
The craft of midwives in Nova Esperança do Sul, RS, Brazil: a report on their knowledge and practices

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Abstract

Context: The present report aims to understand a little more about midwives and their craft and their traditions, beliefs, practices and customs, as these are of fundamental importance for women, at a time when medical resources were almost non-existent. . **Method:** The qualitative research was carried out through interviews in the municipality of Nova Esperança do Sul (NES), Rio Grande do Sul, Brazil. The midwifery profession marked territoriality and helped to forge the identity of NES, having this historical character as one of the main ways of recognizing the social role of women in the place in that period. **Results:** Thinking about the midwives' profession, in the light of Cultural Geography, makes us understand how they can contribute to the organization of space, as well as emphasizes that meeting local historical characters, who left great legacies and made a difference in the lives of countless women and families, is an act of appreciation and recognition.

Keywords

Midwives, Nova Esperança do Sul, Cultural Geography

Introduction

Geography studies cultural issues through the geographical line of Geography and Culture or Cultural Geography. As stated by Corrêa (2020, p. 10), "Cultural Geography seeks to treat spatialities and what arises from this spatiality, such as the territory, the territoriality, the space, the site, the landscape, and the power, for example, according to the conception of the researcher". Moreover, the theme allows the

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interaction of the geographical approaches with the retrieval of the memory and culture of a site forged by different forces that act on it.

One of the analysis perspectives of Cultural Geography is the investigation of historical characters and their contributions to the site. In this sense, studying the figure of midwives in Nova Esperança do Sul (NES), Rio Grande do Sul (RS), Brazil, is a relevant theme for retrieving the memory of the place and for future Cultural Geography investigations about the site. Hence, as the popular accounts and interviews commented in the results of this work tell, midwives were people very respected by families due to their work with communities. For this reason, they were characters of great importance to the construction of the local identity, doing their work with much dedication and applying informal knowledge to help women at delicate times in their lives that required specific care.

This account aims to show the result of field research on the theme "The folklore of the woman from RS: midwives and their craft", with the purpose of understanding a little more about midwives and their craft, as well as their traditions, beliefs, practices, uses, and costumes since they were of fundamental importance for women at a time when medical resources were virtually nonexistent. This research was originally carried out for presentation in the 49th Ciranda Cultural de Prendas, in the regional phase, and one of the assessment criteria of the contest was the "Folkloric Exhibit", which had "Women who made and are making history in traditionalism" as its central theme; the interviews conducted were later organized in this research account.

Methodology

For developing the research, technical procedures such as handwritten semistructured interviews were adopted, with the surveying of information and conversations with twelve people (grandmothers, aunts, relatives, neighbors, friends, acquaintances, and midwives). The grandson and granddaughter of one of the leading midwives in the city of NES, Ms. Lúcia, who performed over a thousand deliveries in the city and region, were among the people interviewed. With this, oral sources, documents, and journal papers were used to get more acquainted with the researched theme.

The interviews were conducted with the first author going to the homes of the persons interviewed, talking, and explaining the purpose of the interview; then, the questions below were made, the responses were written down, and the interviewees would sign the list at the end.

- The work of midwives was of great importance for women when bringing their children to the world because they needed a trustworthy person to assist them in such a delicate moment. What do you know about the work of a midwife?
 - Due to the few resources that exist in this area, how did midwives develop their work?
 - This was practically voluntary work. Were there payments for the services provided? If yes, how were the payments made?
 - The midwives used home medicine a lot that helped in the recovery of the patients and in preventing some evils for both mothers and babies. Do you know any of these medicines (teas or infusions) used to this end?
 - Midwives were generally religious people. Do you know any rituals they performed or prayers they said to help in the moment of delivery?
 - Before and after delivery, there were many precautions to be followed, but what were the most important ones?

- How was the relationship between midwives and patients? Were there conversations/visits before the delivery?
- Do you know or have you known any midwives?

Research site

The municipality of NES is located in the central region of the state of RS, Brazil, as presented on the map in Figure 1. According to the last census by the IBGE (2010), it had a population of 4,671 people. At its municipal borders are the municipalities of Santiago to the north, São Francisco de Assis to the west, and Jaguari to the south (Figure 1).

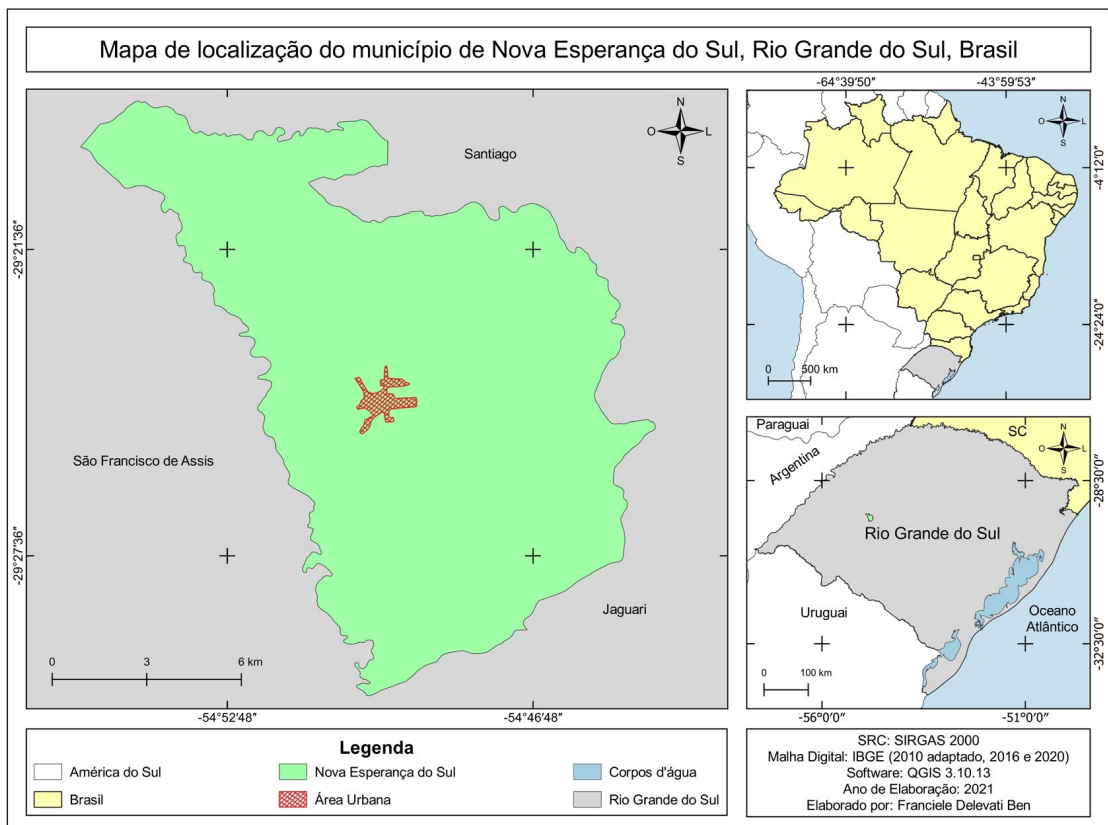


Figure 1. Map of the location of the municipality of Nova Esperança do Sul, Rio Grande do Sul, Brazil.

The knowledge and practices of midwives

According to Barroso (2009), up to the 18th century, deliveries were made by midwives, who were women trusted by the pregnant women or with experience recognized by the population in performing deliveries and postpartum care who also helped with newborn care. This important historical figure was recognized by many generations as fundamental in the construction of local identities and the performance of the deliveries.

Hence, NES had an important midwife, Ms. Lúcia, who brought many lives to the world, and midwife Catarina, who appears in the interviews carried out about the inspiration generated by her upon depicting her as an admirable woman who contributed much to the site. According to Vielmo and Vielmo (2010, p. 160):

For Ms. Lúcia, just like for any other, there was no bad weather. As soon as she received the call, there she went riding her painted mare to bring another child to the world. When the age started to advance, she started using a spider phaeton¹, and, finally, she would move around by car. Ms. Lúcia performed over a thousand deliveries recalled, as she stated when anyone asked her.

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According to the accounts, the midwife was a figure respected by all; her work was done with love, dedication, courage, sensitivity, and much keen wisdom, given that her responsibility was very grave. Many lives depended on her to bring them to the world and integrate the future citizens of the communities. The experience gave them the backing to know how to act at times of difficulty; in other words, the knowledge passed from generation to generation and the experiences they had delivery after delivery were the source of their knowledge and, therefore, of the practices they performed.

Also, they stressed that they also felt fear and stress since sometimes there was a risk of losing the baby or the mother. Hence, it was work that required efforts and sacrifices because they would often have long walks or go by horse or even spider phaetons, facing bad weather to assist all women without distinguishing social classes. It is obvious that we cannot romanticize the midwife craft; however, the participation of these important historical figures in the construction of the identity of NES is undeniable.

The grandmothers, aunts, relatives, neighbors, friends, acquaintances, and midwives interviewed reported that they used popular medicine prescribing their teas for both mother and baby, believed in rituals, superstitions, besides the always protective prayer to Saint Margaret and Our Lady of Childbirth, making religiosity evident as a parameter for the labor to take place without major incidents.

The accounts made evident that:

The work of midwives was very important and valued because it was the only resource there was. About their work, I know they did that with much love, using little resources, but doing everything they could for it to work out

(Ana, 2018)

There are also accounts that the midwife craft consisted of monitoring the gestation, delivery, and postpartum care and was marked by myths, beliefs, and popular knowledge, as presented in Plate 1. Some women sought midwives during the gestation, while others did not have this monitoring because they did not believe it to be necessary, so they requested the service of the midwife at the time of delivery and for postpartum care.

| Crendices e mitos durante a gestação |
|---|
| Evitar tomar chá de canela, pois é abortivo. |
| Se tiver muita azia o bebê será cabeludo. |
| Não cruzar a cerca de arame ou sentar na porta, pois pode enrolar o cordão umbilical no pescoço da criança. |
| Deveria tomar purgante para criança ter a pele limpa. |
| Se for menina a barriga vai estar mais à esquerda e se for menino mais para à direita. |
| Barriga alta e pontuda é menino, mais redonda e espalhada é menina. |
| Se não comer algo que desejar a criança nasce com mancha no local onde a mãe colocar a mão. |
| Enjoo com doce é menino, com salgado é menina. |
| Virar a mão com a palma para cima é menina, com a palma para baixo é menino. |
| Tomar café bem quente antes do parto ajuda a dar força. |

Plate 1. Myths, beliefs, and popular knowledge related to gestation.

Considering the risks stemming from work without minimal conditions, the midwife craft is very valued in recognized in the community and the region. Some of the midwives did not know how to read or write but transmitted their knowledge orally from mother to daughter, from grandmother to granddaughter, or from midwife to midwife, besides acquiring knowledge about the female body with the day-to-day experiences they had and getting to know roots and herbs that are good to cure diseases. Nowadays, they are no longer midwives because the performance of deliveries by such figures is no longer allowed, that is:

The removal of midwives from the Brazilian public scene took place progressively in the name of the medical practice that comes with the hygienist discourse. This modernizing and positivist discourse is important in the constitution of a context of ideas about the female body. Hence, the practices of midwives are being replaced, delivery becomes institutionalized, and medical knowledge is legitimized to the detriment of midwife knowledge, which became practices of the past in urban centers.

(BARROSO, 2009, p. 5)

Some of the interviewees assisted by midwives reported they were good people, had excellent knowledge to help the babies come into the world, put everything into practice with much care, diligence, and delicate hands, doing a physician's service with much love and responsibility. According to the accounts, the midwives had their families and homes to take care of but forsook everything to answer the call of a pregnant woman.

They did the work with gusto and agility because they knew what they were doing. Every midwife brought in her bag teas for the child and the mother. They used instruments such as scissors sterilized in fire, very clean cloths, warm water, a basin or bowl, the injection for pain, gloves, olive oil, mercury, alcohol, and thread to knot the belly button. As the account puts it:

My grandmother was a midwife; I know of the care she had; she would bring her bag with medications, scissors to cut the umbilical cord, injection for hemorrhage, and other medications for infection or pain.

(Mara, 2018)

The grandson of Ms. Lúcia accounts that the dislocation of the midwife was by horse, taken by the pregnant woman's husband, and that the instruments were taken in a leather case. These instruments were gloves, large scissors to cut the umbilical cord, and small scissors to cut the baby's tongue if they were born with it stuck; there was also the No. 9 cotton string that was soaked in alcohol to tie around the belly button and mercury because it had a healing effect.

Ms. Lúcia dislocated from her home to the pregnant woman's home regardless of the address because she served the region; she asked for the horses to remain on the house patio for the dislocation to be faster because there was still no other means of communication and transport.

(Luiz, 2018)

Knowing that their work was practically voluntary, the midwives never wanted rewards, but the families of the pregnant women always gave them a treat in the form of payment. Each family rewarded them with something within their reach to help the midwife; there was payment in money or with food produced by the families themselves (beans, lard, flour, chickens, eggs, cheese, or salami).

The midwives used home or popular medicine a lot that helped in the recovery of the patients and in preventing some evils for both mothers and babies. However, some home medicines and recommendations that the midwives made were mentioned in the interviews: they recommended having some chicken broth after delivery, and marjoram tea was given to the baby if they had a stomach ache, orange blossom, lavender, dill, or fennel tea to combat the cold, and rue tea for fighting infections in the child's belly button. The patient drank burnt tea (sugar, medicinal plant leaves, and ember on top of the leaves); fennel tea was also given to the mother to gather milk. The grandson of Ms. Lúcia reported that she "used chamomile tea for both mother and baby".

Besides, the midwives were generally religious people, said prayers at the time of delivery; therefore, an interviewee reported that the husband's hat was placed on top of the belly for the child to be born faster; another said that some prayers were said, such as Our Father and Hail Mary. According to Barroso:

It was verified that the knowledge of midwives about herbs and medicinal plants is an inheritance left by their ancestors, and, for this reason, they followed a ritual mixing faith, belief, and wisdom. This cultural inheritance of home medicines has credibility with all those who use it, especially pregnant women, who use the many resources of these medicinal herbs. It is also the construction of a symbolic reference to synthesize ambiguous experiences: innovative and conservative. On the one side of this ambiguity is the ideology of conformity and the use of industrialized medications that lead society to extreme consumption; on the other side is tradition, using resources of nature and the local and regional culture itself.

(BARROSO, 2009, p. 12)

Some interviewees reported that the midwives asked the husbands to warn them up to two months before so they could start preparing themselves. For example, Ms. Lúcia asked to be warned around thirty days before the delivery so she could be ready to answer the call. Other accounts said that the care was not limited to the delivery but rather eight days after the delivery to help the mother cure the child's belly button; also, some midwives paid frequent visits to the pregnant women to guarantee better monitoring.

The Working with Traditional Midwives Program (PTPT) was implemented in 2000 to improve care during gestation, delivery, birth, and postpartum care. In the PTPT, it is said that this program "put the improvement to home delivery and birth assisted by traditional midwives once again on the agenda of discussion with state and municipal managers, as a responsibility of the Unified Health System (SUS) and a duty of basic care". Also in the program, midwives are recognized as partners in community healthcare, in which they develop actions to value and qualify the work provided to the SUS interconnecting with the Ministry of Health to work on reducing maternal and neonatal morbimortality. Even if the midwife craft is no longer in effect, there are others similar. For example, the Ministry of Health also inserted in the PTPT the qualification and humanization of obstetric and neonatal care (Brasil, 2010).

However, the midwives who were essential in the lives of many people in the municipality of Nova Esperança do Sul and the region were not deployed within the SUS.

The work of midwives and Cultural Geography

The midwife craft marked the territoriality and helped forge the identity of NES, having this historical character as one of the main paths for recognizing the social role of women at that time. Understanding the importance they had and the relevance of the popular practices and knowledge in their professional activity reiterates the need for surveying memories about social practices that are no longer effective at the site to understand how they contributed to the population.

Thinking of the craft of midwives in the light of Cultural Geography leads us to understand how midwives may contribute to the organization of the space and the identity of the sites. Getting to know local historical characters who left behind great legacies and made a difference in the lives of countless women and families is an act of valorization and recognition. Likewise, getting to know the stories and characters of the place contributes to topophilic feelings, i.e., an affective feeling is developed between people and the physical environment, given that topophilia is the bond of affection that unites people to places, according to Holzer (2003).

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