to my mother’s home in upstate New York. All three women: Alicia, Matilda, and Veronica met me at the airport to greet my flight from Bogota. They immediately began organizing trusted taxis (de confianza) to transport my possessions to Veronica’s apartment for storage. Bagging up my cans and dry goods, the three women refused to take the items or throw them away because, they insisted, I did not know everything about my mother’s condition. I had to be optimistic, they told me. I might be back in Cartagena very soon when my mother regained her health and wouldn’t it be ridiculous if I had to go out and buy all these products again!

The night before my departure, Matilda, Alicia, and I went out for a fast food dinner before they left me at the hotel with Veronica where I would await my flight. As they hugged me goodbye in front of the taxi stand, both Alicia and Matilda started crying so much that each of them soaked the shoulder of my blouse. “I am going to be fine,” I told them. “I promise I am coming back,” I said. “We know,” Alicia said, wiping her nose. “But your situation makes us think about our own mothers (who were both living) and that is what is making us cry.”

I returned to my old room in my old hotel in downtown Cartagena in January 2012, ten weeks after my mother had passed away. Alicia and Veronica met me at the airport, but Matilda wasn’t there. Alicia was the first to offer an explanation for Matilda’s absence at the airport. “La Morena’s sister, Miranda, has been sick and is living with her now. She is having a birthday for Miranda next week at her house and you have to go. Matilda will be expecting you.” Alicia eyed both Veronica and me as she said this, knowing that Veronica hated to venture into the neighborhood of Olaya.

Matilda, as Alicia, and I well knew, lived in the most elegant house in her entire sector of Olaya: three bedrooms, two bathrooms, air conditioning, marble accented furniture, tile floors, reflective windows for privacy, a gated patio, and backyard full of mango trees with enough room to build a small apartment complex. Matilda had been
married (civilly and religiously) to an officer in the Colombian Navy. Even though she said they had enough money to buy a home in a neighborhood that was calmer (mas tranquilo) than Olaya when they first married (even before the increase in crack and cocaine sales in the past half-decade), she chose a lot across from the Olaya clinic and a couple blocks up from the main avenue and the cemetery because she wanted to stay close to her siblings and her mother, who lived nearby.

When her husband divorced her fifteen years later to marry another woman, he left her the home in Olaya and continued to pay child support for their daughter and son in addition to voluntary spousal support for Matilda, equivalent to two-thirds of a minimum wage salary (250 USD/month). This money, Matilda told me with a kind of quiet pride, continued to be deposited in her account every month, even after her children graduated high school and her ex-husband had retired from the Navy, regardless of whether or not she was working. Matilda’s female neighbors spoke highly of her ex-husband, waiving or shouting salutations whenever he dropped by the house to pass an envelope to one of his children or attend one of Matilda’s niece’s or nephew’s birthday parties, where his new wife was always invited. Alicia, Veronica, and I would often joke that in Cartagena, he was the ideal husband, and he was even better to be divorced to.

I had never met Matilda’s sister Miranda before, despite my relationship with Matilda’s extended family in Olaya, because Miranda had worked as an in-house domestic worker for a wealthy white widower and his young son at their finca (farm) in one of the rural hamlets outside of Cartagena, near Turbaco, beyond the borders of Nelson Mandela. During her one free Saturday every quincena (15 days), Miranda would return to Cartagena and stay with her mother, Coco, or visit her boyfriend, for whom she was la otra (the mistress). During the summer I was in New York, Miranda had been dismissed by her employer’s new wife who, as her mother Coco told me, was jealous of Miranda, both because of her beauty and because after five years of working there, the widower’s
son saw Miranda more as his mother than his new stepmother. “Even the widower’s mother tried to keep Miranda there (against the new wife’s wishes), so what does that tell you?” Coco asked me, implying that Miranda did not have any kind of sentimental or sexual relationship with her employer to justify his new wife’s jealousy (envidia). In July, Miranda, now unemployed, returned to live with her mother, and became extremely depressed (se cayo en una depresion profunda) because, according to Coco, she missed the little boy whom she had loved as her own son given that she had no children of her own.

Miranda, who used to walk up and down the streets in Olaya visiting with all her female neighbors, now spent the majority of her time in bed. It was this profound sadness, Coco told me later, which eventually caused Miranda to become ill. Other women in the neighborhood who knew of Miranda’s illness also wondered aloud to me why Miranda had never had her own pelado (a child) and more than once her situation was used as a cautionary lesson for me to have a child before it was too late (which by their measurements, was after the age of thirty).

By August, the formerly Miranda grew a panza (belly) “as if she were pregnant” Alicia said, and had a month-long menstruation, so they brought her to a clinic in another sector of Olaya. There, the doctors diagnosed her with, as Alicia called it, “an illness of her womb” (una enfermidad de matriz). Now that it was January, we were celebrating Miranda’s birthday, but also the end of her chemotherapy. “So is she in remission?” I asked Alicia, an interesting question given that no one in the week leading up to Miranda’s birthday had used the word “cancer.” “Well,” Alicia said. “She is done with her chemotherapy so she has to be better. Bring a cake from the Exito bakery.”

On the day of the party, Veronica and I arrived at Matilda’s house at 4pm because Veronica refused to walk the three blocks between the main avenue to the house in the dark unless she was accompanied by someone who was conocido (known), and to
Veronica, I did not count. Although the streets were paved and the homes are all made of cinderblocks and painted, the foot traffic of crack users had increased substantially over the past three years between the avenue and the area locals called Chambacu\(^1\) or the “holes” (los huecos), a thin alley of four blocks of homes adjacent to Matilda’s house.

In the street, a man without shirt was screaming at an upside down milk crate and a group of four or five young adolescent boys passed us, their thin waistbands dragged down by some of the stones in their pockets as they headed toward the avenue, following a group of individuals that the local community calls crustaceos (crustaceans) because their addiction has made them so thin that it looks like their skeletons are on the outside of their bodies. As we rounded the corner, I scanned the groups of people in small clusters along the roadway for someone I knew when, strolling out of the alleys known as Chambacu, thinner than ever with a pale of small plums on his arm, I recognized my participant Yari’s husband, Jairo. “Oye, Jessi!” He shouted, throwing his hand up as Veronica eyed me sideways. “When did you arrive and when are you finally going to interview me? Quick, buy some of these plums so I can get some bread.” “No, Jairo.” I told him. “We don’t have any change. Tell your woman that I will come visit her next week. We are headed to Miranda’s party.” “Ah,” he said, and nodded slowly, with his mouth closed. Yari’s sister was married to one of Matilda and Miranda’s nephews. The children produced from this marriage (Yari’s niece and nephew) used to eat lunch at Matilda’s house when the economic situation at their own home was difficult, which was often. As we parted ways, Jairo patted me lightly on the shoulder, and headed back up the alley. “Atrevida,” (risk taker) Veronica told me.

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\(^1\)Chambacu, also known as el corral de los negros (the Blacks’ corral) had been the historically black neighborhood adjacent to the colonial center from the early eighteen century through the 1970s. When the central urban neighborhood of Chambacu was taken over by the city through eminent domain in the 1970s to expand the roadways leading to the colonial center, the residents of Chambacu received lots and transitional housing from the city government in a number of sectors of Cartagena, primarily in the neighborhood of Olaya. These sections of the neighborhoods continue to be referenced as “Chambacu” by local residents, although the term now has more of a pejorative rather than a historical significance.
Opening Matilda’s gated patio, and sliding the glass door back on the living room, Veronica and I entered the chaos of a half dozen women hanging crepe paper, bits of ribbon and balloons from the ceiling, moving furniture against the walls, and stirring pots. In the middle of the room Miranda sat in a rocking chair, in a light pink collared shirt, shorts, a blue bandana covering her bald head, one sinewy leg resting atop a floral ottoman. Her foot was bandaged in yellowing gauze, and I noticed that all of her toes had been removed where the gauze was damp and leaking. The tumors in her abdomen, I later learned, had put pressure on the artery through her leg, reducing the circulation to her foot significantly and leaving her toes gangrenous just a week before. A single crutch leaned against the wall. She held both arms of the rocking chair with her long fingers, her eyes closed and her face still, yet smiling, as a friend applied eyeliner and eye shadow to her thin lids and mixed lipsticks from the palate for her mouth.

Matilda and her mother, Coco, saw the two of us through the serving hatch that separated the kitchen from the dining/living area and Matilda lifted one thick arm, waving at us with a wooden spoon still in her hand. From the kitchen, she directed us to sit down and visit with Miranda, but “Get ready to eat now because we don’t know how many people will be coming or when the food will run out.” A curtain would eventually be hung over the serving hatch so guests not invited to eat could not see the pots on the stove from the patio.

As night fell, the neighbors who lived two houses down dragged their huge pico (a waist-high stereo speaker) onto Matilda’s patio, which began blasting vallenato and reggaeton so loud that the windows of the house vibrated and Veronica and my ears rang for days. A female neighbor across the street who sold cases of beer and rented plastic chairs tapped the shoulders of two young children who were interrupting their mothers’ conversations and enlisted their help in bringing the chairs across the narrow road, which they did so with great seriousness, one by one. Miranda sat quietly in the
same rocking chair inside the living room, nodding as friends and neighbors wished her a happy birthday, told her how much better she was looking, and touched her shoulder briefly as they made a line toward the kitchen for a plate of food.

The children were instructed to kiss Miranda on the cheek, not grab her too hard, and to be careful not to knock her foot. As the living room became more crowded (I counted 65 people inside the gates by 7pm, with even more lingering on the street outside) and the children more rambunctious from the multiple sodas they had consumed, they were banished to the front patio by Matilda, “Get, out, get out!” (Fuera! Fuera!). At 9pm a cousin arrived with a gigantic video camera on one shoulder that featured such a bright bulb to film us on the completely darkened street that whoever was asked to record a birthday greeting for Miranda initially pulled their heads back, temporarily blinded. Later on, three well-dressed mariachis arrived in front of Matilda’s house in a taxi- the cost of which would be at least 75 dollars (or two days’ pay) not including the additional fee many charged for entering neighborhoods like Olaya at night.

Miranda, struggling to keep her head up as she sipped a child-sized malt soda through a straw, was now obligated to sit on the patio and be recorded as she was serenaded by the mariachis. Her brothers and cousins, all of whom had consumed multiple beers over the last three hours, knocked her crutch out of the way as one lifted her from her seat and carried her out to the patio, her arms wrapped around his neck and her legs banging against his thigh, where she was then lowered gently, but clumsily, back into her rocking chair. A child was swatted from a plastic chair so she would have a place to rest her foot, and her immediate family gathered behind her as the soloist knelt down at her knee and sang two different vallenato songs with the cameraman behind him. Someone in the family had paid for five songs and the last three requests were all “Happy Birthday.” By the last rendition, Matilda’s daughter and brother were both sobbing and other males in the group, overcome with emotion, lurched toward Miranda and partially
hugged, partially threw themselves on her as different women positioned themselves to balance the men or block Miranda’s foot. Miranda continued to look out at everyone, waving at the camera, a permanent, tight smile across her face, until someone finally carried her back into her bedroom when the mariachis left. The group outside, half of which was now in tears, began wandering out the patio gate and toward their homes while the rest of us stumbled toward the avenue, in a protective throng, hoping to get a taxi.

5.3 GETTING TO KNOW MIRANDA

During the eight weeks between Miranda’s birthday party and her death, I visited her about twenty times. Matilda’s home was always full of people, but Miranda was increasingly alone. Coco (her mother), Matilda (her sister), and Nancy (Matilda’s niece-in-law who lived there), were constantly rushing in and out of the room, to bathe her, to feed her, to give her medications, but just as quickly they would exit, leaving the bedroom door open, but just a crack. Matilda’s daughter, nephew, brother, and any combination of neighborhood children or distant cousins who had negotiated a free lunch from Matilda that day might peek through the crack in the door, wave quickly and smile, and move on. The television in Miranda’s room did not have cable, but she often asked me to switch it between the two channels that were available.

Miranda knew she had cancer. Someone had evidently told her that my mother had also died of ovarian cancer (which she named specifically) because when we were alone together she would joke to me about how people with cancer and their caretakers practically become medical doctors themselves. She once asked me to look at the folder with her and review her medical notes to see if the medications my mother took were the same. Outside the room, or whenever anyone entered the room to visit her, Miranda’s comportment immediately changed from a patient interested in knowing about the disease
that would kill her to a gracious survivor, whose corporeal complaints sounded like a woman who simply had worked too hard the day before. A female neighbor might enter the room and pull a chair up to the bed, asking “How do you feel, better?” and Miranda would often respond, “I have a little pain in my arm (or leg), but I am feeling better, thank god.”

Miranda was not on a steady regimen of morphine. According to her mother, Coco, they only gave her morphine when “she complained a lot” and she told me that the doctors gave her a low dose “so that she would not become addicted.” The prescription had to be renewed on a weekly basis at a pharmacy in the resort neighborhood of Boca-grande, which required taking two buses and approximately an hour commute. Nancy, Coco, and Miranda’s friends tried to supplement the morphine with acetaminophen, menthol rubs, and various ointments that they applied to the muscles that were slowly contracting and the bedsores that formed under her shoulders. Coco and Matilda repeated to me and to others the refrain: “She is getting a little bit better, thank god” in person and over the phone in the following weeks, despite physical evidence that Miranda’s condition was deteriorating.

Knowing that I came on Tuesdays and Thursdays for lunch, Coco would often see me enter, nod quickly and throw off her apron to run to the store or the pharmacy. “She threw up yesterday, but she is better today, thank god” she told me one time as she rushed past, even though it was evident as I entered the room that Miranda had vomited less than an hour before. Another time, as I walked past the bedroom door to put my lunch in the fridge, I heard Miranda moaning softly and asked Coco, who had taken her to the hospital the night before, what the doctors had said. “It is still a problem with the womb even though they took it out. They might have to open her up again, but we have to wait until she gets stronger.”

Shortly after returning from her errand, Coco entered the bedroom where I sat
next to Miranda, who laid with her eyes half shut but smiling while I told her about my ridiculous landlady, who had secretly rented out my apartment when I was visiting Bogota the weekend before. I stopped as Coco grabbed the full bowl of soup from the table in between us and stood with her hand on her hip. “You are never going to get better if you don’t eat!” Coco thundered at Miranda, and walked out, closing the door completely behind her.

The third week of March, Alicia called my cellphone and told me she was in Bocagrande at the hospital with Miranda. After going to the hospital three different times in ten days for Miranda’s constant pain and vomiting, the doctor had finally admitted her to the hospital permanently this morning. The night before, Alicia said, Miranda had been in horrible pain, but Matilda could not get a taxi to come up their street in the middle of the night, so they had to wait until morning. By morning, Miranda was in such pain that “she had become like an animal” (se convirtio en animal) and as Matilda tried to lift her from her bed to get her into the taxi out front, Miranda bit into her own sister’s arm, leaving a deep mark. Matilda did not go to the hospital at all the first day, and the second day, when I visited again, I saw her sitting on the couch at the foot of her sister’s bed, in a cap sleeve blouse that covered the bite, rocking back and forth until a second or two after I entered the room and the nurse asked me to identify myself.

The Bocagrande hospital is situated on the beach, at the end of blocks of luxury high-rise condominiums, four-star Italian and Middle Eastern restaurants, and just two blocks from the Cartagena Hilton where Barak Obama would stay with his secret service detail six weeks later. It is a biomedical space shared by both lower and upper socioeconomic classes. The guests of wealthier patients could dine on sushi or bring in Friehofer’s American coffee cakes at 17 dollar from the Carulla grocery store down the street, and poorer patients’ family members could buy paper bags of peanuts or fried egg arepas from the mobile vendors that park their carts in the shade of palm trees across
from the emergency room entrance. While there is a rule that each patient can only have two visitors at a time and the rest must wait in the lobby, appealing to the guard’s sense of guilt (“She is very ill and this may be the last time I can see her”) or the distance travelled to Bocagrande (all the way from Olaya, from Mandela, from the United States) worked for me and all the visitors petitioning entrance over the course of the next week.

Although the interior of the hospital was modern, with sweeping stairs and a balcony at the end of each floor where patients’ visitors could talk on their phones and look out on the water, the inside of Miranda’s hospital room was relatively bare: there was no soap or toilet paper in the bathroom, and her hospital bed could not raise or lower. On the first day I was there, she only had a bottom sheet on the bed because that is what they had wrapped her in when they put her in the taxi. As I entered the room, a nurse was shouting at Coco, “You have to keep your daughter still!” as she attempted to insert an IV needle attached to a saline drip while Miranda writhed on the bed with her eyes closed, clutching her forehead with one hand. Matilda, who had been sitting on a bench at the foot of the bed, opened her eyes wide and stood up as I entered. Coco, still bending over her daughter, looked back at me at the same time as the nurse. “She was better earlier.” She said. In the hallway, Matilda told me that they were too afraid of leaving the hospital in case they were not allowed to return at night “because, you know?” (implying that Miranda might die), but as I turned to head to Carulla grocery store to bring back some sandwiches, the nurse exited the room and, having overheard us, said, “But you have to have hope. Miracles happen!”

I went to the hospital four more times. Three days after my last visit, Miranda died. On my last visit I was standing next to Miranda, who grimaced and twisted as two young medical residents from the adjacent departmento of Cordoba reviewed her chart, when her mother said, to no one in particular, “She used to sleep all the time, and now she can’t sleep at all.” “Maybe,” I said lightly as I patted Miranda’s hand, “Maybe,
Miranda, it is just too quiet for you in this hospital. There is just no pico (speakers) here like in Olaya.” The doctors smiled and one said to Miranda gently, “Ah, Miranda you like pico?” Coco walked up to the bed and thundered, “We don’t live in Olaya! We don’t have pico. We live more in the other direction, over there, towards the neighborhood Las Palmeras (which was, in fact, another sector of Olaya, not an independent neighborhood.” The residents, who obviously knew nothing about Olaya or its sectors because they were from another state, looked at me and shrugged, checking a box and walking out of the room. Coco grabbed my hand and looked up at me. “There is no reason to say anything about our neighborhood outside of our neighborhood to people like that! (the doctors)” Not knowing what to do, I apologized and left Miranda and her mother. Matilda walked me out and brushed off her mother’s comments as due to fatigue: “Don’t worry,” Jessi, she said. “There is no Olaya more Olaya than the sector of Olaya right behind the Olaya cemetery!” she concluded, slapping me gently on the shoulder.

Two days later, I was walking toward the taxi stand near the downtown sculpture of the India de Cartagena (the Indian of Cartagena), when I crossed paths with Coco as she headed to line of colectivos (shared taxis) that were calling out “Olaya! Olaya!” Later that evening, Miranda would take her final breaths. When I asked Coco how Miranda was doing as I escorted her to the taxi, she put her hand on my arm and asked me, “Did you hear her say any numbers?” “No, Señora.” I told her. “Because I heard her say some numbers yesterday, but I did not have time to buy a lottery ticket and today those numbers won. Matilda has your phone number, right? I wish I had played those numbers.” Many of my interviewees had told me about the recent phenomenon (which had begun a decade or so ago) of people having dreams where their departed loved ones told them winning lottery numbers or playing the casket serial number or tomb number in the lottery and then having it win. What I could see in this interaction, at the very least, is that for Coco, her daughter Miranda was already dead. Coco was coping with the situation by rapidly
moving on to a stage of grief that allowed her to openly discuss mysticism and forced her to consider her own economic survival.

5.4 MIRANDA’S FUNERAL

Miranda died at the hospital shortly after midnight, and by ten a.m. all of us were back in Matilda’s house to begin the twelve-hour calling hours the day before the funeral and the evening candlelit rosary (velacion). They placed Miranda’s coffin, with a glass window in the top so her face could be seen but not touched, in the middle of the living room on a metal stand. All the ceramic knick-knacks were put in large plastic garbage bags and stored in Miranda’s former bedroom, alongside the dining room table. Her body was dressed in the same outfit she wore the day of her birthday, pink collared shirt and blue bandana, with make-up on her face and her eyelids sewn shut. A curtain covered the hatchway between the living room and the kitchen, just like on the evening of her birthday party. This time, her cousin told me, it was not to keep visitors from seeing the pots on the stove, but “to keep the cold of the body away from the food.”

Nancy, Matilda’s pregnant niece-in-law, who had been present to bathe and feed Miranda at the end of her life, was banished from the house until the 40 days mass. There was a general fear among many family members that the cold of the dead body could harm her unborn child. I visited Nancy during this period of sequester at her mother’s house. She said this was not her belief. She had attended funerals in her family before where pregnant women were allowed, but she respected their beliefs and stayed away. Across the street, Alicia’s cousin, Lena, who had worked with Matilda and had been good friends with Miranda when she lived up the alley with Coco, sat outside her own house in a plastic chair and watched as others came and went from the calling hours. All of the women who were friends with Matilda, Alicia, and Lena knew that Lena had a brief tryst
with Nancy’s husband (Matilda’s nephew) when he and Nancy separated temporarily at the beginning of her first pregnancy. At that time, Lena’s husband, Dominic, had temporarily moved out of the house, not even going to his mother’s house as was often his custom, but moving in with la otra, a woman who bore his daughter only four months after Lena gave birth to their first child. Even though Nancy was not present for the services, Matilda’s daughter had forbidden Lena from entering the house to sit vigil for her friend, Miranda, and Lena obliged. She would have to wait for the funeral to say goodbye to the friend she had only been able to waive to from across the street during her final birthday party.

A long table, with a white tablecloth on top, sat behind Miranda’s casket, with a poster of the Virgin of Carmen, a candle, and a glass of water. I asked a female cousin what the glass of water was for and she told me it was a coastal tradition, for the spirit of the dead person as they left the body. All of the women were dressed in black. When Veronica and I entered Matilda’s house this time, Alicia was already there. Matilda threw her arms around both of us. “You are good friends, you are good friends, you are good,” she exclaimed, somewhat loudly, I thought, blocking her daughter with her body. Matilda’s own 22-year-old daughter, Yadira, sat in a chair next to the wall and cried uncontrollably, her hair completely tussled and uncombed. It was clear, however, that Matilda and the other women in the house were ignoring her. As I approached Yadira, Alicia immediately led me away by the arm and escorted me out the back door and into the yard where Miranda’s mother, Coco, was sitting in a wooden rocker, encircled by a group of women in plastic chairs. Yadira had not visited the hospital once while her mother and grandmother were there, Alicia told me. “Matilda had to stay in the same clothes for three days at the hospital while Yadira was out drinking! What kind of a daughter is that?” She asked me. “And now she cries. Haha.”

In the afternoon, a small woman in her late sixties arrived in a late model Kia
Rav 4. She had pale skin, a light perm with blue rinse, and a smart linen suit paired with a string of pearls. She entered the house and the women immediately summoned Coco from the backyard so she could greet this honored guest. This woman was described to me as only as “La Señora” - the mother of Miranda’s employer, the widower, who had paid for and made all the arrangements with Cartagena’s largest commercial funeral company, Los Olivos.

Male relatives entered the home throughout the afternoon, caressing or gently kissing the glass above Miranda’s face. When La Señora announced at 5pm that she would lead the rosary before she left for the evening, the women present quickly took a seat in the plastic chairs that encircled the casket. The men who had remained in the house immediately exited, standing in small groups on the patio waiting for their wives or wandering down the street to the paisa market to begin drinking.

One of the men who left to drink with the other men was Matilda and Miranda’s older brother, Joaquin, whose son, Alfonso, was expecting a baby with Nancy. Joaquin worked as a night watchman at the lowest-end hotel owned by one of Veronica’s uncles, an establishment that featured both bunk beds and common baths for shoestring backpackers as well as pay-by-the-hour rooms for prostitutes and their clients on the red light strip just outside the colonial city walls. Alfonso had three sons, two of whom were underemployed; the first married to Yari’s sister, described earlier, the second who lived in Matilda’s house with his wife, Nancy, and a third, “the responsible one,” as he was called, who worked as a notary republic.

Alicia, Veronica, and I exited the candlelit service at 10 pm and headed towards the avenue for a taxi, much like we had just eight weeks before after Miranda’s birthday party, when we saw Miranda’s brother, Alfonso, tipping back in a plastic chair on the patio of the paisa market with his eight-year-old granddaughter on his knee. The back legs of the chair were close to the edge of the patio, which dropped off two steps below,
and as he called out to us, Alicia lowered her voice, and tucked her cellphone in her bra:
“Wait here,” she said, walking purposefully up over the lip of the patio and grabbing the
girl by the arm before Alfonso even realized what she was doing, then marching her back
to Matilda’s house. “What! Come drink with us!” Alfonso shouted, squinting at Veronica
and I as we stood in the darkness between the market and Matilda’s house, waiting for
Alicia to return.

The next morning, I arrived at Matilda’s house at 9am to walk the casket down
to the church with the rest of the neighbors. The mother, Coco, was in the back of
the house in her rocking chair, fanned by one of the neighborhood women, while La
Señora held her hand. This was the last hour that Miranda’s body would be in the home.
As I peeked through the glass in the lid of the casket one last time, which had a film
around the edge, I noticed small shards of glass on top of Miranda’s face. When I asked
what had happened, one of the women told me that Joaquin had thrown himself on the
casket when he returned to the house, drunk in the middle night, shattering the glass all
over Miranda’s face in an effort to touch her. “Sin vergenza,” (Shameless) the woman
said. Matilda was forced to call Los Olivos funeral home to come by that morning to
replace the glass, which required additional money from La Señora. The body, which
had not been embalmed, had been exposed to the humid night air while in the process
of decomposing. To prevent the smell, they had been forced to leave all the windows
and doors open so Matilda had not slept, fearing that they could be robbed. Already, the
fluids were soaking through Miranda’s corpse, staining her blouse.

Many of the bodies of those laid to rest in the public cemetery in Olaya are not
embalmed because they are only stored in the tomb until there is only a skeleton left.
The casket is then removed, usually at the one-year anniversary mass, and the bones are
buried together in a small plot. As we walked to the central tomb from the church, it was
impossible not to walk over the other small plots where the bones of others were interred.
There was a guard who sits at the front gate of the cemetery night and day in order to deter gang members from breaking into the tombs, which are only secured with cinderblocks and cement, or unearthing the bones of their deceased rivals once they are buried. The women and the larger group procession from the church to the cemetery moved freely through the front gate without question, but as I had arrived a couple minutes behind and in the company of some neighborhood adolescents from Miranda’s street, the guard asked them for Miranda’s family name before they were allowed to pass through.

5.5 VERONICA: CONCERNS OF “SADNESS IN THE WOMB” FOLLOWING MIRANDA’S DEATH

Between Miranda’s death, her eight days mass, and her forty days mass, many things changed in the day-to-day lives of Coco, Matilda, Veronica, Alicia, and me. Coco had returned to living at her own home at the end of the alleyway next to Matilda’s house and Matilda took a job as a domestic worker in the mornings in another neighborhood just to “distract herself.” Both women became extremely thin during the interim period, losing at least ten pounds each, I gathered, after noticing their emerging cheekbones and the sleeve seams hanging off their shoulders at the forty days mass.

Nancy, Matilda’s niece-in-law, gave birth to a son between the funeral and the eight days mass and so stayed on at her mother’s home for her forty days of postpartum rest. The only daytime occupants of Matilda’s house now were her daughter, Yadira, and her nephew, who was forbidden from entering his mother-in-law’s house, given that she knew about his affair, but kept it from Nancy, according to Lena and supporting iterations from Alicia and Matilda. Nancy had told me her mother had always disapproved of her husband because he was not a professional as her parents were, but that they had become increasingly incensed with him after she became pregnant and he continued to work
part-time as a motorcycle taxi driver. He would only be allowed to enter her mother’s house again, she told me, once he had a proper job so that he could support the baby and her parents could see her finish her university degree in tourism and hospitality.

I had finished my third round of interviews in Olaya just before Miranda went to the hospital so I had no reason to venture out to Matilda’s house before the eight days mass. After Miranda’s death, I had moved back into the hotel where Veronica was the manager after my paisa landlady informed me that my “costeña friends” were not allowed to sit on the furniture in the central lobby of the house where I rented a room. Lena, Alicia’s cousin who had been banished from the candlelit service, had returned to work as a cleaning woman at the hotel Veronica managed, so I saw her daily in the colonial city center. Alicia had also taken a job working at a different uncle’s hotel up the street, but just on Sundays, to supplement her income from the bar. For my last five months in Cartagena, the core group of women at the hotel was the same as the first summer I was there.

All of the women in the group: Veronica, Lena, Matilda, Alicia, and I underwent some physical changes during the forty days after Miranda’s death and these changes were mutually commented upon and often attributed to the physical expression of grief. The fact that Miranda had died without a child, that she never “got (herself) organized to have a child,” was also reflected upon several times when we visited each other between the hotels where Alicia, Veronica, Lena, and I spent our early evenings. Alicia began suffering from migraines with greater frequency and on two separate occasions she cancelled plans at the last minute with Veronica and me, attributing the migraines to “thinking too much about poor Miranda at the end.” A week after Miranda passed away, I had one of my periodic flare ups of rosacea, a reddening condition of the skin, and when Alicia and Veronica saw me the night before the eight days mass without cosmetics on, they encouraged me to stay home the next day. “Jessica, look at your face, sister
(hermana),” Alicia told me. “You are obviously thinking about your mother because of what happened with Miranda. We will see Matilda tomorrow and tell her that the funeral was too much for you. Stay home. She will understand.’

Veronica attended the eight days mass with Alicia and they brought me a prayer card from Miranda, but at the forty days mass, I was the one able to attend while Veronica had to stay home. She had been suffering from what she called “pereza” (laziness, lack of energy), and felt like she did not have desire to do anything anymore. For the three and half week period between the eight days mass and the forty days mass, Veronica had diarrhea and nausea almost daily, she seemed to be living on saltine crackers and Pedialyte. “What could it be?” She asked, and despite the persistence of the other cleaning women and myself that she take a pregnancy test, she refused. Veronica suffered from both cystic breast syndrome and also benign ovarian cysts in the past, plus she insisted it was common for her to miss her menstruation when she was under significant stress. She did not want to see a doctor or even consider anything that had to do with her womb (matriz) right now, she told us.

Shortly after Miranda’s death, Veronica confronted her married costeño boyfriend, Andres, whom she had been dating off and on for over seven years. Veronica told me that someone had pointed out Miranda’s married boyfriend to her at Miranda’s birthday party. He had come in to give Miranda a quick kiss on the cheek, but remained mostly on the patio, leaving before the mariachis arrived. This was the last time she ever saw him. “This is not the life that I want,” Veronica said. Alicia informed me that she never thought Veronica would change, that she would “waste her life” with the married boyfriend just like Miranda. It was on a pilgrimage to the convent on the top of the highest point in Cartagena, La Pie de La Popa on Ash Wednesday, that Alicia informed me that Matilda told Veronica that Veronica would never be a “complete catholic” until she until she ceased to be the mistress (la otra).
Veronica did not share any of the characteristics typical of “la otra” in the cultural context of Cartagena. According to other interviewees’ descriptions of la otra, the mistress was typically younger than the wife and came from a socioeconomically or culturally (i.e. regionally/racially) inferior position, unless the husband as well was from the lowest socioeconomically ranked neighborhoods already (“Level 1”). In relationships where a formal commitment had been made, either through marriage (civil or religious) or by living together (formarse un hogar), common knowledge dictated that “la otra” typically made her first appearance in the year following the birth of the first child.

In Veronica’s case, none of these indicators held true. Veronica’s family was paisa, a regional-ethnic distinction given to Colombians who come from the state of Antioquia, the capital of which is Medellin, and one of the most reproductively endogamous populations in Americas (presentation, Dr. Antonio Carlos Toro Obando, Critical Research Issues in Latino Mental Health Conference, 2012). Her boyfriend had been born in Cartagena, ethnically costeño despite his pale complexion, and raised in a neighborhood that had originally been settled by squatters, on the inside edge of Las Colinas (one of the three neighborhoods I profile in Chapter 2). Veronica had not entered her boyfriend’s life in the year following his daughter’s birth. The two had dated for over a year before he met his wife, but they had broken up when Veronica returned to Medellin after being accepted to pharmacy school. She dropped out less than two years later and returned to the Caribbean coast again, to once again work at her uncle’s hotel in Cartagena, where her two younger cousins were now her bosses. In the interim, her former love had made an economically advantageous marriage with a slightly older woman from one of Cartagena’s established families, and was now living in one of the grand colonial homes just down the street from one of her uncle’s hotels.

Over the first four years I came and went from Cartagena, I saw Andres many times, the most often when Alicia, Veronica, and I shared the two apartment complex
in Las Colinas, but even over the following two years he occasionally made an effort to meet up with the three of us women as a group. When my partner visited in 2011, the four of us even had a double date together, which Veronica said was the closest Andres had come to spending time with “her family, as family” since he had married. This was a good sign that he was getting even closer to leaving his wife, she suspected. It would be a challenge to convince her paisa family to accept Andres, not so much because he was costeño (she was now in her early thirties and her marriage prospects were assumed to be dwindling), but because they had known Andres before, and now knew that he was married. That the daughter of business paisas had been la otra, even if they later married, was not something Veronica looked forward to explaining to her family. Miranda died, then Matilda spoke to Veronica, and Veronica gave Andres an ultimatum. And so the relationship was over.

5.6 CLINICAL PERSPECTIVES: “YOU DON’T WANT A SERIOUS CHILD, DO YOU?”

At the very end of April, Veronica scheduled a pregnancy test at the maternity clinic associated with the private health insurance provided through her uncle/employer. Alicia and I accompanied her to retrieve her results three days later. Veronica sat in a plastic chair across from the costeña nurse who looked at Veronica’s file on the computer. Alicia and I stood on either side of Veronica as the nurse read, “Your pregnancy test is positive.” Veronica collapsed in sobs. The nurse looked from her to us and back to her. “This wasn’t planned?” She asked. Veronica shook her head. “Well, were you using protection?” She shook her head again. The nurse furrowed her brow. We were an odd trio at the maternity clinic: A paisa in her early thirties surprised by her pregnancy results, a costeña in her late thirties demanding to know the schedule of pre-natal appointments,
and an American woman searching for tissues and a plastic bag in her purse in case Veronica vomited again. Out in the waiting room, there were only pregnant costeña teens and twenty-something’s sitting next to their mothers, or couples who already had children in tow. “Well what were you expecting?” The nurse asked. She then asked Veronica if she had a partner or spouse. “No,” Alicia interjected, reaching over Veronica to stop her from trying to explain. “They just separated,” implying to the nurse and the other two women at their desks who had started paying attention to the situation, that Veronica had indeed been in a proper relationship.

Both Alicia and I had been rubbing Veronica’s back in a circular motion during this whole exchange while she had her head hunched over her elbows. When more than a few seconds passed and Veronica did not look up at the nurse, the woman shook her head again. “Well you are thirty-three years old, this is the time for you to be having your pela’o (the costeño word for child). You must find a way to be happy because if you continue to be sad then the baby will also be serious or sad and it won’t be good for either of you. Here is your paperwork and your prescription vitamins. Come back in two weeks for your first exam. You are due in December.” She handed the paperwork to Alicia and waited for us to leave.

The emphasis on staying positive was reiterated throughout Veronica’s pregnancy. As one of the cleaning women, Denis, told me, “The feelings of the mother get through to the baby in the matriz (womb).” I heard this wisdom repeated, not just by other costeñas, but also by Veronica’s paisa aunt and uncle on the day she revealed she was pregnant. “Well it is your cross to bear,” her aunt said. “But you need to find a way to be happy because you don’t want a serious child. The child did nothing wrong.” The other cleaning women at the hotel did everything in the first weeks to lift Veronica’s mood (levantar su animo), finding any way they could to mamar gallo (joke around), make her laugh, even for an instant. They also delighted in having a certain authority over Veronica,
who had always been perceived as a bit distant, at least by the younger maids, since she was educated, and a paisa, and the owner’s niece. On a daily basis I heard lists of food prohibitions they gave her (no pineapple, no dark colas) and physical restrictions (not too much walking until she had her “belly” (panza) which signified that the baby was good and stuck in the womb (bien pegado en la matriz).

For the paisa aunt and uncle who had emphatically and publically emphasized their generosity in not firing Veronica, the baby was the cross that god gave her which she must learn to accept with grace, whereas for the costeñas, it was a source of great joy which had to be protected from the ambivalent feelings she had about Andres. Always ones for gossip, the cleaning ladies nonetheless never asked Veronica any questions about Andres so as not to “impact her emotional state” and instead would ask me about whether he had seen her and what had happened when she told him. Veronica occasionally laughed off what she called the “creencias de aca” (beliefs from here) about safeguards in the first trimester, comparing it with the information she gleaned from pregnancy books like *What to Expect When You’re Expecting*, which she had purchased at the Pan-American Bookstore. Nonetheless, Veronica was conscious never to bring the books with her to work, she told me, so the women would not think that she lacked respect for their support and ideas.

Veronica waited out her pregnancy on the coast even though her aunt, uncle and mother encouraged her to return to Medellin. Veronica thought Andres might change his mind and finally leave his wife once he saw her panza (belly) growing. The cleaning women in the hotel regularly told me that they knew he would never leave his wife because costeños rarely leave the wife for the other woman. Just because Veronica was paisa, this did not make her immune to this practice. She simply needed to move on, stop thinking “so much” about him, or risk having a baby that was very serious or sad.

Although Andres briefly reappeared after the twelve-week ultrasound, the last
time Veronica saw him before the birth was between the cinema gallery and the food court at the mall. It was a Saturday evening and Veronica, Alicia, and I had escaped to the mall to enjoy the air conditioning and look at baby clothes when he called and asked Veronica where she was and who she was with, as he often did. He happened to be at the mall as well, waiting for his daughter and mother outside the movie theater, but perhaps he could drive them home and then come back for the rest of us, or at least Veronica, insisting it was not safe for her to take a taxi back to her neighborhood alone at this hour. Alicia and I kept eating our ice cream while we listened to him on speakerphone, Veronica covering the mouthpiece with an exaggerated eye roll. “Okay,” she told him. Alicia and I could find taxis to our respective houses. He called back a few minutes later. His mother had texted him from inside the theater about taking her and his daughter out to dinner. It would now be at least two hours before he could come back and pick up Veronica and by then it might be too difficult to get away. Alicia and I walked with Veronica toward the exit closest to the cinema at her request, where Andres sat on a bench against the escalator railing, the obliging father-son-husband. When he stood up, Alicia grabbed my elbow and we walked toward him as Veronica hung back and feigned window-shopping, one hand on her growing belly, but then we only exchanged brief salutations with him, as pleasant and formal as if we had bumped into one of Veronica’s uncles. We collected Veronica as we saw the movie theater emptying out and walked around Andres, now as if he were completely unknown, taking the escalator to the first floor where the taxis were waiting. We said nothing on the escalator, but as we stepped off, Veronica took a breath and looked at us with a smile: “Can you imagine the kind of scene that would have happened there if I were costeña?” The two women began laughing to the point of tears. We even had to stop once before we exited the mall, to get a hold of ourselves and put on our alert faces before we entered the street that bordered the central market, the emotional insecurity and suffering of the moment temporarily
alleviated by regionally specific, racialized humor about the baby’s father’s origins.

During the last two months of her pregnancy, Veronica moved out of the apartment she rented from her aunt and back into the small room she had once occupied in one of her uncle’s hotels, just down the street from Andres’ family home. In many ways, Veronica was trading one form of insecurity for another in moving into the hotel owned by her oldest uncle. Since becoming pregnant, Veronica had felt increasingly insecure returning alone late at night to her apartment on the border the small internally displaced squatter settlement. Her fears were confirmed around her seventh month of pregnancy, when a young man attempted to scale the wall of her duplex and enter through her bathroom window until she awoke and began screaming. The apartment had been robbed twice before, but always when no one was home. She only chose the apartment so she could clandestinely see Andres, who now never appeared. When she awoke one evening with cramping and no taxi would enter the neighborhood and take her to the clinic, Veronica decided to ask her eldest uncle for her old room at the shoestring/prostitute motel in Getsemani. Veronica had told me two years before that this same uncle had touched her once when she was twelve years old, after he had returned to the family home in Antiquoia after a night of drinking, but he was the only one of the four uncles whose hotel was never at full occupancy and was willing to offer her a place to live. “It’s not an ideal situation,” Veronica told me, but added with a laugh and a hand on her belly, “but nobody is going to bother me now!”

Matilda and Alicia began caring for Veronica and running her errands for her. I returned to the United States, but promised I would be back in December for the birth, calling both women on Skype every two weeks or so. Alicia often complained on the phone “it was a lot of work to keep Veronica positive.” Veronica went into labor a week before her due date and delivered via caesarean section, due to her age, the doctors told me a week later when flew from California and attended her postpartum appointment.
She stayed in the hospital for five days, during which time only one clean set of sheets was provided—Alicia had to call Veronica’s uncle to come with clean sheets from the hotel and even this was done begrudgingly. Andres refused to come to the hospital despite multiple calls because, Alicia said, he did not want to be seen. When I asked how the baby was doing, Alicia responded, “White, white, white, but a little bit serious” (Blanca, pero muy blanca, pero un poco seria). Veronica refused to complete the baby’s birth certificate at the hospital because she did not want to the baby to be registered without her father’s last name, which would require his signature. This suspension of filling out the birth certificate, of claiming and registering the child, Alicia told me, could inhibit the early development of baby Isabela because she might begin to feel uncertain, even at the age of a week old, that she was wanted by both parents.

Veronica’s mother arrived from Medellin a day after Veronica was discharged from the hospital and I arrived two days later. Veronica had attempted to convince Andres to visit before either of us arrived so as not to deter her. “His last name is Morado, which means dark.” Her mother told me in the alcove of her brother’s hotel lobby, where all of us were staying while taking care of Veronica. “Even if the baby looks paisa what good can come if she gives it a costeño last name and then moves back to Medellin? Everyone will know she is not pure paisa (pura paisa). And then she wants to travel some day and has to get his permission to leave the county? Or Veronica remarries one day and the man wants to adopt the baby and it requires Andres’ permission?” We were sitting in the hotel lobby, under the fans, waiting for Andres’ meeting of his daughter to be over.

Seven months later I sat in a pew with Veronica, her brother, and baby Isabela, at a large colonial cathedral a couple blocks from her mother and stepfather’s three-story house in Medellin. The priest before us was informing birth parents and godparents on the particulars of the baptismal ceremony the next day. He was calling out the children’s names in alphabetical order, and each set of parents and godparents would stand up so
they could be checked off the list for attending the orientation. “Isabela Morado Castillo?” He called. The three of us stood with the baby. “Where is her father?” The priest asked in front of the rest present. “He had an out-of-town commitment, father.” Veronica said. “Morado,” he repeated and shook his head briefly, before turning his attention back to the list of names and calling the next family forward.

When we arrived home, Veronica’s mother and aunt were busy making pots of chicken and rice for the reception the next day along with a woman they had hired. Isabela sat amongst gym mats and Tyco toys, looking carefully over her new clothes from the United States. Veronica was on the phone in her bedroom with the door closed and Veronica’s mother looked through the kitchen hatch to where Isabela was seated on the marble floor, “Can you smile for me, baby girl? Can you give us a smile? That’s it! There you go!” We could hear Veronica raise her voice through her bedroom window, adjacent to the interior garden. “Of course I have a serious granddaughter. I have a paisa daughter who argues on the phone to get money for baby formula from a Morado when we have offered to buy her a pharmacy if she finishes school. I know it is never easy to be a single mother, Jessica. But I was happy with my panza (pregnant belly) and she (Veronica) at least was a happy baby.”

5.7 CONCLUSION

This chapter illustrates the cultural connection in Cartagena between perceived negative emotions and poor health outcomes, but also the particular role that negative emotions associated with maternal loss (in the case of Miranda) or broken romantic relationships (in the case of Veronica) can have specifically on the health of the womb (or la matriz). In contemporary Cartagena (and among women from the interior of Colombia, as demonstrated by Veronica’s mother in Medellin), the womb, and female
reproductive health more generally, continue to be seen as particularly influenced by emotion. Contrary to common medical historiographies where a woman’s reproductive system was blamed for her hysteria, insanitary, or emotionality, in Cartagena we see that the inverse is true: a woman’s negative emotional reaction to events unfolding in her life can poison (in the case of Miranda’s cancer) or permeate (in the case of Veronica’s daughter being born “serious”) the womb and compromise its integrity, its health. The second element illustrated in this chapter is the pro-social reliance and coping strategies that women employ in supporting each other during emotional and physical hardship. Lastly, this chapter details the defense mechanisms that come into play when positive discourse and a collective affect of optimism are crushed with the finality of a negative prognosis, often at a very late stage of death in the case of Miranda, or at a very early stage of life, as in the case of baby Isabela.
Chapter 6

PATIENT AND STAFF DYNAMICS: PERSPECTIVES ON PSYCHIATRIC INSECURITY AND WELL-BEING IN CARTAGENA

6.1 INTRODUCTION

In this chapter, I argue that the attitudes and apparatus associated with Cartagena’s contemporary mental health care system offer a parallel environment for examining the systematic tensions between insecurity, coping, well-being, and health for residents throughout the city as well as the city’s unique relationship with the rest of the country. Cartagena and its mental health care system, I contend, are both baited at the margins of a rapidly modernizing state and deep in a lake of extrajudicial violence alongside colonial-era paternalism and social hierarchies. In turn, the local population considers the psychiatric clinic an absolute last resort for those whose coping strategies for maintaining
a sense of well-being despite insecurity (including seeking the support of social workers and general practitioners) have failed them. The psychiatric clinic in Cartagena was rarely considered a place where one goes to “get well.” Rather, both medical professionals and patients routinely described it as a “place of rest” (un lugar de reposo) not only for the patients themselves, but also for the family members who often reported committing their loved ones when their symptoms simply became “too much” for the family to endure.

In combining notes from my participant observation and interviews from two psychiatric clinics (one rural, open-air asylum at the outskirts of the city, and one self-contained, modern “hospital” in the urban center), I aim to illustrate three points: (1) How the management and organization of the mental health care system in Cartagena works to depoliticize and biomedicalize mental suffering associated with growing structural and/or extrajudicial violence as part of the regional state construction of affect (Jenkins 1991); (2) how lower SES patients (and some mental health workers as well) are socialized to behave as if they are beneficiaries of a colonial-era charity rather than as entitled, insured, biomedical citizens of the state; and (3) how patients from different regional and socioeconomic backgrounds form pro-social bonds within the hospital to promote a sense of well-being and empowerment despite the insecurity posed by their diagnoses, the hospital staff, and the environment within and beyond the hospital walls.

To achieve the above-mentioned objectives, I first briefly describe the ideologies governing the two separate clinics where I conducted fieldwork and summarize some of the popular attitudes toward mental health care and professional intervention among my non-clinical participants. I then turn the ethnographic gaze to a comparison of illness explanatory models employed by high SES patient participants at both clinics (a group I call “cosmopolitan elites in crisis”) and those newly insured, low SES Cartageneros I label “new biomedical citizens” (more on these definitions later). I conclude the evidence section of this chapter with three detailed ethnographic vignettes. In analyzing life
histories and explanatory models, reported in-patient experience, as well as inter-group and staff interactions, this chapter shows how well-being and insecurity in Cartagena are simultaneously defined at the margins of Colombia’s mental health care system in a city that is at the margins of the state (Das and Poole 2004). Located on the northern Caribbean coast of Colombia, Cartagena has been uniquely situated in the nation’s recent political history. It represents Colombia’s colonial past (as a UNESCO World Heritage Site and host to the 2012 Summit of the Americas), and a weekend escape from the internal armed conflict. The city became increasingly popular among middle class Colombians from Bogota and Medellin in the late 1990s and early 2000’s as the violence in those cities escalated (Cunin 2003). Despite a prosperous tourist economy, Cartagena continues to suffer from the highest income inequality of any major urban center in Colombia, a fledging public education system, an antiquated and decentralized public transportation system, and a reputation for corruption that borders on colonial and feudal stereotypes, which are often caricaturized in national media (Espinosa 2014). While DelVechhio Good (2010, 2011), Good (1988, 2011), Jenkins (1991, 2011), and Kleinman (1988) and Kleinman and Patel (2003) have all written extensively on the nexus of mental health and political subjectivities in the aftermath of armed conflict and natural disasters in Indonesia and El Salvador, Colombia’s mental health care system is unique in the sense that it has expanded precisely during the context of an ongoing internal armed conflict. The examination of Cartagena’s two psychiatric clinics thus offers an excellent site for the application of these theories in real-time: a mental health care system emerging in a country where no true “post-conflict” environment exists, but where the severity of extrajudicial violence is publically denied in order to encourage international investment, tourism, and the promotion of diplomatic conferences in the colonial city center, furthering the modernization projects of the country’s interior capital, Bogota.
Das and Poole’s (2004) theoretical contribution examining “the margins of the state” is also important to contextualizing the psychiatric patients’ experiences and explanatory models presented in this chapter. However, while Cartagena’s psychiatric clinics are indeed representative of these political, cultural, and moral “margins” where certain representatives of state interests consolidate power in zone of little apparent governance, I wish to apply the word “state” in this context a bit more broadly. For framing the clinical experiences of my respondents relative to their regional and socioeconomic power, I consider the idea of the “state” writ large (as in Colombia as a nation with a national healthcare system) and the “state” as in the smaller political departamento (or state) of Bolivar, of which Cartagena is the capital. The final consideration of “state” interrogated in this chapter is the idea of “state” in terms of a mental health patient’s individual subjectivity; a new, sometimes temporary self that is forged through the limitations of a clinical environment that alternately promotes biomedical modernization and coastal hierarchies. It is the rejection by patients of the biomedical institutions’ imposed limits on a patient’s “state” (as subjective experience) where I witnessed patients forge new pro-social alliances, promoting a sense of well-being through mutual affection, and resisting insecurity through an exchange of information about their diagnoses, their prescription drug regimens, and state guarantees of patients’ rights.

6.2 HISTORICAL AND CONTEXTUAL BACKGROUND

Clinical psychology and psychiatric medicine have been well-established and academically rigorous disciplines in Colombia’s universities since the 1940’s (Ardilla 1993). The Colombian Constitutional Referendum of 1991, however, set in motion a two-decade plan for standardizing health care around the country and increasing access
to state subsidized health insurance for Colombians in the lowest economic quintile, including their access to mental health services. By the mid-1990s, the number of Colombians who had affordable access to psychological and psychiatric services through subsidized insurance increased by over five hundred percent (Lamprea-Montealegre 2012), resulting in the rapid expansion of psychiatric hospitals and rehabilitation facilities around the country. The referendum also included a stipulation to subsidize private health insurance for companies that offered nationwide coverage. Prior to that decade, Colombians’ health insurance was tied directly to the departamento (or state) in which they lived, meaning that if they fell ill outside of these borders, they would be forced to pay for medical services out of pocket.

The health care goals outlined in the 1991 Constitutional Referendum have resulted in a significant expansion in the power and presence of the Ministry of Health (based in the capital, Bogota) throughout the individual departamentos (or states). The Ministry of Health undertakes the oversight and implementation of national minimum standards in urgent care clinics, hospitals, and psychiatric facilities in each of Colombia’s five major urban centers: Bogota, Medellin, Cali, Barranquilla, and Cartagena. Cartagena (with a population of nearly 900,000 residents), however, still has only three inpatient mental health care clinics, fewer than half of those registered in the next largest city, Barranquilla. What this has meant is that in Cartagena, first-generation mental health care seekers (or new biomedical citizens) with relatively low SES are in the somewhat unique position of being treated in the same facilities alongside health care seekers with relatively high SES (or cosmopolitan elites in crisis). For many patients I interviewed in these two clinics (both high SES and low SES) the experience of their hospitalization was the first time they had such close, personal contact (sharing sleeping quarters, dining tables, and recreation facilities) with Colombians who were from different socioeconomic and sometimes from different regional backgrounds than themselves. Wealthy Colombians
from Cali or Bogota, who found themselves admitted to one of Cartagena’s psychiatric clinics, for example, often claimed to have suffered a psychiatric episode or drug overdose while vacationing or visiting the coast. Many spent as few as three and as many as twenty-one days at one of Cartagena’s facilities until medical staff deemed them stable enough to fly back to their city of origin or be terrestrially transported to a private inpatient facility in the nearby city of Barranquilla. While Cartagena’s psychiatric clinics were simply a holding point for cosmopolitan elites in crisis, these hospitals were the beginning and the end point for new biomedical citizens from the coast, as the hospital and its staff were often the exclusive point of both their primary and specialized care.

While nationwide health insurance and the reliability of state subsidies for low SES patients led to an economic boom for both of the psychiatric hospitals in this study (including the expansion of the urban psychiatric clinic into four different branches over a period of fifteen years), directors at both hospitals were somewhat negative about the associated attention and interference of national-level public health bureaucrats. The directors at both hospitals equated the involvement of the State Ministry of Health as evidence of the unabated, pernicious cachoizacion of the coast (or the social and political occupation of Cartagena by Colombians from the interior) and an interference with the way “things have always been done on the coast,” as Señor Buenrostro\(^1\), the director and owner of Clinica Campestre, informed me. Nevertheless, both directors were pleased with the reliability of payment that came from the state subsidized insurance their poorer patients now had.

Expansion of subsidized insurance for mental health services may have meant more work opportunities for allied health care providers, but not necessarily better pay

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\(^1\)Señor Buenrostro was not a mental health professional, but an attorney and the grandson of a longstanding senator of the departamento of Bolivar. The clinic, which had previously been called “The Good Deed Clinic” (a close approximation of the true name’s sentiment), had been a public service project (or clientelistic favor) his uncle had built on his own hacienda property in order to guarantee his reelection during a difficult election year.
or protection from forced overtime. At the urban psychiatric hospital, Clinica Bolivar, skilled practical nurses (with the equivalent of a two-year associates degree) received slightly more than a minimum wage salary for their full-time employment contracts, but with the addition of two 24-hour shifts a month, they were working an average of five forty-hour work weeks for every four-week salary that they received. The nurses refused to complain, however, because they received a pension, vacation, and health insurance through their jobs. Between noon and five o’clock, there was little the nurses had to do anyway, they informed me, because almost all of the admitted patients were so heavily sedated they slept the entire stretch, leaving the nurses and custodial staff in the inpatient corridor free to socialize or watch television in the patient recreation areas while the psychologists attended to outpatient appointments and admitted emergency arrivals in the front wing of the hospital.

At Clinica Campestre, located at the outskirts of Cartagena, the treatment of allied health care workers (many of whom had professional healthcare aide certificates, but no formal university degree) and support staff was far worse. When I began conducting fieldwork in March 2011, one nurse’s aide told me she had not been paid for over four months and that was why she was rarely motivated to engage in afternoon crafts or group therapy (charlas) with patients on the days when the nurse interns and their director from the local university were not present. In February 2013, over a year after I had returned to the United States, a front-page article in Colombia’s national newspaper, El Universal, claimed the majority of workers at Clinica Campestre had not received a salary in “more than a year” (which by my fieldwork estimates would have been closer to two years). This system of employers delaying payment, demanding that employees understand the “difficult economic situation” of employers (a quote from the article), and threatening to withhold payment permanently if employees walked off the job was common in many of the work histories I heard from low SES costeña women who worked in family homes,
small stores, or hostels, but never in a biomedical institution now funded largely by the
state. The Universal article stated, “Some employees have insisted that that the reason
they have not quit is because part of the ‘politics of the business’ is that if the employees
do not continue working, they will never receive their back pay.” The same nurse who
had spoken to me during our interview was willing to be identified by the newspaper
and gave the following statement. “We (the employees) cannot even buy school supplies
for our children, we have had our electricity and water cut-off at times. I don’t return
home until nine o’clock at night because I am worried about seeing those who will come
to collect on their debts. This is the last straw, it is such a lack of respect.” Paisa and
cachaco business owners often cited such business practices as the most visible sign of
Cartagena’s lack of industrial culture and its continued colonial culture of exploitation.
Many stated that the reason working class costeños sought out employment from paisas
and cachachos in Cartagena rather than other costeño business owners was that the new
generation of costeños were looking for work (trabajo), not another form of slavery
(esclavitud). Cachacos and paisas cited this aspect of “coastal mentality” (mentalidad
de la costa) as one of the primary reasons regional minorities from Medellin and Bogota
found it so easy to develop successful businesses in Cartagena and easily surpassed local,
native costeño elites.

Degrading working conditions, insufficient training, and a lack of professionalism
on the part of hospital administrators regularly led to health care workers exhibiting
mocking or disciplinary attitudes towards patients in both of my field sites. Dr. Jose,
the head psychiatrist and owner of Clinica Bolivar, was rarely in his office because he
spent the majority of his time, he told me, “thinking and researching” at home while his
wife managed the employees and his niece (a first-year resident in psychiatry) managed
inpatient care. During my second interview with Belinda, a twenty-year old patient who
suffered from anorexia, disturbing thoughts, and insomnia, Dr. Jose briefly popped his
head through the swinging door that separated the outpatient corridor from the inpatient annex. “Hey there, Belinda. You must be eating because you are looking fatter already!” he quipped with a hearty laugh. Belinda ended our interview and retired to her room for the rest of the day. This was her second to last day of scheduled inpatient treatment. She would return to her village two days later, forego her outpatient appointments, relapse, and return to Clinica Bolivar less than two months later “in a state of crisis” as the nurses called it. “This is one way they maintain their loose beds (camas flojas meaning high turnover, often of the same patients)” Belinda’s mother informed me when I spoke to her after Belinda was admitted a second time. “They often don’t leave here much better than when they arrived.”

Coastal-colonial interactions between staff and patients were not exclusive to the psychiatrists and psychologists who had limited exposure outside the departamento of Bolivar. Dr. Amelia, Dr. Jose’s niece and the psychiatry resident who ran the in-patient floor at Clinica Bolivar, had just returned to Cartagena after six years of medical school in Buenos Aires, Argentina when she first agreed to do an interview with me. She was eager to talk to me about her travels in Latin America, my doctoral program in California, and her new luxury condominium on the water near Cartagena’s airport. When I asked Dr. Amelia to compare patients’ expectations and reported experiences following in-patient treatment at Clinica Bolivar with the patients she had seen in Argentina, however, her response was specific to cultural tropes about the coast. “It is easier to manage the patients here.” She told me. “They are not as depressed (here) because here on the coast, the expectations are lower.” When I asked if it had to do with Cartagena’s relative isolation from national politics, or something specifically melancholy about Argentine culture, Dr. Amelia stopped me, acknowledging that I was not understanding her point. “Jessica, look at us,” she said, gesturing at both of us. “We are weaker. Our bodies were not meant for labor, for planting. So we evolved to use our brains for professional work,
for study, and all of that thinking led to greater rates of depression in our population. Here [in the coast] you see less depression because of the population. You see a little Black child who is two years old, three years old, when they put on the music, the child immediately starts dancing. A paisa or cachaco child would just stand there. It is an issue of who uses the body more and who uses the mind more. For this reason, costeños tend to become less depressed and they recover more quickly.”

While colonial and racist tropes governed much of the discourse I witnessed in Cartagena’s psychiatric clinics, Colombian mental health professionals from the interior of the country wanted to distance themselves from coastal mental health care practices entirely. During a presentation of my research at a Latino/a mental health conference in Los Angeles in 2011, I sat on a panel with a psychiatry professor from the National University in Medellin (who also happened to be an ethnic paisa). After listening to my talk on mental health explanatory models in Cartagena, the paisa professor felt compelled to further contextualize my study (or perhaps define himself in contrast to the subjects I described). He jumped up next to me before anyone in the audience had a chance to ask a question or comment. “Cartagena is not really even Colombia!” He said before giving several examples of how many in the city still clung to “folkloric beliefs” and how the mental health care system and the culture were “backward” (atrasado) compared to the rest of the nation. I had heard this refrain numerous times by Colombians from the interior, “that Cartagena is not really Colombia,” but I was surprised to hear it in this context, at a conference of Latino mental health professionals, in the basement of a Sheraton in downtown Los Angeles. Inspired by this interaction (or defense mechanism), I began tracing how the widely held belief that “Cartagena is not really even Colombia,” manifest in my clinical transcripts and notes in order to ascertain how micro-interactions between different regional and class groups within the hospitals in Cartagena corresponded to how patients come to understand their own identities in relation to each other in the margins of
the nationalized mental health care system, in the margins of the state of coastal Bolivar, and in the context of extrajudicial violence in their city that was largely denied.

6.3 CARTAGENERO ATTITUDES TOWARD MENTAL HEALTH INTERVENTIONS

Despite psychology and psychiatry’s long history in Colombia (dating back to the 1940’s as a university major), popular attitudes among non-clinical participants generally focused on the stigma attached to seeing a psychologist. Nonetheless, almost all non-clinical participants I interviewed had a family member or a close friend who had received mental health treatment (inpatient or outpatient) and many generally believed it could be helpful. Among low SES participants, there was a general consensus that certain mental health issues came “in the genes” (en los genes) like schizophrenia while other mental illnesses (clinical depression, bipolar depression, anxiety, and nervios) often arose in individuals whose caracter (character as personality or self) had been weakened by repeated negative experiences or an inability to “leave the past in the past” (as described in Chapter 4). Individuals with mental illness were also differentiated from individuals with cognitive disorders, where the people in the latter group were often referred to simply as “special” (especial) or “delayed” (atrasado) rather than “sick” (con una enfermedad mental) or “crazy” (loco/a).

While previous chapters note dynamic ways in which female Colombian participants actively attempt to cope with stress and insecurity (and thus maintain their physical and mental well-being), women in the neighborhoods where I conducted fieldwork showed a strong preference for seeking the advice of a social worker over a psychologist or psychiatrist when they felt they could “no longer endure” (no podio aguantar mas) their negative emotions or effectively manage their problems. As described in Chapter
2, women, especially those in Olaya, were open about seeing social workers. Part of the reason for this, one woman told me, is “because social workers address the social problems one has. The problems I have are social, problems in my house. Psychologists, they address mental problems.” It appeared frequently that women attached less stigma to seeing a social worker because “everyone has problems” (in the sense of problems in the social/relationship aspects of their lives) whereas psychologists were more often associated with individuals who had deeper, more biological (and thus more permanent) “mental problems.” Precisely as a result of this cultural stigma, the Colombian Ministry of Health in 2003 reported that only 6 percent of the Colombian population that needed psychological or psychiatric support pursued treatment and that in Bogota it was not a lack of access, but the fear of being stigmatized as “crazy” (loco) (RCN transmission, May 10, 2012. Cindy, a nursing student from Nelson Mandela, described the conflict she feels about wanting to seek the support of a psychologist with her new health insurance, alongside her fear that her family will be suspicious of her or ridicule her if they find out.

Jessica: And are there social workers in this neighborhood?
Cindy: No, there aren’t any.
Jessica: And where do people go when they have problems?
Cindy: Like to look for a psychologist or something like that? Well, I can say that I have never sought help from a psychologist and sometimes I have said to myself, “I want to go to a psychologist.” I have sometimes felt so depressed and sometimes I have wanted to seek out a psychologist, but it hasn’t been within my grasp.
Jessica: But with your health insurance you can go, right?
Cindy: Yes.
Jessica: So why haven’t you gone?
Cindy: Well, I haven’t been motivated to go for another reason, as well. There are times that yes, I get really deep into it (the depression), or I have an outburst and I say to myself, “Ay, no. Why?” Or I say to myself, “I am going to go to a psychologist.” Then they are going to ask, “Ay, you? Why are you going to a psychologist?” and all that. So that is the reason. I don’t want to have to explain to anyone why I am going to see a psychologist.
Jessica: But how are they going to know if you have seen a psychologist if you have to go all the way downtown? Is it that people will start talking and then they will know?

Cindy: No, I mean to say that maybe here, here, here in my house they will say, “Ay, you? Why are going to see a psychologist? What is wrong with you? What do you have?” You understand what I mean now? This is the reason then. It is that I don’t want to have to give explanations. That’s why I haven’t gone to see anyone.

Although Cindy felt that she was managing her periodic depression and “outbursts” with some degree of success on her own, she was torn about what to do. As a medical professional in training, she recognized that psychology was a valuable medical profession and believed she could benefit from therapy. Nonetheless, Cindy continued to live in a community (or even more specifically, in a household) where she feared they would be highly suspicious that she “has something” very serious or that she was losing her mind. Since she was the only potential professional in her household and she relied on the financial collaboration of her mother, boyfriend, and siblings, the costs of the stigma were too great for her to seek support.

The same fear of stigma that Cindy mentions above motivates many Cartageneros to delay mental health treatment until they are in a period of crisis, rather than seeking support earlier when the problem may have been managed with outpatient therapy and medication. Ines from Olaya, for example, who said she was now very well read on the topic of depression and regularly attended outpatient therapy sessions, described her first introduction to a psychologist during such a “period of crisis.”

I felt sick, that is to say I felt a separation between me and my, my, my three loves, my mom, my daughter, and my husband. So I left my mother and daughter here (on the coast) and went to my husband in Cali, but I felt that the love of him did not totally fill me. I felt like I was missing having all three of them so I was living in this sea of disillusion. Every day I would wake up with this, “Ay, I don’t want to be in my house.” Um, it started there, but when I went (to the hospital), I was so deep in this, I no longer was thinking about anything all. I was gone. And my husband and I, I was hardly
sleeping or when I did wake up I would see him there, crying at my side. He used to cry because he did not know what to do. When I was in Cali I went through a very hard time because when they finally hospitalized me, I started seeing someone, a psychologist, regularly in the hospital.

While Ines concluded that the potential for clinical depression had always been “in her genes” since she remembered seeing her mother suffer long bouts of sadness paired with a lack of appetite and unwillingness to get out of bed, she was convinced that the trigger of her depressive episode was when her husband was forced to move to Cali (his city of origin) for work (a 1.5 hour flight from Barranquilla) when he lost his job as a casino manager in Barranquilla. Cartel activity in Cali’s casinos was particularly dangerous during the late 1990s and early 2000’s when he was working there, so she worried about him living on his own, yet the stress of feeling torn, as she describes, “between my three loves” led to exhaustion and depression. When Ines finally left the hospital after a full three months of treatment, her husband left his job in Cali and her mother sold her house in Barranquilla so the whole family could live together in Cartagena, in part because the city was considered more secure even though there were fewer employment options. Ines recognized, however, that even the quality of outpatient therapy she now received in Cartagena did not compare with the care she received in either Cali or Barranquilla. A further testament to the difference in the quality of inpatient care in Cali is also revealed in her statement that in the state hospital, she saw a psychologist regularly while she was admitted, a practice I never saw take place either at Clinica Bolivar or Clinica Campestre in Cartagena.

It is well established in the literature that poor populations in countries with emerging markets statistically have higher rates of mental disorders, and Latin America is no exception (Das and Das 2007; Kleinman 2003). These populations tend to feel less control over their day to day lives (as was the case with Ines) and feel more susceptible to outside violence, the threat of which Ines also suffered earlier in her life while working
in some of Cali’s casinos, which were run by the cartels and when she was hired to work for a Colombian based network in Spain in her early twenties. Long-term exposure to insecurity can eventually challenge psychological stamina over time (Frank and Frank 1985). In Cali in the early 2000’s, for example, nearly 24 percent of eighteen to twenty-five year-olds in a 1000+ person study of the poor listed a sufficient number of symptoms to qualify for a mental disorder under DSM-IV or ICD guidelines, with the primary illness categories including depression, anxiety disorders, and substance abuse (Harpham et al. 2004). Ewig and Bello (2009) report that while expanded access to mental health care services in Colombia has been a step in the right direction for the state’s political inclusion of the poor, low SES patients claim that extreme economic inequality and vulnerability to violence were the primary barriers to maintaining their mental health, an issue which subjects in my study also acknowledged, admitting that this greatest threat to their psychological well-being yet something that their mental health care providers could do little to change.

Lower and higher income Colombian mental health patients often had dissimilar primary motivations for seeking psychological support and disparate expectations about how their diagnoses would affect their everyday lives in the short and long-term. In my interviews, cosmopolitan elites in crisis talked at length about their mental disorders negatively affecting their quality of life, their ability to reach their goals, and their overall sense of well-being (bien estar). For new biomedical citizens, however, family members brought them to mental health clinics when their behavior or despondency began to affect their ability to work (whether in domestic responsibilities or paid labor); rushed them to the hospital when they began acting delusional; or called the police during cases of aggression. The existence of chronic conditions that needed to be monitored after inpatient treatment was often denied by low SES patients and families altogether in order to avoid social stigma unless the illness was culturally framed as a common experience
within the extended social network such as nervios or problemas, similar to the cases of Mexican Americans diagnosed with schizophrenia in Jenkins (1991) study.

In Cartagena, schizophrenia was the most common diagnosis among low SES patients I met in in-treatment facilities. They were routinely prescribed high doses of Haloperidol, a powerful antipsychotic and paralytic that made it difficult if not impossible for them to seek or maintain employment after they were discharged. Among higher SES patients I interviewed, clinical depression and bipolar depression were the most common diagnoses, with no patients citing schizophrenia. In fact, two cosmopolitan elites (one professional engineer and one university chemist) doubted that the low SES patients around them would have been diagnosed with schizophrenia at any other psychiatric facility outside Cartagena, attributing purposeful misdiagnosing to the hospital’s preference for prescribing lower cost antipsychotics rather than the latest generation bipolar drugs such as Lithium Carbonate and Risperdal. Such observations in the clinical environments are consistent with Biehl’s (2007) findings among psychiatric patients of low socioeconomic status in northern Brazil where he concluded that the perpetuation of local stereotypes about poor psychiatric patients being inherently aggressive often results in them being overmedicated and then turned out into the streets without follow-up therapy.

6.4 RESEARCH METHODOLOGY

This chapter is based on qualitative and quantitative evidence from semi-structured interviews with a convenience sample of forty patients at two psychiatric clinics in Cartagena, Colombia (Clinica Campestre, at the rural outskirts of Cartagena and Clinica Bolivar, near the city center)², in addition to participant observation at both sites over a

²Both clinics and the names of all patients and clinicians in this study are pseudonyms.
sixteen-week period (January to May 2012). The majority of patients were interviewed approximately five to seven days after they were admitted. Patients, some of whom were in the company of their family members, were asked about their symptoms, diagnoses, medications, and experiences during in-patient treatment. I also talked to psychologists, psychiatrists and support staff at the two clinics about individual patients’ treatment and progress, as well as patients’ economic status.

6.5 NEW BIOMEDICAL CITIZENS AND COSMOPOULITAN ELITES: CLASSIFYING ECONOMIC DISPARITIES

In Colombia, an individual’s socioeconomic status is habitually correlated with the real-estate value and corresponding utility costs in the neighborhood where one lives. Bureaucratically ranked neighborhoods range from “Level one” (typically signifying a squatter settlement where sewage, gas and electricity are not enjoyed by all residents) to “six” (gated communities and luxurious condominium associations). In both psychiatric clinics, nurses recorded patients’ socioeconomic status in their clinical history according to the assigned level of their neighborhood. Patients were “poor” (pobre) if they lived in level one; medium (medio) if they lived in level two or level three; and comfortable (comodo) if they lived in levels four, five or six. Colombian patients who identified as having been displaced by the internal armed conflict are separately classified as “displaced” (desplazado).

The potency and quality of psycho-pharmaceuticals among the patients in both psychiatric hospitals also had underlying class implications. Since certain antidepressants and antipsychotics in Colombia have no generic equivalent, many higher income
patients and lower income patients in the treatment facilities were on completely different pharmacological regimens even if they had the same clinical diagnoses. The medications regularly consumed by the poor may be three generations apart from those higher income patients could afford. Zoloft (Setraline HCI) in Colombia, one Cosmopolitan Elite in Crisis told me, can cost as much as 150,000 pesos (82 USD) a month, while an equivalent prescription of Haloperidol and Biperiden plus Valproic Acid may only cost 15,000 pesos (8 USD).

In countries with emerging markets, Good (2012) argues that clinicians often “stand on the divide between desire and inadequacy” (p. 279). Like U.S. clinicians, health practitioners in Colombia are faced with increasing pressure to treat more patients in less time. Following the initial implementation of health care reforms outlined in the 1991 Constitution, the nurse practitioner at Clinica Campestre informed me that the average outpatient clinical consult for psychiatric patients with state-subsidized health insurance dropped from forty minutes to twenty minutes. There was also a twenty-day limit on inpatient residential treatment covered by the state subsidized health insurance, EPS, meaning that many poor patients were discharged before they were ready to transition to their everyday lives, but they could be readmitted multiple times per year, and sometimes returned for another 21-day period of sedation in as few as two weeks.

As DelVecchio Good et al. (2008) have argued, subjectivity can be understood as “the most intimate forms of everyday experience” (p.2), yet the experience of daily experience in the psychiatric hospitals in Cartagena represent both daily experience and the new subjectivities that emerge during periods of crisis and disruption. When subjects in crisis can identify what has changed or what is suddenly absent in their social world through basic questionnaires, it is possible to grasp what is considered fundamental to constituting a “whole” self among a particular group and how selves become destabilized.
6.6 NEW BIOMEDICAL CITIZENS AND COSMOPOLITAN ELITES IN CRISIS: PATIENT DEMOGRAPHICS, PATIENT EXPLANATORY MODELS, AND DIAGNOSES

Table 6.1: Low SES and High SES Patient Demographics

<table>
<thead>
<tr>
<th>Patient Sample Size, 40, Patient (P)</th>
<th>No. of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female participants</td>
<td>26</td>
</tr>
<tr>
<td>Male participants</td>
<td>14</td>
</tr>
<tr>
<td>Basic interview: symptoms, diagnosis, treatment</td>
<td>17</td>
</tr>
<tr>
<td>Extended person-centered interviews</td>
<td>23</td>
</tr>
<tr>
<td>Age group: 17-24</td>
<td>13</td>
</tr>
<tr>
<td>Age group: 25-32</td>
<td>12</td>
</tr>
<tr>
<td>Age group: 33-40</td>
<td>6</td>
</tr>
<tr>
<td>Age group: 41-50</td>
<td>7</td>
</tr>
<tr>
<td>Age group: 51-60</td>
<td>2</td>
</tr>
<tr>
<td>Economic Status: Poor or Displaced</td>
<td>24</td>
</tr>
<tr>
<td>Economic Status: Medium</td>
<td>8</td>
</tr>
<tr>
<td>Economic Status: Comfortable or Better</td>
<td>8</td>
</tr>
<tr>
<td>Majority of adult life in Cartagena</td>
<td>22</td>
</tr>
<tr>
<td>Majority of life rural community</td>
<td>14</td>
</tr>
<tr>
<td>Majority of life in other city</td>
<td>5</td>
</tr>
<tr>
<td>Admitted to clinic before/ re-admitted during study</td>
<td>22</td>
</tr>
<tr>
<td>Admitted to mental health clinics outside Cartagena</td>
<td>10</td>
</tr>
<tr>
<td>P expressed confusion about diagnosis</td>
<td>24</td>
</tr>
<tr>
<td>P expressed confusion about treatment plan</td>
<td>20</td>
</tr>
<tr>
<td>P identified prescription medications by name</td>
<td>18</td>
</tr>
<tr>
<td>P correlated improvement with increased or decreased sleep and appetite</td>
<td>18</td>
</tr>
<tr>
<td>P expressed concern about returning home</td>
<td>17</td>
</tr>
<tr>
<td>P expressed dissatisfaction w/ clinical experience</td>
<td>15</td>
</tr>
</tbody>
</table>
### Table 6.2: Low SES and High SES Patient Responses to the Question: “Why Did You Come To In-Patient Psychiatric Treatment?” (Responses listed in order of frequency).

<table>
<thead>
<tr>
<th>Low SES Patient Responses</th>
<th>High SES Patient Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nervios</td>
<td>I have major clinical depression.</td>
</tr>
<tr>
<td>I don’t know what is wrong.</td>
<td>Observation/ changing medication</td>
</tr>
<tr>
<td>I do not sleep / sleep too much.</td>
<td>I have bipolar disorder.</td>
</tr>
<tr>
<td>Aggression/ I get angry easily (agresión/coraje)</td>
<td>Depression (due to major life event)</td>
</tr>
<tr>
<td>I speak with / have a lot of character</td>
<td>Waiting to transfer to another hospital</td>
</tr>
<tr>
<td>(caracter).</td>
<td></td>
</tr>
<tr>
<td>I am not animated / low affect (bajo animo).</td>
<td>I have an anxiety disorder</td>
</tr>
<tr>
<td>My spouse/family mistreats me/I am abused by family members.</td>
<td>I have problems with my family / family member wants to control me.</td>
</tr>
</tbody>
</table>

### Table 6.3: Low SES and High SES Patient Responses to the Question: “How Would You Describe Your Experience In In-Patient Psychiatric Treatment?” (Responses listed in order of frequency).

<table>
<thead>
<tr>
<th>Low SES Patient Responses</th>
<th>High SES Patient Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>No one has told me anything / I do not know more now than when I arrived.</td>
<td>I cannot wait to leave / go home.</td>
</tr>
<tr>
<td>I am here to rest.</td>
<td>I expected more contact with the therapist.</td>
</tr>
<tr>
<td>I am bored / I desire more activities.</td>
<td>There are better hospitals in Barranquilla/Bogota/Cali/Medellin.</td>
</tr>
<tr>
<td>I want to go home.</td>
<td>This kind of treatment does not work for me.</td>
</tr>
<tr>
<td>I don’t want to leave / I am not ready to leave.</td>
<td>The clinical staff are not fulfilling their responsibilities (they are too absent).</td>
</tr>
<tr>
<td>No one has visited me</td>
<td>The clinical staff is not fulfilling their responsibilities (they are incompetent/lazy).</td>
</tr>
</tbody>
</table>
Table 6.4: Low SES and High SES Patient Responses to the Question: “How Have You Felt Since Arriving To In-Patient Psychiatric Treatment?” (Responses listed in order of frequency).

<table>
<thead>
<tr>
<th>Low SES Patient Responses</th>
<th>High SES Patient Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel very tired (from the medication).</td>
<td>The dose (of medication I am taking) is too strong.</td>
</tr>
<tr>
<td>I feel better (less tired/tipsy than before).</td>
<td>I feel relaxed (from the medication).</td>
</tr>
<tr>
<td>I feel tipsy/stupid (from the medication).</td>
<td>I want to talk to the doctor.</td>
</tr>
<tr>
<td>I feel anxious/nervous.</td>
<td>I do not feel like myself.</td>
</tr>
<tr>
<td>I am hungry all the time.</td>
<td>We are on different medications (than the low SES patients present).</td>
</tr>
<tr>
<td>I am not good for anything/can’t do anything.</td>
<td>I do not normally take this medication.</td>
</tr>
</tbody>
</table>

Table 6.5: Low SES and High SES Patient Responses to the Question: “What Is Your Treatment Plan Following Discharge?” (Responses listed in order of frequency).

<table>
<thead>
<tr>
<th>Low SES Patient Responses</th>
<th>High SES Patient Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>I will go home without a treatment plan.</td>
<td>I will see a different therapist.</td>
</tr>
<tr>
<td>I will take the medications that I am prescribed.</td>
<td>I will return to my home city.</td>
</tr>
<tr>
<td>I will return for my consultation eight days after I am discharged.</td>
<td>I will return for a consultation eight days after I am discharged.</td>
</tr>
<tr>
<td>I am unsure what I need to do once discharged.</td>
<td>I will return for a consultation eight days after I am discharged. I am better / I do not need additional support.</td>
</tr>
</tbody>
</table>

As the tables above suggest, the majority of lower SES patients (or new biomedical citizens) in Cartagena’s psychiatric hospitals continued to use one or more elements of folk or popular explanatory models to talk about their symptoms, diagnoses and treatment even after five days of in-patient hospitalization. The pattern among poorer patients persisted even among those who cited multiple hospitalizations. As Dr. Natalia at Clinica Bolivar informed me, one reason for this is that the majority of new biomedical citizens
(low SES patients) arrive at the clinic “in a state of crisis” and their primary condition is listed on their chart simply as “Psychotic Episode” without a formal diagnosis until a full clinical interview can be administered. Typically, a clinical intake occurs during the first consultation after the patient is discharged, yet many patients do not meet their commitment to follow-up appointments and only return to the hospital again for in-patient care when their symptoms again become unmanageable, often never receiving a clear diagnosis of their illnesses.

Both in Clinica Campestre and Clinica Bolivar, attitudes among the administration and primary care providers (nurses, cooks, custodial staff) affected the culture of care and the degree of cultural competency observable in the in-patient social spaces. All clinicians, but floor nurses in particular, had to be able to engage with and assess multiple explanatory models among patients of different socioeconomic backgrounds in Cartagena’s psychiatric facilities. During rounds, for example, cosmopolitan elites at both clinics were regularly asked, “How are you?” or “How do you feel today?” followed by a pause. As the majority of affluent patients have been previously assimilated to standard biomedical culture, these patients regularly responded to staff with subjective/diagnostic assessments of their somatic state, which they then: (a) attributed to the medications they were taking or (b) compared to their symptoms prior to hospitalization. By contrast, new biomedical citizens were not expected to engage in the same clinical dialogue. The questions they were asked were consistently less open-ended and often paired with possible appropriate answers, guiding the patient to the intended response. A nurse might ask, “How are you?”, followed immediately by the offer of “A little bit better?” or “Still really tired?” As a result of these repeated exchanges, many new biomedical citizens regularly associated “feeling less tired” with “feeling better” in their explanations to me of how patient progress evolved during hospitalization. As the strength of the sedatives they took were reduced over a period of days, these patients’ increased energy was
associated with “being a little bit better”, “being tranquil” or “less tired and (therefore) ready to go home.”

A difference in the degree to which new biomedical citizens and cosmopolitan elites could name or describe the initial symptoms that landed them in the hospital and how they elaborated on the coping mechanisms they used was another major difference between the two patient populations. New biomedical citizens and cosmopolitan elites diverged sharply in their opinions on the relative danger or usefulness they perceived in talking about the “thoughts” or the “problems” that led them to hospitalization. When I attempted to begin my questions with a focus on patients’ life histories, higher income patients often reverted to a typical psychiatric clinical intake script: naming their diagnosis, the onset of symptoms and their current assessment of their mental disorder. Lower income patients, on the other hand, willingly elaborated on their life histories, but when asked about the problems that caused them to seek treatment or if they had discussed them at length with a psychiatrist or psychologist, all but five told me they had not.

Three new biomedical citizens in the study cited obsessive thoughts as the main cause of their suffering and were eager to tell me about these thoughts even though they had never discussed them at length with the clinical staff. Zulema, a new biomedical citizen at Clinica Campestre, for example, told me that she had dreamt that she had burned down the elementary school in a posh neighborhood where had been working as a teacher’s aide. Every morning since the day of her dream, she feared she would do it in real life, especially whenever she rode on a motorcycle that reminded her of the one she took to the school in her dream. By the end of the first week of obsessive thoughts, she decided to report her obsession as a premonition to the school’s headmaster. Zulema was arrested, involuntarily admitted to the psychiatric hospital, and now was undergoing a 21-day treatment involving heavy sedatives but no therapy. Hanni, a young housewife at Clinica Bolivar married to a farmhand, told me that four months before she had watched
a soap opera where a woman murdered her husband. The scene, her mother informed me, had “caught” her daughter in a moment of “mental weakness,” which was why she could not stop replaying the scene in her mind. As the obsessive thoughts became more intense, Hanni began to fear that she would “become like the female character” and murder her decent yet humble husband against her will. Even though the women were at two different clinics, each reported to me that their treatment plan involved “taking pills and not thinking too much.” Hanni was advised to avoid television completely and to listen to Christian music when her “thoughts were running.” Zulema was advised to avoid the neighborhood where the school was located and to “try to stay calm,” specifically by avoiding too much noise from pico (large stereo speakers) parties in her low-income neighborhood. The thought of having to avoid neighborhood parties on doctor’s orders was one of her greatest concerns about her discharge, she admitted, because it would be mean greater social isolation from the friends that supported her and raise questions within her community about her own stability.

6.7 PSYCHIATRIC PATIENTS AND THE CULTURE OF PSYCHO-PHARMACOLOGICAL COMPLIANCE

Nursing staff ranked psychopharmacological compliance second only to ensuring patients’ immediate physical safety on their list of professional responsibilities. The discourses among patients about the medications they were taking as well as their interactions with nursing staff when medications were distributed further highlight the different explanatory models used by new biomedical citizens and cosmopolitan elites during in-patient psychiatric hospitalization.
As previously mentioned, one of the major challenges faced by psychiatric service providers in Cartagena is that new biomedical citizens often stopped taking their medications altogether within the first eight days of being discharged, precisely when they would be required to return to the clinic’s pharmacy for a refill of their prescription, and the first out-patient psychological consultation. Among the eight psychologists and psychiatrists I interviewed, Dr. Omar assured me that he had the highest rate of pharmacological compliance after discharge, although he admitted that he resorted to manipulating some of his less educated patients, especially evangelical Christians, by telling them that “God wants you to take your medication.” If Dr. Omar suspected that a lower income patient was lying about taking his or her medication during an outpatient consultation, he laughed that he would remind them, “It is a sin, and God will know.” He pointed to the statue of the Virgin Mary on the bookcase in the corner of his office and a evangelical Christian prayer card on the wall as evidence that he had all his religious bases covered, in the event he needed to employ them to exact honesty from his patients.

The tactics for mandating psychopharmacological compliance among hospitalized patients was far less nuanced than those employed by Dr. Omar with his outpatient clients, although the explanatory models used by nursing staff directly reflected the underlying cultural assumptions about the patients in their care. New biomedical citizens who resisted medication were often called “agresivo” (aggressive) by nursing staff who often resorted immediately, particularly in Clinica Bolivar, to administering medications by injection rather than taking the time to explain what the pills were for or why they must be taken. One case that illustrates this typical occurrence involved a nineteen-year old new biomedical citizen, Rodolfo, who had been admitted to Clinica Bolivar the day before for vicio (drug addiction) and depression. Rodolfo had been sitting next to me on the recreational patio at Clinica Bolivar when he was told it was time for his first injection (of Haloperidol). When he asked why he must take it, because he was feeling calm enough
with just the oral sedatives, he was told by the nurse, “So that you can relax.” When he protested slightly, saying “But I do feel relaxed,” the nurse responded, “Well then for the bad way you acted yesterday. Get in your room. Get. Or it will be worse.” According to respondents in both socioeconomic classes, avoiding sedative injections was a primary motivation for the deference patients showed toward clinical staff members as well as their trepidation about asking questions.

With the exception of forced sedation, the majority of new biomedical citizens I interviewed looked forward to receiving their medications from the nursing staff in the morning, afternoon, and evening. Five of the patients I interviewed even confused medication distribution with therapy. When I asked patients at Clinica Bolivar how often they had a psychological consultation with the doctor during their inpatient treatment, they told me, “Three times a day: at 8 am, at 2 pm, and at 8 pm.” The ritual of taking their medication with the nurse standing over them was often their only one-on-one contact with a clinician until after they were discharged. Many patients I observed obviously enjoyed the positive feedback during the thrice-daily pill distribution ritual, when they would be called amable (friendly), bueno/a (good) or pechichon/a (sweet/endearing) for doing as they were instructed, an interaction in which they were treated more like compliant colonial subjects than clinical citizens with the right to inquire about their diagnoses and treatment plans. Resistance to sedation among new biomedical citizens was relatively low, and four women I interviewed told me they regularly came back to the clinic specifically because sedation “makes life easier” and helps them “to worry less.” Yaiza, a twenty-year old new biomedical citizen from the rural area outside of Cartagena, had been admitted to Clinica Bolivar three separate times over the previous six months: The first time for “nervios, thinking too much, and food anxiety”; the second time in a semi-comatose state after taking too much Haloperidol without Biperidin, and the third time, when I last saw her, simply because she felt she was “too in love.” She told me
that she had been obsessively fantasizing about a young man her age from the Jehovah’s Witness Kingdom Hall she attended. As she told me, “I have come to the clinic this time because I wanted to be sedated so I don’t think so much about Daniel. It is not good. I have been thinking about him so much and reading so much into the night, that my accent, as you see, is almost no longer costeño.”

In Yaiza’s case, as was the case of many lower income women in Clinica Bolivar and Clinica Campestre, hospitalization was the only time when patients experienced intense relief from the symptoms associated with their mental health disorders, yet the hospital never armed them with the coping mechanisms they needed to deal with their mental health issues in the world outside. A number of patients’ families accused the institutions of simply having “loose beds” (camas flojas), that operated only to enrich their staff through subsidized insurance claims. Perhaps more importantly, their clinical stay was the only time many new biomedical citizens received respite from the elements of structural violence that exacerbated their symptoms at home while simultaneously making it difficult for them to precede with follow-up care other than when they were in “a state of crisis.” Despite patient complaints about the lack of activities, many new biomedical citizens claimed that they at least felt safe in treatment, which in turn made them cyclically dependent on the biomedical institutions that precipitated new cycles of crisis. One Palenquera I interviewed regularly, Barbara (age 27), had been hospitalized for schizophrenia more than six times in the last four years. Barbara’s sister had brought her to the clinic once she got her insurance card four years ago because Barbara had been hearing voices and had trouble sleeping. While Barbara believed the Haloperidol she was taking was far too strong, at least when she was hospitalized she said she could count on her sister taking in her children until she was discharged. When Barbara was home and taking her medication regularly, she fell asleep by six or seven p.m. every night and did not awake until seven the next morning, leaving her male companion (compañero) of
two years, a paisa more than twenty-five years her senior, to help her four young children from a previous relationship to get ready for bed at night and prepare their breakfast in the morning. It was her inability to care for her children, and the guilt and uncertainty she felt leaving them alone with their de facto stepfather (padastro) while on her medication that led her to quit her medication altogether and then end up back in the hospital “in crisis,” where she was at least guaranteed that her children would be under her sister’s observation.

A clearly different set of explanatory models governed wealthier patients’ discourses about psycho-pharmaceuticals as well as the discourses used by the nurses to coerce questioning patients into pharmacological compliance. Rather than labeling in-compliant patients aggressive (agresivo) or threatening injected sedation, nursing and support staff would first attempt to bargain with higher income patients with the promise of seeing the doctor later. In the case of Baco, a twenty-seven year old Bogotano with a European Union passport, a French university diploma, and a history of bipolar disorder, our interview (conducted in English) was interrupted so he could take his 2 pm dose of Haloperidol, Biperidin, and Valproic Acid. Baco initially insisted to the nurse that he would not take his medication until he was granted a chance to speak to the psychiatrist about taking Zyprexa instead of Haloperidol, which had been prescribed by his psychiatrist in Bogota. His request was met with indignation, first that we had been speaking English. The nurse then bargained and delayed his request to see the doctor. Finally, exasperated, the nurse began yelling at both of us, a veiled threat of forced sedation rarely used on cosmopolitan elites and a suggestion that he would be prohibited from seeing his mother (a professional psychologist who had flown up from Bogota to retrieve her son once he was discharged) during afternoon visiting hours. A selection of the transcript appears below.

Nurse (interrupting our conversation in English): I don’t know how to say it in English, but I am going to tell you in Spanish, take your pill please.
Baco: But these are going to leave me crazy, brother.

Nurse: No, man. Take it.

Baco: I already, how, why don’t we call Dr. Omar because this, this is leaving me feeling completely drugged, brother.

Nurse: Fine. Tomorrow I will change it for you. By tomorrow you will be able to talk to the doctor so that he can change the dose. Understand?

Baco: No. I am going to talk to the doctor today.

Nurse: Fine. Today he will be here in the afternoon. Ah, today is Friday. Take it. Today is Friday. Today isn’t your turn to talk to the doctor.

Baco: Today is Friday?

Jessica: Yes, Friday.

Baco: The issue is the following. (I ask you) from the bottom of my heart, with complete sincerity, the blue (one) is Valproic Acid and the white is??

Nurse: Haloperidol.

Baco: But I cannot take Haloperidol.

Nurse: No, but it is only one and you have the other which will counteract the effects.

Baco: I have a bad reaction–I am allergic to Haloperidol.

Nurse: You are not allergic to Haloperidol because they have already injected you with it in the past and we will again.

Baco: But this one that it is to counteract the others. Why don’t you have Zyprexa?

Nurse: Because there isn’t any.

Mentioning different psycho-pharmaceuticals by their name brand, as well as the perceived superiority of these drugs to the generics, was an important element of the explanatory models of treatment that cosmopolitan elites engaged in with each other and with me, accusing the clinics of dumping old prescription antipsychotics on lower
income patients, when their insurance should guarantee them access to generic versions of the latest generation drugs. Staff used a number of strategies to reduce or dissuade cosmopolitan elites from “polluting” the opinions of new biomedical citizens, from changing room assignments and table assignments to spreading gossip about the cosmopolitan elites as vice-ridden drug addicts among the new biomedical citizens who often listened to the higher SES patients and their families about the quality of care they could receive in other areas of the country. On more than one occasion, the nurses at Clinica Bolivar told me and other patients that Baco was a violent cocaine addict, even though his mother (the psychologist) had informed me he that he had been suffering from intense mania and paranoia associated with his disorder, and that he occasionally smoked marijuana.

6.8 OPINIONS FROM THE “INTERIOR” AND FROM THE INTERNET ON CARTAGENA’S MENTAL HEALTHCARE SYSTEM

The cosmopolitan elites in crisis and their families were in some ways as much outsiders in Cartagena’s psychiatric clinics as I was, and they often sought me out and spoke to me (in English) about how the sanitation, professional conduct and medications distributed in these clinics went against the protocols followed in other major cities, purposefully having these conversations with me within earshot of local patients. In some instances, Colombians that identified themselves as “from the interior” even voiced their distain in online forums. On one website equivalent to Colombia’s “Yelp,?? I found the following commentaries about one of the coastal psychiatric clinics:

My daughter is currently hospitalized there and Dr. X made me wait for five hours and then he denied me even a single medical report that I, the mother of the patient, could know the name of the medications that were being given
to my daughter and the exact dose [of each] that she was receiving. I consider
his conduct outside the bounds of professional ethics.

This clinic is the woooooorst!..The only thing that matters to them is making
money from the families and getting the most they can from the health
insurance coverage. I would not recommend them to anyone.

They are beasts who do not understand medicine.

Accusations by cosmopolitan elites from outside the state of Bolivar that Colombia’s
coastal psychiatric clinics were feudal, backward (and populated by ignorant beasts, as
the last comment implies), was nothing new in the experience of the coastal clinical staff
members I interviewed. They, in turn, interpreted any distain for their medical procedures
as further evidence that nationalization would simply mean the “cachaco-izacion” (or
interior take over) of “coastal ways of being and of doing things,” as the owner and
administrator of Clinica Campestre, informed me.

6.9 THREE COSMOPOLITANS IN CRISIS:

GRACE, BACO, AND MILENA

On my third day at the inpatient wing of Clinica Bolivar, I was afraid there would
be no one to interview. It was ten o’clock in the morning. The Caribbean sun was
beating down on the small interior patio of the two-story hospital, around which the
patients’ rooms were situated, with women on the top floor and the men downstairs.
Through every screen window I peered, the women were asleep, deeply sedated. I sat
beside the upstairs nurse’s station while Nurse Gloria, the head nurse, worked her way
through a stack of manila folders, frantically stamping the head psychiatrist’s name at
the bottom of formal diagnoses as she scribbled them in, piling insurance forms and
release paperwork on either side. The psychiatrists had an “open schedule” at Clinica
Bolivar, which meant that I rarely saw them, and the patients’ morning sedation period,
which lasted from breakfast until lunch, was the only time most of the nurses (who were just beginning their twenty-four hour shifts at a minimum wage salary), could get their obligatory paperwork done if they wished to relax in the afternoon during patients’ post-lunch period of sedation.

As I settled into my second half hour jotting down the diagnoses and prescriptions for each patient (typically Haloperidol, Clonopine, and Valproic Acid), an athletic looking young woman in her early twenties shuffled out of her room and towards the bathroom. Seizing the opportunity to rid herself of my attention, Gloria leapt from her desk, “Baby! Grace! Do you want to talk to this researcher?” Looking at me over her shoulder, Grace stared in momentary disbelief, and then, turning away from the bathroom on her bare feet, and adjusting her jersey-style pajama shirt and checkered boxer shorts, she pulled a plastic chair up in front of me, knee to knee, and said in English, “We are the only two women here with short hair! We can do the interview in English, right? I need to practice!”

While Grace Kelly is a pseudonym, the young woman with whom I had an ongoing interview relationship over the next two months (through the end of her first hospitalization and her eventual relapse and return) had been named by her father after another Euro-American beauty from the period. At twenty years old, this was Grace’s fourth in-patient hospitalization, but her first in Cartagena. She was diagnosed with bipolar disorder II when she was seventeen, although she said her symptoms had become “exacerbated by debt” following her stepfather’s death just five months ago. Grace’s illness narrative was direct and far more comprehensive than what I learned about her from the nursing staff and psychologists who interacted with her on a daily basis, dismissing her as “complicated” and “viciosa” (vice ridden, a drug addict). Grace told me that she had grown up in Cali, and had only moved to Cartagena two years ago with her mother, stepfather, and eight year old half-brother because her stepfather had wanted
to start a trucking business here, and get the family away from “dangers” of Cali. He, she mentioned, was a Cartagenero. In Cali, however, Grace said her life had been more comfortable and more interesting: “You could hear gunshots from our patio because the good neighborhoods (where she was from) and the barrios (the popular neighborhoods) are so close together,” she told me. “But at least Cali has culture. Here there is nothing.”

In her childhood and early teens, Grace had spent her time in private school and attending parties with her cousins. Her father had enjoyed a good position working in some capacity for a local drug cartel, but he had been killed a little over four years ago, although Grace was quick to assure me that he was targeted due to difficulties in a personal relationship and not because of business. Moving to Cartagena was extremely difficult, and Grace described feeling lonely, culturally isolated, and depressed. While she had tried cocaine at parties with her cousins in Cali, when she moved to Cartagena she had turned to crack (bazuco), eventually dropping out of nursing school and spending more and more time getting high at the pay-by-the-hour motels behind Cartagena’s open air market.

The year before, when Grace was unable to pay her drug dealer, he broke her foot while she was high. Her mother (whom I met during her outpatient sessions with her young son), had sent her to a private rehabilitation center in Bogota, which included an indoor pool and various therapeutic modalities, including mindfulness workshops, exercise classes, and homeopathy. Only two months into her stay, however, Grace learned over the phone that her stepfather had died of a heart attack. Unwilling to allow her mother to negotiate the funeral, closing the business and settling the debts alone, Grace fled the rehabilitation facility in Bogota against her mother’s wishes, and took a bus back to Cartagena. “I was doing okay for a while,” she told me. But the pressure soon became too much. She started using drugs more frequently again, and ended up in the clinic in Cartagena after overdosing just a few days before our first meeting (an attempted suicide,
according to her mother).

Grace informed me that the administration of sedatives without talk therapy at the clinic in Cartagena did little to address her “underlying issues,” as she called them. Grace’s mother, who claimed she kept her daughter admitted just so that she knew where she was, and that she was safe, was far from impressed with the quality of the hospital compared to the level of service they had come to expect in Cali and Bogota. “I just don’t like seeing her like this,” she said commenting on the effects of sedation on her daughter. “All groggy and stupid (boba).” Since her husband’s passing, however, Grace’s mother could no longer afford to send her to a completely private clinic. They were still culturally cosmopolitan elites, but with their rapidly decreasing economic resources after Grace’s father and stepfather’s deaths, their economic insecurity was reducing them to the position of new biomedical citizens. The hospital’s use of pharmaceuticals that “were not the latest generation” and the lack of “therapeutic talks” (charlas terapeuticas) were among the many complaints that cosmopolitans in crisis used to contrast “the way they do things in Cartagena” with “the interior” (i.e. civilization).

Baco, mentioned earlier in the chapter, was a second cosmopolitan in crisis I spent a great deal of time interviewing. A twenty-seven year old Bogotano, he was the son of a French businessman and a female Colombian psychologist who had a private practice in an upper middle class area of the capital. Baco had been diagnosed with bipolar II in his late teens, but it was while he was away at university in Paris that he stopped taking his prescription regimen and began, as his mother told me, “having a real problem with marijuana.” This was not a drug problem, he assured me in English, but simply part of his dedication to “the rasta life” and resistance to commercially manufactured products. Baco’s mother and stepfather had come up to Cartagena from Bogota when they were informed that he had been arrested for attacking a police officer outside the rural sector of Valledupar (where he was living in an agricultural community), and then
transferred to Clinica Bolivar in Cartagena for sedation and observation. According to Baco’s mother, she realized he had stopped taking his medication and could hear he was becoming increasingly paranoid and agitated during their phone conversations, convinced that local police and paramilitary members were planning to murder the farmers who were working with him. The care he would receive in Bogota would be far superior, she assured me, but all three of them were “trapped” along the coast until Baco had stabilized and the clinic would release him. I asked Baco’s mother and stepfather if they had the opportunity to speak to the psychiatrists at all about Baco’s treatment and they laughed me off pleasantly. “What would they tell us?” His mother asked. As a mental health professional that had also practiced in Europe, she was appalled with what she saw in the psychiatric clinic and was only focused on her son’s discharge. She recognized that her son’s class position was the reason he had been involuntarily admitted to a psychiatric hospital rather than arrested or even killed for attacking a rural police officer in a heavily paramilitary influenced departamento of Cesar. Echoing the same Colombian psychiatry professor I mentioned earlier, Baco’s mother told me, “Cartagena is different. They do things differently here. It is not like the rest of Colombia.”

The expression “Not like the rest of Colombia” also indicated the clinical staff’s incapability or unwillingness to adhere to the nationwide legal protocols in which cosmopolitan elites in crisis were well versed. At Clinica Campestre, Milena, who had served in the Constitutional Court in Bogota, had recently been committed to the clinic against her will for heroin addiction and depression when I met her in the recreation area. Nurses had come to her aunt’s house and forcibly sedated her with Haloperidol, she told me. “I am an addict, not mentally incapacitated...But here, here you are not your own person.” Milena was no longer speaking to her family and the clinical staff had denied all of her requests for an outgoing phone call. She was desperate to contact one of her lawyer colleagues in order to demand the clinic discharge her. During our second
interview, Milena was outraged that the psychologist had ordered a former patient to visit her and convince her that if she did not remain in this specific clinic, she would never be able to overcome bipolar disorder. “Bipolar disorder?” She told me in disbelief. “No one has ever told me I have bipolar disorder, and if I did, it would not give them the right to tell someone else without my consent. That is against the law.” Milena had been to five different psychiatric and drug rehabilitation centers in Colombia over the past two years, and she told that in none of them had she been treated as poorly as in Clinica Campestre.

When I asked the nurse, social worker and hospital secretary over lunch about Milena, and whether it was legal to discuss a patient’s diagnosis with outsiders, the secretary simply told me, “Milena is complicated. She thinks she knows everything. But those who go into the holes (los huecos - alleyways where they sell drugs), are no better than those who live in them. True or not?”

In a psychiatric clinic with a history of focusing on the “social aspect” (or charity) toward the poor, long before nationalized insurance, patients like Milena and her two female companions from the wealthy neighborhoods of Manga and Centro disrupted the social order by elaborating to whoever would listen that the facilities they had visited Bogota and Barranquilla were far superior, even circulating two pamphlets they had from these clinics buried in their bags among lower SES patients and informing them that their new nationalized health insurance would be accepted at these psychiatric clinics as well. In turn, the clinical staff restored order by engaging in an explanatory model that stigmatized Milena’s illness (addiction), marking her as essentially lower class, where class within the specific clinical cultural environment was defined as a moral ontology as well as an economic and educational category. In the end, Milena was able to make her appeal for legal representation by sending a letter in the care of another cosmopolitan elite who was discharged before her. The next week when I returned to the clinic, Milena was gone, the nurses and administrators refused to answer my questions, but Milena’s
in-patient accomplice confirmed the success of their alliance when I met with her for a follow-up visit in her bay front apartment in Manga.

6.10 CONCLUSION: MENTAL HEALTHCARE IN CARTAGENA: A COSMOPOLITAN ELITE’S “VITA”?

While Cartagena may have escaped the most visible evidence of the internal armed conflict, it has also been spared the most visible evidence of medical modernization. The narratives of cosmopolitans in crisis were equally punctuated with references to extrajudicial violence, addiction, and debt, even if they were less likely to identify with the structural violence, forced displacement, and direct physical trauma cited by many of the new biomedical citizens. In psychiatric clinics in coastal Colombia, patients like Grace, Baco, and Milena disrupted the social order by elaborating to whomever would listen that the facilities outside of the state of Bolivar, in the real Colombia, were far superior, reifying the “forever colonial” status of Cartagena that at once makes it the country’s touristic darling, but the modern state’s cultural backwater. In turn, local clinical staff was able to exert their power at the margins of the nation state through engagement with local cultural tropes that stigmatized cosmopolitan elites’ addiction as “vice,” or a moral/character flaw associated with the upper class. Good (2012) argues that in economically emerging markets, clinicians “stand on the divide between desire and inadequacy” (p. 279). In Cartagena, these clinicians, and the clinic as a space in itself, also seem to represent a number of divides (or margins) with respect to the state of Bolivar, the nation, and the subjectivity (and subjective well-being) of individual patients living through an ongoing armed conflict. Whereas Colombia’s new biomedical citizens become
registered as part of the local state apparatus when they enter Cartagena’s psychiatric clinics, the transient cosmopolitan elites in crisis come to find themselves at the limits of the nation. Just as Biehl (2007) argues that the clinic “Vita” in a poverty-stricken neighborhood in Brazil is a “bureaucratically and relationally sanctioned register of social death” (p.20), the psychiatric clinics I visited in Cartagena can be seen as a liminal space for political awakening among Colombians on either end of the socioeconomic spectrum, where mental illness becomes a register for interaction between Colombians in completely different cultural and political realities, each moved emotionally by their perception of the power (or powerlessness) of the state as a presence in the clinic.
Chapter 7

CONCLUSION

7.1 SUMMARY OF FINDINGS AND SIGNIFICANCE

So many MA and dissertation proposal abstracts end with a statement about the importance of analyzing the effects of modernization on a previously traditional (i.e. authentic or antiquated) subset of a population or “how cultures adapt to change.” All over the world, one would think, formerly rural, endogamous groups are becoming globalized and whole nations are undergoing a process of neo-colonization as independent governments are stripped of autonomy by the trade legislation of wealthier nations or through the insidious infiltration of national borders by international corporations. Academic degrees and careers are built on the premise of groups resisting the pull of modernization, globalization, cosmopolitan rather than national order, and the sense of insecurity and trauma this engenders. These theoretical frameworks make for great ethnographies and based on the quality of those I have read, there is little doubt in my mind that this is the correct line of inquiry for studying culture, change, and insecurity in many areas of the world.

This is not the case with Cartagena, Colombia, however. We cannot portray the
rapid increase in insecurity and violence in contemporary Cartagena that this dissertation
describes as the result of a group being suddenly forced into the global market without
any preparation, or Cartagena’s sudden and unprotected contact with different cultures
and countries that could prey on the population’s parochial world view. Cartagena is not
a city that is being pulled into a global world unwillingly; rather it is being progressively
pushed out of it. The official end of the internal armed conflict in Colombia and the
demobilization of the paramilitary from 2006 to 2008 have meant that Cartagena and its
local population are rapidly losing their position as the face of the nation of Colombia
for the rest of the world as well as the economic and political benefits this position
provided. Populations from the interior of the country, mainly Bogota and Medellin, have
moved into Cartagena by the thousands over the last decade, superseding Cartageneros
in wealth and political power while bringing to Cartagena the many derivatives of the
Internal Armed Conflict that Cartagena had long avoided, including money laundering
businesses, narco-trafficking, local drug addiction, and paramilitary violence. As the rest
of Colombia has become safer in the last decade, Cartagena has necessarily become more
dangerous. Cartagena may have always been dismissed as “not really Colombia” by
many Colombians from the interior, but it had at least enjoyed the economic and cultural
advantages of interacting with the rest of the world during the decades when the interior
of Colombia was socially and economically isolated. Today, it is the rest of Colombia
that is rapidly modernizing as residents of Cartagena increasingly feel held back, frozen
in time, a city celebrated for its colonial identity and nothing more.

Cartagena is less a part of the global world in Colombia’s post-conflict era
than it ever was during the conflict yet as my data demonstrates, the city is not yet
considered part of the nation-state either. The Caribbean department of Bolivar and its
capital, Cartagena, continue to be denied the many benefits of the country’s biomedical,
educational, infrastructural, and recreational development evident in Bogota, Medellin,
Barranquilla, Cali- even the smaller interior cities of Tunja and Pereira. Most of my respondents in Cartagena had hoped that their city, which for decades had been the host of foreign dignitaries and prospective investors, would be a bridge between post-conflict Colombia and the global world. In the official post-conflict era, however, Cartagena’s residents have found themselves not on the bridge between Colombia and the rest of the world, but cast in the shadows of national development. Visiting representatives from the Colombian Department of Tourism as well as Cartagena’s new paisa and cachacho employers still expect Cartageneros to market a joy-filled colonial charm and sunny disposition to those who visit a post-conflict city now flooded with demobilized armed actors, interior money launderers, gang violence, and drug addiction. At the same time, native residents of the coast struggle in an economic market where legally sanctioned work with livable wages have all but dried up or are controlled by those Colombians perceived as Cartagena’s new colonizers: the wealthy Colombians from the interior of the country.

My respondents in Cartagena attributed the end of the internal armed conflict and the massive migration and investment of paisas and cachachos along the Caribbean coast to many new forms of insecurity that they associated with increased stress (greater violence in the neighborhoods, greater underemployment/unemployment, higher rates of partner infidelity, abuse, or abandonment). During nine trips to Cartagena over a period of eight years, I observed these increased indicators of insecurity in the news, on the street, and in the narratives of my participants, yet my respondents continued to affirm that their sense of well-being remained intact, that their “character” (caracter as both a resilient self and as a public affect of aggression against injustice) was relatively unchanged by the circumstances that surrounded them. This apparent contradiction in the perception of insecurity and the maintenance of subjective well-being was what inspired me to further investigate Diener’s (2005) comments about the “Japan-Colombia Paradox”
on well-being and insecurity and Willis-Herrera et al.’s (2009) challenge to examine “the cultural and contextual variables” of Colombian subjective well-being for my dissertation research.

In a country where chronic armed conflict has been the norm (albeit with short periods of peace) for over sixty-years, defining one’s sense of well-being relative to perceived security may well have resulted in a nation marked by a “culture of terror” as Taussig (2005) describes, but every place where I saw markers of insecurity increase, I also saw women publicly resisting the threats they openly acknowledged: socializing in the streets, openly discussing their concerns and assuaging each other’s fears, and emphasizing the necessity of maintaining positive emotions as an essential component of their health, the only element of their lives many felt they could control when insecurity was at its height. My data demonstrates that at least among the 120 participants I interviewed in Cartagena, a high report of subjective well-being was not predicated on a high sense of perceived security, but instead reflects the collective and individual pro-social coping mechanisms Colombians have learned to employ to mitigate stress in their everyday lives, and that the maintenance of health and the mitigation of stress are perceived as both individual and collective responsibilities within the community. The formation and maintenance of pro-social behaviors even under the most insecure circumstances, whether during a neighborhood social cleansing, a spouse’s public abandonment, or a mental illness diagnosis, are a testament to the psychological resiliency of a Colombian population that refuses to live in fear and isolation. This research further highlights the importance of considering cultural variables when evaluating quantitative global indexes of well-being and progress, among those: (1) how insecurity is specifically defined within a community; (2) the subcategories of subjective well-being that have the most cultural salience for particular populations; and (3) how a group’s historical exposure to political and structural violence affect group beliefs about the maintenance of physical and mental
health during periods of heightened insecurity.
Appendix A

INITIAL SEMI-STRUCTURED INTERVIEW QUESTIONS

- What pseudonym would you like to use?
- How old are you?
- Do you have any children? What are their ages?
- What is your marital status?
- What is your employment status?
- How many people live in your house? What are they like?
- How many years have you lived in this community?
- What brought you to this community?
- Has this community changed at all during the time you have lived here? How so?
- Could you describe for me what a typical day is like in your life?
• What does your husband/partner do for a living?

• How long have you been together? How did you get together?

• What caused you to separate from your former partner(s)/spouse(s)?

• What are some of the primary reasons that motivate you to stay in the relationship that you are in right now?

• In your opinion, what are the primary obstacles for the women of your generation? Are they different from the obstacles faced by the women of your mother’s generation?

• If the person is from another area of the country: Was it difficult to adjust to the lifestyle in this region of the country? How is urban life here different from urban/rural life where you are from?

• What are the best things and worst things about living in Colombia?

• Is alcoholism an issue in this neighborhood? Are other vicios an issue in this neighborhood?

• Do you belong to any organizations in this neighborhood?

• In your opinion, what parts of the city are the best and what parts of the city are the worst? Could I recognize these places? How so?

• Has violence ever been a problem in the neighborhood? What kind? When?

• What do you believe causes violence in and or around this community? For example, some people say that violence is directly linked to poverty and lack of resources, other people say that violence has to do with control, some people say that violence in their neighborhood has something to do with the IAC. What do you think?
• What do you do to stay safe?

• Do you feel like it is more safe or less safe to live here than in the countryside?

• About how many hours of TV would you say you watch a week and what kinds of programs do you watch?

• Do you have female friends? What are they like? What do you do together?

• Is there anything that has happened in your life that makes you sad or nervous?

• If I were to ask you for three things in your life that make you the most happy, what would they be?
Appendix B

SUBJECTIVE WELL-BEING
SURVEY QUESTIONS ON
OVERALL SATISFACTION WITH
LIFE RANKED FROM “1” TO “7”
(Diener et al. 1985)

- In most ways my life is close to my ideal.
- The conditions of my life are excellent.
- I am satisfied with my life.
- So far I have gotten the important things I want in life.
- If I could live my life over, I would change almost nothing.
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