### Abstract

This paper presents ethnographic research on the relationship between gender differences in the expression of traumatic stress and emic constructions of social power relating to the humoral categories hot (q'ix) and cold (ke) in a Q'egchi' refugee community in Campeche, Mexico. Women disproportionately experienced four gender-specific forms of stress relative to men while residing in the refugee camp, including marginalization from decision-making, a reduction in subsistence activities, restricted mobility, and pressure to maintain traditional culture. My analysis suggests that cultural, political, economic, and material conditions of life in the refugee camp, in combination with underlying traditional gender roles and ideologies, are the primary factors contributing to Q'eqchi' women's suffering and delayed recovery from trauma of repression, war, and displacement. I argue that maintaining and manipulating traditional gender roles can also be a means of empowerment for women seeking acculturative opportunities in a restrictive cultural milieu.

Gender,
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Traumatic
Stress in a
Q'eqchi'
Refugee
Community in
Mexico

by

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### Gender, Power, and Traumatic Stress in a Q'eqchi' Refugee Community in Mexico

### INTRODUCTION

In this paper, I present research demonstrating that gender differences in the expression of traumatic stress are significant and reflect distinctive sociocultural patterns relating to emic constructions of social power relating to the humoral categories hot (q'ix) and cold (ke) in a Q'eqchi' refugee community resettled to a United Nations refugee camp in Campeche, Mexico. The Q'eqchi' population, originating from the Guatemalan municipality of Ixcán, had been forcibly displaced by state violence and had been residing in the refugee camp for ten years at the time this study was conducted. During this time, they were not permitted to move freely from the confines of the refugee camp and experienced food insecurity, crowding, assimilation, and pressure to repatriate back to Guatemala. Through testimonial interviewing, participant observation, surveying, and the recording of life histories, I examined gender differences in the refugee camp experience, including the expression of traumatic stress, and access to political and domestic decision-making, social support networks, traditional gender roles, subsistence, acculturative opportunities, education, and leadership.

I focused my research on the different symptomology patterns manifested by Q'eqchi' men and women, the humoral classification for each symptom, and the extent to which O'egchi' women report greater frequency in a cluster of symptoms associated with powerlessness (ke). While O'egchi' men and women experienced extreme and at times differential forms of sociopolitical violence during the genocidal "scorched-earth" period in Guatemala in the early 1980s and during the periods of forced displacement into Chiapas, I demonstrate that the experience of encampment in the refugee camps in Campeche and Quintana Roo, Mexico had the greatest impact on gender differences in the expression of stress and depression in the refugee community. Because Q'eqchi' women feel a greater responsibility to care for families and they experience the poverty, marginalization, discrimination, and oppression of refugee camp life differently from men, these factors may be reducing women's capacity to overcome the original trauma and cope with the continuing trauma and uncertainty of everyday life in a refugee community. Research into gender differences in the refugee experience, and in particular, an investigation of stressors frequently found in refugee camps, can contribute to refugee camp planning, administration, and intervention programs that help ameliorate the negative gendered effects of forced displacement.

After having administered an initial survey to assess gender differences in traumatic stress symptomology and research into humoral conditions associated with power, I examined the ways that encampment contributed to feelings of powerlessness for women relative to men in order to isolate gender-specific stressors that may contribute to differential frequencies in the traumatic stress symptoms. I identified the following four stressors as gender-specific forms of stress that women experienced disproportionately relative to men, including (1) Q'eqchi' women and men disagree over repatriation, with women more unwilling to return to Guatemala; (2) Q'eqchi' women resent the breakdown in gender complementarity in subsistence activities because they are unable to garden and raise small animals around their homes due to crowding; (3) Q'eqchi' women are traditionally restricted from contact with q 'ix or ritually hot people and places, thus

limiting their mobility and access to acculturative opportunities; (4) Q'eqchi' women are expected to resist ladinoization and Mexicanization (assimilation of indigenous peoples into ladino or Mexican cultures, respectively) by maintaining traditional culture. In particular, I present qualitative and quantitative data which suggests that the cultural, political, economic, and material conditions of life in the refugee camp, in combination with underlying traditional gender roles and ideologies, are the primary factors contributing to Q'eqchi' women's suffering and a delay in recovery from the trauma of repression, war, and displacement.

### BACKGROUND: SOCIOPOLITICAL VIOLENCE AND FORCED DISPLACEMENT

There exists a significant body of anthropological works addressing the sociopolitical violence in Guatemala and in particular, an increasing amount of ethnographic information on how that experience has specifically impacted Guatemalan women's social roles and gender relations (Billings 1995; Burgos Debray 1984; Green 1999; Pessar 2001; Smith-Ayala 1991; Wellmeier 1998; Warner 2007; Zur 1998). While there does exist a sizeable body of anthropological literature on Guatemalan refugees (Burns 1993; Earle 1988, 1994; Falla 1988; Loucky and Moors 2000; Manz 1988a, 2004; Montejo 1999; Stepputat 1989; Taylor 1998), there exists much less ethnographic information that specifically addresses the effects of sociopolitical violence on the Q'eqchi' Maya peoples (Warner 1996, 1998, 2007; Wilson 1991, 1993, 1995; Yarrow 2001).

In the nineteenth and twentieth centuries, numerous Q'eqchi' families and communities migrated to unpopulated areas in the Ixcán, the Petén, and Belize to avoid assimilation and escape debt peonage on coffee plantations in Alta Verapaz (Carter 1969; Schackt 1984; Wilk 1996). The majority of the Q'eqchi' refugees resettled to Maya Tecún were involved in a 1960s colonization project established with the aid of various Catholic and Protestant missions in the Ixcán region in the department of El Quiché, Guatemala (Manz 1988a, 1988b, 2004). The colonists joined approximately thirty Q'eqchi' families that had migrated earlier to the Ixcán at the turn of the century to escape German coffee plantation expansion. The colonists formed cooperatives that were beginning to flourish when they were forced to flee the repression that began in their communities in the 1970s with the disappearances and killings of community leaders (Carmack 1988:24; Falla 1993; Manz 1988a; 2004). The sociopolitical violence culminated in the 1981-1982 counter-insurgency program that involved military attacks on over 400 Mayan villages (Manz 1988a, 2004; Montejo 1999; Smith 1990; Warren 1978). Falla (1993) reports that between the years of 1982 and 1984, 440 villages were destroyed under the "scorched-earth" tactics of Efrain Rios Montt and Lucas García. The primary target of their genocidal campaign was the indigenous peoples of Guatemala, including 626 village massacres, the displacement of 1.5 million people, with more than 150,000 refugees and the death or disappearance of over 200,000 people, of which 83% were Maya (Sanford 2003, 14).

The Q'eqchi' refugee community was resettled from Chiapa to the state of Campeche, Mexico in 1984 with assistance from UNHCR (United Nations High Commissioner for Refugees) and COMAR (Comisión Mexicana de Ayuda a Refugiados), the newly established Mexican agency to assist refugees (Aguayo et al 1987; Castillo 1990; Stepputat 1989; Warner 2007). The Guatemalan military made numerous incursions into Chiapas in pursuit of the refugees, inciting the Mexican government and the UNHCR to develop a resettlement scheme that would move the Guatemalan population a greater distance from the border (Earle 1988; Manz 1988a; Montejo

1999). Once relocated to an unpopulated, densely forested region in the state of Campeche, the refugees cleared the trees and used local material to build their homes. They were provided food and medicine for four years from the UNHCR, followed by an organized attempt to develop self-sufficiency (Stepputat 1989). In 1988, economic development projects were introduced, focusing on agriculture and animal husbandry, and men were permitted to work as seasonal wage laborers on the surrounding sugar cane plantations.

In addition to the traumatic stressors that the community experienced as a result of the sociopolitical violence in Guatemala and their forced displacement into the refugee community, they continued to experience stressors such as material deprivation, poor health, and feelings of restriction and exploitation on a daily basis. Research conducted on the mental health of Guatemalan refugees living in the refugee camps twenty years after forced displacement reveals that Post-Traumatic Stress Disorder (PTSD), anxiety, and depression were common (Sabin et al, 2003). PTSD refers to the "development of characteristic symptoms following a psychologically distressing event that is outside the range of usual human experience...and is usually experienced with intense fear, terror and helplessness" (American Psychiatric Association 1988, 249). These patterns of mental health suggest that the conditions of refugee camp life either intensified the pre-existing traumatic stressors or created new forms of stress that generated additional somatization (bodily expressions of traumatic stress brought on by experiencing the original trauma). Through testimonial interviewing and a survey of the total adult population, I found that the original sociopolitical violence experienced by the Q'egchi' population included disappearances, community massacres, torture, and direct attacks on several villages by Guatemalan military forces. The death of approximately 23% of the Q'eqchi' population in Maya Tecún was caused by direct violence and illness during displacement. The deaths of children and infants were reported by approximately one-third of the women who participated in this research.

### WOMEN REFUGEES AND TRAUMATIC STRESS

When analyzing the results of my fieldwork, I had several assumptions about gender and PTSD based on a review of the literature. My assumptions included the likelihood that more women relative to men would be experiencing symptoms associated with PTSD (manifestations of traumatic stress), that women would report greater severity in their symptomology, and that they would also be suffering more from chronic conditions of traumatic stress, based on recent research focusing on gender differences in PTSD which consistently report that women are affected at twice the rate as men and are twice as likely as men to develop PTSD over their lifetime (Cortina and Kubiak 2006; Kimerling et al 2002 xii; Gavranidou and Rosner 2003; Olff et al 2007; Tolin and Foa 2002, 2006).

Recent social and medical research focuses on measuring refugee health status and trauma (Hollifield et al 2002), and calls for greater attention to be paid to culture-specific and intracultural variations in refugee stress, suffering, acculturation, and health outcomes of displacement (Goździak and Tuskan 2000; Watters 2001; Pedersen 2002). In terms of intracultural variation, studies demonstrate that men and women refugees experience the stress of social violence, displacement, and encampment differently and that factors such as work, social support, and imbalanced acculturation rates influence gender differences in the way stress is

manifested (Arón et al 1991; DeVoe 1992). Despite this observation, and the fact that women are extremely vulnerable during war and at all phases of the refugee experience (Ferris 1987; Freedman 2007; Khattak 2007; Kohpahl 1994; Krulfeld 1997; Martin 2004; Martin and Tirman 2009), there have been few systematic studies that examine gender differences in the mental health of refugee and war afflicted populations (Cole et al 1993; Goodkind and Deacon 2003; Sideris 2003). Studies that have focused on gender as an independent variable in terms of analysis reveal serious psychological problems among women, including depression, psychosomatic ailments, loneliness, and apathy (Ferris 1987; Iglesias et al 2003).

Refugee women are often sexually assaulted, punished for not maintaining tradition, and held responsible for misfortune and illness in the refugee camps and settlements (Huseby-Darvis 1995). Women can face abuse from both those who are assigned to protect them and from those who are recognized as oppressors, including family members, community members, camp administrators, and governmental and military personnel. The investigation of factors that ameliorate this abuse and aid in recovery from its trauma are central to any research on refugee women. Women's mental health and recovery from trauma are argued to be essential for the well-being of the entire refugee community because of the "central role which women play in respect to children and family life" (Ferris 1987, 32).

### **METHODOLOGY**

I conducted ethnographic research in Maya Tecún, Mexico in two stages from August 1993 through July 1994 and from January 1995 through November 1995, with follow up visits in 1997 and 2000 in order to investigate the effects of the refugee experience on Q'eqchi' gender relations and women's lives in general. A central aspect of my larger research agenda emphasized the relationship between gender roles, relations, social support, and health. My overall research design involved several stages and included PTSD symptomology questionnaires, testimonial life histories, informal interviewing, and participant observation. My description of women's traditional activities, status, and gender roles is based on more than 60 interviews over a nearly two-year period and is grounded in women's comparisons between their previous lives in Guatemala and their experiences in Maya Tecún, Mexico.

On the basis of information gathered through preliminary unstructured and opportunistic interviews, I designed an interview questionnaire with closed and open-ended questions and administered it to a total sample of adult Q'eqchi' women. This survey included questions on marriage, kinship, reproduction, traditional dress, social support networks, traumatic stress, repatriation, and migration history. Open-ended questioning on health and traumatic stress symptoms during the preliminary interviews also revealed culture-specific health conditions and categories that were more fully investigated through the second survey. The second step in the survey process involved modifying the preliminary interviews discussed above in order to address a more narrow range of topics and to include as many close-ended questions as possible. At this time, I developed a traumatic stress questionnaire and then integrated it into the larger survey which included questions on migration history, repatriation, biographical background, and social support.

The Q'eqchi' community in Guatemala was comprised of five village groups containing 139 families. Four of the Q'eqchi' village groups were ethnically homogenous, but one village group was an amalgamation of 14 families (7 Q'eqchi', 5 Ladino, 1 Chuj, and 1 Ixil), who were separated from their villages of origin during forced displacement and relocation. The Q'eqchi' population at the time of the PTSD survey totaled approximately 712, but absolute accuracy was difficult to determine as the number of people residing in the community changed regularly. I surveyed adult women and men as defined principally by their marital status and estimate that I interviewed 98% of the 134 adult Q'eqchi' women in the five village groups (N=131). Of the 144 total adult men in residence, I interviewed 66% of the population present in the camp (N=88).

### **RESULTS**

Because there has been significant skepticism toward the application of post-traumatic stress disorder (PTSD) to describe behaviors in non-Western cultures (Bracken et al 1995), I followed a loosely formulated symptomology checklist for PTSD as a starting point to assess the culture-specific manner in which stress is expressed in the refugee population. As seen in Table One, I translated symptoms from the PTSD checklist of the American Psychiatric Association (APA) Diagnostic and Statistical Manual of Mental Disorders (1988). I initiated interviewing with a structured and mostly close-ended checklist, but then left the checklist open for any other culture-specific expressions of traumatic stress, thereby accommodating relativism while establishing a basis for comparison. I conducted the interviews in both Q'eqchi' and Spanish, with the assistance of a bilingual Q'eqchi' assistant who translated when needed.

TABLE ONE Symptomology Checklist and Translations Used to Assess Traumatic Stress				
English	Spanish	Q'eqchi'		
Lethargy	Falta de energía	Tacwajic		
Headaches	Dolor de cabeza	Rahooc jolom		
Digestive Disorder	Dolor de estómago	Rahooc puj		
Disorientation	Desorientación	Sachbesiin/Lubo		
Depression	Tristeza	Rahilal ch'oolej		
Sleeplessness	No duerme	Cwaarc chi		
Nightmares	Pesadillas	Tz'apqui'e		
Nervousness	Nervioso/Tenso	Sicsical		
Anger	Enojado	Josk'		

I asked informants if they experienced a level of each symptom in order to account for intensity as well as frequency, but found that the concept of intensity did not seem to translate well during the interview process. Nearly all of the respondents answered yes to experiencing the symptoms with a high level of intensity, leaving me with the impression that distinctions in intensity were

not entirely meaningful for most of the informants. Thus, I asked respondents who answered yes to experiencing a symptom in any level of intensity to place its frequency in terms of the following interval scale; 1=once a week or less; 2=twice a week or more, but not daily occurrences; 3=daily.

I divided the total sample by gender in order to compare their responses to the symptomology checklist and then developed a frequency distribution of responses to identify differences in the frequency of the stress-related symptoms by gender. Finally, a one-way between subjects ANOVA test was conducted to compare the effect of gender on the different symptoms on the checklist.

TABLE TWO  Percentage and Number of Women (n1) and Men (n2) Reporting Frequent and Severe Experience of Symptoms (two days per week or more).					
	% and # of women	% and # of men			
Lethargy	81.68% (107)	61.36% (54)			
Headaches	67.2% (88)	46.59% (41)			
Stomach Ailments	62.6 % (82)	25% (22)			
Disorientation	61.83% (81)	44.32% (39)			
Depression	48.85% (64)	28.41% (25)			
Nightmares	39.69% (52)	39.77% (35)			
Sleeplessness	38.93% (51)	43.18% (38)			
Nervousness	30.53% (40)	26.14% (23)			
Anger	27.48% (36)	31.82% (28)			
Pooled Means	16.656	14.273			

In Table Two, I present responses to the traumatic stress questionnaire in terms of the total number and percentage of men and women who reported affirmatively (twice a week to daily occurrences) to each symptom. In addition to totaling all symptoms and determining the means, the frequency scores (1=once a week or less; 2=twice a week or more, but not daily occurrences; 3=daily), were analyzed for all symptoms by gender. The effect of gender on each symptom is presented in Table Three, with those that are significant for gender bolded.

The one-way between subjects ANOVA revealed that there was a significant effect of gender in the pooled symptoms (p<.000). While women experienced significantly more frequent symptoms than men overall when categories were pooled, the symptoms experienced with greatest significant difference included headaches (p<.002), stomach ailments (p<.000), lethargy (p<.000), depression (p<.000), and disorientation (p<.002). The most commonly occurring

complaints by Q'eqchi' women in the modified traumatic stress questionnaire were lethargy, headaches, and depression. The differences not significant for gender were nervousness, anger, sleeplessness, and nightmares, although the frequency overall for the entire population, as seen in Table Two, are quite high for most of the symptoms regardless of gender, with lethargy being reported by over 60% of men and women as a frequent condition.

### TABLE THREE

## ANOVA (Test of Between Subjects Effects) with Gender as the Independent Variable Comparison of Symptoms between Q'eqchi Men & Women

(Symptoms Significant for Gender Bolded)

SYMPTOM	F	SIGNIFICANCE
<b>Dependent Variable</b>		
Sleeplessness	.007	p <.931 (not significant)
Nervousness	.123	p <.726 (not significant)
Nightmares	.1.331	p <.250 (not significant)
Anger	1.472	p <.226 (not significant)
Disorientation	9.785	p <.002
Headaches	10.163	p <.002
Depression	17.346	p <.000
Lethargy	13.913	p <.000
Stomach Ailments	35.792	p <.000
Pooled Symptoms	16.545	p <.000

Through testimonial life histories and follow-up interviewing to the PTSD symptomology survey, I discovered that in the Q'eqchi' community all of the conditions significant for gender are associated with a humoral state of coldness or ke as opposed to hotness or q'ix. Ke is considered by the Q'eqchi' as a condition of powerlessness and vulnerability and is attributed to orphans, infertile people, aged people, children, and dying people, whereas q'ix is associated with fertility, power, and leadership. Table Four lists the emotional and physical conditions in the traumatic stress questionnaire as either ke or q'ix as categorized by Q'eqchi' informants, thus revealing that the pattern of most commonly reported emotional and physical complaints by women relative to men, are all associated with a state of powerlessness, whereas the conditions that are not significant for women are considered q'ix and therefore both powerful and dangerous. Based on follow-up interviewing that included questioning on the symptoms in terms of emically-constructed humoral categories, I found that their classification was widely agreed on by both Q'eqchi' men and women, with little disagreement by gender or intracultural variation.

### **TABLE FOUR**

### **Powerful and Powerless Conditions**

Q'ix (P	<u>'owerful)</u>	<u>Ke</u>	(Powerless)
Anger		Depres	sion

Nervousness Sleeplessness
Nightmares Lethargy
Headaches

Digestive problems

The survey data suggests that Q'eqchi' women were much less able to cope with the conditions and restrictions of refugee camp life as compared to men, and that as a result their expression of distress exhibited a pattern more akin to chronic depression. This leads me to consider that the conditions of the refugee camp itself were contributing to a continuation or extension of the trauma of the original experience of violence and displacement. Also, it has been reported that PTSD takes a "more chronic course" for women and women are twice as likely to develop PTSD (Norris et al 2002, 32). The tendency for women to develop chronic forms of PTSD could also explain why ten years after the height of the original violence in Guatemala, women were still experiencing significantly higher rates of PTSD symptoms relative to men. Based on the findings in this survey, I shifted my focus to an examination of the ways that encampment was causing women to feel powerless relative to men, and therefore isolated gender-specific stressors that could be contributing to the trend. I identified four prevalent stressors as gender-specific forms of stress and trauma that women experienced disproportionately relative to men, relating to decision-making, subsistence, mobility and restriction, pressure to maintain traditional culture, and access to acculturative opportunities.

### **REPATRIATION & GENDER**

The interviews that I conducted with the majority of adult Q'eqchi' men and women during 1994 and 1995 took place as the United Nations was negotiating the terms of repatriation with the refugees in Mexico. My survey included questions about their preferences over repatriation or permanent resettlement in Mexico. The interviews revealed that women and men were sharply divided over the possibility of repatriation to Mexico, with women three times less likely than men to prefer repatriation. This issue brought the trauma of the past into the present on a daily basis, thereby intensifying PTSD and creating new forms of anxiety. The lack of agreement also contributed to new forms of stress in marital and familial relations. The deaths of their children were the primary reasons that women provided when I asked why they did not want to repatriate. The discussion over repatriation brought their children's deaths to many women's minds, as in the case of Luisa who narrated the agony she felt over the deaths of her children during the period of forced displacement.

So now my husband says for us to return to Guatemala. To the place where my children died. I have been crying every day since he said we would go. I had five

children and the eldest was eight years old. The two smallest were boys, one was just born that year and could not yet walk. I was still breastfeeding him. He died at several months of age. I do not know, maybe three or four months. He was sick for a long time with vomiting, fever, and diarrhea. I did not have much milk for him and he vomited the food we tried to give him. He was so thin when he died, just bones. We buried him and used a machete to dig the grave, somewhere in the jungle. I would not be able to find the place again. I did not cry when he died. I cried when he was sick, but when he died, I could not cry. My other son, he died in Chiapas soon after we arrived. He had malaria and diarrhea just like my youngest son. We were so tired and hungry and sick. I cried for both of them when he died. All of my children were sick and dying of hunger. I take candy and flowers to the cemetery on the Day of the Dead for them, my dead sons. Maybe their spirits followed us here? Maybe they are still lost in the jungle? I think about them a lot and how they suffered. That is why I never want to return to Guatemala. Only my husband wants to go. He says that he will leave us here, but I am afraid for my children.

### RESTRICTED MOBILITY& GENDER

The importance of maintaining equilibrium between hot and cold is widespread in Latin America (Foster 1984, 1987; Tedlock 1986). Richard Wilson (1995, 133) reported that people, food, and illnesses are classified as either hot or cold in the Q'eqchi' belief system which focuses on fertility, identifying pregnant women and men during the planting period as the most hot or *q'ix*. A complex set of taboos on food, sex, mobility, and contact with others relates to this condition. In the Q'eqchi' classification system, gender role complementarity is mirrored in the beliefs surrounding *q'ix* and power (Wilson 1995, 135). Women and men have complementary realms of power and authority, with both having powerful states related to fertility (women as childbearers and men as cultivators). The *Tzuultaq'a* (mountain spirits) are a central means of regulating gender boundaries, humoral classification systems, and normative behaviors in Q'eqchi' culture.

A complex system of social control through fear of retribution by the *Tzuultaq'a* traditionally provides the ideological basis for restricting women's movements and contact with non-kin members of the community. For Q'eqchi' women, encampment placed people in close proximity and thereby increased the likelihood of contact with non-kin men and persons considered *q'ix* and therefore dangerous. Each time a woman leaves her home, she takes the risk of coming into contact with a person or object that will affect her balance of hot and cold, thereby endangering her fertility and the health of her children. Women can be made ill or infertile if they come into contact with individuals who are out of balance or if they move about in dangerous places. Restriction to their homes reduces women's risk of infertility, illness, and miscarriage.

In Guatemala, the *Tzuultaq'a* are a central means of regulating access to spaces and places by gender and other sociocultural variables, including age, kinship, health, and subsistence roles. Traditional restrictions on women's movement were applied in new but highly restrictive ways in the refugee camp. All of the paths and roads leading out of the refugee community were considered to be hot and therefore dangerous for women to pass, especially women of

childbearing age. These places were most often centers of male or foreigner activity, such as the meeting-house, the plaza, or natural features on the landscape where male-centered horticultural rituals were performed. Because the camp is seen as a place for intensified contact with the outside world, women's mobility has become increasingly restricted in Maya Tecún. The taboos on contact and mobility restricted Q'eqchi' women's access to the possible benefits of modernization, wage labor opportunities, healthcare, development projects, job skills training, and the educational opportunities that were provided in the camp, thereby increasing the likelihood that they would suffer more from acculturative stress, depression, and feelings of powerlessness.

### GENDER COMPLEMENTARITY & DEPENDENCY

Traditional Q'eqchi' gender roles can best be described as tending towards complementary, with men and women performing different, yet mutually supportive roles within the family. This complementarity has been observed by numerous Mayan scholars (Bachrach Ehlers 1990; Black 1988; Bossen 1984; Wilson 1995). Before displacement, Q'eqchi' women had primary responsibility for gardening, animal husbandry, food preparation, childcare, and health and healing, whereas men were primarily responsible for tending the larger horticultural fields and community rituals. Women helped men harvest the large fields, but never contributed during the planting periods due to men's heightened state of fertility. Women and children are removed from the house the night before planting and cannot come near men or the seeds, with a taboo on sexual relations until the planted seeds sprout from the ground. The dispersed spatial organization of traditional Q'eqchi' communities allowed women to have extensive land around their homes for gardening and animal husbandry, resulting in their significant contribution to household subsistence despite the traditional restrictions on their contribution to men's horticultural activities.

As a result of the deterioration in women's subsistence activities, Q'eqchi' women are experiencing greater economic dependency on men because they cannot perform their traditional gardening and animal husbandry roles. The crowded camp structure was aimed at effective administration and did not take into account the importance of sufficient space around the home for women to perform their traditional economic roles. Such dependency has contributed to feelings of powerlessness and depression for many Q'eqchi' women, as seen in the words of Rosa who regularly lamented the fact that she no longer worked with her husband in the fields.

I do not go with my husband to the fields as I did in Guatemala because he can do all the work. He has so little land that he can finish all the work before mealtime. In Guatemala I would go with him and cut brush, and weed, and harvest the corn and beans. He says that I am not worth anything because I sit all day in the house and only eat. This makes me sad. I want to help him like I did before. What can I do? I have no space to grow a garden and all of the animals die here. The chickens do not lay eggs and neighbors get angry if they wander into their homes and gardens. He scolds me and shouts at me when the animals die and I am too ashamed to answer back. My life is not worth anything here.

Women's complementary economic contribution has dwindled in the refugee camp environment and with it their voice, authority, and feelings of self-worth have also decreased relative to men. Additionally, most of the development projects have been designed for men in Maya Tecún. The camp administration employed a full-time agronomist to direct agricultural production. This involved the introduction of fertilizers, pesticides, and new technologies. Women did not interact with the agronomist, who was seen as *q'ix*, and were therefore excluded from the agricultural development projects. In addition to the decline in women's traditional productive roles, the few wage labor opportunities made available to the residents of Maya Tecún were restricted to men. Men work as seasonal laborers on the surrounding sugar plantations and ranches, but women rarely leave the camp confines and have little to no opportunity to participate in the cash economy.

Encampment in Mexico contributed to an alteration in the traditional gendered division of labor, an increased restriction of women to the domestic realm, a reduction in traditional gender role complementarity, and a positioning of women into a status of economic dependency on male members of the household. Women's traditional roles in horticultural production and animal husbandry were not used by camp administrators, undermining their ability to carry out their complementary traditional roles relating to production. This undermining of their gender roles affected their status relative to men and caused feelings of powerlessness, frustration, and resentment to fester for many Q'eqchi' women, thereby contributing to the reported PTSD symptoms that were significant for gender and clustered around an overall state of coldness. Ana, an older Q'eqchi' woman with adolescent daughters, expressed pain, shame, sadness, and fear for herself and her daughters over the loss of her traditional gendered activities.

Women take care of the children, grind the corn, make food, and help men to bring in the harvest. We also make clothes and help gather firewood. In Guatemala, we were able to raise a lot of animals, pigs, turkeys, and chickens, but we do not have enough space here to do that. We don't have space to plant chilies, tomatoes, and trees like oranges, avocados, bananas, and limes. This makes me sad. I feel ashamed that I cannot grow food and raise animals to feed my children. I cannot teach my daughter how to take care of animals or how to plant a garden. I feel sad about this.

### GENDER & THE MAINTENANCE OF TRADITIONAL CULTURE

Gender and ethnic identity can be argued to be mutually self-sustaining in that women are most often held responsible for maintaining ethnic identity in refugee situations. In turn, the maintenance of ethnicity reinforces traditional gender roles and identity, "with women playing a critical role in the construction and maintenance of ethnocultural cohesion in a new environment" (DeVoe 1992, 32). Martin (1992, 8-10) observed that refugee women are typically expected to play the role of preservers of traditional culture, while men are more likely to develop a bicultural identity and move between the culture of refuge and the culture of origin. Q'eqchi' women wore traditional dress and were monolingual in much higher numbers than men, and many faced abuse from their own families if they attempted to acculturate. Also, nearly twice as many Q'eqchi' boys attended the elementary school in the refugee camp. COMAR provided Mexican teachers up until the fifth grade in the refugee camp and opportunities to study

in surrounding Mexican communities for high school. But participant observation, discussions with the teachers in the camp, and a review of refugee camp demographic data provided by COMAR showed that girls were sent in fewer numbers and removed earlier than boys from educational opportunities.

Adaptation and development of a bicultural identity are considered essential for good mental health in refugee populations (Urrutia 1987), but women in Maya Tecún have the least opportunity for interacting with the surrounding cultural milieu and are not permitted to work outside the community. Unequal access to wage labor opportunities, healthcare, development projects, and educational opportunities that were provided in the camp contributed to depression and feelings of powerlessness for women. I observed that an uneven rate of acculturation between men and women had already emerged after ten years in Mexico, with most women having little opportunity to positively adapt to the new sociocultural milieu. Men were working as agricultural laborers on the surrounding sugar plantations on a seasonal basis, were more likely to speak Spanish, were provided support and land to practice subsistence agriculture and greater access to leadership and decision-making by both COMAR and UNHCR. And most importantly, the gender gap in access to higher levels of formal education steadily widened during their experience of encampment.

### RESISTANCE AND RESILIENCE

Maintaining tradition in refugee populations can be a means by which women exploit traditional niches of empowerment, but the practice can also result in their exclusion from positive acculturative change. The longer a population is encamped, the less advantageous the strategy of maintaining tradition may be for women. In refugee situations, women who are excluded from acculturative opportunities may find themselves more restricted to their homes, increasingly marginalized into ethnic enclaves, and unable to cope as effectively as men do in the new environment. However, such marginalization can also provide the impetus for women to transform their traditional roles and broaden their cultural identity in order to avoid a complete breakdown in gender role and ideology complementarity.

The emergence of bicultural identity in the Q'eqchi' community was both partial and situational, with gender and age the most significant factors influencing acculturative trends in the community. The majority of older Q'eqchi' women resisted acculturation completely, adhering to ethnic insularity in order to maintain traditional roles and the authority that they gain from them. However, this strategy of ethnic insularity loses its effectiveness over time. At the time of my fieldwork, the population had been residing in the refugee camp for ten years, and as a result, the pressure to acculturate for younger women—who had spent nearly half their lives in refuge—was much greater than that experienced by older women. The few acculturative opportunities that did exist for women in the refugee camps were rarely taken advantage of by older Q'eqchi' women (over the age of 30), in large part because they were the least ladinoized of all Mayan ethnolinguistic groups at the time of displacement. No Q'eqchi' woman who was an adult at the time of displacement was fluent in Spanish. With few exceptions, including one Q'eqchi' father who was a community leader and sent his daughters to secondary school in a neighboring Mexican village, encampment resulted in an ever-widening gap in acculturative opportunity and decision-making opportunity between Q'eqchi' men and women. Girls were much less likely

than boys to proceed beyond the first grade. The majority of the Q'eqchi' population over the age of twenty-five had no formal education, although some did attend adult literacy classes in the refugee camp. The demographic data that I collected on a household survey revealed that out of 508 individuals, there was no significant gender gap at the first grade level (48 males and 44 females), but by second grade, the gap widened significantly (53 males and 27 females), and by grade four the gap widened even more (20 males and 12 females). Of the 24 Q'eqchi' children who were enrolled beyond the fourth grade, 7 were girls.

Maria, a thirty-six-year-old Q'eqchi' woman suffered from most of the symptoms on the PTSD checklist and did not send her daughters to school because they would "become Mexican." She believed that if they attended school, they would not want to return to Guatemala. She also worried that her daughters would have difficulty finding a husband if they did not exclusively maintain their Q'eqchi' identity. Her three daughters wear traditional dress on a daily basis, speak very little Spanish, and had never attended school. Maria did not attend adult literacy classes, spoke no Spanish, refused services available at the medical clinic, and had never traveled beyond the confines of the refugee camp. She was convinced that ethnic insularity would best benefit herself and her family when they returned to Guatemala. Women like Maria have resorted to ethnic insularity in order to protect their gender identity and authority on the basis of a belief that the return to Guatemala will bring with it a reversal of the ladinoization process in their community. Their strategy to bargain against ladinoization for the preservation of their gendered-ethnic identity was at the expense of acculturative opportunities. Maintaining ethnic insularity in situations of rapid social change may provide women short-term advantages, but what is gained in the short-term can culminate into a significant gender gap when social change accelerates unevenly by gender.

Resistance to acculturation as a strategy to prevent the breakdown in gender complementarity declined in effectiveness over time, especially for younger women (under 25 years of age) who were not adults at the time of displacement. The opposing strategy in situations of social change is to embrace change through traditional gender roles. This strategy was utilized in the development of a grassroots women's artisan organization that had as its central goal the teaching of younger women traditional skills and the production of weaving and embroidering items which could be sold at Mexican tourist sites outside the refugee camp. The artisan organization provided Q'eqchi' women a means of economic production that did not force them into violations of cultural norms and taboos that traditionally restrict their mobility. The organization was initiated by Paula, a twenty-three-year-old woman who occupied a position of high social prestige, in large part because she preserved traditional Q'eqchi' identity but developed skills to take advantage of acculturative opportunities. Of all the Q'eqchi' women interviewed, Paula had the highest social status in terms of income generation and leadership. Not surprisingly, she reported very few of the symptoms on the PTSD checklist. Paula generated a cash income, sought and paid for private tutoring in Spanish from one of the Mexican elementary school teachers in the camp, and had a strong social support system due to most of her natal kin surviving the violence and displacement.

Rather than occupying a static position without the ability to move between traditional Q'eqchi' culture and the more ladinoized camp culture, younger women like Paula, of which there were no more than five in the Q'eqchi' community, were becoming more adept at moving back and

forth between cultural realms in order to preserve traditional gender role complementarity, while at the same time seeking acculturative opportunities. New forms of social organization and economic production in combination with involvement in traditional yet transformed roles and activities provided the most effective means for Q'eqchi' women to avoid the negative effects of displacement and encampment on gender complementarity. Even though the primary motivation for organizing was to sell items outside the camp, women in the artisan cooperative explicitly linked their economic activities to the strengthening of their ethnic and gendered identity. I am convinced that development projects which promote such a strategy are the most effective in offering refugee women the means to counteract the negative effects of encampment on their social status. As seen in the statement below, Paula recognized that some aspects of acculturation could be positive for women, especially the development and practice of collective action. She expressed optimism about the future, tempered by the very real possibility that the violence would most likely continue in Guatemala. Rather than seeing acculturation as a process that leads to culture loss, she saw it as a tool for survival in an uncertain world:

What is the best thing that we have learned in Mexico? The best thing is that we have learned how to accept new people and work together as a group. We have learned to talk to one another. In Guatemala, women were isolated in their homes and no one spoke to one another. We had a bad experience when we left for Mexico, but that bad experience has brought good things to us as well. We have gained a little knowledge here in Mexico that will help us when we return. We have learned about soap, buses, family planning, Spanish, some writing and reading, clinics, underwear, cities, electricity, and markets. We will miss our neighbors, but we are glad that our children are Mexican. When they are older they can live here and work here and if the violence begins again, they will not have to live in Guatemala. Yes some good things have happened to us here. We are more awake and we understand how to survive.

### **CONCLUSION**

The gendered etiology of the PTSD symptoms, their identification as powerful and powerless states, and the significant gender correlation with the powerless symptoms suggested to me that Q'eqchi' women were expressing emotional pain over emergent forms of gender subordination in association with the powerlessness of refugee status, resulting in large part from unequal access to acculturative opportunities. Anthropologists can provide refugee relief programs with understandings of acculturative stress that are empirically-driven, holistic, and generated through emic constructions—that is, a perspective that is not fixed into diagnostic categories, but one that is context-driven, open to unanticipated symptomologies, and able to "tease apart" variation, change, and effects in any syndrome, disorder, or idiom (Kimerling et al 2002, xi). These understandings can be applied by health professionals in planning and implementing effective medical care. Such insight can also be shared with refugee camp administrators and agencies, so that steps can be taken to ameliorate the factors that cause and sometimes intensify PTSD, depression, and various forms of somatization in places of refuge and resettlement.

Maintaining traditional gender roles can contribute to women's well-being when those roles are vested with status and a realm of authority. On the other hand, the responsibility of upholding

tradition and maintaining cultural identity can also function to exclude refugee women from beneficial acculturative trends that can contribute to survival and well-being. For Q'eqchi' women, encampment had the effect of undermining their traditional realms of authority and restricting their activities and mobility, while at the same time opening new economic, acculturative, educational, and decision-making opportunities for men. When camp structures do not recognize women's traditional roles in production, household distribution, decision-making, childcare, and healthcare, refugee women can be excluded from political organizations, leadership opportunities, and economic development programs that would allow them to carry out their traditional roles and maintain their authority in both the family and community. This exclusion can contribute to new forms of traumatic stress which may lead to the intensification of PTSD and other stress-related illnesses and somatizations for refugee women. For Q'eqchi' women in particular, such marginalization created a situation whereby they expressed feelings of powerlessness through somatizations that negatively affect the well-being of themselves, their children, and the entire refugee community.

Understanding and reading the complex relations of power and powerlessness in expressions of traumatic stress and distress is essential to identifying the underlying causes of the stressors, and ideally, developing culturally appropriate forms of intervention to assist refugee populations and prevent increased social inequality and human suffering during periods of encampment and resettlement. Refugee camp administrators can ameliorate the negative effects on women by designing relief and development programs based on a thorough understanding of traditional gender roles and realms of authority and by ensuring that refugee women are actively involved in all phases of the refugee camp design and planning. It is also crucial that leadership and decision-making systems be balanced and that women's economic opportunities be prioritized. If women cannot practice traditional gender roles and productive activities in the refugee setting, it is essential that camp administrators design development programs that provide economic opportunities that do not transgress their traditional roles and activities. Finally, in all refugee populations, administrators and health professionals must implement culturally relative, gendersensitive mental health programs that assess gender differences in symptomology, create discursive spaces for both women and men to discuss stressors, and develop solutions to problems through collective action.

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