Traded for Another:
A Case Study of Two Single Mothers and Their Children’s Physical Health in El Milagro, Peru

“Motherhood is a choice you make every day, to put someone else's happiness and well-being ahead of your own, to teach the hard lessons, to do the right thing even when you’re not sure what the right thing is...and to forgive yourself, over and over again, for doing everything wrong.”

— Donna Ball, At Home on Ladybug Farm

Motherhood is a rite of passage, which, unfortunately, many women are left to experience on their own, bereft of the support a partner or family can provide. Women are left to solo child rearing due to many reasons ranging from unfaithful relationships to the death of a partner. In some cultures, single mothers are stigmatized and receive judgment from neighbors, family, and friends that makes parenting increasingly difficult. For many women, single motherhood means struggling to balance childcare and work to provide for their children which has the potential to affect their children’s health.

The lack of support that many single mothers experience can greatly affect their ability to raise their children in a nurturing and supportive style. According to C. Anne Broussard, “…single mothers reported less contact with friends and family, were less socially involved, and perceived less social support than married mothers their age” (Cairney 2003). Because single mothers are often left to raise their children without support, this can raise stress levels and therefore increase “punitive disciplinary techniques” from the mother. These techniques can involve yelling, physical violence, and shaming and have the potential to lower some mothers’ “ability to nurture and support their children” (Broussard, 2010) (Ceballo & McLoyd, 2002). Children also experience the negative effects of punitive disciplinary techniques. The mother’s
potential inability to nurture their children can increase the likelihood of depression, anxiety, and self-doubt presenting themselves later in the child’s life. This higher rate of mental illness is also something that I have personally witnessed through the lives of many peers and friends.

There has been a multitude of studies concerning the mental and emotional health of children with single mothers (see Broussard 2010, Cairney 2003, and Ceballo & McLoyd 2002). There has also been research concerning child feeding practices and nutrition in developing countries performed by researchers such as Nancy Levine (1998), Kimber Mckay (2002), and Michelle Grocke (2016), all who have worked on this issue in rural Nepal. However, there seems to be a lack of research on the physical health of children who are being raised by a single mother in a developing country. This study explores the relationship between single motherhood and children’s physical health by assessing the support, health care, children’s health, and health seeking behaviors of two single mothers currently living in a post-natural disaster area of Peru.

February of 2017 brought torrential rains to Peru followed by horrendous flooding in March. While the flood affected a majority of the country, it had particularly devastating effects on a community formed by a group of internally displaced persons. This community is known as El Milagro. The water wiped away the streets, cars, and houses of El Milagro sometimes leaving only a metal or concrete doorframe standing in its wake to serve as a harsh reminder of the building which once stood there. A few lucky families managed to save their homes from the flooding by using sand bags to barricade their houses; many families were not so lucky. These families have been left to pick up the pieces of their lives, which have been washed away in the flood. The people of El Milagro have banded together, with financial assistance from a fundraiser campaign led by professors and students at Utah State University, to form an Olla
*Común* or “soup kitchen”. Via this kitchen, 80 families gather together daily to cook and eat meals and support each other through the post-disaster rebuilding phase.

The first time I visit El Milagro in the beginning of June 2017, approximately 2 months after the brunt of the flood, I am struck by the path of destruction left behind by the water. The following passage traces my thoughts.

*As I sit in the back of a rickety stick shift van with hot leather seats and the lingering smell of body odor that all public transportation seems to have, I watch as my surroundings turn from city to rubble. The streets, unevenly worn by the water, cause the bus to jostle me and my peers around to the point that I begin to feel ill. I’m sure that the shock of witnessing the aftermath of a natural disaster also plays a large part of the sinking, churning feeling which is making its home deep in the pit of my stomach. I can see the faded water line of the flood painted upon the walls of the few remaining buildings, reaching over six to seven feet tall in some areas. Many sections of land are simply fields of crumbled concrete where houses once stood, not even the foundations remaining. Some of this land seems to have been sectioned off in a haphazard way with wooden pallets or government issued black plastic with the words ‘propiedad privada’ or “private property” scrawled on the makeshift boundaries. As we drive through this graveyard of homes, I struggle to comprehend the mass chaos all around me.*

*After what seems like hours, although I know it is only a matter of minutes, we pull into the Olla Común, which has a sign with the words ‘¡Gracias USU!’ (pronounced oossoo in El Milagro) painted in neon green on washed out orange paper. The people bustle around excitedly calling over their friends, children, and family members to come greet us. We are met with timid smiles and beautiful bouquets of vividly colored flowers. We then assemble the group into a large circle and dive abruptly into a needs assessment activity, that will be used by my peers for their research.*

In total, I visited El Milagro 7 times, and used participant observation, an asset questionnaire, and semi-structured interviews to gain insight into the lives of single mothers and their children in El Milagro. The participant observation provided me with an opportunity to spend time with single mothers and their children. During this observation, I could witness and analyze the forming relationships between both single mothers and their children. We conducted an asset questionnaire with many of the people at the *Olla Común*, which provided us with data
on what type of support people are receiving and what skills they possess. I also conducted a semi-structured interview with single mothers, which included questions concerning their journeys to El Milagro, their access to health care, which ailments their children are suffering from, and how they chose to treat those ailments.

It is difficult enough to be a single mother in a resource-rich environment. In El Milagro however, women have compounding factors to deal with – those related to the natural disaster, and raising their children alone. The following stories are an account of two women, Zarela and Flor, who are embarking upon the journey of single motherhood in El Milagro.

Figure 1: Map of El Milagro and Origin Cities of Participants

*El Milagro is located to the north of Trujillo. Flor is from Bambamarca (the northernmost town indicated) and has lived in El Milagro for 6 months. Zarela is originally from Cajamarca (located south of Bambamarca) and has lived in El Milagro for over 3 years.*
SUPPORT

It is my second visit to El Milagro and a charming little girl, with doe-like brown eyes and soft black hair pulled back into two tight French braids on either side of her head, catches my eye. I first spot her lingering on the edge of the Olla Común observing the goings on of the group and the new people. I lock eyes with her and she keeps my gaze for a long time just staring, I smile and wave at her and she continues to stare. She seems to be observing me to figure out what exactly it is that I am doing.

This little girl leads me to the first single mother that I come to know during my time in El Milagro, Zarela. She does not give me details into her relationship with the father of her children, the only information she chooses to provide is “the father is not in the picture”. Zarela is 27 years old and is the mother of three beautiful children: Santiago, a 9-year-old boy, Lacy, a 6-year-old boy, and Stephanie, a 3-year-old girl. When we ask during the asset questionnaire if she has been receiving outside support in the aftermath of the flooding, she says she has been getting aid from Cajamarca, a city North East of El Milagro. She tells me during a later conversation that her mother is still living and I assume that this is whom she is receiving outside support from. Zarela explains to me that her father died a few years past and she is struggling emotionally because of his passing. She also delves into her deep-rooted fears that she will never find love again in her life, which indicates that she seems to be severely lacking and yearning for support from a father figure, both for herself and for her children.

Flor is a bright eyed 22-year-old single mother raising a 2-year-old son named Christopher. When I first interview her during my third visit to El Milagro, she explains to me that she originally moved from Bambamara, Peru to El Milagro with her husband and his brother. She further elaborates to me that “they traded me for another woman…sometimes he
brings money for Christopher, but not often.” Throughout my time in El Milagro, I develop a wonderful friendship with Flor. We often sit in the dirt playing with Christopher and the other children, who frequent the Olla Común. She teaches me Spanish by drawing pictures in the dirt and labeling them. She then expects me to do the same with English and we learn the languages together. This creates many funny instances where I mispronounce words such as, Chancla, the word for ‘sandal’. As Flor begins to teach this word to me, I accidentally pronounce the word like Chanclate. To Flor, this pronunciation sounds like a combination of Chancla and Chocolate which she finds extremely amusing. Every time I see Flor she gently reminds me of my humorous pronunciation blunder by joyously proclaiming CHANCOLATE followed by a quiet chuckle whenever the inclination strikes her. I can infer from our conversations that Flor is yearning for support in the form of friendship and family ties. Throughout our Spanish lessons, she tells me how her family would love me and how much she would love to take me back to Bambamarca with her. Flor is planning to move back to Bambamarca in the next few days to be with her family.

Zarela and Flor seem to have found strong friendship and support within each other during their time in El Milagro. I often see their children, Stephanie and Christopher, playing with each other to the side while they talk. These two mothers usually arrive at the Olla Común either together or within close proximity of one another. They always seem to know where the other is. One day I ask Zarela where Flor is and she responds that “she is washing her baby’s hair and will be here soon”. And as if it served as a beckon call, Flor promptly walks up to us with Christopher quickly following suit. She gives Zarela and me a polite kiss on the cheek and takes a seat next to Zarela indicating that I should sit with her. As the other residents of El Milagro mill around and talk with one another, Zarela and Flor sit in the corner chatting and playing with
a gleeful Christopher. He finds a stray balloon and begins chasing it across the ground as it is being blown around by the gentle breeze which frequents El Milagro. As these women chatter and I watch their giggles of laughter in the shared experience of watching Christopher waddle around endlessly chasing the balloon, I can’t help but wonder where Zarela will get her emotional support when Flor moves back to Bambamarca.

HEALTHCARE AND CHILD HEALTH

Zarela tries to feed Stephanie some rice. She fights a spoonful of rice into Stephanie’s reluctant mouth. As soon as she turns around, Stephanie promptly spits out the rice and scrapes the remainders off her tongue with her grungy fingers all whilst giving her mother a look of utter betrayal and disgust.

During an impromptu semi-structured interview with Zarela, she tells me that “Stephanie eats anything I give her; sometimes she eats more than her brothers”. However, throughout my time in El Milagro I have seen Stephanie spit out food behind her mother’s back a few times. This makes me wonder if Stephanie is actually eating the food Zarela is giving her or if she simply allows the food to be placed in her mouth and then spits it out later when her mother is not looking. Throughout my time nannying toddlers, I have noticed that many children Stephanie’s age do not eat as much food as one might expect them to. However, Stephanie’s behavior does concern me because, if she is rejecting food behind her mother’s back, she may not be receiving the nutrients she needs to grow and develop properly.

Later during our interview, Zarela recounts Stephanie’s birth telling me “with Stephanie, she came so fast. I was in my house and I felt an immediate pain and so I ran to the health post because I couldn’t get to the hospital” laughing and smiling at the memory the entire time. Zarela also tells me that she did not experience any birth problems with her older children who were
both born in regional hospitals. When I ask Zarela if her children have been vaccinated she tells me, “Yes of course, they have Tetanus, Hep A and B, Yellow Fever, Typhoid, and Rabies vaccinations”. I inquire about the Rabies vaccination and she responds, “Well of course we all have Rabies vaccinations with all of the crazy dogs running around here!” I look down in shame and tell her that I do not, in fact, have a rabies vaccination. She bursts out laughing because she knows that I do have a habit of making friends with all the dogs living in El Milagro and out of all people there, I probably need a Rabies vaccination the most.

Continuing on the subject of healthcare, Zarela launches into an explanation of the health post and informs me that the vaccinations and treatments by this institution are free because it is state funded. There is a small health post near El Milagro, which was slightly damaged by the flood. There is a larger health post farther away which, according to Zarela, is 2-3 stories tall which was not damaged by the flood. After talking to Flor, I discover that her child, Christopher, has received all of his 6 month vaccinations and that he is due for some updates soon. Flor also tells me that she utilizes the free healthcare and vaccinations given by the health post. It gives me peace of mind to know that the people of El Milagro do have some form of affordable healthcare.

While conducting a semi-structured interview with Flor, she tells me that Christopher has been experiencing digestion issues and is not properly digesting nutrients. Despite this problem, Christopher has never been sick enough to need a visit to the regional Hospital according to Flor. On the other hand, Zarela tells me that Stephanie needs medical attention quite frequently. She has developed Bronchitis and the doctors have been prescribing Amoxicillin every 3-6 months. With doses of Amoxicillin every 3-6 months, Stephanie runs a strong risk of developing a resistance to this medication, if she hasn’t already. When Zarela goes to the hospital for any type of ailments, Stephanie’s Bronchitis included, the doctors do not spend enough time with her.
“The hospital is always so busy and filled with people they do not have time for me”. Zarela also informs me that they are given different doctors during every visit and there are no medical records. Because of this, the doctors keep prescribing Stephanie the same medication which could have severely negative effects on her health.

Access to quality healthcare is of extreme importance, especially to Zarela and Flor: both of whom have children who are suffering from serious ailments. It is encouraging that the residents of El Milagro do have access to free healthcare for minor illnesses, injuries, and vaccines through the services of the health post. However, while Flor, Zarela, and their children technically have access to healthcare at an official hospital, they do not have access to quality treatment for more serious ailments. This indicates that there are more barriers to health care than simply being near a health care facility and being able to pay once one receives treatment.

HEALTH SEEKING BEHAVIORS

Though Zarela and Flor are not able to control their overall situation, they do have the agency to raise their children to be as healthy as possible. Both women tell me that they have breastfed all their children for two years, which is recommended by the World Health Organization as well as the United Nations International Children’s Fund. The only child included in this study that was not breast fed for two years is Zarela’s middle son, Lacy. Zarela did not specify what exactly Lacy was suffering from, but tells me “I wasn’t able to breast feed Lacy for longer than 6 months because he had systemic issues”. The term “systemic issues” could be used to describe a multitude of illnesses and diseases as it just refers to a condition effecting all systems of the body.
Zarela later explains to me that Lacy also suffers from asthma. She uses medicinal plants and herbs, specifically Matico and Eucalyptus, to minimize Lacy’s symptoms. She further explains that while she can go to the pharmacy and get medication for him, that she does not trust pharmaceutical medications because of her experience with trying to treat Stephanie’s bronchitis. Therefore, Zarela usually tends to pursue naturopathic medicinal methods prior to pharmaceuticals. Christopher has never needed prescription medications; however, Flor does buy over the counter medications such as Pepto Bismol to treat minor illnesses and disease. She tells me that these medications are easy to access and affordable.

Although Zarela and Flor are currently living in relatively similar situations, they practice different health seeking practices. Zarela has had negative experiences with biomedicine treatments for Stephanie which has given her reason to distrust pharmaceuticals. Christopher has never needed to go to the hospital and therefore Flor has not had an opportunity to experience either a negative or positive encounter with biomedical doctors and prescriptions. This seems to come down to individual experience with biomedical hospitals, doctors, and prescription pharmaceutical medications.

CONCLUSION

Overall, there are many compounding factors that single mothers living in a post natural disaster community must contend with whilst raising their children. Their experiences have guided their decisions regarding the healthcare they choose to pursue for their children’s ailments. While they are so strong to carry on alone, single motherhood can be extraordinarily difficult long term. A mother’s emotional health will impact her ability to continue to provide good parenting for her child including: making decisions about health care, continually providing nutritious food for
them, as well as being present and able to make and enforce rules to ensure safety and moral behavior.

While there has been a multitude of research regarding the emotional effects of single motherhood on children, there is a lack of research available on the physical health impacts of being raised in a single mother household. More time needs to be dedicated to researching the physical health of children who are being raised by single mothers. Studying the physical health impacts on these children may lead to the development of correlations between support for single mothers and child health. If so, this could be a successful avenue to find additional ways to give these single mothers the emotional support that they need.

Throughout my time in El Milagro, I have developed an extraordinary respect for Zarela and Flor. I have witnessed them greet their children with smiles on their faces and love in their hearts regardless of the emotional turmoil they often speak about. Motherhood is a precious rite of passage in which a woman is handed a life to nurture, care, and love. These mothers have experienced waves of vicious losses, yet for their children, they carry on with brilliant hope. My aim is that this case-study sheds some light on the fact that increased emotional and financial support for single mothers will have long term impacts – including the improved physical health of their children.


