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Narratives, culture and sexual health: personal life experiences of Salvadorean and Chilean women living in Melbourne, Australia

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ABSTRACT This article examines narratives about culture, gender, identity and sexual health amongst Chilean and Salvadorean women living in Melbourne, Australia. We compare women's narratives about gender roles in their home country to make sense of their experiences of migration, the tensions that arise in renegotiating their gender identities and roles in a new country and the ways these changes are experienced in terms of sexual health and well being. In comparing these past and present narratives of Chilean and Salvadorean born women, we raise a number of questions about the assumptions underpinning many of the sexual health promotion and STD prevention programmes targeted at women in migrant communities in Australia. Many of these programmes have targeted specific 'language groups' or 'geographical regions' with little attention paid to variations of cultural or socio-economic contexts within people's home countries or the specific ways in which these impact on gender roles. Additionally, very few sexual health policies and strategies in Australia take into account the impact of the 'migration and settlement process' and the ways these experiences influence cultural and gender identity of migrants in Australia. We propose that there is a need to build effective and flexible sexual health promotion and STDs, including HIV/AIDS, prevention strategies that build upon a dual strategy which includes men and women.

KEYWORDS *culture; gender; sexuality; women's health*

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Introduction

One of the main challenges to promoting sexual health, especially the prevention of sexually transmitted diseases (STDs), including HIV/AIDS, is addressing the needs, beliefs and practices of communities undergoing rapid sociocultural change (Dyson, 1992; Lori and Elias, 1995). While there are different types of sociocultural change in many communities including civil strife, forced displacement and rapid economic development, migration (for economic or family reasons) continues to be one of the main sources. Developing ethno-specific approaches to HIV/AIDS prevention has been a key priority in countries with large migrant populations, like Australia (Evans, 1988; De Jarlais et al., 1994; Adrien et al., 1996). The effectiveness of these approaches is dependent on the extent to which they take into account the ways that beliefs, customs and practices of a migrant community change and interact with those of the host society. Approaches also need to consider how strongly held norms and values relating to gender roles and sexuality change or remain intact in the new sociocultural setting (Carrier and Magana, 1991; The Editor, 1998). A challenge within the HIV/AIDS cross-cultural context has been to develop prevention strategies which take into account the values held by migrant communities while at the same time acknowledging the changing nature of these values and beliefs (Kline et al., 1992; Bayer, 1994; Gifford et al., 1998).

There are many contextual factors that impact on values and lifestyle of a migrant community (Berry, 1989, 1992; Leslie, 1993; Pile and Thift, 1995; Hawthorne, 1996; Day and Icduygu, 1997; Pallotta-Chiarolli, 1999). Studies of Latin American families in Australia illustrate how migration impacts on changes in religious values, family structure and functioning and in communication between males and females and between parents and children (Moraes-Gorecki, 1988; Amézquita et al., 1995; MacIntyre and Dennerstain, 1995). For example, previous patterns of behaviour and practice often become more flexible and others may become more rigid. For example, *machismo* is publicly criticized in Australia while in their private lives men and women often still maintain gender roles forged within this ideology (Amézquita et al., 1995). There is a tendency among the Latin American community to believe that Australian born women have too much freedom and this conflicts with what is considered the natural hierarchical order within the family. Access to domestic appliances, paid work outside home and childcare facilities are factors that impact on Latin American women's changing roles. Some women feel comfortable with these changes while others find it difficult to adjust. Men's roles are also changing; losing some of their parental authoritative role in the family, being unemployed at times

and their lack of proficiency in English are all part of this shift (Moraes-Gorecki, 1988; MacIntyre and Dennerstain, 1995).

Gender and sexuality in Latin America

In this article we follow Ortner and Whitehead's (1981) proposition that what gender is, what it means to be a man and a woman and the relationships people engage in reflect not only a biological 'given' but are products of social and cultural processes. We consider sexuality and sexual health to be culturally constructed concepts. Thus, sexuality concerns issues beyond the number of sexual partners an individual has and the kind of sexual practices an individual engages in. Sexual health, according to this conceptual framework, should include the social, cultural and economic factors that shape a woman's vulnerability to health (Oomann, 1998; Richter, 1998). To understand sexuality, sexual health and gender relations in Latin America and among those communities now in Australia, we need to consider the norms and values that influence male and female roles in that society. As Laumann et al. (1994) propose, every culture produces 'scripts' for sexual behaviour and sociocultural processes play an important role in determining what is perceived to be 'sexual'. These 'scripts' embody what individuals believe are the dimensions of sexuality and what society defines as the 'scenarios' for sexuality.

In Latin America, home, family and honour have been the guiding principles of female-male relationships which, it has been argued, have remained constant from the 15th century (Youssef, 1973). These values and norms continue to influence Latin American families in Australia. It has been argued that Spanish Catholicism with its model of Mary – the Virgin Mother – has inspired the characteristic self-denial, humility, suffering, obedience and religious piety in Latin American women (Scott Kinzer, 1973; Yeager, 1994). 'Becoming a mother' takes place within the family, and it is only within the domestic and private domain of home that women can preserve their virtue and embody the model of Mary. Although these principles of family honour have prevailed throughout Mediterranean culture, it has been argued that in Latin America they exist in an exaggerated form (Yeager, 1994).

It has also been argued that beliefs and attitudes towards sexuality in Latin America have been strongly influenced and shaped by religious beliefs. Sexual desire is associated with the original sin, which entered the world with the Biblical Fall in the Garden of Eden. The evil of sex has been particularly identified with the female. The Biblical Eve has inspired the image of the 'woman temptress' who could not be trusted (Rodó, 1987; Moraes-Gorecki, 1988).¹ A woman should only lose her virginity within this legitimized union of marriage; if she loses her virginity before marriage, she is a 'fallen' woman and it is believed that no man will want to marry her. Although by marrying the woman *loses* her virginity, she *gains* social prestige and legitimacy as a married woman and future mother.

The values and norms that dictate male-female behaviour patterns and

the role of the family in Latin American society are traced to colonial tradition (Moraes-Gorecki, 1988). Social prestige entails that the man protects and gives advice to his family, provides material welfare and represents the family in the 'outside world'. The woman, his wife, represents love, care and mildness; she provides spiritual welfare and domestic care. These gender differences are summed up in the well-known Spanish saying: 'A man's place is out in the street, a woman's place is in the home' (Stolen, 1991). From these sociocultural patterns, formed historically by the Spanish culture and the Catholic tradition, has emerged what some authors have called the *machismo* ideology. *Machismo* has been defined as the cult of virility, characterized by an exaggerated aggressiveness in the male-to-male relationships and arrogance and sexual aggression in male-to-female relationships (Stevens, 1994). This ideology is socialized in children from early infancy, boys gradually gain freedom and girls gradually become more domestic, protected and controlled. This is particularly relevant during puberty when the girl's major asset, her virginity, is seen as being constantly threatened and when she is expected to remain a virgin until married (Stolen, 1991).

It has been argued that in contemporary Latin America gender ideologies based on religious models have not disappeared and may not disappear because they reflect a sacred view of the world and a Catholicism that are at the core of Latin American identity (Geertz, 1973; Mifsud, 1988; Morandé, 1991; Prado, 1993). In this context, it has been argued that the image of the 'mother earth' or Amerindian model of the female role in society was synthesized with the model of the Virgin Mother of Spanish Catholicism, creating the current definition of women's role in society (Estrada, 1986; Wolf, 1988). What it means to be a man or a woman and the 'scripts' about sexuality are woven within a sociocultural body of beliefs and practices, which are religiously constituted and remain at the core of a people's cultural identity.

Latin American society has experienced many changes in the norms and values defining family and gender roles in the last 30 years. Scholars have argued for a 'modern Latin America' where gender relations and sexuality, as many other aspects of social life, have begun to be modelled by secular paradigms (Morandé, 1985). However, for many people, in the realms of family, gender relations and sexuality, beliefs and patterns of behaviour have remained consistent with the ways in which people for generations have understood them, from a religious perspective (Morandé, 1984). Although not all Latin American people participate in institutionalized religion, most hold beliefs and enact practices (rituals) which are defined by their culture(s) and ethos, which in the case of Latin America is largely religious and predominantly Catholic.

Sexuality, embodiment and 'culture of silence'

From a sociocultural perspective, it is useful to consider issues of sexuality within the context of culture and *embodiment*. As Csordas (1994) argues,

embodiment is a valuable standing point for rethinking the nature of culture and people as cultural beings. The human body, in this perspective, is at one and the same time both a tool for shaping the world and a substance out of which the world is shaped. Thus, the life experiences of women, including health and sexuality can be understood as experience lived through the body. Through these relationships, the separation between the body as a biological entity and the social beings as a cultural entity closes. The living of the cultural world through the body, and the making of the body through the cultural world, becomes a powerful way of understanding the social shaping of sexuality without reifying culture.

For example, an ethnographic study with Salvadorean women refugees in the USA used notions of *embodiment* to analyse the psychological/biological phenomenon of *el calor* (the heat). Jenkins and Valiente (1994) show how for these women, experiences of their body cannot be separated from the wider political, social and economic forces that have shaped their lives. Thus, it becomes essential to understand the body as both cultural object and cultural subject; that representations of experience and the immediate bodily experience are inseparable; and that sociopolitical considerations are essential in studies of emotions and experiences (Jenkins and Valiente, 1994). It is in this sense that the body can be understood to have both intentionality and agency, in that it has a capacity to create our worlds as much as the world creates our experiences of our bodies.

Women's life experiences of sexuality in Latin America are interwoven with the cultural, social, economic and political fabric of Latin American culture. Thus the way in which sexuality is experienced and represented has not only biological but psychological and social consequences. The cultural context of sexuality, sexual health and gender relations in Latin America has been described as a 'culture of silence' (Sharim et al., 1995). Abandonment and solitude are real risks for women who voice their concerns about infidelity within a partnership; this often leads to women having sexual relationships against their will (Palma, 1994). Studies in Australia have shown that migrant women experience risks to their sexual health in a context that has been called a 'paradox of silence' (Gifford et al., 1998). Women prefer not to talk with their sexual partners about the risks of STDs and HIV/AIDS so as not to disrupt their social relationship. Thus, women choose to protect their 'social' health over their physical health. Similar studies in Argentina found that women referred to the negative consequences of STDs more in terms of diseases that 'destroy the family' than diseases that affect women's bodies (Gogna et al., 1997). These findings are similar to those of Palma who argues that in Latin American culture sexuality is not verbal (Palma, 1994). We have argued elsewhere that this 'silence' around safe sex, use of condoms, trust and promiscuity extends to a 'silence' about relationships in general (Gifford et al., 1998). Thus, to speak about a relationship is to threaten it. A relationship remains stable, trusted and protected only when it is implicit

and when the protective silence is embedded in everyday life (Gifford et al., 1998).

In this article we explore how women make sense of their gender and sexual identities in light of their past in Latin American and their present life in Australia. We focus on two groups, Salvadorean and Chilean women who migrated to Australia between the 1970s and 1980s. The two groups of migrants discussed in this article have had different migration experiences but share similar cultural and religious backgrounds.

Methods²

Information was collected using qualitative research methods of research including semi-structured in-depth interviews and case studies. In-depth interviews were conducted in 1997 with 25 women born in Chile and 25 women born in El Salvador living in Melbourne, Australia ($N = 50$). The sampling strategy was a purposive stratified, snowball sample (Patton, 1990). The women were selected so that both single and married women were represented in the sample and the women were between 18 and 45 years of age. Most interviews were conducted in Spanish, except for three young Chilean women who preferred to speak in English. Interviews were guided by a theme list, audio-taped, translated and transcribed into English. The transcripts were then coded for major themes and analysed using ethnographic content and thematic analysis (Patton, 1990).

Sample

The sociodemographic characteristics of the women who participated in this study are similar to the Chilean and Salvadorean communities living in Australia. The exception is the practice of Catholicism and level of education among the Chilean women in the sample. The Chilean women in this study are more educated than the Chilean community at large and the majority said that they practise no religion. Chileans and Salvadoreans have different stories of migration. Most Salvadoreans came to Australia in the early 1980s under the humanitarian programme for war refugees. Although most Chileans migrated under the family reunion plans and mainly for economic reasons during the early 1970s, there are some Chileans who came as political refugees after 1973 under the humanitarian programme. (Addler, 1988; Schneider, 1988; Hugo and Maher, 1995; ABS, 1996a, 1996b).

The Chilean women in this study were relatively young and all were born in Chile except for one woman who was born in Melbourne, Australia. The women in the sample have lived in Australia between 6 and 11 years. Most of the women in our study migrated to Australia looking for an improvement in their economic and/or educational situation having completed secondary education and/or had a history of paid work in Chile. Some

women migrated with their families and/or under the family reunion programme. Most of the women have completed tertiary education in Australia and most of them were working in professional occupations at the time of the interviews. Some were dedicated to home duties which they combined with part-time or full-time studies at tertiary level. Most of the women were partnered either by marriage or de facto relationships and there were four single women in the sample. Although most of the women preferred to speak Spanish at home, the majority felt comfortable using English outside the home, as when seeing health professionals for example. Although most of the women in the sample were raised as Catholics, only a minority said that they were still Catholic; most of them said that they practised no religion.

This contrasted with the Salvadorean women who were slightly older than the Chilean sample and all had been born in El Salvador. Most women had lived in Australia between 8 and 12 years and most migrated as war refugees with some migrating under the family reunion programme following their relatives who came as refugees. Most of the women in the sample came from rural, farming communities in El Salvador and had little or no access to education and paid work. Like the Chilean sample, most of the women were partnered either by marriage or de facto relationships and there were five single women in the sample. Although some of the women had secondary and tertiary education, a few had only primary education. Unlike the Chilean women, most were dedicated to home duties and a few of those with secondary or tertiary education were studying part-time or full-time at tertiary level at the time of the interviews. Most of the women preferred to speak Spanish at home and, in contrast with the Chilean women, most would prefer to be able to speak Spanish outside the home as well. Also unlike the Chilean women, the majority of women were raised Catholics and most of them said that they remain Catholic.

Results

In asking how women experience their changing gender roles, we begin by looking at their narratives about growing up in Latin America and then we look at present experiences of life in Australia.

Life as it was back home

From girl to woman: gender role expectations

As in many societies, in Latin America, roles for boys and girls are defined from infancy. Boys and girls receive instructions about appropriate behaviour within the family, towards their siblings and with the opposite sex. According to the women in our study, gender roles are strongly fixed and determine the way in which girls and boys are raised and mark the way in which they develop under the canopy of parental cultural norms. These

norms define the roles and duties of each gender from childhood to adult life, and generally establish submissive, passive roles for females and dominant, independent, active roles for males:

parents have their roles in their heads, because each one has a role, the woman has her role, the house, the children, the cleaning; the man is the one that works, that gives the money. (C05)³

Many women in the study reflected on their parents' values which emphasized differences between male and female roles and expected behaviour, and how they and their siblings were raised with those norms. The choice of toys and even the colour of their clothes were determined by the norms for male and females. The selection of toys represented and reinforced the future role of a woman as mother and wife, and the man's role in society as provider and head of the household:

parents educate [the children], for example, the husband would never give a doll to a boy because they believe that men have to be strong and that they have to give them a car or something that shows them how to be tough. You will never see a baby girl given a truck. They [the fathers] think that they should stick to the appropriate behaviour and give girls soft toys. Also girls are shown how to do things in the kitchen and boys are shown how to work in the car or helping dad. (S17)

the child learns from the moment he's born. There are the little clothes, the colours, the toys . . . because the boy can't play with dolls because that's for girls and so on. (C05)

As children grow older, parental expectations and patterns of behaviour towards their children continue to reinforce this role differentiation. Women remember that differences between themselves and their brothers were reinforced during adolescence by their parents. Freedom to go out and have a social life was given to boys, while girls were 'protected' at home from the 'risks' that social life might have incurred. Even when permitted to attend a social event there were rules and restrictions for young women which included a curfew and being chaperoned:

the young woman has to be early at home always. She always has certain hours when she could go out and never goes out by herself, she always goes out with her brother or a friend has to come home and ask permission for her to go out. (C11)

Underlying the restrictions for women going out socially are strict expectations regarding sexual behaviour and perceived risks. Expectations of sexual behaviour for women and men are clearly differentiated and indicate a double standard. Within these norms of sexual behaviour women are expected to play a passive role while men are expected to play an active role:

a father is happy when his son has his first sexual relations but he is not happy when his daughter has it. They always say silly things to the son about having sex, but they don't recommend it to the girls. (C19)

Furthermore women are expected only to have sex within marriage while men are expected to have premarital sex:

women have to be more conservative, only have sex with their future husband. Instead the man has more freedom. In our countries they can have sex when they want, even before getting married. (S16)

The expectations for women extend to their roles as future wives and mothers. Particular behaviour, certain activities and certain places are set for men and women, within the established norms. A woman's place is the home, her duty is to look after the children and do the housekeeping but enjoy little freedom outside the home. A man's place is at work, his duty is to provide an income for the sustenance of the family but he has the freedom to do whatever pleases him 'outside' the home:

they [men] have more freedom. It's because a woman is very different from a man and a woman is more submissive, you have to be at home with your children and doing housekeeping. (S04)

the man wants to have the woman always at home, busy with the children and he goes out to work or whatever he wants to do. The woman instead . . . because of the children, she has to be at home. (C15)

A woman's role: influence of religion and machismo

The women in our study explained that the roles for males and females also apply to married life. These role definitions, framed within the *machismo* ideology, are inscribed in a society where values and norms are framed within a religious, Catholic tradition. As we will see, both *machismo* and religion are interwoven within the fabric of social and personal life. For men, sex before marriage results in the getting of *machismo* whereas for women, sex before marriage results in the loss of virginity. Thus, premarital sex for men is inscribed with becoming more manly and reinforcing a strong male identity whereas for women, premarital sex is inscribed with loss and detracting from female identity. To be a strong male is to get sex and to be a strong woman is to resist sex. For example, women in the study explained how important it is to preserve one's virginity and how losing it was a negative event in some women's lives:

[After I had sex I felt] a bit of guilt because I thought that I had failed my mum . . . because she trusted me because I was 20 and I was a *señorita* [maiden] and when I had my first sexual relation I thought that I failed mum and I felt guilty. I failed myself because the goal of a *señorita* at the time was to get to the altar in white and get married. (S20)

it was right after I did it [had sex] I thought . . . shit! . . . it's gone. I haven't got it any more. I remember that we were talking about it with a group of friends

and one girl said that she was still a virgin and that she was proud of it . . . I wished I could have said that, I wish I could have . . . you know . . . keep it and give it to someone that I really, really loved. (C09)

References to God's will or God's punishment in relation to having sex reflects the influence of religious beliefs on some women in the study. Shame, sense of failure, regret and guilt were described by the women when giving an account of their first sexual encounters or when falling pregnant before marriage:

I was scared in spite of the fact that I was older, I had already finished university, I had graduated and I was already working . . . I was afraid because I was going to feel sort of guilty with myself, to arrive home and see mum . . . So I didn't want to do it [have sex] because I knew I would feel uncomfortable, like dirty, because I was doing something that I wasn't supposed to do. But, I really felt I loved him, so I thought that it must be God's will and it wasn't a thing that I proposed myself. On the one hand you feel happy because you are with the person you love but on the other hand you feel guilty because you are not married, and maybe that's not so much because of oneself but because of the family. (C06)

Another influencing factor present in the women's recollection of *life as it was*, in their country of origin, was *machismo*. Men's sexual relationships outside marriage were seen as normal or even expected in Latin American society:

I think that in the Latin societies it is very common that a man has another relationship apart from his wife. It's almost expected to happen somehow. (C01)

Machismo is associated with men's active sexual life before and after marriage, within and outside marriage, strong command over wife and children and detachment of paternal duties:

In my country, men are never in charge of the children and if they cry they prefer to go and live elsewhere while they grow up (laughs). In my country if they want they stay or they go, it's the woman's problem . . . 'she had them', they say, 'I don't have children, she had the children, not me'. (S22)

Women agreed that *machismo* is mainly transmitted from a mother to her children, as mothers are the main educators in the family, but reinforced by the behaviour of men:

Machismo is taught by us . . . we, the women teach this to our children . . . from the moment they are born and when they are growing up. So I consider that *machismo* is our own fault, because we, the women feed in this *machismo* in men and should not be this way. (S09)

[Mothers] do everything for the boys and so the boys are spoiled and they think that they have the right to boss the woman around. They also see how dad does the same with mum and they see that every day. (C12)

There seems to be a paradox underlying the relationship between the two major themes of religion and *machismo*. *Machismo* and sexual freedom

for men do not seem to be sanctioned by religious values and ethical parameters, while women's sexual behaviour is strictly sanctioned by moral and ethical standards. As we showed earlier, women in the study still recall the guilt and shame they felt when had their first sexual encounter outside of marriage.

Health and sexuality

The taboo nature of sex within the Latin American culture has resulted in a 'silence' within the family, especially between mother and daughter. Hence women interviewed said that there was little if any communication about sex or sexual health. One of the most common recollections of adolescence for many women was having little or no knowledge about a woman's fertility cycle, menstruation, sexual intercourse or pregnancy. Women described experiencing shock, fear and trauma when they first menstruated and their memories included strong feelings of inadequacy:

the only thing that I remember is that when I was very little, the buckets in the laundry were always covered. She [mother] used to put her things in buckets so that nobody would see them . . . everything was like a taboo, everything was hidden. (C08)

In our countries because our parents are more traditional, they never told me about it [menstruation]. It was a tremendous shock. I have heard at school . . . but they say it in such an unclear way that when the moment came I felt scared and like crying. I didn't know what it was. I never considered that it could happen to me, my mum hadn't told me anything. (S21)

Women recall being ignorant in matters of sex, pregnancy and giving birth. They mentioned myths surrounding these events and the dangers that young women face due to this lack of sexual health knowledge:

I was very ignorant because my mum never talked to us about sex, anything. I even got married and I didn't know how was the honeymoon until a cousin a few weeks before getting married told me what was the honeymoon. Our parents before they didn't tell you anything. (S21)

[I knew] nothing because mother never told us these things, in those days mothers didn't tell anything to their daughters. They used to say that the *cigüeña* [stork] brought the babies or that they went to pick them up down the creek. (S10)

In summary, women from both Chile and El Salvador remember their lives as children, adolescents and even as adults, being framed by family norms and ethical values which were embedded in the Catholic religion. They tell how generation after generation, children have been raised and socialized into the male-female differentiated roles expected in society. Women form their gender roles around staying home, looking after the children and living in an 'inside' world; men on the other hand have been raised to work outside the home, maintain the family economically and live in an 'outside' world.

Life as it is now in Australia

Living in Australia: changes and tensions

The Salvadorean and Chilean women in our study believe that the way they raise their own children must change now that they live in a new country. Most Salvadorean women in our study (especially older women) view their lives in Australia in the light of their own identity and although they are critical of *machismo*, in practice, they view little need for changes in their own roles as wives and mothers. They hold a positive view of their cultural norms and values and consider them – except for *machismo* – positive guidelines for raising their own children. The women explained how the values of the new society have had little impact on the way they see themselves in their roles as women, mothers and wives. Salvadorean women in particular are outright critical of the Australian norms and values and see them as threatening stability in marriages and as a danger for young people due to the excessive freedom they are given:

Here they have the freedom. In our country the child is with us because we work, the parents work and they have to be submissive to what the mother says and one gives them everything. Here children have more freedom. (S04)

Chilean women, in contrast, see Australian values as not only possible for themselves but desirable. However, they explain that expectations for change and attempts to bring about change often create tensions in their lives. Some women experienced situations in which their role and the role of their partners were constantly being compromised.

It's not perfect because, although he cooks and irons his clothes, he cleans up, he does everything but overall I do that little bit more than him . . . I know that he's an exception . . . I see his friends who sometimes laugh at him because he cleans up and cooks . . . in a joking way, but all the same you know it's something behind that . . . His brothers, who were brought up in the same environment, are served by their wives. (C01)

Some of the Chilean women expressed their hopes for the future in terms of not limiting their roles only to being mothers. These women were planning to start or continue studies or were looking for a professional career. They see that this decision may cause tension in their lives due to a potential disharmony with their own and their partner's expectations about their role as mothers and wives:

that's very stressful for many people because do women want to become a mother and housewife or do they want to work in their career? And for some women that's not clear cut, it can be really, really stressful, creating a lot of tension. (C01)

Nevertheless, by having fewer children (one or two) than they would have had in their home country, they hope to develop their own careers. Some women described enjoying the small changes which have occurred, while

others have made more drastic changes, having shifted from being only mothers and wives to career women as well:

Right now I don't want to have any more [children]. I only have one and I've decided not to have any more, Why? . . . because my son is already a little bit older, it's a lot easier for me to get around with him, study and do things. If I have another child I would have to be here at home again. (C05)

Role of religion and machismo in the new country

Religion and *machismo* continue to be interwoven in women's social and personal lives in Australia. The difference between Chilean and Salvadorean women emerges in narratives about the way in which they articulate and reflect on the influence of religion on their sense of self as well as the way in which they evaluate the impact of religion on their lives. While Salvadorean women hold a positive opinion of the experience of being raised in a Catholic family, Chilean women hold a more negative view.

Salvadorean women told stories about how religious values are important for strong personal development. Furthermore, they were eager to transmit these values to their children:

I think that it has helped me because they gave me bases . . . bases or principles, family values, social values. Values in the sense of self-respect . . . there are foundations. (S22)

The positive value attached to marriage and the negative opinions about abortion are two situations that illustrate how Salvadorean women held strong religious values:

They educated me this way that I have to get married, have my children and dedicate my life to my husband and to be faithful. . . . To me marriage was sacred, not to play with . . . and if you get married, marriage is for life. Because there are stages in life when one has to put up with things . . . I tell my son that if I have suffered it's because I swore before the altar that I was going to be faithful, that I was going to help in the good and the bad times . . . and that my children were going to be of only one man. (S25)

When I came to Australia, after a month or three of arriving, I got pregnant . . . I had already five children and it was a surprise when the doctor told me that I was pregnant. The doctor also asked me if I wanted to have an abortion, I told her no. I remember that three times she told me that I could have an abortion and three times I told her no . . . because I don't agree with abortion. Because we still bring our culture, the culture that if you get pregnant you should have your child. (S06)

In contrast, most of the Chilean women view the Catholic values and teachings they were brought up with in a negative way. Women described feeling frustration, fear and powerlessness because of the strict rules with which their parents raised them. Being 'indoctrinated' with a particularly strict set of norms and values, which prescribe demands upon their sexuality and behaviour, remains problematic for these women. Even though

these women have reflected upon these issues and articulate their negative feelings, they remain attached to these norms, values and expectations. Thus, they explain how decisions are strongly influenced by their Catholic upbringing and become moral issues:

Still in my head until today, God emerges, that God they put in my head since I was little. At certain moments it comes back, it comes out from the memory, and it's like contradictions. In all that my mother installed in me, that it was good to have children because us women were made to have children . . . don't ever think of getting pregnant outside marriage . . . God, you see, doesn't allow abortions, so all that's conflict. Even though I don't believe in God there are lots of things that left a mark in what I believe until today. I say that I wouldn't have an abortion, because I haven't had to go through the situation. And I think that the day I have to go through that I'm going to realize if in reality the decision will be because of me or because of what they installed in me. (C05)

Life in the new society: risk and sexual health

Chilean and Salvadorean women all talked about having more knowledge around sexual health now that they are living in Australia. The women in our study all knew about contraception. However, some considered the pill, IUD or surgical interventions dangerous for women's health, believing they could have side effects, cause cancer and/or that they are ineffective. Thus risk of unwanted pregnancy is still present:

there are so many contraceptives. I can't use them because once I had an IUD and I always had infections. I got pregnant having one of those inside. And when they take it out, it was full of thrush, that's why I don't trust those things. I once tried the pill but after a few days I felt as my body was changing, I was always angry and stressed. (S05)

Although women said that their knowledge had improved here in Australia and spoke about PAP smear tests and breast self-examination, mammography and use of condoms, their risks of contracting STDs (including HIV/AIDS) persist. They explain that this is because relationships are still framed within norms and a value system characterized by *machismo* where sexual freedom for single and married men is expected and where for women, such activity is secretive and framed in silence:

men are more active sexually. In Latin people it's more cultural because men get more freedom to awake their sexual drives since they are very young, and the female is more repressed. (S20)

I think that in the Latin societies, for example, it is very common that a man has another relationship apart of his wife. It's almost expected somehow. (C01)

As described earlier, in spite of their 'discourse' against *machismo*, Salvadorean women value the prescribed norms for male/female roles and their self-constructed identity as mothers and wives influences their election to maintain cultural expectations with respect to male behaviour. This is a concern in terms of sexual health. As long as sexual freedom for young

males and acceptance of extra-marital affairs for married men persists, with no 'safer sex' practice, the level of risk of contracting STDs, including HIV/AIDS, remains a concern.

Although Chilean women are trying to change patterns of behaviour, including *machismo* and the sexual freedom enjoyed by single and married men, Chilean women still express concerns about their risks of contracting STDs, including HIV/AIDS, from their partners. As they explained, even though some young women engage in activities in order to change their roles beyond mothers and wives, the patterns of sexual relationships remain the same. As one woman described: 'it's a residual effect'. Thus, although they are living in a different society which has different gender roles expectations, the learned pattern of gender roles remains strong. Tensions and difficulties arise because the maintenance of these gender roles clashes with the hopes and new expectations of gender roles in the new country. Although Chilean women articulate their hopes and desires for change, they at the same time tell how the actual behaviour of their partners within the relationship is still dictated by the patterns of *machismo* and freedom for men, single and married, in sexual matters. Yet for women sex remains an issue of silence and thus changing roles does not at the same time open up opportunities for protection against the risks of STDs.

Discussion

The narratives of Salvadorean and Chilean women living in Melbourne have shown how, in Latin America, growing up as a girl and becoming a woman is shaped by the Catholic beliefs and strongly differentiated gender roles. Thus, from childhood to adolescence and into adulthood these norms and values shape women's perceptions of their roles in society and in their relationships. From the selection of gender appropriate children's toys to the differentiated social behaviour expected in adolescence to the adult roles expected within marriage and parenthood, gender norms and expectations are strongly shaped by cultural and religious values. These gendered ways of being in the world become inscribed on and within their bodies. A woman's sexuality is thus one and at the same time the cultural product of her lived body and the producer of her lived experiences as illustrated through the narratives of gender, culture and self. It has been argued that in Latin America gender norms find their historical roots in the moral and ethical prescriptions of the Catholic tradition and *machismo* ideology. Chilean and Salvadorean women talked about how these values remain strongly embedded in family life. Women from both countries agree that *machismo* has to be eliminated, and they speak of their efforts *not* to transmit it to their own children in Australia. However, it remains a strong construct shaping male and female gender expectations.

Differences between Chilean and Salvadorean women were found mainly in the expectations for change in their lives in Australia. While

Chilean women tell of wanting to challenge these cultural norms and values, Salvadorean women find their culture's norms important for reinforcing their own self-identity as women, mothers and wives. In part this is due to their experiences of social exclusion in Australia and having few alternative identities to build.

Life for Chilean women is different however. Through earlier experiences of social change in their own country, Chilean women have been involved in education and paid work outside the home. Chileans therefore see changes as not only desirable but possible. Chilean women argue that in Australia gender roles can be changed and they are determined to take concrete steps in order to ensure such changes. Despite this commitment to change, tensions are voiced among the Chilean women. Although these women think that Australia is the appropriate place to implement these changes, they find it difficult to negotiate with their partners changes in their own roles as women, mothers and wives. Chilean women's partners also find it difficult to adjust to changes occurring in the new social setting.

For many Salvadorean women the transition to a new country and new cultures does not necessarily entail changes in their values. Indeed these women tell of how important these values are for maintaining cultural and individual identity having had less personal exposure to social changes prior to migration. For many, their identity is tied up with the gender norms of 'home', which they value positively. Many of these women are critical and fearful of Australian society and of the less restrictive social norms for young people. Salvadorean women also spoke of the stress that changes in gender roles in Australia create in relation to their partners, who also find it difficult to adjust to the freedom given to women in the new society.

For both groups, risk for sexual health is shaped very much by expectations regarding sexuality for men and women as expressed in *machismo*. Thus, sexual freedom and the accepted behaviour of men, both single and married, entails risk for women. Behind this risk to women lies the 'culture of silence' where sexuality is taboo and where *machismo* reinforces men's freedom to engage in risky sexual behaviour.

Conclusion and future directions

Our study suggests that Chilean and Salvadorean women's sexuality is very much shaped by their socialization in a 'culture of silence'. *Machismo* and Catholicism have been identified as core factors influencing the lives of Latin American women. The narratives of women in our study with respect to sexuality, gender relations and cultural norms and values raise concerns about sexual health. As long as *machismo* ideology and attitudes towards sexual freedom for men but not for women persist, issues of risk and sexual health for women (and men) will remain relevant. Many health education and prevention programmes and health promotion campaigns are conducted with the aim of educating, training and changing women's knowledge, beliefs

and attitudes towards sexual health with little attention given to the factors that shape male sexuality. These programmes run the risk of not only being ineffective but as being seen as threats to a community's social and cultural identity.

The major issue to emerge from both the narratives of Chilean and Salvadorean women is that programmes that are designed to reduce the risk of STDs must explicitly acknowledge the tensions relating to gender norms and expectations within the Latin American communities. Programmes need to deal explicitly with these tensions which arise from changing community values. Programmes that do not include men may not only be ineffective, but may serve to reinforce women's risks of STDs.

There are a few examples of programmes in Chile that show the paradoxical situations in which the 'empowerment of women'⁴ is the goal, however by not including men, many of these programmes find difficulties in achieving their goals. And, programmes which succeed in encouraging women to take control of their health, have faced the painful consequences of women dealing with broken relationships as a result of empowerment. Some of the difficulties that women have faced include decisions to divorce against their own religious convictions and leaving their children without a father figure and traditional family setting. This in turn has threatened their economic security and also their social status and prestige they enjoyed as married women. This is not to say that the status quo should remain, only that programmes for change must address the unanticipated and often negative consequences of women's empowerment vis-a-vis their male partners. When it comes to sexuality and gender, for many women, family is an important part of their identity which is strongly enmeshed within the family network. To be estranged from this network can be devastating (Dixon-Mueller, 1992).

In a study similar to ours in Australia, a team of Chilean researchers investigated the cultural patterns, values and norms that regulate the social, gender and sexual relations between men and women in contemporary Chile (Sharim et al., 1995). This study concluded that women and men acknowledged that, in terms of sexuality, there are restrictions, lack of knowledge and a more passive role for the women. There are also myths and lack of information among men but their socialization does not restrict them, on the contrary it encourages them, to an active sexual life as a sign of their virility. Negotiation in areas of sex is charged with myths and taboos which generate internal conflict for many women. In this study it is also argued that although new models of behaviour for men and women are appearing due to global contacts and modernization in Latin America, these new patterns are incorporated as an 'addition' to the old model, not as a substitution or invalidation of the old one. These Chilean researchers have identified that sexual intercourse still takes place within a *machista* model and within unequal gender relations which are only slowly changing. These modifications generate conflicts and contradictions which are

not resolved. These conflicts are generally not verbalized and a 'culture of silence', which has historically characterized sexuality as taboo, now permeates new emerging conflicts and contradictions (Sharim et al., 1995).

Acknowledging the need for programmes which allow women to take their sexuality and health in their own hands, Elizabeth Guerrero, a Chilean sociologist argues that we cannot limit ourselves to working only with women (Guerrero, 1997). We should look for strategies which are based on women's experiences, but also include the participation of men in preventive and educative actions. Working with couples is necessary because sexuality is lived in relation to one another. If we do not consider this fact, Guerrero writes: 'we charge women even more with the exclusive responsibility in the area of sex, as much as we have already done in the domestic area' (1997: 109, our translation).

We would argue that as in Chile, this dual strategy focusing on both men and women is critical for the promotion of sexual health in Australia. If we continue to exclude men, our women's health approaches may be ineffective at best and at worst may actually further disempower some communities of women. A quotation from a Chilean social researcher sums up our own concerns:

It is useless to say that the remedy for the women's maladies may come from answers to a series of claims with regards to them only. It is the whole groups of needs of men and women, their bodies, themselves, their ideas, their relationships and their jobs what is at stake, and it is new forms and propositions about humans living together which should emerge. (Rodó, 1987: 40, our translation)

Workshops with Latin American women we have carried out in Melbourne, Australia, have reinforced the need for different strategies which bring men into the picture. What are needed are approaches which encourage silence to be broken. There is a need for programmes where the voices of both men and women engage with the challenges of embodied sexualities but that at the same time maintain the cultural integrity of both the individuals and the communities in which they make their lives.

Notes

1. This model of dissociation does not have to be based on the Judeo-Christian tradition only. Gogna et al. (1997) have argued that in many different cultural contexts there is a dominant narrative which tends to the division of the female image: the good/decent/of home vis-a-vis the bad/promiscuous street woman. For further references see Dixon-Muller (1993) and Laumann et al. (1994).
2. The results reported in this article are drawn from a larger ethnographic study which investigated the cultural constructions of health and sexuality among women of Spanish speaking background living in Melbourne, Australia.
3. Chilean interviews are coded C01 to C25; Salvadorean interviews are coded from S01 to S25.
4. Note that the word 'empowerment' does not have a direct translation in Spanish. Scholars in Chile have translated it as: *generación de poder y*

desarrollo de la autonomía y capacidades' (generation of power and development of autonomy and capacities). This may exemplify the cultural construction of the word 'empowerment' in English, which does not exist in Spanish (Gysling, 1993: 11).

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