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Ambivalence in Controlling Births in the Favelas of Rio de Janeiro

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Summary
In Brazil, it has become essential to control the flow of populations living and moving between settlements which are considered as priority areas, in terms of urban security and development. In this context, birth control in favelas represents a major challenge to public authorities. Thus, many health care centres have been set up in recent years to support effective family planning for all. As a result, women living in these areas are influenced, more than others, by the representations of the “modern” woman, which requires them to be both “rational” and independent, as well as maternal and affectionate. Where desiring to have a child is becoming a moral sin in these areas, as it very often occurs in the absence of rational planning, this article explores the way in which women subjectify the unexpected arrival of a child in a social and professional world where more self-control, in both economic and sexual terms, is being advocated.

Key words: planning, desire to have a child, ambivalence, favelas.

Introduction
Many informal settlements in Brazil are the target of major restructuring projects. Many favelas in the south of Rio de Janeiro are the subject of a town planning program that intends to attract major investments (Gaffney, 2013). In this context, it has become primordial for big investors and public authorities to control, in an increasingly rigorous manner, the flow of populations living and transiting between settlements, which are considered as priority areas in terms of security and urban development (Leite, 2012). In the media, the idea according to which birth control in informal settlements would lead to a significant reduction in poverty and violence is widely spread (Eustaquio, 2006). Sérgio Cabral, the Governor of the State of Rio de Janeiro from 2007 to 2014, declared that non-
controlled births in the favelas are linked directly to the very high rate of violence\(^1\). Yet, according to statistics, there has been a net drop in the fertility rate of the popular strata for many years already\(^2\). Despite the absence of explicit public planning programmes, a significant decrease in the birth rate has been taking place over several decades (Bozon, 2005). Some researchers explain this drop with a higher schooling rate during the last decades, a gradual increase in access to jobs for women (Merrick, Berquó, 1983), and an increasingly larger market in terms of health services (Faria, 1989). For a few years already, public policies have been increasingly involved in family planning programmes through community health care centres (Ventura, 2011). These systems, whether public or private, are part of a wider “bio-political” framework (Dos Santos, 2013). According to Michel Foucault, “power over life” became focused as early as the 18th century:

“[…] on the body of the species, on the body underlain by the mechanics of the living and serving as medium for biological processes: proliferation, births and deaths, health levels […], their being taken care of by operating an entire series of interventions and regulating controls: the “biopolitics of the population” (Foucault, 1976).

These interventions, which are carried out through governmental technology, produce subjectivities corresponding to types of individuality that depend as much on historical moments as on power structures. In the introduction of his book entitled *Histoire de la sexualité, II*, Michel Foucault distinguishes the behavioural code from forms of subjectification. The former is made up of prescribed rules and moral values, the latter refer to the relationship between individuals and the code, and to the way in which they relate to it, with greater or lesser submission or resistance. Today, family planning represents an essential moral value around which created and imposed subjectivities are being developed (Dos Santos, 2013). The control imperative is shared by a large section of the middle and upper classes, and is constantly relayed by the media, thereby producing a powerful social discourse to which all citizens, whether or not from privileged


\(^2\) In 1984 in Brazil still, a woman with an income below the minimum wage had 5.9 children on average, while a woman with the equivalent of a minimum of five salaries or more had 2.9 children on average (Garcia, 2000). Fifteen years later, in 2000, a woman who lived in a poor suburb of Rio de Janeiro only had 2.6 children, while a woman living in a residential suburb had 1.7 children on average (Nogueira, 2011). In 2010, across all socioeconomic classes, the national fertility rate reached only 1.8 children per woman, while it was two children per woman in France (IBGE, 2010).
socioeconomic classes, must submit. As such, controlling informal settlements, far from only obeying explicit authoritarian principles, is a fortiori acquired through what are supposed to be democratic and emancipating discursive forms. In a social and professional world that seems to be increasingly promoting economic as well as sexual self-control (Lavergne, 2012), can the arrival of an unplanned child be envisaged, reproached or even stopped? How do women in the favelas subjectify these “accidents”? This article will try to understand the links between the planning imperative and efficient unplanned birth control in two favelas of Rio de Janeiro, by relying on the teachings of Michel Foucault and on psychoanalysis. The article is based on around twenty interviews with mothers, and around twenty interviews with childless women, conducted in the favelas of Babilonia and Viradoura. The analysis will be carried out using a qualitative method relying on the “Grounded Theory” (Glaser, 2012) which consists of an inductive approach making it possible to elaborate conceptual elements from field data.

Planning Births amid Fears for Children’s Future

The media in Brazil are continually exposing – in a dramatic way – images conveying compassion and horror. These violent images constantly show the youth in favelas either as an immediate threat to the safety and values of Brazilian society, or as victims subjected to daily acts of violence (abandonment, paedophilia, drug trafficking, prostitution, parricide, matricide, rape, etc.). The media representations broadcast in every regions of the country and across social classes, have a direct impact on citizens’ subjectification (Batista, 2003). Children occupy here a specific place: as supposedly fragile, dependent and easily influenced beings, they are at the centre of a social, educational and medical system that intends to assess and anticipate their future from a very early age already (Lockman, 2001). In addition, this form of control is associated with security measures when children come from favelas (Lannes-Fernandes, 2012). They need protection against the many forms of assault they could be subjected to, and need guidance towards the “right” path to

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3The women interviewed were between 18 and 40 years old. Mothers had their first child between the age of 17 and 40 years old. As such, in this study, we are not dealing with an “adolescent” problematics. All women interviewed live in fragile socioeconomic conditions, earning at best the minimum wage, which corresponds to around 240 Euros per month.
prevent them from becoming the perpetrators of similar acts of violence (Cechetto, 2013). As such, the testimony of many women put forward the importance of education and control, when it comes to their child’s future. Eva, mother of two, explains:

“A child is a lot of work. Today, not so much because of the financial situation, but because of education in particular. Before, we used to think: no children, they cost too much! ... Today, girls are already pregnant when they are 12 years old. Before, children used to play at that age. I can certainly say that I was a child. Today, it’s no longer like that... I don’t know how my son and my daughter are going to be when they reach 13. We try to guide them towards the best path possible... And I ask myself: “Is my son going to end up in jail, will he take drugs?” That’s when I watch television and I pray: Dear God, don’t let all this happen to my children!”

And Andrea, also a mother of two, adds:

“I’m scared someone is going to hurt him. Many children disappear... many disappear. I’m very scared of that happening! I use my cell phone as a radar to find him. Every hour, when he is out, he must call me. When he comes out of school: “I’m walking out of school now”. He must call me! Because I must know where he is! I struggle a lot for him to be able to attend that school. I spend a lot for that school. Just for transport, I spend 200 Reais every month. I don’t want it to be for nothing. I want him to be a successful professional!”

When we ask mothers how they envisage their children’s future, many reply that they fear that their sons will become drug traffickers and their daughters will fall pregnant at a young age; they say this even before envisaging a less stressful or even promising future for their children. It is very often more difficult for them to imagine an optimistic future for their children than to depict a dark one. Where optimistic daydreaming is very often reduced to signifiers with little symbolic substance, because they refer to ideals that have been stereotyped by the media and that, very often, bear no relation to personal family and environmental history (such as the medical or legal profession), it appears diverted very rapidly by more harrowing and deadly ideas. As a sign of massive collective condensation, the signifiers ‘drug trafficker’ and ‘adolescent mother’ have put their mark on the imagination of many mothers vis-à-vis their “vulnerable” and “easily influenced” children, leaving them with less opportunities to invent more flexible identifications. In this

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4 200 Reais equate to about 65 Euros.
5 Yet, most women interviewed are not directly or indirectly involved in drug trafficking, nor did they have their first child during adolescence.
context, the victim/torturer representation seemingly intended for the youth in favelas, was a subject of great fear among the many women interviewed about the future of their children. They often explain that this fear results in their being very vigilant and demanding as far as family planning is concerned. They declare that they want to control their lives in an increasingly anticipated manner, which firstly involves controlling reproduction. Consequently, children take a particularly important place for them: before their family and professional future and that of their child can be planned, their reproductive will becomes a major challenge. But what about their planning expectations in real life: Is the planning issue automatically linked to that of desiring to have a child?

**Unplanned Births among Women in Favelas**

We can observe a net difference in the way researchers question the issue of wanting a child depending on the socioeconomic class of interviewees. On the one hand, current debates on the issue of desiring to have a child, in relation to technological means and original contemporary subjectifications (Gaille, 2011), seem to be addressed above all to the women of the economically well-off social classes. On the other, various studies explain the desire for a child among women living in informal settlements – younger women in particular – by the fact that being a mother would give them social status, since they cannot claim such a status through a fulfilling job (Garcia, 2000; Letablier, 2012). As such, explanations as regards wanting a child among the poor are, in a simplistic way, limited to their socioeconomic constraints and their lack of socio-professional plan, while they are more marked out and varied among the well-off. However, understanding the desire for a child from a psychodynamic point of view, leads us to understand that this conscious plan is riddled with meanings emanating from unconscious desire (Abdel-Baki, 2004). The latter is not part of any specific socio-economic class but is peculiar to all human beings. Thereby, a conscious plan does not determine on its own the birth of a child that can be completely unexpected or fail despite a faultless physiological system. A surprise effect (e.g. when one forgets to use the pill), can be underlain by an expression of desire. Most women interviewed declare that unplanned maternity must be avoided, in

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6The majority of the mothers interviewed were on the pill, but forgot to take it just before falling pregnant.
that it makes one’s family and love life more precarious, access to jobs more difficult as well as fragile, and the construction of a future for children more uncertain. Despite the fact that they are fully aware of the need to plan, reinforced by the fear of an accidental birth in terms of additional socioeconomic difficulties, most of the mothers interviewed declared that their pregnancy was unexpected (Coelho, 2012). Yet, unplanned pregnancies do not necessarily mean that they were not desired. Andrea, mother of three, testifies in this regard:

“None of my three pregnancies was planned. I was very anxious when I learned about the first one (she sighs) [...] I was 17 years old, very anxious, jobless; how can one bring up a child if one does not have a job? (She keeps silent)... And after that I became pregnant twice more, these pregnancies were not wanted either... they were accidents; I was not using the pill or condoms as protection... I knew there was that risk (she laughs), but sometimes I forgot about it, and I was not on the pill [...] and when I saw my son immediately after the delivery, well, it was a very beautiful sensation, very beautiful... it was very beautiful. The same for the three of them [...] they are on Earth and God is in Heaven, as it should be!”

Many interviewed mothers remember feeling fear and despair when they discovered their pregnancy, all the more since the majority of them left the future father either during the pregnancy, or after the delivery. Indeed, very few of the women interviewed still live with the father of the first child, and many of them either live without a husband, or live with a companion who is not the father of the children, or who is the father of only one of the children. Nevertheless, the first shock of discovering a pregnancy is often transformed – if not during the pregnancy, after delivery at the latest – into utter delight. As such, very few of the women interviewed declared that a child was not wanted after birth. It must be pointed out that the community health care centres in the two favelas systematically offer contraceptive methods to women (given orally or by injection). All the women interviewed

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1 Coelho’s study shows that the prevalence of unplanned births is more significant among women with low incomes.

2 Within the framework of our doctoral research, unplanned births take place among women who testify to a more stable family and social structure, as much as among women with more “chaotic” family histories. Where “the unexpected” is an experience shared by many interviewees, it is not automatically linked to family instability. Non-planning is a characteristic shared by many of the women interviewed, and is in no way restricted to women who are made vulnerable and destabilised the most.
confirm that they were aware of and had free access to contraceptive means. Despite the resonance of the need for control in their discourse, which often describes unplanned births in terms of accidents and foolishness, many women end up bringing up, more or less clearly, the fact that some unconscious desire of theirs was involved in what happened to them. In effect, desiring to have a child seems to have escaped their will to control, as imposed by the dominant social discourse. Among the many women interviewed, we find an important gap between the fact that they insist on matching the so-called “modern” woman, who has to control herself constantly so as to fulfil her planned career, and their uncontrolled actions that seem to meet a different logic.

Maternal Ambivalence

By relying on Lacan’s teachings, we find that the birth of a child, for some of the women interviewed, meets a more or less unconscious desire to part more – through their child – from their own mother. Amanda, who had her first child at 19, illustrates this when she says:

“I started wanting a child when I was adolescent, for I was often locked up. My mother did not let me go out. The first desire I had when I was adolescent, as a woman, was to be a mother... so as to be able to free myself from being ordered around. The first thing that came to mind was to make love and fall pregnant in order to be free. Getting out of the house! There was only my son and I... that’s a delightful desire, a very good desire!”

Rosa, as to her, reveals her desire for separation more implicitly:

“My two first pregnancies were not planned... When I saw my son for the first time, I was very moved. I cried when I saw him coming out of me. I had to have a Caesarean, just like when I had my daughter. When I gave birth to her, I was sleeping and when I woke up, I first saw my mother and my aunt. When I gave birth to my son, it was not like that. I saw him straight away. When I was brought into the room where they’d left him, I fainted. I was only able to see him the following day. I got out of bed all on my own; I bathed all on my own. All on my own! I no longer depended on anyone to get out of bed. Not like after the first delivery when my mother had to help me... when you’re a mother, you have more experience in relation to the world and outside. That’s something I didn’t have before. It was very easy for me. I always had everything. My mother gave me everything I wanted. If I said to her: “I want that!””, then she replied “Then take it!” I didn’t have to work to get
This separation attempt appears successful but failed at the same time: successful in that, by having one child, these women rise to the rank of mother and are no longer just daughters to their own mothers. As a result, some women say that they had more freedom once their own mothers became grandmothers, the latter focusing more on their grandchildren than their daughters; failed in that they must often work outside school hours, thereby ending up very often asking their mother to help look after her children. They often continue to live with their mother on whom they depend materially in many instances. Sandra, who has a boy, shares her difficulties:

“I no longer want children because one must have a stable job and a house! I don’t have a job. It’s difficult to be a mother... not because of the child but because one has to work. Otherwise one remains dependent on the father and the mother... that’s not good! With one child, it’s still ok. But with two, it’s not possible! But I don’t know, I can’t anticipate... it’s different not to live at one’s mothers’ place anymore. She no longer orders me around, and I can do what I want. (She raises her voice) I wake up when I want.”

This ambivalent relationship of dependency and desire to part, vis-à-vis the mother, seems to be carried on from one generation to the next (Thurler, 2009). This transgenerational repetition is characterised by an important maternal presence, and a frequent paternal absence. The discourse held by mothers and grandmothers concerning unplanned pregnancies, is often riddled with ambiguous meanings: on the one hand, it disapproves of the birth of an unplanned child; on the other, according to many testimonies, it leaves a door open to welcome the new arrival and accept it, even by expressing the kind of joy that leaves little doubt as to the unconscious desire inhabiting the future mother as well as grandmother. Nonetheless, it is important to highlight the significant abortion rate in Brazil, which is higher than that found in France. Children seem to be par excellence an ambivalent subject of life and death: it is an idealised subject in that it refers to innocence and tenderness, and at the same time is a subject that is feared and uncontrollable, likely

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9 According to the authoress, this repetition could be explained by the former slavery system.
10 Considering that abortion is illegal in Brazil, we can only estimate the abortion rate that seems particularly high: according to a study conducted by the State University of Rio de Janeiro, the abortion rate in 2005 was in the region of 2,07 for every 100 women aged 15 to 49. In France, it was 1,4 for every 100 women that same year.
to disobey and follow dangerous paths. They are “privileged children” on the one hand, when taking into account the significant sums of money spent by interviewed mothers on toys and leisure activities. They are also “parasitic children” who, because of their never fully controllable instinctual lives (Coradini, 2012), can annoy or even threaten many adults. They are also “working children” or even “slave children”, for despite the significant efforts carried out by the Brazilian government for many years already in fighting against child labour, many children are still being forced to work today (IBGE, 2010). Finally, children in Brazil are also sometimes commercial goods, when taking into account trafficking in children within and across national borders (Soares, 2009). Because of particularly strained socioeconomic relations, this ambivalence seems particularly exacerbated in the favelas located in the south of the city of Rio de Janeiro (Ost, 2013). The complexity underlying a mother’s fear of giving birth to an unplanned child and, in all likelihood, of putting that child to death through drug trafficking and violence, as found in their discourse, is significant in many respects. Indeed, in precarious urban areas, it could reveal an important problematic concerning the dominant social discourse which, by advocating family planning, actually reinforces the feeling of unpredictability, which would paradoxically lead to predictable deadly imagination. It must be pointed out that the majority of interviewed women do not have direct experience with drug trafficking and other forms of organised crime. As such, according to their testimonies, such fears are not really based on their own experience but, rather, on the discourse found in the media and on their imagination.

**Questioning the Control Imperative**

Finding a gap between the actions and discourse of interviewed mothers, we can assert that when a subject appropriates that powerful, omnipresent and adequate social discourse, all the more since socioeconomic conditions require it, this discourse does not fully determine that subject’s actions. On the contrary, it can provoke conflicting effects. The testimony of many mothers seems to indicate that the more or less unconscious desire for children outweighs by far any logic underlying the conscious building of a life plan. It is not rare to find that those with a solid and well-built life plan discover their pregnancy completely unexpectedly. The expressions “accident” and “mistake”, describing available
subjectifications in a planning logic, soon become barely relevant in understanding the unconscious logic seemingly at work during conception. Moreover, the non-negligible abortion rate cannot make these expressions more relevant; it just shows that badly thought-out social, health and public education policies, lay many women – the younger ones in particular – open to significant socioeconomic difficulties. Not only is their socioeconomic situation fragile, but the fact that abortion is prohibited further provokes major medical complications, among women living in favelas, due to dangerous abortion means and conditions (Ramos, 1991). Accounting for far more than a conscious decision fulfilling difficult socioeconomic conditions, abortion can reveal, as much as unplanned pregnancies do, a more or less uncontrollable action that can bring women to develop an ambivalent relationship with their own mother, among other things. Desiring to have a child, which first of all implies identification for the mother (Zalcberg, 2003) is, for some of the women interviewed, linked to the unconscious phantasy to see the father dead, he who very often distinguished himself more by his absence than his presence. The future mother often runs the risk of reproducing, unknowingly, this scenario with the future father of her child, letting him replace her own father who was also absent (Pommier, 2013). Vania, who has a daughter, testifies to this:

“The pregnancy was not planned, we had already parted, and it happened... being a mother transformed me completely... being a mother is definitely not a tea party (she laughs). I never wanted to have children. I never had that feeling in me. I don’t have that maternal thing in me. It’s something I acquired afterwards, but I didn’t have it before... Her childhood will be a bit like mine because of her father’s absence. My father was also absent. He left when I was two years old. I didn’t have much contact with my father. And neither does my daughter with hers. He spends a bit of time with her then leaves straight away. It was the same with my father. I saw very little of him. We are no longer in contact today... I lost the desire to be in a relationship and in love. I don’t feel anything anymore, nothing, nothing! It’s because of her father. I’ve been very disappointed by him... [...] I think I wanted to have a child. I think so. More so because I was no longer with her father. All we did was to sleep together. And that’s when I felt pregnant. We were no longer together.”

Almost all the women interviewed, whether or not they are mothers, describe the mother figure as a strong identity. For most, only a woman who has had a child can consider herself “fulfilled”. In addition to this identity imperative which has always existed in every
society, one finds an increasing number of other more or less liberating subjectivities. The dominant media discourse, besides the reproduction control imperative, creates other imperatives peculiar to the way women’s bodies are built (Vione Schwengber, 2007). The many ideals liking the loving mother to the successful and autonomous professional woman, and to the sensual and sexual woman, which is set out in the media as being indispensable to any happy and fulfilled life, seems completely out of reach to the women interviewed. We then find that their identities are at first described through the negative facet of these imposed ideals, before being described in terms of more unique and nuanced subjectivities. Leila explains:

“I would have liked not to have a child. I would have liked to get married and have a stable set-up, to know the right person so as to be able to tell myself: “Everything is ok!”, to have a means of support. To have a child, everything must be planned.”

Valeria, who had her first child at the age of 20, added:

“My daughter, who is already 14 years old, already has a lover. And I tell her not to make the same mistake as me, which is to fall pregnant young. When you’re young, you need to study, not to fall pregnant! ... I don’t regret having given birth to her, but it was a mistake. I couldn’t study anymore, nothing! Everything changed.”

These negative utterances, which relate to a mother’s fear of seeing her own daughter becoming a mother at a young age, paradoxically create consistent identities. Indeed, mothers repeating “I don’t want her to fall pregnant while she is young and has not first succeeded in life!” can result, concerning their daughters and without the latter’s knowledge, in a solid construction based on this negative utterance, leading daughters to execute the contrary of what their mothers order them to do. These negative constructions, uttered by many women in response to the dominant discourse about having control over one’s professional and family path, cannot be only understood in terms of this rather damaging perspective. Indeed, they reveal resisting forms of subjectification. As such, in the unplanned pregnancy context, women declaring: “today one must plan everything, but I did fall pregnant unexpectedly”, while relying on the dominant planning discourse, indicate that they evaded it more or less unconsciously. As already mentioned, the testimony of many women depicts great ambivalence between explicit disapproval towards unplanned births, and the more or less assumed legitimacy of failed planning.
Such ambivalence makes it possible to fully illustrate the limitations of the effectiveness which any sustained and popularised discourse must come against. It testifies to the multiplicity of possible identities within popular classes, oscillating between social discourses widely relayed by the media, and discourses peculiar to unique individual and collective histories (Vaitsman, 1997).

**Mastering Control**

The “loss of control”, characteristic of a mother’s discourse concerning unplanned pregnancies, is in sharp contrast with the discourse of women without children which is characterised by “upholding control”. Women without children consider themselves as “successful” women more often than those with, in that they engage more frequently in worthwhile professional training. They are very proud of the fact that they knew how to control themselves. From a social point of view, according to them, people in their suburb today give more weight to a “successful” woman, even if she does not have a child, than to a mother with no professional prospect. Some testimonies point out that when women have several children, young mothers in particular, it is associated with the image of the woman with no sexual restraint, or even the prostitute. Julia, who has a daughter, explains: “It is difficult for a woman to respect herself here. She does a lot of silly things. That’s all! She no longer sees worth in herself. For some women in any case. And because of these women, the other women pay the price. Women who sleep with men, who wear very short skirts. Because of them, the others get the rap for it. Those who are depraved, who say stupid things in the street, who insult everybody... It’s not because one is a mother that one’s standing is increased. The mother must improve herself, but many don’t. A mother who prostitutes herself more or less; who spends an hour with one man and the next hour with another. There are many women like that. And the children don’t know who their mothers’ lovers are... They only pay attention when they are older. The only thing that counts at that age is the street. They have very little responsibility.”

It seems that a woman without a child, especially when she is of a certain age, projects the image of a confidante worthy of trust and respect, for unlike a mother with many children, she supposedly knew how to control herself. Sylvia, who has two children, explains: “Here in the suburb, people judge others’ behaviour above all. If a girl works, goes to school, stays at home... then she is good enough to marry your own son. She is a proper girl. But a girl who
hangs about the streets, who does not want to go to school, who does not behave properly, she is perceived as nothing. And when she’ll have a child, people will tell her: Watch out for your child! The mother does not watch out, she leaves her child all alone. That’s what people think here, all of them! Women here... a woman who does not have children at 40, but who behaves properly, is good for marriage; and people like to invite women like that at parties.”

And this, despite the fact that the great majority of women interviewed, whether or not they are mothers, confirm that one of the main ideals is maternity. For women without children, constant self-control still bring fears that romantic or sexual excitement will provoke an unplanned birth, even though they protect themselves with contraceptives. As such, today, any woman seems compelled to use her own body as an “organ of reproductive and sexual control”; whereas in the past, her body seemed more controlled, or at least more explicitly, by external forces (family, church, circle)\(^\text{11}\). Self-control brings some women to have no children at all, for unlike women from well-off socioeconomic environments, they must very often choose, more radically, between a professional career and a child. The great majority tell us about their desire for a child, which makes the will to control, that cannot tolerate any (unconscious) mistake, all the more demanding. Even if all of them use contraceptives, many say they fear that pregnancy will happen inadvertently. Some declare that they “forget” to take the pill from time to time. In this case, this concerns less the absence of contraceptive standard (Bajos, 2002) than a more or less unconscious act of pregnancy risk-taking. All the women interviewed have assimilated planning imperatives perfectly. And being aware that an unplanned birth indubitably provokes major difficulties, or can even be incompatible with a demanding professional activity, is undoubtedly found more among women residing in favelas than among women from the middle or upper classes. For unlike more well-off women, they must very often interrupt their schooling or vocational training, and devote themselves mainly to their child’s education, while working in a job which offers little reward and is badly remunerated (Bozon, 2005). Generally speaking, they tell us about the growing need for

\(^{11}\)While it is indisputable that religion has had a lot of weight in Brazil up to date, it must be put into perspective through the evolution of social behaviours and religious practices that are in constant movement. Despite the many ethical discourses advocating marriage before the birth of a child, the great majority of Brazilian women have had their first sexual encounter way before they married, and a significant number of women living in favelas are not married. This does not prevent them in any way from having regular sexual relations, often with different partners, nor from having children.
planning the arrival of a child, by including it in a wider life project. Emma who, at 21 does not have children, elaborates:

"I want to have a child when I finish my studies. One must do everything right before having a child. I want stability and not do like the others who have children at 13... I was brought up as follows: first get a job then your own house, and then find a decent man to marry him before having a child with him. One must have a life before that!"

One can wonder whether observing this rigorous planning – first a job, then a house followed by a husband and only then a child – which is shared by many of the women interviewed, will allow Emma to have a child one day, because the high property prices found in Rio de Janeiro (Denis, 2013), and the increasingly restrictive requirements in the professional world (Raza, 2013), make this project for women living in favelas decreasingly feasible. Whereas many women from the middle class enter the maternity process much later in life, due to the fact that they give priority to their career, the question for a woman who resides in a favela and who has professional requirements equivalent to theirs, must be posed differently: would her desire for maternity, should it exist, still be reasonable?

**Conclusion**

Controlling urban and human life is moving forward very fast in areas where economic investors spent very little time before. Where the issue of family planning has been relegated to the private and religious domains over many decades, the public authorities are today increasingly engaged in generalised planning programmes (Eustaquio, 2006). In this regard, the favelas of Rio de Janeiro seem exemplary. Today they represent a privileged ground for real estate and economic speculation, and for any potential human control (Gomes, 2008). Controlling coveted spaces does not only go through the use of authoritarian measures\(^\text{12}\), but also discursive systems such as the discourse on planning, thereby echoing control over life. This dominant discourse advocates the autonomy and emancipation of women living in favelas, requiring them to control their own reproduction. This seems to have very different effects on women. Some follow this imperative, fearing that they might completely lose control at any time. Others seem to be “under control”, to

\(^{12}\)In this regard we can mention the establishment of Police Pacification Units (UPP) since 2008 in many of the favelas of Rio de Janeiro, their primary mission being to “protect” residents by taking on drug traffickers.
such an extent that they run the risk of never having a child even though they want one. Others still give up control even before managing to abide by it, responding to control codes negatively. As such, the imperative of planning reproduction in favelas shows a particularly insidious type of violence, in that the discourse on planning establishes a quasi-natural equivalence between non-planning and non-desire. A woman could then only have desired her child if she had known how to control the child’s arrival. Whereas women from the middle and upper classes, who are supposed to desire to have a child, are called upon by the media (Dimenstein, 2003) to produce more children\textsuperscript{13}, women living in the favelas, who are enjoined to control their desire for a child depending on socioeconomic viability, do not in most cases meet the criteria required for its authorisation. As such, discovering a pregnancy can only be expressed through feelings of surprise for what went uncontrolled, legitimate feelings to be sure as far as the imposed self-control system is concerned, but that actually make the subjectification of desire more problematic. If wanting a child is assumed among most women, if not during the pregnancy, then after delivery at the latest, its unplanned nature very often leads to major feelings of guilt and failure. The planning ethic meets here the divine ethic that was supposed to regulate wanting a child in the past\textsuperscript{14}. The expressions “accident” and “maternal sacrifice”, which are frequently used by interviewed mothers in the same context, testify here to an exacerbated maternal ambivalence: between life and death, the child occupies a very paradoxical position. Fearing that their daughter gives birth suddenly and unexpectedly, is often juxtaposed with the fear that their children kill themselves in a way that was to be expected (e.g. by entering the drug trafficking world), the child awakes a particularly intense fear of life and death in the psychic economy of many women (Leclerc, 1975). Despite the fact that the control imperative is actually undermined by many women through unplanned births, which in this case resonates directly with their unconscious desire, it results nonetheless in major fears and ambivalences concerning their child. As such, the social discourse advocating self-control weakens the desire for children of women living in favelas, more than that of women living in the residential suburbs of Rio

\textsuperscript{13}The fertility rate is lower for women in privileged social classes (IBGE, 2010).

\textsuperscript{14}Of note is the fact that some women deny this new ethic by justifying their unplanned pregnancy as divine planning (“It’s God’s plan!”), without them actually practicing religion.
de Janeiro. For unlike women from the middle and upper classes, they must obey two discourses at the same time. On the one hand, the explicitly authoritarian control imperative, through many social, police and criminal acts of violence, and the lack of financial and security stability means that many women who want a child cannot predict or plan a pregnancy. On the other, the self-control imperative implicitly related to the superego makes their desiring subjectification decreasingly acceptable and legitimate, as soon as unplanned births are concerned. Consequently, all the seemingly benevolent and liberating planning discourse does, is to reinforce the gap which is already difficult to bridge between the privileged and underprivileged social classes. Despite this, the women who live in favelas do not seem to be resisting the assertion of their desire, however problematic and ambivalent it may be.

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