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**Inhabiting uncertain boundaries.
Bodies and selves in the conjunctures of unwed motherhood
in Morocco**

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Note on transliteration and transcription

The words and expressions in Moroccan dialect included in this text stem from dialogues with people with diverse regional backgrounds living (mostly) in Casablanca. However, Moroccan *darija* is itself a blend of linguistic influences and can be quite different from standard Arabic. The transcription and transliteration method that I have used aims to convey at least a gist – if not the ‘flavour’ – of *darija*. Thus, I have drawn upon the transliteration system outlined by the *International Journal of Middle Eastern Studies* (IJMES) for Standard Arabic by simplifying it, since I have mostly transcribed Moroccan Arabic. Some of the terms employed in this dialect may not have a precise written form and may not derive from Arabic.

I have rendered the consonants not found in English as follows:

‘ is a voiced pharyngeal fricative, it corresponds to the letter ‘ayn in Classical Arabic

’ is a glottal stop, the Arabic letter *hamza*

gh (for the letter *ghayn*) is a voiced uvular fricative, similar to the French “r”

kh (for the letter *kha*) is a voiceless uvular fricative, corresponding to the German “ch” or to the Spanish “j”

The emphatic consonants are shown with diacritics: ḥ ṣ ḍ ṭ ṣ

I have opted for a simplified transcription of the vowels *a*, *u*, *i* which render some sounds of the Moroccan dialect. The short vowel *e* (like *l-bent*) corresponds to the schwa sound (usually transcribed in the phonetic alphabet as ə). Doubled vowels are indicated by *yy*, *yya* and diphthongs by *ay* and *aw* (or *ow*, like “*howa*”).

Instead of the classical Arabic articles *al-*, for transcribing Moroccan dialect I have used the contracted form *l-*.

These are general indications, because of *darija*’s own flexibility if compared with standard Arabic, as all mother tongue speakers often emphasize. As a non-native English speaker, I have sought to adapt the sound of *darija* to a text written in English: the outcome is a combination of different sources and a necessary compromise.

When quoting or referring to previous transcriptions and transliterations of Moroccan, Classical or Standard Arabic, I have generally left them as in the original texts. The names of cities, towns and proper names are written as they are in Morocco, i.e. following the French format; some names of places (like *kissaria*, *douar*, *medina*) are also written as they are commonly transcribed in Morocco.

INTRODUCTION

“Look, look at that young woman on the other side of the road: you are now leaving¹, but I must tell you that nowadays, *even here*, we have some problems that one could not imagine until a few years ago. The baby she’s carrying on her back is hers and the soldier² standing beside her is his father, but they are not married. I wonder what their destiny will be!” (Houria³, July 2009).

Although I wished to, I never took a bus back to Ifli⁴ since the day in which these notes were written. However, those words and many other voices have surfaced in my memory over the time that I subsequently spent in other parts of Morocco. This work stems from fieldwork conducted in other parts of the country and was preceded by a return to Italy, where some months of preliminary fieldwork contributed to orient my research interest toward the subject of this current work. Even though it was not completely unfamiliar to me, I had never dealt exclusively nor explicitly with the experience of birth outside the framework of marriage for Moroccan women, neither in Italy, nor in Morocco. Yet, the aim of broadening the scope of reflection on the ways in which birth is given social and cultural shape pushed me to interrogate this theme by focusing overwhelmingly on the

¹ I was actually waiting for the bus to head to the region’s main town.

² A large number of soldiers are based in this border town.

³ All names used in this work are pseudonyms to preserve confidentiality and the anonymity of all persons involved.

⁴ This is a pseudonym for an oasis town on the Moroccan – Algerian border. Having conducted my doctoral research in Casablanca, instead, it was not feasible to conceal the location, but I chose not to mention the names of the districts and neighbourhoods, although it would have given further ethnographic depth, given the peculiarities of the different urban social landscapes. Whereas the characteristics of some of the places and settings – including hospitals, health centres, charities and NGOs – may yet identify them, I have decided to omit their names.

experiences of young women in Morocco. Hence, this work starts with an outline of local meanings and constructions of birth and its embeddedness in a set of social and kinship relations, while local practices and knowledge shape bodies and simultaneously ideals of femininity. While these practices are inscribed in the framework of marriage and are based on neat gender ideals of domestic femininity, in chapter one I will introduce other constructions of gendered subjectivities which are negotiated outside home – or between home and other ‘horizons’ – and at the edges of normative categories. Such metaphorical and physical departures – and returns – may be due to or overlap with childbearing outside marriage and to the dynamics of its discovery, disclosure and concealment, as has happened for many of the subjects of this research. After having sketched out the thwarted or actual disruptions constituted by this kind of birthing scenario, I shall illustrate the diverse social and economic landscapes in which the trajectories of women ‘on their own’ (Jansen, 1987) have to be situated.

In the second chapter, I will discuss the ‘genealogy’ of this work and how I narrowed down the scope of the research. Then, I will outline the process which drove me to focus mainly on Casablanca: hence, I will look at its peculiarities as a field site in an ethnography of unwed motherhood in contemporary Morocco, by drawing attention to the ethical and epistemological stakes of doing ethnography inside organisations (Gellner, Hirsch, 2001). The importance of the reflection on the processes by which I approached the field seems all the more important, in so far as I realised that “this process of gaining access [sheds light on] the behaviour of such organizations [and] provides important insights into the way particular places are locally conceptualized, bounded, and resourced” (ibidem: 5). Yet, I shall also highlight the potential pitfalls of doing research within organisations or institutions – such as local charities and NGOs for unwed mothers and their children or public health settings – in so far as it implies a precise and sometimes problematic positioning. However, partiality would have been an issue even if I had decided to carry out my research mostly or only across informal contexts, outside institutions or by approaching private health structures and practitioners. Nevertheless, one of the main questions which spans this work – and chapter two – is the process by which relationships of trust and confidence can be built within,

outside or “at the interface” between organisations and people (ibidem: 4) and how potential asymmetries and differentials of power come to be negotiated, experienced and ultimately translated into ethnographic data. In doing so, I will also discuss the role played by language (fluency) and by my sometimes ambiguous ‘non-status’ of researcher/student/*stagiaire* within local charities and NGOs: as will be made clear through this work, this set of features shaped the interactions with the so-called ‘beneficiaries’ – i.e. unwed mothers – and also gave rise to ambivalences, misunderstandings and ‘opaque’ accounts of their stories – which women themselves⁵ cast sometimes as “lies”, *l-kdub* – all of which wove the fabric of ethnography and provided deeper insights into their experiences. I will subsequently delve into other significant aspects which implied the negotiation of my “ethnographic self” (Coffey, 1999), i.e. the informal relationships and bonds that stemmed or developed during fieldwork.

Although to some extent they also intertwined with my research topics, their relevance rather concerns my self-awareness in the field⁶ and my positioning within a network of socially significant relationships which made my time in Morocco such an enriching and agreeable experience. Furthermore, the methodological questions discussed in chapter two involve a reflection on the politics of representation of the subjects of this research, for two main reasons. One concerns my questioning of unwed mothers and their children’s marginality, which I will seek to interrogate by looking simultaneously at subjective trajectories, imageries, resources and socio-economic contexts, in order to give an account of the diverse ways in which they act upon and within – potentially – constraining situations. I shall try and convey multifaceted narratives in order to go beyond static – and partial – representations of powerless and stigmatised women, although this is the mainstream ‘picture’, one is confronted with. I use the term ‘stigma’ although I do not conceptualise stigma in individualistic terms, i.e. I won’t merely concentrate on the exclusion of the stigmatised individual, but I rather draw on the notion of “moral experience” (Kleinman et al., 2007), in that it allows for a broader

⁵ When talking about other women, roommates or friends at charities.

⁶ For instance through critical and thought-provoking insights that I was given by friends, acquaintances and host-families.

scope in reflecting on out-of-wedlock births as of – potential – moral concern for all social actors involved – not just for a single woman who faces a series of more or less anomalous circumstances, for these experiences are simultaneously – and necessarily – intersubjective.

Yet, my work *does* move from a broad questioning of the experiences of those who have – to lesser or greater extents – ‘breached the rules’. In this sense, following Kapchan, I would argue that “although emphasis on transgression has been associated with a subtle form of Orientalism – making exotic objects of those who break the law – in this text the ‘powerless’ speak with the voices that reveal them to be anything but impotent constructions of a Western gaze. Rather this study telescopes the borderlands between law and its contestation (...) illuminating the creativity and agency that arise at such conjunctures” (Kapchan 1996 : 17). Hence, this point leads to another ‘knot’, i.e. the very ethnographic representation of my interlocutors. How to talk about unwed mothers without representing them under the filters of marginality, stigma, (male) oppression and transgression of set norms and social boundaries? How to decline my responsibility as an anthropologist towards this theme in general, and particularly given the paucity of – scholarly – research on this precise aspect of women’s lives in Morocco and in the Middle East overall? Ethnographic responsibility, as Abu-Lughod (2002) warns, means striving to produce complex and thoughtful work, which may outweigh the pervasive “rhetoric of salvation” (ibidem) embedded in discourses and initiatives concerning women in the Muslim world. Although Abu-Lughod’s acute argument in that article is triggered particularly by the claim of ‘women’s liberation’ as a justification of post-September 11th military interventions in the Middle East, her attention to the ways in which notions like ‘equality’, ‘rights’ and ‘freedom’ – along with ‘choice’ – are mobilised in relation to Muslim women as “neat cultural icons” (ibidem) is relevant also to my work. Notably, dealing with a question – such as out-of-wedlock births – which to a certain extent brings forms of suffering and violence to the fore, might well match potential attempts to ‘save’ these ‘marginalised and oppressed’ subjects –Muslim women who live in a predominantly Muslim country.

On the other hand, dealing with sexuality and – also, but not exclusively – with accounts and representations of violence within gender relations – as I do in chapter three – one may be caught in the perpetuation of stereotypes about (Muslim) men as oppressors and (Muslim) women either as victims or as the emblem of harem-like “excessive sexuality” (Abu-Lughod, 2013: 88). I have sought to question both the victimising rhetoric of salvation, as well as that of deviance (which may also call for salvation), that I have encountered in some of the settings where I conducted my fieldwork, whether such rhetoric – and action – is built on the Western gaze on ‘oppressed Muslim women’ or on some of its ‘post-colonial’ by-products within charitable organisations or, again, on the parameters set by international funding agencies.

In chapter three, I shall first of all situate young women’s experiences within the urban space of Casablanca as an in-between horizon of possibilities between the city and home or family ties, particularly after the birth of children. I will then shift attention to how women act upon situations of uncertainty to carve out spaces for different sorts of relational arrangements and forms of relatedness (Carsten, 2000) and/or multiple adjustments with their families or siblings – who may accept to raise their children while they work in the city. Even though my focus on male perspectives in relation to out-of-wedlock pregnancies and births is rather limited in this work, I have sought to explore the ambivalences and the ambiguities surrounding partners and ‘biological fathers’ which imbue women’s accounts: many feature the plot of failed marriage promises and the denial of paternity, others include controversial representations of sexual violence.

Despite the occurrence of cases of sexual violence⁷, such representations – fostered mainly within the context of charities or by their beneficiaries – sometimes fit into (or draw on) the script of “sexual negation” (Bakare-Yusuf, 2013: 37), as a way of complying to the imagery of sexual naivety or victimhood fostered by some of these organisations. The latter is – on the other hand – contested by other young women who acknowledged their active engagement in relations, which may – but not necessarily – include romance and/or conjugal imageries. The place of

⁷ However, these are said to concern a minority of the beneficiaries of these support programmes for unwed mothers.

sexuality as a contested domain (Vance, 1991) weaves into male and female perspectives – not just unwed mothers’ – and calls for attention to the blurred boundaries of ‘illicit’ sexualities, ‘artificial virginities’ and transactions in which love, sex, monetary exchanges and daily coping strategies merge. Hence, also contradictory and changing understandings on female sexual and economic autonomy are at stake.

As I will discuss in chapter four, issues of consent, desire and intention further come into play in the ways in which young women act upon and manage fertility within relational uncertainties and shed light on the embodied practices of disclosure or concealment of one’s pregnancy, whereby out-of-wedlock pregnancies cannot as such be dismissed as undesired. At the same time, material and relational precariousness informs the ways in which both fertility and its potential disruption are glossed and manipulated in diverse and ambiguous ways. Accordingly, the practices fostered by women to bring the return of menstruation may reveal the extent to which its absence or presence are acknowledged as the ‘evidence’ of ongoing pregnancy or not, whereby its ascertainment may lead some to surgical abortion depending on financial resources, timing and the balance of potential risks of unsafe abortions. However, what I shall stress in this section is that no clear-cut notions of ‘choice’ over one’s body can be homogeneously deployed: the opacity of concealment, disclosure and relational uncertainties, all concur to inform very nuanced and flexible moralities on generation and abortion, in which multiple and ‘fluctuating’ declinations of divine will and destiny merge with diverse representations of ‘the unborn’. In the last section of chapter four, I will introduce some local debates on abortion, which often draw on out-of-wedlock births and unwed motherhood as the grounds for the articulation of very diverse positions, which call either for ‘body ownership’ and ‘choice’, for its partial decriminalisation in the name of public health and social order, or for its ban based on self-defined ‘right-to-life’ interpretations of Islamic embryology⁸.

⁸ Which, as we shall see, restrain the flexibility inherent to classical Islamic texts concerning ensoulment as the beginning of human life and the limit for interrupting pregnancy.

The manipulation of ambiguity (Scheper-Hughes, 1992) that I describe in chapter four with regard to fertility and liminality, also concerns – to a different extent – also young mothers ways of making meaning of infant mortality. I will start chapter five by questioning how ambivalent attitudes and strategies concerning care and infant-feeding take shape in a context of scarcity and relational uncertainties, which call for a deeper problematisation of notions like vulnerability, which are largely used in non-governmental programmes for unwed mothers and their children. Hence, building on a tale which may seem merely ‘of compassion’, I shall move to a critique of the politics of care and the – predominant – depoliticisation of vulnerability, which emerges as one of the core features of the construction of the figure of the ‘unwed mother’ at the intersection of non-governmental, public health and state-lead measures which strive to take care of, heal and protect the “surplus bodies” (Bargach, 2002) of children born outside marriage and the “exiled bodies” (Kapchan, 1996) of their mothers. I will ultimately explore how, on the one hand these women – while participating in non-governmental programmes – are publically portrayed as naive and unaware in relation to their sexuality, this infantilising view may easily be coupled with its opposite. Indeed, the effort to protect these women from their own ‘unawareness’ is translated in pedagogic activities which address their individual biological bodies, where responsibility for further pregnancies and for sexually transmitted diseases is located. Thus, the endeavour to train ‘modern’ unwed mothers as beneficiaries of regimes of care (Ticktin, 2011) may well be nothing but an artificial construct which is emblematic of the plasticity and the ambiguities of this category in contemporary Moroccan society.

As a last introductory remark, I shall make explicit that the construction of a precise target of ‘unwed mother’ has stemmed within organisations which – mostly – situate themselves within the framework of ‘human rights’ and local secular women’s movements: since my research focuses on out-of-wedlock births and the multiple measures put into being to address this issue as such. Thus, I have narrowed down my attention to these organisations and – also for contingent reasons – these organisations and projects have influenced the design of the scope of my research. Nevertheless, I have been in touch also with other women’s organisations which in Rabat, Casablanca and elsewhere in Morocco tackle issues

of development, women's rights, young women's and young couple's education within a political Islamic framework instead. As I discuss in chapter four – building on in-depth interviews with activists and physicians – their critical stances on other charities for unwed mothers have been highly insightful; these activists also provided interesting views, especially – but only – in relation to the ongoing debates on the decriminalisation of abortion, which have further been elicited in 2012 by the campaign of a European NGO with a Moroccan 'pro-choice' partner organisation. As aptly argued by Hélie (Hélie, Hoodfar, 2012), the policing of gender and sexuality is in no way unique to Muslim societies, while “Western discourses (...) often stigmatize Muslim communities for limitations placed on both women's rights and bodily rights”, but this view also implies that any movement which counters the policing of gender and sexuality in Muslim communities is dismissed as ‘foreign’ and imposed by ‘the West’, or by western agendas (ibidem: 2) and is “justified through discourses of moral codes, cultural ‘authenticity’ and religion” (ibidem: 3), which also reify essentialist ideas of ‘Muslimness’, and ultimately “accept the essentialist terms of Orientalist constructions” (Abu-Lughod, 2001a: 144). Another relevant point to my argument and to the scope of this research is that, although I explore how women in a Muslim society engage with sexuality and negotiate a wealth of conditions connected to their selves as sexual beings, it may also be argued that “religion is far from [being] the only parameter impacting the politics of sexuality and gender empowerment” (ibidem: 5)⁹.

⁹ “Despite pervasive claims positing Islam as the main marker of identity in Muslim communities, women, men and trans persons from Muslim contexts are reclaiming the right to shape their own cultures, within as well as outside religious frameworks” (Hélie, 2012: 5).

CHAPTER ONE

Knots, ties, departures

Introduction

“A son in Morocco is *in a very real sense* an extension of his father. His father’s seed alone creates him; his mother serves only as its receptacle; for, according to Tuhami, it is molded by angels into a human infant” (Crapanzano, 1980: 38).

“Yet, no society consists of anonymous eccentrics bouncing off one another like billiard balls, and Moroccans, too, have symbolic means by which to sort people out from one another and form an idea of what it is to be a person. The main such means – not the only one, but I think the most important and the one I want to talk about particularly here – is a peculiar linguistic form called in Arabic the *nisba*. The word derives from the trilateral root, *n-s-b*, for ‘ascription’, ‘attribution’, ‘imputation’, ‘relationship’, ‘affinity’, ‘correlation’, ‘connection’, ‘kinship’” (Geertz, 1983: 65).

“La honte (*hshumiya*) est une notion qui sert des approches contradictoires de la société marocaine” (Rachik, 2012).

Writing about the son of an unwed mother, Jamila Bargach (2002) writes that “he remains the embodied shame of his mother” (ibidem: 3). Hence, a necessary point of departure to focusing upon the experiences of women who give birth and raise children outside marriage is the exploration of the “local moral worlds” (Kleinman, 1995)¹⁰ in which these pregnancies and births are situated. I shall illustrate the

¹⁰ “Experience may, on theoretical grounds, be thought of as the intersubjective medium of social transactions in local moral worlds. It is the outcome of cultural categories and social structures interacting with psychophysiological process such that a mediating world is

relevance of local models of birth (Davis-Floyd, Sargent, 1997) and the forms of relatedness they weave into. In explaining the reasons why adoption is not acknowledged in Islam, Bargach draws on the Surat 33, verses 4 and 5¹¹ and on the Quranic commentary that agrees that “a man cannot be a father if he is not so naturally. Sonhood is *only* the product of a biological tie and not a set of binding words” (Bargach, 2002: 49). The author relies on the interpretation of these verses in order to give an account of the normative framework in which family relationships came to be conceived in terms of marriage and blood, as “the only sanctioned means through which to acquire a *lineage-nasab* (...) being thus the most fundamental organizing principle of societies affected by Islamic fact¹²” (ibidem: 54-61). This starting point is key to Bargach’s argument, in that she traces first of all some cases encompassed by the *fiqh* (Islamic jurisprudence) in which *nasab* is accorded even without a legal marriage, then her work as a whole explores the diverse forms of ‘adoption’ which exist, instead, in Moroccan society¹³.

Reference to Bargach’s ethnography on forms of child adoption and abandonment – besides being the main research in this domain so far – is necessary, in so far as it provides a broader background to situate this work and these introductory reflections. Bargach is interested in that “which offsets this (...) prescriptive order”

constituted. Experience is the felt flow of that intersubjective medium” (Kleinman, 1995 : 97).

¹¹ “4. Allah has not assigned unto any man two hearts within his body, nor hath he made your wives whom ye declare (to be your mothers) your mothers, nor hath he made those whom ye claim (to be your sons) your sons. This is but a saying of your mouths. But Allah sayeth the truth and He showed the way.

5. Proclaim their real parentage. That will be more equitable in the sight of Allah. And if ye know not their fathers, then (they are) your brethren in the faith, and your clients. And there is no sin for you in the mistakes that ye make unintentionally, but what your hearts purpose (that will be a sin for you). Allah is forgiving, Merciful.

Surat 33 (Al-Ahzab), Medinese, verses 4 and 5” (Bargach, 2002: 48). This is the interpretation and translation of the Qur’an used by the author (i.e. the Marmaduke Pickthall’s, 1930, New York: Alfred A. Knopf – Bargach, 2002: 236, n. 16).

¹² “(that is, as far as the legislative texts are concerned)” (ibidem: 61).

¹³ As aptly argued by Fortier (2011), however, Islam *limits* the juridical effects of adoption (ibidem: 229), this is why countries like Morocco encompass the possibility of *kafala* – a form of custody, which does not imply filiation and inheritance.

(ibidem: 63) and to practices that outweigh what is commonly and broadly thought of as an ‘interdiction’ and stand in opposition to “what is held to be normal and normative both socially and religiously” (ibidem) under the centralised nation-state and the institutionalisation of ‘the family’¹⁴. The essential point made by Bargach is that a *wuld l-haram* – which she translates as a “bastard”¹⁵ when referring to an illegitimate child – not only lacks *nasab*, but also *aşl* – roots. Although these notions have been widely elaborated on (Rosen, 1984; Geertz, H. 1979; Geertz, C. 1983; Eickelmann, 1976), Bargach argues that they all have drawn their attention to the tangle of *nasab* and *aşl*. However, she rather refers to Pandolfo (1997), who defines *nasab* as “itself meaning ‘implication’ and ‘tie’” (Pandolfo, 1997: 10). Following Pandolfo, attention shifts to the need to “explore the essential ambivalence and irreducible paradox of the idiom of paternity and patriarchy, which at the same time excludes the feminine and depends on it” (Pandolfo, 1997: n.43, 339). Pandolfo translates *nasab* “as ‘knot’ or ‘tie’”¹⁶(ibidem). Hence, the contested notions of filiation, descent and roots are crucial in the definition of the scenarios in which birth takes place and filiation is established outside those prescribed boundaries.

¹⁴ Notably, in the codification of the *Moudawana* – the Family Code – in newly independent Morocco between 1957 and 1959 (Aluffi Beck-Peccoz, 2006).

¹⁵ The use of the term *wuld l-haram*, Bargach says reinforces “the unspoken assumption that abandoned children, and they are only abandoned because they are bastards, are polluting and dangerous because they have the potential of disturbing the normal and accepted” (Bargach, 2002: 145). Whereas in Arabic the foundling is the *laqit*, the term stemming from the verb *laqia*, which means finding, meeting, coming across, etc. It designates any person abandoned at birth by the two parents who have not recognised him/her (Ben Néfissa, 2004: 363). A comparative analysis of this question in other countries of North Africa and the Middle East is beyond the scope of this work, however relevant references are Barraud (2010) for an overview on Morocco, Tunisia and Algeria; Ben Néfissa (2004) in relation to Egypt; other contributions spanning psychology, sociology and anthropology are Ben Rejeb (1993), Turki (1998), Arena (2011) for Tunisia; Rahou (1995; 2008) and Hachouf (1997) for Algeria. This is a non-exhaustive review of the literature on the subject, which – as for the Moroccan case – may well encompass non-scholarly reports and unpublished studies.

¹⁶ And “as a figure of the preoccupation with what may be called the inevitability of structural loss” (ibidem).

The concept of *wuld l-haram*¹⁷ deserves further attention, if we think of Pierre Bourdieu's (Bourdieu, 1977) account of *hurma* as "the sum total of that which is *haram*, i.e. forbidden, all that goes to make up the vulnerability of the group, its most sacred possession (...) *Hurma* in the sense of the sacred (*haram*), *nif*¹⁸, and *hurma* in the sense of respectability, are inseparable"¹⁹(Bourdieu, 1977: 61). Bourdieu then identifies *hurma* with femininity, whereby the propriety of women and their role emerge as crucial "components of a more comprehensive set of cultural assumptions concerning the world that are shared by persons in a given society" (Eickelman, 1989: 153). Hence, 'illegitimate' children and the conditions which lead to their birth – encompassing the experiences of their mothers – may be thought of in these terms, as the embodied 'aggregate' of what is more vulnerable in society. Although I will seek to problematise the notion of vulnerability,²⁰ which is too often ascribed to unwed mothers and their children, particularly by civil society, here it seems appropriate to draw on this term to situate them within Moroccan society.

While Bargach's focus in *Orphans of Islam* is the "surplus of bodies" (Bargach, 2002: 2) incarnated by 'illegitimate' children, mine is mostly on the experiences of women who give birth out of wedlock. Although this might seem obvious in an anthropological analysis of reproduction, the author warns against the – potential – understanding of these women's pregnancies within "the frame of a 'universal' feminist agency" (Bargach, 2002: 133), while, following Rapp and Ginsburg (1995) she emphasizes the need to locate reproductive lives historically and culturally within local nexes of power, and according to critical appraisals of

¹⁷ Its use is staunchly opposed by several actors of Moroccan civil society, especially when politicians recur to it publically.

¹⁸ "the point of honour" (Bourdieu, 1977: 61).

¹⁹ Bourquia (2000) writes: "En général [l'honneur] est focalisé dans le *nif* (nez), qui devient le symbole par excellence de l'honneur (...) Le déshonneur dit-on 'fait baisser la tête des hommes' (...) Le visage sert donc de surface pour l'honneur; mais sa partie saillante (le nez) sert pour se l'approprier et le défendre. On pourrait dire de l'Orient [the eastern region of Morocco, on the border with Algeria] qu'il forme dans la société marocaine l'aire géographique du *nif*" (Bourquia, 2000: 27).

²⁰ See Chapter Five.

notions like agency and rights. Such a perspective also enables a preliminary questioning of – ethnocentric – assumptions concerning ‘choices’ and what is – or rather is not – “universally desirable” (Rapp, Ginsburg, 1995: 9) or undesirable. This observation, for instance, sheds light on a central aspect, i.e. that out-of-wedlock pregnancies in Morocco cannot be monolithically defined as ‘undesired’. I do not wish to try to define a priori who the subjects at the centre of this work are, as their stories will gradually unfold over the pages and because trying to condense a few ‘key features’ in this introductory chapter would not do justice to their heterogeneity. Above all, even if the scope of my research was to investigate out-of-wedlock pregnancies and births, I have struggled myself to deconstruct their mainstream and homogenising representations. In these pages I shall concentrate mostly on how subjective experiences of births lived by unmarried women are nuanced, and to what extent they may represent a disruption of their social and family ties. In doing so, I wish to give an overview of how “experiences of reproduction are shaped by a variety of cultural ideas and practices that are hierarchically organized according to normative categories” (Rapp, Ginsburg, 1995: 13)²¹.

As I will elaborate on in the following chapters, the approach to out-of-wedlock pregnancies and births in this context needs to be situated not only within their local symbolisms, but rather by considering on the one hand the body as the *subject* of culture and as its “existential ground” (Csordas, 1990), and on the other by re-thinking subjective experiences as the embodiment of broader political, social and economic processes, which do not merely refer – or do not refer at all – to religious dimensions or ‘religiously informed’ conditions. Bargach speaks of “traditional emphasis on Muslim structures” (Bargach, 2002: 133), which would obscure a wealth of other issues and processes, which ultimately inform women’s lives and in this case motherhood outside marriage. Grounding my insights on fieldwork, I agree with this perspective and argue that a narrow focus on religious or normative

²¹ These authors also make reference to the concept of *stratified reproduction*, coined first by S. Colen (Colen, 1986 in Rapp and Ginsburg, 1995: 15), as “the power relations by which some categories of people are empowered to nurture and reproduce, while others are disempowered” (ibidem: 3): this seems appropriate, to a certain extent, also to the experiences of Moroccan unwed childbearing women.

interdictions does not convey the manifold and controversial aspects that give shape to motherhood(s) as experienced by these women.

What I have been confronted with was rather the ‘denouncing’ of the existence of unwed mothers and their children in contemporary Moroccan society, as “its flesh and blood crisis” (Bargach, 2001: 86). While the bodily presence of infants and children labelled mostly as ‘orphans’ or ‘abandoned’ inside state-lead or charitable institutions²² and as ‘street children’ – *aṭfal l-shaw‘ari* – and *shemkara*²³ outside was indeed partially visible, their ‘origins’ had not been called into question as such in the public sphere until the enactment of civil society and humanitarian initiatives²⁴, aimed at enabling women to raise their children born outside marriage, or rather to prevent their abandonment²⁵. As one of my acquaintances observed – in relation to her childhood in the 1950s – the word or the notion of out-of-wedlock pregnancies and births did not exist and was not conceivable: “it has always existed, of course, but there were other ways to fashion it. Above all, it was dealt with in silence, a sort of social wisdom based on silence, which nevertheless allowed for managing the occurrence of extra-marital pregnancies by recurring to polygamous marriage or to *ragued*, for instance”.

Although my interlocutor did not describe explicit cases of the use of *ragued*²⁶ – or the ‘sleeping foetus’ in its mother’s womb (Colin, 1998; 2003; Gilson Miller, 2006) – in this case it was taken as an example of the resources inherent to Muslim

²² In independent Morocco, i.e. since 1956, but also earlier (cf. Bargach, 2002, Chapter 8, pp. 193-213).

²³ This term refers specifically to people, including children, who make use of toxic substances (glue).

²⁴ Some of them are Moroccan, others were started by European NGOs and continued by Moroccan ones, some others are lead by Catholic nuns or were started by the joint initiative of Catholic nuns and Moroccan activists, who have subsequently taken the activities further.

²⁵ Bargach (2001; 2002) emphasizes that the bill passed in September 1993 by the Moroccan parliament constituted “an open recognition of the existence of a category labelled ‘Abandoned children’ in the fold of Moroccan society [and the acknowledgement of] the existence of the crisis that had engendered them in the first place” and granted this category “legal visibility” (Bargach, 2001: 74-75).

²⁶ Nor was it ever drawn upon by young women who I encountered in the field.

thought and jurisprudence, whose interpretations allow to uphold legitimate filiation and to protect women from accusation of adultery – *zina* – by conceiving the flexible duration of gestation²⁷. Or as Bargach puts it, it has “created an interstice for women to gain a certain legitimacy and control in the face of adversity” (Bargach, 2002: 162)²⁸. According to the original elaborations of the Maliki school concerning the length of gestation²⁹, it could last up to seven years (Colin, 1998: 22). I argue it is important to mention the *ragued*, in so far as it has sometimes been represented by some of my informants³⁰ as emblematic of the idioms – inherent to the *fiqh* – which give an account of the plasticity of notions such as ‘legitimacy’ or ‘illegitimacy’³¹.

The question of paternal filiation is dealt with in the articles 150-162 of the Moroccan Family Code or Moudawana: the article 152 states that paternal filiation

²⁷ Juridical schools do not have a unanimous agreement on the length of gestation (Atighetchi, 2010a; Colin, 1998), however according to the current Moudawana (Art. 135) the maximal length of gestation is one year from the date of divorce or death of one’s husband.

²⁸ It has to be noted that colonial works on the *ragued* take it as an example of ‘backwardness’, and as an unscientific and bizarre native belief (Bargach, 2002; Naamane-Guessous, 1987) in contrast to biomedical evidence.

²⁹ “*durée maximale légale de grossesse*” (Colin, 1998: 22).

³⁰ I refer to informants other than the young women who have given birth out-of-wedlock: conversations I have had with friends, acquaintances and physicians.

³¹ However, Fortier (2011) notes that the *ragued* cannot be strictly considered as a ‘Muslim’ notion: “D’ailleurs, l’expression arabe de « foetus endormi » (*raqada janîni*) ne figure pas, comme on le pense ordinairement, dans les ouvrages fondateurs de droit musulman, et *a fortiori* dans le Coran et la Sunna, pour justifier les longs délais de grossesse dont la durée varie selon les rites ; elle n’apparaît en effet que dans des consultations juridiques (*fatâwâ*) marocaines, algériennes, tunisiennes ou andalouses. La réutilisation juridique de ce terme serait donc directement inspirée de représentations locales partagées par les membres de la plupart des sociétés arabophones ou berbérophones d’Afrique du Nord (...) où différentes formes dialectales du verbe dormir sont employées pour désigner l’état du foetus dans le ventre de la mère. En dépit de ce qui est généralement établi, le concept « d’enfant endormi » n’est donc pas une notion « musulmane » qui aurait une origine arabe ancienne, mais est issue de représentations arabo-berbères qui ont inspiré les juristes musulmans du petit Maghreb et de la Méditerranée” (Fortier, 2011 : 242).

stems from conjugal relations (*Al Firash*³²), avowal (*Iqrar*) and sexual intercourse occurred “by mistake” (*Shubha*); paternal filiation is established within *Al Firash* if birth occurs at least six months following the conclusion – i.e. the signature – of a marriage contract or within a year from its end (Art. 154). The Art. 155 and 156³³ encompass some cases in which legitimate paternal filiation *may* be attributed even in the absence of marriage: for instance, the possibility of sexual intercourse “by mistake” – *shubha* – states that it has taken place within the period of official engagement³⁴, whereas overarching reasons have hindered the registration of marriage at ‘*adul* – notaries (Papa, 2006). Hence, to a certain extent, we may argue that this formulation seeks to ‘mitigate’ the circumstances in which sexual intercourse and conception have occurred and the intention of the parties involved. I argue that the potential flexibility granted by the interpretation of the *fiqh* is noteworthy, although I have noted the discrepancies in the attempts to apply it, for

³² “*Al-walad lil firash*” is the offspring who ‘belongs to the bed’ according to a *hadith* of the Prophet (Bargach, 2002: 59).

³³ The current Moudawana – Family code – was last reformed in 2004. Art. 155 : “Lorsqu’une femme est enceinte suite à des rapports sexuels par erreur (*Choubha*) et donne naissance à un enfant, pendant la période comprise entre la durée minima et la durée maxima de la grossesse, la filiation paternelle de cet enfant est établie à l’égard de l’auteur de ces rapports.

Cette filiation paternelle est établie par tous moyens de preuve légalement prévu”.

Art. 156 : “Si les fiançailles ont eu lieu et qu’il y ait eu consentement mutuel, mais que des circonstances impérieuses ont empêché de dresser l’acte de mariage et que des signes de grossesse apparaissent chez la fiancée, cette grossesse est imputée au fiancé pour rapports sexuels par erreur, si les conditions suivantes sont réunies :

- a) les fiançailles ont été connues des deux familles et approuvées, le cas échéant, par le tuteur matrimonial de la fiancée ;
- b) il s’avère que la fiancée est tombée enceinte durant les fiançailles ;
- c) les deux fiancés ont reconnu que la grossesse est de leur fait.

Ces conditions sont établies par décision judiciaire non susceptible de recours. Si le fiancé nie que la grossesse est de son fait, il peut être fait recours à tous moyens légaux de preuve pour établir la filiation paternelle” [http://adala.justice.gov.ma/FR/Legislation/TextesJuridiques.aspx ; accessed January 2012].

³⁴ It is defined by the Art. 5 of the Family Code: “Les fiançailles sont une promesse mutuelle de mariage entre un homme et une femme. Les fiançailles se réalisent lorsque les deux parties expriment, par tout moyen communément admis, leur promesse mutuelle de contracter mariage. Il en est ainsi de la récitation de la Fatiha et des pratiques admises par l’usage et la coutume en fait d’échange de présents ” [http://adala.justice.gov.ma/FR/Legislation/TextesJuridiques.aspx ; accessed January 2012].

instance in the cases of unwed mothers who – even when assisted by NGOs and their lawyers – could hardly draw on the tools entailed in the Moudawana. Notably, the possibility of proving biological paternity – and *not* legitimate filiation – by a DNA test, stems from the interpretation of Article 156: yet, it is not relevant to the cases of most of my informants, given that they had no ‘official engagement’ with their partners, nor did they have means to prove it. The content of the article 157 is also hardly relevant to most unwed mothers I met: notably, it states that paternal filiation produces the same effects, even if it is established through a “vitiating” marriage, *shubha* sexual intercourse or the “acknowledgement” of paternity (*Istilhak*).

The same for the article 158, which further specifies that paternal filiation stems from *al-firash*, the father’s avowal (*iqrar*), the testimony of two ‘*adul* – that is, *al-baiyna*, i.e. “evidence” – hearsay, and “all legally available means, including judicial expertise”. Finally, the articles 161 and 162 respectively state that only the father can establish filiation by means of avowal and that the latter consists of an act or written declaration. The article 16 states that marriage is proved by the relevant contract, but it also admits the procedure for “recognition” of an existing conjugal union and/or pregnancy or children resulting from it. Quoting these articles was a necessary premise, although it must also be noted that their application rests also on different – more or less restrictive – interpretations made in tribunals, which leads some actors of civil society to conclude that even if biological fathers were willing to recognise their children born out-of-wedlock, this seems rather impossible.

The recognition of biological paternity, thus, may stem from the above mentioned procedures with or without a marriage contract, yet ‘in practice’ these processes are definitely opaque and subject to contingency, to different jurisprudential interpretations and to the discretionary power of judges under the control of the Supreme Court (Cherkaoui, 2010). This remark was needed to give account of the fact that some of my informants talk about the ‘recognition of paternity’ – and not necessary of marriage – but it often deals with ‘hoped for’ recognitions, whose terms and possibilities are unknown or unclear to the women themselves, when they speak of ‘the papers’ (the documents) – *l-waraq* – that they expect from the biological fathers. Above all, as shown by the legal tools entailed in the

Moudawana and aimed at establishing paternal filiation, they are hardly accessible by women who lack of proof of existing relations with the biological fathers of their children: natural paternal filiation is not conceived within current Moroccan laws – nor within *fiqh* as a whole – and may only be ‘circumvented’, but not recognised as such. Moreover, as illustrated by studies conducted by Moroccan NGOs, the actions aimed at obtaining the recognition of biological paternity may lead to penal prosecutions towards the mother herself³⁵ – although it deals mostly with suspended sentences.

However, the formulations and the nuances potentially encompassed by the *fiqh* seem to contrast sharply with the alarming statements made by civil society³⁶ which currently spark Moroccan media and which see this as the most appropriate strategy to make their audience ‘aware’ of the issue of unwed motherhood and of the destinies of ‘fatherless children’ in contemporary – and future – social landscapes. However, I shall recall Bargach’s statement that a child born out-of-wedlock “remains the embodied shame of his mother” (Bargach, 2002: 3). In this work the author reinforces this idea by giving numerous examples of the declinations of that shame embedded in the idioms of “bastardy” (Bargach, 2001), as social abjection (Bargach, 2002: 2) – mainly – from the point of view of the children, although she also gives a few insights into the lives of the women who abandon them. Bargach aptly speaks of ‘shame’ because out-of-wedlock pregnancy is mostly perceived and defined as something to be ashamed of, not just for oneself, but something which is potentially shameful for and threatening to one’s family should it become public. What I hope to show in the following pages, is that it is indeed the feature of – potential – publicity that constitutes one of the main threats of out-of-wedlock pregnancy and birth.

This may suggest that in this case – at least to a certain extent – “honour and shame deal with representations, rather than with actual behaviour” (Maher, 2007: 123)³⁷.

³⁵ According to the article 490 of the Penal Code, which sanctions any extra-marital sexual relation.

³⁶ Especially in the last decade, although the activities of some of these organisations began in the 1980s.

³⁷ The original text is in Italian; the translation is mine.

Maher (2007) hints at the paucity of ethnographic insights that she had on “honour” during her fieldwork in Morocco (Maher, 1974; 1989), which reminds how honour may not be explicitly elaborated on. Whereas, understandings of honour are embedded in a wealth of discourses on female – passive and active – vulnerability (Fabiatti, 2002: 152), that is ultimately voiced in terms of shame, as a set of dispositions aimed to manage the ‘sites’ of honour, for instance female bodies as its primary repositories, and their reproductive power as the means by which patrilineal descent has to be ensured (Fabiatti, 2002: 146). Bourquia (2000) discusses the notion of honour in eastern Morocco – in the city of Oujda – and underlines its spatial, relational and situational dimensions, whereby *l-ḥeshma* and *l-ḥeya*³⁸ refer to female modesty and *nif* to male honour, which is gained or lost³⁹ according to female behaviour (Bourquia, 2000: 26-27). Maher (2007) stresses that *ḥshuma* in the Middle Atlas does not necessarily refer to sexuality, as it stems from a broader array of conducts which refer to the domain of “social wisdom” and “self-awareness” (ibidem: 130).

This understanding of *ḥshuma* seems relevant to my argument, in so far as in the experiences of the subjects of this research, one’s conduct and its consequences are crucial, but the main stake is rather their visibility and publicity – or their opposite. The major feature of this way of conceiving *ḥshuma* is that it is sustained by a multiplicity of social arrangements aimed at maintaining a tacit knowledge even of ‘shameful’ matters – such as out-of-wedlock pregnancies and births. The latter may well be known to the parents of unwed mothers, lest they remain ‘distant’ or childbearing dissimulated by various adjustments that I will illustrate. Feeling or displaying *ḥshuma* – which may be translated in francophone literature with “*honte*” or “*respect*” (Cheikh, 2011) – and maintaining one’s honour is not only connected to one’s virginity or to out-of-wedlock sexual relations (*‘alaqa jinsiya*), but encompasses more broadly the respect of one’s family through the dissimulation of one’s – potentially ‘transgressive’ – behaviours. This set of practices and dispositions is aimed at upholding one’s social relations and networks

³⁸ This term refers also to respect.

³⁹ Whereas *l-‘ayb* is referred to by Bourquia (2000) as “*désouhonneur*”, which refers also – for example – to poverty (ibidem: 24).

of solidarity (Cheikh, 2011) through the complicity pursued by mutual, tacit acknowledgement⁴⁰.

However, I shall look at the declinations of the notion(s) of *hshuma*, by questioning the extents to which it comes into play, as an embodied *habitus* (Bourdieu, 1977) or as “the full interactional context which gives these concept[s] meaning as everyday realities” (Wikan, 1984: 648). Besides, I deem the monolithic understanding of shame as a contestable analytic tool in relation to the contexts and the problems I dealt with. Notably, *hshuma* is – at least in some types of representations of unwed mothers⁴¹ – taken as an all-encompassing, self-evident notion, which alone is supposed to explain the rejection or self-exile from one’s family, social environment and ‘biological fathers’. One of the publications that has had a relative echo in Morocco, and that has – in my opinion – influenced public discourses, representations and civil society approaches to ‘the cause’ of unwed mothers in the last decades, is that of the Moroccan sociologist Naamane-Guessous (1987), who draws on the notion of *hshuma* by explicitly referring to it as a “code” (ibidem: 9) and as the result of a repressive education – from mothers to daughters – based on negative assumptions of female sexuality and on “the obsession of virginity” (ibidem: 24)⁴². However, the experiences lived by the subjects of this research convey a more complex and heterogeneous picture.

I shall introduce the issue of out-of-wedlock pregnancy and birth in contemporary Morocco by seeking to contextualise these events in relation to local symbolic and social frameworks of birth. In doing so, my aim is to problematise the socio-cultural boundaries which shape this process in relation to gender ideologies, local models and practices of birth, and normative aspects and local constructions of the body and sexuality. Hence, I will examine the relations and bonds which give

⁴⁰ This applies, for instance, to young women, who disclose to (some) female members of their families that they have had children. It also concerns others, who regularly visit their families, who may be aware of the birth of children, but do not accept both of them at home.

⁴¹ Such as in the non-governmental sector.

⁴² A similar argument is made by Belarbi (1991 : 111-113).

social shape to local birthing scenarios and then draw attention to the focus of my research, (unwed mothers' and their children) by exploring the processes through which reproduction and birth are given meaning, informed and negotiated in situations which – as I shall elaborate on – might challenge both the social order and kinship boundaries. Although the condition of unwed motherhood might be seen – or dismissed – as marginal, I will seek to go beyond its dismissal as a mere anomalous phenomenon, in order to provide a more complex and multifaceted insight into the lives and itineraries of the subjects of this research. Moreover, as 'marginality' is one of the key concepts to be mobilized and advocated in public and institutional discourses on unwed motherhood in Morocco, a careful use of this conceptual tool with the aim of deconstructing the category of single or unwed motherhood as it is produced and used in contemporary Morocco, is certainly needed.

The issue of out-of-wedlock births also calls upon notions of personhood, in relation, on one hand, to the status of children born outside marriage and, on the other, to their mothers and their gendered subjectivities, which may be seen as 'blurred' – being perceived neither as married women – *l-mra* – nor as virgin girls – *l-bnat*. Although one may say the concept does not exist, as it refers to 'un-conceived' matters, these women are the *ummhat l-'asibat*, whereby the first term refers to motherhood and the second one to celibacy and virginity. Given that birth within local – normative – models fulfils local ideals of femininity, unwed motherhood calls them into question: breaching, as it does, various socio-cultural, religious and legal boundaries, its meaning stems from the challenge to, and the negotiation of, set norms.

§ 1 Locating birth in and outside scenarios of meaning

1.1 Enclosure and transitions

Before drawing attention to the issue of out-of-wedlock birth in Morocco, I will outline some elements in the anthropology of birth which may explicit the notion of local models of birth (Davis-Floyd, 1997; Jordan, 1993) the reason why I use it and why it matters in the reflection on unwed motherhood and on its multiple stakes in Moroccan society. Indeed, I aim to draw attention to the symbolic framework of birth by looking first at local "paradigms of maternity" (Browner,

Sargent, 1996: 222), which may help situate out-of-wedlock birth and by calling upon constructions of gender and femininity in relation to sexuality and reproduction. To this end, I wish to highlight how reproductive processes are culturally shaped and the extent to which this aspect significantly informs the lived experiences of women who breach the symbolic and ritual boundaries of birth, as well as the social and religious norms defining its ‘legitimacy’.

In talking about ‘local models of birth’ I do not implicitly refer to a dichotomy of ‘traditional vs modern’ or ‘local vs biomedical’ models of birth. Indeed, one of the main points raised by previous fieldwork⁴³ among *qablat* – local, mostly non-trained birth attendants – and women, in a semi-rural context in south-eastern Morocco is precisely that their ‘traditional’ practices are rooted in local knowledge but at the same time borrow a wealth of elements from western (colonial) practitioners or from trained midwives and biomedical doctors. Their practices, thus, make up a pluralistic, and pragmatic approach to childbirth (Capelli, 2011a) which is far from being static, but rather eclectically combines multiplicity of resources. Moreover, the knowledge and practices of local midwifery are embedded in a set of social, kin and power relations wherein birth is placed and given meaning. Insights into the social and cultural construction of birth by *qablat* and women in this specific field site have been highly relevant – and helpful – as I subsequently sought to situate the birthing process outside this oasis, and to understand the lived experiences of unwed mothers across highly diverse biographic, regional and social landscapes. Despite this diversity, all their experiences constitute a challenge to social norms, which also contribute towards the shaping the local ideal of birth – i.e., its being above all ‘legitimate’ and qualifying both mothers and newborns as social beings.

During my fieldwork in Ifli, I had focused mainly on local knowledge and practices of birth in relation to medical pluralism in a rural context, i.e. a geographically isolated and historically marginalised oasis town where local midwives and their knowledge were highly valued, playing a significant role, at a contingent as well as symbolic level, but also because of structural constraints such as the lack or the inadequacy of health services and personnel and the distance from other health

⁴³ That has been carried out in the spring-summer of 2009.

facilities. Hence, meanings and experiences of birth were to be located in this specific context and in relation to these peculiar features, by which they were significantly shaped. Being the symbolism of birth in this context deeply entangled with local notions of risk due mainly to the harsh structural conditions in which it takes place, I concentrated on these particular aspects⁴⁴. In spite of the relatively large number of unmarried females in this town, I did not explicitly investigate issues regarding marital status. Since all childbearing women were married, the issue of out-of-wedlock pregnancy or ‘illicit’ sexual relations was never mentioned. There were, however, exceptions, in reference to a case attended by the dispensary’s midwives and to a girl I coincidentally saw just before leaving the town.

When discussing issues dealing with birth and pregnancy in this particular context emphasis was placed on risks and hazards involved in childbirth, due to the insufficiency of healthcare and infrastructure provided by the State. indeed, the imagery of birth is informed by a local idiom of risk (Capelli, 2009), that are illustrated for instance by bodily metaphors grounded in the balance between hot and cold and openness and obstruction (Obermeyer, 2000a) and by the symbolism of the ‘dangerous’ blood of parturition – that only experienced midwives are deemed able to manage. So, also local embodied metaphors of risk are among the key components of this ‘model’ of birth and are deeply entangled with the broader political economy of health and from the specificities of this border region⁴⁵. Hence, we see how structural features play a key role only so far as they are understood in relation to the symbolic construction of birth within social and kinship ties and bring to the fore multiple figures and resources associated to the local management of birth.

⁴⁴ The fact that I narrowed down the scope of my research to the meanings and the stakes of local birth practices depended also –but not solely – on the time constraints of a master’s dissertation.

⁴⁵ I refer here to steep regional inequalities and to their historic and political roots, impacting on this region and on this oasis, for instance the isolation both from other Moroccan towns and the closing of the frontier with Algeria, which deeply affects this town and the surrounding region.

The most relevant feature of this construction of birth is its being embedded in precise gender and kinship relations, from which the birthing woman and the newborn gain social recognition and legitimacy. Birth, indeed, acquires its meaning from its being tied to marriage and situated in a wider network of kinship and social relations (Obermeyer, 2000a; Maffi, 2012) this aspect is key in making the physiologic event of birth a social process, through which *l-mra* – married women – acquire the status of mothers, whereby their sexuality is aimed at reproduction and to ensure patrilineal descent. Thus, subjective experiences of birth explicitly weave into changes in human relations embedded in the life-cycle (Lock, 1993b) as social events, as well as to precise ways to conceive and organise kinship. Such transitions – in the context of this oasis and in other (mostly rural) parts of Morocco – are also made possible by the role played by local midwives – the *qablat* – who deal with the birthing process from pregnancy to postpartum in the domestic sphere, providing a symbolic and ritual framework aimed at managing uncertainty and the risks birth might entail.

I first aimed to analyse the role played by such a figure, as it is key, not only in managing birthing practices (Larguèche, 2000), but in the making of gendered notions of personhood in this oasis – and beyond. *Qablat* may be seen as the agents of birth as an *anthropopoietical* process (Remotti, 2002), i.e. the cultural ‘making’ and moulding of specific forms of humanity which completes biological processes. In this sense, *qablat* are crucial in shaping relational notions of personhood (Conklin, Morgan, 1996), that we find at the core of these practices of birth. Their meanings and stakes are not confined to the oasis where I conducted my previous fieldwork, but they are nuanced also in urban contexts and – in general – when birth takes places in health facilities instead of one’s home. Therefore, birth can be seen as a “social microcosm” (Strathern, 1988, in Carsten, 2004)⁴⁶, which from social as well as from symbolic points of view defines simultaneously the status of the woman who gives birth, that of the baby and that of the whole family.

The practices, based on notions of openness and obstructions, that are ‘traditionally’ performed on the newly-delivered woman by *qablat* and other

⁴⁶ In Strathern’s formulation it refers to the relational notion of personhood (Strathern, 1988).

women, for instance, are aimed at putting her body ‘back into shape’. They also serve as a form of *symbolic manipulation* (Lévi-Strauss, 1963) which is intrinsic in the birthing process, whereby the idiom of enclosure, that has been discussed in different terms by Boddy (1989), is played out in these practices which contribute to forge femininity as reproductive. In this respect, practical and ritual aspects, the *qablat*’s experience, and the quality of *baraka*⁴⁷ accorded to them, mutually reinforce each other in providing a framework of meaning to the birthing process, in preventing its risks and in channelling women’s transition to a new, socially recognised (and recognisable) role – contrarily, as we shall discuss, to some ambiguities embedded in childbirth as experienced by unwed women, commonly referred to as *bnat*, i.e. girls.

Furthermore, it is to be noted that in this oasis birth is inscribed in each *qṣar*⁴⁸, where a *qabla* or, sometimes, more *qablat*, are socially recognised as skilled birth attendants within their family and neighbourhood. Sometimes *qablat* attend childbirth exclusively within their own *qṣar*; so these figures are clearly rooted in a precise social environment, where social bonds often overlap with kinship relations, all of which contribute to the social shaping of birth. However, prior to the involvement of a *qabla*, the birthing process is managed first of all by older women, who play a central role in shaping the reproductive experiences of younger generations. Young women’s experiences are also informed by the tensions between the languages of public health services – represented by trained midwives working for the Ministry of Health – and “authoritative knowledge” (Jordan, 1993; Davis-Floyd, Sargent, 1997) embodied by local, acknowledged and experienced *qablat*. In this sense, it emerges that such approaches to childbirth stem from a multiplicity of negotiations between different generations of women, whereby giving birth in health facilities – should these be available – also means giving birth outside the framework of one’s *qṣar* and one’s household, thus challenging social bonds and questioning the authority of trusted local birth attendants. The latter are often considered the only practitioners able to manage the most complicated

⁴⁷ In this sense *baraka* is to be understood as blessing or healing power.

⁴⁸ This oasis features seven *qṣour* (plural of *qṣar*). i.e. ‘settlements’ which compose the town: traditionally ‘walled villages’, they constitute the fabric of the oasis’ social life.

situations thanks to the quality of *baraka* they are ascribed with and that they are supposed to convey to the births they attend. Hence, giving birth in health facilities potentially individualises the event and, at the same time might – implicitly or explicitly – question older women’s power and authority, female exclusive competence on childbirth and social control over reproduction.

It may be argued that hospital birth, being sometimes perceived as individualizing and de-socializing, might also be seen as de-ritualizing the birthing process. Yet, as aptly highlighted by anthropological research on reproduction and childbirth (Davis-Floyd, Sargent, 1997) it could be argued that the medicalisation of reproductive health – as a cultural practice itself – entails different forms of ‘ritual’, such as the use of biomedical technologies. Despite this, in contexts like Ifli, the scarcity of resources, of significant social relations within local health facilities and the lack of trust towards its personnel, for instance, account for such places being perceived as unsafe or unable to grant ‘symbolic safety’ (Jordan, 1993) as the framework for childbirth.

Moreover, until recently, birth in hospital (rather a small dispensary) was often associated with women who were once considered as foreigners by the people living in the oasis. It actually dealt with women who belong to nomadic Arabic-speaking groups living in the surrounding region – some of whom have now settled down in the town or in its outskirts. Otherwise, women who are not originally from the oasis and lack of strong relationships either with the *qṣar*⁴⁹ they live in, or with a specific *qabla*, give birth in the dispensary. These examples are meant to emphasize that a novel social role is inscribed onto women’s bodies and – whether birth takes place in hospital or at home – social relations are made explicit and display their power throughout the birthing process. Starting from the specific example of the town for which I have chosen the pseudonym of Ifli⁵⁰, I have delineated some central elements and themes informing the birthing process

⁴⁹ *Qṣour* are sometimes referred to also as districts or neighbourhoods and are constituted by their original and by their newer areas with concrete houses.

⁵⁰ This pseudonym is the name – in the local variant of Tamazight - for subterranean water pools or sources where women take baths or – nowadays only in some of them – wash the laundry. Each *ksar* has - or had – at least one *ifli*.

because they provided me with a background to approach and problematise the issue of out-of-wedlock pregnancy and birth also beyond this oasis.

As I sought to highlight, the knowledge and practices which make up local models of birth are not static, being rather shaped by social as well as by structural forces. Indeed, the *qablat*'s practices are complex in so far as they are grounded in local medical pluralism (Obermeyer, 2000a) ; they are simultaneously challenged by some efforts of the State – initiated at the time of the protectorate and to which some local practitioners owe their recognition to – to promote biomedical models of childbirth by banning the role of local midwives and by casting their practices as intrinsically dangerous. While struggling for social recognition as practitioners, *qablat* are confronted, on the other hand, with increasing demands for 'safety' and health infrastructure by younger generations of women. So, medical pluralistic approaches to childbirth may entail changing attitudes towards childbirth throughout generations and, therefore, challenging the boundaries of a birthing system by calling even the role of trusted local birth attendants into question. These practitioners, indeed, do not constitute a threat to the symbolic construction of birth itself, for *qablat* and/or other kinwomen might well play a role all along the birthing process, i.e. before and after childbirth, by providing a ritual framework through various practices aimed at the recovering of women and the health of the newborn.

1.2 Nawal leaves the *bled*

The story of a young woman whom I call Nawal, will unfold in these pages: it has been key to this research, in so far as she has shared her story – or at least some of its crucial 'tangles' – with me throughout most of my stay in Morocco and also afterwards. Therefore, due to their significance and to the chance I had to observe them over time, some issues raised by her story will also be a '*fil rouge*' all along this work. As I met Nawal for the first time, in a 'shelter' for single mothers in one of Casablanca's poorest districts, she had just given birth to a boy, who was about a week old. She could hardly walk because of the episiotomy's stitches which still ached, she said. She looked quite quiet in telling her story and in describing how

she had dealt with her family since she found out she was pregnant until that moment: she told me that only her mother and her older sister knew where she was. Nobody else at home allegedly suspected she was pregnant and had given birth. However, she had quit her studies and her hometown right before her “*bac*”⁵¹ by publically motivating this with a job she claimed she had found in Casablanca or in Marrakech – both of which are not far from her hometown. She had actually moved to Marrakech first but – as I got to know through subsequent meetings – that turned out being from many points of view a very troublesome time⁵², during which she was even – coincidentally – seen by some acquaintances from her hometown. Those people probably started to circulate rumours back home about her living in Marrakech and – above all – about her being pregnant. While living in Marrakech Nawal had been to her hometown at least once, therefore she had to hide her belly wearing loose clothes and a coat, although it was on that occasion that her mother got to know that she was six months pregnant. I could actually witness some outcomes of the circulation of such – powerful – rumours one of the following times I met Nawal in the same shelter.

Her mother was there and urged her to come back to her *bled*, even only for one day, in order to show ‘everybody’ that she was not pregnant at all and that she had nothing to hide – she could show that she was in Casablanca, away from home, but only in order to work and support her family. Nawal’s mother spent some time talking to the head of the shelter and the rest of the time trying to persuade her daughter. Since she was not allowed to leave the shelter for one or two days without any guarantees she would be back to take her baby and without having started any procedures for the formal ‘abandonment’ of the child, Nawal found herself in an *impasse*. Moreover, I was subsequently told that her mother started urging her not only to leave the boy temporarily, but to abandon him as soon as she could – whether legally or illegally – or just to leave him on the beach in

⁵¹ High school degree.

⁵² She had found out that the man whom she considered her boyfriend had another partner who also lived in Marrakech.

Casablanca, once she left that ‘shelter’ (*foyer d’hébergement* or simply *jama‘iyya*⁵³, in Moroccan dialect).

So, in her mother’s view, Nawal would have been able to go back to her hometown and start her life over. Yet, during this second visit to the shelter, as I walked into the dormitories, I found Nawal standing in the middle of the room, feeding the baby while talking to another girl about her situation: Nawal was crying because her mother had just told her that her brother back home had heard rumours about her being pregnant and wanted to look for her. As I arrived, Nawal immediately showed me the certificate of birth – *l-‘aqd l-zdiyad* – of her son, a document that she obtained after her mother provided her with her own ID. She kept repeating that she was worried and scared about her brother searching for her. She also started repeating that she could not stay in Casablanca / Dar el Beida any longer. She intended to go to Marrakech the following day: “There is no place for me here anymore”. She meant that she could stay neither at that shelter nor in Casablanca any longer, both because she feared her brother and because she knew that that organisation would not host her any longer because – by talking to her mother – the manager had found out she had lied. Her lies dealt with the paternity of her son, which could potentially be ascribed to two different men, instead of what Nawal had told to the director of the shelter. The latter firmly decided to expel her as soon as possible since she did not want “any liars” there and because Nawal’s behaviour “might influence other girls and the interactions between them”.

Without knowing where she would go the following day, it was not possible for Nawal to silence the growing rumours about her because at that stage – even if she wanted – she was not allowed to leave the baby just for one day, since she would have been suspected of intentionally abandoning him. Moreover, unlike what her mother suggested, she did not want to leave the baby *at all* because she intended rather to raise him and – in the meanwhile – to convince his ‘biological father’ – whoever he was – to formally recognise him – by according him his name. Nawal’s

⁵³ This is the term used to indicate all types of NGOs, organisations, shelters that I will mention, whereas the other term used locally to translate “*jama‘iyya*” is the French “*association*”, with reference to the different kind of structures: I will use either the term *jama‘iyya* or “local organisation”, “local NGO”, “shelter”, “charity” – when needed – to specify the kind of organisation I will be dealing with.

mother, therefore, went away without achieving the goal of her trip to Casablanca. The following time I coincidentally met Nawal she was living – with her son – at a different shelter for ‘homeless’ people, among which ‘street children’, women and single mothers. She proudly showed me a brand new pair of *sherbil*⁵⁴ which demonstrated other attempts her mother had made (in vain) to convince her to leave the baby, forget Casablanca and resume to her life at the *bled* – her hometown.

These first ethnographic insights into the biography of Nawal and her social world aptly illustrate and help put the issue of the disruption of social and family ties potentially triggered by the occurrence of ‘illegitimate’ pregnancies into context. The discovery of her pregnancy and the birth of her son actually constituted a threat to the respectability of her family and at the same time – as Nawal states – a threat for herself too, for she was afraid of the reactions of her male kin. While Nawal did not explicitly refer to the impact of the rumours about her maternity in relation to future marriage plans, nor did she talk about ‘marriage promises’ from her partner, she rather put emphasis on his responsibility and on the efforts she intended to put into persuading him to recognise his paternity. Hence, Nawal sought to balance the stigma attached to her condition and its being ‘amplified’ by rumours within her community, by blaming her partner and by trying to convince first of all herself that her child will be given his father’s name.

In order to make meaning out of a complex situation where nobody really seemed to support her, at this stage Nawal re-configured all her relationships with the manifold aim of hiding from her family and community, silencing rumours about her and ultimately gaining some sort of legal recognition from the father of her son – which would make her ‘stronger’ even in case the rumours should be confirmed. These elements account for the process of re-definition of Nawal’s subjective experience at the very beginning of her life as an unwed mother. On the one hand she tried to meet the ‘moral standards’ required by local charities by representing herself as ‘innocent’ and ‘decent’ and by emphasizing her commitment towards her

⁵⁴ Leather slippers.

son⁵⁵; while on the other she sought to mediate the potential social implications of the acknowledgement of a *wuld l-haram* within her family and community; at the same time she still strives to gain her ex-partner's attention and, maybe, support. The effort to reach a balance among these multiple relationships and moral frameworks is emblematic of the complexity of the experiences of many unwed mothers I met. Yet this example in particular shows the simultaneous and unpredictable stakes embedded in subjective trajectories when girls have to cope with the threat of disruption of symbolic and social boundaries of birth. The impact of the revelation of out-of-wedlock birth is aptly exemplified by Nawal's – ironic – tale about her grandmother's reaction at the disclosure of the birth of Nawal's son:

“*Ana ‘arafi fi rassi hemla* [I knew that I was pregnant]⁵⁶, after a while. But nobody knew it. My grandmother, the one who was a *qabla*, as I told you...*mskina!* [the poor thing] When she found out that I had given birth to a baby boy in Casablanca...*Mrdat* [She got sick]! She's still sick and hasn't got up for a few days. I have met her *fi l-'arobiyya* [in the countryside] since then...Well, now there's nothing to do actually...*makaynach l-hel* [there's no solution] ” (Nawal, October 2011).

1.3 Breaching boundaries and threatening ties

The fear of disruption of family ties emerges, thus, as a first and central question accounting for the strategies and the multiple negotiations through which girls act upon the uncertainties embedded in illegitimate pregnancy. Indeed, irrespective of the heterogeneity of experiences and biographies, being a single mother in Morocco may threaten the private sphere of the family and is likely to be socially

⁵⁵ Avoiding and preventing the abandonment of infants and children is one of the main goals of most local organisations working on the issue of single motherhood in Morocco.

⁵⁶ “*'arafi*” means “I knew”, “*fi*” means “in/inside”, “*rassi*” means “my head” and “*hemla*” means “pregnant”. It is the way in which women express the acknowledgement of an ongoing pregnancy.

stigmatized, being emblematic of female⁵⁷ ‘illicit’ sexuality. Yet, according to gender differences ‘illicit’ heterosexual relations are largely widespread and publically visible throughout Moroccan society; nevertheless, they may be accepted as long as the ‘proof’ remain invisible and if the ‘proof’ – like children – is not displayed as such or hidden at all within one’s social context. So, as unmarried females, my informants – as soon as they discovered they were pregnant – were aware of finding themselves in a ‘challenging’ situation, because their condition breached legal and religious norms and – as I have started to highlight – thwarted local socio-cultural constructions of reproduction and birth. In this sense, their pregnancy might represent a radical turning point in their lives. I shall focus on the ambiguities, fears and anxieties, but also ambitions, marking the subjective experiences starting from the time they become aware of pregnancy outside what is socially and religiously defined as a legitimate union⁵⁸.

The awareness of the boundaries they have breached often implies the temporary turmoil or the definitive disruption of family ties or radical changes in women’s lives, such as (inner) migration, fleeing, moving or embodying strategies to hide one’s pregnancy within one’s household until childbirth. I wish to illustrate these points starting from the examples of two women I met at different stages and in different contexts along my fieldwork. Their stories have much in common even if they also differ significantly from many points of view, for instance in that Halima

⁵⁷ It is socially accepted and valued in men.

⁵⁸ However, there may be couples whose – socially recognised – union is based on ‘customary’ marriage, sealed by the reading of the *Fatiha*, the opening Sura of the Qur’an. These unions are not legally binding and are not recognised by the State, unless a procedure of ‘regularization’ is undertaken. Children born within this kind of marriage – if the fathers do not quit the household – are socially recognised as the couple’s children; they are instead illegitimate according to the law, exactly as if their mothers were unwed. They can be recognised as ‘legitimate’ children if parents undergo a procedure of ‘regularization’ of their union and of the children’s paternity. This kind of marriage is deemed more frequent in rural and mountain areas or in the poorest urban areas. It is debated if the 2004 Reform of the Moudawana – which has established the minimum legal age for marriage at 18 – has increased the number of *fatiha* marriages of underage girls to ‘circumvent’ the law. This sort of arrangement does not concern my informants, who were instead in so-called ‘free’ or ‘normal’ relationships, that were sometimes conceived of as ‘engagements’.

is from Casablanca and managed to stay at home, living with her family until the very end of her pregnancy by concealing her womb, so that nobody actually noticed she was pregnant. However, her ‘successful’ efforts were in vane: once she gave birth, she decided to keep her daughter but this fact was immediately disclosed to her relatives by another woman, the only one who knew about her pregnancy and to whom she had promised to give her daughter to be raised by her. Thus, the disclosure of the birth of her daughter was a sort of ‘revenge’ since Halima changed her mind and decided to raise her daughter instead of ‘giving’ her to that ‘friend’ of hers. Whereas Nawal – whom I have already mentioned to sketch out the potential impact of rumours on one’s social environment and their influence on the subject’s strategies – quit her hometown in the countryside precisely to escape rumours and stigma within and outside her family. Nevertheless, the strategies of concealment enacted by both ‘girls’ – whether by staying at home or by moving – were unsuccessful because of the ‘interference’ of other actors who knew or suspected they were pregnant. Rumours or the disclosure of their secrets implied some sort of disorder in the relations with their families. I will start with Halima’s story because it clearly highlights the tensions embedded in her attempts to find a balance between conflicting moralities and relationships.

“I lived a *normal* life – as long as no one knew that I was pregnant. Nobody noticed anything until the ninth month, since I went away. I went to hospital alone to give birth. Well, a friend of mine was the only one who knew that I was pregnant and she came along. Actually I had told her ‘*ana na’tek benti* [I – will – give you my daughter], that is, I had agreed to give her my baby so that she would raise her as her daughter – I couldn’t since I’m not married. But when I saw my baby, I changed my mind and decided not to give her to my friend. So my friend got angry and went to my family; she told them “don’t you know where Halima is...? She’s in hospital! She has just given birth to a baby”. She told them everything. Nobody could believe it, since I had been at home until a few days earlier. I was shocked and I’m still suffering a lot. Actually I was suffering also before I gave

birth...*j'étais malade moralement*⁵⁹...Not telling my family that I was pregnant was very hard for me, that's why I got sick, *I am* [still] *sick*⁶⁰: it's been a year since I last saw my mother and my brothers⁶¹. I do see my sisters – it's a moral duty, I *have* to. It's a huge problem in life, if a girl *theml wa twuled* [gets pregnant and gives birth] without telling anything to her family. It's really hard...My sisters told me 'how did you manage, without saying anything?!'. For nine months I was careful when I laid down to sleep, when I carried out housework... I always did everything, even the hardest work; I carried heavy stuff up the stairs and so on" (Halima, autumn 2011).

Halima's story illustrates first of all the efforts made to hide her pregnancy by simultaneously living with her family in order to protect both herself and her relatives from 'the truth': this is even more significant since she succeeded without fleeing from the others' view, rather by carrying out all 'normal' – or even the hardest – house chores that no pregnant women would usually be in charge of. These particular features aptly illustrate how she was disrupted by the news being revealed to her family against her will – despite all her efforts. In her mid-thirties, educated and having worked as a secretary for ten years, Halima had to quit her job as soon as she found out she was pregnant and could not have an abortion anymore; she claimed that her partner in the meanwhile had interrupted all contact with her.

At the time of our meetings – November-December 2011 – Halima's daughter was seven months old and they were still living in Casablanca in a different district than Halima's family. Although she might find other jobs, for instance as a teacher in private schools – as she already did after having given birth – she was bargaining for the temporary aid of a local NGO and a training programme and hopes to

⁵⁹ She translated in French the expression "*ana mreda nafsiyya*" – literally "mentally ill", but meaning here a broader suffering grounded in her estrangement from her most significant bonds.

⁶⁰ She refers here to the relationships with her family, although she subsequently also talked about her fatigue and recurrent headaches.

⁶¹ Her father passed away a few years earlier.

eventually be “accepted” by her family. The ways she acted upon her condition both during pregnancy and afterwards show that she had always thought of a sort of ‘reconciliation’ with her family: staying at home and not giving up her ‘normal’ life was a choice intended to leave her social relations unchanged. Indeed, she planned to stay away just the time to give birth and to give the baby to somebody else, in order to resume her existence of *bent*, who strived for her lost ‘normality’. Although these plans were turned upside down by the unpredictable reaction of her ‘friend’⁶², she ended up staying in Casablanca, where she kept meeting her sisters. This suggests, for instance, that significant social bonds might not be disrupted for good by the occurrence of out-of-wedlock pregnancies and births: after an immediate radical neglect by one’s family, a *bent* – as in Halima’s case – might be able to re-gain her family’s trust over time through the relationships with some members – in this case her sisters.

Twenty year-old Nawal was also still in touch with Fouzia, her older – twenty-four year old – sister, who at the time was living in Casablanca too. However, Nawal gave birth alone in the hospital where she had been sent by the charity which now gave her shelter; she had gone back there a few days later to accompany one of her friends and some women she had met in hospital were surprised to notice that she was still wearing the same clothes: “How come you’re here? You can hardly walk and you are still wearing the same clothes [after the birth of your son]!”, they had allegedly told her. By this, Nawal hinted that her experience of birth and post-partum was spoiled of some recognisable core features which mark birth and that she embodied with her presence outside her home despite her weakness. A few days afterwards, Nawal’s sister and her ‘*fiancé*’ had visited Nawal at the shelter and had brought clothes for the baby, but Fouzia’s life looked quite precarious as well because she could not find a job and could not help Nawal. In Casablanca, one of their mother’s sisters lived with her family, where Nawal eventually moved to – in a *bidonville* in one of the growing suburbs of the city. Hence, besides working in a café she also helped her aunt with her five kids and with the cooking and various house chores. The circumstances in which she moved to her aunt’s – about six

⁶² I could not further discuss whether it really dealt with a ‘friend’, a neighbour or rather an acquaintance, somebody whom she just intended to give the baby as an informal kind of ‘adoption’.

months later – were due to the fact that she had not to take care of her own child anymore, so she could work and stay with her extended family. This example accounts for the re-arrangements of family ties implied by a complex situation like Nawal's: the preservation rather than the disruption of these family ties is not merely meant as a support for her, but had different stakes, for instance that of recovering her condition of *bint* within the household, a 'request' that she often contested and sought to resist.

At each stage of Nawal's itinerary as an unwed mother, her own mother urged her to give up everything she was doing – whether raising the baby and/or a job – to go back home. In her case – unlike others – Nawal wanted neither to go home to her parents' nor to stay at her aunt's, because that would not have meant being 'reconciled' with her family or her origins: the apparent 're-composition' of family relations – even if possible and desired by her parents – in Nawal's view – would have reinforced existing conflicts and tensions between the household's economic constraints and her aspirations. Such ambivalent attitudes toward her family emerged for instance as *Eid l-Kebir*⁶³ approached and Nawal had to raise money to buy presents, new clothes, the tickets to go to her parents and to pay a *morabbiya* – a child caregiver – with whom she would have left her five-month-old son for a few days⁶⁴.

Being away from home was challenging because she still had her duties as a daughter: as such, she was supposed to work in the city to send money home and to provide material goods on the most important festivity of the year; at the same time even if everybody within her household now knew about her son, she was not allowed to bring him home on *Eid l-Kebir*, so she was compelled to leave him at a *morabbiya* for a few days at a stretch, without being able to see him, nor to provide for milk and nappies day by day, since she had had to buy all the caregiver needed for about a week, which implied a further financial effort. What emerges also with regard to other girls' pathways, *Eid l-Kebir* and also *Eid l-Fitr* – at the end of the month of Ramadan – shed light on the overlapping duties, relationships and material needs, which are exacerbated by the status of unmarried female

⁶³ The way the Feast of the Sacrifice, *Eid al-Adha*, is commonly called in Morocco.

⁶⁴ I will further elaborate on this point in Chapter Five.

workers as income producers and by patterns of consumption based on the money or goods they provide and upon which their families rely. It emerges thus, that in these relationships economic and material expectations are combined – sometimes in ambivalent ways – with filial and social obligations.

The ‘struggle’ to reconfigure one’s life as an unwed mother and to fulfil different or conflicting ideals of gender and social roles were sketched out by Mouna. She sought, indeed, to make meaning of her experience and – as she put it – of her “faults” by drawing on her sense of responsibility towards her son and society and on further study or professional achievements. This is meant to ‘balance’ the fact that she had deceived her family’s expectations by having a baby outside marriage; this search for meaning and for ‘balance’ simultaneously helps Mouna shape her new self and face the challenges implied by her condition.

Mouna often emphasizes that she actually longs for her previous self, that is, for her life as a daughter and university student, whom her parents were proud of – being the only one in her family who had reached such an achievement.

“Sometimes I wish I was myself before becoming the mother of Kawtar, but now I strive to be able live with her. I know I can’t be the same again anymore. And I don’t mind what people think or what my family thinks. They don’t want to talk to me nor to see us... I know I have disappointed them all. They relied on me, they trusted me, they wanted me to study, to get a degree and find a good job. I have messed it all up! Now, even if I have just lost the job I had found⁶⁵, I will hopefully have some other chances – thanks to another degree I earned from the support of the *jama’iyya* [charity]. Last year, when I attended that course, I had such a good time! It was like...being back to the times when I was studying at the faculty [*à la fac*], spending time with friends and other students...meeting for coffee and so on...But now, *safi*, it’s already over. At times I am very tired; I am sad and I wish I could leave

⁶⁵ As we agreed at our meeting on the phone, the previous day she told me she had lost the job at the office where she had been working for a couple of months.

this neighbourhood⁶⁶ soon, I don't want my daughter to grow up here...Even if some of our neighbours are kind and helpful" (Mouna, October 2011).

Mouna had expressed these feelings of longing for 'her self' as a daughter and as a student also in a video interview for a documentary which was shown during a conference on unwed mothers organised by the local NGO by which Mouna and her daughter have been supported. In the interview, Mouna stressed that she felt deeply sorry for her family but that she could not 'go back' to her previous life – even if she wished to sometimes – since she was also compelled to live up to social expectations towards herself as a mother who could not leave her daughter. The documentary had been made by a French-Moroccan director and was supposed to be broadcast on French and international channels commonly available in Morocco too. However, Mouna was not afraid of showing her face and telling her story to a very wide audience, which might include her family and acquaintances as well. These examples may be seen as emblematic of the disruption of some family ties, but also, to a certain extent, of the simultaneous transformation of existent relationships and of the creation of novel or different kinds of social bonds. The latter may indeed contribute to re-signify the context in which the birthing process is experienced by unwed women.

§ 2 Dilemmas of disclosure⁶⁷

2.1 Unwed motherhood between concealment and ambiguities

Socially and culturally shaped practices of birth that I have dealt with in a rural context through the experiences of *qablat* and women of different generations illustrate how notions of personhood and gendered constructions of the self are

⁶⁶ What I translate as "neighbourhood" or "district" corresponds to *hay* or *derb*, accompanied by a name. I do not mention them in this text. However, not all names of the districts of Casablanca are composed in this way.

⁶⁷ A contribution based on the aspects discussed in this paragraph is considered for publication in an edited volume published by Cirsde (Centro Interdisciplinare di Ricerche e Studi delle Donne e di Genere - Torino) in 2014.

inscribed in a set of relations which call concepts like ‘the individual’ and ‘autonomy’ in relation to reproductive processes into question and lead to problematise the role played by kinship ties and the authority of figures like local birth attendants. I have emphasized how the process of birth rests upon local embodied metaphors and constructions of the body in relation to notions of time and to the ritual elaboration of risk by local practitioners and/or older kinswomen. I aimed to stress how knowledge and practices constitute symbolic resources (and in this case also the only available resources) while contributing to the socialization of the process of birth, through which social bonds are reinforced or created.

Thus, in a relational perspective notions of personhood as the “coming into social being” (Conklin, Morgan, 1996: 658) stem from moments of transition – like pregnancy, birth and postpartum – whereby change has to be inscribed and handled within a ritual framework, which – besides managing uncertainty – puts the new mother into being as a social being. This does not happen in the case of ‘hidden’ and out-of-wedlock pregnancies and births, however, young women go through processes which may contribute to re-signify these experiences through other social and ritual frameworks since “bodies as well as persons are the products of cultural practice” (ibidem: 659). Examples of hidden pregnancies and concealment as a key feature of out-of-wedlock pregnancies are in this regard emblematic because girls are not supposed to socialize these experiences as they constitute the embodiment of ‘shame’. Hence, instead of being socialized, these births have to be hidden or reconfigured to be turned into something socially acceptable.

The construction of a gendered subjectivity according to a precise symbolic framework based on sexual initiation and motherhood as criteria for distinguishing married women from virgins and “women who are reproductive from those who are not yet, or not at all” (Jansen, 1987 : 5) is questioned by out-of-wedlock births as experienced by the unwed mothers. Hence, the major distinction between *l-mra* and *l-bnat*, based on marital status, suggests the ‘basic’ ambiguity of their status of ‘unwed mothers’ – young women who have given birth outside marriage. This might also apply to other women, such as widowed or divorced women, yet they find themselves in different sorts of potentially ‘ambiguous’ situations, since – unlike unwed mothers – they are not supposed to be virgins anymore. By

discussing the social roles and the gender categories concerning women who “cross the boundaries of femininity” (Jansen, 1987 : 10) by living ‘without men’ – for instance by certain uses of the public space, by performing certain tasks and activities – Jansen questions the extent to which these Algerian women may be understood as “anomalous” (ibidem :11) or marginal and for what social and economic reasons. Following these suggestions, I also move from the questioning of “the ambiguous boundaries between the genders and of what happens when these boundaries are crossed” (ibidem: 11).

Out-of-wedlock pregnancy itself embodies the proof of ‘illicit’, i.e. female out-of-wedlock sexuality, whereby concealing it or making it visible might make the difference: indeed, as it has often been stressed in my fieldwork, if such a pregnancy and children remain ‘hidden’, a *bent* might enter their social world once again, even if her family knows she gave birth. Her children might even be raised and recognised by her family, as long as they are not ascribed to her – notably if they are socially recognised as their grandmother’s children. So, socialization, the ritual transition to the status of mother and her social recognition as such, the emphasis on fertility and its role in social reproduction are necessarily to be rethought as they are – as a matter of fact – reconfigured in order to (potentially) fit into the social order.

Therefore, at the core of the experience of maternity for unmarried females we find the negotiation of their status as mothers without having acquired that of women through marriage. According to a normative framework, the construction of unwed mothers as gendered subjects may be seen as ‘irreversible’ but also as ‘incomplete’ or ‘unachieved’, in so far as out-of-wedlock motherhood significantly re-orientates their lives and impacts the relationships with their families and with their partners – whether they are ‘biological’ fathers of their children or not. Indeed, I aim to emphasize that the construction of femininity as unwed women who experience motherhood outside the framework of institutionalised and socially recognised frameworks does not follow linear pathways. Even in the cases in which these young women subsequently get married, the role played by marriage in their biographies is not only a way in which they seek to recompose the social order, being rather an attempt to reaffirm moral and social boundaries they have previously breached.

Above all – if we think of the children’s ‘biological fathers’ – what distinguishes men and women with regard to out-of-wedlock pregnancies is obviously the fact that pregnancy is embodied as a biological process by the females and hence (potentially) made visible: this constitutes proof of the transgression of moral and religious boundaries as if it was acted upon solely by the female, while the male may (more) easily remain hidden. This constitutes – as a fact – an ‘embodied’ asymmetry between female and male involvement in out-of-wedlock relationships. Most of my female informants actually complained about men ‘fading away’ and denying any responsibility as soon as they knew about an unexpected pregnancy; according to the girls, most partners deny their involvement by drawing on the lack of ‘scientific’ proof of paternity – or on the difficulties of providing them for most women. In the words of a lawyer who volunteers in a charity for unwed mothers:

“The cases all look alike: the father doesn’t acknowledge his child and doesn’t want to get married; he doesn’t want to do any test to prove his paternity. Girls who had torn up or cancelled all pictures of them with their boyfriend (or even with their families or neighbours), in a moment of anger, for example, had no proof and we had to start all over again in the search for ‘proof’ of their relationship. Earlier, in the 1950s, for example, a written contract was not an obligation and going to the ‘*adul*’ meant spending money – only the French and some urban educated people did it. But above all people had not the mentality of denying the existence of [a relationship with] women and children. Everything from marriage through a *fatiha* [by reading the first *Sura* of the *Qur’an*] to a *talaq* [divorce] was made orally, society was based on oral communication. (...) Nowadays, it is very difficult to have a DNA test: the judge must be convinced and if there is no engagement, nor anything else... if it’s a ‘free’ relationship, one cannot even ask to have a DNA test done, as out-of-wedlock relationships are forbidden and potentially sanctioned by the law, according to article 490 of the Penal Code⁶⁸. We seek to ‘circumvent’ the law as if the couple was

⁶⁸ Extra-marital heterosexual relations may be sanctioned with a period going from one month to one year imprisonment.

actually engaged, as if there was a ‘marriage promise’...in that case the man might want to know if he was the father and not somebody else. We strive for the possibility of accessing the DNA test to verify the child’s paternity also in the case of ‘free relationships’. Why should children pay [carry the stigma of being considered a *wuld l-haram*] at somebody else’s place?” (Lawyer at an NGO, May 2011).

This excerpt from my ‘early’ field notes introduces an issue lying at the core of out-of-wedlock relationships once the birth of children takes place: its occurrence outside the framework of a legal union – a registered marriage contract, *l-‘aqd l-zweij* – its disclosure to the male partner who might deny his involvement and the interruption of any contact between the two. In cases of informal relationships which have not been officialised by a family gathering or by a celebration, it may be increasingly hard to ‘produce’ proof of the existence of any relationship at all (Mir-Hosseini, 1994): this is the case of most of my informants, also among the beneficiaries of the above mentioned NGO. This is also why the DNA test – commonly called *l-tahlil l-jinat* [the test of the genes], which is interestingly often represented as a blood test – has entered the rhetoric of unwed motherhood in the non-governmental and media domain, although none of my main informants in the field was actually in the condition of applying to have one. It is also worth noting the stress put by the lawyer on the ‘denial’ of pre-existent yet informal ties at the heart of contemporary couples – at least in the cases she deals with as a charity volunteer and lawyer. This feature is in contrast to the ‘oral society’ of sixty years earlier, where relationships were managed without written and registered contracts.

Whereas, the institutionalisation of relationships through the registration of marriage and more recently by means of a kind of partial and ambiguous acknowledgement of out-of-wedlock births (through the introduction of DNA paternity tests) seems to further increase the dichotomy between what falls inside and what falls outside the law. Yet, as aptly stated by the lawyer, on the grounds of

[<http://adala.justice.gov.ma/production/legislation/fr/penal/Code%20Penal.htm>; accessed January 2012]

her experience with unwed mothers' dossiers, the categories and the cases suggested by existing legislation might actually be 'manipulated' in order to make informal relationships seem closer to 'official engagements' before the law, which – according to the article 156 of the 2004 Family Code – encompasses as legitimate the birth of children conceived within the period of (official) engagement. The approaches and the uses of legal tools and the 'contextualisation' of unwed motherhood within the local legal landscape definitely provide interesting insights into the social dynamics and the political processes concerning the reform and the implementation of the – now ten-year-old, but still seen by many as “new” – *Moudawana l-ossra* [Family code], a process which has implied the massive involvement of a wealth of heterogeneous political forces, including several women organisations (Buskens, 2003; Sadiqi, Ennaji, 2006).

Attention to this recent process of juridical reform and the local politics of gender, by which they are informed, provide some background to the understanding of some discourses and practices fostered also by the organisations with which I dealt. I shall bring particular attention to the process by which reference to so-called 'marriage promises' has come to be mobilised and in so far as it weaves into the narratives on and of unwed mothers, notably in the interactions between them and the dedicated charities.

2.2 Promises, proofs, codes

I have started (§ 1) drawing attention to marriage in Moroccan society due to its centrality as the institution upon which kinship and social reproduction are based. At the same time, the understanding of this role gives way to the problematisation of its symbolic importance in the rhetoric of unwed motherhood in Morocco and notably in discourses on so-called '*marriage promises*'. Marriage, 'marriage plans', marriage 'intentions' are systematically evoked by social workers working on cases of unwed mothers and by the girls themselves in the strategies they foster to seek social legitimization for themselves and their children. As suggested by the excerpt of my dialogue with a lawyer, so-called 'marriage promises' – i.e. alleged intentions to marry expressed on an individual level between the partners – are not legally binding, indeed they are not associated with a socially recognised *khotba*

[engagement], i.e. an engagement ceremony with witnesses and proof like pictures and presents. Building on a study on changing gender relations conducted in the 1980s in a northern-central Moroccan town, Davis and Schaefer Davis (1993) argue that a young male “may decide not to marry a girl because she has given in to his sexual advances, despite the fact that he promised marriage as part of the process of persuading her to become intimate” (ibidem: 88). A similar framework is evoked by girls who speak of marriage promises made to them individually by their partners, to whom they ascribe the ‘biological paternity’ of their children. As it has been put during a meeting with the lawyer and a social worker in a ‘*centre d’écoute*’ :

“Everybody says she has a marriage promise or a [marriage by the ritual of] *fatiha*! Given that sex outside marriage is illicit and sexuality is a ‘taboo’ at home, then when they find themselves pregnant, girls say their boyfriends had promised to marry them...but many girls know that those relationships are ‘free’ and won’t end up in marriage” (social worker, summer 2011).

Despite the awareness of the ambiguities surrounding the claims of marriage promises, this sort of rhetoric is increasingly widespread in the NGO domain, since it is part of the strategies fostered by potential beneficiaries to gain trust from social workers within a precise moral framework in which certain ‘standards’ and ‘criteria’ are set in order for girls to be supported and benefit from the NGO programmes – such as claiming monogamous relationships without the implication of monetary transactions. So, the girls’ rhetoric of the ‘marriage promise’ as the only acceptable moral framework where birth can be situated and the local NGO’s language [and ‘moral standards’] mutually influence each other in framing discourses on marriage and of the other types of informal relationships. The fluidity of the boundaries of formality and informality is not a mere matter of labels, because this may impact directly on the legitimate or illegitimate status of children.

At the same time, if we take the lawyer’s explanation into account, it emerges that the mobilisation of the concept of ‘marriage promise’ in the French formulation of

“*promesse de mariage*” – even in the cases in which no proof is available – is also drawn upon to seek possible forms of legitimization before the institutions, “as if” a ‘real engagement’ had existed. In this sense, the cases might be presented as ‘engagements without proof’, yet drawn upon as ‘real’. The reasons for this strategy – which has not had concrete consequences so far – are at least twofold: on the one hand this choice might avoid the equation between such ‘free relationships’ and prostitution – whereas according to the Penal Code, any sexual intercourse outside marriage is potentially equated to *fasad*, prostitution – while on the other these organisations strive for access to the DNA test to verify biological paternity “automatically” in *any* out-of-wedlock relation – not just when official engagement can be demonstrated. These demands are motivated – as claimed by some activists – by the desire to protect children’s rights “to a name” and “to a father”. Whereas, the article 146 of the Family Code establishes that filiation – resulting either from legitimate or illegitimate birth – is the same in respect with the mother.

However, unwed mothers cannot transmit their name to their children, because according to the Law n. 37-99 (2002) on the civil status, the patronymic has to be passed on to ones descent (Cherkaoui, 2010): although it is not made explicit, the name can be transmitted only by the father. Hence, unwed mothers register their children at the civil registrar – within 30 days⁶⁹ from birth and provided they have a birth certificate – by choosing a name, a fictive name for the supposed biological father preceded by – ‘*Abd*’⁷⁰, and a patronymic chosen by a list that is provided her at the civil registrar. The 2002 law has introduced the registration of children born out-of-wedlock, that was not compulsory until that time. Unwed mothers are supposedly allowed⁷¹ to ascribe her surname to her children, although she cannot do that without the authorisation of her own father or brother: it deals with a sort of legal void, that is dealt with according to each civil registrar. Eickelman (1989) recalls the centrality of names as basis of social identity and of ideas of the person: in this respect, it is to be noted that the legal registry of births has been introduced

⁶⁹ Otherwise they may undertake a further legal procedure to be able to register them.

⁷⁰ Followed by one of the sacred names of God.

⁷¹ According to a recommendation of a court in Tangier in the 1990s (Cherkaoui, 2010: 82).

during the French rule, when family names (*kniya*) were also made obligatory (ibidem: 138) for administrative and identification reasons.

What lies behind so-called ‘marriage promises’ then? Are they such or are they just ‘evoked’ or taken as a strategy to gain trust and/or social legitimization? As we have seen, most of the time they do not have direct legal outcomes – as the *bnat* hardly manage to demonstrate they were ‘officially engaged’ or had a ‘promise’, so I shall argue that this kind of discourse and representation (of ‘free relationships’ as if they were engagements) has been incorporated both in the strategies fostered by social activists who strive for alternative forms of juridical recognition for unwed mothers and their children and by women when they fashion their stories in order to conform to normative imageries of couple and gender roles.

Besides the rhetoric of ‘marriage’ and ‘marriage promises’ fostered by girls and local organisations which work as advocates in the field of unwed motherhood, other sorts of discourses and ‘strategies’ are appropriated by girls in order to cope with their situation and to represent themselves towards other social actors – such as NGOs, social workers, health institutions. Notably, the issue of violence is often called into question in the narratives of ‘unwed mothers’ and in their representations of sexuality and of the relationships with their partners; the place of violence and coercion has also been dwelt upon by research on young women’s narratives on “sexual scenarios” (Cheikh, Miller, 2011) and its representations, in some of which the lack of consent and male manipulation occupy a central place in giving an account of sexual experiences in which not only the family’s consent to the girls’ sexuality is outraged, but sexual intercourse occurs above all against the girls’ own will, desire, consent.

Along my research this aspect emerged as a crucial, yet contested one, in calling upon issues like female agency in the negotiation of sexuality and in the ambivalent representations of sexual violence within the symbolism of unwed motherhood. Indeed, evoking sexual violence and representing oneself as a victim might avoid addressing female will and involvement. Narrations of sexual violence might actually help young women to ‘justify’ to a certain extent their actual situation (Cheikh, Miller, 2011), as in the cases of some of my research subjects, whose narrations hinted that they attempted to avoid their transgression might

appear as a claim, a choice or a desire. Also, it is to be mentioned that women who claim to be victims of sexual violence might be blamed for having “provoked” or “searched” for it by their conscious frequentation of public and potentially ‘ambiguous’ places and first of all by their contacts with male partners. In Chapter Three I will discuss this theme further, but it was worth raising while presenting the manifold discourses and practices surrounding the representations of unwed motherhood as well as the – multiple – ways in which girls seek forms of moral and social legitimization.

Employees of the civil registrar and midwives of public health services – with whom I have been informally in touch stressed: “Nowadays there is no *hshuma*...neither respect, nor religion anymore. Unfortunately!”. In their view and according to their experience in their workplace, it is ‘nowadays’ a routine practice that girls regularly turn up at dispensaries, health services and municipalities without the fear of being judged, thus without seeking to dissimulate their ‘shameful’ condition. According to these informants, who work in two domains that are called upon to deal with unwed mothers on a daily basis, it would rather be the personnel of public services who should pay attention not to discriminate them from other users and patients. These are the attitudes of two professionals working in these highly relevant domains, however they mirror the views of other nurses and doctors, whom I dealt with across fieldwork in public health settings:

”We receive whoever turns to our service, we cannot refuse anybody. We have lots of unwed women giving birth here and they come from all over Morocco. They arrive by bus to give birth here. It’s well known. Some other women instead do not want to be identified as unwed mothers, but it happens less and less, because they know that here the procedure is ‘simplified’ if they have their ID; if not, they may be helped by a charity. The police rarely intervene nowadays. Unwed motherhood has always existed, but if we look at the numbers who give birth here, well, we might have the impression of an increase in this phenomenon. Maybe younger generations have more chances of pre-marital sexual contacts...? Maybe there is a liberation of

sexuality...? Maybe they have no sexual education at all: these might be some of the explanations for out-of-wedlock pregnancies. There's a great ignorance of sexuality even if everybody seems to be informed, and it's not only a matter of information on contraception" (Health professional in a public health structure; autumn 2011).

Hence, these practitioners stress that in hospital, for instance, the personnel is not allowed to "refuse" nor to "deny care" to anybody, including unwed labouring women without identity documents (IDs). Do these informants actually hint of the 'weakening' of local notions of 'shame' and their role in shaping social relations? Do these views suggest that 'shame' is not powerful anymore in preventing people from breaching norms concerning sexual relations and filiation and then turning to hospitals and to local authorities without fear of being caught or sanctioned by the police and maybe not even by society? These statements make everything seem 'technically' easy for unwed women who are received at institutions such as public hospitals and administrative offices, whereby the same actors shift attention towards the situation of children born to unwed women; children are depicted as the "true victims" of this phenomenon and of the youth's illicit pleasures, in that – even if "money is given to unwed mothers", as underlined by one of these 'institutional' informants – their sons and daughters are condemned to bear the social stigma of bastardy all their lives.

Therefore, the changes that have occurred in recent decades in the family code as well as in the conditions – of apparent decreased stigma – in which some unwed mothers access public services and deal with institutions and non-governmental bodies are worth noting. However, these elements still do not give a thorough account of this social reality, whose increased mediatisation is partial and necessarily univocal, whereby the emphasis on 'shame' and 'taboos' might dismiss social and structural features underlying the condition of unwed motherhood in Moroccan society.

After having delineated a few key issues in the anthropology of unwed motherhood in Morocco, I will now make clear the normative framework and the broader context in which this reflection has to be situated. Taking religious sources as a

frame of reference, it is to be noted above all that according to the Qur'an⁷² and to the *fiqh* (Islamic jurisprudence)⁷³ any sexual intercourse outside the framework of marriage constitutes *zina* ("fornication") which encompasses all pre- and extra-marital sexual relations. Sanctions are between a month and a year of imprisonment for any kind of sexual relation (article 490 of the Penal Code), implying all types of sexual relations, including forms of prostitution.

From a penal point of view, so-called 'illegitimate pregnancies' result from any illicit sexual intercourse (*zina*), including prostitution and sexual violence. The Penal Code punishes any illicit sexual act as "decency offenses" (art. 483-496) with from one month up to two years of reclusion and with a two to five hundred dirham fine (article 483). Any act defined as "decency offenses" can be sanctioned with two to five years of prison if it does not encompass violence (art. 484); years of reclusion increase if it deals with rape and sexual violence perpetrated on minors (Naamane-Guessous, Guessous, 2011). Judges – according to article 475 of the Penal Code – may allow men to marry their rape victims; this might be accepted or even sought for by the family of the victim, even though until recently this kind of marriage ended up with repudiation, which was easier before the last reform of the *Moudawana* in 2004. This issue, however, is still widely discussed as in March 2012 a sixteen-year-old girl from a Northern Moroccan town committed suicide after having been married off to the rapist according to the interpretation of the article 475 of the Penal Code and with the agreement of her family⁷⁴. This case stirred debate on the reform of the Penal Code and against the criminalisation of

⁷² Sura *Al-Nur*: XXIV, 2.

⁷³ Morocco adheres to the Maliki school.

⁷⁴ This case has triggered several street demonstrations and has become a national – and international – contested issue. Following these mobilisations and almost two years after the suicide of Amina Filali, on the 22nd January 2014 Moroccan deputies have voted for the abrogation of the second paragraph of this article, according to which rape victims could be married to the author of the violence. Yet, in the press it has been highlighted that the article speaks of 'circumvention' and 'kidnapping' of a minor, and not explicitly of sexual violence; it is also argued that this article is drawn upon to 'dissimulate' "the scandal" ("*Trois vérités sur l'amendement de l'article 475*", www.telquel.ma; accessed 18th January 2014).

out-of-wedlock sexuality⁷⁵. However, a few months after the “Amina Filali case”, the member of a local organisation which defined itself as part of a movement “for the renewal of the rights of women within the framework of Islam” – during a private meeting – provided me a different version of this story. The woman claimed that one of her fellow activists, living in the whereabouts of Amina Filali’s town, told her that the sixteen-year-old was not a victim: in this account she was represented as a ‘loose’ girl, who used to ‘go out’ with men, because she wanted to. Hence, whatever happened to her was in this account the mere outcome of her ‘loose sexuality’: she was said having lived with the man, who had always been represented as her rapist; potential ‘clashes’ with his family were given as further triggers to her suicide. In this view, basically Amina was responsible for what had happened to her and her case had been used for instrumental, political reasons by human rights and secular-feminist organisations against the newly-elected Minister of Solidarity, Women, Family and Social Development⁷⁶, “because she is veiled”, my informant claimed.

2.3 ‘*Naissance en milieu surveillé*’⁷⁷

To which extent, thus, does this normative framework impact on women’s lives and on unwed pregnant women or unwed mothers in particular? I will start by illustrating how these measures inform their experiences of pregnancy and birth. Starting from 1993 (Naamane-Guessous, Guessous, 2011) all out-of-wedlock births are – or should be – declared to the police by the health services where the birth takes place. As I could observe during my fieldwork, social workers might be employed by hospitals: if so, they are in charge of the legal procedures women

⁷⁵ Hence, out-of-wedlock pregnancies themselves are dealt with by the Penal Code, which includes any illicit sexual relation (art. 490) and prostitution (art. 497-504) among the sexual relations from which they originate. The definition of ‘illegitimate’ pregnancies and births also depends on the changes included in the family code, according to which pregnancies that have originated from sexual intercourse occurring during official engagement can be considered ‘legitimate’.

⁷⁶ She is a member of the same Islamist Party of Justice and Development (PJD - *Ḥizb al-’adala wa’l-tanmiya*) as the Head of the government.

⁷⁷ This expression is used in health policies to indicate childbirth in health facilities – as contrasted to home birth.

have to go through if they want to ‘abandon’ their children, i.e. to give them to an ‘orphanage’ where they might eventually be given in custody with a *kafala* by a couple or by a single woman⁷⁸. In the case of unwed mothers, the role of social workers within hospitals is particularly meant to prevent the ‘informal’ and anonymous abandonment of children in/outside hospitals and forms of “child trafficking” and informal or “secret” adoptions (Bargach, 2002), all of which were and are still frequent in Casablanca – and elsewhere in Morocco.

According to legal procedures, when girls declared their intention of leaving their children after birth, the police had to reach her in hospital, collect her data and call her formally to a public prosecutor, to whom she was supposed to turn twenty-four hours after having given birth. Finally, after a questioning she was supposed to be imprisoned – with the newborn – for ‘fornication’ (Cherkaoui, 2010). Such measures raised indignation within Moroccan civil society, therefore starting from 1996 girls are not supposed to be imprisoned after having gone to the *procureur* (public prosecutor) and having obtained a certificate of birth, the *‘aqd l-zdiyad*, and they must not go back to local authorities to be judged, as it was previously envisaged. Nowadays, although unwed mothers might be condemned, their case is usually not prosecuted. According to the Moroccan sociologist Naamane-Guessous (2011) the fact that hospitals had to denounce the birth of ‘illegitimate children’ pushed girls to give birth in places other than hospitals; so they tried not to deliver in a public hospital (*l-ssbitar dyal makhzen*⁷⁹), where the police was more likely to intervene. Nonetheless, even births occurring in public hospitals might not always be declared – since it also depends on the personnel and on their potential involvement in networks of informal adoption, for instance.

⁷⁸ This possibility has been introduced in 2002 and allows the *kafala* of girls only: “The underlying prohibition of a woman offering the gift of care to a boy is that there is no incest prohibition between them. This interpretation is at best reductive, if not unfounded if compared to the scenario of a couple adopting a girl with whom the *kafeel* father has equally no incest prohibition”(Bargach, 2002: 281, n.1).

⁷⁹ Mohamed Tozy (1989) aptly defines the meaning of *makhzen* as follows:”Celui-ci est plus qu'un mode de gouvernement: il est à la fois manière d'être et de faire, qui habite les mots, épice les plats, fixe le ceremonial des noces, tisse les habits de circonstance et détermine le rituel de référence qui fixe la forme et le contenu de la relation entre gouvernant et gouvernés” (ibidem: 158).

A recent study (Cherkaoui, 2010) – conducted both with quantitative and qualitative methods at national scale on behalf of a local NGO estimates that the number of unwed mothers with at least one child would be – between 2003 and 2010 – of 210.343 at the national level and that in Casablanca it would amount to 21.135 in the same period, hence four times the quantity that had been estimated for the six previous years. Indeed, a precedent study had been realised at a smaller scale – circumscribed to Casablanca’s metropolitan area – in 2002. Data emerging from other estimations – it does not deal with real statistics – is that the average of out-of-wedlock births in the country would be of 153 per day, and that of abandoned newborns would be 24. Another data to be underscored by the press and NGOs is the percentage of unwed mothers on the overall number of women giving birth in hospitals – and outside: in 2009 it has been estimated it was up to the 4% of the total.

Thus, I have sought to explore if the few cases of home birth in urban contexts – mainly in Casablanca – featured ‘unwed mothers’. I have actually not encountered such cases but it has been suggested by some social workers that among the rare cases of home birth in the Casablanca area, there might be some girls living in nearby *douar* (villages in the countryside around the city)⁸⁰ who do not reach hospitals and instead give birth at home. Thus, according to my research in Casablanca and to the body of literature and reports on this topic, ‘non-hospital’⁸¹ or home birth for unwed women does not currently seem a relevant phenomenon. Given the paucity of available quantitative data, it is hard to assess if the role played by civil society against the intervention of the police in maternity wards is exactly what lead to the withdrawal or the weakening of the role of the police in some public hospitals. Yet, with regard to this process, the role played by local NGOs – at least in the context of Casablanca – seems to have been key, as highlighted by some members of local organisations for single mothers and health personnel.

The “prevention of newborn and child abandonment” and the bureaucratic procedures associated with the girls’ hospitalization and their release from hospital

⁸⁰ The names of some *bidonvilles* include the term “*douar*” .

⁸¹ In places other than home or hospitals and clinics.

are at the core of the local NGOs' work in their outreach programmes in some Casablanca hospitals: first of all, NGOs' social workers are given the certificate of birth from the hospital and give it to unwed mothers once they are released, after having retained a copy of the new mother's ID (if she has one), in order to 'keep track' of these women in case of child abandonment. Nevertheless, even in the hospitals with 'partnerships' or 'agreements' with NGOs – which correspond to decreased intervention of the police in the maternity wards – unwed labouring women might be physically or verbally abused, humiliated or insulted by the personnel because of their 'status', or neglected because they cannot bribe the personnel with some money. These episodes have allegedly decreased in hospitals which collaborate or which have accepted the presence of 'external' (i.e. NGO social workers) in maternity wards; moreover, some of the patients come to hospital for delivery after having been to one of these local organisations – who specifically target single mothers – and display proof (letters stamped and signed by the personnel of the NGO – 'the papers of the association', '*l-warqa d'yal jama'iyya*) of being among their beneficiaries.

This is aimed at granting them better treatment in spite of their 'unfavourable' condition. Health personnel such as nurses and midwives are also described as the ones who – dealing directly with parturient or newly-delivered women – might play a major role in influencing them with regard to their 'choices' towards the newborns. Unwed mothers and social workers as well as researchers – (Cherkaoui, 2010) have often highlighted that nurses are renown for playing the role of "*semsara*" (intermediary) in the transactions between potential "adoptive parents" and 'biological' mothers, whereby stressing the challenges of being an unwed mother they try to convince girls to abandon their babies by entering the network of informal adoption, which might imply a financial reward for 'biological mothers'; I have actually been invited to focus on the fact that several nurses and other hospital employees have foster children. Research conducted on these topics at the national scale (ibidem) inside hospitals – among which some are in Casablanca – highlights that these practices are 'still' common; they are probably more likely to happen in smaller hospitals in the outskirts of the city, rather than in university hospitals or in other large health services; nevertheless, this illustrates the pervasiveness of these practices in spite of the current rhetoric promoted within the NGO domain. The

latter tend to emphasize the girls' will not to abandon and to raise their children despite the multiple constraints they have to face. When talking to me about the girl she was replacing at the café where she was working at the time, Nawal commented this phenomenon:

“N: You know the café where I’m working now? The girl who worked there before me – *ana remplasitaha fil khedma*⁸² [I replaced her at work]...*Za’ma, ana kankhdem fi blastaha* [that is, I work at her place]. She has given birth to a baby (that’s why I got the job), but in that hospital⁸³ she knew somebody... I’ve been told...

I: *Fin, fi spital* [where, in hospital]? You mean she knew somebody in hospital before?

N: *Iren...* [laughing] *guli ss-bi-tar* [say “sbitar”]! She must have known somebody in hospital to whom she gave her baby. *Bezaf dyal l-bnat kaydiru hadshi* [many girls do that]...*iwa, ash ghad ddir* [what can you do]? Believe me...You have visited the hospital with [NGO] social workers, well in those hospitals something might happen too. But in the others...*bezaaaf* [a lot]⁸⁴!” (Nawal, December 2011).

Along with such reality concerning unwed mothers specifically, health personnel is very often bribed by the families of patients so that they are better cared for: such practices are definitely well-rooted within public hospitals, including maternity wards. The personnel do not seek to obtain money from unwed mothers in the same way, since they are often alone and poor, but – exactly for these reasons – the personnel might use other sorts of strategies to convince them to leave their baby as soon as they give birth, so that the baby is ultimately given to somebody willing to ‘adopt’ informally. This transaction, hence, turns out to be financially rewarding for the intermediaries too: this is why some nurses or midwives inside hospitals

⁸² French verb “remplacer”, reformulated in dialectal Arabic.

⁸³ It dealt with a so-called *hôpital périphérique*.

⁸⁴ She meant that in other smaller hospitals in the suburbs and in deprived areas of the city where no local organisations go, informal ‘adoption’ and ‘child trafficking’ may encounter fewer obstacles.

draw on unwed mothers' distress and 'weakness' to persuade them to renounce their babies. Even if girls are not completely sure of this as the right 'choice' to be made, they are not always able to negotiate the pressures made by the health personnel or by other actors.

During a visit to one of the maternity wards of a hospital with an NGO social worker (*assistante sociale – mossa'ida ijtima'iyya*) the personnel as usual directed us towards one of the newly-delivered single mothers. She was the only one in that ten-bed room and was right in the corner at the end of the room. The social worker stood in the middle of the room, greeted everybody loudly and said to the new mothers that she thanked God for their safety: “*'ala slamtkum!*”. Then she also asked if among the women there was, by chance, “*shi mra li baqa mamzwujash* [any woman who is not married yet]”. The girl in the corner did not say anything – as is likely to happen in such cases – but after a rapid glance, the social worker headed to her bed and found out she was the unmarried young woman who had just given birth, whom the nurses had told her about. The first thing that the young woman told us by smiling was “*mana'teksh l-trabiya dyaly*” [I won't give my baby to you – nor to anybody else], then she looked down at the sleeping baby wrapped in a blanket in her arms. The social worker suddenly turned to me and expressed her disappointment for that statement and said to the newly-delivered woman: “No, why do you say that? Nobody wants and nobody will take your baby away from you! We're here just to help, to explain something...”; after having reassured her, she started explaining who she was and how her organisation could help her, if she wanted.

This episode made me question both the role of this kind of social worker coming from outside the hospital and their collaboration with 'insiders', i.e. health personnel in relation to single mothers and especially to the issue of abandonment or the practices linked to informal 'adoptions'⁸⁵. This woman's reaction to the intervention of a social worker sent to her by the hospital personnel may suggest how ambiguous and contradictory this kind of action might appear from the recipients' points of view. Even if this was probably the only case I came across in

⁸⁵ I will further deal with these issues in Chapter Five.

which an unwed mother feared that somebody wanted to take the baby away from her, I think it is very telling of the tensions that might arise in the context of the hospital and of the pressures that might be made on single mothers by diverse actors within a public hospital – pressures of which that woman might be aware and afraid of, since she mentioned the issue straight away.

So, while by local NGOs and health personnel within public hospitals unwed mothers are mainly portrayed as willing to abandon their babies or as ‘vulnerable’ to pressures made by potential ‘traders’ in babies and intermediaries as soon as they are released from hospitals, such episodes lead us to look at this issue from a different perspective. Notably, girls have to cope with multiple pressures, among which those for abandoning the newborns even within those public health institutions which complain about the ‘burden’ represented by these patients and represent the phenomenon of child abandonment as their main preoccupation. So, the birth scenario experienced by unwed mothers is forged by different tensions: the social stigma they are subject to is not merely declined as discrimination, verbal and physical abuses, lack of care (to cite some examples from the hospital setting) but rather it embeds other significant aspects such as the pressures made by actors who draw on the ‘illegitimacy’ of these births to boost the clandestine and lucrative network of ‘informal’ adoptions.

2.4 Hiding the contract and showing the belly

In order to reconfigure ‘unwed mothers’ and ‘illegitimate children’, I will now look at ‘unwed motherhood’ in Moroccan society by seeking to situate it in historical perspective. An ethnography of these ‘figures of illegitimacy’ has to give account of all relational aspects concerning the *ummhat l-‘asibat* – unwed mothers – as an historically grounded social fact on which notions like the already mentioned *ragued* or *enfant endormi* (*sleeping foetus*) might also shed light (Colin, 1998). Within the Islamic juridical framework, pregnancy duration can indeed be ‘flexible’, i.e. nine months is not supposed to be the parameter for pregnancy duration.

What were and what are the social implications of the notion of *ragued*? To which extent is it worth taking it into account when dealing with ‘out-of-wedlock’ pregnancies in contemporary Morocco? To begin with, I will seek to problematise

this aspect by providing the example of one of my informants, who – despite being officially ‘unmarried’ in the eyes of the organisation who supported her – revealed to me that she was actually married to a man who had emigrated to Italy a few years earlier. As I have already mentioned, the *ragued* was previously drawn upon to make meaning of the pregnancies which occurred during prolonged periods of emigration of men, so that their wives could cope with – potential – social stigma and accusations of adultery, hence, the recourse to *ragued* helped not to jeopardise social and family ‘balance’ (Colin, 2003). Nonetheless, it was not Saida’s case, as she did not evoke similar notions at all, while she opted for her self-representation as a single, unwed mother. Only in so far as she knew that Italy – and not France, as she thought – was my home country, twenty-three year old Saida disclosed that she was legally married to a man who was allegedly out of reach.

Saida only managed to talk to a friend of his who had been to Italy and who told her that her husband had had several problems and had even – allegedly – been in jail. Saida was visibly excited about the fact that I represented in her eyes a ‘link’ towards that person whom she first described as “*shi wahid li ‘aziz ‘aliya bezaf...* [somebody whom I’m fond of]”, before whispering to my ear: “*ana mzwuja* [I am married]!” and explaining that her husband had ‘disappeared’ short after their marriage. Since then Saida had lived with her husband’s family in Casablanca; she kept working in several factories until – following a new affair – she got pregnant and had to flee her in-laws and go back to her widowed mother’s, living in a different neighbourhood of the city. Nevertheless, she could not spend the whole time there until delivery, so she turned to a local NGO as a ‘*asiba*. Besides, when talking to me, she represented the relationship with the ‘biological father’ of her baby as a “‘*alaqa ‘adiya*” (a ‘normal’ relationship) and did not claim any ‘marriage promise’ nor sexual abuse or violence, by stating firmly “*ḥdart ma’a rass?*” [I reflected upon – doing – it]. Saida stressed that sexual intercourse with her partner stemmed from mutual consent, unlike in the cases of other beneficiaries she met at the association.

After having spent the last weeks of pregnancy and the postpartum as a beneficiary of that local NGO, where she found shelter being admitted as an ‘unwed mother’, Saida had planned to move south, probably to Agadir to the woman who had raised and breast-fed her and who was this time supposed to raise her child at least for her

first years⁸⁶. As Saida found herself in an *impasse*, however, her partner – the ‘biological father’ of her baby – did not emerge very neatly from her narrative. Given the secrecy surrounding Saida’s case and given the fact that we were at the association and somebody might have heard us, I was unfortunately not able to find out the role played by her partner at that stage in more depth. What has to be highlighted in Saida’s case is that she draws upon the imagery of the ‘needy’ unwed mother, rejected by her family and by society in her search for help and support at a local NGO – this ‘strategy’ was successful in that she had managed to obtain a temporary shelter, material support and health care.

The reasons behind Saida’s self-representation as an unwed mother is telling for at least two reasons: first of all, this episode suggests that (young) women, other than the socially constructed category of ‘unwed mothers’, might be confronted with similar challenges – like Saida’s – or have to face even more complex situations. Saida, for instance, must cope with the constraints of her ‘illegitimate’ pregnancy but also with another sort of potential stigma – that is adultery and the reaction of her official, yet absent, husband and of his family⁸⁷. Moreover, being officially bounded to him by a marriage contract – so, being officially a married woman – she would not be entitled to benefit from the services of organisations whose goal is social, legal and health assistance to unwed women and sometimes victims of violence or ‘marriage promises’.

Secondly, Saida’s ‘manipulation’ of the imagery of unwed motherhood, whose semantic encompasses compassion, suggests that that sort of imagery is socially pervasive and successful, as in this case she succeeds in obtaining some help. The category of ‘unwed mother’ used within the NGO domain can be seen as a conceptual tool resulting from a ‘selection’ of certain – specific – features of their beneficiaries⁸⁸: nevertheless, it deals with an exclusive category, because women

⁸⁶ Saida thought she could take her child back to Casablanca only once she had grown up, in order to potentially present her as her own daughter.

⁸⁷ The reasons why her husband had ‘disappeared’ were unclear in Saida’s narrative and maybe to herself as well. She said an acquaintance who had also been to Italy had told her that her husband had been in jail. Saida did not mention the conditions in which her husband had emigrated.

⁸⁸ For instance, being pregnant and not having a marriage contract.

who face different sorts of challenges due to ‘illegitimate’ pregnancies, who are left behind by their partners or husbands, who find themselves alone and without their family’s support might indeed need as much help and – legal, social, material – support as girls who give birth outside marriage. Although she was not an ‘unwed mother’ according to the criteria established by NGOs, Saida was actually in an intricate situation: she found herself in an ambiguous situation even before her pregnancy, as she was married without having ever actually lived as a wife because after her marriage her husband had gone back to Italy while she remained at her in-laws, with whom – as she stated – she was supposed to work as a ‘servant’, without knowing if she would ever see her husband again and without being able to think of any alternative. Hence, she was not a ‘girl’ anymore but she was simultaneously subject to the control of her in-laws. Therefore, Saida’s story highlights how the construction of the category of ‘unwed mother’ addressed to by many organisations may not grasp the complexity and the heterogeneity of Moroccan society and the plurality of women’s subjective experiences and trajectories.

Along with the implications of the ‘boundaries’ of the category of unwed motherhood the story of Saida also questions the use of explanations like that of *ragued*. It is emblematic, indeed, that this young woman’s coping strategy draws on the imagery of unwed motherhood rather than on the one of ‘protracted pregnancy’ or *ragued* encompassed by Islamic jurisprudence and rooted in local ethnophysiological notions. Hence, although *ragued* is still known as a lay belief, it is hardly⁸⁹ drawn upon in Morocco, especially in urban contexts. As far as I could observe by touching on the issue with women of different generations, *ragued* is associated with ignorance and ‘tradition’ as well as ‘backward mentality’ as opposed to scientific knowledge and biomedical evidence: “My mother is old but *she’s very civilized!* She does not believe in that stuff”, a friend of mine said to me. Such ‘attitudes’ towards *ragued* among the women with whom I raised this question are to be seen in relation to the role played by biomedical technologies of reproduction such as ultrasound scans (*l-talfesa*) which contribute to shape embodied experiences of pregnancy and the representations of the foetus. *L-talfesa*

⁸⁹ Although I cannot back this statement with ethnographic or statistical data.

itself is among the most widespread technologies of reproduction in Morocco even if its diffusion is definitely uneven. As far as ‘unwed mothers’ are concerned, they might recur to ultrasound scans if possible and affordable – for instance at private practices – or being the beneficiaries of local NGOs which cover their medical expenses. Girls often recur to ultrasound as the ultimate ‘assessment’ of their ongoing pregnancy in the first stance; then, they might undergo further ultrasound – along with consultations – within prenatal care, for instance if their medical fees are covered by their employers.

Yet, in the case of unwed mothers undergoing tests and consultations is overwhelmingly a question of ‘assessing’ pregnancy and managing the following ‘steps’, i.e. the pathways to undertake. I shall argue, therefore, that – according to the insights and the experiences of my informants – notions like *ragued* are usually not drawn upon to make meaning of out-of-wedlock pregnancies. If *ragued* was evoked to ‘explain’ otherwise illegitimate pregnancies by women who – at some point in their lives – had been married, it might be questioned to which extent such a ‘figure’ has a legacy, and whether it represents a symbolic resource also in the ‘coping strategies’ fostered by unwed mothers nowadays. Above all, it has to be noted that given historically changing social, cultural and economic contexts – for instance the fact that many ‘unwed mothers’ already live and work outside their household before becoming such and, therefore, the social control over their sexuality is ‘weaker’ than for girls living within their families – the ways in which they experience pregnancy and the strategies they subsequently adopt embed multiple stakes, which unlike the *ragued* – which is aimed at upholding family relations and honour – challenge existent relationships. As I shall argue, the issue of labour mobility and inner migration represent to certain extents ‘challenges’ to local gender norms, in that girls and women living and working outside their household challenge the boundaries of the ‘control’ over their bodies.

On the other hand, the fact of never having been married – both for girls living away from home and for those staying in their household – definitely cast their relationships as illicit and their pregnancies as illegitimate; the lack of any socially recognisable form of relationship – registered or unregistered marriage – would be at odds, for instance, with the adoption of an explanatory like the ‘*sleeping baby*’. Nevertheless, marriage promises can be seen as an element of continuity with

ragued. This feature illustrates the centrality of marriage as the unique legitimate – yet, in their case unachieved – framework in which reproduction is situated by many of my informants; secondly, the use of the notion of “marriage promises” highlights the extent to which the conjugal imagery is used as a symbolic resource which might contribute to making meaning and to representing out-of-wedlock pregnancies from the perspective of young women.

Hence, even in the absence both of a marriage contract and of proof of an official engagement, many girls rely on the rhetoric of the (failed) marriage promise as a way to seek legitimization of sexual relations and of filiation otherwise cast as illicit and illegitimate. While this element might represent a ‘link’ between alleged ‘marriage promises’ and the figure of *ragued*, which also took – previous – marriages as the fundamental frame of reference, at the same time ‘contemporary’ out-of-wedlock pregnancies and births take shape outside or at odds with the socially recognised and legitimised organisation of kinship and gender roles and may further question, threaten or radically disrupt them; besides, contemporary out-of-wedlock motherhood has to be seen in connection to emergent forms of female subjectivity of women ‘without men’, on which I will further elaborate. So, if a ‘legacy’ of the imagery of *ragued* has to be found through the narratives of the unwed mothers I have met in Casablanca, it might be detected in some of the representations of out-of-wedlock pregnancies which are given meaning and ascribed to previous marriage promises and engagements.

§ 3 Social change, female trajectories and labour mobility

3.1 The emergence of youth and the economy of celibacy

Conditions and ‘figures’ of illegitimacy at the core of this research have to be questioned through a broader reflection on the domain of sexuality: it has been argued that it deals with a “contested domain” (Vance, 1991) in virtue of the “discrepancies between Islamic doctrine and its application, changing relations between the sexes, socio-economic transformations, and competing claims for legitimacy and authenticity” (Obermeyer, 2000b). The focus on all these intertwining features aims to grasp the meanings and the stakes of a reality like ‘unwed motherhood’ and women celibacy. As Obermeyer (*ibidem*) aptly argues,

sexual and reproductive health issues might easily be reified by focusing overwhelmingly on ‘attitudes’ and ‘behaviours’ and, in doing so, by neglecting subjective perspectives and experiences. The author refers to studies aimed at the prevention of ‘undesired pregnancies’ and sexually transmitted infections narrow down their attention to individual behaviour and to its practical consequences, by decontextualizing both of them.

For these reasons globally widespread categories like ‘*sexual and reproductive health*’ – widely used also by actors in my field, like NGOs and peer-educators, for instance – have to be critically analysed. Indeed, they have started to be used since the International Conference on Population and Development which took place in Cairo in 1994: on that occasion, nevertheless, doubt had been cast on the ‘universality’ of those concepts by questioning whether they acquired different meanings and local declinations instead (Obermeyer, 2000b; Petchesky, Judd, 1998). The use of terms like ‘sexual and reproductive health’ was – and still is – tied to the action of international organisations which aim to implement them through practices that have to be monitored according to precise goals over a set period of time. Obermeyer (2000b) also observes, for instance, that interestingly the expression ‘sexual health’ is the most widely used in global (and local) health policies rather than ‘healthy sexuality’, revealing it is morally oriented and not neutral besides, what is defined - by NGOs for instance - as ‘reproductive rights’ at the level of policy may well result from complex negotiations enacted by the subjects.

In order to give context to sexuality and to problematise local constructions of ‘licit’ and ‘illicit’ sexualities some other aspects have to be made clear. To do so, I will draw on some quantitative data, which might help give a fuller picture of Morocco also from a socio-demographic point of view and understand the processes of change which have recently involved the country’s population. First, it has to be noted that Morocco has gone through a fertility decline, which is considered as an emblematic case among northern African countries. The birth rate dropped between 1973 and 1995 from seven to three children per woman due to the impact of family planning policies. This factor has to be seen in connection with the growing average age at marriage, which from the average age of 17 in 1970 increased up to 26 in 1992 (Courbage, 1997, in Obermeyer, 2000b).

These are some of the reasons why the unmarried population in Morocco has been increasingly growing over a few decades: between 1960 and 1998 the average male unmarried population grew from 35,8% to 55,6% , and the female from 17% to 44,8%. This shift affected particularly the age group between the 20 and 34 year-old (Bourquia, 2006: 117) bringing about a significant change which contributes to shedding light on the gap between expectations and social norms concerning sexuality, according to which this is to be circumscribed to marriage and reality, where “prolonged maidenhood” (Obermeyer, 2000b) to a large extent is also linked to structural and contingent factors, such as the economic crisis and (youth) unemployment, which definitely do not make marriage plans easier, but rather contribute to delaying marriage and the projects aimed at setting up one’s household (ibidem). Given the importance of the institution of marriage in shaping one’s social identity, celibacy, as argued by Aboumalek (2011) becomes hardly ‘manageable’ and even stigmatising.

If we are to focus on social expectations regarding marriage and the relevant financial investment, changes in the marriage system do not concern only the growth of marriage age due to the decreasing birth rate, to – male and female – schooling⁹⁰ (for example) and they do not merely touch upon ‘the marriage market’ and the ways couples are formed, but the ways of celebrating and making unions public have themselves undergone changing processes which illustrate the centrality of – changing – consumption patterns in the domain of marriage, which especially in urban contexts require a growing financial effort (Bourquia, 2006: 117). These features illustrates that remaining a *bent* or becoming a *mra* is not a purely symbolic question, since acquiring a certain status – like that of spouse and woman – *mra* – demands the mobilisation of material resources by the families of the spouses. Thus, the economic dimension plays a key role in informing marriage dynamics and patterns of consumption in the domain of marriage – ceremony, gifts, setting up the new household (if so)⁹¹.

⁹⁰ However, Rachik (2006) underlines how schooling and higher education are not encompassed among the core reasons of celibacy between 25 to 29 year-old females, who in 1994 were the 35% of this age range (ibidem: 208).

⁹¹ As I noted in the months between the signature of the marriage contract and the wedding of a girl of my host family in Casablanca, and through the experiences of friends and

Although these factors concerning the material and economic sphere – such as precariousness – contribute to shaping the ways marriages take place and often postpone or obstacle marriage ‘plans’ – and might ultimately raise the age at marriage – it is to be noted that, at the same time, the issue of “underage marriage” and “early pregnancy” in Morocco is a highly debated issue especially within the NGO and human rights and gender advocacy domains⁹². From a juridical point of view, one of the main changes has been put into being by the reform of the Family Code in 2004: it deals indeed with the introduction of 18 as the minimum legal marriage age both for male and female⁹³.

The introduction of this norm has been emphasized as a ‘tangible’ marker of change by several women and human rights groups, even if the application of the Family Code itself, including the norm regarding the legal marriage age – as already mentioned – is still a matter of heated debate within civil society and between advocates of different views and interpretations of ‘women’s rights’, i.e., the secular, the Muslim and the Islamic feminists or women activists. For instance, one of the most controversial implications of this norm deals with the role of the judges who can authorise underage marriage if the family of the underage female spouse asks for it. So, whenever families and judges agree in authorising the marriage of girls younger than 18, underage marriages can still take place quite ‘easily’. The issue of corruption of judges is also highlighted by women’s rights

acquaintances. Other wedding ceremonies, in which I took part in smaller urban centres were also highly insightful in this sense.

⁹² ”En 2011, 49.696 marocaines âgées de 15 à 19 ont donné naissance à un enfant. Le risque de décès et de morbidité maternels est plus élevé dans cette tranche d’âge.

En 2010, 11% des mariages au Maroc concernaient une jeune fille mineure.

12% des filles entre 15 et 24 ans qui ont eu des rapports sexuels ont eu une grossesse non désirée.

En 2011, le taux de fécondité des filles âgées de 15 à 19 ans au Maroc est de l’ordre de 32‰, ce qui équivaut à 6 fois les niveaux enregistrés en Algérie et en Tunisie (...)La Journée Mondiale de la Population sera commémorée cette année sous le thème : « Les grossesses d’adolescentes ». Cette manifestation vise à amplifier l’appel à prendre des mesures pour autonomiser les filles dans le monde, particulièrement le monde en développement” [<http://www.morocco-unfpa.org/spip.php?article104> ; accessed 5th July 2013]

⁹³ Until 2004 it was 15 for females and 18 for males.

activists, who claim that widespread corruption in justice is detrimental to the implementation and to the respect of norms like the legal marriage age.

When judges are not involved – for example if families are not wealthy enough to undertake legal procedures or do not know about them – unions between two minors or in which one of the two spouses is younger than 18 may be sealed by means of a *fatiha* marriage ceremony within the family, granting these unions social – although not legal – recognition. These ‘customary marriages’ (sealed by a *fatiha*) are not registered and are not recognised by the State, nevertheless couples are given the possibility to make their unions ‘official’ and ‘legal’ before the State within a five⁹⁴ year period of time. Nonetheless – before or without the ‘registration’ of this sort of marriage – the spouses are not bound by any formal act, so, for instance, the couples can split up – or the woman might remain widowed – without being subject to the legislation concerning marriage and divorce. Moreover, children born within these unions are formally ‘illegitimate’ because their parents’ union is not officially acknowledged by the State; accordingly, their mothers appear as unwed before the State and are not granted the same rights as divorced women or as ‘officially’ widowed spouses. They are rather considered as ‘unwed women’ and may end up experiencing similar situations as women who have never been engaged or married by *fatiha* (Mir-Hosseini, 1994)⁹⁵.

Hence, according to the picture that I have delineated so far, the domain within which sexuality is defined and recognised as ‘licit’ is mediated by diverse sorts of features – social, demographic, economic and historical-political factors and forces – that are managed within or despite the juridical framework provided by institutions – for example, by measures such as the definition of the legal minimum age of marriage. These sort of measures – such as article 156 of the 2004 Moudawana – aim on the one hand to adapt to changes which have already happened in society and, on the other, to strive to restrain certain practices – like

⁹⁴ The period of five years have changed due – also – to pressures of civil society organisations which claim five years were not enough especially if legal procedures of ‘regularization’ encompass the recognition of the paternity of children born within these unions. The period of ten years is supposed to terminate in February 2014.

⁹⁵ The author describes similar cases concerning the years (and decades) prior the last reform of the Family Code (Mir-Hosseini, 1994).

underage girls' marriage – which are cast as 'traditional' and/or 'backward' and at odds with the promotion of gender equality and women's rights. Despite these goals, such measures might have controversial implications like the fact that some families – especially in rural areas – seek to marry their daughters as soon as possible even without registering the marriage at the *'adul* if they do not have money for that or if *'adul* are out of reach. Thus, despite institutional and non-governmental efforts to set the formal conditions to avoid underage marriage, it is noteworthy that economic and structural forces – for example the regional 'divide' between rural and urban areas, class inequalities, unequal access to education and resources – do play a role in informing the conditions in which relations between potential spouses take shape and might – or might not – lead to marriage. These are only some of the issues at stake but they illustrate the complexity of the relationships informing marriage: they help conceive of this institution beyond the opposition between the mere 'alliance' between families and individual choices (Hoodfar, 1997: 55) made by the subjects.

In order to contextualize the tensions and the dynamics surrounding marriage practices and marriage imagery in Morocco, various processes and overlapping factors have to be taken into account: as I have mentioned the 'delay' of and the raising of the age at marriage – due to demographic changes or to criteria set by the law⁹⁶ – education, the access to wage labour for women, inner and transnational migrations and the global economic processes they are shaped by – such as structural adjustment programmes – may shed light on the background of marriage dynamics. Therefore, I shall argue that it is at the intersection of these diverse forces that notions of legitimacy and morality in relation to female sexuality are culturally and socially shaped.

These reflections bring attention to the changes involving Moroccan society in recent decades with regard to the transformation of marriage patterns and to the re-definitions of 'socially acceptable' sexual practices and relations, by blurring the boundaries of the domains of the licit and the 'illicit'. Moreover, the postponing of the age at marriage – its 'delay' with regard to previous generations – carries with it implications concerning for instance the issue of the 'initiation' to sexuality and

⁹⁶ With the definition of a legal age for marriage.

the gendered dimensions of pre- and extra-marital sexuality in contemporary Moroccan society – for instance, the matter that male pre- and extra-marital sexuality is socially accepted or even valued. Besides, while until a few generations ago girls were married upon reaching puberty or earlier and the issue of pre-marital sex did not ‘exist’ as such, it actually came up as marriage started being ‘postponed’ for the females as well. Hence, socio-demographic transformations are to be seen in relation to significant generational changes and to the definition of generations themselves, notably the emergence of the category of youth (Rachik, 2006) and shifting marriage patterns.

3.2 Imageries and realities of women ‘on their own’⁹⁷

As I have pointed out, demographic changes and transformations which have involved marriage dynamics in recent decades have contributed to blurring the boundaries between generations. Despite the distinction between ‘woman’ and ‘girl/virgin’, generational shifts dealing with education, occupation, marriage patterns and age at marriage are to be taken into account when looking at the issue of unmarried women – *l-‘asibat* – whose social role has to be situated in a changing historical and economic context, where dramatic transformations have occurred over a few generations of women. According to Jansen (1987), who bases her insights in her ethnography of ‘women without men’ in Algeria, the distinction (or the categorization) of women into social groups in virtue of their relation to men is not ‘formally’ acknowledged but rather emerges in daily interactions and through ritual. A woman who in her daily life behaves with manners which do not conform to norms – Jansen argues – is described as a woman ‘without father’ or ‘without husband’, so she is defined in relation to, or rather by, the lack of relationships with these male figures. Conversely, in Jansen’s field, women who behave according to social and local gender norms are generally recognised as girls or women who ‘have got a family’, who in Morocco are called “somebody’s daughter” (*bnat l-nas*) or “daughters from their house” (*bnat diurhum*), meaning they are virtuous and decent. However, as Jansen stresses, these statements and judgements are not necessarily based on the actual knowledge of the subjects’

⁹⁷ This expression in reference to “women without men” is used by Jansen (1987).

family. This may also apply to most of my informants, who might be cast instead as “*bnat l-zanqa*” (street girls, i.e. implicitly prostitutes) as they get pregnant and/or have to quit their households and hide away.

Jansen makes these examples in order to define the notion of ‘women without men’ at the core of the ethnography that she carried out in Algeria throughout the 1970s and the 1980s: in her work, the essential premise is that in this social context women are socially defined on the basis of their relationships with men and that as they are widowed or are divorced, such ‘crises’ drastically change their lives and socially distinguish them from other women. Being ‘without men’, according to Jansen, is a central criteria in the categorization of women and should not be overlooked with regard to other aspects such as age or reproduction (reproductive power), which define women’s status in the ‘life cycle’ and that ascribe them to a precise category or social group with well-defined prerogatives. Notably, the author makes it clear that this is to be understood in the framework of the Algerian social organisation, in which kinship is based on the patriarchal family, to which every woman is supposed to be ascribed.

However, many women are actually “economically, socially and culturally on their own” (Jansen, 1987). These women are outside socially accepted kinship structures because they lack of relationships to men who ‘define’ them socially (Jansen, 1987 : 1): this would make them “socially marginal” (ibidem). While providing a theoretical framework for the question of ‘women without men’, Jansen understands these femininities as being “*on the fringes of the kinship structure of North Africa*” (ibidem:4). She refers to widowed women, but also to other social figures and in doing so, she sheds light on the one hand on the heterogeneity of this category and, on the other, on the need to problematise the social and historical contexts within which they emerge. Factors like class, occupation, age and geographical context deeply influence the ‘declinations’ of the condition of those women, whose social role is primarily defined by the absence or by the ‘weakening’ of kinship relations with male figures.

While unwed motherhood in Morocco might be questioned by drawing on Jansen’s ethnography and some of her reflections are highly relevant in discussing the specificities of the object of my research, the issue of ‘women on their own’ or ‘without men’ has to be called into question by reflecting on the overall social

significance of female figures which, to a certain extent, move away from the dominant social order. In this sense, I do not refer exclusively to the issue with which I am dealing into detail, i.e. unwed mothers in Morocco, but by drawing on relevant literature I wish to call attention also to other emblematic cases which are sometimes connected to unwed motherhood and add to the reflection upon it. The case of (single)women engaged in Moroccan civil society can be cited as an example, as they have acquired a public role of crucial importance – especially in the last ten to fifteen years⁹⁸ – both in urban and in rural contexts (Damamme, 2009; Berriane, 2013). I shall also argue that female salaried work also in the industrial (Bouasria, 2013; Labari, 2004) as well as in the agricultural sectors and the forms of female mobility within the country that they produce are definitely emblematic of the emergence and of the reconfiguration of figures of ‘women without men’ or of shifting gender configurations.

Mobility and inner migration are particularly relevant to my research as they are embedded in the trajectories of many of my informants: out-of-wedlock pregnancies and birth are to be looked at by paying attention to the forms of mobility within which they take place, or to the ones they contribute to engender. Research on these themes and on the centrality of women ‘on their own’ engaged in civil society and in the field of local development – in rural Morocco – (Damamme, 2009) raises interesting questions on the phenomenon of female mobility. The author refers to rural southern Morocco and focuses on the domain of local organisation even if her reflection may well go beyond this specific domain and allow for the questioning of different forms of female ‘mobility’, including the ones experienced by many of my informants. Indeed, when looking at the female role within the field of development we come across the issue of reputation and respectability. Damamme (2009) puts emphasis on the challenges encountered by unwed women employed or active in the field of development and local cooperatives: their involvement and the necessity of frequent trips questions social norms regarding women’s movement without their male kin, their presence in mixed and potentially ambiguous places, not to mention their potential

⁹⁸ In the framework of the politics of gender and development during the reign of King Mohammed VI.

involvement in commercial activities and direct involvement in monetary transactions (Maher, 1989).

While forms of mobility linked to jobs in the field of development and civil society are seen as ‘novel’ forms of mobility acted upon by unwed, educated women, forms of mobility due to ‘subsistence’ –i.e. labour migration – are not as ‘new’ social phenomena (Damamme, 2009). Yet, both forms of mobility imply negotiations and arrangements⁹⁹ concerning one’s mobility and one’s role in the public sphere. These constraints are to be seen in connection to the – potential – ambivalence ascribed to mixed contexts, whose alleged ambiguity is motivated by potential ‘sexual freedom’ and to the corruption of ‘mores’ – referring, hence, to the domain of illicit sexuality (ibidem: 57). Indeed, these kind of constraints do not involve middle-aged or elderly women, whose sexuality is not deemed ‘dangerous’ nor worthy of social control since it is not seen as a ‘threat’ to the social order or a potential source of *fitna* – (sexual) disorder¹⁰⁰.

Furthermore, socio-economic conditions informing women’s itineraries are not to be overlooked: class, income, type of household and geographical origin are key in leading them towards certain types of jobs or to certain forms of mobility within – or outside – the country. Notably, poor women even ‘on their own’ have always been pushed to some forms of mobility which implied the harshest living and working conditions (Belghiti, 1971, in Damamme, 2009). If we are to look at female mobility within Morocco in an historical perspective, domestic labour is an emblematic case. If we look at the biographies of some of my informants, domestic labour has been carried out since childhood or a very young age in order to support their household: despite the heterogeneity of the trajectories of girl maids in Morocco and the changing patterns of this phenomenon over time, this implies in most cases moving from one’s hometown to larger urban centres, working – and often living – at one’s employer’s house and going back to one’s hometown and family only occasionally. The money resulting from the girl’s work used to be sent by the employers directly to the family of the maid, the *khaddama*, or the *petite*

⁹⁹ Which - in case of failure - causes according to the author the “reaffirmation of social norms” (Damamme, 2009).

¹⁰⁰ See Chapter Three.

bonne (so-called in the NGOs sector). Yet, this ‘model’ of domestic labour has recently changed, whereby girls leave their households, seek work and manage their money more autonomously without their family’s direct involvement. These processes might be seen as challenges to ‘traditional’ forms of intermediation in which a *semsar* – an “intermediary” – provided maids to bourgeois urban families after having made agreements with the girls’ parents, whom they had previously searched for in rural and mountain regions¹⁰¹.

Despite these changes, domestic labour and other forms of female work mobility within Morocco cannot be generically labelled as forms of ‘autonomy’ nor of ‘emancipation’, as they embed further – and controversial – stakes: these forms of mobility of ‘women/girls on their own’, as I have sketched out for domestic labour, have to be understood as ways to support their families with whom girls are – in most cases – constantly in touch with and who rely on their work’s income. Yet, for girls working and living far from their household, keeping in touch with one’s family does not consist of a mere transfer of money: in these cases, female mobility and their ‘being on their own’ also calls upon ‘good conduct’ and ‘respectability’.

Thus, the emergence of contemporary forms of mobility in the neoliberal age and the ‘reconfiguration’ of well-rooted forms of female labour migration do not implicitly include changes in the ways gender relations are shaped and the boundaries of gender norms are socially negotiated. Attention, rather, should shift to the ways in which those forms of mobility are lived by the actors by questioning the extent to which living ‘geographically’ distanced from their household actually challenges set gender ideologies (Damamme, 2009). Moreover, the nexus between inner migration and female ‘autonomous’ mobility is to be looked at by taking Morocco’s steep inner inequalities into account. Indeed, Casablanca can be considered as emblematic of this situation, being one of the main destinations of inner migration both from surrounding rural areas and from other regions. As highlighted by my informants’ narratives, their work – as already mentioned – is not only a way of supporting themselves in their daily life, but is primarily oriented

¹⁰¹ Of course, this is a non-exhaustive account of the question of female domestic labour in Morocco.

towards their household economy. Hence, aspects like kinship ties, class and gender features of work¹⁰² deserve further attention, given their influence in shaping the girls' role once they leave their household and are invested with various social and economic expectations. These factors are key in informing the way girls live their lives as 'women on their own' as well as the experience of out-of-wedlock pregnancy: notably, if they end up raising their children, this might also impact on their ability to provide their families of origin with regular financial support.

Out-of-wedlock pregnancy, therefore, is not only potentially disruptive from a symbolic point of view, but it simultaneously challenges girls' coping strategies and economic role: raising one's children or – whenever possible – leaving them at one's family of origin and working to support them imply a significant reconfiguration of one's duties. Their work is now meant to support their families and – at the same time – to cover the needs of their child; when children of unwed mothers are accepted and raised within their families of origin, social and material expectations towards 'girls' might even grow as they are further '*morally bounded*' to their family, who – instead of rejecting her and her child – accepts and 'reconfigures' the situation, which becomes, however, further demanding on a financial level. By stressing the negotiation of these relationships amidst the girls' search for 'balanced' coping strategies, I wished to make clear that such 'arrangements' imply complex and – at times ambivalent – moral and simultaneously material 'reconfigurations'¹⁰³.

Hence, an overview on labour mobility of 'girls' or 'women on their own' in contemporary Morocco provides manifold hints for reflecting also on unwed motherhood and out-of-wedlock pregnancies. Notably, drawing attention to female mobility might allow a deeper understanding of the issue of social control over female sexuality outside marriage and over its centrality in the construction of contested gender subjectivities and moralities: these processes have to be seen

¹⁰² For instance the fact they often work as maids at the service of other – rich or middle class – women.

¹⁰³ I shall deal with these issues in Chapter Five into more depth.

against the background of power relations informing the definition of social and gender roles as a *bent*. Not being gender ‘neutral’, the example of female mobility of ‘women on their own’ is indeed emblematic of the construction of gender through social relations: taking this kind of mobility into account means questioning its impact on gender boundaries. As emphasized elsewhere (Viché, 2009), reflecting on female forms of mobility within Morocco may shed light on the changes in practices and representations of the role of ‘women on their own’ in Moroccan society.

One of the central questions within the scope of my research regards notably the possibility that these forms of circulation – whether they are linked to maternity for unwed women or not – embed the reproduction of the dominant social order or whether female mobility potentially contributes to the creation of novel social relations (*ibidem*). Therefore, the questioning of social reproduction or – on the contrary – social transformation is of central concern if we focus on young women’s itineraries and their manifold dimensions. What are the social conditions upon which the girls’ departures lie? What are the social relations the girls develop once they are far from their household? What strategies do they foster and to what extent do they put novel sorts of social relations into being? I will seek to answer these questions by drawing attention both to the girls’ trajectories before out-of-wedlock pregnancy and to the ways their children’s birth impact on their lives – whether they already live ‘on their own’ or not – as well as on their coping strategies and on their social world overall.

CHAPTER TWO

Weaving threads into ethnography

Introduction

My aim in this section is to raise some reflections on the ethnographic process by drawing attention to its methodological and epistemological stakes and, in doing so, to the manifold dimensions it embeds. I shall therefore give a general outline of the ‘stages’ and ‘steps’ of my fieldwork as well as of the challenges and constraints which marked its different phases (§1) and the various contexts and actors I have dealt with. Such a general ‘overview’ of places, strategies and ‘pathways’ will allow situating my research and will give way to the discussion of my position and role in the field; it will also shed light both on my attempts of access to and on my interactions with institutional settings (§2) and to the diverse ethical, epistemological and methodological challenges it has brought about. Obviously, the importance and the ethnographic relevance of ‘Institutional encounters’ are not exhaustive if we are to problematise the overall question of the ethnographer’s subjectivity in the field (§ 3) and the construction of negotiated, inter-subjective ‘ethnographic selves’ (Coffey, 1999). I will seek to deal with these issues by focusing – among others – on the role played by emotions and by the importance of relations of trust and bonds of affection and friendship with some of the people met over my stay and across my research. Dealing with emotions necessarily calls upon the discussion of both ‘positive’ and ‘negative’ emotions, notably of “attraction and repulsion” (Borneman, Hammoudi 2009 : 19), which are associated for instance to misunderstandings or to hostility – implicitly or explicitly - expressed by informants – rarely among unwed mothers yet – whom I have met in institutional settings.

In discussing ‘negative’ emotions and in highlighting some of the limits and ‘contradictions’ of carrying out research in certain settings – such as shelters and

associations for unwed mothers and children – I will draw attention (§4) to the ethical and ‘critical’ aspects of my role as an ethnographer and particularly on my self-perception of the power relations I was involved in, in every encounter with the ‘beneficiaries’ of those programmes and structures. Doing ethnography through – and thanks to – organisations means being increasingly confronted with specific kinds of encounters both with the personnel and with the ‘users’, whereby I argue that as a researcher my relationships with the latter are conditioned by their being ‘recipients’ of certain programmes to a much greater extent. As I will further elaborate on, according to my experience, being a (foreign and female) researcher in organisations shaped relationships with ‘beneficiaries’ in peculiar and significant ways; in this section I will focus on those episodes and relationships which have challenged my role – and made me self-critical about it – as they have highlighted the differentials of power and the asymmetries between myself and those particular informants – who for instance had movement and communication restrictions during their stay at those charities.

Moreover, as I will make clear, having a generic role within those organisations might have lead – in some cases – to ambiguities. What I aim to stress, however, is that in all cases – of ‘critical’ or ‘successful’ interactions with girls supported by local charities – I have to carefully contextualise and critically problematise our encounters - within and outside the setting of those organisations – by considering that also our relationships were moulded by their experiences as beneficiaries and by the modes in which in their daily life they appropriated or challenged the representations of unwed motherhood ‘promoted’ by NGOs. Such aspects concern for instance the disclosure of love affairs and boyfriends, questions dealing with work and salary and negative judgements on charities and their personnel. These are some of the examples which question simultaneously my subjective ‘positioning’ and the relationships within the settings I conducted my field into. For these reasons, at the same time, a thorough reflection upon ethics encompasses also my personal critical stances towards the services, structures and organisations I have dealt with: this concerns less ‘human’ sides of relationships – i.e. my interactions with specific individuals of the personnel – than overall and day-to-day insights into organisations and the web of power relationships they lie upon and act through. Hence, this perspective of my – partially – ‘unethical’ field sites opens up

a further ‘direction’ of the writing on ethnography, i.e. my non-neutrality notably with regard to these organisations as political actors or my critical point of view towards state-lead politics of healthcare which involve to a considerable extent also non-governmental actors or, again, the overall rationale they lie upon – i.e. I shall argue that such politics usually avoid tackling inequality as a political matter but rather tend to reify it by ‘targeting’ specific categories of “vulnerable” individuals. Much has been written in the last thirty years about the ethnographic process and the “poetics and politics of ethnography” (Clifford and Marcus, 1986). Hence, I will necessarily refer to and critically draw on some of the conceptual tools produced by these debates in seeking to develop a reflection about my own ethnographic experience in order to grasp the complexity of the representation of “the social reality of others through the analysis of one’s own experience in the world of these others” (Van Maanen, 1988 : ix). So, engaging in such a discussion calls for methodological questions, which concern not only the description of stages and ‘steps’ in fieldwork, but above all the ways the field has been ‘thought’ – imagined – planned, ‘narrowed down’/circumscribed and ultimately negotiated over time. The endeavour of writing up also constitutes a crucial ‘passage’ in the making of ethnography and demands the rethinking of the whole ‘ethnographic process’. Indeed, conceiving of it in these terms conveys the idea of transformation and change in which the researcher’s subjectivity, her inter-subjective relationships in the field along with her production of knowledge are deeply involved. Therefore, I will seek to provide such an understanding of fieldwork and of the process of ethnography, in so far as the focus on “the possibilities in experiential encounters leads to an exploration of questions about understanding how subjectivity is assumed in an inconclusive present“ (Borneman, Hammoudi, 2009 : 19). As I have mentioned above ethnographic encounters engendered bonds and relationships of trust as well as ‘negative feedback’ and ‘failed encounters’, yet I shall argue that – despite initial and successive ‘distancing’ from the field – fieldwork encounters can be understood as “modes of ethical engagement” (ibidem : 19) which allow elaboration and sharing of knowledge. As these authors stress, the fieldwork experience can be seen “as engagement with both being there and with forms of distancing (...) in a (temporal) process of mutual subject-object discovery and critique, and engagement with persons, groups and scenes” (ibidem).

This kind of approach aims to stress that acknowledging the centrality of subjectivity and of the situatedness of the anthropologist should not overlook that “the starting point is not the self, but the field into which the ethnographer invests her powers of imagination” (Hastrup, Hervik 1994 : 2); this worth ascribed to fieldwork would therefore grant novel confidence to the role of the researcher and to the heuristic value of the field experience or a “renewed sense of anthropological authority as grounded in fieldwork” (ibidem: 5). Other authors speak of the need to reconceptualize “the relation between observation, experience and representation as one of dialectical objectification” (Borneman, Hammoudi, 2009 : 20) whereby the relations between subject and object might be rethought and historically situated by opening up possibilities of sharing experience and knowledge (ibidem : 20).

Thus, in striving to be ‘reflexive’ both while ‘out in the field’ and ‘back home’ while typing these words, I have sought and I still seek to bear in mind that at stake is not so much my individual position as ‘author’, but reflexivity as “part of the intersubjective context of the fieldwork” (Hervik, 1994 : 79) and “a condition embodied in anthropological practice” (ibidem : 92). So, it would even be more appropriate to speak of ‘reflexivities’ or of “shared reflexivity” (ibidem : 88) to mirror the plurality and the multi-directionality of the relationships we deal with. This leads the author to opt for “resonance”, “shared reasoning” and the notion of shared social experience which go beyond a ‘sum’ of individual reflexivities and reflexive ‘postures’. Hence, moving between shared experience and ‘distance’, ‘detachment’ – sometimes - ‘alienation’ from the social reality studied, broad understandings of reflexivity should give the ethnographer increased consciousness of the self along with further means to make sense of others (ibidem : 92). These ‘fluctuations’, that I will hopefully make explicit in this work, especially – but not exclusively – when discussing emotions, are therefore constitutive of the ethnographic experience and underlie the writing of ethnography.

§ 1 Ethnographic encounters

1.1 Breaking and making up fieldwork

‘Being in the field’ has therefore consisted on one the hand in shaping my research, i.e. – initially - in confronting my ‘expectations’ with local realities, weighing up

the feasibility, strengths and weaknesses of my project and broadly speaking in understanding in which directions I would have actually conducted my research. These preliminary insights hence drove me to motivate the aims and scope of my work, which has focused since the beginning of my stay in Morocco on unwed mothers and their children in Casablanca. Time and other ‘contingent’ constraints lead me to concentrate my efforts on gaining access to local organisations and to getting in touch with local actors dealing with unwed mothers and their children; I initially considered this approach as a step towards the establishment of relations outside the context of aid and assistance, but the latter became itself – necessarily – the object of my investigations, in so far as it emerged as an arena where the question of unwed motherhood and out-of-wedlock births has been constructed and is constantly re-shaped and negotiated. As I will elaborate on, I simultaneously managed to meet some of the NGOs’ ‘beneficiaries’ in domestic and informal contexts and became aware of the overall importance of what happens also without or after the support of NGOs ‘for unwed mothers’. The participant observation and the reflection on the wealth of projects and measures addressed to and tailored on unwed mothers and their children actually illuminates some of the most significant social processes which involve contemporary Moroccan society in relation both to the politics of care and reproduction and to the definitions of gender subjectivities, forms of kinship and relatedness as well as the political economy of health within which forms of ‘government’ of so-called ‘vulnerable’ populations are shaped.

My fieldwork in Morocco consisted of three main time periods spanning mainly 2011¹⁰⁴ and the last stretch of 2012, which made up an overall nine-month field.

¹⁰⁴ I shall briefly mention that my arrival in Morocco in 2011 immediately followed the self-immolation of Fadoua Laroui, a twenty-five year-old unwed mother of two children in central Morocco. I found it out only a few months later, and, although I had some contacts in the surroundings of Fadoua’s town, both for contingent reasons and for overriding constraints I have never gone there. However, I noted that this episode was handled cautiously – at least in Casablanca – by NGOs for unwed mothers, who – during my fieldwork – mentioned it only once during a conference. This event has been scarcely covered by the press and by online magazines, which in some cases connected her suicide – allegedly triggered by the refusal of social housing – to some other self-immolations occurred in the same weeks. However, I argue that this interpretation may be misleading: the discussion of these cases is outside the scope of this research, yet I cannot but maintain that rapid and oversimplified interpretations do not benefit the comprehension of these facts. If the self-immolation of this woman in front of her town’s municipality might have

Previous fieldwork had been conducted in the summer and fall of 2010 in northern Italy – Torino – with Moroccan immigrant women: this constituted on the one hand a useful “*pré-terrain*” (Ghasarian, 2002) which allowed me to narrow down my research topic, and on the other it aimed to explore the potentialities of an ethnography centred on women’s use of health services and on their reproductive experiences.

Torino was an unexplored field for me, as my previous research experiences dealing with Moroccan migrants were situated in other Italian regions and in different contexts, whereas Torino, as an urban context and as a field site, presented itself with several peculiar features. Indeed, it is historically (Sacchi, Viazzo, 2003) one of Italy’s first and main destinations of Moroccan immigration, where at least ‘three generations’ of Moroccans and citizens of Moroccan descent account for one of the most well-rooted Moroccan communities in Italy, while new marriages whether with spouses from Morocco or from other countries, the financial crisis, unemployment and return migration or family reunions with older generations, all account for the dynamism and the changing patterns of transnational migration between Torino and its surroundings and – particularly – certain areas of central Morocco (Capello, 2008)¹⁰⁵. Given this background, I started to carry out participant observation in public health services which offer ‘translation’ and ‘intercultural mediation’ services to migrant women (Capelli 2011b; Salih, 2006). Some days per week are dedicated to Arabic-speaking users, many of whom are actually Moroccan and – even if they speak Italian themselves – might access these services in particular when ‘intercultural mediators’ are available. In addition, participant observation was carried out in non-clinical settings such as libraries where more ‘convivial’ activities and meetings for migrant women had been organised by local health services. Moreover, other relevant relationships have stemmed from some meetings at local charities where a

been due to socio-economic constraints and in this sense might have been linked to claims of social justice put forth by social movements, her suicide had nothing to do with the wave of protests that swept the country at the end of February 2011 and – to a different extent – in the following months.

¹⁰⁵ It deals – predominantly, but not exclusively – with the regions of Chaouia Ouardigha and Tadla-Azilal.

group of Moroccan women worked, volunteered or regularly gathered to collaborate on specific projects, involving surrounding health, reproduction, infant care as well as gender relations and sexuality. These experiences allowed me to build rapport with some users of these services and/or participants in these activities who I met several times in Torino outside health facilities, in informal, mainly domestic settings.

Since I had already planned to leave for Morocco while in Torino, these women invited me to visit their families once in Morocco. So I did, whether they were there on holiday or not: the ‘network’ that I established before leaving was actually key to my fieldwork experience as, above all, it provided me with a ‘safety net’ and with significant trust relations over the time of my fieldwork. Some of these relations actually stemmed not only from my experience in Torino, but also from bonds deriving from previous fieldwork in Morocco and in Italy with Moroccan migrants, or from other Moroccan acquaintances living in Italy. Furthermore, the time spent with these families – sometimes unexpectedly or only indirectly – weaved into my ethnographic interests and provided me with in-depth, enriching insights which were complementary to those gained through the other sides of my fieldwork. These stronger bonds stemmed from my ‘exploratory’ fieldwork in Italy, as I sought to highlight, somehow helped me ‘settle down’ in the field and sometimes offered ‘escapes’ from Casablanca: the first part of fieldwork in Italy was helpful in that it oriented my research interests and drove me to explore issues which ultimately emerged as my main matter of research.

Indeed, while most users of the public health facilities and charities that I attended were married and turned to these services mainly for prenatal, postnatal and infant care, some others – whether married or not – sought other kinds of services and their situations did not ‘match’ the supposedly ‘conventional’ pathways of most patients in relation to marital status and childbearing. Actually, during my 2007 master’s research in Italy, I had already encountered the issue of out-of-wedlock pregnancy and birth experienced by a Moroccan woman among the users of the health facility which constituted my field site (Capelli 2011a), so I was already familiar with some sides of the question. However, other similar, yet diverse, cases

encountered in Torino¹⁰⁶ presented further relevant features which accounted for out-of-wedlock pregnancy as a multifaceted experience and research topic. From an epistemological point-of-view it might be argued – as do I – that exploring ‘unwanted’ and/or ‘out-of-wedlock’ pregnancy, birth and motherhood as experienced by Moroccan women living in Italy is different than dealing with the same/similar issues with Moroccan women in Morocco: it is actually so, unless we withdraw these experiences from their specific contexts and overlook some of their central social, relational and structural dimensions. After an insightful stage of research in Torino, I deemed that developing an ethnography of ‘out-of-wedlock’ births both in Italy and in Morocco would not have allowed me to reach sufficient ethnographic depth and might have hinted at a sort of essentialistic view, as reference to Morocco might have resulted as the only ‘link’ between extremely diverse experiences. Moreover, another ‘risk’ embedded in such a potential research was that in Italy I have – partially – dealt with ‘second generation’ Moroccan young women, who were born or raised in Italy, a key element – as well as an interesting issue – deserving attention and potentially further research. In other cases, women’s reproductive experiences and choices were necessarily bound to their migration pathways as well as to their socio-economic and marital status or, again – for instance – to the presence of their extended family or to other family ties in Italy. Yet, these factors alone would have definitely re-oriented my research in different directions, while my initial goal was to conduct extensive fieldwork in Morocco. Therefore, I rather selected some elements and suggestions from my initial fieldwork in Italy, which was ultimately worth undertaking before the one in Morocco and which also served as a hint for potential further research.

After having outlined the relational dimensions along with criticisms and weaknesses of my first months of fieldwork in Italy, I shall shed light on its ethnographically relevant elements. Participant observation in the settings mentioned above, especially in public health services – “*consultori familiari*” - introduced me to some issues that I had not previously been confronted with, such as for instance out-of-wedlock pregnancies experienced by Moroccan women and the issue of pregnancy interruption. As I have made clear, these issues are to be

¹⁰⁶ A thorough account of this part of research may be elaborated in further work.

understood by situating them in the context of migration, but some of their features resonate with the experiences of unwed mothers met in Morocco; moreover, their being situated in the framework of migration actually complicates them by locating them in a larger frame of reference, meanings and social values. This is the case of Majida, in her twenties and unmarried, she has been living since her childhood in Torino with her family but, as often happens, she has spent long periods of time in her parents' home town in central Morocco, where her grand-mother still lives. Yet, it is in Italy that she started dating a Moroccan young man, whereas this 'love-affair' had no 'serious goals', that is, it was not meant to end in marriage. Majida's unexpected pregnancy radically changed this scenario and – despite her female siblings pressures – she decided not to interrupt her pregnancy and to try to get married to her baby's father. Getting married at *adul* (notaries) actually meant travelling to Morocco as – unlike her – her partner was not an Italian national. Nevertheless, at stake here are not mere 'technical' issues embedded in Italian and Moroccan bureaucratic procedures, but rather the fact that marriage was the only 'solution' envisaged by Majida and her family if she was to give birth within a socially acceptable framework. In the meanwhile, her female kin had tried to dissuade her to pursue her maternity and marriage project, which they deemed "crazy" because they were aware that Majida's prospective husband was not 'committed' to her.

Nadia, a woman in her early thirties, who I also met at a local health service, had quite a different experience from Majida, while it also raised some central concerns if we are to discuss the politics of reproduction from an anthropological point of view. Recently married, Nadia turns to that health service for prenatal care: being her first consultation, she fills in a form with her clinical history with a midwife and a female Moroccan interpreter. This procedure raised the fact that she has previously had an abortion before her marriage: it dealt indeed with an 'unwanted abortion' because it was actually her former partner – and current husband - who did not admit the occurrence of birth outside marriage. At the time, they already lived together in Italy but were not married yet because she still had no permit of stay: this actually forbid her to go to Morocco – 'legally' – to arrange all legal marriage procedures. Moreover, the fact the couple co-habited was concealed to their respective families and relatives, some of whom were also in Italy: according

to Nadia, pregnancy and the birth of a baby would have represented for her partner another major – and unbearable – problem. Nadia wanted instead to challenge the potential troubles implied by out-of-wedlock or pre-marital birth by continuing that pregnancy and by eventually getting married, but she had few means to oppose her partner's decision and she had an abortion. As she finally managed to 'regularise' her status as a migrant in Italy, she was also able to go to Morocco with her fiancé and to 'regularise' their relationship through a marriage contract, which ultimately legitimised their union, their household and their future children before their social entourage, their country of origin and that of immigration.

Hanae was also in her early thirties as we met. She was living in Torino with her extended family; unlike many of her siblings and relatives, she quit Morocco only recently, in the late two thousands. Unmarried, she had a relationship with a Moroccan man that she had allegedly not disclosed to anybody at home. When she discovered her pregnancy she felt completely lost and felt threatened by her secrets: indeed, despite her desire to give birth and get married to her partner, this appeared as unfeasible because her partner was already married to a woman who lived in Morocco and divorce did not look like an easy solution. Hanae on the one hand ascribed these sort of 'obstacles' to changes in Moroccan family law which in her eyes grants more freedom to women in matters of marriage and divorce; on the other hand – and above all – Hanae bluntly claimed she was renouncing maternity at this particular time of her life, as she was desperate to have children. She was in deep distress and said she could not trust anybody: talking to me and to the health personnel also worried her, as she stressed that her family must not know anything about her pregnancy and her affair with her partner, otherwise she feared their reactions. However – against her own will – she found herself in that health service to undertake all procedures to have a pregnancy interruption.

These stories, which I selected among others and that I had to summarise by highlighting some of their significant features, shed light on the entanglements of multiple layers of reasons, meanings and challenges behind these women's choices or 'forced decisions' made – and often suffered – on their bodies and at odds with their desires. I deemed these stories significant in that they question the boundaries of reproduction, its moral, social and normative framework and help interrogate gender and structural power relations and the manifold ways in which they are

inscribed into people's bodies. Beyond the prescriptions embedded in social, legal and religious codes, at stake are men and women's strategies to make meaning of situations and events which might challenge their social world and drastically re-orient their existence, as is the case of out-of-wedlock pregnancy and unwed motherhood for Moroccan women, both in Morocco and – differently – in other contexts, such as migrants, or women of Moroccan descent – in Italy.

1.2 *L-baḥth*. The texture of research

As I have mentioned above, I could not not spend nine months fieldwork in Morocco at a stretch: my stay was made up of three main periods, whereby the first seven months were in 2011 – over the months between April and December – and the last two in the autumn of 2012. Hence, I have to make clear how I have narrowed down my research scope to Casablanca and in which ways I sought to manage the potential controversial points or pitfalls of this choice; moreover, as I started to carry out research there I did not exclude potentially extending it to other 'sites', where the question of out-of-wedlock births and unwed motherhood might be approached in potentially different ways. However, I did not consider further research in the *Oriental* – Eastern Morocco – where I had conducted my master's fieldwork in 2009 in semi-rural contexts; at the same time, I did not take the region's main town into consideration either, even if I eventually discovered the existence of a shelter for unwed mothers there too.

If I was to choose an urban context as a research site, after some readings, drawing on existing reports on the phenomena and remarking on the presence of numerous local charities working with unwed mothers with children and/or with abandoned children, Casablanca emerged at least as an interesting site to start research from. However, the focus on Casablanca as a field site was due to different reasons: some were due to the network of acquaintances among transnational families – in Casablanca, Rabat and their surroundings – that I have described above; other motivations regarded some personal connections which stemmed from my first trip to Morocco in 2008 – including a short stay in the city – which might potentially be relevant to my fieldwork and research interests. Basically, Dar El Beida or "*Casa*" was completely unknown to me, since I had spent most of my time in an oasis-

town on the border with Algeria in 2009 and some other weeks – approximately a month overall – travelling to Marrakech and different parts of Southern Morocco in 2008 and 2009.

Even if I knew Marrakech better than other urban centres, I had not considered turning to it for my doctoral research, that is I had not done any ‘preliminary’ investigation: whereas this might have revealed it as a relevant field site if I wanted to explore the pathways of young women and unwed mothers throughout Morocco. Probably, one of the reasons which prevented me from exploring the potentialities of Marrakech as a research site was that I felt ‘too’ familiar with it because my first bonds with the country and my oldest acquaintances were there; besides, I – partially erroneously – perceived it as a difficult place for my fieldwork being the destination of mass tourism¹⁰⁷, where it would have been hard to detach myself from the image of a tourist willing to spend money in the *souq* from that of a short-term language student or, again, from that of another European willing to set up an hotel in a *riad* in the medina, for instance. Above all, despite my love for the town – which represented my first and naive contact with Morocco a few years earlier – I felt that this time I had to turn to different, more unfamiliar places or rather with “those unfamiliar zones of experience that we choose to study” (Ask, 1994 : 77).

It is clear that the process by which I came to ‘stay’ in Casablanca was not thoroughly rational, as it hinged upon a wide array of considerations which do not concern solely my research nor the contacts I had nor my previous research and travel experiences. Indeed, in the first weeks of my stay in Casablanca, I regretted not having chosen another place and – due to time constraints and other circumstances – it was too late to spend time in further ‘explorations’ and reflections on the – supposedly – most suitable town, geographical area and overall

¹⁰⁷ Tourism from Europe – and North America – in Marrakech seemed to me to have further increased during a brief visit in 2011; in comparison with 2008 and 2009, I perceived the medina as slightly changed in terms of a massive ‘attraction’ for tourists and especially for their shopping, whereas in the other parts of the city a large number of Europeans build or buy their villas and apartments, on which Marrakech’s flourishing construction business is based. My first short visit to Marrakech in April 2011 was immediately followed by a bomb blast which targeted a renown café on the world-renowned *Jemaa el-Fna* Marrakech’s square, which claimed seventeen victims: at the time I was back in Casablanca, but that event did not actually influence my choice of not carrying out research in Marrakech.

‘context’. Despite initial difficulties encountered in Casablanca, I got used to this other side of Morocco since I also started to appreciate some advantages of being there, i.e. even amidst the constraints embedded in the outset of fieldwork I started my research and got to know more people and places, allowing me to settle-down in the city.

The potential advantages of being in Casablanca and choosing it as the main and privileged entry into the issue of unwed motherhood in Morocco consisted in the widespread presence of well-established local charities dealing with unwed mothers and their children. At the same time, this very feature was also presented to me – by researchers who had undertaken research in close domains – as a potential disadvantage because the context of Casablanca seemed ‘saturated’ with that kind of civil society initiatives which produced – according to these researchers – ‘standardised’ discourses and practices with regard to the issue of unwed mothers and their children. Thus, I had to be careful in seeking to ‘deconstruct’ the representations fostered and promoted by these organisations, whose approaches would become an object of inquiry as well. Despite initial ‘warnings’, the process of analysis and deconstruction of the *dispositifs* of care set up and consolidated by local charities and NGOs in the last twenty years – approximately – was not straightforward, since Casa and also its NGO environment was a new field for me.

Hence, I sought to manage potential pitfalls raised by my focus on Casablanca by bearing in mind that that reality was on the one hand filtered by those organisations’ discourses, practices and rules and, on the other, that – also in virtue of this peculiarity – *Casa*’s context differentiated itself from others, whereby insights on unwed motherhood from here cannot be generalised – in all their aspects – to the rest of the country, or at least to the places where other NGOs offer their services to these young women and their children, i.e. both in Southern, Northern, Central and Eastern Morocco through smaller NGOs and local charities. For the sake of time I have not been able to conduct extensive research in those other regions, while I have had the chance to meet some members or employees of those charities at public meetings or workshops. Therefore, in presenting and in discussing the ‘outcomes’ of my research I will seek to make explicit that I have had to circumscribe – also ‘geographically’ – my object of research and that – at an

epistemological level – this ‘selection’ does not aim to be exhaustive, nor to speak for the whole of experiences of unwed motherhood in Morocco, nor for all experiences of beneficiaries of dedicated NGOs in Casablanca or elsewhere in the country. Building on this awareness I have sought to go beyond biased and stereotyped portraits of unwed mothers by conveying ethnographic depth to the itineraries of the women who I have met and known in, across, through (or, sometimes, despite) the non-governmental sector.

Discussing the challenges embedded in conducting my fieldwork and in shaping my ethnographic presence and role, considerable attention is to be drawn to the methodological questions arising from doing fieldwork across – and thanks to – peculiar kinds of organisations like NGOs and charities, which – despite receiving international financial support – are mostly Moroccan. So, on the one hand, methodological as well as ethical issues might arise in the ethnography of these organisations in relation to some specific aspects of the programmes addressed to unwed mothers and their children; while, on the other, these sorts of organisations have to be situated and their role has to be questioned in relation to the overarching social, political and economic context, in which a massive “NGO fervor” (Piot, 2010: 133) has given way to a sort of ‘*NGOization*’ of politics and policies, which has played a major role especially in the – current – Mohammed VI reign (Bono, 2010) also in relation to the central role ascribed to gender and ‘gender approaches’ in current politics of ‘human development’ (Berriane, 2013). Another array of questions connected to research within or through the non-governmental sector concerns my relationships with their beneficiaries and the approaches adopted to build rapport with them. To begin with, I shall highlight what I now see as a flaw in the strategy I fostered in the field since its outset: I deliberately did not take into consideration the private sector because I drew on the ‘cliché’ of poor and disadvantaged unwed mothers who cannot afford to turn to private medical practices or clinics, i.e. I took for granted that an ethnographic insight into the itineraries of unwed mothers in relation to healthcare had to be based on research in public health services or within non-governmental organisations offering primary health care or facilitating access to both private and public health facilities for ‘*girls*’ and their children. Contrarily to this view, I might have gained interesting and problematic views if I had tried to look at

unwed motherhood from another perspective, that of the private health sector, to whom unwed mothers – as many other citizens – turn if they only have minimal financial resources which do not force them to recur to public health infrastructures or if their employers pay for their medical fees at private clinics or practices¹⁰⁸.

Although I did not engage in extensive fieldwork within the private health domain, I gained such an insight through some contacts with some private practitioners: it deals, therefore, with a circumscribed perspective which added to those of doctors who volunteer for charities, yet is emblematic of the plurality of pathways undertaken by those commonly inscribed among the most vulnerable and deprived “populations” for whom specific – governmental and non-governmental – programmes are designed. In so far as I am concerned in this section, it particularly sheds light on the methodological ‘direction’ I choose to take, which necessarily implied a ‘selection’ of the settings and contexts of research. Although to some extent it dealt with a deliberate decision, it went along the overall process of ‘discovering’ and re-shaping my research topic once in the field.

Like the question of healthcare, childcare has highlighted that my focus on the various ‘*dispositifs*’ of support addressed to unwed mothers and their children might not provide a thorough perspective on the coping strategies and on the conditions in which unwed mothers take care of their children, whether they benefit from some NGO programme or not. Indeed – while I have spent considerable time across NGOs and charities and also in their *crèches* – I have not visited the homes of informal *morabbiyyat* – child caregivers – which abound in every *sha’bi* (‘low-income’)¹⁰⁹ neighbourhoods in Casablanca, although I have explored the issue of childcare – including the recourse of this specific sort of

¹⁰⁸ Besides, not only free access to private consultations for unwed mothers and their children is granted by the intermediation of NGOs, but it might result from the autonomous engagement or sensitivity of individual doctors, who - in virtue of personal connections or previous work and volunteering experiences - do not charge these and other poor patients the ‘usual’ prices (see Chapter Five).

¹⁰⁹ The English term “low-income” is the only one which seems appropriate to refer to these neighbourhoods; the French “*quartier populaire*” is also used to indicate them.

caregiver – through the experiences of unwed mothers. They actually have to pay the *morabbiya t* to take care of their children for variable periods of time – hours, days, weeks – whether the mothers are in town or travel to their own parents. Hence, these ‘informal’ caregivers use a room of their house for their ‘clients’ babies and constitute a significant social reality in the urban social landscape, where ‘single’, unwed, working mothers and/or other women with no alternative networks of support are driven to recur to this informal sort of childcare.

Thus, from a methodological point of view it is to be noted that a deeper insight into the domain of ‘delegated’ and informal child care would have granted a more complex understanding of the – financial – deals and constraints unwed mothers have to make and of the concrete stakes embedded in this particular form of childcare, which is often rife with ambiguities as – according to my informants – children at *morabbiyat*’s houses are likely to live in unsafe or unhealthy conditions (despite their complaints, many young mothers stated they could not avoid turning to this solution). Drawing on the narratives and experiences of my informants who recurred to this form of childcare allowed me to problematise these issues from their points of view and not from those of their children’s caregivers: nevertheless, being theirs an informal activity implying a monetary transaction and a very sensitive domain, it might have been challenging to approach them overtly as a foreign researcher; besides, these caregivers deal with infants and also face hazards, children’s ill-health and – sometimes – unfortunately, their death; this was the case of the five-month child of Nawal. These reasons might help explain why approaching these forms of childcare might not have been an easy ‘entry’ into the social world of unwed mothers in Casablanca, even if I got to know these reality in the earlier phases of fieldwork. Further research would certainly call for increased attention to this ‘informal’ yet systematic form of childcare to which most unwed mothers in Casablanca recur.

As I sought to make clear so far, the fact that I questioned the issue of out-of-wedlock pregnancies and births and unwed motherhood by approaching the institutional dispositifs of care put into being in the last decades – or years – first made me reflect on other relevant, consistent, yet informal strategies fostered by these women at subsequent stages. Most of my informants actually were at the time

beneficiaries of an NGO or had recently benefited from some form of support from one or more organisations. What I aim to emphasize here is that these features necessarily informed our relationships in and outside the “NGO setting”: their experiences of seeking and receiving assistance and the processes they went through in order to conform to the NGOs standards – for example – contributed to inform the ways they appropriated their ‘status’ of unwed mothers and simultaneously of ‘beneficiaries’ which to certain extents, I argue, mattered also in the relationships I built with them. By this I mean that when touching specifically on issues like love affairs, boyfriends, sexuality and the dynamics concerning their relationships with the ‘biological’ fathers of their children, some ‘girls’ were ‘cautious’ and may have weighed up the details they told to me for fear that these would jeopardise the acceptable image they had presented to the NGO which supported them – with which I was still partially associated and that I myself could not criticise openly when talking to them. The fact that these dimensions were at times left ‘unspoken’ was more evident with girls who were ‘beneficiaries’ of some of these organisations at the time we met and still played a role afterwards. Yet, more critical and contested views towards the NGO sector, for instance, were fostered and expressed by some other beneficiaries who were also more outspoken in regards to romance, imageries of love and sexual relations.

I must say that I felt particularly challenged at a personal and ethical level when having to get acquainted and to interact with the ‘beneficiaries’ of certain structures – shelters, charities – from which they basically were not allowed to go out except for short visits to close-by shops or for administrative tasks – going to the civil registrar – or, of course, for childbirth or for medical consultations; once admitted to these structures, the girls have to give their mobile phone to the administration and are only allowed to receive phone calls on the shelter’s number. These are some of the rules and codes of conduct that may give account of the power relations informing such contexts and of the diverse ‘layers’ of social control exercised first of all on the bodies of these young women: structures and measures meant to protect them and to offer them safe conditions to give birth and to spend the first days/weeks with the newborns actually embed a set of rules of behaviour and codes of conduct which may narrow down the spaces and

possibilities in which – for instance – ‘decisions’ (or forced decisions) unfold for keeping or giving up for adoption the newborns.

Very limited chances of movement and communication and long months of waiting and isolation within the enclosed spaces of these structures are certainly an alternative to life on the streets or in much harder conditions, nevertheless I argue that the measures put into being to ‘help’ young pregnant unmarried women and unwed mothers and their newborns are to be interrogated both in their ‘disciplinary’ dimensions and in their productive effects in terms of novel opportunities (not being stigmatised as an unwed mother) and – simultaneously – novel boundaries, such as subtle forms of control, glossed as ‘re-moralisation’. These spaces were to a certain extent the reverse of the intimacy of domestic spaces, of the dimension of *dar* – home and family – as noted also by Vacchiano (2007: 272) in relation to the structures which – in Casablanca – ‘host’ other subjects, including street and abandoned children, whose biographies illuminate the most vulnerable tangles of the social order. Crossing the thresholds of these spaces, walking through their corridors, sitting in their TV rooms and dormitories, nevertheless, has allowed me to sense (smell, see, perceive) the materialisation of norms and boundaries.

These issues profoundly challenged me as I started to carry out research within the structures offering shelter to a limited number of pregnant girls for a limited amount of time; movement and communication restrictions to which they were subject represented themselves a ‘challenge’ to me and were amplified by the dynamics involving our actual meetings within such bounded spaces. Indeed, I could not spend but a few hours within one particular shelter and once there – unlike in other organisations where I have been to – there were no particular activities I could be involved in, in order to be acquainted with ‘beneficiaries’, since they had not themselves a lot to do apart from occasional embroidery activities, house chores and watching TV. So, the personnel usually – at least at the beginning – asked some of the more outspoken ‘hosts’ if they were willing to talk to me individually, then I gradually became familiar with this setting and the process of ‘finding time and space’ to talk to the *bnat* – girls – less ‘artificially’ and ‘technically’. Nevertheless, I still felt uncomfortable as I clearly sensed that my presence might be interpreted as ‘intrusive’ or even ‘threatening’ especially as

some girls told me that her friends probably feared that I would report what they told me to the personnel, which highlighted that they associated me with social workers and the director, who were not trusted by or were fairly hostile to some of the girls. Another time I was asked if I was a “*ṭbiba naḥṣani*” – a psychologist – by a beneficiary who had probably talked – or had been lead to talk – to psychologists before and who probably associated our individual talk in the TV room to that kind of meeting. Hence, these aspects ultimately made me realise that despite my efforts and contingent constraints that did not hinge upon me, “this is not an equal relationship – after all, the informant has only the foggiest notion of what this strange foreigner is really after” (Rabinow, 1977 : 47).

The fact of meeting girls – mostly – individually within this specific structure, unlike in others, did not result from my own request or choice but was rather suggested by the director who thought it was more suitable that the girls “opened their heart to me” without any other friend listening to their stories, referring to potential issues of jealousy between them. So, individual meetings with me were deemed better than collective conversations and ‘exchanges’ of stories which might affect internal relationships. Although I understood some reasons for such ‘precautions’ and in many cases I felt myself at ease in talking to these beneficiaries individually in the quiet of their TV room or of their – almost – empty dormitories, these very spaces and their characteristics (little light and window grates, childish decorations aimed at giving ‘warmth’ to the raw white low walls separating beds and children’s beds from each other...) constantly reminded me/us that I was the one coming from outside (*barra*) to ‘ask questions’ before going away – to another *Casa* district and then to *l-barra* (the outside as ‘abroad’), i.e. Italy or whatever my country as *barraniya* (foreigner) or *nsraniya*¹¹⁰ was – while they were spending long weeks or months within the same walls, before facing ‘the outside’ in other, yet unexpected, ways, with or without their newborns, whatever their desires.

The peculiarities of ‘participant observation’ within this sort of structure – due to its intrinsic features – were thus mirrored by the meetings with its beneficiaries. First of all, it is to be noted that, apart from Nawal – a girl whose story will recur

¹¹⁰ “Stranger”, “Christian”.

throughout this work – I did not meet any of them outside ‘the house’ and that even the following meeting with Nawal happened by chance in another ‘shelter’ for homeless women where she had been ‘sent’ a few weeks after childbirth. After that occasion I was able to establish phone contact with her so that we subsequently met in different places in Casablanca. Within the walls of the first ‘shelter’ – that I visited more regularly – the fact that girls ‘gave up’ their phones to the director and that communication with the external world was mediated by this institution did not prevent them from telling me their phone number, but the conditions in which we met definitely did not ease the establishment of ‘friendly’ and ‘peer’ contacts and relationships. So, in a few – yet emblematic – situations I neatly perceived the girls’ reluctance to talk to me; I sensed – and in a way I shared – their difficulty in understanding why I wanted to talk to them and their ‘fear’ of potential repercussions of our conversations about their life within the ‘shelter’ or possibly outside it. The sort of ‘limbo’ in which they found themselves and the actual place where they experienced it is something one might want to forget once outside. For these reasons, my own awkwardness and discomfort in doing research in such an enclosed and ‘controversial’ space (yet no less controversial than others from which girls enjoyed more freedom of movement and communication) and my informants’ discomfort and reluctance – at times, hostility – have been ethnographically highly productive and significant. Nevertheless, I shall also give account of the experiences and relationships which – in the same settings – bore ethnographic worth without necessarily embedding such ambiguities or ‘negative’ perceptions.

1.3 *bi darija* – grappling with ‘the field’

In discussing methodological issues and in illustrating the main concerns raised by my fieldwork, it is worth noting the role played by language(s) in shaping the conditions in which research is conducted. I have to make clear that my ‘pathways’ across the languages used for and during my research have been fragmented: I started to achieve fluency¹¹¹ in Moroccan Arabic dialect – *l-darija* (*l-maghribiya*) – mostly over the first part of my stay in 2011, as my previous fieldwork experiences

¹¹¹ “*Safi, sheddatha!*”: “that’s it, she ‘caught’ [or she ‘grabbed’] it” – i.e. the dialect. This is what the sister of a friend of mine enthusiastically repeated every time I visited them.

in Morocco had been carried out in regions where Arabic dialect was unevenly used as an alternative to or replaced by Tamazight – Amazigh language; due to my time constraints, French – that was also widely spoken locally – was also fostered with the help of ‘translators’ or directly with my informants. Therefore my knowledge of *darija* was limited to basic communication and to terms and expressions which were key to my research themes. At the same time, my 2009 field provided me with elementary Tamazight knowledge, which was relevant in doing ethnographic research in that linguistically diverse context – where it played a central role in defining people’s belonging and identity – as well as in building trust relationships. Nevertheless, Arabic dialect is spoken also by – most – Tamazight speaking Moroccans and – despite inner migration from Amazigh speaking regions – it is also the main language spoken in Casablanca, besides French¹¹²: hence within my doctoral project I definitely strove to improve my *darija* speaking skills. Previous – basic – study of classical Arabic and research among Moroccan migrants in Italy had provided me with further basis for the improvement of my knowledge of *darija* during my longest research stays in Morocco. Hence, I shall note that language has been a key issue in my fieldwork and as I started to master *darija* I could obviously sense significant differences in interacting with my informants as well as in daily life. The question of language also exemplifies the shifts occurring in my position and perspective over time and the ways this influenced the production of anthropological knowledge. So, I can state it actually *is* a privileged social and cultural ‘entry’, although it is not the only one, as I recognise at the same time that “most social experience lies beyond words” (Hastrup, Hervik, 1994: 8).

Thus, I shall underline that if each of the three ‘stages’ of my nine-month fieldwork was different in itself, it was also influenced and characterised by the extent to which I was able to communicate in *darija*. It is also to be noted that in Casablanca – as well as in other big Moroccan cities – French is commonly used by Moroccans

¹¹² The fact of being the country’s economic capital and a cosmopolitan city, the use of French is widespread in Casablanca, especially for business, commerce and private education; the higher the social class and the more bourgeois the district of residence, the more frequent is the use of French even within Moroccan families’ members, whereas *darija* is commonly used with servants and people of lower social classes – or for very informal interactions.

in certain institutional contexts, including the NGO and the health sector, higher education, the media; therefore, in dealing with these domains French was overwhelmingly used to interact with my informants and to gather relevant information. At the beginning of my stay I resorted to French also in more informal settings, for instance when I needed to explain more fully what I had already expressed in *darija*. I was a guest for short and repeated stays at the families of some friends who live in Italy, so as they came to spend their holidays, Italian was fostered beside Moroccan *darija*. Some of the youngest siblings of my friends were fluent in English and were glad to practice it with me, so some conversations were carried out in English, some of which related also to the themes of my research. In these cases, a ‘third’ language, that was unknown to the rest of the family, was particularly well-suited to conversations about issues that parents, older or younger siblings should not be aware of, notably love affairs and male-female friendship or intimate relations.

Besides efforts to improve my Moroccan dialect on a daily basis, through listening, writing notes and through interactions both with my ‘direct’ informants and in other informal dialogues, I sought to foster more ‘formal’ ways of learning *darija*. Therefore, I thought that along with what I was already learning by ‘being there’, I would have benefited from private classes of dialectal Arabic. Indeed, I shall mention the fact that I had no official – nor unofficial – ‘field assistant’ clearly designated with such a role from the beginning of my fieldwork. Yet, as I was still getting ‘acquainted’ with Casablanca and sought somebody to take private lessons with – as well as with the aim of ‘broadening’ my social network – I had the chance to accidentally meet a young Arabic high-school teacher in a taxi on a rainy day as I got lost while looking for an NGO. Aida was pleased by our ‘accidental’ encounter and surprised by the fact that a foreigner came explicitly to her *sha’bi* neighbourhood instead of spending time visiting Morocco’s tourist highlights. Even if she had already given private classical Arabic classes to children of well-off Moroccan families, it was definitely the first time somebody asked her to learn dialect. It would have been a sort of ‘experiment’ for her too; her attitude evoked that of some ethnographers’ language teachers met in the field, as she stated that she “had not taught Moroccan before and therefore [(s)he] could not promise that

[(s)he] would be good at it. [S]He would try his [her] best” (Rabinow, 1977: 24). So did Aida as she soon accepted.

She has a stable job as a teacher in a public school and recently obtained several ‘promotions’ which make her a successful professional with a satisfying income, so my contribution for a few ‘*séances*’ of Moroccan did not represent an immediate need for her, who sometimes seemed unsure whether I should pay or not. Aspects dealing with money – and/or other sorts of material support – and the ways it influences relationships with ‘others’ in the field, are emblematic of the multiple negotiations embedded in the ethnographic encounter and particularly with the ambiguities underpinning relational aspects between the researcher and her different ‘others’. I have discussed this point with fellow anthropologists with whom I spent some time in Morocco and who raised concern about their ambivalent attitudes towards their field assistants with whom they did not manage to conceive relationships if not mediated by money or by other sorts of material support. My friends felt uncomfortable with potential relationships of mere ‘dependence’ of their field assistants from their money and help. My experience with Aida was in this regard ‘easier’ as she was not meant to be my ‘official’ field assistant and did not actually spend any time with me and unwed mothers or other informants; moreover, as already mentioned, her work and profession probably made her closer to a ‘peer’ than to somebody who relied exclusively on my - fair¹¹³, but insufficient as an income - financial contribution and conceived, therefore, only the ‘material’ sides of those relationships.

As Paul Rabinow aptly put it, when describing initial ‘ambiguities’ in the relationship with his Arabic teacher in Morocco: “I had been conceiving him as a friend because of the seeming personal relationship we had established. But Ibrahim, not less confusedly, had conceptualized me as a resource. He was, not unjustly, situating me with the other Europeans with whom he had dealings” (Rabinow, 1977 : 29). Re-reading this quote, I am glad I was not seen as a mere ‘resource’ by Aida nor by her relatives: being regarded as a student, who had no stable source of income, I was rather seen as more disadvantaged than my teacher,

¹¹³ I had asked some acquaintances what the average prices of private language classes were in other Moroccan towns.

even if I was coming from a European country and I was able to pay for those classes. Although in their eyes I actually reminded them of Europe, my southern European origins were still different from the side they already knew, that is France, where their older son lives, married to a French woman.

Therefore, they were aware of the widespread financial crisis sweeping particularly southern Europe and clearly did not regard Italy as an attractive destination for youth, contrarily to what they had heard from colleagues and neighbours who had emigrated to Italy in previous decades. Hence, I started to be seen as Aida's friend and 'mate', as somebody she could also rely on and talk to. First of all, I was somebody whom she had been initially contacted by because of her status and profession – irrespective of the fact that we had met by chance in a taxi. Besides our 'formal' conversation meetings – which took place at her family's house – we used to go for coffee and walks on the *corniche* or shopping in the *kissariat*¹¹⁴ and in some of the most popular *souq*, whenever time allowed; I soon got acquainted with her family who warmly welcome me in one of Casablanca's biggest *sha'bi* districts, where Aida's workplace was also situated and – at the same time – not far from my first accommodation.

Thus, a 'formal' relationship – which was mediated by a mutual commitment and by an exchange of money for private Arabic classes – became from the first months one of the strongest bonds of trust and friendship stemming from the field. It is to be noted that to certain extents Aida, a couple of years older than me, was to me also a sort of informant, for she is a young woman in her thirties who was, at the time we met, divorced and willing to find a new partner with the aim of marriage and childbearing. Her perspective on gender relations, love, sexuality, marriage and the ways they are conceived and experienced by youth in contemporary – urban – Morocco illuminated a good deal of questions that were simultaneously highly relevant to my research and not only the matter of our own conversations on our lives. Being aware from the very beginning of the subject of my research – and of my related interests in health and reproduction – she provided acute and enriching insights not only – even if indirectly – on out-of-wedlock pregnancies and the 'challenges' faced by young unwed females in negotiating gender and sexual

¹¹⁴ Indoor markets.

relations, but also more broadly on education, work and the “lack of awareness” of social inequalities that she noticed in younger generations; we often discussed the overall political situation in Morocco, for instance at the time when the July 2011 referendum on a new constitution took place and in November 2011 as the elections made the PJD the government’s leading party.

All these questions and further discussions on the events known under the name of the “Arab Spring” in other Maghreb and Middle Eastern countries took place with Aida and her mother over glasses of tea with *nana*’ (mint) or *sheeba*¹¹⁵ whether the season was hot or cold. Aida’s mother, in particular, often joked and claimed that she – instead of her educated and graduated daughter – would have been the best *mo’allema* (‘teacher’) for me, if I just spent most of my time with her.

1.4 *l-hiwarat*: (awkward) dialogues

“There is reason to maintain that one’s own experience of the process of gradual understanding – and indeed of misunderstanding – in the field is still both the means to comprehension and the source of authority” (Hastrup, Hervik 1994 : 5).

Ma’a l-waqt – as time went by – and thanks also to the meetings with Aida my fluency in *darija* improved and impacted positively on my everyday activities across NGOs and health services and in any situation where Moroccan dialect was the main language to be used. At the beginning of my research in local organisations dealing with unwed mothers and their children – when my *darija* was still ‘weak’ – relationships and conversations were obviously more likely to start with beneficiaries – *mustafidat* – who spoke French, among whom some were fluent – thanks to previous studies and practice – and some had more basic but good communication skills. In the meanwhile, I also attended some Arabic classes offered by one of the NGOs to its beneficiaries who had no or little education and needed therefore basic literacy to acquire writing and reading skills. This

¹¹⁵ Another herb used for tea in the winter.

experience was also central in building rapport with some other beneficiaries and made clear that my initial ‘privileged’ relationships and chats with certain girls were rather motivated by my scarce fluency in *darija* and not by personal issues. Moreover, attending these language classes and taking notes among the beneficiaries showed that – unlike most European or foreign ‘stagiaires’ – I was not there to ‘teach’ anything but to learn something instead; some of my ‘classmates’ were also glad they could help me during the lesson and were curious and amused about my participation ‘as a pupil’.

It is to be noted that the girls who spoke French were mostly willing to speak it instead of *darija* because that somehow ‘gave proof’ of their education – allowed them to practice that language further - and presented them as ‘modern’ and ‘successful’ recipients of NGO programmes. This happened especially when we met in the context of the NGOs, whereas when we met at their places speaking French with me might have been a way to avoid that roommates and neighbours overheard our conversations or – on the other hand – it might have prevented them from having an individual conversation with me so that I did not become acquainted with other girls who might provide accounts of their life outside the association – *l-jama‘iyya* – at odds with representations which conformed to the NGOs’ ‘standards’. However, some of them were also glad to represent our conversations as ‘exchanges’ of language skills: they taught me *darija* and I – as a non mother-tongue speaker – offered them some chances of speaking French (or English). So, if not being fluent in *darija* at the beginning was certainly a limit, it did at the same time influence the kind of relationships I built with my informants in unexpected and original ways.

Hence, I have always tried to make meaning of initial or ‘constant’ constraints dealing with language non-fluency and to what I saw as its ‘by-products’ – such as initial difficulties in establishing trust relationships in the field – by bearing in mind that “misunderstandings, tricks, double meanings, opaque metaphors and self-interested distortions are always present in communication, but what is important is that the engaged ethnographer learns something of ‘the grammar’ that guides the actions of his interlocutors” (Borneman, Hammoudi, 2009 : 14). According to the above statement, ‘misunderstandings’ may not strictly depend on language fluency but also on the ethnographer’s sensitivity and ‘wisdom’ as well as

on other specific factors inherent to one's field. Such a view to a certain extent 'comforted' me in that over time I have come to recognise – even if it was no surprise – that informants might actually 'withhold information', provide 'nuanced' accounts of their stories and/or 'lie', as one of the 'hosts' of the first shelters that I visited bluntly warned me.

Salima pointed out that what her friends – or other *bnat* – told me might be or was likely to be mere *kdub* – lies – whereas, for me, this 'detail' added to other methodological challenges as well as to insights into the ways in which girls self-represented their situation in relation both to charities and to myself. Salima's point of view also helped me interrogate other girls' narratives with a more critical 'gaze' and to be careful towards oversimplified 'versions' of girls' stories presented by them and/or by social workers. Another piece of advice regarding the kind of narratives I was told by my informants was given to me by one of my acquaintances, a Moroccan woman¹¹⁶ who I had met on the occasion of *Eid l-kebir* at her in-laws in Casablanca and who had been living in Italy for a long time. As I told her what my research was about, she bluntly said to me in Italian: "*Non te lo diranno mai!* [they will never tell you – what actually happened]". She meant that whatever the experiences the girls' went through, they would not tell me 'the truth' about the ways in which they got to know their partners and the kind of relationships they had with the biological fathers of their children.

Although unable to discuss the issue into more depth with this woman, her point of view also pushed me to constantly weigh up and rethink the approaches I fostered and the ways in which girls – and NGOs personnel alike – drew on certain rhetorical strategies for the representation of out-of-wedlock births and relationships, not to 'get stuck' into what might have turned into a form of frustration or of conviction that I did not succeed in establishing trust relationships in the field. To a certain extent, indeed, I took for granted that in my informants' narratives some details and elements might be – deliberately or not – 'withheld' or that they might "deliberately lie or 'bend the truth' in order that the listener form a particular impression of them" (Ellen 1984 : 116); I learnt that – especially within the context of local NGOs and charities – I might be told what the informants

¹¹⁶ She is from a small town in the region of Tadla.

thought I was likely to want to hear or what they thought conformed best to the image and the ‘moral standards’ set by the organisation they represented.

§ 2 Field and paperwork. Challenges and relations

Carrying out research in and across several and heterogeneous institutional contexts entailed various sets of issues which could be broken up into access and bureaucracy, ethics, positionality, as the main methodological questions, which are to a certain extent mutually connected in making up the ethnographic ‘enterprise’. So, I shall try and discuss them ‘globally’ in order to shed light on their epistemological value. Above all, it is to be made clear that I have always considered that I would have conducted at least part of my research through institutions and/or civil society organisations or other sorts of local associations dealing with mother-infant care and/or sexual and reproductive health. Therefore, it was clear that I’d have had to be ‘overt’ and to present myself as a PhD student : at all stages of fieldwork this has implied a good deal of email and phone calls, paperwork such as the preparation of multiple outlines of my research project and of my prospective activities at each organisation, CVs, hand written letters, copies of my ID (identity card), various versions of requests of ethical clearance and authorisations to be submitted to some of the actors, organisations and to the different bodies or offices within the institutions with whom I interacted. When dealing with public health structures this has been particularly ‘complex’ and I probably would not have managed to gain ‘official’ entry if not for the ‘intermediation’ of a couple of health professionals whom I could rely on as ‘references’ and who kindly introduced me to other colleagues of theirs. Sometimes, the ‘stratification’ of bureaucratic steps I underwent and other ‘contingent’ as well as ‘relational’ issues made me regret I had not been able to undertake any kind of ‘informal’ or ‘covert’ fieldwork, without (necessarily) making explicit my presence and role as an ethnographer on those specific issues. Nevertheless, if I was to investigate some of the sides of out-of-wedlock births and unwed motherhood in Morocco, especially with regard to the role played by institutions dealing with these phenomena, I had to seek access to them in formal ways, as – at least at the beginning of my research – that seemed to me one of the

possible ‘entries’ into the questions I wanted to study. Since the beginning, I was aware that institutions and their members might have fostered a ‘defensive’ stance towards my research topics and questions that – with regard to public hospitals and health professionals, for instance – involved their image and role to a great extent. Despite this, such reactions from these informants were emblematic of the social and moral stakes embedded in out-of-wedlock pregnancies and births also in their ‘management’ within institutions, such as public health. Notably, gaining access and actual ‘entry’ to public health settings and to local charities required my ‘identification’ – through CVs, *resumés* of my project and goals and time scales of my work – and my subsequent ‘location’ in the charities different ‘sectors’, either in dispensaries, in the kitchen, in crèches, or across maternity wards¹¹⁷ with NGO social workers. Otherwise I took part in activities as diverse as ‘wedding ceremonies’ for girls who got married with the biological father of their child, parties at the charities, information sessions on the Family Code, on job search, on primary health or ‘sexual education’. In general, however, I always had to weigh up the ‘degree’ of familiarity and confidence I developed with each (kind of) charity employee, as this aspect impacted both on my relations to the charities’ beneficiaries – unwed mothers – and on those with other employees or members of the charity, notably social workers, who are key figures in the supervision of all activities taking place within the organisation, but also of ‘internal’ relationships between the various persons – including me – interacting with their beneficiaries. Bureaucratic constraints shaped and sometimes postponed my access to public health, therefore, I was able to meet social workers employed within two public hospitals – in two different cities – only after having already carried out a significant part of research throughout NGOs. Yet, these meetings happened probably at the ‘right’ stage of fieldwork, as I had acquired a sufficiently broad knowledge on the matter of unwed motherhood and of its ‘management’ by non-governmental actors, so I could ‘critically’ weigh up these other social workers’ accounts and claims, which sometimes sharply contrasted with representations that I had previously been provided with. Different and sometimes contrasting accounts of these professionals whose work was closely connected to unwed mothers’ and

¹¹⁷ In hospitals located in different neighbourhoods of the city.

their children's care called, therefore, for further reformulations of my understanding of this social reality and elicited novel 'problematic' views on NGOs' action and 'devices' addressed to unwed mothers and their children, especially as far as forms of 'assistance' and 'support' are concerned¹¹⁸. Postponing certain activities – such as meetings with social workers within public health settings – is not the only outcome of 'bureaucratic barriers', nor are these to be ascribed only to State-lead services – as I mentioned above – as 'bureaucracy' has – first of all – significantly shaped my research also within the non-governmental sector. Indeed, at the very beginning of my fieldwork, I had to postpone the plan of *stage* I had already agreed at an NGO as I applied to be admitted as a '*stagiaire*'/researcher at another similar organisation, the director did not allow me to carry out *stage* activities at two different NGOs at the same time, even if they knew each other and regularly cooperated.

The ambiguity of being a peculiar kind of '*stagiaire*' – neither a nurse, nor a teacher, nor trainer in any professional activity (embroidery, cooking, etc), within the organisations which offered these kinds of activities – made it sometimes difficult for the NGO members and the beneficiaries to identify me and to understand the meaning of my presence in the various domains in which I interacted with the different actors. As a consequence, within the bounded context of certain organisations, I was often seen as 'an observer' and as somebody who 'asked questions' and 'talked to people', which – as I have discussed above – might be highly problematic when dealing with persons who are to a certain extent connected to each other by being the 'beneficiaries' of the same charity, by working and – sometimes – living together and by having their children at the same kindergarten. Nevertheless, I have rarely – I would say never – had real 'clashes' with any of the beneficiaries of the NGOs, whereas I have had both experiences of serious misunderstandings – or 'clashes' – and the perception of slight 'hostility' from some of their employees. The latter may have depended mainly on social worker's work load – thinking particularly of certain charities – but also on the fact that my 'needs' and requests were not clear at the beginning of my '*stages*' within the given charity, so initial activities of mere 'observation' and 'interviews' might

¹¹⁸ These aspects will be discussed in Chapter Five.

have been perceived as intrusive, whereby my presence implied also continuous questioning, as many aspects of the NGOs work were completely new to me.

Yet, I also felt ‘under the scrutiny’ of some social workers especially as, at the outset of my fieldwork in certain charities, I still did not master *darija* and in general about my project and my own life, thoughts, family and marital status. Repeated episodes in which I clearly perceived specific individuals’ hostility or unwillingness to deal with me drove me to avoid our contacts and to deal with other members of the same organisation – if possible – because particularly at some stages of fieldwork I was myself distressed and could hardly manage those interactions: I understood it as part of my ‘ethnographic’ experience, yet not as its core. In the cases that I would label as open ‘clashes’, these happened almost all of a sudden and luckily also found a solution in that the ‘informant’ – a social worker – at stake was subsequently sorry and apologized about having misbehaved and scolded me before many other NGO workers because of a report that in her opinion was not ‘adequate’. This social worker, who had actually been really helpful during my research, ascribed the reasons of her ‘reaction’ to personal and health reasons, nevertheless I understood her behaviour in different terms, as – besides her distress – I sometimes felt she perceived me as a ‘foreign’ presence who investigated issues which – I supposed – might have been closely connected to her own biographical experiences as well – though she never explicitly told me she had had a child out-of-wedlock.

Whatever her biography, as far as I was concerned, I was deeply upset by this sudden ‘burn out’, that, after all, I found unjust and apparently unmotivated. I did not agree with her manners, but I apologized and tried to understand why she got so angry. In general – although in those months I learnt to be more patient than usual – this episode occurred during a week in which I had been confronted with other dramatic events and news which profoundly strained me, so I would have hardly managed such an amount of anger if she had not told me that she was not actually angry with me. However, these experiences were highly emblematic of the ambivalent relational dynamics which might arise even in this kind of setting in which everybody is supposed to be focused solely ‘on a cause’ and where personal issues and jealousies are not apparently at stake; from these ‘misunderstandings’, ‘ambiguities’ or open clashes I also learnt that I could feel ‘bad’ emotions towards

the people at the centre of my research or thanks to whom I was carrying it out. Although it was not amusing at all, recognising my own ‘hostility’ and anger was also a significant ‘step forward’ in the formation of my ‘ethnographic’ subjectivity, in understanding the pathways that were worth undertaking and the people I could trust and be respected by.

As I have sought to explore in 1.2 when discussing my experiences across certain charities consisting of temporary shelters for pregnant unwed women – and newly delivered unwed mothers – my fieldwork has raised multiple ethical concerns in terms of the ways in which I ‘positioned’ in the field and within the concrete structures and settings in which I sought to enter in order to get broader and heterogeneous insights into the lives and itineraries of unwed mothers as well as on the measures and programmes addressed to them by governmental and non-governmental actors. My non-neutrality has simultaneously been interrogated in different settings and manners, in that – if I succeeded in building lasting relationships – I had to manage the relationships with the people – beneficiaries or employees – met within NGOs also outside that framework, trying to mediate between their contested views on their experiences within NGOs and mine, for instance; in other cases at stake were actual issues of confidentiality, arising from conversations with people with whom I had common acquaintances.

An employee of the nursery of one NGO for unwed mothers – whom I subsequently befriended – actually feared social workers – who played the role of her ‘bosses’ – since they made clear she should not “talk to girls”, that is she should not listen to their stories and their problems or complaints but just feed and change their babies, without any further contact or exchange. My friend’s work environment was actually pretty distressing and her work load increasingly hard; moreover these pressures significantly informed our interactions at her workplace. The conversations between us and with the charity’s beneficiaries might have become problematic if her bosses had noticed we talked about the beneficiaries’ situations; my friend Kenza also warned me about visiting the girls at their homes, that is the rooms they rented with fellow beneficiaries or other girls, as she had been officially asked *not* to meet them outside her workplace. Kenza interpreted this imposition by her employers as an attempt to control the circulation of information concerning unwed mothers and their life within and outside charities

and the critical views they might spread on the charities' work – as my friend Kenza put it, “the secrets of the *jama'iyya* [charity]”. Nevertheless, I kept meeting some of the beneficiaries or former beneficiaries of the charity my friend worked for, especially as – in the second half of my fieldwork – I was not attending that charity's activities anymore; I also explained this to my friend and tried to reassure her. However, I still had to weigh up what I could disclose to Kenza about the places I visited – persons and other charities – the ‘beneficiaries’ I met and the information they shared with me, as my answers to potential questions asked to me by Kenza might undermine the relations of trust I also had with the other girls, who were actually the mothers of the children cared for by Kenza .

On the other hand, even if some beneficiaries knew I knew their children's caregiver, others did not and in general I had never disclosed to anybody that I regularly visited Kenza 's house and that I had a close relationship with her family as well – as this might also raise ‘fears’ among the beneficiaries about me ‘telling something’ about them to Kenza . The latter, especially towards the end of my stays – both in 2011 and in 2012 – openly told me more details about her work and some internal dynamics of her workplace and about the stories of some of the current or former beneficiaries: her discourses put emphasis – once again – on the fact that it was hard, in her opinion, “to help” or to work with *l-bnat* – meaning unwed mothers specifically – because “they are too difficult [to deal with] – *wa'arat!*” and they often tell “lies” about their situations, adding to the fact that they would rarely be hard workers and would rather “go out, in the street” whenever they had the chance, to look for more affairs and “problems” with men. Her insight was not an attempt to generalize unwed mothers' behaviour – since she directly knew other contrasting stories – but to ‘warn’ me further on what happens outside the framework and beyond the surface of NGOs, irrespective of the ‘standardised’ representations I had been provided with until that time. These examples were aimed at shedding light on the ethical challenges I have been confronted with in the field, as I notably had to find a balance between different relationships of friendship and trust which weaved into my research and which might potentially impact negatively on some of my most significant social and personal relationships as well as on my overall fieldwork activity – which was partially based in organisations.

Towards the end of my fieldwork in 2012 – in addition to many visits, tours, invitations to lunches and dinners – I still had to struggle with some issues dealing with permissions, authorisations or just a good deal of phone calls and email to agree some ‘last’ meetings or visits to associations that I had visited the previous year and where I still had not shown up this time. I conceived such visits as informal ones, that is as chances to see people again I had not met for almost a year and – of course – I simultaneously hoped to ‘catch up’ on ‘research relevant’ issues; yet, dealing with ‘civil society’ means that the person I contacted to know when it was suitable to visit one association kept postponing the meeting due to a very busy schedule of activities and not least because of the imminent *Eid l-kebir* which meant NGO activities were suspended because of the ‘lack’ of beneficiaries, most of whom had gone to their families. After the days of *Eid*, the days of my departure approached too, so I finally turned to this organisation without having fixed any meeting with the ‘secretary’ and with the conviction I had asked enough permissions already. The personnel who I found warmly welcomed me and was glad – and amused – I “still” spoke *darija*, wondered where I had been in the meanwhile and said I should have come earlier, soon updating me about the changes which had occurred over recent months and inviting me to spend a few hours with them, even if it my presence during their scheduled activities was unplanned.

Since I had some spare hours I was definitely willing to stay, however, I stressed I had not agreed anything with their ‘boss’, who soon arrived and – although surprised – also welcomed me and congratulated me for my *darija*, emphasizing that in the end I “became a Moroccan”: “*safi, welliti maghribiya!*”. If we look at this statement within a wider discourse on one’s subjectivity and its negotiation in the field – and in the relationships with institutional and non-governmental actors – it is noteworthy that it can be read at least in two ways. Indeed, on the one hand, it stood for my ‘gate keeper’’s irony – which recalled similar ‘jokes’ made to me on many other occasions by people who stressed that I ‘got used’ to Morocco – on the other hand, her statement might be understood as a subtle way to say that ‘I sneaked into’ the rooms of the association without waiting for permission and that I managed to enter it informally, because I knew that on that day, at that time, I would have found somebody there or I could just use the secondary door without

knocking on the main one (where I would have been asked if I had a fixed an appointment with the secretary). Nevertheless, I am pretty sure that I would not have received a warm welcome and I would not have been allowed to stay that afternoon if I had not previously undergone other ‘formal’ steps, such as the letters and requests of clearance I had submitted the year before and which allowed me to attend this NGOs activities and to get acquainted with and accepted by its members.

This episode was highly significant not only because it shed light on the dynamics of ‘formality’ and ‘informality’ in the strategies to gain access to certain contexts – like NGOs – but also due to an accidental meeting I had on that very occasion and which – like many other unexpected meetings and events – was in my opinion pretty emblematic of some of the central concerns of my research, i.e. the construction and the use of the category of ‘unwed motherhood’ within and outside the domain of ‘civil society’ and the politics it engenders. Indeed, as I was greeting some of the NGO volunteers and while they introduced me to new ones, some of the ‘beneficiaries’ were also around and one in particular came to see me as we already knew each other quite well. It was Naima, one of the first beneficiaries I had met and talked to at a charity for unwed mothers and one of the most outspoken among the ‘beneficiaries’, who I had visited quite often at her place and with whom I had openly touched on issues which were instead difficult to approach with other girls – such as love affairs, boyfriends and the place of money in the relationships with them, sexuality and the NGO’s ‘prescriptions’ on these matters. During these conversations, Naima had actually mentioned that she had occasionally been at NGOs in which people can be HIV tested and receive consultations for free, as well as information on contraception and for the prevention of sexually transmitted infections; once I was at her place, she had ‘given proof’ of her being ‘informed’ on these matters by showing me some condoms she kept in her plastic cupboard, “just in case...”. Nevertheless, a year earlier she did not attend the weekly sessions that this NGO offered specifically to women designated as “sex workers”, whereas she now took part in these meetings at least once per week.

As the NGO volunteers who were at our unexpected meeting asked if we already knew each other, Naima replied that we had actually already met several times at a

renown charity for unwed mothers and then explained to me in French that “as we had already discussed, do you remember? it is always good to be up-to-date!”, which accounted for her presence at this other association, by which she was further ‘labelled’ as ‘*bénéficiaire*’, yet of a quite different sort. Indeed, while charities for unwed mothers strive to erase the imagery of prostitution from representations and perceptions of unwed motherhood, these other NGOs actually turn explicitly and exclusively to ‘sex workers’, i.e. women who exchange sex with money or other forms of support. In reality, as this and other examples aptly illustrate – and as I will discuss in Chapter Five – the boundaries set by these categorizations are often blurred when looking at women’s concrete itineraries and coping strategies. I have discussed these encounters since I thought they were particularly insightful first of all of the ways in which even ‘bureaucracy’ can sometimes be ‘manipulated’ once the researcher is familiar with the field; secondly, I deemed these encounters evocative of the richness of accidental and unexpected encounters as well as of the mindfulness they require, especially within institutional environments such as NGOs which provide certain services and material support. Notably, I had to be careful in saying how and when Naima and I had previously met since I feared her ‘multiple’ participation in different NGOs’ programmes might have impacted negatively on her – however, it had not been the case.

While conducting research within NGOs and seeking to build rapport within this context brings about certain sorts of methodological and ethical questions, I think it is also worth calling attention to other aspects which might have arisen if, for instance, I had not first got to know these girls as beneficiaries of a charity. I argue indeed that the financial and material distress most girls experienced was a distinguishing feature of their lives as we met: economic constraints and precarious living conditions were a constant dimension evoked by girls especially when I visited them at their places, usually narrow rooms they shared with other friends and their children in some of Casablanca’s poorest neighbourhoods, that they wished to quit for good as soon as their income allowed them to, not to raise their kids in those ‘bad’ environments. Despite these conditions that they always underscored and irrespective of their open complaints about the scarce financial and material support they allegedly received from charities, neither material nor

financial support was ever asked of me and it never was the stake in our relationships. I think this aspect is not to be overlooked, as in some other situations I perceived potential requests for money by women who were not beneficiaries of any NGO (for unwed mothers) as another ethical challenge to my role as ethnographer: it had actually been the mother of an unmarried young mother who – as the three of us met at a pediatric clinic lead by a charity¹¹⁹ – openly asked me for money if I wanted to see them again and visit them at their home.

This episode made me reflect upon the fact that most of my other informants, instead, had never been so ‘explicit’ when talking about money and, above all, that they had *never* asked me for money, nor for other forms of help: I saw this as a ‘by-product’ of their being the beneficiaries of some NGO and of the fact that I had met them as such, so asking or accepting money might have jeopardized their role within the NGO’s programmes and might have engendered ‘troubles’ and jealousy with fellow ‘beneficiaries’, for instance. Even if the simple act of giving money to one’s informants might seem from an anthropologists’ point of view clearly an ‘ambiguous’ action which might seriously compromise fieldwork and the ethics of this work, these experiences suggested it is not self-evident though. So, I can retrospectively state that carrying out research with beneficiaries of NGOs – according to my experience – did not embed aspects like requests for money, goods or other forms of ‘help’ as – especially as a researcher – this would have been quite problematic at the ethical and professional level; of course this is not to say that unwed mothers ‘outside’ NGOs would have certainly asked me for money. Indeed, also women who had benefited from very limited support from charities never asked me for financial support, even if they were going through troublesome times. The emphasis I put on the intersecting layers of power relations shaping my relationships with my informants and the very contexts and settings in which they unfolded elicit the rethinking of the notion of reflexivity with regard to my own field experience. By looking at the dynamics informing spaces and interactions – both when my ‘informants’ had movement restrictions and when we were able to meet outside the organisations whose services they benefited from – it emerged

¹¹⁹ Addressed broadly to children of poor families, this centre offers healthcare and free consultations also to children born to unwed mothers (see also Chapter Five).

indeed how “reflexivity does not belong to an individual or cultural vacuum but to a cross-cultural encounter (...) [reflexivity is produced by] ‘one’s subjective, personal engagement in the practices, discourses, and institutions that lend significance to the events of the world’ (...) since any person is a positioned subject” (Callaway 1992: 93).

§ 3 Ethnographic selves

“Often condemned as apolitical, reflexivity, on the contrary, can be seen as opening the way to a more radical consciousness of self in facing the political dimensions of fieldwork in constructing knowledge. [Other factors intersecting with gender – such as nationality, race, ethnicity, class and age – also affect the anthropologist’s field interactions and textual strategies. Reflexivity becomes a continuing mode of self-analysis and political awareness]” (Callaway, 1992 : 33).

Although so far I have given great emphasis to methodological, ethical and epistemological issues underlying the process of ethnographic research within and across institutional contexts in urban Morocco – mainly in Casablanca – I shall now deal with other significant dimensions of my presence in the field, notably the relations established – or developed – overwhelmingly in informal contexts. I will seek to highlight the ways in which such bonds on the one hand have ‘helped’ and sustained me throughout my fieldwork and, on the other, how these relationships also demanded the continuous negotiation of my role and “ethnographic self” (Coffey, 1999). It deals with bonds stemming from my research on unwed motherhood and with relationships to other individuals and families which did not directly relate to the domain of my research; even if some members of these families were to some extent involved in my research – either for their jobs or for their studies – our relationships and the time we spent together were obviously not exclusively focused on it, they were rather centred on mutual trust and on their willingness to make me feel ‘at home’ or to share family gatherings – sometimes

with emigrated family members on a visit – or during festivities like *Eid l-Kebir* – that I have actually spent in Morocco twice at different households. Some other times being involved in family life meant accompanying them to other relatives or close neighbours, or taking part in *l-'ars* – a wedding ceremony – or, sadly, in *sadaqa*, (almsgiving) after the death a family member, or, again, ‘just’ for a Friday *kksu* – cous cous (to cite only a few significant moments)¹²⁰.

It is hard to give an account in a few lines of the depth and wealth of events which made up my experience within these families and of the subtle or great differences between feeling like a guest or as ‘something else’. Having established good relationships with a few families – both in Casablanca and in its surroundings – meant also that on *Eid l-Kebir*, for instance, I had to struggle to ‘justify’ my absence from some of these households and to postpone my visit to the days following *Eid* – which are still considered festive – hoping not to upset anybody. I got to know most of these families once in the field, as I already had accommodation and, in spite of their repeated invitations to stay and settle down, I spent only short periods of time at their houses – besides regular visits. This aspect is definitely worth noting and it is actually relevant to some methodological questions too: indeed, living with these families who I had befriended would have also implied a greater involvement in my research activities, which would not have necessarily been helpful, as in some cases I preferred – or I tried – not to disclose some of them for privacy reasons – as I have discussed above.

Along with ethical motivations, in some cases I also felt that the discussion of some of my research topics with certain members of ‘my field families’ might have been awkward in that it touched on problematic ‘tangles’ of their biographies or because I feared it was not respectful – or considered as not respectful – to touch on issues like out-of-wedlock sexuality and births, notably with elderly women of these families; yet, it happened and was of course worth it. Learning what to be overt about and how to approach certain topics, such as my research themes, has been a process to be understood in terms of ‘adjustment’ to the local context, to my most significant social and trust relationships and to my main informants. Such a process highlighted how “being accepted, being invited into people’s lives (...)

¹²⁰ Besides other daily meetings and activities.

winning trust, respect and friendship” (Ellen 1984 : 102) is not self-evident and has to be learnt without drawing on any methodology manual. Hence, ‘emotional conflicts’ between involvement and detachment may occur also – and significantly – outside organisations, in more informal and domestic settings and, subsequently, when transforming one’s ethnographic experience into texts which bring “ethnographic practice and reflexive writing together so as to produce knowledge that can acknowledge its relationality and still aim for truth” (Borneman, Hammoudi, 2009 : 8).

As I imagined my field in a metropolitan context such as Casablanca, I actually wondered if and how I would have managed to establish close relationships as I had done before, during my previous fieldwork in Morocco. I have already delved into the ‘pathways’ which lead me to settle down in Casablanca, whereas I have not mentioned that partial ‘fears’ of being ‘anonymous’ in a huge city and of not managing to establish lasting relationships was nonetheless balanced by my desire to gain greater ‘independence’ and actually lesser ‘visibility’ as an anthropologist. This feeling stemmed from the fieldwork conducted a couple of years earlier in a completely different context¹²¹ that is a small, isolated border town in eastern Morocco, where I had actually been under close ‘scrutiny’ by ‘my family’ members and/or by other inhabitants and acquaintances, who controlled my activities and relationships; despite this, I had excellent relationships with my host family and with all other families I spent time with. I deem this as one of the most important and instructive ethnographic – and human – experiences I have lived and this is why during the first weeks in Casablanca I longed for it and actually ‘idealized’ those times and places, being even tempted to ‘go back’ to that far away town, where – I was sure – I would have certainly had a warm welcome. Nevertheless, several constraints and the length of the journey prevented me even going there to visit, accounting for my feeling of having experienced at least “two Moroccos”, having so little in common that they appeared apart from one another, much farther than the thousands of kilometres which separated them, rather located in two radically different times of my own life.

¹²¹ See Chapter One.

Nevertheless, after an initial period in which I was lost – metaphorically as well as literally – I slowly began to feel ‘at home’ and to enjoy this other dimension of doing fieldwork and accepting all its challenges; besides, I gradually understood that issues of social control were not absent at all in my research in urban field sites, whereby – as discussed above – the negotiations of my role had necessarily to be different; for instance, dealing with control over my activities and the negotiation of my role was now more complex than answering simple questions like “Where were you today?” or “where are you going?”, “who are you meeting?”, “what have you found out in your *baḥth* [research] then?”, or to sentences like “I think you should not meet that girl”, “it’s always better not to walk alone” or “how come we did not know you are engaged?!”), “I really appreciate your way of dressing and covering up your arms, legs, hair”, “are you alone, on your own?”, “next time you come *insha’allah*, it will be with your husband, right?”, “my nephew has really nothing to do, he will come with you today, so that you are not alone”, that my host family, informants and other acquaintances addressed to me during my previous fieldwork and which accounted for the manifold ways in which “in fieldwork, gender classifications may be confused and contradictory between the anthropologist’s self-perceptions and those of the studied society” (Callaway, 1992 : 30).

It emerges, therefore, that two years earlier considerable attention and concern was linked to my being a lone – young – unmarried and childless female, a foreign student with no kinship ties in the place where I spent about three months researching birth practices and reproductive health. This time, although being a female doctoral student on her own in a big city did not seem such a big deal – given that Casablanca is full of women ‘on their own’ belonging to all social classes, whatever their marital status – gender, my status, nationality and kinship ties still played a role even if in different ways: indeed, in the interactions with my informants and friends/acquaintances I had to make even bigger efforts to make sense of my lone presence in such a metropolitan context, where – indeed – I was subject to weaker social control than, say, in a village or smaller town; I actually had to explain several times and in multiple manners that this temporary separation from my home and family was accepted because it dealt with my work and that, despite being very demanding for all of us, my relatives were proud I had

undertaken this project. While I have been warned several times about thieves and aggressors, nobody asked me not to walk alone – except on some occasions – nor not to meet girls whose reputation was ‘ambiguous’ – otherwise I would have had to change my research topic; nevertheless, I have had to ‘justify’ my presence far from my male kin quite often and to give reasons for the acceptability of staying for a long time away from home. The fact that I was in Morocco to ‘learn something’ and in so far as I spontaneously chose to turn to this country and ‘its culture’ often provided a good explanation and motivation which on the one hand may allow some people to overlook the apparent lack of coherence of my experience as a woman on her own in the field, while on the other it may highlight that “the narrative we construct of our lives and work, necessarily unfolds in terms of gendered experience and its inequalities of power and privilege” (Callaway, 1992: 35).

This research has certainly been ‘gender oriented’: by this I mean that since the outset of my doctoral project, I was keenly aware that my field would have been carried out mostly among women whereas the research interest towards the lives and worlds of young and/or unmarried females – whether it dealt with migration contexts and transnational ‘trajectories’ between Morocco and Italy or within Moroccan society – came over time and through some ‘preliminary’ fieldwork in Italy. It is gender oriented also in the sense that I wanted to look at gender-specific issues concerning sexuality, health, reproduction, childbearing and birth from the perspectives of women basing my ‘intentions’ on the – partially grounded – bias that, as I had already experienced in previous and ‘successful’ fieldwork, being a female and dealing with females about ‘female issues’ constituted – at least – a good ‘entry’ if not a fundamental ‘pre-requisite’, an aspect that as such needs anthropological problematisation. As it has aptly been observed: “In retrospect, I realise I was drawn more fully into women’s lives not because of the stereotype of a ‘natural empathy’ nor shared physiological experience, which in any case has different cultural definitions and meanings, but because I was intrigued by what seemed to me then their remarkable independence, and what I would now interpret as their different cultural experience and expressions of gender” (ibidem: 41).

My previous fieldwork experience in women-centred and women-lead domains, institutions and practices – ranging from ‘family planning centres’ in Italy to the

houses of *qablat* – ‘traditional birth attendants’ – in southern Morocco – had definitely shaped my attitudes and I felt confident in conducting research in these contexts, for their ‘being gendered’ – in terms of being predominantly female – had after all ethnographic relevance and had to be interrogated as such, bearing in mind and remembering through everyday practices that “as fieldworkers we are necessarily embodied creatures, identified by host societies according to their classificatory systems, gender being a salient feature.” (Callaway, 1992 : 30).

My research topic easily leads to the questioning of accessibility to a specific domain and issue – such as out-of-wedlock births, women-oriented health and social services and charities, the lives of young women – by a female researcher as such: I have actually often asked myself how a male – heterosexual – researcher willing to investigate this topic would have conducted his fieldwork and what kind of different ‘gender’ constraints and ‘conditions’ he would have been confronted with. An analogous question may also be asked for an older female researcher – with or without children. Indeed, generation and not only gender shaped the relationships with my female informants, some of whom were approximately the same age as me – sometimes much younger and some other times older. Even in the cases in which we were of the same ‘generation’ or exactly the same age, my informants and I often had striking different biographies and very little which might have made us closer to feeling as ‘peers’. Above all, what distinguished me from all of them was that I am childless and that my long-term relationship with my partner could be ‘flexibly’ cast either as marriage or as ‘living together’ both in my home country and in Morocco. Whereas the issue of being childless was significant but not always ‘crucial’ in the relationships with unwed mothers and unmarried women in general, it was actually at stake when dealing with married women – both younger and older – as I presented myself as married. In the eyes of ‘same generation’ married women or of younger married women¹²², my being childless and living far from my partner for prolonged periods of time were two aspects which alone made me – in some cases – ‘at odds’ with their gender ‘ideals’ – even if probably not a ‘threat’ to them.

¹²² According, for instance, to class and education differences.

In other cases, instead, my being ‘a foreigner’ – a ‘*nsraniya*’ [‘a Christian’] – and not having in their eyes a clear socio-economic status nor professional role made my position less-easily definable according to dominant local gender categories, so that the defining features and norms concerning my being a female resulted more ‘blurred’ and granted me more ‘flexibility’ in matters of marriage and childbearing. Furthermore, being a female in her late twenties or early thirties who pursues higher education is a widespread condition in contemporary urban Morocco, as well as – for instance – the social relevance of young female unmarried professionals belonging to higher social classes. I argue that sharing the recognition of these examples generally made my position not that ‘alien’ nor difficult to relate to local gender scenarios.

Thus, while striving to write up my research for my writing to be “partial, historical and self-critical of its truth claims and authority” (Borneman, Hammoudi, 2009 : 2) I have been lead to reflect on what the heuristic value of ethnography actually is and, hence, “on what basis can ethnographic work and experience claim to authorize socially significant and accurate accounts [?] (...) What then remains, in particular of the ethnographic record, and more generally of the anthropological enterprise?” (ibidem : 3). So, I have sought to acknowledge my role of ethnographer in shaping the object/ subject studied and to elucidate the “constructed character” (ibidem : 2) both of my objects and of the knowledge I have produced since the outset of my fieldwork until the writing of texts. I have tried, therefore, to combine this kind of critical epistemological ‘move’, which has been theorized into depth by a wealth of theorists and anthropologists in the past decades (Said, 1978 ; Marcus, Fischer, 1986; Clifford, 1986) and that can be designated as the “crisis of representation” (Clifford, 1986), with the ‘urge’ to make sense of ethnographic encounters.

I shall argue that the political dimensions of reflexivity (Okely, Callaway, 1992 : xiii) and self-challenging one’s authority as an ethnographer should not undermine the meaning and worth of fieldwork, as after all “neither depiction does justice to the ethnographic enterprise” (Borneman, Hammoudi, 2009: 7). The analysis of relations of power, nevertheless, underpins the whole of my research and being reflexive upon my own position and role in the field – often in institutional and

non-governmental contexts, which were often rife with ambiguities – has definitely been ethnographically ‘productive’, that is, it has raised several central epistemological and methodological questions “despite assertions that the site of the field encounter is, at base, unethical, and not a fertile space for the production of knowledge” (ibidem : 10).

§ 4 Marginal matters. The political dimension of ethnography

“An epistemological problem was located – summarised by the term ‘Orientalism’ – used by Said (1978) to expose the problem of how knowledge of other cultures is constituted within unequal relations of political power” (Callaway, 1992 : 33).

In questioning the political dimensions embedded in my research, I have interrogated the potential risks of “negative stereotyping” even as a social scientist in ethnographic writing. Bourgois examines the politics of representation of social marginalisation in relation to the urban poor in the United States, where they have often been the object – in his opinion – of “inferiorizing narratives” (Bourgois 1995 : 11). The author claims, however, that counter-narratives can only be produced through awareness of the contradictions of the politics of representation and, above all, by presenting ‘social marginalisation’ through specific, emblematic events and through the narratives of the individuals who experienced them, “in a manner that emphasizes the interface between structural oppression and individual action” (ibidem: 12). Drawing on feminist analysis the author strives for renewed attention to the “agency of culture and the autonomy of individuals, and the centrality of gender and the domestic sphere to a political economic understanding of the experience of persistent poverty and social marginalisation [in the Urban United States]” (Bourgois 1995 : 12). All along this research I have actually sought to foster a similar approach when dealing with the precarious life conditions, material constraints and hardships faced by unwed mothers and their children.

I have notably tried to explore the biographical details which informed the girls’ ‘pathways’ and brought them to Casablanca – with or without children – by discussing both the macro-processes that shape female ‘single’ mobility and

working patterns and the trajectories of specific individuals. Some narratives of certain informants are necessarily discussed and described more in depth than others, depending on the type of relationship I developed with each of them and on the frequency and ‘quality’ of our encounters. Furthermore, among the issues, problems and events raised by or evoked through these encounters, I have had to draw particular attention to some according to their relevance to the central theme of each section and chapter of this work; of some informants’ narratives I have had to choose or to stress only certain sides because of ‘contingent’ reasons, i.e. because of their being highly emblematic of specific questions I will be looking at. Nevertheless, I will always seek to give wider context to every example to the aim of coherence and to allow broader problematisation. Hence, this approach applies also to issues like material constraints, socio-economic inequalities, poverty and ‘social marginalisation’ experienced by my informants in order to grasp the contingency and the situatedness of such ‘abstract’ notions not so much in their ‘quantitative terms’ but rather as embodied in specific persons’ biographies.

As Bourgois aptly observes, drawing attention to the strategies enacted by the actors and to the variety of resources they mobilise – besides conveying the ways people make sense of their experiences of hardship or precariousness – is also a relevant way to understand ‘marginalisation’ in its manifold forms, in less static terms; such understanding looks rather at the dialectic between political economic forces – which themselves account for the dynamics of reproduction and persistence of certain social conditions like the stratification of inequalities and poverty – and subjective trajectories. In doing so, I will hopefully highlight that conditions like real or potential ‘marginalisation’ stem both from a series of contingent and structural factors and from the ways in which actors act upon and manipulate their situation in relation to gender and kinship relations, household economy and their own aspirations. Most of my informants may easily be designated as ‘poor’ and living in precarious socio-economic conditions: I feel compelled to write about their actual situations and to seek to describe (some of) the processes which produce and inform them in order not to take their distressful conditions ‘for granted’, nor to leave unwed motherhood and some of its features unquestioned as mere by-products or ‘gendered’ sides of poverty and social inequalities in contemporary Morocco. The attention that I seek to draw to these

dynamics – and the ways I investigated them in the field – is also moved by the awareness of existent representations I have been confronted with since the outset of my research, which involved also stigmatising, victim-blaming, reifying or depoliticizing accounts and ‘explanations’ of unwed motherhood and its related features. Nevertheless, I chose to accept the challenge of pursuing different and alternative representational strategies being aware of the risks embedded in what Bourgois calls “inferiorizing narratives” or further “negative stereotyping” (Bourgois 1995 : 11) that might also be found in social scientists’ accounts. Resonant to this kind of approach is also that explicated by one of Didier Fassin’s early works (Fassin, 1992) as he states that the ethnographic insights into his informants’ poverty are « *récits qui ne sont pas rapportés pour donner une touche pathétique à une analyse socio-économique un peu desséchante, mais seulement pour illustrer concrètement les conséquences, quotidiennes ou exceptionnelles, de la pauvreté* » (ibidem: 155)¹²³.

In my overall endeavour to give an account of young women’s and unwed mothers’ experiences in contemporary Morocco, one of my main aims is to go beyond ‘mainstream’ representations conveyed for example by civil society, some local media and governmental bodies working with NGOs and charities. This aim has obviously emerged over time, as long as I gained awareness of the ‘distance’ between some representations of unwed motherhood fostered by ‘dedicated’ organisations and their own narratives and insights behind and beyond their status of ‘beneficiaries’. Social and family rejection and marginalisation are actually among the concepts and ‘risks’ that are most often mobilised in the design of programmes addressed to young females and unwed mothers, in so far as their condition of being out of their household and of experiencing socio-economic precariousness are taken as ‘indicators’ – or potential sources – of increased – gender-based – ‘vulnerability’ to which specific policies and measures must respond.

I shall go into detail with this issue in the fifth chapter, but it is worth mentioning here in so far as my positioning in the field and the approach towards the various

¹²³ Although in chapter 5 I will question humanitarian discourses and practices through Fassin’s critique of “humanitarian reason” (Fassin, 2012).

institutional contexts in which I have carried out my research were guided by a non-neutral position, which also informed the ways I choose to question and represent, for instance, issues like ‘marginalisation’, and ‘vulnerability’. I seek indeed to interrogate and go beyond their ‘mainstream’ uses which often draw on a *compassional ethos* (Fassin, 2006) and spoil these notions of their political implications. As I have argued above, I aim to shed light instead on the social and economic processes which engender conditions of distress experienced by most of my informants.

In looking at methodological aspects and in discussing the role of the ethnographer in the handling and in the representation of issues like poverty, precariousness and socio-economic as well as gender inequalities it is worth remembering that being accurate means becoming “intimately involved with the people we study” (Bourgois 1995 : 13) which itself challenges hierarchical modes of representation and pushes towards fostering “self-conscious reflexivity” (ibidem: 13) as a research tool whenever this actually allows for the tackling of issues of social justice – and injustice – and to convey “individual experience[s] of social structural oppression” (ibidem: 15) while also being aware of the role played by human-driven processes. Bourgois emphasizes indeed that the analysis of political economy underlying human suffering and marginalisation does not always counter-balance victimizing or victim-blaming interpretations, since “the focus on structures often obscures the fact that humans are active agents of their own history, rather than passive victims” (ibidem: 17), whereas ethnographic approaches may allow looking at how individual ‘agency’ and individual action weave into larger structural constraints.

An approach consistent with this analysis and with these politics of representation is highly relevant to the account I will seek to give of the lives and ‘trajectories’ of unwed mothers as well as of the institutional ‘*dispositifs*’ enacted to support them in the health and social domains. I shall argue that the question of their representation as ‘victims’ and of the mobilisation of ‘victimhood’ by a wealth of institutional actors is actually a political stake in its own right; moreover, it becomes a major question in the ethnographic account of unwed motherhood, as it calls for alternatives to dominant representations, which give grounded and critical interpretations of people’s experiences of suffering and distress. The issue of victimhood – its understandings, uses, appropriations and mobilisations – has

emerged as emblematic when dealing with out-of-wedlock pregnancies and their social framework, notably in the negotiation of gender and sexual relations. On the one hand it was called upon in questioning meanings, claims and experiences of sexual violence; on the other, 'victimhood' has to be questioned in relation to broader issues dealing with 'failed' marriage plans, girls' 'naivety' and their partner's 'lies', financial and other structural constraints – access to education, health etc. – which make up 'standard' images of poor, naive and uneducated girls whose only 'destiny' seems becoming the 'victims' of 'something', usually of their gender and social condition, in which also unwed motherhood is inscribed and given meaning.

CHAPTER 3

(Dis)connections and mingling. The winding pathways of closeness and intimacy

« Casablanca avait en elle, dans son ventre, huit millions de Marocains qui venaient de partout. Du Rif. De l'Atlas. De Fès. De Taourirt. D'Errachidia. De la Chaouia. De Doukkala. Des Arabes. Des Berbères. Des ivrognes. Des ambitieux. Des prostituées. Beaucoup de prostituées. Des âmes perdues. La jungle. La folie. L'injustice partout, jour et nuit. L'arrogance. La perversion. L'Argent-roi. Le crime pour la loi. Rien de romantique. Tout était sale. Tout était pourri. Tout était en train de disparaître, de s'effondrer. Tout était échec. Tout était fermé. Y compris les portes de Dieu. Tout était meurtre. Meurtres. Casablanca était une vallée triste. Plus qu'ailleurs au Maroc, la tristesse avait envahi tout dans cette ville. L'espoir n'existait plus. L'amour y était inconnu, étranger, désespéré » (Taïa, 2012 : 157-158)¹²⁴.

Introduction

In this chapter I aim to give further ethnographic insights (§1) into the worlds of Moroccan unwed mothers by focusing on how their experiences unfold after they give birth. To this aim, I wish to bring to the fore the various dynamics by which women carve out the spaces to negotiate the distance from their parental households, including (the search for) economic autonomy and the intimate and sexual sphere. In doing so, I will explore the challenges my informants are confronted with and the ways they act upon them by situating them in the urban context of Casablanca as a specific field site. Hence, I will begin by looking at the girls' subjective experiences and at their narratives, in order to shed light on the ways they represent their itineraries and make meaning of their stories, by bearing in mind that "people's stories rarely begin in Casablanca: it is an end or a waypoint of narrative, not its origin" (Ossman, 1994: 27).

¹²⁴ Taïa, A. (2012) *Infidèles*, Paris : Seuil.

As I have argued thus far, the relationships with one's parental household and the relevance of kinship ties come into play in the definition of the multiple arrangements embedded in unwed motherhood: as I will illustrate through some examples (§2), this experience may imply the construction and the negotiation of alternative sorts of social bonds and ties of relatedness for unwed mothers and their children, which significantly inform the strategies undertaken by girls in their everyday life. In addition, the stakes of the establishment of the aid domain through local civil society projects for unwed mothers and their children will be sketched out. Relevance will be given to the points of view and insights of unwed mothers as current, prospective, 'failed', partial or former beneficiaries of such programmes and attention will also be paid to their pathways outside local NGOs (whether they have ever benefited from any support or not).

In looking at their itineraries, the relationships girls engage in with male partners (§ 3) are also paramount in that they play a central role in the unfolding of the girls' trajectories, notably – but not exclusively – in the recognition or in the denial of their biological paternity. Moreover, the uses of concepts like 'love' mobilised in some representations of the relationships with the children's biological fathers call for a further reflection on how gender relations are shaped in this peculiar situation (3.1). It is worth highlighting the ways in which romance, sexuality, love, violence, so-called free or "normal" relations, friendship, official engagements and so-called "marriage promises" are conceived, understood and contested in relation to the condition of unmarried females in – urban – Morocco. Hence, I will explore (3.2) some representations of violence and the negotiations of 'illicit' forms of sexuality in the processes of the construction of the girls' selves and in the search for balance between conflicting moralities.

Furthermore, the problematisation of the representations of biological fatherhood contributes to illuminating the ways girls conceive their relationships with them. The male counterpart and the role it plays in the management of out-of-wedlock pregnancy and birth is key in the process by which girls shape their condition as

unwed mothers¹²⁵, whereas male perspectives provide significant insights which complicate ‘female plots’ (3.3). The contested representations of out-of-wedlock paternity in the girls’ narratives are emblematic of its centrality – irrespective of the male’s actual presence and influence – in the definition of one’s status and help situate the perspectives of the different research subjects, and the idioms of consent, desire, or denial they mobilise to make meaning of one’s ‘going out’ or ‘straying off’ pathways of respectable femininity (3.4).

In critically reflecting on the ways gendered selves are fabricated and sexuality is shaped as a contested domain (Vance, 1991), the nature of sexual relations will be further discussed, as it is subject to continuous re-definition and negotiation (§ 4). I will focus on the continuities and the differences between forms of illicit sexuality cast – by social and juridical norms – as “prostitution” and the sexual relations young unmarried women engage in, whether they take place before or after childbirth. Thus, the ways of conceiving and living such relations, including sexual exchanges will be called into question: I will bring attention to the extents to which potential monetary or material support might be acknowledged – by partners, girls, other people – as forms of prostitution, or rather as different sorts of transactions, in which gender ideals, coping strategies and differential power relations merge. Hence, the issue of sexual-monetary transactions between my informants and their partners will be critically analysed both in relation to the current juridical framework and to the social stigma associated with ‘illicit’ forms of female sexuality, by highlighting the potential continuities, the nexus as well as the discontinuities between the two domains and – above all – to the ways these subtle boundaries are blurred and re-designed by the subjects themselves.

§ 1 From *darna* to *Casa*

The lives and trajectories of young women and unwed mothers in Casablanca cannot be discussed without looking simultaneously at the pathways which have

¹²⁵ For example, representing themselves as victims of the male or representing the male as the one who has made a mistake or who has abandoned her; all these elements are key as they are appropriated by the subjects in shaping their selves as unwed mothers.

lead girls here, nor without considering the peculiarities of this context. Why *Casa*¹²⁶?

Research focusing on young females in urban Morocco, notably in Casablanca (Cheikh, 2011) has shed light on female cohabitation as a social space and as an urban phenomenon in its own right, although it is not a novel/new one (Cheikh, 2011)¹²⁷. What is relevant to my research is that the trajectories of unwed mothers in the city often include this sort of residential pattern and the social relations it embeds. First of all, it is to be noted that they may share their accommodation with other unwed mothers – living with or without children¹²⁸ – or with other women living on their own, i.e. outside their households. At the same time, as emphasized by Cheikh – and as I have observed in Casablanca – this kind of cohabitation¹²⁹ may not be experienced as a definitive rupture with one’s family, whereby regular visits account for the persistent ties to what is referred to as *darna* – literally “our home”, meaning one’s family household. This being simultaneously the dimension of ‘the outside’ and the space where young women reinforce, challenge or transform family ties – despite or because of distance – accounts for Casablanca as an ‘in-between’ and as an arena in which selves and femininities are imagined, forged and played out¹³⁰.

¹²⁶ Abbreviation of “Casablanca”: commonly used both in Moroccan dialect and by French speakers; the Moroccan *Dar-el-beida* is also used, although here I will opt for “Casablanca” or “Casa”.

¹²⁷ The author makes explicit that – both male and female – cohabitation existed during the protectorate (1912 – 1956) and after Independence, being associated with rural emigration and urbanisation (Cheikh, 2011; Maher, 1989).

¹²⁸ They live without children if these are steadily or temporarily cared for by somebody else – notably their families of origin or some *morabbiyyat* – child caregivers .

¹²⁹ For which the original text features the French term “*colocation*” (Cheikh, 2011b).

¹³⁰ If we think of my research subjects, urbanisation played for them an important role in the process by which they gave shape to their gender subjectivity, although it definitely acquires class features: notably, their forms of economic and sexual autonomy differ from what may be the experiences of middle-class or bourgeois young women, whose status may be secured by status and resources, although it is not necessarily true for some of the acquaintances I mention in these pages. For my informants, instead, moving to or across the

Accommodation in Casa is referred to by young women as *l-bit* – the room – whose type and rent – *l-gra* - hinges significantly upon their (mostly unstable) income and which, nevertheless, is one of these women’s key spaces for the construction of social relationships in the urban context. Furthermore, these types of female cohabitation, which imply to some extent the detachment from one’s family, cannot solely be looked at in terms of the social exclusion of these young unmarried females, in so far as stressed by Cheikh (Cheikh, 2011) and highlighted by the trajectories of my informants, they actively shape their condition of distance and relative ambiguity by a wide array of adjustments which may ultimately be seen as “banalising” (Cheikh, 2011 : 170) the practices associated with urban cohabitation¹³¹.

In drawing attention to the biographies of the subjects of this research, the centrality of the type of accommodation and cohabitation emerges, in so far as it helps define other core features associated with femininity, such as their sexuality: the example of Amina (§ 2) is emblematic in this regard, as the family that is raising her son supported her endeavours to move out of a house inhabited by “girls” only, hinting that girls who share rooms in that specific neighbourhood live mostly on the money earned by selling sex. Besides, it is not just the social construction of the morality of the young women and mothers at stake, but also those of their children: most unwed mothers stressed they would resist only a few years in those “bad” neighbourhoods and wished to afford an accommodation in other areas or in other towns, so that their children would not grow up on those streets.

I will seek to explore the itineraries and the experiences of young women and mothers within and across Casablanca by drawing on some details of their stories that I deem emblematic of the diversity of pathways and biographies of the subjects

city is both associated with the need for economic support for one’s family and with greater scrutiny.

¹³¹ Some of the young women in Cheikh’s ethnographic account of female cohabitation in Casablanca (Cheikh, 2011) – whether their origins were urban or rural – have actually experienced different sorts of cohabitation in several districts of the city, where most unwed women live (Cheikh, 2011 : 170). Although my informants lived/had lived also in districts other than the ones mentioned by the author, it is actually noteworthy that some particular districts and neighbourhoods within them are known as areas that are predominantly inhabited by unwed women or “women without men” (Jansen, 1987).

of this ethnography. Delving into the reasons which took these women to or away from this city means voicing both their imageries of the future and their everyday lives, as well as their ways of making meaning of the most troubling turning points of their recent past. Hence, I wish to shed light on these women's coping strategies in the times in which their lives were marked by the utmost uncertainty. I shall seek to convey the fears and the anxieties experienced by these women as well as their stubborn struggle(s) to conform to conflicting social expectations, in the interplay of opposite and sometimes competing roles and duties, shifting moral codes, material needs and unpredictable events.

1.1 Zohr. Uncertainties and 'wasted time'

Zohr was seven months pregnant when she came to Casablanca. She had been there for about two months when we first met. When she arrived in Casa, nobody – in her family – knew that she was pregnant. Both her parents had died and her two brothers were living in her hometown, further south on the Atlantic coast. She had visited them once since she had given birth, as she had to get some documents from home. Twenty-eight year old Zohr was already living and working in another town, where she had met her partner at her workplace – a restaurant; they had been in a relationship for about nine months when she found out that she was pregnant. At that stage, she had to leave, but went back to her hometown first: she found a job in a local factory and tried her best to hide her growing belly wearing loose clothes until she was seven months pregnant. Then she told her siblings she had to move because she had found a job in Casa: she thought it would not seem strange if she told them she had got a job in another branch of the same *sharika* – factory – she was working at. She headed to Casa in search of a charity for unwed mothers instead¹³². She ended up at a shelter for unwed mothers, then at one for homeless people where we first met; as I talked to her she still did not know where she would go next; she did not even know when she would leave that shelter at all.

¹³² This means she was already aware that in Casablanca there are several charities and organisations for unwed mothers ; this might have been one of the reasons which lead her to Casa.

Zohr was waiting for another charity for unwed mothers to let her know if they could admit her to one of their programmes, or at least if she could take the baby to the *crèche* while at work : “I still don’t know... if I’m going to some other association or not”. In any case, Zohr intended to stay in Casablanca, she did not want to go anywhere else. Moreover, she did not want to leave that charity – or another, where she would eventually go – since she was still unsure about her relationship with her partner. This was actually her biggest worry: the partner she was talking about – from whom she was waiting for a response – was not her baby’s biological father. She had previously had an affair with him, that is why she called him her fiancé; she mentioned they had split up due to problems with his family. However, since she was pregnant, she went back to her hometown and told him everything: despite now being aware that another man was the biological father, he agreed to marry Zohr, provided that the whole story remain a secret and that he would be recognised as the father of the baby.

She was not sure about this ‘deal’ yet and wanted to reflect upon this option. When she went back to her hometown after having given birth, her partner – and potential husband – had already prepared the documents: “*Howa daar l-waraq*”, proudly said Zohr. She claimed that was meant to show her that his intention were serious¹³³. However, she knew he was unemployed and feared that this would ultimately jeopardize the plans. She was also afraid that if she got married she would have to leave any support programme. Zohr stressed that if her partner did not find a job, she did not want to marry him because she could not leave the shelter or another organisation which would eventually admit her with the baby. While she was telling her story, a young social worker who was with us¹³⁴ pointed out that it was “rare to find such a man”: she meant that Zohr should have reflected carefully about that chance, in order not to miss it. Zohr was rather willing to work at some *jama’iyyat* – associations – while waiting for him to find a job. While

¹³³ This contrasts the absence of proof of the intention to get married displayed by many other partners according to other girls’ narratives and to ‘mainstream’ accounts provided by local charities and national media, for instance.

¹³⁴ She was a student doing a work placement in social work;. She had been asked by the project managers to assist me in the interviews with the beneficiaries, although it happened only once.

breaking into tears, Zohr also emphasized that she was ready to search for any possible solution in order to keep her baby with her. Nevertheless, as we subsequently talked to other girls – and with Nawal¹³⁵, in particular – we were told that Zohr had left her child at the shelter where she had previously been and had gone away; she had eventually returned to take the child. Hence, the social worker bluntly commented that Zohr had lied to us when stating that nothing would have hindered her from keep her baby with her : “You see? The one who said she would never leave her child...!”¹³⁶; Zohr had also told us that she would have faced all obstacles in order to raise her baby herself, accepting what had happened and hoping that her siblings would have accepted and helped her one day.

The first months of life in Casablanca for Zohr had consisted of the search for temporary and precarious shelters for her and – after she had given birth – for her baby; this constant search had been interrupted by a short visit to her hometown to look for some documents and just to show up as one of her brothers already suspected something had happened to her and repeatedly told her that he thought she was hiding something. Although she had already reassured him on the phone in the previous months, she still had to go there in person – so she did a week after giving birth. About a month after the first meeting with Zohr at the shelter for homeless women and “street children”, I went to visit Nawal – with whom I had been in touch on the phone – and, as she had previously envisaged, I found out she was sharing a room with some other girls, among which Zohr. The latter had ended up living in the most deprived area of one of the many *shabi* Casablanca neighbourhoods, but her situation might have changed again, since she was waiting for her potential husband to find a job. She had benefited – like Nawal – from a little help from one of the biggest charities for unwed mothers in Casablanca, but everything still looked uncertain. Zohr looked slightly quieter in my eyes, though. As I subsequently met Nawal – two and a half months later – she added further details about Zohr, because they had spent lots of time together since the summer.

¹³⁵ I introduced her story in the First Chapter.

¹³⁶ I also told Zohr that she her choice had been brave – according to what she had told us. In any case, I was not surprised to hear a different version of her story and I rather found it very insightful.

In the meanwhile, Zohr's child had died: it was allegedly due to the same cause of Zohr's first child's death. The doctors told her they could not help it because the baby "was already very sick" and nobody had noticed it, although Zohr herself already suffered from the same disease¹³⁷, or – Nawal wondered – nobody had actually cared about it. She could not explain more to me, because she actually did not know exactly how things went either. In the last weeks Zohr had interrupted all relations both with the biological father and with her other partner – her former fiancé – who allegedly intended to marry her and to recognise the paternity of the baby. Nawal also told me that – before the child's death – she had moved into a room with Zohr only; one of the two partners¹³⁸ had bought them some pieces of furniture and other items for the kitchen – in addition to something they had provided themselves. Yet, one day – short after the child's death – they found their room empty when they came back from work.

At this point, Zohr's and Nawal's trajectories split and they found separate accommodations, even if they stayed in touch, as I could observe as I met Nawal at the hospital on the day of the death of her own son¹³⁹. Zohr and other women – among whom two *morabbiyat*, the 'nannies' – were there and went home with Nawal. Nonetheless, while we all were in the crowd at the gate of the hospital waiting to leave, Zohr seemed like she would faint, her eyes shut, she leaned on one of her friends. Then, Nawal told me that she was also "very sick" – *mreda bezaf*: this was allegedly the reason why both of her children were also seriously ill and had both died. At that time¹⁴⁰, Zohr was still living in the same neighbourhood and had no stable job; a month later she was in the same situation, but – according to Nawal – since "amid the bright lights of the modern city" (Ossman, 1994: 164) a brand new mall had just opened, Zohr now used to spend

¹³⁷ Nawal generically referred to "heart disease".

¹³⁸ The biological father at some point was actually willing to rent a room (or even a flat) for Zohr and to support her financially (to buy milk, nappies, etc.) until the child would have reached the age of three. Afterwards she would have been 'free' to leave the child to be raised by him. So the 'biological father' would have been willing to keep the child from the age of three and to let Zohr go instead.

¹³⁹ I will deal with this point in the Chapter Five.

¹⁴⁰ November 2011.

most of her time there “wasting time...doing nothing...just walking around and looking for *other problems!*”. Nawal stated she did not want to live nor to hang around with Zohr anymore precisely because she had the impression that her former roommate would have come across further “problems” – she hinted at troubles with boyfriends and new affairs.

Zohr’s story is complex and clusters together many of the central themes of contemporary unwed motherhood in the context of Morocco. I aim to reflect in particular upon the extent to which her being a *bent*, then a *umm ‘asiba* and afterwards a ‘former unwed mother’¹⁴¹ has played a role in informing her trajectory. Before becoming an unwed mother – before getting pregnant – she was already an unmarried young female worker who had moved from her hometown in search of a job. It is, indeed, in the context of her experience of work mobility that she had met her partner, who then became the biological father of her child. Yet, she had already had a fiancé, with whom a marriage plan had failed because of family interferences – her fiancé’s family allegedly did not agree with the choice of Zohr as a spouse. Hence, they split up and she subsequently quit the town: it was not made explicit if this event made Zohr suffer or if she was ‘just’ deceived, nor if her departure from her hometown was linked to – or motivated by – her failed marriage plans. However, this was the background on which her following experiences have to be viewed; her life in the other town and then in Casablanca necessarily build on the events she had gone through.

Since she first moved away from home after her affair (or *fiançaille*) had ended she got involved in another relation that she soon conceived of as a potential marriage – even though her new partner had made it clear that he did not intend to get married yet, he did not mind living with her in the meanwhile. Hence, this relationship embedded some ambiguities, which did not prevent Zohr from trusting her partner anyway. Nevertheless – once she discovered her pregnancy – this led her to move back and forth between home and Casablanca, where she ultimately stayed. The city thus represented an escape both from home and from the place where she met her last partner; it also offered in her eyes more chances to find some sort of solution to her burdensome situation. Above all, the existence of

¹⁴¹ Just like her flatmate, Nawal, who had lost her son.

charities and local organisations for unwed mothers and children (and orphanages) was the primary feature which, Zohr said, lead her to Casablanca. At the beginning, her plans were probably not clear, but the various uncertainties and unpredictable events that I have illustrated, might have contributed to keeping her in Casa and might have driven her to stay there even after the death of her son¹⁴².

These elements of Zohr's story illustrate that unwed mothers' trajectories across Morocco have to be understood by looking at labour mobility, gender relations and marital status, the – imagined and actual – role of the aid domain and the ways this – along with larger forces, such as the search for wage labour– shapes Casablanca as a social scenario in which unmarried females living and working outside their households emerge as social actors. While being in Casablanca for Zohr represented mainly a constraint and an escape, building on the story of Imane, I wish to shed light on other sorts of itineraries, in which moving to Casablanca is driven primarily by kinship ties and therefore implies different challenges – such as hiding within the city itself and drawing overwhelmingly on services and programmes offered by charities. Indeed, thirty-year-old Imane comes from a small town close to Taroudant (in the south); she had moved to Casablanca two years earlier to reach one of her sisters and other relatives. She had studied at a university close to her hometown, even if she did not obtain her bachelor's degree, because she had started working in another nearby town, where she had been living for the last eight years. In Casablanca, Imane had worked in an orphanage – *l-jama'iyya l-khayriya*¹⁴³ – as a social worker with kids (“*éducatrice*”) – the same job she had previously had:

¹⁴² At least until the time I was able to have her news.

¹⁴³ *Khayriya* comes from the root *kha-y-r*, which both in Classical and Moroccan Arabic refers to “good”, “morality”, “kindness”, “charity”. Following Bargach (2002), and building on my visits to some of these structures, it is worth noting how this notion is curbed, reversed and constrained by the spaces of the orphanages and similar ‘care structures’, in that they “fulfil the role of absolving society from the necessity of having to deal with its victims. In other words (...) they serve as a place where complex, vexing, highly charged, and unresolved issues are hid. On a closer look, they actually serve a double function; a place to hide the problems and a place to offer as a solution when problems become manifest” (ibidem: 221, n. 7).

“Thanks to my experience it was quite easy to find a job here in Casa...My sister insisted, so I came here because she did not want to be alone. Now we cannot live together anyway: our uncles and aunts often come to visit and I don’t want them to see me. Here in Casa my sister and I don’t see each other a lot. Now she has gone home for the *Eid* [*l-kebir*] but of course I couldn’t... [because of her two-month-old son]. It’s been a month since I’ve come back: I was sent to a charity in the south of Morocco just before giving birth, as the one where I was, in Casa, had no more ‘space’ for me and other women. I spent a month in the south... Do I prefer living there or here? As long as you are at charities [*fi l-jama’iyyat*] life is the same, because they help. Outside life is a bit better in the south... maybe? I don’t know yet. I was not supposed to live in Casa, I was already engaged to a man [a soldier], but I had to find an excuse to tell him that I couldn’t get married. I will have to stay here, I don’t know where else to go. My, our plans, were turned upside down by the problem – *l-mushkil*”.

Imane’s story shows how kinship ties pushed her towards Casablanca, although she already had a job and envisaged a marriage somewhere else. She was not driven by need or by the search for work, nor did she come to Casablanca to hide her pregnancy – at least at the beginning. Even if she had already been living outside her household, she claimed that all the troubles girls come across occur exactly when they leave *darhum* – their home – as it had happened to her, who said she had been aggressed while living in Casablanca. However, she hinted that after such experiences one might feel ‘trapped’ even – or especially – once away from home, in that, once gone and especially once having given birth, young women are, to a certain extent, constrained to stay away from it:

“Girls...most girls I have met at charities were living outside their home¹⁴⁴.

They had left to hide from home; others have had *the problem* as they were

¹⁴⁴ As we were talking, Halima – see Chapter One – was with us too: she did not agree with Imane and argued that ‘problems’ – sexual violence and/or pregnancy – may occur also in one’s hometown.

already living and working far from home. Work or the trouble of pregnancy made them leave home or their neighbourhood” (Imane, November 2011).

1.2 Spaces of estrangement and temporary shelters

Twenty-two-year-old Rachida, grew up in Casablanca but is originally from a village in the same southern region as Imane; she was confronted with her ‘trouble’ while living with her family instead. She came to Casa “as a baby” – she said she was only two – and was raised by her paternal uncle’s family, whereas her parents were still in the *bled* – her hometown:

“I grew up with my paternal uncle, his wife and their daughters; they have four daughters. I didn’t go to school. I lived close to a popular market on the other side of Casa...*Ana dima baqit fi dar!* [I have always been at home – i.e. I did not spend time outside], I’ve only worked for four years at that lady¹⁴⁵, that’s it” (Rachida, October 2011).

The lady mentioned by Rachida was her employer and the person she was living with until the eighth month of her pregnancy, when she moved to the charity where she was currently at. The house where she lived and worked was in a neighbourhood which was far enough from her family’s – so moving there was also a strategy to hide from her family and their neighbours. Her employer was a Moroccan lady (who spent her time between France and Morocco); Rachida told her about ‘her problem’ and maintained her employer had always been “nice” – *drefa* – to her. She had previously done an ultrasound scan at the same private doctor where the daughter of her employer used to go; Rachida did not need to explain that she was not married, since she gave the doctor her ID – *carte nationale* – and he did not ask her anything else¹⁴⁶. At the time of this conversation she had been living at the shelter provided by a charity – for unwed mothers – for a month

¹⁴⁵ A woman – her employer – she had previously mentioned during our meeting.

¹⁴⁶ Except the fee for the consultation.

and a half. She initially described her situation as a bit less ‘complicated’ than the ones of some of the other *bnat* – young women:

“*Howa khtobni...ana ghadi ntzawjo* [we got engaged, I’m going to marry him]. He came to our house and met my uncle, my sister, my mother” (Rachida, October 2011).

Rachida told me adding emphasis to her words by making the gesture “of the ring¹⁴⁷”. Then she explained that her *fiancé* came first of all to her employers since her family was too far, in the *bled*. But, as she said *darna*, she meant her home – her uncle’s home in Casablanca. Above all, talking about the *khotba* she emphasized: “*Kolchi farhan !* [everybody is happy]”. Rachida said that her husband was – originally – from a Northern Moroccan town and that they had met because their families were *jiran* – neighbours – in Casablanca, so she claimed they were already *close*; this was demonstrated by the fact that her boyfriend already went to her home and that they got engaged a year earlier – thus, before she got pregnant. So, in Rachida’s eyes, this might eventually lead her family to accept the pre-marital birth of her son. However, in the meanwhile – while waiting for a ‘regularization’ of the relationship with her partner – Rachida had concealed her pregnancy:

“*Darna may’arfush ana wuledt...ila ‘arfu, ghadi ydebhoni! Fhamtini?* [at home nobody knows I gave birth...if they knew it, they would kill me! Do you understand what I mean?]” (Rachida, autumn 2011).

Therefore, her situation – which seemed pretty simple at the beginning of our conversation – was complicated by further details she had gradually added. She still did not know when she would leave that charity, nor when she would be able to start working again; she thought she would probably have to leave the baby at a *morabbiya* while at work. Having made clear she would need to pay a *morabbiya* to take care of her baby suggested that she did not envisage a rapid ‘solution’ to her

¹⁴⁷ A gesture which is commonly made to indicate engagement and marriage.

problem, i.e. she knew it would take time to get married and to tell her family the whole story. Indeed, even if she stressed that she was ‘officially engaged’ she did not know when the marriage would take place exactly. Yet, she felt reassured by the fact that her *fiancé* had talked to one of the charity’s social workers: this made her confident about his intention to recognise the paternity of her son and to eventually marry her – as it had already been planned.

Similar uncertainties surrounding marriage plans and the relationship with her partner mattered also for twenty-two-year-old Sara, who came to Casablanca exclusively to flee from her hometown – on the Mediterranean coast – while waiting for the documents – *l-waraq* – for her marriage contract – *l-‘aqd l-zweij* – and for the baby – to be finalised. Unlike Rachida, therefore, she was alone in Casablanca and found shelter at the charity¹⁴⁸ – where we met; she had lived with her family and worked as a *khyata* – seamstress – in a nearby factory, otherwise she had always stayed at home and had helped with the house chores. When she discovered that she was pregnant she felt lost and wondered about quitting her home and her job; she made up her mind because she did not want to end up living on the streets, so she opted for a *semta* – a belt – and fostered various strategies to conceal her pregnancy to everybody, except to her partner. Indeed, he knew everything from the first month and told her “*khalli l-bebe ‘andek* [leave the baby ‘inside you’]”.

So she did – she thought of getting married soon; he had gone to her parents’ house, they had celebrated their *khotba* – engagement¹⁴⁹. Her family now knew him and – in the two years they had known each other – he had demonstrated to her that he intended to get married, before she got pregnant. However, her sister had previously found out that he was married but his wife had decided to divorce him; moreover, her parents were strict about her avoiding affairs with married men. Above all, Sara’s main constraint at the time was that – even if her partner had welcomed the baby and wanted to raise him – she had to go back home alone first and – only once her partner had finalised the divorce – could she then take the baby

¹⁴⁸ It was not the same charity as the one where Rachida stayed – they both offer accommodation to a limited number of girls.

¹⁴⁹ She added that they had taken pictures and organised a proper celebration to make the union public and official.

with her. Sara claimed that if he could, her partner would have already taken them home; she emphasized he had always been very kind to her and that, for instance, he had sent her money, since she had ran out of it. Despite this, she wanted to settle down in order to start working again after birth.

The situation still being uncertain – the baby’s documents and her marriage documents were not ready yet – she did not feel confident in telling the truth to her family; this would have happened, thus, once all the papers had been finalised. Nevertheless, Sara pointed out that if her family did not accept her, she would not go home anymore. Therefore, her trip to Casablanca was meant to be a mere ‘strategic’ option to hide the exact timing of her pregnancy and birth; it was also aimed to ensure herself and her baby a regular status in the eyes of her family and of the law. The importance of gaining the confidence of her family was bound to her legal status for two reasons: on the one hand, because her partner was going through the process of divorce, on the other, because she was about to give birth outside marriage. Therefore, even if the couple had got engaged and had therefore acquired a legitimate status before the family, Sara still could not be reintegrated into her social world. As I already observed for Rachida’s case, the fact that the couple was already engaged and that a bond existed between the two families made the girls portray their condition as easier, if compared to others’. Despite this, as Rachida and Sara added further details, their stories looked far more complex. Sara, for instance, did not take for granted that her family would accept her – even after the marriage – as she knew she had already defied her parents’ in having an affair with a married man. Whereas, Rachida mentioned the potential troubles arising when an unmarried couple argues while the woman has already born children or is pregnant: speaking in third person she hinted at the risk for the woman to be left behind by her partner due to disputes or to the pregnancy itself. Not being officially married yet, the possibility of being easily abandoned by her partner was not remote for Rachida either, so I would suggest her awareness was grounded in her own experience and on her efforts to find the right way both to secure her partner’s commitment and her family’s respect. The endeavour to find such a difficult balance and to stubbornly ‘work’ for the achievement of their marriage plans was no less challenging than starting everything over as many other unwed mothers do.

While Rachida had significant kinship ties in the city – which constituted, nevertheless, further practical constraints – twenty-five-year-old Meriem came alone from a Northern town and had been living in Casablanca for seven years. She had left her home to work as a housemaid in a wealthy *bidawi*¹⁵⁰ neighbourhood, so the reasons for her presence in the city were to be found in the need to support her family with her work. She spoke good French, which she had learnt at the family she had worked for – being the only language they used even with the children. Her ‘language course’ had been taking care of the children and doing the house chores for this *bourgeois* family. She was not the only servant in the house: through one of her co-workers she met her boyfriend – he was the other maid’s nephew and they met in her hometown (Settat), not far from Casa. When I met Meriem, she had been working for a year for a charity, by which she simultaneously received some benefits. She had previously been at another charity – lead by catholic nuns – where she had been taken by her former employers, who did not want her to give birth while living with them. They did not want any responsibilities nor risks, especially since Meriem’s boyfriend denied the paternity of the baby. However, Meriem had worked until the sixth month of pregnancy when she was taken to the nuns; she was subsequently admitted to the program of the NGO where we met. Far from the upper-class districts where she worked earlier, she was now living in the outskirts of the city, close to some of Casa’s largest *karyanat*, i.e. in the same neighbourhood as the NGO, which financially supported her by paying the rent of her room, while she is trained to become a potential “actor of development” and to achieve “financial autonomy” for herself and her child. Indeed, the following year she would have had to move out and to provide for herself and all her expenses: Meriem’s ‘career’ – the way her trajectory unfolds amidst very heterogeneous contexts, living and working environments – suggests how the process of (her) becoming a – certain type of – unwed mother goes through different phases and implies a sort of ‘learning’ process, which – I think – is aptly exemplified by the combination of apparently distant, yet intertwined characteristics, such as that of being a migrant housemaid, an unwed mother-

¹⁵⁰ It refers to something in or from Casablanca/Dar el beida. One may also say *casawi*.

beneficiary, a participant in a ‘development project’ . Significantly, her fluency in French – acquired as a housemaid – was drawn upon as she subsequently entered the network of non-governmental organisations.

Whereas, apart from sharing some significant features, Rabea and Salima’s stories are insightful for the constraints faced and managed by young women coming from rural areas to work as housemaids in the city and shed light on the endeavour to conciliate this kind of work with the contingency of out-of-wedlock pregnancy. Both come from the same Northern Moroccan region (close to Ouazzane) and both had been working as housemaids, respectively, in Casablanca and in Rabat.

Rabea told me that when she was still living with her parents in her hometown she never went to school because it was too far from their home and once a school was built close to her *douar* – village – she was already ‘too old’. Then, she headed to Casablanca, where she had been living and working for seven years; two of her older sisters had already settled down in the city when they got married. Before giving birth she worked in the kitchen at two different houses, one of which was a residence in a rich neighbourhood and the other in a low-income district. Her partner worked at the neighbours’ of one of Rabea’s employers.

The couple got engaged about seven months earlier, therefore she had been to her parents house: Rabea claimed they had already planned to celebrate the wedding a few months later, but Ramadan had already started and in the meanwhile she had found out that she was pregnant. The lady she worked for suggested a private practice for a consultation. Once she would have left the charity – where we actually met – Rabea wanted to go back to work in the same house, where she might also have accommodation; she told me she would probably leave the baby at a *morabbiya* while working. I argue that her recent experience at the charity in question, helps problematise the emphasis put on her motivation to work in order to raise her daughter – now that the father had left them behind, considering that they had nobody else’s support so far. Yet, she still wondered if she could at least take her daughter home – to her employer’s – at night. If not, she wondered about other solutions, but could barely figure out any. Hence her situation actually appeared as a ‘liminal’ one in which potentially anything could still happen, although she maintained she had decided not to abandon her child.

Coming from a northern town close to Rabea's village, Salima arrived in Rabat to "*l-ménage fi diur* [work as a maid]" more than ten years earlier – she was twenty-five when we met¹⁵¹. In the meanwhile, she had been working also as a servant in cafés or in restaurants; nevertheless, she stressed that there were 'no rights' in any of the jobs she had done – "*makaynsh l-huquq!* [there are no rights]". In calling attention to the main material constraints faced by unwed mothers, Salima ironically pointed out that in Morocco there might be more of them than married childbearing women: "*Kaynen bezaf dyal l-bnat bhalna fil Maghrib...Hna fi l-jama'iyya kaynen gher shwya...!* [there are many girls like us in Morocco... Here at this charity there are only a few]". To give evidence of her statements and to ground them in her lived experience she told me that she had observed this through her job over the years. Indeed, she had met many other young women living on their own and working as maids, since her employers had always up to three or four housemaids at a time. She explained:

"...*Ana khdamt 'and shi nas...li labas 'alihum* [I worked at well-off people]. One of the girls I have worked with hid her pregnancy until childbirth; she even told everybody that her swollen legs were due to *l-soqqar* [diabetes]. She then gave birth at home but was taken to the police anyway: they found out she had already had two children...You see?! *L-kdub*¹⁵² *dyal l-bnat* [girls' lies] ...!" (Salima, October 2011).

Salima laughed as she disclosed that her family, instead, already knew everything about her pregnancy. She added that she did not want to leave her baby: "I don't want to give my baby to somebody else, I won't leave him". The fact that she had told her story to her family and her intention not to 'give' the baby (to somebody else) might suggest the child might be raised by her family while she worked in the

¹⁵¹ We met at a charity in Casablanca, where she had found a shelter and support during the last month; she was supposed to give birth a few weeks later.

¹⁵² She had told me "to be careful", as she claimed that many girls – unwed mothers whom I met at charities might lie to me and – in general – also to social workers, to conform to expectations and criteria for admission established within the non-governmental domain.

city. Salima could not say it yet. She still had not given birth and her health was actually precarious, thus she was not able to balance the potential alternatives amidst such uncertain scenarios. Nevertheless her irony and her critical views concerning the other girls with whom she shared the dormitory at the charity and the other ‘girls’ like them outside definitely challenged mainstream (self)representations of unwed mothers as unaware victims.

I wish to conclude this section about the girls’ trajectories in and across Casablanca by drawing on Hajar’s and Hakima’s stories. They are two of my *bidawi* informants, i.e. two young women who were born and raised in the city and who I met in a temporary shelter for unwed mothers. Although their stories do not account for the forms of ‘single female’ mobility that I have previously mentioned, which are actually intertwined with many trajectories of unwed mothers, these cases are significant as they shed light on the diversity of the biographies and on the heterogeneity of experiences behind a mere label and beyond the tendency to produce standard representations – and “profiles”¹⁵³ – in the aid domain¹⁵⁴ and in popular media. Notably, their urban origins do not make their experiences less precarious nor their narratives less ‘opaque’; being from the same city – as illustrated by the case of Hajar – implies instead different sorts of constraints, which – for instance – may be unknown to young women who settle down in Casablanca from other parts of the country to flee their social entourage.

¹⁵³ The term “profile” is used in its French translation by many professionals working in charities addressed to unwed mothers and their children.

¹⁵⁴ I refer to representations of unwed mothers as coming mostly from rural Morocco. This representation influences to a certain extent also NGOs’ measures to support them and may shape the “criteria” for selection” of the potential beneficiaries, whereby those coming from other regions and particularly from the countryside may be seen as ‘more deserving’ of support and/ or shelter than the others. Although this process cannot be generalised, I have noticed such a tendency within some of the charities, while unwed mothers coming from Casablanca itself actually claimed they were able to ‘work it out’ even – or maybe better – without charities.

Nineteen-year-old Hajar attended *collège*¹⁵⁵ until the *quatrième*; afterwards she attended some private classes of informatics and model maker – *modéliste*; she then started working at a textile factory in the same neighbourhood where she lived with her family. It was her first job and she had been working there for eight months; she found it tiring, but “alright”. She had to stop working when she found out that she was pregnant – at the second or third month. Hajar said she did not know her partner very well and maintained that until recently nobody knew about her being pregnant: when we met, her maternal aunt knew where she was though. According to her parents, Hajar was actually supposed to be at her aunt’s because she had left her home two weeks earlier; after childbirth – when leaving the shelter – she might actually move to her aunt’s, whose husband was living in Italy. However, her plans were still extremely vague, except for her intention not to give the baby up for informal adoption or *kafala*; thus, at the time of our conversation she was just waiting to give birth and to prepare the child’s documents, so that she would be able to decide where to go. The days at the charity mostly consisted of ‘waiting time’, spent mostly between the cleaning and cooking shifts, the dormitory, and the TV room with the other girls.

Hakima was also born in Casablanca, namely in a large *sha’bi* district and like Hajar, she had just arrived at the charity, when we first met; she was seven months pregnant and had discovered it only a couple of months earlier. She was twenty-three at the time and had always lived with her grandmother, since her parents had divorced; they had both re-married and settled in different parts of the city. She told me she had also studied until the end of the *collège* and had afterwards only helped her grandmother at home - “*baqit fi dar*”¹⁵⁶. Both her mother and her grandmother knew about her story; her partner had interrupted all relations with her and denied the paternity of the baby. Hakima said that she did not want to talk to

¹⁵⁵ School level between primary and high school. The Moroccan education system follows the French system.

¹⁵⁶ It is worth turning attention to the emphasis put on the fact of “staying at home” by some girls, for it is to be seen in contrast to *l-zanqa* – the street – the latter being the emblematic site of illicit sexual exchanges and of the commerce of sex; the inner space of the house embodies the ideal of domestic sexuality, whereas ‘the outside’ evokes its opposite, i.e. ‘loose’ female sexuality.

him anymore either. Thinking of what she would do next, she was aware she could not stay at her grandmother's any longer since one of her maternal uncles lived with her – that was why she had to leave the house even before giving birth. The only solution she envisaged – once she left the charity's accommodation – was to search for work – to support herself and the baby – and to rent a room in a district where none of her relatives lived. When I asked her if she had ever thought of leaving *Casa* at all, Hakima told me that she actually did, although she had subsequently changed her mind. “*Kankhaf men baba* [I fear my dad]...*walakin Casa kbira* [but Casa is big]” she told me, as an example of the reasons which might keep her away from her hometown; on the other hand, being *Casa* big enough to hide, this allowed Hakima to stay and to try to start her life over.

The last two stories are emblematic of the peculiar obstacles glossed as perceived threats by Hajar and Hakima. They did not travel hundreds of kilometres but moved within the urban space, drawing on relational resources, like family ties, charities, pushing the boundaries of the domestic space, that out-of-wedlock pregnancy had ultimately – at least temporarily – dislocated.

§ 2 Reconfiguring bonds

2.1 Amina, Rayan. Making closeness

I aim to give further insights into the strategies and the arrangements fostered by unwed mothers, their families or other actors to manage and socially shape the occurrence of out-of-wedlock births. To begin with, I will draw on the history of Amina, whose biography adds significant features for discussing out-of-wedlock motherhood in Morocco: my reflections build on my relationship with the household where Amina and her son lived. I spent my time mostly with the other members of the household because of Amina's work shifts which kept her away from home. I have previously discussed the conditions in which I have conducted my fieldwork and some of its specific features – being partially carried out within the non-governmental domain and in the public health setting – while being myself

welcome within a household where a young woman and her son¹⁵⁷ were living was both a coincidence and a unique experience. Indeed, I was able to look at this issue from a peculiar perspective which has provided deeper and sometimes dissonant insights with regard to the narratives that emerged from the non-governmental domain. Besides, as I have emphasized, my relationship with this family emerged as one of the strongest bonds I developed in the field, beyond – even if necessarily entrenched with – my research.

The story of Amina is in many ways emblematic of the core themes underlying unwed motherhood in Morocco, as well as of some central features of the initiatives aimed at providing social and health care to them. Yet, other arrangements are put into being to deal with out-of-wedlock pregnancies and births. Notably, Amina and her son became part of one household¹⁵⁸, with whom they had neither previous contacts nor blood ties. Thus, this story illustrates an adjustment, in which *closeness* is ‘made’, moreover Amina had no family ties she could rely upon and had spent part of her life in an orphanage herself¹⁵⁹.

Approximately seven years before I first heard her story, Amina had joined an NGO programme for unwed mothers and their children, as both she and her son were diagnosed as chronically ill. Therefore, they could not be included in the programme any longer, moreover she was deemed unable to work in any of the charity’s so-called “income generating activities” and the cost for medical care for the young woman and her child was not affordable – nor profitable – for the NGO, whose programmes were not meant to merely assist their beneficiaries but rather to train, educate and “empower” them. A student doing a internship – in the same NGO was struck by Amina’s story and talked about it at home, so one of her

¹⁵⁷ Although for ethical reasons I could have changed the gender of the child, I will have to leave it: the fact that the child raised is a male – and not a female, like in other families I knew – is relevant. Indeed, females are more likely to be sought for for ‘secret adoptions’ and *kafala* (Bargach, 2002).

¹⁵⁸ The child has not officially been fostered by means of *kafala* by the family in question.

¹⁵⁹ Otherwise an ‘illegitimate’ birth may be dealt with even within the same family, and the child given to a married sister of the biological (unwed) mother. This, of course, is not always feasible: one of the roommates of Nawal in the first shelter had agreed this solution with her family.

aunties – whom I will call Khadija – decided to take care of the child and to give a temporary shelter to his mother.

The health of Amina’s son – Rayan – was precarious when he was taken to his new home, but it gradually improved; Rayan and his mother joined this household as if they were the brother and the sister of the other siblings. Amina actually calls their mother *khalti* – maternal aunt – and the latter – Khadija – says she considers Amina “like a daughter” and Rayan like one of her sons. Even if Rayan calls Khadija “*mama*”, he knows who his biological mother is and proudly showed her to me in a picture: “*hadi maman* [she is my mother]”, he told me the first time I was at their home, that is when I was told their story. Actually, when I first went to visit them, Khadija and one of her daughters introduced me to Rayan and, when he left the room where we were sitting, Khadija told me in French that he was not her own son. When I first saw him, I had actually wondered if he was her grandson. Hence, before she explained to me who he was, I initially thought he might be the son of her older daughter, Hayat, who I eventually befriended. I was told that they had raised Rayan¹⁶⁰ because he was very sick and his mother – whose health was also precarious at the time – had no place to go and had no family after the *jama’iyya* – the charity – had left them behind.

While Rayan was already living at Khadija’s home, Amina rented a room with some other *bnat*, but Khadija stressed that she was not happy because the other girls had stolen the money she earned and in her opinion behaved “badly”; Khadija maintained that Amina differed greatly from the other girls and that that neighbourhood was not good for her, she felt very unhappy and her health had even worsened because of the bad and distressing conditions she lived in. Moreover, she was not like most of the other girls – unwed mothers or just ‘girls on their own’ – living in that neighbourhood, who used to “go out all the time”. Khadija did not specify – and probably took for granted that I knew – that “going out” locally means to have one or more partners, from whom women receive money or goods in exchange for sex (see also this chapter, § 4). Khadija claimed that Amina did not want to do “those things” even if she needed the money.

¹⁶⁰ This does not deal with a wealthy nor with a middle-class family.

While Amina was still living on her own, she visited the family from time to time – every two, three or four months – even if she actually lived close by and they were regularly in touch. Hence, as Amina got fed up with life with the other girls, she finally decided to move to Khadija’s home, where she actually went only at night – she did not need anything else, said Khadija. In the meanwhile, Amina had found a job in the same neighbourhood as a housemaid and caregiver for an elderly lady who lived alone; Amina’s salary was sufficient enough so that she asked no money from Khadija’s family¹⁶¹. During my first visit to Khadija’s home, Rayan was asked to show me the album of his pictures, basically his whole life until that time. The pictures portrayed several moments of his life both with his mother – while they were still at the charity – and afterwards, with Khadija’s family. She then showed some pictures taken a few years earlier in popular sites of the city; they portrayed Rayan with her husband – the man who raised him.

When we found a picture of Rayan’s mother, Khadija started to tell me her story: ”Here is his mother, she is black, she comes from the Sahara”. Thus, Khadija and her older daughter – Hayat – started telling me the story of Rayan’s mother: she is *amazigh* from southern Morocco¹⁶²; her mother died she was a child and her father married a second wife, who mistreated her. Amina was subsequently sent to an orphanage since her mother’s family did not or could not take care of her. When she grew up, she was sent to a city further north – much closer to Casablanca – to her maternal grandmother for the celebration of *Eid l-Kebir*; while she was doing some shopping for her grandmother – Khadija told me – she was taken by a man who had seen her in the street. Amina was still a girl – she was about fifteen or sixteen – but as Khadija and her daughter emphasized, “she was attractive”. The man was married and much older; he threatened Amina and took her to his house – as his wife was on a trip – and did not let Amina go until the third day.

¹⁶¹In the following months Khadija actually argued that Amina was not well paid for her work and that the family of the elderly lady she took care of did not want to increase her salary. Amina subsequently changed her job and started working as a maid in hotels.

¹⁶² Khadija and her husband’s family settled down in Casablanca several decades earlier, but is also *amazigh* and originally from Southern Morocco – even if from a different region as Amina’s.

When she finally went back to her grandmother – according to Khadija’s tale – she felt very bad, she cried a lot, but her grandmother did not want her to stay. She was now completely alone. Since the town where she was is not far from Casablanca, she was sent to some charities and eventually arrived at the one where Khadija’s niece was temporarily volunteering. Given the ‘informal’ circumstances in which I got to know Amina’s story and because of some boundaries concerning issues dealing with sexuality and my own relationship with this family – in which I came to be seen as ‘one of the girls’ – I could not ask for more details about – for instance – the time when she discovered she was pregnant – whether it happened after a long time or relatively early. However, Khadija’s daughter, Hayat, emphasized that Amina was so young that *”matat’arafsh walo* [she did not know anything]” when she found out she was pregnant; she could not even read or write, Hayat stressed. As she underlined that Amina did not know *anything*, she actually referred to sex.

Above all – as stressed by Hayat and Khadija – Amina wanted her son’s life to be different from hers: she did not want him to grow up in an orphanage, for instance. If she had kept living on the street, or even in the neighbourhood where she used to live before, if Rayan had not been taken care of by their family – they maintained – his life would have probably been at least as hard as his mother’s, his destiny being that of a “surplus body” (Bargach, 2002 : 2) who was likely to be “severely stigmatized, feared, and shunned by all [because] socialization begins in the womb, and is bound to succeed only if the womb has been impregnated by an appropriately designed sire. Law and nature are mutually influential” (Boddy, 1989 : 77). Whereas, while Hofriyati women in Boddy’s ethnography held that children must be raised by their natural kin to fulfil their potential and become responsible human beings (ibidem), the women of the family in which Rayan has been raised stated that growing up with them has given him ‘another chance’. I focused on Amina, Rayan and Khadija’s family since the elements of their story that I highlighted so far call for a broad reflection on the intersection of formal and informal bonds involving unwed mothers and their children; on the pitfalls and the controversial aspects of aid and NGOs towards subjects cast as vulnerable. Besides, this story sheds light on the blurred boundaries of ‘shame’, as out-of-wedlock birth is placed within an alternative context, i.e. neither the family of

origin of the mother – Amina – nor a charity, whereby the child is raised by a family with whom they have no blood ties.

At the same time, to a certain extent, Amina was herself fostered by the same family: she supported herself financially with her salary and she simultaneously helped with the house chores in Khadija's home, that – as she often said – had seen the arrivals and the departures over the generations¹⁶³, since her and her husband's family moved in decades earlier, as they arrived in Casablanca from the *bled*. Having spent some time at this house – where I was invited to settle down myself several times, as if it was my home – I argue that Amina did not live exactly as the other girls in the family, as her duties at home and her workload seemed to me slightly heavier than the others'. Yet, this did not surprise me, especially since this became more evident after the marriage and departure of one of the other girls. As I will further examine in the next section, I also observed how the transgression represented by out-of-wedlock birth was given new meaning within the household that Amina and Rayan had joined, by stressing the fact that sexual intercourse was non-intentional, given the circumstances surrounding Amina's encounter with her son's biological father.

This point was actually raised and made clear by Khadija as the premise and the basis for her family's relationship with Rayan's mother. Trust towards Amina was reinforced – in Khadija's eyes – by her behaviour, such as her commitment to earn money without recurring to relationships or sexual-monetary transactions with male partners. Thus, the balance between the roles of both of Rayan's mothers and those of the other members of the household, as well as Amina's inclusion in it, lied – at least to a certain extent – also upon Amina's behaviour and its potential impact on Khadija's family's respectability¹⁶⁴. Indeed, one of the turning points in her trajectory – the time when she reached her son at Khadija's home – was when

¹⁶³ To France, Italy and Spain.

¹⁶⁴ With regard to this point, for instance, I observed Khadija's attention towards Amina's 'proper' clothing also within the house: for example, the suggestion to wear loose and long clothes – especially if guests were around – were emblematic of the fact that the same attention paid to the other girls of the family was addressed to Amina. To a certain – yet different – extent, similar attention was paid to me not walking alone a few metres away from home to the main street to catch a taxi – especially at night ; or on *Eid l-Kebir* as I was accompanied by Rayan to the only nearby open grocery.

she left that ‘dodgy’ neighbourhood and the other girls (the ones who used to “go out”, i.e. to exchange sex with money). Hence, she symbolically did away with that specific context and with some conditions which are ascribed to unwed mothers in Casablanca, i.e. the association of menial jobs and forms of commercial sex, that – as I shall further discuss (§4) – are actually practiced by some young women, including unwed mothers. However, in order to grasp the significance of Amina’s and her child’s incorporation into this household, further aspects of the lives of unwed mothers in Casablanca have to be discussed.

2.2 *l-bnat* adjusting with distance

I think it is worth looking at and contrasting Amina’s itinerary with other relevant examples of the ways in which girls re-adjust their lives before and after childbirth. I have looked at unwed mothers’ trajectories within, across, after and outside the specific context of NGOs and local charities. Yasmine came to Casablanca from a small town in Southern Morocco shortly before giving birth to her son. She spent some time – approximately two months – at a shelter for homeless people and young – homeless – women and street children where she met Naima, a girl who was there for the same reason – she was unmarried, pregnant and had moved to Casablanca to give birth far from her family. Coincidentally, their hometowns were not far from each other¹⁶⁵. I actually got to know Yasmine through Naima – who I had met at a charity – as I had been invited to their home in the same neighbourhood¹⁶⁶, where many of my informants – including Amina (2.1) – had lived at some point during their trajectories in Casablanca. The two roommates shared a few square metres at the top floor of a building where other girls¹⁶⁷ rented similar accommodations, shared a toilet and – some of them – butane cylinders – *l-bota* – to cook. Only Naima’s baby lived with them, because Yasmine had managed to introduce hers to her family, therefore he was being raised by her

¹⁶⁵ Her story will also be dealt with in Chapter Five.

¹⁶⁶ I have omitted its name, although it is a well-known neighbourhood all over in Morocco.

¹⁶⁷ It dealt with some beneficiaries of the same charity as Naima and with other girls – without children – or women with children.

mother – the baby’s grandmother – provided that Yasmine worked in Casablanca and sent money back home for the child’s needs.

The disruption represented by Yasmine’s out-of-wedlock pregnancy was handled by the agreement made with her mother, whereby the condition for keeping the baby within the household was that she remained in Casablanca, where she might find more work opportunities, since her main role had become the economic support of her family who accepted to take care of her son. Hence, after having given birth, she had to delegate child care to somebody else: childcare in this case was transferred to her family, to whom she provided material and – mostly¹⁶⁸ – ‘disembodied’ support at a distance.

Her role as a breadwinner was simultaneously meant to keep her distanced from the community, so that she was not publically recognised as the (unmarried) mother of her son. Even if she was acknowledged as the – alleged – biological mother, her being in Casablanca – without her presence interfering at home – and the simultaneous economic support requested by her family might contribute to – eventually – gaining trust from her family and regaining social legitimacy. As I shall argue further, it is to be noted how material and economic support is deeply entrenched within these relational arrangements and how – with regard to unwed motherhood and out-of-wedlock pregnancy and birth – the role of unwed females’ wage – as in Yasmine’s case – constitutes an arrangement which might counterbalance the fact they breach or challenge gender norms and boundaries concerning their sexuality.

The fact that Yasmine’s child was raised by her mother some thousands of kilometres further south opens up another issue, i.e. Yasmine did not experience the same conditions as her roommate, for instance. Thus, as I mentioned, even if she had to cope with her child’s – and her family’s – needs, she was only asked to send money home and did not have to take care of her child on a daily basis. In this sense – being exempted from care giving – her life differed substantially from that of most unwed mothers I met. I suggest that Yasmine would not fit into the category of persons targeted as unwed mothers by local NGOs anymore. Yet, as I realized by talking to her and to Naima – her roommate – when I visited them,

¹⁶⁸ Although she went home from time to time, she spent most of her time in Casablanca.

Yasmine experienced similar or even deeper material constraints as other ‘standard’¹⁶⁹ unwed mothers: this was actually due to the obligation towards her family, which required a regular income, that she could not always guarantee because she had no fixed salary.

Stories like Yasmine’s and the adjustments she had agreed with her family make her an ‘invisible’ unwed mother and, to a certain extent, this seems to hide the economic constraints and pressures she goes through to live up to her family’s expectations and requests. While, on the one hand, having her child raised by her mother makes her situation apparently easier, on the other, it turns out even more challenging, in so far as the economic pressure from her family was probably greater than had she kept her child – hidden – with her in Casablanca. Should she turn to other charities, her case would not appear as potentially deserving of support – whether legal, social or material.

I am not arguing that the support of a charity should be sought – nor wished for – by all unwed mothers, whether they raise their children or they delegate care to somebody else (within or outside their family). Besides, I do not suggest that tools and measures designed and implemented by charities necessarily impact the conditions in which unwed mothers and their children live. Cases like Yasmine’s rather lead to further rethinking the boundaries of the category of unwed motherhood as such and in relation to tools like charities and State-lead assistance, support or even so-called empowerment initiatives. Indeed, such trajectories actually blur the boundaries of the category of unwed mothers as a target group¹⁷⁰, since – as we have seen for Yasmine – girls can be recognised as needy mothers as long as they are pregnant, breastfeeding and devoid of anybody’s support.

¹⁶⁹ Those who raise their children and cannot leave them with their families while working and living in different regions and towns.

¹⁷⁰ I had subsequently met Yasmine at a group meeting at an NGO: she was with another friend of Naima. I did not recognise them straight away because – unlike the first time we met – they were wearing the *hijab* and make-up. They did not address me directly, but they showed they had recognised me, instead. All of them were or had been the beneficiaries of this local NGO, which does not explicitly target “unwed mothers”, but another target, that is women who – exclusively within this sort of organisation – are labelled as “sex workers”, but may not consider themselves as such. In Chapter Five I will discuss how these kind of initiatives further illustrate the controversial points of policies based on such bounded categories.

However, Yasmine's case shows how trajectories are not linear and how relationships between girls and their families might be ambiguous – whereby the support or the acknowledgement by her family may be even more demanding .

Thus, even if a girl like Yasmine fit into a precise 'target group', as long as she was pregnant and had just given birth – she displayed the embodied proof of her being an unwed mother – she might not be admitted as eligible for a programme for unwed, divorced or widowed mothers should she subsequently turn to other NGOs or local organisations – since she does not fit into such clear-cut categories¹⁷¹. What I wanted to emphasize here, is that – if we are to look at the relationships between unwed mothers and the domain of charities and NGOs' programmes – some controversial issues emerge. I argue that it is key to look at this domain according to the specificities of the Moroccan context, given the multiple social and political stakes embedded in the tools implemented by local and international organisations¹⁷². My research investigates in particular the manifold ways in which some of these measures weave into the biographies and the trajectories of most of my informants.

While Yasmine shifted from being the temporary beneficiary of a shelter for 'street' unwed mothers, to being a single immigrated working female, who provided financial support to her family and her child through informal jobs, her roommate Naima¹⁷³ found different kinds of adjustments to her condition, both through the complicity of one of her siblings and the various charities she had been –

¹⁷¹ Indeed, girls who give custody of their children to their family – in another region of the country – and work to support them are not considered as experiencing as stressful a situation as the others or as, for instance, some widowed or divorced women from lower social strata, to whom national and international NGOs address some projects both in urban and rural areas (I noticed this by visiting the site of a similar programme in a low-income district of Casablanca),

¹⁷² In chapter Five, I will discuss the features of the Moroccan non-governmental domain and its relationship with State-lead institutions into more depth.

¹⁷³ According to Naima, there had been some problems and misunderstandings between the two girls; this at some point pushed Naima to look for another accommodation, because she claimed that sharing the room with Yasmine was too stressful. In the end, she decided not to move out, since the two allegedly resolved their conflicts.

sometimes simultaneously – supported by over the previous two years. Furthermore, the relationship with a boyfriend came significantly into play as another kind of arrangement in which, as fairly acknowledged by Naima – romance and material support merged¹⁷⁴. The mutual implications between all these relationships and sources of support – clearly highlighted by this case and relevant for many others – are not to be overlooked, however I will focus on the ways Naima adjusted her situation towards her family first. Indeed, since she left her town to move to Casablanca, she had been in touch with one of her sisters, who was also unmarried and supported her financially by sending her money. She is the only one who knew that Naima was living in Casablanca and had a child; according to her mother and her older sister she is supposed to be working in another town further north. Naima is regularly in touch with them on the phone, but does not dare tell them the truth. Her older sister is married and also lives in Casablanca, but Naima is not afraid to be seen by her or to meet her accidentally, because she stressed that the neighbourhood she currently lives in is considered dangerous and dodgy, so neither her sister nor anybody in her family would ever go there.

Naima felt safe instead, precisely because in her view nobody would ever suspect that she was living there. During one of my visits at Naima's, she told me her mother was supposed to come to Casablanca a few days later for a medical consultation, but of course – since the two talked on the phone – Naima behaved as if she was in another place. However, she had already planned a short trip to her home town in the south so, although it was more expensive, she would have seen her mother at home anyway. In the meanwhile, she intended to pay a *morabbiya* to take care of the baby. Naima firmly asserted that – even if in everyday life she was not ashamed of introducing herself as her son's mother¹⁷⁵ – she did not want to tell her family about her child until he was grown and she had a good job. Thus, she made a close link between her wish of being successful in raising her child, i.e. her role as breadwinner and her claims of legitimacy towards her family. Naima's and

¹⁷⁴ See § 4 in this chapter for a broader discussion about the features of these relationships, in which romance and the transaction of money and/or goods merge.

¹⁷⁵ All the activities she was carrying out and most resources she drew on, were actually accessible in reason of her being an unwed mother.

other girls' statements about their hopes for economic stability evoke what Kapchan notes for *shikhat* (female performers) who succeeded in saving money and in buying their own land and homes, that is that "their social exile is lessened as they resituate themselves in social and symbolic space, buying themselves (...) new social categories" (Kapchan, 1996 : 208).

At the time Naima and I met, nevertheless – despite her sister's material support, the benefits of charities' programmes and the occasional help of her boyfriend – she still struggled both to face everyday expenses and to conceal her real life from her family. The two efforts were actually closely entangled, or rather highly dependent upon each other. Given the simultaneous bonds of solidarity and support she enacted, Naima's case displays some emblematic features underlying the processes of the social construction of unwed motherhood and of their strategic appropriation by (some of) the girls. Yet, such processes are far from being homogeneous. Hence, the trajectory of another of my key informants – who also successfully benefits from local charities' programmes – illustrates how different sorts of adjustments are made in order to make meaning of and to cope with the condition of out-of-wedlock pregnancy and motherhood. Samira, for instance – before drawing on her job – was lead to seek recognition from her family short after birth, as she went through the crisis represented by the discovery of herself and her daughter Aya being HIV positive, during the baby's hospitalisation¹⁷⁶. Although she emphasized that she suddenly felt lost, she soon disclosed her story to her family: however, they could hardly believe that she had actually given birth, since she had been at home during the pregnancy and nobody had suspected it. Samira herself was not aware of it until the fifth month, when she felt sick and turned to a doctor; her pregnancy was subsequently confirmed by an ultrasound scan.

¹⁷⁶ Samira disclosed to me that she and her child are HIV positive during an informal talk which did not concern her personal life at all. I had not met her as the beneficiary of any of the associations in which I carried out my fieldwork. After her spontaneous disclosure, her and her child's health as well as their access to care and treatment entered our usual conversations regarding work, the child's education and everyday life; neither the circumstances in which she discovered that she and her child were both HIV positive were further discussed.

Samira told me that everybody at home finally believed she was Aya's mother because of the great resemblance between them. The relationship with her family gradually adjusted to the new situation and she carried on living with her baby and some of her male siblings in Casablanca, regularly visiting the rest of her family in the countryside – in a nearby region – on holidays and when she could afford buying presents to take home. Hence, despite the potentially stigmatising elements which – in her eyes – might have caused rejection by her family, in the following years Samira acquired a respected position within her extended family. This happened in virtue of her relative financial autonomy and her professional success, which is partially linked to her biographical experience. In addition, her father asked her to take care of her youngest – teenage – sister, who moved to Casablanca during the holidays, and who was supposed to eventually settle down there. However, Samira was reluctant about accepting her father's request, as she stated that living in the big city would have entailed "too many risks for a young girl". She ultimately did not want to bear the burden of responsibility towards her whole family for her sister and her conduct.

The ultimate adjustment that unwed mothers might recur to, in order to regain their status, is marriage, either with the biological father of their children or with another man. Mbarka and her friend Yousra got married respectively as the second wife of the child's biological father and as the first wife of another man – Mbarka's husband's cousin, indeed. Hence, the two young women left the charity by which they had been supported by and by which they had been guided for the bureaucratic issues concerning marriage and child custody. I was at the charity the day on which the two men came to talk to social workers, who bluntly said that everybody was "very nervous", given that most girls would not have had the chance of finding such committed partners and potential husbands. That morning Mbarka was pretty amused as she found out that I spoke a few words of her native eastern Moroccan *darija* and claimed I had become a "true Moroccan", but later that day she was not equally enthusiastic about her upcoming marriage and was rather worried. Leaving the two men for a while in the garden with the children, Mbarka got busy going back and forth from the crèche, trying different combinations of clothes and asking us for advice also on make-up and hairdo, while Yousra – who had overtly expressed her hostility to my presence – had already opted for a black *jellaba* with

pink embroidery. Both *bnat* were now ready to go home, although – except the matching colours of their clothes – they could not envisage how their life would have looked like, since they were about to start everything over on the following days.

§ 3 “*Mar de amor*”¹⁷⁷

“As a verb, *‘aqel*, *‘aqqal*, means to hold, to tie, to remember (...) *l-‘aqel* also means to string, bridle, tie, and is almost synonymous with the terms *rbta*, *marbut*, ‘attached’, ‘tied’ as in tying up something, or attaching a donkey to a pole. Like *maftun*, (the passive participle of the verb *fatana* ‘a person seized by *fitna*’), these are terms of bewitchment. Hadda says that a person in love *khraj ‘aqlu*, ‘he is out of his mind, lost in the middle of the sea waves. But then he goes on to compare a person in love to a horse, blindly driven by a bridle. A bridle is a tie, a knot or a string” (Pandolfo, 1997: 97).

I shall look closely at some narratives which embed additional significant elements concerning the imageries of love and their relations to gender and sexual norms outside conjugality. In particular, I will seek to illuminate the declinations and appropriations of notions of love¹⁷⁸, romance and affection within the boundaries

¹⁷⁷ Literally “*A sea of love*”. This is the title of a song used as the soundtrack of a popular Mexican soap opera broadcast by a Moroccan TV channel. “*Mar de amor*” has often been the soundtrack of the time spent at some of my informants’ places : those who owned a TV were actually keen on this *feuilleton*, that was instead sometimes criticised by other acquaintances for its alleged bad influence on people’s mores. According to this connection “between pictures and morality” (Ossman, 1994: 120), such Mexican soap operas were emblematic of Moroccan “underdevelopment” and distance from “authentic Islamic values”.

¹⁷⁸ An article related to the issues discussed in the following paragraphs and based on the paper « Being in love and being in a trouble : shaping intimacy and moralities as unwed mothers in Morocco » (presented at the international workshop *The trouble of love in the Arab World. Romance, marriage, and the shaping of intimate lives*, University of Lausanne, 14th-15th December 2012) will be submitted to the Arab Studies Journal (ASJ) in 2014.

of the girls' involvement in out-of-wedlock relations, whether before or after the birth of their children. Indeed, the ways in which relationships with male partners are conceived are also significantly tied to the multiple uncertainties of actual or potential unwed motherhood. I wish to provide deeper understandings of this condition by interrogating the representations of love – if they come into play at all – and their ambivalences in the making of the meaning of out-of-wedlock pregnancies. The ideal of romantic love expressed by evoking previous marriage promises – ascribed to once trusted self-chosen partners – may be called upon to seek social legitimization for oneself and one's children; besides, the acknowledgement and the claim of free relationships with no references to marriage and childbearing are relevant in so far as they shed light on the multiple ways in which girls reconfigure their experiences drawing on diverse and sometimes conflicting frameworks.

Discourses on love, desire and attachment are also entangled with the negotiation of the intimate relationships girls subsequently engage in. They are confronted with a socio-cultural environment in which as unmarried mothers they are either seen as victims of violence or as prone to '*débauche*' (*l-fasad*) – locally associated to prostitution. Simultaneously – as illustrated by the cases discussed above – most girls have to come to terms with socio-economic challenges, in which forms of friendship and romance with male partners, along with sexual exchanges, might be synonyms of material support, without necessarily being conceived of as sex work nor as prostitution (§ 4). As previously discussed, for some, marriage might eventually be a way to fix or re-establish their respectability *vis-à-vis* family and society.

The example which follows – Raja's – adds to Samira's – see § 1.2 – and provides relevant emblematic insights. Samira was not in love: she got married to a man – a co-worker – explicitly in order to provide paternal filiation to her daughter: they actually got divorced shortly thereafter, but they still worked together and this man was recognised by Samira's child as her father and the three regularly met. However, it was clear that Samira had never had any relationship with this man and never evoked romance in talking about him; their relationship was rather conceived as explicitly aimed at providing a legitimate framework to Samira's daughter's paternity from a legal point of view. Moreover, Samira never mentioned neither her

daughter's biological father, nor other partners she had at the time – or whom she had had in the meanwhile.

Whereas Raja – who had initially introduced her child to her family as her employers' son – disclosed the truth about him, only after having registered his birth, even if his biological father refused to recognise his paternity. Yet, when the boy was about two years old, she got married to another man and left Casablanca, where she had fled to escape rumours and her family's reaction to her out-of-wedlock pregnancy. Thus, dynamics surrounding marriage, engagement and other sorts of relationships with male partners ultimately account for the search for balance between competing frameworks of meaning: love and intimacy, as well as security and respectability, are not given once and for all, but shaped rather according to sinuous pathways.

3.1 In and out of love

“L'amour est-il une exception, la seule, mais de première grandeur, à la loi de la domination masculine, une mise en suspens de la violence symbolique, ou la forme suprême, parce que la plus subtile, la plus invisible, de cette violence ?” (Bourdieu, 1998 : 148)¹⁷⁹.

As we have seen, childbearing outside marriage implies the reconfiguration of one's social relations and the quest for balance between multiple and sometimes ambivalent moralities, this is the framework within which sexual and relations and imageries of love are to be understood. Their representations illustrate the extent to which they are experienced and shaped drawing on heterogeneous and fluid ideas of romance and love. This reflection emerged during research as key in interrogating the field and in working on part of the ethnographic material which stemmed from it. Some cases seemed to me particularly relevant to the ways ideas of love are signified throughout the girls' itineraries. As I shall argue, the mobilization of notions of love in the representations of the relations unwed

¹⁷⁹ *Post-scriptum sur la domination et l'amour* (ibidem).

mothers are involved in across different times of their lives are actually crucial in the construction of their gendered selves.

One of the major representations I came across was fostered especially in the NGOs domain to account for the existence of out-of-wedlock pregnancies; interestingly, this discourse points to the *lack* of love of which many unwed mothers would have suffered. This notion is based on a biased image of unwed mothers as former *petites bonnes* – housemaids – from rural regions, girls who since their childhood were sent by their families to work at well-off families in the city. Living this experience of detachment from one's family – which financially benefits of their work – is, according to this view, the trigger of the girls' 'blind search for love'. Notably, a social worker pointed out that as long as girls grow up confronted by their employers' family life, romance and sexuality, this experience deeply affects their imagery so whenever somebody – a boyfriend – shows interest towards her, she takes this as a sign of love and also – significantly – as a possible way to escape the harsh material conditions she has always lived in. Yet, these relationships, especially if followed by an unexpected pregnancy, often turn into the end of romance or rather in its denial by the girls themselves, as we shall discuss.

Coherent to these contested understandings of notions of love is another discourse according to which, unwed mothers, their families or other people involved in their itineraries may rather evoke its absence in the relationships unwed mothers allegedly engage(d) in. In particular, when aid and support are at stake, girls may indeed be portrayed or portray themselves as victims of sexual violence or abuse rather than claiming to have been actively involved in free relationships – even if they actually were. The register of manipulation – if not that of coercion – can be regarded as a "*récit idéal-typique*" (Cheikh, Miller, 2010 : 193) that can be found also in the news or in movies (Cheikh, Miller, 2010) and not only in the NGOs' domain – within which I have observed it. Hence, evoking and mobilizing notions of romantic love to seek legitimization, for otherwise illicit sexual relations and pregnancy, may not grant it fully before family and one's social *entourage*. The responsibility of any consequence of the presence or the absence of love in the relations which lead to out-of-wedlock pregnancies is placed outside the subject's agency, hence her consent is denied. Some girls may claim, for instance, that they

have been given drugs, that they have been threatened and/or manipulated, abducted or sexually assaulted in order to give an account for their not being virgins and not being married¹⁸⁰. This sort of narratives, hence, bring attention to the “denial of sexuality” (Abu-Lughod, 1986: 152)¹⁸¹ as an idiom through which some girls seek to comply to the social order “by distancing themselves from sexuality and its antisocial association [and to potentially] escape moral stigma” (ibidem: 165). At the same time, I do not mean to make sweeping generalisations on this ‘denial of sexual agency’, nor is this account meant to portray women as “utterly powerless in their sexual encounters” (Undie, 2013 : 189), yet I wish to question the fact that some girls shaped peculiar types of narratives according to the idiom of “sexual negation as [their] main sexual narrative of women’s sexual experience” (Bakare-Yusuf, 2013: 37, in Cornwall et al.) and – following the author’s suggestion – to simultaneously look for counter-narratives that “transcend discourse of sexual danger” (ibidem, 29) hinting at agency and desire besides fear, violation, passivity and ultimately sexual danger (Vance, 1984) or the “controlling script of danger and oppression” (Bakare-Yusuf, 2013: 31) as the blueprints of female sexuality.

Even if contemporary urban Morocco transgressions associated with out-of-wedlock sexuality might be seen as “banal” (Cheikh, Miller, 2010), any sexual relation other than those circumscribed to heterosexual marriage is cast as illicit, therefore claiming one’s involvement in any of them without any feature of romance, can easily be understood as a form of sexual-monetary transaction, given

¹⁸⁰ These accounts, that I shall call ‘plotlines’, have already emerged from the above mentioned narrative of Imane about herself and from Khadija’s description of Amina’s story.

¹⁸¹ Although my use of this notion differs to many extents from the ‘denial of sexuality’ – as the core of women’s modesty – elaborated by Abu-Lughod (1986), the narratives and the ‘plotlines’ of some of my informants may well be interrogated in terms of denial of their sexuality and involvement. This is all the more significant for unwed mothers as “women are more clearly associated with the sexuality that threatens the whole male-oriented social order through their reproductive activities and their inability to conceal sexuality because of pregnancy. This close association means that they represent not the embodiment of that order (...) but its antithesis. It is therefore more incumbent on women to deny their sexuality in order to assert their morality” (ibidem: 155).

that out-of-wedlock female sexuality is nevertheless socially and symbolically associated with forms of prostitution. Hence, I argue that the stake here is the ‘opaqueness’ of the recognition of choice and desire in female sexuality outside socially-legally-religiously legitimate frameworks, whereby either the uses of notions of love, its alleged exploitation in the cases of girls represented solely as naive (*niya*)¹⁸², or its absence in the case of the claim of sexual abuses, contribute rather to the construction of these girls as victims or – on the other hand – to the reproduction of the stigma of sexual deviance. These processes re-frame the girls’ declinations and ambivalent appropriations of notions of trust, love, romance and intimacy. Notably, as we have seen, the ideal of romantic love may be expressed by evoking informal “marriage promises”¹⁸³ between the individuals, often without any family involvement. What is understood as a promise is ascribed to trusted self-chosen partners and may be called upon to seek – on the one hand – social legitimization for oneself and one’s children, and – on the other – to situate forms of sexuality that would otherwise be cast as illicit, deviant or merely instrumental, as a way to respond to material needs or desires of consumption.

An interesting critique to ‘naivety’ and to its ‘promotion’ by the organisations I mentioned so far, came by a doctor (and activist) whom I interviewed in relation to the debates and demonstrations on the decriminalisation of abortion, which took place in the autumn of 2012¹⁸⁴:

¹⁸² The concept of *niya* interrogates this ‘tangle’: *niya* itself refers broadly to ‘good intentions’ and defines a “moral space” for honesty, sincerity, as opposed to malice (Vacchiano, 2007: 357). Most importantly – potentially also for the *bnat* in this research – is that *niya* may refer to a disposition which contrasts what is exterior and manifest: even transgressions, in this sense, may not constitute infractions if they are non-intentional (ibidem). Yet, a feminine declination of *niya* is problematic, because *niya* is defined by Bourdieu (1998) as ‘the perfect antithesis of the diabolic ruse’, hence, magic and the feminine (ibidem: 76, n. 77). The ruse in this sense is what outweighs the female incarnation of the vulnerability of honour (ibidem: 76), whereas *niya* would be a male attribute.

¹⁸³ The expression *promesse de mariage* in the Moudawana is the *khotba* (official engagement), whereas informal ‘promises’ are ascribed to expressions like “*ana ghadi ntzeweij bik*” (“I will marry you”).

¹⁸⁴ See Chapter Four, § 4.

“Those out-of-wedlock relations, are just non-responsible sexual relations. They haven’t marriage as a goal, but not even anything serious...It’s somebody who has seen a girl, and the girl is waiting for somebody who will ask her as a spouse one day. Otherwise, she might also be in need of sexual pleasure: that’s it! It all ends there. The man is not responsible (...) and the woman says ‘it’s you, it’s with you [the baby]’, but he’s not ready for marriage, he doesn’t care...They could make the same mistake the following day, it’s just irresponsible people(...) Noooo....they’re not victims at all. I’ll be sincere with you: I have many *bonnes* [maids] – at least one or two – who come here to my house, because I have six kids, my family, my mother-in-law who lives with us...*You should see the world of maids*, how it is! I see through the world of maids, from the countryside...We’re talking about the awareness of what you do...right? It’s a matter of education and these girls didn’t get none. They aren’t aware of the ‘big needs’ of life and human beings, they have *one* dream: having an affair with somebody who will solve...Who will provide to their material needs and take them out of this world [of poverty etc]. So, they dream! And then they fall into reality...Which is something else. And I say them ‘Wait, you have known the other one [man]...He has *let you down*, you went with the other one, he let you go: Why do you carry on like this? Those girls seek [for relationships] with *any* sort of means! That’s why that sexual behaviour is not serious, *since the beginning*. They are meant to manage an instant sexual desire, so they don’t take over responsibility. *At least* those girls should take the pill! Or do injections. I suggest they do that” (doctor and activist, autumn 2012).

In this view, romance voiced in terms of alleged promises of marriage, trust, commitment would just be a strategy to dissimulate the underlying sexual lust and/or search of immediate material stability, devoid of any wider framework of – what she casts as – “responsibility”, on *both* the female and the male side. Whereas, the script of failed ‘marriage promises’ – is nowadays widely fostered by girls turning to local organisations for help and is appropriated by the organisations themselves to gain larger social recognition.

Notably, Zineb – who had mostly worked as a maid since she arrived in Casablanca – claims that she had a one year relation with her boyfriend when she got pregnant and stresses that her partner had previously expressed the intention to

marry her, as he had even been introduced to her family. The couple – allegedly – had a *khotba* – and engagement – which is a legitimate union before their families. This relation was simultaneously inscribed and given meaning by Zineb in the framework of romantic love before *l-mushkil* – the trouble – occurred. Trust and romance in Zineb’s narrative are at the core of her representation of her relationship with her boyfriend, including pre-marital sexuality. The register she draws upon – unlike other girls – is not that of violence and abuse, rather that of romance with a reference to marriage, as the ideal framework where sexuality has to be placed according to social norms, but also in her imagery and according to the values she cherishes. Whether marriage was actually envisaged or not, Zineb acknowledges that the relationship included sexual intercourse, but she minimised her involvement and said she admitted it exclusively in virtue of the marriage plan she claimed to have with her partner.

Their relationship ended as he wanted her to have an abortion and provided her with the money to do it: since she discovered her pregnancy early it would have been possible – that is, the doctor might not have refused – but Zineb instead put an end to their relationship and to their *khotba* and gave birth to her son – being subsequently supported by two local organisations in a row¹⁸⁵. In her reconstruction of these events, Zineb stresses that although her partner had promised to marry her and – only in that case – to eventually have children, if she just had that abortion, she refused. In representing and in seeking to make meaning of her story, Zineb puts emphasis on tensions between multiple frames of reference, among which –

¹⁸⁵ Zineb’s trajectory is also relevant in relation to the experiences of the young women discussed in the previous paragraphs: she actually had come to Casablanca a few years earlier and moved into her aunt’s household, then she started working as a housemaid. When she discovered her pregnancy, she had to leave her aunt’s home and was subsequently admitted to a charity’s support-project. However, Zineb was still partially helped by her aunt, who also took care of Zineb’s child when she was busy and the NGOs’ crèche was not available. After a while, Zineb’s aunt stopped supporting her financially and their relationship became strained, hence she paid a neighbour to look after her child when no alternatives were available. After leaving the charity’s programme, Zineb went on to work ‘full-time’ as a housemaid.

her understanding of – Islam¹⁸⁶ and not merely social, kinship ties and the notion of *hshuma*. Indeed, she explains that one of the reasons for not having that abortion is that she did not want to “make *further* mistakes”¹⁸⁷ by putting an end to (what she conceived as) the life of “the baby” she was carrying. Zineb also makes clear that as soon as she was aware of her pregnancy – that is, from the beginning – she also knew that she wanted to give birth even if she was poor and she soon found out she would have had no support from her partner either. Both pathways embedded a form of stigma, although one – having an abortion and not necessarily getting married afterwards – would have remained socially invisible, while the other feasible option – giving birth – would have had immediate consequences, for instance in terms of radical changes in the relations with her family and her work. Hence, she opted for out-of-wedlock pregnancy rather than having an abortion, or at least this was the way in which she gave shape to her story and to the events which brought to her daughter’s birth.

Moralities in relation to out-of-wedlock pregnancies are shaped by other girls with different backgrounds and biographies in pretty diverse ways. Particularly, other girls acknowledge and claim relationships which do not have either references to marriage nor to childbearing plans; many state that they would have rather continued their lives and such “normal relationships” - *‘alaqat ‘adyat*. Yet, these often turned out to be fragile and unpredictable when the trouble of pregnancy occurred, making them forget any side of romance the relationship might have entailed. In the following case – Mouna’s¹⁸⁸ – romance is evoked when referring to a relationship previous to the one with the father of her son; Mouna even wishes her previous boyfriend was the “biological” father and thinks he would have been

¹⁸⁶ Issues regarding the understanding of procreation, including conception of the embryo, the ‘beginnings of life’ within the Islamic framework and in women’s own approaches to their fertility will be dealt with in Chapter 4.

¹⁸⁷ Loving her boyfriend and for this reason having pre-marital sex was then seen or presented as a mistake.

¹⁸⁸ I have already discussed some issues raised by Mouna in the first chapter, notably in relation to the reconfiguration of her life and of her new self after the birth of her daughter, an event that she had tried in vain to hide from her family and acquaintances (chapter 1, § 1.2).

supportive and loving. They had actually had a three-year relationship; he was a fellow student at the university with whom there were neither marriage nor childbearing plans. However, some misunderstandings lead to the end of their relationship and she got involved in a new one. When “the trouble” occurred, she searched for money to have a surgical abortion, but she did not manage to raise the whole sum by the deadline fixed by the doctor she had contacted¹⁸⁹.

Having no alternatives, she hid from her family and gave birth but – for this reason – the second relationship also ended and she did not even manage to talk to her last partner anymore. Mouna wishes that her child was born from the first relationship, conceived – or idealised – as a relationship of “authentic” love. She had actually been in touch on the phone with her first ex-boyfriend: he asked her if he was the father of her son, but she told him the truth. Mouna eventually got involved in other relationships once in *Casa*: some actually started with love and romance, but soon end up being short-term/“one night” ones, as she states. Mouna also adds that her wishes for support and commitment are soon deceived by every partner, all of whom – in her words – “take advantage” of her being an unwed mother. As such, Mouna deems that in Morocco it is impossible to conceive relationships in different terms and stresses – as many other girls do – the issue of “mentality” (*l-‘aqliya*), according to which families and society “do not accept” girls who have children outside marriage. Whatever their stories and their behaviour, Mouna has experienced that they are conceived as “prostitutes”, while – she claims – many of them were instead “in love” and trusted their partners, before becoming pregnant. Mouna – like some others – claims that if she had not been “in love”, or if she did not trust her boyfriend, she would not have agreed to have any sexual intercourse with him.

Thus, this kind of discourse about love as explanation, justification and as a context for sexuality are also consistent with the strategies by which legitimization is sought for and social recognition is acted upon by some unwed mothers. Whether love is at stake or just a tool to search for potential legitimization for sexual relations outside set norms, such representations bring about the issue of the choice of one’s partner and – sometimes – the question of romance as its central feature.

¹⁸⁹ In the meanwhile, she also had to travel to see her family for the end of Ramadan.

Furthermore, these dimensions are to be highlighted and rethought in relation to dominant discourses and representations promoted by several social actors – among which some of the organisations which support unwed mothers – refer to them either as victims of sexual abuse, as naive girls whose sexual relations are conceived of as mistakes or as the outcome of manipulation – which still fits into the framework of victimhood.

Despite receiving support from one of these organisations, but in contrast to such rhetoric, Bouchra is a twenty-four-year-old who claims to have had a free long-term, self-chosen relationship with the father of her daughter, with whom she had already lost contact before giving birth. She had always been aware that her partner would have eventually married somebody else anyway – a “virgin chosen by his family”, as she put it. Bouchra makes clear that sexual relationships, unlike becoming a mother, were her choice, without any form of coercion: she did not want to have that baby, but she did not manage to have an abortion – as she discovered her pregnancy too late. This kind of narrative contrasts, for instance, the rhetoric about unwed mothers’ maternity fostered by some of the above mentioned organisations, which – while “promoting their rights” – strongly shape moral discourses on single mothers and their children by focusing overwhelmingly on the management of out-of-wedlock birth, i.e. on fighting unwed mothers’ and their children’s marginality. Emphasis in this sense is put mainly on their innocence or – otherwise – on their ideals of (illusory) love; this view does not encompass, explicitly refuses to acknowledge or re-casts the existence of women’s agency in choosing to engage in intimate and sexual relations. In Bouchra’s story, no reference is made to romance in relation to marriage, nor to this as a goal of her relationship and – as such – as a legitimizing framework for her sexuality. The *marrakshiya* – as her friends at a charity ironically called her, although she was not exactly from Marrakech – stated very neatly that she was aware that romance would have *never* had marriage as its outcome, even if she and her partner “loved each other” at some point. Yet, the trouble of pregnancy interrupted any kind of loving relationship between them. Hence, in such cases what is understood and experienced as love is definitely subject to several conditions and constraints, among which the role played by some families in the choice of a spouse; the

occurrence of out-of-wedlock pregnancy – and birth – and the fact that girls might become the only ones who end up coping with their consequences.

3.2 Written destinies and scripts of violence

Since I mentioned the issue of violence and abuse, which is sometimes evoked as a framework to justify one's not being a virgin and the fact of having got pregnant outside marriage, even if no violence was actually inflicted, I want to cite one more example in which the disclosure of previously experienced violence significantly affected also a non-coercive relationship. Hiba was in a three-month relationship with a young man who worked in the same factory as her – in the outskirts of Casablanca – when she got pregnant. She had already told her mother that she wanted to get married to her boyfriend, who she trusted and to whom she had told that she had been sexually abused when she was younger – to give account for the fact that she was not a virgin. Hiba clearly inscribed this relation into a conjugal imagery, whereas her partner left her when he found out she was pregnant.

This might have happened even if she did not tell him the reason for her not being a virgin, but she told him because she trusted him and implicitly conceived their relationship as a step towards their marriage. If she did not love him, she would not have disclosed her secret to him. Therefore, in this case a previous experience of violence – or rather its disclosure – had far-reaching consequences even in the framework of a relation understood by Hiba through the lens of romance and of a self-chosen and desired relation. As highlighted by relevant research (Cheikh, Miller, 2010), previous violence does not preclude girls the experience of love, sexuality and pleasure in their own right (Undie, 2013 in Cornwall et al.). Nevertheless, in Hiba's case the initial romance soon turned into something different because of her status of non-virgin and – as such – implicitly less-desirable and suitable as a wife. Thus, even if Hiba was not a victim of sexual violence within this relationship, she ended up experiencing the unexpected outcomes of what she lived as romance, because of her embodied biography. Hiba's case was dealt with by the lawyer of a charity for unwed mothers – at least as long as she was among its beneficiaries. Nevertheless, the social and legal assistance that she received was not enough to convince the family of her son's

biological father to grant the child his name despite the fact the charity's social workers even travelled to the countryside to meet and try to persuade them.

In looking closely at the accounts of violence, further elements emerge as worth exploring: some relate to issues of structural forces – working and living conditions, migration – which produced the situations in which violence took place; some other narratives, instead, bring attention to the ambivalences they embed, in that they evoke the issues of choice, consent, will and their negotiations in female out-of-wedlock sexual relations. Some accounts of violence – provided by the girls when talking about the conditions in which they got pregnant – actually display some elements of ambiguity regarding the role played by the females and their kind of involvement. I argue that within the context of institutional assistance the type of narrative and account of male-female relations might also be instrumental to the sort of support sought at charities. Thus, young women's narratives on forms of sexual violence may be seen as attempts to comply to the moral framework of social acceptability and to the moral criteria set by their counterparts – charities and NGOs. The conditions in which sexual intercourse is – or is not – negotiated might not fit in clear-cut and externally generated categories of “choice”, “consent” or “coercion”. Drawing on aspects of coercion – rather than on their active involvement in the relations which brought them to pregnancy – may be seen or fostered as an appropriate – plausible – way to apply for the status of deserving beneficiary.

The possibility of being considered guilty or somehow responsible for being, for instance, sexually assaulted is not remote either. These aspects also account for some of the difficulties embedded in the attempts to report rape; nevertheless, further elements inform – or rather obstacle – legal procedures even when conditions allow undertaking them. Of course, such issues do not matter only for single women and mothers and stir debate across Moroccan society in relation to a broader call for reform of the Penal Code, of wider juridical reforms and in connection to issues such as corruption in the domain of justice¹⁹⁰. In Amina's case (2.1), for instance, I had been told that she had tried to report the man who abused

¹⁹⁰These issues have certainly been elicited by the “Amina Filali case”, although they had already been raised in the previous years.

her, but – according to the women of the family who raised her child – that man “knew somebody there... or had paid somebody in the tribunal [to hinder any legal procedure]“. Therefore, it is to be noted that a certain complicity between the man who assaulted and abused Amina and ‘somebody’ at the court was alleged, or rather hinted at by her (‘foster’) family. This episode – as well as others reported in some charities – illustrates how the legal system is also gendered (Khan, 2012) and indeed “actively fortifies dominant notions of morality and of patriarchal cultural norms” (ibidem : 85).

Whereas Alya, a twenty-six-year-old housemaid and former *petite bonne* working in a rich *bidawi* neighbourhood, started her story by telling me that despite everything her pregnancy was ‘written to her’, i.e. written by God in her destiny (“*Allah ketab ‘aliya*”):

“It was somebody in the street...then I went to the police. The father of Doha [her daughter]...*khayeb* [is very bad]. I don’t know him. I went to the police to report it. I went to the doctor and I have been tested, but I’m well. Before that problem happened to me I had a *monsieur* [a partner]...*dref* [he was nice]” (Alya, October 2011).

Alya disclosed to her partner that she had got pregnant and he told her that their relationship was over; when talking to me, she maintained that she had not had any sexual intercourse with him. However, she stressed she wanted to give birth, because she “wanted Doha”¹⁹¹, irrespective of the conditions in which she got pregnant. At the same time she admitted that she would have done “something at a doctor”, i.e. she would have had an abortion if she had discovered her pregnancy earlier. She actually found out after five months or even longer. Alya told her employers that she had been raped: they tried to help her through the brother of the lady she worked for, who was a lawyer. The same employers took her to a private clinic to have a blood test and sent her salary to her family also when she had stopped working – during the sixth and seventh months – so she managed to hide her pregnancy even when she had to go home to visit her sick mother – and who found out about Doha’s birth only afterwards.

¹⁹¹ Her daughter’s fictive name.

Both in Amina's and in Alya's case emphasis is put less on the degree of success of the legal procedures they undertake – if they could at all – and on the constraints they face, than on the practical arrangements they are confronted with regarding their families, employers and children. Coping with family and working duties – especially if they struggle to hide their children from their families – represents the major challenge for most girls, including those who have got pregnant as a result of sexual violence. Uncertainty and the urge to make all these needs fit into time and space constraints unfold in Chayma's narrative:

“I need to be at home¹⁹² when Ramadan starts. It is in about a month. If I don't give birth this month...*howa l-mushkil* [that's the problem]. There is nobody at home to prepare food for *ftor*¹⁹³...*l-hrira, l-khobs...kolchi* [soup, bread, everything]. Also my father's wife is old. My father wants me to be at home, *now*. He often rings my cousin here in Casablanca and asks about me, since I'm supposed to be at her place; my cousin tells him that my phone is broken and that I'm working for a family. Actually, my phone works but I had to leave it when I was admitted here¹⁹⁴, we are not allowed to use it, but only to receive calls at the office¹⁹⁵. If I don't go back home soon, my father will look for me here in Casa. My father is old and I know he would not understand that what happened to me *was not* my fault. If he knew I am pregnant he would kill me [*ydebhoni* – she repeated by emphasizing it with a gesture on her throat]. He took me to Casa when I told him that I had to undergo knee surgery... ‘alright’, he told me. So, he took me to my aunt's. When he left, I told my cousin about my problem, but not my aunt – if she knew, everybody would. I'm staying

¹⁹² In south-eastern Morocco.

¹⁹³ The meal which interrupts the fast during the month of Ramadan. It also means ‘breakfast’.

¹⁹⁴ We were at the charity she was living at.

¹⁹⁵ Or, if possible, they can ask for money and go to a nearby *téléboutique* – a phone centre.

here at the *jama'iyya* [charity]¹⁹⁶ until I give birth – I cannot go back home earlier. Even after the birth I cannot take the baby with me and I don't know who could look after he/she while I'm away. Actually, I still wonder if I am having twins¹⁹⁷. I'm not sure about that... I can't pay for *l-tahlil...l-talfesa* [tests, ultrasound scans] and all that stuff.” (Chayma, June 2011).

Chayma started telling her story by saying: “*l-mashakil...ana hmelt thmma* [the troubles...I got pregnant over there]. Her problem had happened to her – i.e. she had got pregnant – after she had been assaulted by two men in another region, where she had moved to work on a farm. Chayma told me that while she was going home one night after work she was taken by two drunk men who beat and raped her. She subsequently fled back to her home town, where – about four months later – she found out she was pregnant; she felt lost and even thought of committing suicide. Afterwards, since she was still in her home town, she turned to a private clinic to have an abortion, but she was told it was too late and the foetus was too big; she was asked a huge amount of money to have the abortion at that stage, but she could not afford it. She then turned to an acquaintance, a woman who had worked in Casablanca, who ultimately told her about the charities she could find there – as another potential solution. However, she remained at her father's home three months longer – during which she had been wearing a *semta*, a tight belt, which helped hide her belly.

Chayma told me that she was widowed¹⁹⁸: she had got married ten years earlier – when she was seventeen – because she could not stand living with her father and

¹⁹⁶ She had arrived at the charity where we met only a week earlier.

¹⁹⁷ I was subsequently told by Nawal – who had met Chayma at another charity – that she had actually given birth to two babies [“a black one and a white one” – Nawal told me].

¹⁹⁸ Actually, I was subsequently told by Nawal – who met Chayma at a charity's shelter – that she was divorced, while I knew she was widowed. As with all my informants, I cannot verify these details, nor is it within the scope of my research. I cannot say if Nawal's information was correct, if mine was or if Nawal confused Chayma with somebody else. However, it would not really matter in the overall economy of Chayma's story, nor to the fact that she asked me to listen to her.

his wife¹⁹⁹, who mistreated her; while she was pregnant with her daughter her husband died, so she went back to her father's house for two years. When she moved to look for work – further south – she had no choice but to leave her daughter with her sister-in-law. Chayma emphasized that she has always worked to support her daughter, especially her studies – “*darori l-qaraya dyalha* [her education is important]”; if she had enough money, she would keep the baby with her and also take her older daughter to Casablanca. Hence, at this stage, it still looked uncertain if she would have actually left the baby – or the babies – at an orphanage, for instance, or if she would have managed to raise them herself somehow. I was subsequently told by another girl – Nawal – that she had given birth to twins and had remained for a while at a shelter for homeless women and children; afterwards, she probably rented a room somewhere in Casablanca.

While legal tools do not play any role in shaping Chayma's trajectory, they did in Fadwa's: she was still pregnant when we met and told me the biological father of her baby was in jail as she had reported the sexual violence he had committed on her to the police. Fadwa told me she had met this man less than a year earlier, they became “friends” – *msahbin*²⁰⁰ – and started hanging out together, going for walks and to cafés, for example. They had never been to each others' homes and one day he told her he intended to marry her: “*ana bghit ntzewej bik*” [I want to marry you]. Fadwa carried on: “Then he told me ‘come to my house to meet my family’. *Walakin kan yekdab'aliya!* [but he lied to me]”, i.e. it was not his parents' home. Fadwa said that it was in that house that the violence – “*le viol*”²⁰¹ – took place: “*Hya l-dar fin weqa'liya l-mushkil* [It is in that house that I got into the trouble]”. Fadwa told me she intended to report everything to the police, but she was still seventeen – “*ana kent qaser*” [I was minor]; when we met she was eighteen and in the meanwhile she had actually been to the police.

When asked by the police, the men acknowledged his paternity and said he would marry Fadwa, who told me she did not want to marry him, instead. She just wanted the papers for the child, but did not want to get married since that man was

¹⁹⁹ Chayma's mother had passed away.

²⁰⁰ This term is used to indicate informal dating and romance with boyfriends/girlfriends.

²⁰¹ She mixed some French words into her talk in Moroccan dialect.

in jail. Fadwa explained: “He wanted the baby, it’s his own baby. That’s it, he told me, ‘leave it’...²⁰²”, whereas she would have rather interrupted her pregnancy, because she claimed she was too young and actually repeated several times – “*ana baqa saghera!* [I’m still – too – young]”. If he had let her, Fadwa would have interrupted her pregnancy; it would have been possible – provided she had enough money – since she found out in the first weeks: “It was still small, but he did not want”. As Fadwa managed to gain the man’s trust so that he allowed her to go out of that house – where he had allegedly locked her – she called her parents and never left their home until – two months later – she went to the police to report her case. At the time of our first meeting, Fadwa told me the baby would stay with her, but that her parents did not want her to remain at their home with him, nor to get married to his father. Fadwa, thus, found herself in an *impasse*: “There isn’t a solution yet, but what matters is that I cannot leave the baby, or maybe...later²⁰³”. The solution came the following week, when I last met her while she was about to leave the charity to reach her family: I was told that she would marry and then divorce the biological father – who was still in jail. Social workers claimed it was better for Fadwa to leave Casablanca and the charity, since her family already knew about her situation – i.e. she did not need to hide from them anymore; moreover, going back to her hometown meant that her case could be dealt with by the relevant court.

In the previous paragraphs I have explored some imageries of love and the mobilisation of this contested notion by young Moroccan women having given birth out-of-wedlock. I have also brought attention to the ways in which the non-governmental domain also contributes to informing concepts of love and romance – or their absence – in relation to the biographies of unwed mothers, whereby within this domain understandings or ‘misunderstandings’ concerning love within

²⁰² “*Howa bgha l-bebe, wuldu. Safi, galliya khallih...*”.

²⁰³ It was still not clear if she would leave the baby (at an orphanage, for instance) or if her family would accept both of them at home.

young unmarried couples²⁰⁴ are sometimes identified as the founding events of out-of-wedlock sexuality, pregnancies and unwed motherhood. I argue that the current²⁰⁵ recourse to the imagery of romantic love both by the beneficiaries and by the professionals of the nongovernmental domain mutually influence each other and are to be contextualised within the strategies aimed at granting some forms of social acceptability and legitimacy to out-of-wedlock motherhood, by challenging well-rooted ideals of deviant female out-of-wedlock and undisciplined sexuality and by re-inscribing it in a framework of virtue, as – after all – romance is voiced in the form of so-called marriage promises, whether they are real or not.

What seems to me noteworthy in this process is that this use of romantic imagery is problematic if we are to look at young women's active engagement in sexual relations, which – notably in Bouchra's case (§ 3. 1) – is not expressed through the repertoire of romantic love, nor with that of marriage: young women like Bouchra actually make explicit that they actively engage in sexual relations without any reference to conjugality nor to maternity and claim therefore not only their consent, but rather their desire. Such claims resonate with those nuanced by other young women, who openly located their experiences and their sexuality within the realm of choice – even when they regretted some of its outcomes – and challenged therefore rhetoric and practices based on any kind of victimisation, whether it speaks the language of romance – i.e. reference to “marriage promises” – or that of sexual abuse and violence. Nevertheless, despite charities' stress that only a minority of their beneficiaries have actually been victims of rape or incest²⁰⁶,

²⁰⁴ In the case of women or couples benefiting from social or legal assistance from local charities this deals mostly with individuals of lower social strata, but not necessarily only them.

²⁰⁵ Such imagery was not drawn upon some twenty-five years ago at the onset of the activities of local charities for single women with children. Whereas the imagery of abandonment, exploitation and violence in relation to the beneficiaries' biographies was the dominant one. These different imageries – one linked to the failure of alleged romance and marriage and the other stemming from violence and abusive relationships – currently coexist and are nuanced also according to the different types of NGOs and charities involved.

²⁰⁶ However, I was pretty impressed by the following episode: a documentary based on the life of a young housemaid in a low-income neighbourhood of Casablanca had been realised by a French-Moroccan director, The documentary included also interviews with unwed

imageries of romantic love, trust and naivety are sometimes indicated as the conditions for coercive sexual intercourse to take place, as highlighted – for instance – by the story of Fadwa . Above all, this process hints that a different sort of representation of unwed mothers as victims – “of love” and “marriage promises” – is put into being and that other structural conditions potentially engendering or exposing women to multiple forms of violence may be dismissed instead – I think of multi-layered inequalities, poverty, labour mobility, precariousness, such as in Chayma’s case.

Although the cases I have drawn upon in this chapter and in this particular section cannot give an account of the depth nor of the diversity of the whole of my research subjects in what imageries, mobilisations and contestation of romantic love are concerned, through the cases discussed²⁰⁷, I particularly wished to give voice to the ways in which these young women nuance their engagement in relations with male partners. Although my research was not initially – nor explicitly – aimed at investigating issues of sexual violence, nor did it question imageries of love and their place in young women and mothers’ lives, I dealt with these issues because they emerged from the field itself. They were actually raised – notably in the non-governmental arena – as notions to be critically deconstructed and problematised. Indeed, through the heterogeneous narratives of my informants I aimed to stress that female “out-of-wedlock” sexuality can and must be understood beyond the framework of violence, victimhood, deviance or mere naivety, which still evokes passivity. Even when these women have actually been

mothers recruited through the NGO network and the director intended to distribute it both in France and in Morocco. He had been invited at a conference organised by NGOs for unwed mothers, with some managers of a Moroccan TV channel. I was there and attended the screening, recognising all of the participants – who were also there. The interviews included a detailed tale of violence by one of the beneficiaries, whom – despite her reluctance – was exhorted by the voice of a social worker to tell that story before the video camera, without hiding her face. Other beneficiaries commented that all the interviews may have been a ‘risk’ for those girls, because the documentary may have been broadcast on TV. Some added it was even more serious for the girl who gave that (forced) interview, because she was recognisable and because she was “from the East” (the eastern part of the country), hinting at her family’s “mentality”: the circulation of this video in their opinion might have further worsened the ostracism that she was already experiencing by her family. I also found this ‘sensationalistic’ approach definitely questionable.

²⁰⁷ As well as through the ones discussed in the whole work.

the victims of somebody or something – a set of constraining conditions – it is worth noting the coping and resistance strategies they enact, not least that of re-fashioning and re-inventing their biographies and their trajectories in the encounter with charities' employees.

3.3 Counternarratives and double registers

As I have emphasized in the second chapter, my fieldwork has included the implication of male research subjects only to a little extent: investigating unwed motherhood throughout charities and the public health sector meant interacting predominantly with women and social workers or health professionals. Although not necessarily challenging, the attempts of dealing with male informants in other non-institutional contexts have been limited especially for contingency reasons and time constraints. However, I now aim to rethink the representations of men and masculinities that emerged from my female research subjects, by looking instead at a young man's experience, which he accepted to share with me. This encounter definitely provided me with significant and different insights into the domain of out-of-wedlock births in Moroccan society, as well as on the manifold stakes embedded in heterosexual relations as experienced by urban youths. Other relevant perspectives on these themes have stemmed from other encounters with male informants in diverse settings, although they were not all involved in the issue of 'out-of-wedlock paternity' to the same degree.

Younes was a salaried worker in his late twenties, who came from a *sha'bi* neighbourhood and worked in one of Casa's commercial districts. I had his contact through a common male acquaintance, who had anticipated to me some details of his story. After some phone calls to arrange a date and time to suit both of us, we meet on a Saturday afternoon. We sat at a table inside a semi-empty café at the edge of a wealthy *bidawi* area which is separated from its *sha'bi* neighbouring district by two lanes, whereas the close-by shantytown – *karyan* – is barely hidden by the villa's enclosures and gardens. Wearing a white shirt and an eye-catching watch, Younes started talking about himself, after that I briefly introduced myself over a cup of coffee.

“We loved each other, we had been together for five years when she got pregnant; we had no money to pay for an abortion and she tried with other methods in the meanwhile... well, nothing worked. My son is three now. We ended up marrying at the ‘*adul*’ two days before she gave birth, but we have since divorced due to misunderstandings and fights between us and with her family. We met again after the divorce and she got pregnant for the second time, although we managed to solve the problem in time, because we had money enough. My wife was of a lower social class than me, that was part of the problem. When we divorced, I faced the risk of going to jail because the judge saw that my wife was pregnant when we got legally married. I didn’t, but I haven’t seen my son since Ramadan, it’s been three months, you see! Her family doesn’t want me to see my child. I’m waiting for the judge to do something. For example, if she re-marries, I am more likely to be given custody of the child.” (Younes, November 2012).

Younes’ story is highly insightful if contrasted to those of most females, who often complained about being abandoned by neglectful boyfriends, and is all the more significant in that here it is the male partner who has – according to Younes – risked a penal sanction for having formally transgressed article 490 of the Penal Code which sanctions illicit sexual intercourse. Although the couple got married to provide the birth with a legitimate framework, the lapse of time between marriage and the birth of their son became evident at the time of divorce: he did not specify how it happened, but Younes did not incur in penal sanctions in the end. Younes’ may be read as a counter-narrative if we think of the style and the sort of accounts provided by most young women I have met. To begin with, although he might have emphasized his commitment to the mother of his son and to his son, he stressed that this also implied a considerable and probably unexpected risk for him, whereas he was deeply frustrated by his current inability to see his child. This aspect – Younes’ intention to see and take care of his son – clearly contrasts the imagery of abandonment and the neglect of paternity portrayed and experienced by most young women I have met.

Moreover, Younes made explicit that his long-term relationship was based on romantic love until his partner got pregnant and bluntly stated that class and educational differences constituted some of the main obstacles to their marriage, including the strained relationship with the family of his spouse, due to issues that he ascribed to “mentality” combined with socio-economic factors; he also pointed out that he could not accept some of his wife’s behaviours, notably that she applied for jobs requiring night shifts. Hence, in this sense, I argue that Younes further reinforces some female accounts of romance, love and ‘free’ sexuality in young couples, according to which out-of-wedlock relations – implying love and romance – follow different standards than those aimed at conjugality and a gendered – both conventional and legal – double standard (Sadeghi, 2010 : 280) when it deals with the social acceptability of pre-marital sexual activity (Schaefer Davis, 1993).

Karima, an urban graduate told me of a case similar to Younes’, which involved a couple of friends of hers. Both were young middle-class graduates and embodied in her eyes “the perfect couple, passionately in love and committed to each other for almost three years”; they already lived together in *concubinage*, when unexpected pregnancy changed their lives and – allegedly – the male partner’s behaviour, who decided to interrupt the relationship with his girlfriend, who had a surgical abortion. In this case Karima did not explain if, in her view, her friends’ romance was implicitly meant to be circumscribed to their pre-marital life or if – in the case no pregnancy occurred – they might have turned their romance into a conjugal union. However, Karima was profoundly disappointed by the ways her friend’s relationship unfolded and suggested that their “ability (...) to engage freely but unequally in premarital affairs” (Sadeghi, 2010 : 287) mirrored nothing but conventional gender relations marked by inequality, concerning particularly sexual relationships.

Among the women encountered within NGOs, Bouchra²⁰⁸ – also a graduate from an urban context – was the one who best stated her keen awareness that her boyfriend would have sought somebody else – possibly a virgin – to marry. Bouchra’s and other informants’ views – irrespective of their education – hint that different ideals of femininity and of female sexuality are ascribed to pre-marital

²⁰⁸ This chapter, §3.1.

and to marital life, whereby the length of an out-of-wedlock relationship – at least in the cases examined – might not actually grant that it will turn into a (successful) marriage, as it was the case for Younes and the mother of his son. Despite stating that “virginity is first of all in one’s head”, Younes acknowledges that he was also upset when his ex-wife told him about her past affairs and says that value is placed on virginity by girls in the first place “because they think of marriage” and know that for many men it actually matters²⁰⁹. Therefore, Younes seems suggesting that attitudes privileging men’s sexual agency are shared and upheld both by men and by women, across generational lines (Sadeghi, 2010).

During my fieldwork across Casa-based charities and shelters for unwed mothers and the time also spent in offices with their employees I – sometimes randomly – had the chance to get some insights into male perspectives on issues related to unwed motherhood and out-of-wedlock births. Notably, two men met in the office of one of the shelters presented a case which is relevant to the issue of virginity and to its class dimensions, that have already been evoked by Younes and that I will further illustrate through other female informants. When the two men got to know that I was a foreigner and a researcher, one of them insisted to speak French and, besides illustrating the reason why they turned to the charity, he added further ‘contextualising’ details to give me a broader picture of the issue. The man, in his forties, stressed for instance that “in Morocco” whenever men notice scars on their women’s wombs, they immediately wonder if it deals with an abortion²¹⁰ or with a c-section, given that – as added by a social worker afterwards – “parents take their daughters to have c-sections instead of normal births, to preserve their virginity [in case they are virgins]”.

²⁰⁹ Younes also mentioned a product aimed at inducing bleeding “for the wedding night”; it is allegedly sold in Chinese stores also in Casablanca. However, he stressed that such methods – being quite cheap – would grant anybody a “fake virginity”.

²¹⁰ One of the shelter’s social workers subsequently commented on the case presented by the two men and underscored that the nineteen-year-old girl in question – the sister of one of the two visitors – had sought to have an abortion at the third month and hinted “she really wanted to kill the baby”, while some gynaecologists are renown for expensive surgeries aimed at interrupting pregnancy, including the so-called “*mini-césariennes*” – “mini C-sections”.

The male visitor was keen on estimating the percentage of men displaying this kind of “mentality” and claimed it was “up to 70% of the male population”; then, he listed the alleged reasons for it – “society, mentality, Islam, behaviour...?” – and bluntly stated that the lack of sexual education was “the true” issue in his home country, where silence on sexuality implies in his opinion that youths are merely prescribed or interdicted their behaviours, but are not told why. In the meanwhile, it was his younger friend who remained silent and visibly worried: the reason why the two men were in a shelter for unwed mothers was actually his nineteen-year-old sister, who had just given birth; she was a student and the biological father worked for an important insurance company. The social workers hinted that his position – and potential financial and social influence – might be a reason why the girl’s family did not want to undertake any legal procedures against him. The immediate priority for the girl’s family was actually to have her home alone – without the newborn – for the upcoming *Eid l-kebir*²¹¹.

The silence of the brother of the newly delivered unwed mother was broken by his being questioned by the social worker about his point of view on youth’s out-of-wedlock sexuality and particularly about its gendered features, i.e. he was asked if he would have been that upset if it dealt with his brother instead of his sister. The man kept repeating (in *darija*) that until a male has not reached a position or has not got a job he should not get married and have children, hence he was elusive about the stake of his visit to the shelter: the social worker also insisted that in Morocco children are born out-of-wedlock anyway and that his view implied that young males were socially legitimated to enjoy pre-marital sexuality, irrespective of their financial security and their position, whereas young females were not; she concluded that that was the reason why he did not accept his sister’s pregnancy. The conversation certainly did not enhance the younger man’s mood and the two soon went away without any immediate solution to their problem, while the social

²¹¹ The men turned to this shelter to know whether the baby could be left there at least for a few days in order to allow the girl to go back home for Eid; the personnel of the shelter said that the girl and her family wanted to “get rid” of the baby anyway. Yet, they could not help them because legal procedures needed to be followed and the immediate solutions were just registering the baby at the civil registrar and giving it into temporary custody to a local “*morabbiya*” – a female child caregiver – and only afterwards – provided the mother still intended to give the baby up for adoption – could all legal procedures be undertaken.

workers remarked the gendered ‘double-standard’ concerning sexuality, that the two men – especially the youngest – had in their opinion further confirmed. An interesting perspective in this regard was voiced by a doctor (and activist)²¹²:

”Virginity is important, but keeping one’s hymen intact...it has to be authentic. That’s also a business [hymenoplasty]. Is an intact hymen a proof of honesty? No. It’s still a matter of judgement. Men judge women the day of marriage (...) An authentic virginity is well, but is it the only sign of dignity? When two persons decide to get married, they have to accept what happened before: what happened before, it doesn’t matter. So, virginity it’s a fake problem in our society. (...) In our religion there is the right of making mistakes and there are ways of purifying oneself from mistakes, so the relation is with Allah, it’s not with human beings. (...) If the couple agrees that what happened before doesn’t affect the marriage, there won’t be any problems.(...) If you love somebody you love with his/her defects (...) Unfortunately in our society we have the mix between religion and local traditions and underdevelopment” (doctor and activist of a ‘right-to-life’ Islamic organisation, autumn 2012).

For this woman, ‘protection through marriage’ – as provided by Islam – and ‘responsible freedom’ were the key to improve gender relations and women’s role in society. Despite her disapproval of pre-marital sex for both males and females, she contended that ‘erroneous’ interpretation of Islam and conditions of “underdevelopment” sustain the persistence of differential social acceptability of female and male extra-marital sexuality.

I had previously discussed the issue of male perspectives on virginity and the hymen’s surgical reconstruction with a young female urban graduate, whom I will call Marwa: she was actually disappointed by the fact that educated males place considerable value on virginity and remembered the case of a friend of hers, whose

²¹² Mentioned also earlier in this chapter and further on, in Chapter Four.

fiancé was well-educated and had a position in a big company, *but* – she deemed it contradictory – he asked for his future wife’s medical certificate of virginity before marriage. Marwa affirmed this did not mean her friend’s fiancé was against out-of-wedlock affairs and sexuality, but when it came to his marriage, he preferred a “*bent darhum*”, a virtuous girl: “I really cannot understand how an educated guy can ask for virginity!” (Marwa, November 2011) and hinted that – despite different cases which suggested changes of attitudes towards female virginity – this kind of “deeply ambivalent” approach (Schaefer Davis, 1993: 218)²¹³ was widespread²¹⁴. Hence, Marwa made explicit that while virginity is perceived as the embodied proof of women’s modesty, the concern for its preservation might be decreasing and its loss may be seen as “not irretrievable” (Sadeghi, 2010), given the relative availability and affordability of hymenoplasty. These practices aptly exemplify a process of “domestication of sexual affairs” (Sadeghi, 2010: 281), in which “intimate relationships are nonetheless power relationships” (ibidem : 281). Interestingly, her following statements on virginity resonate with Younes’ as she underlines that:

“It’s girls who decide to undergo the reconstruction of their virginity, even before having any marriage proposals or projects...it’s a kind of prevention, a girl will feel more confident...it reassures her. Many girls say it is better to lie when there is a marriage plan, otherwise she’s not going to get married

²¹³ See also Schaefer Davis and Davis (1989).

²¹⁴ Marwa pointed out that some males do not accept to marry their girlfriends because they assume that they might have had previous affairs; hence, males take for granted that females could have more of them in future, i.e. they could cheat them within marriage as well. According to this view – Marwa stressed – girls who have had premarital sexual intercourse and then pretend to be virgins at marriage, have to further give proof of their modesty by avoiding to show interest and enjoyment in sexual activity, not to increase “their husband’s suspicion” (Jansen, 1987 : 175).

(...) Anyway, if men didn't have this mentality, women wouldn't do it!" (Marwa, November 2011)²¹⁵.

While putting blame on males, Marwa still seems to suggest, on the one hand, at "women's conspiracy" (Jansen, 1987: 135) and, on the other, a certain complicity of males and females in upholding the gendered 'double-standard' concerning virginity and out-of-wedlock sexuality, according to which "women themselves (...) actively reproduce the patterns of female purity" (Ortner, 1996:57). These issues also concern to a certain extent my main research subjects, for whom hymenoplasty was certainly not the top of life's priorities, for they mostly struggled with everyday material constraints; still, at the core of their becoming unwed mothers – *ummhat l-'asibat* [literally 'virgin mothers'] – also lie their embodied biographies, which include (only) a few cases of pregnancies occurring while the girls were still virgins, as sexual practices were still aimed to preserve the hymen. I chose to discuss and to intertwine Younes' and Marwa's insights and claims in so far as – starting from conflicting viewpoints – they interestingly came to agree on some key issues and ultimately demystified a mere opposition between gendered patterns of socially acceptable or unacceptable sexualities.

However, when touching particularly upon the issue of out-of-wedlock sexuality and births and when I mentioned the charities who deal with unwed mothers, Younes stressed that – despite the fact many of them are actually abandoned once pregnant – they are not to be looked at solely as victims – whether of violence, marriage promises or manipulations – because in his opinion the time when unaware girls were given drugs to be sexually abused is remote, given that most girls "nowadays" actively choose to engage in sexual relations with their partners. Despite my own initial naivety in dealing with the girls' narrative strategies – especially within the enclosed space of charities and shelters – I was nevertheless cautious when the girls' narratives involved their unaware intake of drugs, purportedly given to them by male friends for the aim of sexual abuse. Although similar plots have rarely been told to me by the girls themselves, they are still

²¹⁵ However, Marwa also strongly emphasized the underlying features of dating and marriage patterns: "Ok, I must say after all that we are at the first stage of change... there are marriages between young people who live a love story" (Marwa, November 2011).

worth noting, for this register inscribes their sexuality in the domain of passivity or rather places it outside the domain of their subjective will and involvement – even if sexual intercourse might have implied their consent as well. It might be questioned, conversely, if such discourses and embodied strategies of ‘silencing’ one’s sexual agency and desire are a response or a way to resist representations of female sexuality as undisciplined and dangerous; as “oversexed [and] devoted to sensuality” (Boddy, 1989 : 53). In discussing male approaches to family planning and in questioning gender within sexual relations, Asdar-Ali (2002) argues that the value placed on both female and male sexual enjoyment should not overlook the fact that women are simultaneously “essentialized chaotic figure[s] who represent[s] disorder or *fitna*” (ibidem: 131) whereby, according to the author, men’s effort to live up to their “overpowering sexuality” (ibidem) would be partially motivated by the fear of their spouses infidelity. This description of female sexuality as undisciplined and dangerous, as a “seriously destabilizing element (*fitna*)” (Bargach, 2006 : 53) that the condition of prolonged celibacy may contribute to accentuate (ibidem)..

To this regard, Boddy (1989) describes the “love sickness (*marad al-hubb*)” (ibidem : 167) as an inaccurate label to indicate a form of distress suffered by virgin women in northern Sudan; Boddy argues it referred rather to the desire for sexual intercourse as the cause of distress, that needed to “cured” by marriage (ibidem). However, the ascription of a loose sexuality is all the more relevant for young women having given birth outside wedlock and for divorced women: as argued by Jansen (1987) illicit sexual relations in which divorcées engage in may be criticised as a conduct, but at the same time it may be tolerated since “women whose sexual passions have been awoken in marriage [are not expected] to keep themselves in check when there is no longer a man to control them” (Jansen, 1987 : 167)²¹⁶. Thus, female sexuality – if not domesticated within a conjugal union –

²¹⁶ This aspect was actually complained about by some female friends of mine, who – in their early thirties and divorced – struggled to negotiate the terms of sexual intercourse with the men they dated. Due to previous failed marriages or relationships, they strived to build solid relationships based on mutual trust, that in their eyes could be achieved by avoiding to engage in premarital sex. Yet, their status of divorced women was precisely described as the main obstacle to the fulfilment of this ideal of couple, respect, respectability and morality.

embodies a social threat and, triggers “sexual suspicion” (Jansen, 1987:167), and as Kapchan argued in relation to *shikhat*, “proves that women who are not controlled turn to temptation and sedition – to *fitna*” (Kapchan, 1996 : 196), whereby the enactment of their economic and sexual autonomy is socially shaped as stigma (ibidem)²¹⁷.

The fact that unregulated or ‘loose’ sexuality is feared and that *zina* is seen as destructive has, however, differentiated and gendered implications, in so far as family and social expectations towards male and female celibacy vary (Bargach, 2006) and – if so – engender forms of control addressed particularly to females. The perspective of potentially disruptive female sexuality resonates with Mernissi’s (Mernissi, 1987): basing her insights into Imam Ghazali’s classical work, that she calls an “implicit theory of female sexuality” (ibidem: 32), she suggests that the latter is conceived of as aggressive towards males. In this view, female power is defined as “a destructive element in the Muslim social order” (ibidem: 33). A similar view of desire is voiced by a female herbalist – *ashshaba* – described by Kapchan, as the “limitlessness of appetite (...) that threatens stability [and that makes] the unmarried daughter come home pregnant, winding up a *shikha*, a performer with loose morals” (Kapchan, 1996 : 107). This construction rests on the differential ascription of *‘aql* – reason, rationality, control, intellect, wisdom – and *nafs* – including lust, emotions, desires – to men and women: the predominance of *nafs* attributed to the females would partially account for their potentially undisciplined and socially dangerous sexuality.

Rosen (1984) has shed light on the idiom of *‘aql* and *nafs* as a way to account for the *natural* differences between the sexes (ibidem: 37) in terms of rationality and sexual ‘drives’: *‘aql* can be drawn upon exactly to control *nafs*, although women in this view would not be capable of developing rationality as men do, Dwyer (1978) elaborates on the same concepts and describes *nafs* as “flesh-centred desires and tensions” (ibidem: 152), that is recognised and referred to also by women, yet in regard both to women and men. Modesty – as well as patience (*sber*) – says Dwyer, are therefore the female dispositions able to counter-act ‘disruptive

²¹⁷ This is seen by the author as a contradiction, in so far as *shikhat* are victimised for representing – or I would say, embody – a form of freedom they cannot fully enjoy, because they perform a set of codified roles and behaviours (Kapchan, 1996:196).

desires'. What is more relevant to my reflection on 'awareness' and 'intention', is Dwyer's stress on female limited tolerance towards women who assert they have been seduced by men: "for women ignorance and innocence provide no viable excuses for girls and women who submit to premarital and extramarital sex" (ibidem: 154). Interestingly – in relation to patience – in the *Dialogics of Fitna* in *The Impasse of the Angels* (Pandolfo, 1997) we are confronted to a more complex elaboration according to which "woman by her nature knows how to contain passion. Her patience is only the simulated expression of her incontinence and her impatience. She is always strategically playing on two registers: if she is continent it is because she is incontinent, if she is passionate, she is also simulating passion. Woman is rhetoric (...) but man is unable to see this, and in the space of her waiting he is blinded, seduced, and set adrift. He is *maftun*: drawn into the state of *fitna*" (ibidem: 97).

§ 4 'Lost selves' and the transactions of intimacy

4.1 Crossing thresholds...

Following Abu-Lughod (2001b), the presumption that a thing such as 'Muslim sexuality' exists is certainly to be questioned; in her words "both the meaning of Islam and of the constructions of sexuality must be understood in their specific historical and local contexts" (Abu-Lughod, 2001b: 198). Indeed, her reflection on shifting constructions of sexuality and gender relations made me reflect on how "the understanding of sexuality as something public and focused on crossing thresholds, opening passages, and moving in and out" (ibidem: 200) is called into question by the experiences of my informants who have actually moved in and out of several thresholds – including those of their parental house – manifold times, whereby the fabrication of their being female has not taken place 'once and for all', but has rather undergone a multiplicity of passages, transformations and negotiations.

Hence, besides the significance of local understandings of love and romance, the ethnographic examples I have made also hint that class also matters in shaping forms of intimacy and its everyday negotiations in the lives of unwed girls and –

sometimes – mothers in contemporary (urban) Morocco. The girls’ socio-economic status – sometimes irrespective of their education and literacy – may contribute to moulding gender relations and bonds understood through the lens of love. Indeed, as I have sought to highlight above and in the first chapter, many of my informants actually leave rural regions of Morocco to move to Casablanca or to other urban centres in search for wage labour (Hiba) or to be employed as housemaids (Alya); in other cases they have been working for years in other regions of the country (Chayma), either in manufacturing, agriculture or the fishing industry, for instance; the structural and regional inequalities affecting Morocco constitute the background of these kinds of migrations of unwed or single women and gendered forms of mobility (Viché, 2009).

Steep class inequalities and socio-economic status matter also when girls study or have salaried jobs, come from urban contexts or from Casablanca itself. In other cases, their urban origins and/or the fact they live at their families’ home do not hinder their engagement in relations which include sexual relations; their conditions might not always – nevertheless – be a matter of consent (as in Fadwa ’s case, for instance), whose boundaries may well be opaque. As aptly highlighted elsewhere (Cheikh, Miller, 2010; Menin, 2012), another aspect is worth noticing when looking at the ways young women express emotions and voice experiences of love, which also helps problematise the issue of consent or its contrary: it deals with a register evoking the loss of control over oneself – “*la perte de contrôle de soi*” (Cheikh, Miller, 2010: 191) – that I see as relevant in trying to rethink a few ambiguous or problematic aspects of some of the stories I focused on.

Notably, the stories evoking violent and coercive sexual intercourse were sometimes preceded by a romantic representation of the relationship with boyfriends and fiancés – as in Fadwa ’s case. I have noted similar plots in the reconstruction of the experiences of girls who claimed to have unconsciously had sex, for instance under the effect of drugs that had allegedly been given to them. This accounts for – initial or apparent – ‘love’ and attraction as a potential threat and indeed as the force which ultimately – metaphorically or literally – ‘trapped’ the girls in a situation in which sexual intercourse took place. In the first months of fieldwork, during one of the meetings with Nawal, she actually introduced one of her roommate to me; she had allegedly disclosed her story to no one else apart from

the two of us. Nawal's roommate said that an acquaintance had invited her to his house by pretending her boyfriend was also there, whereas that was just an excuse to give her some "drugs" diluted in a coke in order to sexually abuse her. Even though I acknowledged that the twenty-five year old was actually experiencing a very distressing situation – given that the responsibility of that man had been firmly denied and that she was wondering where to go after having given birth – I could not but reflect upon the way in which that event – sexual abuse and its features – seemed oversimplified and at times banal in the girl's account.

I do not dare mean that the tale should have been more articulated to be 'credible' or 'plausible', but I just argue that the way this plot is presented follows a scheme that resonates with other tales made by girls who claimed to have been sexually abused – with or without drugs – such as Fadwa (§ 3.2), whose tale oscillated between her consent and the coercion exercised by her former boyfriend, who had also deceptively attracted her to his house. A woman who decided to raise the baby of the daughter of a relative also told me that the young – unwed – woman had been attracted to a "empty house" by a male acquaintance who gave her drugs diluted in a drink and subsequently abused her. I argue that the recurrent theme of an "empty house" – where a boyfriend or his family were supposed to be found – is not accidental, especially if we consider that being inside or outside one's house is crucial in the girls' re-definitions as gendered subjects, irrespective of their experiencing maternity or not. As highlighted also by Cheikh (Cheikh, Miller, 2010), the imagery of an empty or inhabited space where these acts took place is indeed recurrent in this sort of narrative, in which girls are forced into sexual intercourse without their consent. The *récit* (ibidem: 193) of the absence of consent and of male manipulation is also put forth by these authors as a key issue; furthermore – as I have pointed out – this particularly regards the narratives of the young beneficiaries of non-governmental programmes, where it is fostered beside the rhetoric of manipulation by promise of marriage. Cheikh argues that the – recurrent and similar – reconstructions of violence as the founding experience of one's transgressions play a social role and stands for the girls' attempt to outweigh their situation of not being married nor virgins: such narratives hint that the loss of virginity has happened outside the norms, i.e. without the consent of the girls' families, but above all without their own consent.

Coherently to what I have stressed so far, the author suggests that the stories which frame the occurrence of sexual intercourse seem to erase the subject's agency in where desire, control or claim are concerned (Cheikh, Miller, 2010: 194)²¹⁸ and ultimately justify the girls' transgression with the fact that they are/were not wholly aware of their engagement in sexual intercourse. This aspect, I would argue, is also embedded in the repeated emphasis put by many young women on their being "still young" and on their "not knowing anything" – about life as well as about sex. Hence, the narrative of violence emerges as a posture which aims to make meaning of – or an attempt to justify – a certain status and a specific condition as – no longer virgin – females, by an "idiom of enclosure" (Boddy, 1989 : 72), i.e. by silencing certain aspects of one's story and by (potentially) turning (what is socially shaped as) deviance into victimhood. Interestingly, representing one's experience in terms of coercion and violence is associated by Cheikh (Cheikh, Miller, 2010) to the symbolic closure of the female body performed by older women and mothers on their daughters. Virginity rites, by which a girl is tied "lock in the potential sexuality of a girl [whereby] her virginity is celebrated and the same time safeguarded against loss" (Jansen, 1987 : 132). The Moroccan *thqaf* is also a ritual closing (Bourquia, 1996; Obermeyer, 2000a) performed by mothers on their daughters "to ensure that 'their eyes remain closed' [and to prevent] friendships with men" (Bourquia, 1992 in Obermeyer, 2000a)²¹⁹. These practices – similarly to the Tunisian *tasfiḥ* (Ben Dridi, 2011; Harzallah, 1992) – aimed at safeguarding unmarried girls' purity, ensuring bodily integrity and then (conjugal) fertility, may be simultaneously seen as ways to "allow licentiousness while preserving virtue" (Ben Dridi, 2011: 99). However, in taking into account also the idiom (of violence) through which some young women voice their experiences, it emerges that the boundaries of choice, will, desire and consent are more often than not hard to define and are blurred by a set of conditions that – even in the case of

²¹⁸ "Les mots pour décrire la défloration et les histoires narrant le cadre de cette pénétration amputent le sujet féminine de toute action désirée, contrôlée et revendiquée" (Cheikh, Miller, 2010 :194).

²¹⁹ When addressed to men *thqaf* may be aimed at preventing extramarital affairs or the search of another wife, otherwise 'closure' is a synonym for impotence (Obermeyer, 2000a).

female “choice”, as argued by Younes – might divert attention to a female’s active engagement, as the stakes of taking on the outcomes of one’s choice – for instance the occurrence of out-of-wedlock pregnancies – might be too high.

Cheikh and Miller (2010) stress how in some cases the loss of virginity embodies the founding experience or a sort of initiation to the activity of *fasad* – literally corruption and referring to activities of prostitution; here it encompasses different patterns of commercial sex or sexual transactions, as we shall see in the following paragraph (§4). The authors argue that the loss (of virginity), that had not or could not become a more institutional relation, hence gave way to the potential multiplication of transgressions of female codes of conduct (ibidem: 192), the latter being seen as going out of the “straight” trajectory (ibidem) or stepping “outside the bounds” (Kapchan, 1996 : 108). I was familiar with the same metaphor, of a “straight way”, as I heard it for the first time when used by a Moroccan friend living in Italy who referred to one of her Moroccan neighbours who had multiple partners and was designated in Italian as “*una marocchina fuori strada*” – [a Moroccan woman who] *kharjat men treq* [went off the track]. Here, in the Moroccan context – when dealing with young women and their (first) love and sexual experiences – the notion of ‘going out’ of a straight pathway is further associated to love devoid of reason or wisdom – ‘*aql* – and implying a loss of self-control which – interestingly – may put oneself in danger and potentially engender further transgressions and troubles. Noteworthy is the author’s argument that the “absence of reason” (Cheikh, Miller, 2010 : 192) and of distancing from sentiments and involvement, as well as “blind trust” (ibidem) are evoked also by my research subjects to give meaning to their everyday or past transgressions, particularly in their longing for their ‘past’ or ‘lost’ selves.

4.2 ...and straying off paths

On a late Saturday afternoon, Nawal and I were walking along the road connecting the *corniche* to the nearby poorer neighbourhood where she had once lived and from which she would have taken a bus to reach the outskirts of Casablanca, where she had joined her aunt’s household in a *karyan* – a shantytown. As we were walking past one of the several private clinics located on that hill – besides some of

the city's most opulent villas – a car slowed down and one of the two men in it asked us in French where the clinic was – as there were actually no signs; Nawal told them they were in the right place and we carried on. When we were a few meters farther a middle-aged woman walked past us and addressed Nawal in *darija*, asking why she had not got into the car of the two foreigners. Nawal was quite upset and told me that that woman had been very mean to her, for she assumed that those men made her sexual advances just because she is young, she replied to them and was walking in the street; according to Nawal, that woman implicitly meant that her being a young woman walking (alone) was itself a signal that she was sexually available to a random car of (foreign) males. Although annoyed, Nawal admitted that she was “used” to such jokes and “mentality”, given that older female co-workers used to provocatively ask her why she – young and good-looking – did not *go out* instead of wasting time in the dirt of the kitchen of a restaurant, since she could raise more money rapidly by selling sex, hence also affording extra money for leisure and nice clothes, beyond hers and her families basic needs. Nevertheless, Nawal did not pay attention to her co-workers tips and – at least at the time – did not seek male friendships as a means of securing material support and financial help, because she stressed that she already had enough troubles.

I have previously (in the first chapter) discussed how even in the first shelter for unwed mothers where I had met her, some social workers hinted that Nawal had already engaged in activities of “prostitution” since the time she came to Casablanca to work as a housemaid in the summer; her sister was also accused of regularly engaging in commercial sex. Those social workers also underlined that a complicated case like hers – in which it seemed she found no reconciliation neither with her family nor with her partner(s) – would have easily and rapidly lead her to *go out*, not just because she had no other source of income, but also – as hinted by the shelter's employees – because she was in their eyes “prone” to that sort of life, as events had demonstrated until that time²²⁰. Young unwed women living on their own, getting pregnant and giving birth outside marriage and/or socially legitimate

²²⁰ Notably the fact that she had tried to hide that she did not know who the biological father of her son was, since she had had at least two recent partners, none of whom wanted to hear from her anymore.

unions are likely to carry manifold stigma, whereby the most immediate and ‘banal’ is that of “prostitute”. However, the deconstruction of this notion and the practices which are locally associated to it are of central concern if we are to provide a nuanced and complex account of the social landscape in which sexualities are situated.

Recent research on sexual-monetary transactions in the Moroccan context (Cheikh 2009; 2011a; 2012; Carmona-Benito, 2008) aptly highlights the complexity of the role of money in shaping and being shaped by gender relations. Cheikh (Cheikh 2009; 2011b) for instance focuses on young women – some of whom are unwed mothers – living in urban contexts, including *sha’bi* neighbourhoods in Casablanca, where I have also undertaken my fieldwork, therefore her analysis is particularly relevant to my current argument. Cheikh’s research subjects are young women who are employed as housemaids or in restaurants and who alternatively or simultaneously engage on activities broadly understood as prostitution, given their socio-economic precariousness (Cheikh, 2009; 2012); however, as stressed by the author, all of them have intimate relationships with male partners who are not identified as clients and who help them financially. Indeed, attention is also to be brought to the fact that many of these young women might oscillate between professional commercial sex and relationships with lovers implying which intrinsically include monetary transactions – “*amours monétarisés*” (Cheikh, 2009 : 174). Stress is to be put on the fact that despite this sexual transactions are understood in monolithic terms as “prostitution”, “*débauche*” or “*fasad*”, its meanings are manifold and cannot be reduced to a bounded category (Cheikh, 2009; 2012). The author draws on the reflection of Tabet (Tabet, 2004)

The author draws on the reflection of Tabet (2004) and emphasizes that the financial or material outcome of sexual transactions within relationships conceived in terms of love are often understood as help and/or gift – *don* – aimed at women’s everyday needs, consumption and to a large extent their families’ support (Cheikh, 2009 ; Carmona Benito, 2008). This role of money seems to mirror nonetheless dominant gender ideologies, according to which male financial help is given to females also and considerably within conjugal unions (Cheikh, 2009; Carmona Benito, 2008), within which therefore the circulation of money and goods is well-rooted and legitimated. To this regard, Kapchan notes that the modernity of

Moroccan brides is made explicit by the display of expensive goods and jewelry, which shifts attention from family honor to family wealth; hence, it accounts for a “process whereby an intangible symbol of the moral economy (honor) is translated into a tangible symbol of the material economy (gold) [which] is occurring at all levels of Moroccan life” (Kapchan, 1996 : 164). Tremayne (Tremayne, 2004) also addresses the issue of marital unions as transactions in Muslim societies, “with female sexuality as a commodity traded by men” (ibidem : 195) and argues that that “the legal commoditisation of female sexuality should be incorporated into the analysis of gender economics in Muslim societies” (Moghadam, 1994 in Tremayne, 2004 : 193).

In debating the place of women’s sexuality within the marriage contract in classical *fiqh*, Mir-Hosseini (2012) explains that the contract – ‘*aqd al-nikah*, i.e. “contract of coitus” – follows the patterns of a contract of sale and that at its core lies the notion of “women’s sexuality as property”, an idea that precedes Islam though (ibidem: 130). The author suggests in particular that the logic of ownership and sale underpins the conception of marriage and contributes to shaping laws and practices, according to which “women’s sexuality, if not her person²²¹, becomes a commodity and an object of exchange, even if for only one transaction” (ibidem : 132), whereby the codification of issues concerning personal and family status law in modern nation-states – which followed the end of colonial rule (Charrad, 2001)– have further reinforced patriarchal notions of marriage and sexuality.

Mir-Hosseini’s emphasis on the place of women’s sexuality within a codified transaction – the marriage contract as intended in classical jurisprudence – suggests nevertheless that the idea of exchange is not to be dismissed even when looking at contemporary love and sexual transactions acted upon by young women in Moroccan society, both in relation to marriage and outside its boundaries. “Whether women are considered gifts of commodities” – argues Kapchan – “the issue of gendered exchange is still central to understanding changes occurring in the ritual and non ritual life of contemporary Moroccans” (Kapchan, 1996: 175).

²²¹ Mir-Hosseini specifies that the right of having access to women’s sexual and reproductive faculties acquired by her husband does not grant him the right over her person, as – according to some texts of classical jurists – she is a free woman and not a slave (Mir-Hosseini, 2012 : 132).

Irrespective of the legitimisation of money and goods within conjugal unions, as aptly noted by Cheikh (Cheikh, 2009), the fact that money lies at the heart of these relationships between males and females does not necessarily imply a relationship of domination. This would rather deny any form of female autonomy, as well as love, intimacy and pleasure (Jolly et al., 2013; Vance, 1984).

In Cheikh's analysis these arenas allow for the questioning of the emergence of feminine identities marked by – an ambivalent – sexual and a relative financial autonomy (Cheikh, 2009), according to which gender and sexual norms are adjusted and subject to continuous shifts and renegotiations, whereby young – unmarried – women's practices cannot be reduced to a dichotomy of tradition vs. modernity. The biographies of the girls met by Cheikh – and by myself – actually give an account of the strategies fostered by the actors to conciliate a plurality of registers and references – concerning their femininity – which might otherwise seem opposed and static. Cheikh particularly stresses the fluctuations in the re-definitions of sexual identities as non-linear nor fixed in the trajectories of some her informants, who may actually be seen as oscillating between dominant gender norms and pathways that might otherwise be solely seen as deviant or transgressing (Cheikh, 2009). This is exemplified by the desire to become spouses and mothers within socially legitimate unions, expressed by some women who engage in commercial sex (Carmona Benito, 2008) which may be seen as a search for stability and for the potential recovery of their honour, first of all through the return to their homes (Cheikh, 2009) and sometimes through marriage, especially if urban, autonomous life based on unstable jobs and commercial sex do not allow them to acquire a steady "respectable status" (ibidem). Hence, if their sexuality within an urban and somehow 'autonomous' dimension was on the one hand a synonym of social disorder, and on the other represented a transition and an affirmation of one's role through one's wage, returning to the parental household may be an attempt of reconfiguring oneself as *bent*. Returning to one's *bled* – hometown – and finding one's place within the household after an experience of mobility within the country accounts for the centrality of spatial metaphors (Jansen, 1987 : 165) which powerfully inform women's sexuality. Nevertheless, the attempts of return to one's household may definitely acquire peculiar features and

encounter specific challenges if – as is the case of most of my informants – they have had children out-of-wedlock in the meanwhile.

In Morocco, the prostitute is a woman “who goes out”, “*qui sort*” – *tatkhurj* or *kat-khurj* – (Carmona Benito, 2008) or – as most of my informants put it – *l-bnat li kaykhurju*, are the “girls who go out”²²². Hence, the woman ‘outside’ is contrasted to the one who stays at home (*galsa fi dar* – literally “sat at home”) and who is supposed to be married or – in the case of girls – who are supposed to have their virtue and modesty under the control and protection of their household, which is aptly expressed by their being referred to as *bnat darhum*: in so far as young women leave their parental household and share their living with somebody else, they are no longer *bnat darhum* (Cheikh, 2012). First of all, despite its potential function of economic support for oneself and one’s family, “going out” is not considered a working activity and – as I noted for some of my informants – women who engage in such monetary-sexual transactions actually specify what kind of job they do – if they have one; thus, they neatly distinguish the practice of going out from work.

Researchers who have focused on the commerce of sex and on commodified sexual transactions in Morocco argue that marginality should not be fostered as the main lens through which these practices are to be conceptualised (Carmona Benito, 2008), for instance because they are actually intertwined to salaried jobs in – more or less – systematic ways. According to Cheikh (2012), the changes involving sexuality in contemporary Moroccan society need to be contextualised in their broader socio-economic arena: for instance, prolonged female and male celibacy make sexuality outside the institution of marriage *flou*²²³ and “banal” and allow analysis beyond a mere dichotomy between ‘traditional’ and ‘modern’ values. In seeking to situate the figure of the *shikhat* in Moroccan society, Kapchan (1996) questions their anomaly and argues that their being mostly socially marginal is actually emblematic of the moral codes they challenge. In this sense, occupying the margins means that “the center may be more clearly defined” (ibidem, 199). The

²²²“Le verbe ‘sortir’, en arabe *l-khrij*, est un euphémisme pour désigner l’activité prostitutionnelle au Maroc” (Cheikh, 2012: 99).

²²³ Its defining and distinguishing features being vague and shifting according to a multiplicity of factors.

author refers in this case to the role of *shikhat* in blurring the boundaries between “ordinary and extraordinary experience, between private and public genres of expression [in which] they become the social representatives of transgression” (ibidem: 191); the ‘centrality’ of their marginality may also be embedded in their being designated as “the diseased member[s] of the social body” (ibidem), yet still a part of it. Although referring to performance contexts, this argument may also be relevant to the in-between, ambivalent space occupied by many unwed females – including unwed mothers – in contemporary Moroccan society, in that they subvert the codes of love and desire and may capitalize on their femininity (Kapchan, 1996 : 192)²²⁴.

As illustrated also by the biographies of some of my informants, money and/or material support nevertheless play a key role in the relationships of friendship and intimacy with male partners, which in some cases cannot be reduced to mere material support aimed at survival. While commodified sexual relations are often to be contextualised within socio-economic precariousness in which women and young women live in contemporary Morocco, the nuances of sexual-monetary exchanges made explicit by the actors shed light on the fact that some of them engage in such relationships to have fun, to increase their income and consumption patterns, because they enjoy attending cafés, bars and clubs with boyfriends; hence, for some going out is rather a matter of pleasure, including sexual pleasure. These cases are those that Carmona Benito calls “*amateurs*” in distinguishing them from the “professionals” (Carmona Benito, 2008), as they do not conceive of themselves as professional sex-workers nor as prostitutes either.

This applies to most of my informants and is also found in the ethnographic accounts provided by Cheikh (Cheikh, 2009; 2012), in which *bnat* – girls – go out also for their amusement, engaging in affairs in which imageries of romantic love

²²⁴ Interestingly, Kapchan notes that the *shikhat*’s public performance of her private life is a way in which her selfhood is constructed mainly in sexual terms, which allows her social appropriation as a “symbol of immodesty [and as] an emblem of shame” (Kapchan, 1996:194), although her performance may be seen as the very embodied critique and “social reflexivity” (ibidem) of the dominant culture. Furthermore, in this view *shikhat* – and to a certain extent my informants as well – play out through their own lived experience “the disjunctures and the congruences between the real and the fictional in society’s definitions of the feminine” (ibidem).

merge with or are rather intrinsically shaped by their financial sides²²⁵. A relationship understood in terms of love and/or a sexual relation that can be considered enjoyable is such in so far as it allows to have fun and – at the same time – to provide income or material goods. Whether going out is aimed mostly at financial support or it features simultaneously romance, consumption and pleasure, it does not necessarily imply the involvement of multiple partners. In the words of one of my informants, who I have called with the pseudonym of Safaa: “I started to have relationships with money – *bi l-fluss* – a year after I had given birth. I was working as a cleaner. I already knew many girls who used to go out. I started too... because basically I needed to pay the rent, the crèche, electricity, the food and so on. By the way, at the moment I only have one partner who I see from time to time” (Safaa, November 2011).

In Moroccan dialect a prostitute is designated with the term *qaḥba* – whore – or by reference to the concept of *fasad* – *débauche* or corruption – otherwise with the juridical notion of *zina* – fornication – which refers to any illicit and illegal sexual relation, including prostitution, adultery as well as any out-of-wedlock sexual intercourse. As argued by Mériam Cheikh, the concept of *zina* reinforces the ambiguities of the categories which represent female out-of-wedlock sexuality to the extent to which it does not differentiate commercial sex from any other sexually autonomous practice (Cheikh, 2009). The term that is most widely used by the women themselves when talking about sexual activities implying a monetary exchange is that of *l-khrij* – going out or “la sortie” in French – whereby the semantic field of ‘the outside’ is referred to in negative terms whenever girls aim to stress that they had not engaged in any form of prostitution or sexual-monetary exchange with their partners.

This is particularly relevant to the conversations in which my informants strived to represent themselves as decent girls and their sexuality as inscribed in the realm of love and commitment to their – unique – partner²²⁶. Hence, in following on

²²⁵ “La relation amoureuse et/ou sexuelle est un moyen pour consommer et se divertir ainsi qu’une source de revenus” (Cheikh, 2009 : 180).

²²⁶ On the other hand, interestingly, some other informants – young women who had been in touch with the reality of unwed mothers – stressed that “problems” – such as out-of-wedlock pregnancies – happened especially to girls who “did not do anything, neither study

Cheikh's reflection (Cheikh, 2009) concerning Morocco and – broadly – on Tabet's (Tabet, 2004) on female sexuality and sexual-monetary exchanges, we may argue that money itself cannot reduce these relationships to prostitution, as they are to be seen in a *continuum* (ibidem) in which female sexuality is exchanged with money, goods or status: “a *continuum* ranging from marriage to the modern forms of sex work. Women in fact may alternate in their lifetime between types of sexual-economic relations, going from marriage to having steady boyfriends, more or less steady clients, and “sugar daddies” or boyfriends who pay with gifts or fees” (Tabet, 2012: 43). Therefore, exchanges taking place within normative boundaries and those which exceed them can be seen precisely in terms of continuity and not of opposition. If some practices are seen as deviant, this is due to the fact that they conform to dominant gender roles, yet *outside* institutionalised normative frameworks (marriage). ‘Deviance’ does not hinge upon the circulation of money and goods as such (Cheikh, 2009). The fact that most of research subjects who receive financial support from their boyfriends not only do not inscribe such exchanges in the domain of prostitution, but do not even recur to the semantic field of *l-khrij* – ‘going out’ – is emblematic of the blurred, shifting and situated understandings of these notions, for which the notion of “multi-situated circulation on the market of the intimate” (ibidem: 181)²²⁷ seems particularly appropriate.

I shall evoke Younes' story again as he touches on the issue of monetary transactions within intimate relations: although his view seems to grasp the diversity of the sexual practices implying a monetary exchange and although he mentions relations based solely on desire without any monetary transaction, he further reinforces a normative and stigmatising representation of out-of-wedlock, ‘autonomous’ female sexuality:

nor work and always stayed at home”: hence, it is suggested that also “staying at home” is potentially risky as it would push young women to envisage their future as dependent on a male and the commitment he promises. Yet, this view hints overwhelmingly at the girls' naivety and overlooks their agency and their own desires when engaging in sexual and affective relationships.

²²⁷ “circulation multi-située sur le marché de l'intime” (Cheikh, 2009 : 181).

“Now I have another partner²²⁸, we plan to get married (...) I have had many other affairs with other girls, but we have never had similar problems [out-of-wedlock pregnancies or births]. There are many girls who go out with guys, they don’t care...for example this one I knew who dated a Moroccan who lived in Italy: she travelled with him two weeks *sans assurance*²²⁹, without asking any questions...Maybe he’s married to an Italian woman or maybe not? Who cares...She got pregnant and he had already disappeared without leaving a trace. She wanted to have an abortion, but had no money, so she started *going out* to raise it. Since then, she has never stopped going out with men...that’s the problem with prostitution” (Younes, November 2012).

Younes added that some girls go out for necessity, some other for money to buy expensive goods, while others might go out “because they desire it” even without monetary transactions, although he bluntly stated that, nevertheless, “for men they are just like prostitutes” (Younes, November 2011).

Touria – a young *bidawi* woman in her mid twenties – instead, neatly inscribes her practice of ‘going out’ within her everyday coping strategies and lists the various expenses she has to face, having two kids to raise alone; she associates this practice to her being an unwed mother and specifies she did not previously ‘go out’: “unwed mothers go out because they are alone, *boḥdhum!* They have many responsibilities and many problems... the rent, the school fees, food, and so on...” (Touria, October 2011). When she first got pregnant Touria was helped at a shelter run by nuns and subsequently by a charity for unwed mothers, that she voluntarily left because it did not grant her a sufficient income and because she claimed she did not receive good training and did not learn anything new. Afterwards, however, her income as a waitress in a café was not enough either. Touria pointed out that girls coming from outside Casa just to give birth in the city go to charities because

²²⁸ In the fourth chapter, I deal with other aspects of Younes’ relationship with his current girlfriend.

²²⁹ Here it stands for “guarantee”, he does not refer to insurance, although he uses the same French word that is used for “insurance” to stress that that woman had dated a man without any guarantee that their relationship would last.

they do not know “anything”, otherwise those who already know where to find accommodation and jobs directly search for them – without turning to charities and NGOs. In the meanwhile, she kept emphasizing that her salary has never been enough to sustain the kids, as their father has never helped her. Moreover, unlike other girls she knows, she claimed that she did not *always* go out – “*mashi dima...*[not always]” – although she recognised that in one week of work at the café she might earn as much money as with one or several meetings with a man. Her account challenges a monolithic understanding of commercial sex, in that she mostly conceives these exchanges as part of a relationship, in which – she stresses – she starts receiving money “after a while”, that is after they have met each other a few times. At the same time, she distinguishes these relationships from other forms of commercial sex by saying that she does not work in bars at night: “working at night means working in bars, working in bars means you have to drink...I don’t drink a lot and I don’t want to work [including sex work] in bars” (Touria, October 2011).

One of my acquaintances – an urban graduate in her twenties – hinted that unwed mothers are seen as a social threat because they might easily become ‘sex workers’ – “*travailleuses du sexe*”²³⁰ – given that they are alone and have few resources to support themselves and their children: my acquaintance saw these features as the main motivations for the actions with which civil society aims to help and “integrate” unwed mothers or to other projects aimed at the prevention of out-of-wedlock pregnancies. Even though the use of the contraceptive pill is widespread in Morocco also among unwed women – who mostly purchase it at pharmacies without medical prescription²³¹ – this acquaintance – among others – argued that its use in the local imagery is still associated with conjugal sexuality and sometimes to illicit sexuality like that of women who sell sex and engage in multi-partner relationships; the use of the pill in young women has been widely believed to be a

²³⁰ As I will argue, this term has started to be employed within the non-governmental sector.

²³¹ This relates of course to young women who I knew through my research; this observation also stems from research carried out within public health services which provided oral contraceptives free of charge – yet, as reported by the personnel, exclusively to married women.

potential cause of infertility and ill-health, although recently, as argued by this young woman, doctors tend to say that “there are no risks”, whereby early pregnancy in her opinion is deemed by many families by far a major risk.

When talking to her about my research subject over a home-made *tajine* with plums and almonds, Badra, the mother of a friend of mine²³² recalled the times – some ten years earlier – when her daughter was still a teenager and – since her divorce – fully dependant on her: in her opinion girls’ demands of money and contemporary modes of consumption are increasingly difficult to afford for parents – and even more for a single mother – therefore she paid attention to any desire and inclination that her daughter expressed so that, with the money that she carefully spared, she could satisfy her requests before she could ever turn to somebody else – men, boyfriends, lovers – to have what she wanted. The fear that her daughter might potentially ask for money or goods from male partners – and obtain them though a sexual exchange – made Badra very strict with the girl, who was often scolded for coming home late and hanging around with school friends. Hence, Badra herself reproduced an ideology of female purity according to which “women are (...) feared as ambiguous and dangerous creatures” (Ortner, 1996: 57). Interestingly, Badra now complains about the fact that the income of her son-in-law – an *émigré* in Italy – does not live up to her expectations of wealth and does not give his wife enough money especially when she returns to the *bled*²³³.

This woman’s²³⁴ deception – and anger, at times – is to be seen in relation to the lifelong efforts she had made to send her daughter to the schools attended – as she put it – by the *bourgeois*; she claimed that education had granted her daughter excellent job opportunities, although she eventually got married and left the country. Despite the fact that emigration adds further questions to the role of money within gender relations and marriage, I aim to draw particular attention to the stress this mother puts on the “commodification of desire” (Kapchan, 1996 :

²³² My friend had been raised by her – otherwise childless – maternal aunt, who had been granted her care since she was a few weeks old by one of her sisters, my friend’s biological mother.

²³³ Here it stands for Morocco as a country.

²³⁴ Who had previously emigrated herself to Northern Europe.

195), that she associates with consumption and the desires it engenders in young women and school-girls. Badra sees contemporary desires of consumption as the main triggers of sexual relations mediated by monetary transactions, therefore she stressed that most out-of-wedlock pregnancies in Morocco are due to the girls' lust, notably to the fact that girls would engage in affairs and relations – *'alaqat* – precisely because boyfriends and male partners in general are seen as the means for reaching material security or – as she pointed out – just to buy new items of clothing²³⁵.

²³⁵ Badra added emphasis to such aspects because she re-thought of her own life, in which she had often experienced material constraints: her father had died when she was a child, then her mother with her and her three sisters had been sent away from their father's household and settled down with a French family, where her mother started working as a housemaid. Badra grew up with the kids of the employers, who – as she proudly remembers – had subsequently offered their help when she was raising her own daughter alone.

CHAPTER FOUR

'At the edge': stuck blood, flowing lives.

Competing moralities on *hidden bellies*

Introduction

Drawing on the ethnographic insights based on the biographies of young Moroccan women, I have shed light on the ways in which their trajectories between their homes and other places and 'horizons' (Johnson-Hanks, 2006) weave into multiple living, working and relational arrangements. For some, work (and sometimes study) mobility encompasses the departure from their parental household and contributes to the multiplication of the possible nuances of womanhood at the core of the construction of their gendered selves. While mobility and circulation are the arenas in which non-normative forms of – ambiguous – economic and sexual autonomy seem more evident, intimate relations, contested notions of love and commitment, as well as 'flexible' and situational ideals of respectability are shaped and signified by all the subjects of this research²³⁶. The ways of conceiving and experiencing sexual relations – as we have seen – is also a major question in the negotiation of gender subjectivities outside institutional frames: the issue of sexual agency and the ways it is nuanced, silenced or denied in the narratives of my research subjects is emblematic of the shifting and contradictory adjustments of gender relations, and forcefully interrogates issues like consent and desire.

The latter are – literally – intimately bound to the embodied strategies in which young women who discover their out-of-wedlock pregnancies conceal or disclose them within or outside their parental households, working environments and relations with male partners. While I sought to illuminate the nuances and the declinations of desire, intention and consent which permeate sexual relations and their gendered and social stakes, what I aim to do next is to explore how those

²³⁶ Whether mobility and inner migration constituted a central element in their experiences or not.

dimensions further come into play in the processes by which girls manage their fertility and face the possible scenarios it opens up, whereby pregnancies described as unexpected may not easily be dismissed as ‘undesired’, despite the challenges and the uncertainties embedded by these “reproductive conjunctures” (van der Sijpt, 2012: 81). Some of the examples that I will discuss have been dealt with in previous chapters in relation to different aspects of unwed motherhood and provide a broader background for situating the embodied experiences of pregnancy, to which women give voice – and flesh. In the following pages (§ 1) particular attention will be drawn to the ways in which my informants signify, acknowledge and resist the occurrence of pregnancy and the tensions triggered by its disclosure within their social environment.

The wider social and structural forces which inform young women’s fertility management and reproductive practices will be given further ethnographic depth (§ 2): indeed, the women’s socio-economic background, work instability and relational precariousness are to be contextualised in the local political economy of health (Morsy, 1996)²³⁷, in which the fact of experiencing an out-of-wedlock pregnancy or the attempts to terminate it entail manifold challenges and hazards²³⁸. In this sense, I shall illustrate the features of the local scenario in which the management of out-of-wedlock pregnancies is concerned: this includes the – illegal yet widespread – practice of abortion in different settings as well as the market of abortifacients, which suggest how – not only intimate relationships as such are pervaded by multiple sorts of transactions (Third Chapter, § 4) – but also how

²³⁷ Morsy defines the scope of political economy in medical anthropology as follows: “its priority of embedding culture in historically delineated political-economic contexts. Accordingly, the relevance of culture is not restricted to ethnomedical conceptions but extends to issues of power, control, resistance, and defiance surrounding health, sickness, and healing” (Morsy, 1996: 23); an earlier contribution on political economy in the medical anthropology of the Middle East is Morsy (1981).

²³⁸ Even if it may apply to some cases, I do not mean that as unwed pregnant women they *necessarily* face increased reproductive morbidity or mortality or other health hazards: indeed, structural challenges in the social organisation of childbearing and birth are faced by women according to class, geographical location and availability of practitioners and resources (Capelli, 2011a; Jeffery and Jeffery, 1993). I will further problematise the notion of vulnerability in relation to unwed mothers and their construction as beneficiaries of local charities and NGOs in the fifth chapter.

intimacy may easily become a commodity, as in the case of pregnancies women want to get rid of, by recurring to different practitioners to ‘bargain’ the conditions for pregnancy interruption.

These wider negotiations shed light on the social worlds of women and on the tensions between intimacy and the pragmatic – yet troubled – search for solutions and coping strategies. Some of the stories presented are emblematic of the entanglements between the illegality of the practice of abortion and its recourse by women living in precarious material and relational conditions (Boutaina and Jamila, for instance), in which their reproductive agency (Unnithan-Kumar, 2004) has to be understood as a negotiation of autonomy that by some is played out “within conditions of structural subordination” (ibidem: 7). As argued by Maffi (2013), women’s agency in procreation cannot be understood without considering its intertwinement with “women’s perception of their sexualised bodies” (ibidem : 16), whereby the two aspects are situated within local power relations and the various arrangements enacted by women to re-negotiate norms. Although agency in poststructuralist theory (Butler, 1993) has been conceptualised in terms of subversion and re-signification of norms, in following Mahmood’s theory on the subject (Mahmood, 2005) I would rather argue that agency cannot be merely conceptualised according to a “binary model” (ibidem : 14) of subversion in opposition to subordination, nor according to the dichotomy of repression and resistance. In this view, the sense of agency emerges “through an analysis of the particular concepts that enable specific modes of being” (ibidem: 14). This perspective allows for a more complex and nuanced understanding of forms of human agency, in so far as it questions the discursive formations and structural forces within which agency emerges, not only – or not merely – as autonomous will and individual choice, but significantly as “the multiple ways in which one *inhabits* norms” (ibidem: 15).

As already mentioned, the fact that pregnancies are not legitimated by marriage, does not imply that childbearing is not desired, hence the recourse to fertility control and abortive practices is not to be seen *per se* nor necessarily as an ‘empowering’ act: it may rather be perceived as its contrary by women among my informants. The potential complications and hazards embedded in the – sometimes

– unsafe conditions in which women make use of abortive substances, access abortion surgery or medical abortion, for instance, open up a further questioning of the meanings of risk. I argue that the latter is made up of a set of features – notably, economic and relational (in)stability – and is weighed up by women accordingly, in spite of the potentially harmful or unknown effects of the abortive practices undertaken, since “moral, social, and political choices are always involved in discussing risks to the individual body – corporeal, somatic or incarnate” (Frankenberg, 1993: 236). Furthermore, following Scheper-Hughes and Lock (Scheper-Hughes, Lock, 1987), it may be argued that the body self, the social and the political body are interwoven. Hence, notions of risk are also strongly connected to the embodied knowledge of time (MacPhee, 2004), which do not only concern pregnancy and childbirth (Kaufert, O’Neil, 1993; McCourt, 2009), but significantly touch upon the “right timing” (van der Sijpt, 2012) of disclosure and concealment of pregnancy as well as that of its potential disruption.

As aptly discussed by Lock for the menopausal body in Japan, the cases presented in this work highlight how the condition of (out-of-wedlock) pregnancy cannot be reduced to a biological and universal process, upon which cultural features are solely inscribed: ethnographic insights forcefully illustrate that symptoms – the end or the lack of menstruation – considered as universal stem instead from the “dialectics between (...) cultures and local biologies” (Lock, 1993a: 146; Lock, Nguyen, 2010: 90-94) The absence of menstruation and the ultimate ascertainment of pregnancy – through different sorts of tests and sometimes through technologies like ultrasound imaging (Duden, 1994; Gammeltoft, 2007) – are not to be seen as two opposite poles, given that manifold ambiguities characterise the in-between time, in which young women are often torn by “disclosure-related dilemmas” (van der Sijpt, 2012: 81) and undertake different methods to ‘bring back their menses’. Hence, (§ 3) I shall argue that the boundaries of desire and recognition, are – again – blurred by embodied metaphors grounded in the idiom of blood flow and retention, whereby ‘not seeing the blood’ or instead ‘seeing it’ are evoked in relation both to the discovery and the misrecognition of pregnancy: indeed, bleeding was cited as misleading in the cases in which pregnancy was effective and – on the other hand – its absence was interpreted as a synonym of distress and fatigue, due to the harsh living and working conditions or to their being ‘young’

and having irregular menses. Again, the idiom of blood and the ways it is appropriated by young women is central in drawing the boundaries of intention and desire: acknowledging ‘just’ an irregular menstrual cycle allows for attempts to ‘retrieve’ it – by recurring for instance to herbs or drugs – without conceiving of this action as a potentially induced abortion. Therefore, in the third section (§ 3) I refer to the manipulation of ambiguity (Scheper-Hughes, 1992) in dealing with the ways in which my informants give an account of their reproductive experiences, whereby it will emerge how they were “sometimes in but more often out of, control of their own bodily experiences in terms of (...) their temporary and permanent outcomes” (Frankenberg, 2009: xiii).

This perspective urges for a broader understandings of the local declinations and the subjectively constructed moralities around the issue of generation and abortion. To this aim, (§ 4) local ‘moral struggles’ over reproduction and the setting of priorities in the local agendas of women’s health and rights will be brought to attention, in that they further highlight how reproduction can never be regarded as a solely individual matter, in so far as – as illustrated by a large anthropological literature (Ginsburg and Rapp, 1995 ; Martin, 1987 ; Lock and Kaufert, 1998), women bodies are metaphors of the wider society and of its reproduction. Far from being mere biological and material units, bodies are the product of social, historical, and cultural processes (Matalucci, 2003). At the same time, in looking at local discourses on pregnancy, fertility and its disruptions and in focusing on the lived experiences of young unmarried women, the body (Csordas, 1990) emerges itself as the site of production of social and cultural meanings. The proliferation of discourses and practices aimed at caring for, healing, empowering, controlling and disciplining young women’s – and their infants’ – bodies calls for closer and critical attention on issues like body ‘ownership’ (Unnithan-Kumar, 2004 : 5) in reproductive processes at the intersection of family, social and institutional power relations, all of which contribute to redefining the boundaries of bodies, selves, lives and bonds.

After giving an overview of Islamic views and interpretations of the “foetal condition” (Boltanski, 2007), I will look at how local emerging discourses and mobilisations around the decriminalisation of abortion give rise to a multiplicity of positions which cannot be reduced to an opposition between so-called ‘pro-life’

and ‘pro-choice’ paradigms, as polarised “reproductive ideologies” (Tremayne, 2004 : 193). Although some of the actors actually foster such exclusive labels, those notions are appropriated within local moral worlds (Kleinman, 1995), religious views and experiences of activism and are contrasted by other more nuanced positions, which account for the multiplicity of sensitivities and for the flexibility inherent to (the diverse) Islamic approaches to fertility (Musallam, 1983 ; Atighetchi, 2010a, 2010b, Weigl, 2010 ; Tremayne, 2004, Hoodfar, 1999), to abortion (Bowen, 1997; Hessini, 2007) and towards ethics concerning the ‘beginnings and ends of life’ (Kaufman and Morgan, 2005). Basing my insights into the perspectives and the lived experiences of unwed mothers, social workers and health professionals, I wish to discuss how out-of-wedlock pregnancies and births are addressed and politicised, whereby the young women at the centre of my ethnography and their children emerge as “contested lives” (Ginsburg, 1989) in the contemporary Moroccan social scenario.

§ 1 Juggling time and complex conjunctures²³⁹

1.1 ‘Drinking’ pills, heating wombs

The following examples are aimed at deepening the understanding of the experiences of my research subjects by looking particularly at the ways in which they come to acknowledge pregnancy or make meaning of its – attempts of – disruption. The social, family and gender tensions intrinsic to their experiences illustrate how bodily processes are inherently social and that reproductive practices and fertility are to be situated (Greenhalgh, 1995) within specific political-

²³⁹ The concept of “vital conjuncture” elaborated by Johnson-Hanks (2002) is relevant to my argument and to the experiences of the women in this research, in that it calls attention to the fluidity and the looseness of the status of motherhood: “the fact that vital life events are rarely coherent, clear in direction, or fixed in outcome dramatically limits the usefulness of the life cycle model. In its place, I propose a unit of social analysis based in aspiration rather than event. I call this the vital conjuncture—integrating the “vital” of demographic vital events with Bourdieu’s conception of the conjuncture of structure and action. Vital conjunctures suggest a new way of aggregating life history experiences and thus working between the individual and the social” (ibidem: 865-866).

economic, as well as spatial and temporal dimensions, without which the “social affair” of pregnancy (van der Sijpt, 2007) cannot be discussed. Underlying this perspective is the critical use of categories like ‘autonomy’, ‘individual choice’, (reproductive) ‘agency’ in relation to sexuality, pregnancy, abortion and birth: these notions rest upon biomedical assumptions of the body and of a bounded autonomous individual, which are ultimately inadequate to grasp the significance of the subjects’ lived experiences. Questioning reproductive agency makes sense only “if taken as a strategy within a social configuration characterised by specific constraints and possibilities” (Maffi, 2013: 183). Therefore, I shall rather look at local meanings and notions arising from my informants’ narratives, which constitute the framework within which their experiences are signified.

When we met, Latifa – a high-school girl from the whereabouts of Marrakech – had been taken to a charity two days earlier by her parents, who had been told about her situation by her older sister. In Latifa’s eyes, coming to this charity had been the last solution after having tried some other ways of dealing with her – recently discovered – pregnancy. Indeed, she argued she had been to a private doctor as she was still unaware of being pregnant, and also claimed she had irregularly been taking the pill. When she discovered she was actually pregnant, she headed to an herbalist – *l’attar* – outside her home town, in order not to be seen by any acquaintances. However, the herbalist’s remedies did not work: she blamed the fact that she was three months pregnant at the time she started trying. Hence, she turned to a medical doctor in a larger urban centre: she stressed that he is considered as the most renowned, as he allegedly practises “curettage”²⁴⁰ at almost any stage of pregnancy, as other girls from the surroundings of Marrakech – as well as from different regions – had already explained to me; they even told me his name and address. Latifa added that, by the time she went to that practice, her pregnancy was already at an advanced stage and that the amount of money she was asked was so high, that she would have never afforded it – she had allegedly been

²⁴⁰ Most girls use this French term to refer to surgical methods to end pregnancy, even if it indicates a different type of intervention.

asked *one million* dirham²⁴¹; the price could have been much lower – for example thirty thousand dirham – if only she had turned to the doctor earlier, the price being dependent on the weeks of pregnancy. According to Latifa the herbalist was also expensive, the price ranging between two or three hundred dirham – or even more – at every visit: she went there about twelve times, which meant a considerable amount of money. Latifa – who probably still hoped to put an end to her advanced-stage pregnancy with some ‘traditional method’ – intended to turn to another well-known herbalist in Casablanca as well, but she had been taken there by her parents, thus she could not search for him. The goal of the trip to Casablanca was indeed to take her to the charity, so that she gave birth far from home and in order to give her baby up for adoption. Hence, she was supposed to return to Marrakech as soon as she would sort everything out.

Hakima²⁴², instead, did not envisage moving once she gave birth. She stressed that until a couple of months earlier she did not know that she could get pregnant, since she took the pill: “*Ana shrabt l-fanid* [I “drank” i.e. I took the pill]”, she told me. Yet, she explained that she used to take it only during one week per month: she bought it from a pharmacy at twenty dirham, but she took two pills – one in the morning and one at night – only when she was expected to meet her partner. Hence, she resorted to contraceptives only at times of need and according to contingency. Although this does not necessarily suggest the uncertainty of the relation with her partner, it may well hint at a “complicated preference for contraceptive use” (Asdar-Ali, 2002 : 114) and – to a certain extent – at her ambivalence towards this type of regulation of her fertility. While for some young women the use of the contraceptive pill is seen as a potential threat to their fertility and is therefore delayed (as noted in Egypt by Asdar-Ali, 2002), Hakima maintained she did not know that irregular use of the pill might undermine its efficacy and added that nobody had ever explained to her how to take it. In any case, she stressed she did not expect she could get pregnant, because after all she

²⁴¹ This amount is very unlikely to be realistic, as it would equal about one hundred thousand euro.

²⁴² Who I have mentioned in the third chapter in relation to the girls’ itineraries and arrangements after the discovery of pregnancy.

‘drunk it. The pill – *l-fanid* or, as it is called elsewhere in Morocco, *l-kina*²⁴³ – is usually said to be ‘drank’, therefore this idiom reminded me of how Helman (Helman, 1981) conceptualised the symbolic meanings and uses of drugs as “fuel” and “food” (ibidem), which has been noted also by Scheper-Hughes (1992) in relation to the “magnetism of drugs” (ibidem :200) in the North-eastern Brazilian shantytown she worked in.

‘Drinking the pill’ was not particularly appealing for Hakima, but it evokes in my view the ‘contingency’ of this method of fertility regulation, which also mirrors the use of the products – concoctions, for example – that can be purchased from herbalists to induce menstruation by ‘heating’ the body. Once she discovered her pregnancy, Hakima said she wanted to “take it out” through the ‘*amaliya* – surgical abortion, but she could not, because five months had already passed. When I asked how she got to know the doctor, Hakima told me she had been sent to that specialist by a friend of hers who had had the same problem, although she had discovered it after only one and a half months. While specifying that the doctor’s practice was in Casablanca’s central area²⁴⁴, Hakima added: “It’s *haram* but there are many doctors who do it. It’s expensive, it’s three thousand five hundred *dirhams* if you do it ‘at the beginning’”. She had been to the doctor only once during her pregnancy, but she intended to turn to another after having given birth, as she thought of doing *l-bra* [injection²⁴⁵ of hormonal contraceptives] or *l-amaliya* [tubal ligation] in order not to get pregnant again. These, besides giving birth and raising her child alone, outside her household, were the only options envisaged – or disclosed – by Hakima at the time.

In looking at so-called traditional – *taqlidiyyn* – abortive practices, besides the girls’ narratives, I found some other insightful points of view, i.e. those of the personnel of the charities where some girls find shelter before or right after giving birth. For instance, when talking about a girl – who I shall call Ikram – with one of the social workers of the charity where Ikram had found shelter, Ikram’s daughter’s ill health was ascribed to the substances she might have taken when pregnant, in

²⁴³ Notably in the (eastern) Moroccan region where I did my previous fieldwork.

²⁴⁴ She was from a *sh’abi* district, instead.

²⁴⁵ It indicates also other kinds of injections.

order to induce an abortion. The charity's employee stated that the baby was sick even if it was not evident at first sight: that might be due – according to this woman – to the fact that if Ikram had drunk “something” – like drinks prepared with abortive plants or toxic products – that might not have been strong enough to cause a miscarriage, but might still have entered the baby. According to this explanation, such practices would be quite common in these girls' cases and even medical doctors would not acknowledge any problems in the first months of life of their babies, as ill health would become evident only as children grow up – she then made examples of her acquaintances who had adoptive children, whose health was particularly poor.

According to this kind of explanation, the doctors who work with charities for unwed mothers and/or their children now know that it is very likely that girls ‘drunk’ toxic substances during pregnancy, which might have impacted the foetus and/or the newborn²⁴⁶. Yet, I think it is relevant to note that girls – and their behaviour during pregnancy – are blamed for the potential ill health of their children, i.e. in some cases, potential foster-children of Moroccan or foreign families by means of the *kafala*²⁴⁷. Indeed, these aspects might be worth reflecting on within a broader analysis of the discourses, practices and medical measures fostered over time by Moroccan institutions – in its State-driven and/or NGO forms – to deal with the presence of illegitimate newborns and children, their survival and their health²⁴⁸. As far as we are concerned, it is to be noted that to be blamed in this case are in particular the practices that Ikram had allegedly fostered for that unwanted pregnancy; practices that are commonly cast as ‘traditional’ even if the term is not exhaustive, as – as I will explain further – toxic substances taken with abortive aims range from herbal to chemical products.

Asdar-Ali (2002) also explains that abortion techniques range from drinking the boiled mixture of plants to drinking Coca Cola, to overmedication with the pill or other drugs that could be purchased from pharmacies (ibidem: 106). In relation to

²⁴⁶ There is no epidemiological evidence about this aetiological explanation.

²⁴⁷ Ikram's daughter had actually been given to a Moroccan foster family, while she left Casablanca to head back further North to her hometown.

²⁴⁸ This point will be further raised in Chapter Five.

the Egyptian context – and in reference to other studies conducted on the same issue (Hoodfar, 1986; Ragab, 1995²⁴⁹) it has been highlighted that – besides carrying heavy loads and introducing foreign objects in the uterus – self-induced abortions are often performed (especially) by poor women by recurring to overmedication with drugs that are available at pharmacies without prescriptions. Interestingly attention is brought to the fact that women recurring to these methods seem to be those on “the borders of motherhood, (i.e. the unmarried or the grandmothers)” (Huntington, 1999 : 177), for whom the stakes of a potential pregnancy seem more serious.

In the cases that I am going to discuss, at the same time, the processes which lead or prevent to attempt abortion are strongly linked to the kind of relation girls have with their partners. Some of their narratives actually highlight their intention to seek a doctor to perform an abortion, while they turn to this plan as their partners – often the biological fathers – try and often succeed in dissuading them. Whereas other stories suggest the girls’ refusal of abortion: the reasons given for this are religiously shaped by the mobilisation of notions like *haram* and by referring to abortion as an act of “killing”. However, I shall argue that in such cases moral and religious explanations do not sufficiently nor thoroughly illuminate the complexity of the process which informs reproductive practices, including reproductive disruptions (Inhorn, 2007)²⁵⁰. At the same time, pre/extra-marital relationships and ‘*concubinage*’ might also be represented as ‘mistakes’ from moral and religious points of view: hence, abortion is defined by some of these young women as a further and possibly worse mistake: some of them claim they avoid abortion also for this reason.

1.2 Mistimed chances, precarious relations

I deem the following examples emblematic of the centrality of the relational dimension, that is the ways in which events concerning pregnancy and its

²⁴⁹ Ragab, A. R. (1995) *Abortion decision making in an illegal context: a case study from rural Egypt*, PhD thesis submitted to the university of Exeter, UK [in Huntington, 1999].

²⁵⁰ The author draws on this notion with reference to infertility and assisted reproductive technologies (ARTs) in the Muslim World.

termination are shaped within the couple, whenever girls disclose the occurrence of pregnancy to their boyfriends or to other partners. This is only one of the relationships within which girls act and negotiate the feasible alternatives to facing an illegitimate pregnancy, yet it is a key one, as they may see the relationship with their male partner(s) as pivotal for their future – and, potentially, for that of their children. In discussing similar issues in regard to young urban women in eastern Cameroon, van der Sijpt (2012) argues that they either disclose or conceal their pregnancy depending also on the changing relationships between marriage and childbearing patterns, whereby the proliferation of premarital affairs and the commodification of intimate relationships account – according to the author – for a certain relational uncertainty and ambiguity, which ultimately constitutes the context where disclosure or concealment of one’s pregnancy is enacted (ibidem: 85). Pregnancy can indeed open up further chances to seal more formal engagements or prevent them. Yet, as aptly stated, pregnancy is “‘a bet’ in a wider partner play” (ibidem: 86), in which it may either represent the avenue towards the realization of their urban aspirations or an obstacle. Interestingly, here potential marriage following “ill-timed pregnancies” (ibide,: 90) might be purportedly avoided as it may put off young women’s ambitions at that particular juncture in their lives²⁵¹. On the other hand – says van der Sijpt – pregnancy may be regarded as an opportunity to try and strengthen the relationship with a specific partner and the benefits this might entail, whereas women might not expect more stable engagements (ibidem: 87) and delay plans of marriage, or alternatively “strategically deploy the longstanding notion that links childbearing to a marital framework” (ibidem: 87).

While the young women in van der Sijpt’s ethnography seem to have a relatively wide spectrum of chances – concerning for instance the ‘selection’ of potential fathers – in most cases in which my research subjects had to manage more than one ‘potential father’ their possibility to navigate the alternatives seemed far more restrained, which made Nawal bluntly affirm: “My sisters have said that they will

²⁵¹ This, however, may be true for many of my informants too: although marriage is overwhelmingly depicted as the horizon to which they aspired, this narrative is nevertheless informed by the non-governmental rhetoric which strives to construct their social acceptability by re-inscribing them in a normative framework.

say ‘yes’ to the first [man] who shows up at their door to ask to marry them! No matter if he works...if he doesn’t...After what has happened to me, they will do that! My older sister has also had some troubles. She also moved to Casa... she split up with her fiancé because his mother said that in Casa my sister was living with girls who are... bad girls! *Safi* [that’s it], they broke up...” (Nawal, June 2011).

When she got pregnant, Nawal was either dating two different men, or – as she claimed – she thought the relationship with the first one was over, when she started with the second one. However, given the coincidence of these events with the discovery and the disclosure of her pregnancy, it was difficult for her in the first place to trace the boundary of the two affairs. It would have rather been counter-productive, given that she hoped for the recognition at least from one of “the two fathers”, as she used to call them. Her own and her older sister’s experience are represented as the ‘bad examples’ her younger sisters criticise²⁵², as they had probably wasted the opportunities they had had. Hence, to some extents Nawal’s – as well as Zohr’s case (in chapter one and three) – may be similar to the cases described by van der Sijpt (2012), in which young women seek recognition from one – or more – partners, irrespective of their being the – alleged – biological fathers. If we think specifically at the first weeks of pregnancy – when acknowledged – the ways these relationships weave into each other inform women’s attitudes towards the disclosure, the concealment or the disruption of their pregnancy. Hence, timing also considerably shapes the conditions in which they might recur to abortive practices as well the type of techniques they are able to access.

Thus, the decision whether to end a pregnancy or not may itself depend on the kind of relationship they have – or have had – with their partner(s) and on whether they think the relationships with the biological fathers or other partners might continue or become a conjugal union. Still unaware of her condition, Zohr, for instance, had joked with her boyfriend about her being pregnant and at that time, he had told her

²⁵² Whereas, Nawal explained some of her cousins had given birth outside marriage, their children were – allegedly – raised in their household and they spent their time ‘going out’ and dating men either in the same town or elsewhere. Nawal also invited me to her hometown and stressed that she could introduce me to many “girls” like them over there – hinting at girls who had got pregnant or had had children out-of-wedlock.

to have an abortion – to have a curettage²⁵³ at a doctor. He had actually made clear that he agreed to live with her without being married – like they had been doing for about nine months – but he firmly asserted that he was not willing to raise a child. A few weeks later, Zohr found out that she was *actually* a few weeks pregnant, but her partner did not change his mind: he could not take over the responsibility of a child and did not intend to marry Zohr. She would have married him instead, but she remembered what he had stated the first time – when they were joking. Zohr told me she preferred putting an end to their relationship because she did not want to have an abortion and had never thought of it as a solution:

“It’s *haram* in Islam... and living together without the ‘*aqd* [marriage contract] is already a mistake! Having a clandestine relationship is a mistake with God, but I don’t want to keep on making mistakes by *killings*” (Zohr, July 2011).

According to some accounts of Zohr’s story that I have subsequently had, I shall question the extent to which this narration is a first attempt at making meaning out of her situation or – in itself – a specific type of representation of the pathways which lead her to that charity²⁵⁴. While I have previously (in chapter two) dealt with these aspects from a methodological point of view and by critically analyzing

²⁵³ This term is widely used by Moroccan girls and women even in conversations in *darija*, even if it refers to abortion, for which the Arabic term *al-ijahd* is used in other cases. I argue that the recourse to the French term ‘curettage’ serves also to ‘minimise’ the kind of intervention and to divert attention from women’s intentionality in pregnancy termination.

²⁵⁴ As discussed in chapter two, the girls’ narrations and representations of their experiences, pathways and biographies have to be seen in relation to the specific situations they face over time and at each ‘stage’ of their itineraries as unwed mothers. For instance, whether they seek help and assistance at charities or not, and the sort of charity they turn to are not neutral: these features contribute to shape the ways girls represent themselves in order to conform to the criteria set or accepted by local NGOs and charities. In this case, I have to make clear that this first meeting with Zohr took place in the dormitories of the charity she was living in and that a young social worker on a job placement had been asked – by her colleagues – to stay with us and to help with the translation from *darija* to French. This feature might explain the fact that Zohr’s narration did away with a wealth of biographical details, that she mentioned only afterwards; others have been told to me by Nawal - Zohr’s friend at this charity and then roommate in the following months.

the researcher's positionality and the political and epistemological stakes of doing fieldwork through organisations, here I shall focus mainly on the significance of Zohr's statements because – whether they are 'realistic' or not, 'exhaustive' or not – they do shed light on further, crucial issues I aim to discuss, i.e. views, discourses and practices dealing with reproduction, childbearing and abortion, mobilised by young women and unwed mothers, which illuminate diverse "pragmatic moralities" (Bowen, 1993). In particular, Zohr illustrates a possible scenario, which would have emerged, had she followed what her partner suggested: carrying on their life together even if unmarried, provided she had an abortion. This 'solution' as a whole is cast as *haram* by Zohr: not only the possibility of abortion is defined as *haram*, but she bluntly adds that what she/they had been doing until that time was morally sanctionable. Hence, rather than making further – or 'worse' – mistakes Zohr gives birth, aware that her partner will not support her or, maybe, still hoping that he will change his mind or that another man will be willing to recognise the paternity of the child.

According to this kind of narration, Zohr's decision not to have an abortion stems from the tension between two arrangements, both of which are seen to a certain extent as *haram*, whereby she seems to opt for the less morally sanctionable and draws on the notion of *haram* to give an account for her refusal to have an abortion. Nevertheless, as I subsequently got to know further elements of her story, this moral and religious frame of reference, that she put at the base of her actions, had necessarily to be connected to other events and constraints she had to deal with, which placed her strategy simultaneously in the field of morality and in that of contingency.

Indeed, Zohr explained to us²⁵⁵ that she and her partner were initially willing to have children and that they had even thought of a name to give to a girl – it was the same name she actually gave to her daughter. Then her partner changed his mind and said that his mother wanted him to marry to somebody else. Zohr claimed he had even suggested to her to give birth and raise the child, while he rented a room and financially supported her; after about three years she would have been free to leave the baby to her partner and start her life over. Zohr, however, refused. She

²⁵⁵ To the young social worker and to me.

was actually still in touch with her ex-fiancé who was potentially willing to marry her and to recognize the paternity of the baby, provided the biological paternity remained hidden. This man had allegedly started the bureaucratic procedures for marriage in order to show Zohr his ‘intention’²⁵⁶, yet she was still unsure, considering he was unemployed and that she had had problems with his family before. Zohr had not mentioned that she had already had a child, who had died: I was not told if this potential husband was the father of her first child or not, nor if she had left her hometown after they broke up. Nevertheless, her pregnancy had – temporarily – reconfigured her relationships both with her current partner and with her former one: in the months between Zohr’s child’s birth and death, both men were in some ways willing to find arrangements which were beneficial to themselves and – potentially – to Zohr as well.

Hence, was Zohr the object of the interest both of the biological and of the potential official father (only) in so far as she was the biological mother of that child? All these relationships are reconfigured precisely because her biological maternity is the major boundary and the matter of concern of both men, in two different ways: the biological father would agree to support her lest she accepted to raise the child only for a few years – without marrying – and to give it up afterwards. In this sense he seems to be appropriating Zohr’s reproductive and nurturing capacity as such, without further social outcomes – i.e. marriage or leaving the child to be raised as ‘illegitimate’ by Zohr, an unwed mother. The other potential accommodation envisaged by Zohr’s former fiancé is also centred on the social recognition of the paternity of the child, since he seeks to make sure that – once married and after having given his name to the baby – he would be recognized as the biological father – although he is not. Therefore, to a certain extent, both men strive to ‘own the belly’ (Maher, 1984: 107), i.e. to have their paternity socially recognized, whether they are the biological fathers or not. Considering that most unwed mothers I met stressed that the biological fathers of their children denied their paternity, it is to be noticed that here, instead, the biological father seems willing to affirm it, while the potential spouse of Zohr says he would recognise the paternity and claims secrecy around the biological paternity

²⁵⁶ I have discussed this in Chapter Three.

of the child – so, in a way, he appropriates it too. Nonetheless, both intentions expressed by the two men were soon withdrawn as Zohr’s six-month-old child died²⁵⁷. In the girls’ eyes, Zohr’s partners’ intentions had been demonstrated by the purchase of some items for Zohr’s and Nawal’s accommodation by the biological father of Zohr’s baby. Yet, after her death, he – allegedly – took everything away from the girls’ room. I argue that, besides the importance ascribed to the religious and moral frame of reference in her ‘official’ discourses, Zohr’s refusal to interrupt her pregnancy was to a certain extent due to her endeavour to bind herself to her current partner – the biological father – or – alternatively – to reconstruct the relationship with her former fiancé. However, it is fairly evident how both relationships and plans were uncertain and the existence of the child was the only element which bound the two men to Zohr.

Like in Zohr’s case, Fadwa’s illustrates the role played by her relationship with her partner in the process which ultimately determined the continuation of her pregnancy. As I have previously discussed (Chapter Three § 3.2) – Fadwa claimed that she had been the victim of sexual violence by a man she had started to date when she was seventeen years old; when she found out that she was pregnant she wanted to have an abortion, arguing and repeating several times that she was still ‘too young’ to take on the responsibility of raising a child. Nevertheless, she had not been able to pursue her plan because her partner did not allow her, otherwise – provided she could afford it – it would have been possible. Fadwa actually explained that she was only a few weeks pregnant:

“I didn’t want to get pregnant. It was fate, *l-qadar...maktab Allah, l-qadar*²⁵⁸ [God’s will, fate]... People know that there are doctors who do *curettages*, I know many girls who are in trouble and do *l-cortage*.

²⁵⁷ The reasons for this death still remain unknown; Nawal, Zohr’s friend and former roommate argued the deaths of Zohr’s children were linked to her own ‘sickness’, which was not clear to Nawal either.

²⁵⁸ The etymology of *qadar* illuminates this and analogous accounts, indeed *l-qader* means ‘the powerful’ (*neqder*, means ‘I can’; *maneqdersh*, ‘I cannot’): hence, destiny seems more powerful than one’s attempts or plans, similarly to what is *maktub*, ‘written’ or to what is *ktabt ‘aliya*, ‘written to me’.

In my home town, there are many doctors who do that! It's no good. There are many risks. There are girls who have died. And it's *haram*. The baby is like a 'big person'. And *he wanted* this baby, it's his and he told me 'leave it...' [do not have an abortion]" (Fadwa , October 2011).

When we met, Fadwa was about nine months pregnant and soon left the charity, where she had been given hospitality for a few weeks, to go back to her hometown, get married to and then divorce from the biological father of her child. She did not wish to do this, but she was probably pushed to accept it for bureaucratic reasons: the man was actually already in jail, so she did not want to marry him in any case; she had also reported him to the police. Getting married and then divorced would have been – at least – a way to grant a *nasab* to her child, rather than giving the child her own or a fictive name²⁵⁹, as a social worker of the charity explained to me as Fadwa had already left. It remains unclear why she had to get married instead of obtaining just the recognition of paternity from that man: Fadwa had initially told me that her family did not want her to go back home with the baby nor that she get married to that man. The latter, while in jail, had claimed the paternity of the baby and – also by talking to the police – had maintained he wanted to marry Fadwa . If the man had actually made that statement – his intention to marry Fadwa – the reasons behind this should certainly be questioned, since it is known that, according to the Moroccan Penal Code (art. 475)²⁶⁰, rapists are allowed to marry their victims with the agreement of her family and, in doing so, they cannot be prosecuted for any crime.

²⁵⁹ See Chapter One.

²⁶⁰ This aspect has been discussed in Chapter One in relation to the case of Amina Filali. Article 475 : « Quiconque, sans violences, menaces ou fraudes, enlève ou détourne, ou tente d'enlever ou de détourner, un mineur de moins de dix-huit ans, est puni de l'emprisonnement d'un à cinq ans et d'une amende de 200 à 500 dirhams. Lorsqu'une mineure nubile ainsi enlevée ou détournée a épousé son ravisseur, celui-ci ne peut être poursuivi que sur la plainte des personnes ayant qualité pour demander l'annulation du mariage et ne peut être condamné qu'après que cette annulation du mariage a été prononcée » [<http://adala.justice.gov.ma/production/legislation/fr/Nouveautes/codepenal.pdf>; accessed April 2012]

Nineteen-year-old Safaa was – at the time we met – the youngest beneficiary at the charity we met at, while her son was almost one year old. The relationship with her son’s father lasted about three or four years; she took the pill – which she bought at a pharmacy – but at some point she stopped because she argued with her boyfriend. She said that she was angry and “threw the pill away”, she totally forgot about it, even if she subsequently had sexual intercourse with her boyfriend: that was how she got pregnant, said Safaa, and added that she had then forgotten about that man, a former neighbour. Nobody at home – except one older sister – knew she had had a baby. Her former boyfriend was told about the situation from the beginning but told her to “leave it” because it was his son. He did not want her to have an abortion, but as time went by Safaa understood he would not have done “anything” to support her or the baby. Then she left her home and her town and headed to Casablanca, where she temporarily entered a local NGO programme for unwed mothers.

At a different charity I met Loubna, who had recently given birth to her daughter in one of Casablanca’s main hospitals; she had come to the city – from a nearby town – about four months earlier and had joined the charity two months later. Until she left her household she said she did not hide her growing belly, because everybody at home knew she was pregnant: “I didn’t wear any *semta...*”, she told me. Loubna had no *khotba* – formalised engagement – with her daughter’s father, they were “just friends” and they had known each other for about a year. However, they had interrupted all contact, since – she stressed – he did not want to “*make the papers*” – the documents – for the child. Loubna had disclosed she was pregnant from the first month:

“He told me ‘leave it’... but then he didn’t want her anymore, after she was born. He doesn’t want to ‘make the papers’ and doesn’t want to see her...At the beginning, when I found out I was pregnant, I thought of doing curettage, but then I found out it is *haram*; he didn’t want it either, because, he said it is *haram*. He didn’t give me any money to do it, he didn’t want to. Anyway, I thought of it...I didn’t want to do it” (Loubna, October 2011).

In the cases discussed so far male partners have played a role in shaping the girls' reproductive experiences in significant ways: notably through – sometimes controversial – affirmations of paternity, whereas some of the girls' accounts bring about religiously informed notions of morality to frame the interdiction of abortion, by bluntly casting it as *haram*. Along with relational, gender and what they acknowledge as alleged moral and religious interdictions, some of my informants account for other sorts of features and constraints which contribute to shaping their reproductive experiences. Notably, before rethinking their experiences in terms of destiny, predestination and (simultaneously) divine will, many girls emphasize the role played by financial constraints and contingent factors which had prevented them from accessing a timely abortion at private medical practices.

In this regard I shall evoke Mouna's case. In the previous chapter (Chapter Three § 3.1) I discussed some aspects raised by Mouna's story, in particular with regard to the relationship with the biological father of her daughter and to her former boyfriend. Here I wish to focus on the role played by these relationships and the multiple uncertainties they embed, concerning particularly Mouna's views on pregnancy and abortion and the ways in which she ultimately dealt with them. She was puzzled by her – early – pregnancy discovery and agreed with her boyfriend that they had to find the money to pay for an abortion at a private medical practice. The money they managed to spare was not enough, though; furthermore, some other events took place in the meanwhile, which prevented her from realising her plan. Notably, she was compelled to visit her family to celebrate the end of Ramadan.

Afterwards she went back to the town where she was studying and living and found a private medical practice where abortions were done, but the doctor told her she was already three months pregnant and “it was already too big and it [having an abortion] might have been dangerous”. Hence, she had no other solution but to keep hiding herself in that town, waiting to give birth and – as she thought at the time – to give the baby up for adoption. Mouna turned to a local women's association only in the last month; once having given birth, she decided to raise the baby, thus she was sent to a specific association for unwed mothers in Casablanca, where she immediately headed. She had even thought of abandoning her baby, i.e. giving her for *kafala*, but she said that she changed her mind after having seen the baby, unlike the biological father who did not want to be reached. On the other hand, Mouna's

former boyfriend – with whom she had argued and split up before meeting her baby’s father – was still in touch with her and had asked if he was the baby’s father. Mouna stated that if it had actually been so, “everything would have been different” and that he would not have denied his paternity, because they had been in love. From the initial plan to raise money to have an abortion and to resume to her ‘normal’ life as a student, Mouna realizes that she had to cope with the birth of her baby and with the fact that she would not be supported by the baby’s father, while – at the same time – she would have to hide from her family and acquaintances. The various contingent factors which prevented her from having an abortion were rethought by Mouna on the basis of her current situation as an unwed mother, who does not regret her choice either of interrupting her pregnancy nor of renouncing maternity, as she is willing to raise her daughter striving to be – what she calls – a “good mother”, in contrast – she says – with those who abandon their children, who she bluntly casts as “bad” mothers. The themes which emerge throughout Mouna’s story help reflect also on Bouchra’s. Indeed, Bouchra – who I already mentioned in chapter three § 3.1 – is also a twenty-four-year-old former university student who left her hometown in order to give birth to her daughter in Casablanca. She did not think she could get into “that trouble”, that is also why she acknowledged it quite late, around the fourth month. Even if she did not menstruate – she did not “see the blood” – she thought that was due to some other cause. If she had found out the ‘true’ cause from the beginning, she says firmly, she would have “taken it off”:

“In my hometown *l-bnat* know the doctor very well... I can tell you his name... There is no other doctor like him... who does *l-‘amaliya* [abortion] until the seventh month! I know many girls who have been there – they were fellow students. I didn’t tell them my problem, I didn’t want them to know about it. The surgery is *very* expensive: 20.000 *dirham*... 10.000... 10.500... *ça depends*. Girls sometimes are helped by their partners, for example they sell their motorbike, some other times they ask friends for help²⁶¹ ...” (Bouchra, November 2011).

²⁶¹ A similar episode – in which a group of friends raised money for the same reason – was reported to me by a male acquaintance.

Hence, in Bouchra's view, time and money – or rather its lack – were decisive in determining whether she would have the baby or not; as she argued while smiling and breastfeeding her newborn, she gave birth even if it was not her choice. Yet, she had to face the new situation, in which she had been scolded by her mother and received neither recognition nor support from her former partner either.

1.3 Pregnancy disruption: contingency and ambivalence

As it emerges from the picture that I have sketched out, money and other contingent factors considerably inform the girls' itineraries and particularly the ways they act upon discovering their pregnancy. The intertwining of such constraints also emerges from Hajar's experience (discussed in Chapter Three § 1.2). Further elements of her story add to the understanding of the economy behind the reality of illegal abortion in Morocco.

“I stayed at home at my parents until fifteen days ago...*mabaynsh bezaf* [my belly was still not visible], it was not a problem; since I was still not sure whether I was pregnant or not I did the test at the pharmacy and then an ultrasound at the sixth month at a private doctor. Everybody fears, I also feared I could get pregnant but I didn't do anything... I know you can buy the pill... but you don't think it can happen to you. I had had [boy] *friends* before... but I was still *a girl* [virgin]. I didn't think of getting married, I didn't think of virginity... most [girls] think of being virgin until marriage. I didn't want to get pregnant anyway. At the beginning I thought of having an abortion, I went to Rabat, to El Jadida... I travelled a lot. In Casa I didn't know doctors who could do that. When I was six months pregnant, I found a doctor who told me he could... but I was asked 5 million dirham²⁶²! Since I was only two or three months pregnant, being an eighteen-nineteen year old, doctors in Rabat didn't want to do anything because nobody accompanied me and I had no authorisation from my mother,

²⁶² The sum she was asked was probably very high, but it is unlikely that it was up to five million dirham.

for example. It's not hard to find those doctors [who do medical abortions], but you can't ask around a lot..." (Hajar, October 2011).

While for Hajar – living in a big city – moving in search of solutions in Casablanca and in nearby towns was relatively easy, Chayma did not have the chance to do so, because of overlapping financial and family constraints. Chayma, in her late twenties, from Southern Morocco, had recently come back to her hometown²⁶³, as she started to suspect that she was pregnant. She told me about the sexual violence that she had experienced while she was still far from home, working on a farm. Nevertheless, that painful experience pushed her to return home, where she discovered that she was pregnant: as I anticipated in the previous chapter, she emphasized that the very moment of the discovery drove her to despair – she told me she had even thought of committing suicide. This happened when she was already four months pregnant; she stressed she had almost nobody to rely on, because her mother had died several years earlier²⁶⁴. She did not want anybody to know that she was pregnant, so she turned to an acquaintance, a woman who had been working in Casablanca²⁶⁵. Then she went to a private clinic in her hometown and asked for a surgical abortion – for which she used the French term “curettage” – but the doctor told her “it was too big” and – allegedly – asked her fifty thousand dirham to carry out *l-'amaliya* – the surgery. Therefore she renounced and stayed at home, wearing a tight *semta* – a belt – which prevented her belly from growing; she resisted until the seventh month of pregnancy, when she headed to Casablanca, justifying this with the need to undergo knee surgery.

Hence, the matter that Chayma discovered her pregnancy only after four months, shows how time, contingency and – ultimately – financial constraints hindered any

²⁶³ I dealt with her story in chapter three, § 3.2.

²⁶⁴ As I explained in the third chapter, the fact she had lost her mother added to the other factors – for instance, the loss of her husband, the stressful situation with her father and his wife, the need to support her daughter financially - which ultimately pushed her to leave and look for work elsewhere.

²⁶⁵ Chayma probably mentioned this detail to explain why she thought that woman might be able to help her: the fact she had been to the big city was the reason why she assumed her acquaintance knew how to deal with that sort of issue.

plan of having an abortion. Yet it is noteworthy that one of the central features which had prevented her from undergoing a surgical abortion is that she had been asked a huge amount of money, that she would have never been able to afford²⁶⁶ – so she did not even start collecting the sum of money she had been asked for at the clinic. As discussed in the third chapter, Chayma suspected she would give birth to twins – she could not prove it, as she could not afford an ultrasound scan either; Nawal, who subsequently met her at a charity told me – without knowing I knew her – about Chayma’s twins, who were born at the beginning of Ramadan that year²⁶⁷.

Before giving further ethnographic insights into the girls’ approaches towards, attitudes to and perceptions of abortion and into the resources they mobilize to pursue that goal, I shall reflect on some elements which have already emerged from the cases presented above. The great familiarity with the issue of abortion and with the different methods available ‘on the market’ is certainly to be noted. Talking about a market when dealing with the issue of abortion in Morocco is clearly not a coincidence: the examples I made help delineate the economic dimension underpinning this practice, which cannot be understood without taking also its other – gender, social, moral and religious – features into account. The last examples I made show in particular how the fact that surgical abortion is illegal and clandestine engender multiple consequences, such as the need to have a sufficient amount of money available within a relatively short lapse of time.

However, contingency is not limited to money and time, but also has to take space into account, that is – sometimes – the need to travel to seek doctors or different practitioners – herbalists or midwives, for instance – outside one’s own hometown. The above stories refer mainly to girls who seek surgical abortions: as I will sketch out below – and as shown by Latifa’s and Ikram’s stories at the beginning of this section – a variety of local, non bio-medical practices are also performed before or as an alternative to surgical operations. As I shall elaborate on, those non-biomedical practices are not always to be conceived of as fully intentional abortion

²⁶⁶ Chayma was widowed and had a daughter, so the money she earned was supposed to finance her older daughter’s education.

²⁶⁷ Nawal added that the twins were “one black and one fair-skinned”, which she found surprising and weird.

attempts as – in virtue of their characteristics – their outcome might be uncertain. The reasons why women recur to these kinds of practices are diverse, yet their cost – lower than surgical abortion – is the main factor driving many of my informants towards *l-‘attar* – the herbalist – in the first place. Yet, the apparent availability of such products and resources should not be misleading: indeed, the expenses that some of my informants reported to me are anything but low. They are certainly not as expensive as the ones required by biomedical doctors, but – with travel expenses, repeated visits and the purchase of different products – their prices might increase.

Therefore, the need to find money and available practitioners within a certain period of time – to allow pregnancy dissimulation – urges girls who rely on ‘biomedical’ methods to earn and spare as much money, as rapidly as possible. On the other hand, girls who turn to herbalists, might have to spend smaller sums of money, although for repeated – and sometimes vain – attempts. Hence, the overall financial efforts²⁶⁸ mobilised by young women to interrupt their pregnancies are worth noting in that the systematic exchange of money is at the core of all attempts made with different sorts of practitioners. Whether it deals with ‘traditional’ or with ‘biomedical’ practices, they both hint at the processes of commoditisation of resources that are – or were – otherwise prerogatives of female local practitioners, like a *qablat* or a *mra kbira* (Jansen, 1987; Larguèche, 2000) as repositories of authoritative knowledge (Davis-Floyd, Sargent, 1997) of birth and the domain of fertility and its regulation. Knowledge and practices concerning women’s bodies, sexuality, virginity and fertility are not dealt with and silenced within an enclosed gendered sphere based on relations of kin and mutual trust, but are rather bargained and monetised.

Due to its economic dimension – which certainly does not provide an exhaustive comprehension of the question – other aspects regarding the abortion issue and its social construction in Moroccan society have to be considered. Notably, symbolic and cultural dimensions weave into the narratives of my informants and orient the strategies they foster whenever they are confronted with the likelihood or the

²⁶⁸ By recurring sometimes to the exchange of sexual relations with money in order to raise money faster – as in the example cited by Younes (Chapter Three § 4).

(proven) occurrence of – unwanted or unexpected – pregnancy, the access to and the feasibility of abortion. I shall deal with the discursive frameworks and the imageries in which girls locate their refusal to interrupt a pregnancy, by connecting their subjective experiences to other biographical details and to destiny as the ultimate horizons in which their pregnancy and the birth of their children could be given meaning. I shall argue, indeed, that these sorts of explanatory frames and modes of making meaning of their experiences are relevant in so far as they suggest the changing and diverse resources girls mobilize over time and across specific “vital conjunctures” (van der Sijpt, 2012: 86), such as when they – suddenly or finally – realize that they will actually give birth. Discourses around ‘God’s will’ and fate, indeed, might not emerge until other options have been weighed upon – including abortion attempts. The examples which follow highlight that in some other cases, instead, they resist their relatives’ will or their partners’ pressures to persuade them that abortion is the only solution or the only feasible option. Whereas some young women may not be confronted with the urge to raise money to pay for a clandestine abortion, members of their families or boyfriends might provide the amount of money required. Nevertheless, as I am going to illustrate with the following example, in such cases other and more complex arrangements contend with the mere financial availability provided for undergoing a surgical abortion.

This point is raised for instance by the story of Dounya, who I got to know only indirectly: I met her several times, but only during formal or group activities of the charity she was supported by. The personnel of the charity often took her case as an example both during individual meetings and – anonymously – in public and strongly mediated events. The reason which made her case particularly interesting in the eyes of the charity which took care of her and her child was exactly that she fled her father’s home after he tried to persuade her to have a surgical abortion, for which her father was willing to pay. Dounya firmly refused her father’s plan because she intended to give birth, even if she knew that in so doing she would have probably damaged her relationship with her family. Her father insisted on paying the doctor because he did not accept that his daughter was having a child, to whom she would give birth out-of-wedlock and who would

hardly be accepted within the household either. Thus, Dounya left her hometown and went further south to Casablanca.

The goal of the charity was to facilitate the reconciliation between Dounya and her father, therefore the social worker in charge was particularly proud as, during a visit home – which social workers actually took part in – Dounya’s father seemed moved when he saw the child, showing signs of forgiveness, which made the charity’s personnel hope for a possible acceptance of the young mother and her baby within the family.

It is noteworthy that these events and peculiarities in Dounya’s story are put at the core of the charity’s discourses dealing with unwed mothers’ rights to raise and educate their children and even more when they seek to demonstrate the girls’ commitments to their duties as “responsible mothers”. Above all, these discourses – and the emphasis put on the cases in which girls refuse the possibility of abortion – are aimed at providing evidence of an alleged “maternal instinct”. In the view of many NGOs’ social workers this would be embedded in their being biological mothers and would therefore guide the girls’ actions and behaviour: the assumption of this innate predisposition underpins the organisations’ claim of the right for unwed mothers to a socially legitimated maternity and to their empowerment, which would ultimately allow them to raise their children “as citizens and with dignity”. These ideas illuminate in my opinion also the attitudes towards the question of child abandonment by unwed mothers and its prevention by NGOs: notably, the claim of the right to raise children as unwed mothers obscures the approach towards women who are willing to “abandon” them²⁶⁹ and especially towards those who have already done it ‘illegally’. I think of a specific episode I encountered when I accompanied NGO social workers to maternity ward: the social worker had to fill in a questionnaire for every unwed mother she found in the hospital and the question of previous pregnancies and child abandonment were included. The young newly-delivered woman answered that she had actually already given birth to a baby a few years earlier, but she had fled the hospital alone afterwards, without leaving any trace. She had already broken into tears as the social workers pressured her with further questions about the engagement in

²⁶⁹ Those who declare it intend to leave the child in an orphanage for a potential *kafala*.

“activities of prostitution”²⁷⁰: “*Fin sakna? Wach katkhurji?* [where do you live? Do you *go out?*]“. The social worker – a woman in her mid-twenties –shook her head and repeated that she was outraged by the abandonment of that woman’s first child²⁷¹. The elements inherent to the discourses and practices of social work and the non-governmental domain account for the conflation of biological and social motherhood when dealing with out-of-wedlock births, whereas women – like the one mentioned above – and other studies²⁷² conducted on these issues shed light on different and contrasting dynamics, which suggest that sometimes women who give birth out-of-wedlock want, or would prefer to “abandon” their babies instead. The tenet of ‘maternal instinct’ is entrenched with another assumption according to which – in some social workers’ advice – no woman would ever be willing to disrupt her pregnancy. To reinforce this idea, the personnel of local organisations often used examples of wealthy women, professionals who had no financial constraints, who refused to interrupt an out-of-wedlock, unexpected pregnancy and turned to these organisations for advice on how to handle maternity as unwed women. The person who made this example sought to demonstrate that even women who are able to choose whether to have an abortion or not – and to negotiate its conditions – did not finally regret their out-of-wedlock maternity. Nevertheless, I argue that these emphatic examples, which ultimately essentialise femininity and women’s innate predisposition for maternity, totally do away with the fact that wealthy women are more likely to have the means – on the one hand – to manage abortion by weighing up the safest²⁷³ places to undergo it and on the

²⁷⁰ “Prostitution” is the term included in the questionnaire.

²⁷¹ While we were talking to the newly-delivered woman, a friend of hers arrived and was also interrogated by the social worker, who insisted that she had already seen her either in a hospital or in the neighbourhood where the NGOs’ office and shelter are situated. The young woman laughed and kept denying that the two had ever met, while the social worker hinted that she might have had a child recently. This was also bluntly denied by the visitor. Then the social worker added that the two women probably lived on commercial sex.

²⁷² Conducted by external (Moroccan) consultants for a local charity.

²⁷³ Although obviously this cannot be generalised: for example, an acquaintance actually stressed that a friend of hers – a well-off professional – encountered several complications following the abortion that she had had at a renowned medical practice, where she had paid a considerable amount of money; her friend was still searching for other doctors to solve

other, to have access to the financial resources required. Finally, well-off women might find it easier to manage potential out-of-wedlock motherhood in their social entourage, hence motherhood out-of-wedlock is more likely to emerge as a choice rather than as a constraint²⁷⁴.

Nevertheless, the accounts proposed by social workers often dismiss the issue of abortion in general and of unsafe abortion (or unsafe abortion attempts), which are mostly practised by poor women – among which their beneficiaries – as a non-priority because they are confronted with what happens afterwards, notably with the risk of child abandonment, the need to reconcile girls with partners and families and to provide work-placement for women. A social worker clearly stated that their assistance and support was actually intended to “take maternity out of the mother”²⁷⁵ (Social worker, May 2011). Coherently, the charities’ personnel frequently represent hospital birth as the moment in which previous options for *kafala* disappear as soon as women see and hold their babies. Obviously, this kind of narration and representation conforms to the charities’ goal of preventing the of

her problems. My acquaintance aimed to underline that in the context of illegality, financial resources do not necessarily grant better outcomes and that especially unpredictable events and complications are threats for women of all socio-economic classes: “Every social category is involved... a couple of friends of mine went to a *sha’bi* neighbourhood to see a doctor, another [middle-class] friend of mine was not divorced yet and the doctor asked her for an authorisation from her husband in order to perform an abortion; another prescribed her a medical abortion which went really bad; medical abortion must be available, because it can be used in cases in which women risk dying from other methods. You can’t rely on doctors, but you are ready to believe anything they say” (personal communication, October 2012).

²⁷⁴ In regard to this point, it is to be noted that biological, out-of-wedlock maternity does exist also among women of higher social status than my informants: I have not dealt with those cases directly, but friends and acquaintances reported cases of women of the *bourgeoisie*, with considerable financial autonomy, who expressed favourable opinions towards single motherhood. Besides, Moroccan law allows *kafala* for unmarried females, which thus constitutes a further – non-biological – way of fashioning single-women motherhood. It is to be underlined, however, that the understandings and the formal status of these forms of motherhood definitely differ, whereby distinctions stem from moral considerations derived from the kind of maternity and at the same time from women’s socio-economic status. It can be argued that a single woman and a wealthy professional would not be designated with the term ‘*umm ‘asiba*’ employed for the beneficiaries of charities.

²⁷⁵ “*Faire sortir la maternité de la mère*”.

abandonment of newborns, along with their promotion of a socially acceptable imagery of unwed motherhood. Attention to these aspects is also the basis for the reflection on local '(bio)ethics' that I will outline further in this chapter: in taking into account these discourses and practices, stress is to be put on the fact that charities – their members, social workers and volunteers – foster a register based on the girls' immediate and implicit attachment to their newborns, infants or 'children-to-be' (when still pregnant) by emphasizing their normality or rather the normality of this kind of motherhood. Thus, the latter is not represented as an unwanted pregnancy, whereby the right "also for *these* [unwed] mothers to give birth and to raise their children", is staunchly claimed.

This rhetoric thus reverses the social construct of unwed motherhood and out-of-wedlock birth, which is otherwise assumed to be 'taboo' and seeks rather to include it among socially – and religiously – accepted forms of motherhood. It is to be noted that in the past decade some of these charities have been accused by some *imam* who allegedly claimed that helping unwed mothers was like "encouraging prostitution". Hence, I think that the ways in which these charities' pursue their mission are simultaneously aimed at rejecting potential accusations of being against 'Islamic values': engaging for the cause of "illegitimate" children seen as the main victims of society and doing this also with reference to the framework of universal human rights is not considered at odds with Islam. Furthermore, their specific interpretations and uses of an Islamic frame of reference is rarely connected to 'pro-life' or 'right to life' local discourses – unlike other actors and organisations within Moroccan civil society. In order to start delineating the different – and sometimes contrasting – positions concerning abortion in Moroccan society, it is to be highlighted that organisations focusing on unwed mothers – in most cases and in most public declarations – call for the decriminalisation of abortion only in the cases of rape and incest, let alone those which endanger women's health or their life; they generally do not strive for the generalised decriminalisation of abortion, based on notions of deliberate "choice".

Nineteen-year-old Wafae's narration is particularly insightful for some ambiguities concerning the question of abortion in the girls' point of view: while talking to me

in fluent French about herself and her life as a high school student, about her friends, boyfriends, young couples and the issue of marriage and the influence played – according to her – by families and the boys’ mothers, virginity and finally contraception, she mentioned the fact that none of her female friends used contraceptives but girls usually look for gynaecologists “if they are in trouble” – i.e. they seek an abortion.

“It’s rare [that girls use contraceptives]... according to my friends... A girl I met in a café told me she was looking for a gynaecologist. I even helped her to find one and I gave her the money to pay him, because the girl had no money, she didn’t know anything... Well, everyone knows that there are gynaecologists who do *that*... I think *all of them* do that. In my case... Even if I knew from the beginning that I was pregnant, I wouldn’t have done anything at all. I *couldn’t* do anything: I couldn’t kill. In Arabic [we say that] it’s *haram*. It’s happened to me²⁷⁶, I have to accept it. When I was pregnant, even if I took medicines, I always checked if they were potentially harmful during pregnancy and breastfeeding. But, yes... I paid the doctor for the girl I met in the café... Why? Because she had already engaged in prostitution. It was normal for her, but she just couldn’t afford it. After the curettage I didn’t see her anymore (before I saw her quite often)” (Wafae, October 2011).

Before reflecting on the thick content of Wafae’s account of her experience, which encompasses her overall views on gender, sexuality and premarital relations, I shall make a premise about her socio-economic status, which – as far as I could understand from the details she shared with me²⁷⁷ – may be quite different from

²⁷⁶ Wafae told me that she had got pregnant after having been raped by three men.

²⁷⁷ I have to make clear that this information as well as other details and elements of Wafae’s story have to be read and interpreted carefully and that ‘factual’ information may not correspond to her actual situation. However, the kind of discourse she builds and the type of details and references she draws upon suggest Wafae’s socio-economic status is higher than that of most of her friends at the charity.

that of most of my other informants. The fact that she was attending the final year of high-school – which she did not finish because of her ‘trouble’ – does not distinguish her from other girls I also met at the charities, yet she was particularly fluent in French and told me her mother had a leading position in another women’s organisation in her hometown – one of Morocco’s main cities. When she told me that she had been to her general practitioner – a woman – at seven months pregnant, she then specified it dealt with a friend of her mother, to whom she told “everything”. Wafae claimed this was the first person who knew her story – except the gynaecologist, where she had been three months earlier, when she discovered that she was pregnant. Her mother’s friend, however, could not do anything for her, apart from contacting a local association, which – she said – is linked to one of Morocco’s main political parties. The problem was that the head of the association was actually Wafae’s mother. Therefore Wafae stated that her mother could not do anything for her:

“Everybody knows her [her mother]... I couldn’t [ask for her help], no... And she cannot do anything for me. She didn’t even want me to keep my daughter – ‘you can’t leave the whole family for a baby girl! You cannot leave home like this...!’, she told me. Even if she knew the constraints faced by women – not just because of her work – rather because my father died fifteen years ago” (Wafae, October 2011).

These details and Wafae’s plans for the future – pursuing her studies, finding a job, renting and then buying a flat ‘à credit’ in Casablanca – might suggest that she came from a relatively well-off social milieu, besides the fact that she explained that the doctor was a friend of her mother – a detail which, if true, suggest Wafae’s *bourgeois* social environment and might shed light on her expectations about her studies, career and income. She had expressed these views also when talking about her former boyfriend, who – after an alleged five year relationship or ‘friendship’ – wanted to get married; whereas Wafae claimed she wanted instead to continue her studies and to find a job, adding that she did not want to have extra-marital sexual intercourse either. She ascribed her conviction on the one hand to her mother’s

“strict” education and on the other to “Moroccan mentality” according to which – she argued – “guys have sex with girls and then leave them”.

All these elements might also shed light on Wafae’s discourse on her pregnancy and on her views on abortion. Notably, I argue that the story of the allegedly unknown girl met by Wafae in a café in her hometown merges with Wafae’s own story or – if not – that she draws on details of someone else’s story to make sense of her own as well. I argue in particular that the role Wafae claims to have played – giving the other girl the money to pay the doctor – sets some layers of difference between herself and ‘the other girl’.

First of all, the nineteen year-old shows she could afford helping that girl financially, presenting the latter as naive and unaware of ‘how things go’; secondly, she states firmly she would not have had an abortion herself maintaining that it is illicit. Then, Wafae makes clear that what could appear contradictory is instead coherent, by setting a moral cleavage between the girl who – she states – had practised prostitution and for whom abortion was presented as normal and subject to mere financial and technical constraints and herself. Moreover, she emphasized that she had accepted her pregnancy, that allegedly resulted from sexual violence against her active involvement. Hence, her narrative has to be rethought in relation to the script of “sexual negation as the main sexual narrative” (Bakare-Yusuf, 2013 : 37) that we questioned in the previous chapter and calls for further attention, for it sheds light on the imagery of victimhood and violation as “foundational” (ibidem: 36) in the stories of some of these young women as sexual beings. Wafae – whatever the actual events at the origin of her pregnancy – upheld the claim that she had not breached the boundaries of licit practices. Thus, the moral distinctions sketched out by Wafae – in the specific context of a conversation with me within the shelter she was living at, with her newborn baby – embed in my opinion many ambivalences regarding the issue of abortion and – simultaneously – highlight the tensions which shape contested ideals of femininity in relation to sexuality.

Notably, I refer to the fact that Wafae defines abortion as *haram* only when referring to herself and to her experience, which she casts as conforming to social and Islamic moral values and that had rather been upset by the violence she had been victim of. At the same time, she found no contradiction in affirming that she

had financed the clandestine abortion of a girl who she hardly knew, conceiving of this practice – in this particular case – solely as a ‘technical’ issue, i.e. a matter of money, given the fact that that girl allegedly exchanged sex for money. Therefore, in Wafae’s view, the other girl’s conduct already accounted for the commodification of her body and sexuality. I ultimately argue that in Wafae’s eyes, or at least in the account she gave to me, a notion like *haram* is situational and shaped by moral criteria referring to contrasting views on and potentially problematic ways of living female sexuality. Besides, it is not clear if the term “prostitution” used in French by Wafae was simply a term for dismissing and stigmatising her acquaintance’s sexual relationships. However, while Wafae casts abortion as a *haram* practice, she does not understand it in absolute terms: this is definitely noteworthy, if we are to analyse local debates on abortion and the emergence of local pro-life anti-abortionist positions.

Rachida, who was also a beneficiary of a charity, expressed similar views on the termination of pregnancy, even if for different reasons. As mentioned earlier (in chapter three), Rachida’s situation had actually been described as slightly easier than those of other beneficiaries, because she claimed that her partner had started the legal marriage procedures through the charity by which she was assisted. Rachida firmly stated that she had never thought of ‘taking it off’: “*ana a’ammarni mabghit nhaidu*”, that is ending her pregnancy, even if she had found out she was pregnant in the first weeks. Despite the mistiming, she was happy to be having a child. She added that she had never talked to anybody who had done “the operation”, but she had “heard about it, even on TV”.

Unlike Rachida and Wafae, Alya – whose case was also introduced in the third chapter – told me that if she had discovered her pregnancy at the very beginning – and not after more than five months, as it happened – she would have done “something”, that is she would have sought to end that pregnancy. In her case it was also ascribed to sexual violence, that she had been victim of. Yet, in talking about the discovery of her pregnancy, she explained that she had a boyfriend, had no sexual intercourse with him – hence, took no contraception. She added that her pregnancy had been, in any case, “God’s will” and that she wanted to give birth. Hence, Alya’s narrative oscillates between her reliance on God’s will, whatever the

conditions in which she got pregnant, and her statement about the potential recourse to means of ending pregnancy.

§ 2 Prescriptions, interdictions and tacit recognition

2.1 Practical moralities

As highlighted by the cases illustrated so far, for many young unwed mothers the question of the access to (safe) abortion seems not even to emerge: this is the case of late pregnancy discovery, because most women are aware that after the first trimester any kind of domestic attempt of ending pregnancy is either ineffective, dangerous for oneself and potentially harmful for the foetus. Besides – even in the case of early discovery – financial constraints are described as decisive, although there may be other dynamics influencing women’s reproductive trajectories. Hence, women rather voice “practical moralities” (Seif El-Dawla et al., 1998: 99), i.e. the multiple events, coincidences, practical realities and unpredictable factors which engendered their current situation and hint that a wide array of conditions and forces beyond their intention ultimately give meaning to the birth of their children. Emphasis is particularly put on the events occurring when they were ‘at the edge’, i.e. when they were still unsure or ambiguous about a potential pregnancy or when they were looking for solutions – including ways to terminate pregnancy – but the flow of time and external forces were finally crucial.

However, most girls refer to the possibility of undergoing a surgical abortion – or pursuing the same goal by other means – as a potential turning point in their trajectories. Whatever the experiences they had had, the existence of different methods and practitioners is widespread among all girls met in the field. A significant example was given by the girls themselves during a group meeting that was labelled as “sexual education” – *terbiya*²⁷⁸ *l-jinsiya* – by the local organisation who had organised it for its own beneficiaries.

²⁷⁸ Bargach reflects on the semantic field of the term *terbiya*, which refers to “socialization procedures” and to the inculcation of ideology, as “microprocesses of power” (Bargach, 2002: 78), notably in Moroccan dialect “*trabi* [is] an infant. *Trebi* and *terbiya* [mean] to take care of, to cater, to chastise, to nurture, to inculcate manners-decorum (norms of behaviour and propriety), to hit” (ibidem: 78).

One of the issues touched upon by the social worker in charge was actually abortion, even if she did not raise it directly: she started by talking about pregnancy and childbirth, then about contraception and in general about methods of avoiding pregnancy, but she left space for the girls' interventions and asked broad, open questions. Hence the issue of *l-ijahd* – abortion – came up by itself and it became evident that all the girls – approximately twenty – at the meeting had at least considered that possibility, but it was either too late or they had no money; otherwise, they had attempted abortion with “traditional” – *taqlidiyyn* – methods. Among the girls who had discovered pregnancy at a very advanced stage, there was the widespread conviction that if they had found it out earlier instead, they would have done something to avoid giving birth. Nevertheless, many of the participants in the meeting pointed to the lack of financial resources as their main constraint to accessing particularly ‘medicalised’ abortion – i.e. at private medical practices – and emphasized the inefficacy of the so called traditional – notably, herbal – methods used²⁷⁹.

I found this example particularly insightful in so far as it highlighted the girls' awareness about the issue of abortion and about its informal market in Morocco: moreover, the fact that this discussion took place in a collective context – even if not among ‘peers’, as the social worker led the discussion and I attended the meeting – allowed nevertheless an overview of the question, whereby experiences and points of view were shared with each other often by referring to this issue and to one's troubles with irony. The search for money and for doctors was presented as banal, something that girls sooner or later would have had to face, despite their – simultaneous – awareness of the risks which this practice might have encompassed in a situation of illegality and clandestinity; they were simultaneously aware of the potential hazards entailed both by traditional (or domestic) and by surgical methods.

When touching on the same themes – unwanted pregnancies, women's health and unsafe abortion – with a health professional working in one of the main hospitals in the country and in the private sector, I was told that some of her married patients –

²⁷⁹ The approaches fostered by NGOs whose activities target unwed mothers and young women and their activities focused on sexuality and sexual health will be discussed further in Chapter Five.

less nowadays than in previous decades – said they did not know that abortion was illegal in Morocco. As remarked also elsewhere (Jansen, 1987) such episodes may be seen as emblematic of a moral ambiguity towards these practices, especially if they concern the first stages of pregnancy. However, the doctor I met made clear she had to explain to her patients that inducing abortion is forbidden “for any woman”²⁸⁰, irrespective of her marital status. Although early literature on these subjects (Mernissi, 1975) already give an account of the plurality of practices fostered – especially by poor women – to induce abortions despite formal interdictions, this detail adds to the perception of this practice as banal and widespread, beyond norms and laws, not just among teen-agers and young unmarried women. The gynaecologist in question, therefore, harshly condemned the medical practices whose work consists mostly of clandestine²⁸¹ abortion²⁸². Jansen (1987: 150) moreover, explains that some women based their “relative acceptance of abortion in the first stage of pregnancy” (ibidem) on religious arguments and claimed the doctor did the same: indeed, although there is no unanimous advice on this issue, some interpretations of Islamic texts [...] state that abortion in the first forty days of gestation is allowed on the grounds that ensoulment has not taken place yet. Usually, as far as I could understand in the field, doctors who perform surgical abortion restrict it to the first trimester for safety reasons and otherwise ask for larger sums of money.

Besides the insights provided on the perceptions of abortion and its ‘boundaries’ by the participants, the sessions on sexual education at NGOs are in my view noteworthy for several reasons: first of all, they constitute a pedagogic attempt of speaking overtly of sexuality among young women as so called ‘peers’ within a non-governmental setting. I argue that by means of this sort of activity, these

²⁸⁰ See § 4 in this chapter.

²⁸¹ As I will discuss throughout this chapter – the issue of clandestinity needs to be questioned, given the social awareness about the practice of abortion in many private practices, clinics and even public hospitals.

²⁸² The reluctance of the doctor to deal with this issue was counterbalanced by her urge to talk about and to denounce the condition of “abandoned children” and children “without a father” in Moroccan society, as she viewed them as the ultimate and main “victims” of out-of-wedlock births.

organisations make explicit that not only do they take care of – and hence exert a form of control on – unmarried women’s childbirth and their infants’ health, but they further strive to ensure a follow up through strategies aimed at their ‘empowerment’. The latter, particularly activities dealing with “sexual education”, are aimed at eliciting a set of discourses on one’s sexual ‘beliefs’, behaviours and misconceptions, which emphasise individual responsibility and awareness – for instance – of what sexual intercourse is, how pregnancy occurs and how contraception methods work, so that young women do not encounter further ‘problems’, i.e. unexpected, ‘mistimed’ or unwanted pregnancy – while girls are bluntly and explicitly labelled as “recidivists”, should they get pregnant again²⁸³.

A similar approach – hinting at the beneficiaries’ education on their responsibilities – frames the pedagogical meetings on primary health and hygiene that I have attended at other charities²⁸⁴. While on the one hand these initiatives infantilise the beneficiaries, stress their naivety and assume their ignorance regarding their bodies and sex overall, on the other, their beneficiaries’ bodies are further sexualised. This happens in specific ways, which – I argue – rest upon the assumption that at least some of these girls may sooner or later engage in relations with one or multiple partners or practice some form of commercial sex. This view was actually expressed by the same social worker conducting the group discussion on “sexual education” during one of the first times I accompanied her to the maternity wards of Casablanca’s hospitals: she disclosed her deep deception about the action of NGOs and claimed that follow up activity was necessary, given that in her opinion once their support is over, “prostitution”²⁸⁵ – alternated with menial jobs – was very likely to be practised by most ‘former beneficiaries’ to cope with their daily needs.

I also deem that the very fact that this sort of activity is organised within a non-governmental setting is not to be seen in contrast either with state policies, nor with

²⁸³ Moreover, this would not entitle them to being supported by – most – charities for a second or third time, unless they manage to conceal they had already had children; whenever a woman gets pregnant when she is already benefiting from an NGO programme, she is compelled to leave it.

²⁸⁴ These will be discussed in Chapter Five.

²⁸⁵ She used the French term for it.

other local NGOs' activities whose target is youths and sexual and reproductive health along with the prevention of sexually transmitted diseases. The latter²⁸⁶ – which do cooperate with state institutions, such as the Ministry of Health, and with international NGOs – distinguish themselves from NGOs “for unwed mothers”, as an employee explicitly said to me, and their goal is the education of youths, sometimes cast with the category of “*ado-jeunes*”²⁸⁷. These organisations – founded after the establishment of the early national family planning programmes in the late sixties (Mernissi, 1975) – have subsequently fostered the conceptual tools of “sexual and reproductive health” (“*santé sexuelle et reproductive – SSR*”)²⁸⁸; interestingly – or rather, ironically – their being apparently overt about sexuality among youths has nevertheless been defined “*publique et pudique!*” (“public and [yet] modest”) by a prominent member of an organisation for unwed mothers, who – in a private conversation – suggested that the provision of mere information on contraceptive methods, for instance, is not the key to contrasting unwanted – and out-of-wedlock – pregnancies nor the spreading of abortions among young women. The local emphasis on youths in state policies, as noted for different countries (Tremayne, 2004) – does not correspond to the inclusion and acknowledgement of youths' sexual and reproductive experiences in official data (Tremayne, 2004; Seif El Dawla et al., 1998: 83). Moreover, this apparent invisibility of sexuality turns rather into its being *flou* (Cheikh, 2012) : as noted among others by the Moroccan sociologist Dialmy (Dialmy, 2005, in Cheikh, 2012), while the State criminalises extramarital sexuality (art. 490), to a certain extent it also legitimises it through various adjustments, notably through ‘youth centred’ health campaigns for the prevention of sexually transmitted diseases and

²⁸⁶ Especially at the beginning of my fieldwork I took part in some of the activities – workshops, group pedagogical meetings and conferences – organised by this organisations, whose activities are based on the IEC – “information, education, communication” - approach and on the involvement of teenagers and youths as ‘peer educators’; these local organisations work under the umbrella of international organisations such as the International Planned Parenthood Federation (IPPF).

²⁸⁷ “Adolescents and youths”.

²⁸⁸ The concept of “sexual and reproductive health” as such was formulated at the Cairo International Conference on Population and Development (ICPD) in 1994 (Unnithan-Kumar, 2004), as well as the notion of “reproductive rights” (Petchesky, Judd, 1998).

HIV/AIDS provided directly by State-lead structures or through the intermediation of non-governmental actors benefiting from the support of and/or cooperation with public health²⁸⁹. This sort of adjustment seems to counterbalance the State's official interdictions with a more nuanced or tacit 'approval' which – nevertheless – explicitly backs important initiatives of prevention and screening – such as in the case of HIV prevention campaigns. Hence – coherently to what happens in society at large – these sexual politics informally accept and 'banalise' (Cheikh, 2012) 'illicit' sexual practices and 'non-institutional' sexualities.

Besides, one might argue with Tremayne that any form of out-of-wedlock sexual activity for young people is considered “‘pathological’ and a real threat to the stability of society by conservative forces” (Tremayne, 2004: 196); whereas, sexual activity at an early age – even within marriage – might be perceived as problematic within modernising policies (ibidem). In her words: “Becoming sexually active at an early age under the weight of tradition and religion is deemed ‘pathological’ by modern standards, as is promiscuous sex because of the health dangers it represents” (ibidem: 196)²⁹⁰. This is particularly true for the Moroccan context, where early marriages and pregnancy of underage girls²⁹¹ are often cited as examples of pregnancies ‘at risk’²⁹² from the point of view of public health and women's associations, whereas – on the other hand – early marriage is seen by other social and political actors²⁹³ as a potential solution and ‘cure’ for pre- and extra-marital sex and out-of-wedlock pregnancies seen as social plagues, and

²⁸⁹ See also Chapter Five for a broader discussion on these issues.

²⁹⁰ Hence, this author further argues that planners adopt the compromise of assuming that the under 15 age group is not sexually active and just needs to be educated to be familiar with reproductive functions (Tremayne, 2004:196).

²⁹¹ Girls younger than the legal age for marriage, which according to the 2004 Moudawana has risen to 18 years both for females and males.

²⁹² “Les grossesses précoces ne constituent pas seulement un danger sur la santé des adolescentes, mais elles limitent aussi leur choix de vie. Les grossesses d'adolescentes restent étroitement liées à la pauvreté, à l'inégalité des sexes, à la violence, aux mariages forcés de mineures” [<http://www.morocco-unfpa.org/spip.php?article104>; accessed July 2013]

²⁹³ For instance by some physicians and activists engaged in 'right-to-life' or other women Islamic organisations.

indeed as ‘pathological’. Thus, the domain of sexuality and reproduction – women’s bodies and fertility, more specifically – is reconfigured as an arena in which state policies, “localised and personified institutions” (Unnithan-Kumar, 2004 : 3) – I refer to local Moroccan NGOs, for instance – and broader development agendas intersect.

The fact that the gynaecologist I mentioned, as well as other medical staff and social workers often dismissed the question of ‘clandestine’ or illegal abortion as non-relevant in focusing on the issue of unwed motherhood and out-of-wedlock pregnancies is not contingent. Like the issue of informal and secret adoption, i.e. *trebi* in Moroccan dialect (Bargach, 2002: 77)²⁹⁴ and the traffic of newborns, the practice of illegal abortion has involved over the years the personnel of hospitals either directly or with the role of intermediaries. While discussing the characteristics of the agreement between some hospitals and local NGOs, a social worker told to me for the first time about a particular case which had been discovered a few years earlier, which was emblematic of the reasons behind the creation of such partnerships between public health institutions and local organisations²⁹⁵.

“A few years ago a former nurse at that hospital²⁹⁶ was arrested because... You haven’t heard about this case yet, right? One of our colleagues knew that woman... It was on the news too! Well, that

²⁹⁴ Bargach also speaks of “the gift of care”, it is *at-tabanni* in classical Arabic (ibidem: 77).

²⁹⁵ Our conversation had started with my doubts and questions about the procedures by which unwed women leave maternity wards after birth, then moved on to the involvement of health personnel in unwed women’s deliveries in public hospitals and on the changes occurring in recent years, including the fact that allegedly few unwed women seek to give birth outside hospitals – at home, for instance – in order not to be – potentially – found by the police. The presence of NGOs in – some – hospitals in Casablanca and the campaigns they had conducted against the criminalisation of out-of-wedlock births accounted, according to this NGO social worker – and to other informants – for the importance of agreements and for the collaboration between health institutions and the non-governmental sector dealing with unwed mothers and their children.

²⁹⁶ One of Casablanca’s main hospitals.

nurse employed people to work in a private but illegal, secret clinic based in two flats in two of Casa's wealthiest districts! In that clinic they just did clandestine abortions or assisted unwed women giving birth; some *semsar* [intermediaries] provided the clinics with young unmarried pregnant women willing *to give* their babies [away]. The lady who lead the clinic had established a network with local authorities who allowed the registration of the babies as the biological children of the couples who requested them – avoiding all legal adoption procedures. That lady [the former nurse] had *everything*: even the equipment to cure premature newborns! Of course, the families in search of babies to adopt illegally had to pay... a lot. So that lady basically *sold* babies! Journalists pretended to be couples willing to adopt babies in order to find out what was happening in there” (Social worker, October 2011).

Hence, the involvement of a former nurse of one of Casablanca's most important hospitals in this controversial case opens up the questioning of the role played by health personnel within and outside public health services, since – even if in less systematic and organised ways – other forms of intermediation or explicit involvement have been reported, for instance in regard to the delivery of newborns in maternity wards both to Moroccan and foreign couples.

Whereas with regard to the practice of abortion, recent studies conducted at the national level (Cherkaoui, 2010) have pointed out that in several public hospitals all over the country abortions are actually performed: some current dynamics do not differ significantly from those described in previous decades (Mernissi, 1975) and in different contexts (Huntington, 1999; Seif El Dawla, 1998 – both on Egypt) – so I am not arguing it is a ‘novel’ phenomenon in itself. Indeed, one of the most common practices is allegedly that of inducing bleeding and then heading to the hospitals' emergency room, for the case to be dealt with as a miscarriage. Otherwise – despite the scarcity of official data – induced abortions would be performed in public hospitals also in other cases, which adds to the informal and tacit recognition of this practice also within public health services. In her

ethnography of birth in Jordanian hospitals, Maffi (2013) discusses some cases in which – married – women were ambivalent towards the discovery of their pregnancy, while others openly expressed their refusal and demanded the health personnel's help for terminating it. However, the personnel showed heterogeneous attitudes towards these patients: although also in Jordan – like in Morocco and other countries (Hessini, 2007) – therapeutic abortion is allowed within the first 120 days after conception²⁹⁷ in case of risk for the mother's health or life, it is actually difficult for women to terminate their pregnancy in a public hospital, hence social workers gave those women the addresses of private medical practices where one can have an illegal abortion, whose price was likely to prevent them from having it anyway (ibidem: 187).

These examples – although they stem from a very different context – are still relevant to the cases I examined in Morocco and to attitudes towards pregnancy termination in health services. Indeed, ambiguities towards this practice further blur the boundaries between what is formally forbidden and – instead – widely and informally practiced. Notably, despite the lack of official data, it is estimated that induced abortion is a routine practice mainly in the private sector, but – allegedly – also in the public one, also despite the normative framework. According to estimations, between six and eight hundred abortions are performed every day in Morocco, including both those performed in clinical settings and those performed with different methods. Medical professionals working in the public health sector have recently raised public attention towards abortion as a major women's and public health question in contemporary Morocco, by claiming that its illegality²⁹⁸ is

²⁹⁷ According to the Jordanian abortion law, “the status of a full person is attributed to the child from 120 days after conception” (Maffi, 2013 : 218).

²⁹⁸ Article 454 : « Est punie de l'emprisonnement de six mois à deux ans et d'une amende de 200 à 500 dirhams la femme qui s'est intentionnellement fait avorter ou a tenté de le faire ou qui a consenti à faire usage de moyens à elle indiqués ou administrés à cet effet ».
Article 455 : « Est puni de l'emprisonnement de deux mois à deux ans et d'une amende de 200 à 2.000 dirhams ou de l'une de ces deux peines seulement, quiconque : soit par des discours proférés dans les lieux ou réunions publics;
Soit par la vente, la mise en vente, ou l'offre, même non publiques, ou par l'exposition, l'affichage ou la distribution sur la voie publique ou dans les lieux publics, ou par la distribution à domicile, la remise sous bande ou sous enveloppe fermée ou non fermée, à la

the cause of an array of social and health issues, including for instance hazards provoked by abortion attempts, attempts of suicide or infanticide and child abandonment. The emphasis on such themes is also mobilised to focus on the need to decriminalise this practice and to make it available in public health services in conditions of safety. The founder of a local organisation, whose aim is to contrast clandestine and unsafe abortion as a public health concern, has recently clarified his position on the criteria of the legalisation of pregnancy interruption: he strives for its decriminalisation not only in the cases in which women's health is at risk, but also in case of rape and incest, for girls younger than eighteen, in cases of serious foetal malformation and for women suffering from mental illness. Basing his insights on WHO data estimating that 13% of cases of maternal mortality in Morocco are due or linked to illegal and unsafe abortive practices, this doctor advocates for a broader and more flexible understanding of the category of 'health' and 'risk' encompassed in article 453 of the Moroccan Penal Code²⁹⁹. This article

poste, ou à tout agent de distribution ou de transport, de livres, d'écrits, d'imprimés, d'annonces, d'affiches, dessins, images et emblèmes. Soit par la publicité de cabinets médicaux ou soi disant médicaux, a provoqué à l'avortement, alors même que la provocation n'a pas été suivie d'effet. Est puni des mêmes peines, quiconque aura vendu, mis en vente ou fait vendre, distribué ou fait distribuer, de quelque manière que ce soit, des remèdes, substances, instruments ou objets quelconques, sachant qu'ils étaient destinés à commettre l'avortement, lors même que ces remèdes, substances, instruments ou objets quelconques proposés comme moyens d'avortement efficaces, seraient, en réalité, inaptes à le réaliser. Toutefois, lorsque l'avortement aura été consommé à la suite des manoeuvres et pratiques prévues à l'alinéa précédent, les peines de l'article 449 du code pénal seront appliquées aux auteurs des dites manoeuvres ou pratiques» [<http://adala.justice.gov.ma/production/legislation/fr/Nouveautes/codepenal.pdf> ; accessed June 2013].

²⁹⁹ Article 453 of the Penal Code : « L'avortement n'est pas puni lorsqu'il constitue une mesure nécessaire pour sauvegarder la santé de la mère et qu'il est ouvertement pratiqué par un médecin ou un chirurgien avec l'autorisation du conjoint. Si le praticien estime que la vie de la mère est en danger, cette autorisation n'est pas exigée. Toutefois, avis doit être donné par lui au médecin chef de la préfecture ou de la province. A défaut de conjoint, ou lorsque le conjoint refuse de donner son consentement ou qu'il en est empêché, le médecin ou le chirurgien ne peut procéder à l'intervention chirurgicale ou employer une thérapeutique susceptible d'entraîner l'interruption de la grossesse qu'après avis écrit du médecin chef de la préfecture ou de la province attestant que la santé de la mère ne peut être sauvegardée qu'au moyen d'un tel traitement » [<http://adala.justice.gov.ma/production/legislation/fr/Nouveautes/codepenal.pdf> ; accessed June 2013].

(art. 453) states that pregnancy can be interrupted only for therapeutic reasons, i.e. if the life of the woman is at risk: referring to the WHO's definition of health, this doctor strives for a broader understanding of the notion of 'women's health' by extending it also to mental health and 'well-being' beyond the mere absence of disease.

What is relevant if we look at the perception of abortion in Moroccan society is the stress put by the above mentioned physician on its diffusion on a quantitative level³⁰⁰, which mirrors – in his opinion – a generalised presence and availability of medical doctors who live exclusively on this practice. Even if this doctor's estimations concern mainly the biomedical sector – being his professional domain – he makes similar estimations of non-biomedical abortions or attempts performed especially by poorer married and unmarried women all over the country. This physician also mentioned cases of women turning to public hospitals for alleged miscarriages or heavy bleeding, but did not explicitly claim that in public hospitals doctors performed that surgery on a regular basis. However, most women's insights into the issue of access to illegal abortion concern the private biomedical sector, notably clinics and private medical practices; these may be led by midwives, nurses or most often general practitioners and gynaecologists³⁰¹.

2.2 The clinics around the corner

Hajiba, in her late thirties and childless, spends her days at her parents' house when her husband is away from home. She lives in a small, but rapidly growing urban centre on the Atlantic coast, which enabled me to visit her family quite often at the weekends. On an autumn afternoon, while we were unexpectedly alone in her house, which is usually quite busy, I started to tell her about my *baħth* – research – or “*stage*” – as my fieldwork was often called in French even in *darija*

³⁰⁰ Allegedly between six and eight hundred per day overall – including both “traditional” and medicalised methods. These numbers stem from estimations made by the founder of the above-mentioned organisation.

³⁰¹ As I have previously stated, I carried out my fieldwork mainly in Casablanca, although I have had significant contacts in the social and healthcare domain also in its surroundings, besides an informal network of friends and acquaintances in smaller close-by urban centres.

conversations. Hence, I also told her about the hospitals I was visiting and mentioned that I had met some unwed mothers in the maternity wards. Hajiba who was lying on the *seddari* and had just complained about her headache due to the cold and rainy weather, soon interrupted me and sat up, forgetting about the unfolding of the *mosalsalat* – soap operas:

“You should go... go and see... even here, not just in Casa! In a clinic, just ‘round the corner. If you go there, *you will cry!* You will see so many young girls – every, every day. Girls from this town or from other places. They know that that doctor does *l-‘amaliya* and they pay for it. Yes, they have had ‘affairs’ and that’s the solution. But you know, until I got married... I never never had ‘relationships’! My aunt has already told you about her neighbours’ daughter, right? She has a similar story: she met a guy in the summer... lots of young people come here in the summer...They had a relationship, then he left and after a few months she found out she was pregnant. But she couldn’t do *anything*... I don’t know exactly... anyway, she gave birth to a baby. I think she’s still with her family – probably in the countryside – but she can’t find the father of the baby anymore. *Mskina* [poor thing].” (Hajiba, November 2011).

Despite Hajiba’s emphatic exhortation to “go and see” and despite subsequent journeys to the same town, I had no chance to find proper and covert ways to ask her or somebody else to show me at least where this practice was³⁰². I talked about this conversation to Karima, one of my acquaintances in Casablanca – who also told me about similar clinics, where she had accompanied a friend of hers. Karima remarked that my friend Hajiba seemed to have too much detailed information about that doctor, which hinted she might be involved in his activity, given I had mentioned Hajiba said she was unemployed but had training as an auxiliary nurse. Whatever her involvement in or knowledge of the facts, her insight was

³⁰² However, I made an attempt at another medical practice in central Casablanca, because I had been told it was one of the most well-known for practising clandestine abortions.

emblematic of the social production of moralities around the issue of out-of-wedlock pregnancies and abortion: the fact that the medical practice was visible, close to her home and renowned accounted for what I identify as the ambiguity and the simultaneous normalisation of practices that are broadly considered as forbidden and at the same time relatively available.

Yet, being overt about the existence of such activities, Hajiba immediately nuanced her discourse, which she expressed in very emphatic ways as sorrow for the – only – activity of that medical practice and about the number of girls turning to it on a daily basis, accounting for the amount of money engendered by clandestine abortions. Moreover, given the alleged widespread recourse to abortion among unmarried young women, she also stressed that she – on the contrary – had never even had sexual relations before marriage. She finally gave a thorough picture by mentioning the case of an acquaintance who had given birth outside marriage, by concluding with the – very common expression – “*mskina*” (“poor thing”). Indeed, Hajiba expressed her compassion also for that situation³⁰³, which accounts for the ambivalence expressed by many unwed mothers themselves, both towards abortion and towards unexpected pregnancies.

Afef is one of Hajiba’s sisters and is about twenty years younger. She does not see her as a friend, unlike another sister who – like me – is about ten years older and is a friend of mine³⁰⁴. Afef enjoyed talking to me in English about her – secret – affair with a successful professional in his thirties, whom she referred to as “*amore mio*” – since she had fun learning some Italian; she also talked freely about love and relationships among young people and school friends. We sometimes ended up talking about the troubles some girls – among Afef’s acquaintances – had encountered because they had ‘blindly’ fallen in love. Afef told me she did not know about the medical practice her sister talked about and claimed the girls she knew had no money, but she had heard that some even resorted to toxic products like poison for rats, sold by groceries. Afef claimed those were very naive girls,

³⁰³ Compassion – even if not always understanding – and not always judgement and stigma, towards young ‘*mseken*’ [poor] unwed mothers, is actually an attitude that I have noticed quite often among my friends and acquaintances – some of whom had actually raised unwed mothers’ children.

³⁰⁴ This sister lives in Italy, though.

who “didn’t know anything” whereas she, instead, “always paid attention” and maintained she would never stumble into the same problems.

Karima, instead, described the clinic – in Casablanca – where she had accompanied a friend of hers: “Girls, women, married or not... of any social class were there to face the same problem...” (Karima, October 2011). Indeed, Boutaina, a young woman who I had met in the non-governmental sector, made explicit some of the ambivalences of women’s marital status in the search for private medical practices, by illustrating how being – or claiming to be – unmarried may constitute an advantage when one aims at ending pregnancy:

“I have had two abortions, I paid 2000 dirham each time in a private medical practice in one of Casa’s central districts. In the waiting room there were both married and unmarried women, like me. Once they are there, anyway, all say they are *not* married, otherwise they are asked for their husband’s authorisation [to interrupt their pregnancy]” (Boutaina, November 2011).

Hence, in a situation of formal illegality – whereby a doctor himself could be heavily sanctioned according to the penal code – boundaries seem fluid and a position which is usually of disadvantage in case of pregnancy is reversed rather to its contrary, as – Boutaina claims – unmarried women are not asked for any authorisation. I argue it is noteworthy that married women temporarily play the role of ‘girls in trouble’, drawing on the awareness that – in a condition which is itself illegal – pretending not to have a formal – marital – union constitutes an advantage and guarantees the delivery of the service requested. Another important reflection hinted at by this episode is that – primarily – in such medical practices performing abortions on unwed women is considered less risky than if they were married. Secondly, it hints at a well-rooted routine. It is also fairly evident that in this framework the request of a certificate or authorisation is a formality and that the truth of women’s declarations cannot be verified.

However, even the statement of a difference based on women’s marital status interrogates the implicit differential meanings ascribed to their bodies – whether the operation runs smoothly or in case of hazards, complications or even death.

Boutaina's story neatly highlights that in a condition of illegality the boundaries of safety are increasingly uncertain: before her first abortion – which was a medical³⁰⁵ one – she had sought to induce bleeding with herbal products bought at an herbalist in a *souq*. Turning straight to a doctor for her second abortion, driven by the search for safer conditions, turned out to be far more dangerous, instead:

“I took all kinds of ‘*ashub* [herbs] the first time... but they didn't work. I was scared. I also feared for my health, so after a while I went to a doctor, the same where I went the first time. It's a general practitioner in that boulevard [a central boulevard of Casablanca]. So I took *l-fanid* [abortive pill] this time too. The first time I was one and a half months pregnant. This time I was three months pregnant³⁰⁶. This [second] time I thought I was going to die. After having been to the doctor I came back home, I threw up. Then I started bleeding, but very strangely... like ‘*kebda*³⁰⁷ *dyal hawli*’ [lamb viscera]. Fifteen days later, I was at home alone, I started bleeding heavily. It was like my blood was flowing from a tap and couldn't stop... I couldn't stand up, I couldn't move my arms, nor my legs. I fainted. My neighbours didn't know what was happening to me. Then a girl noticed my door was always closed, so she found me; she went to look for the doctor who did the *curetage*³⁰⁸; the doctor came and took me by car to a clinic... they injected me with *serum*³⁰⁹. After a while I woke up, but I

³⁰⁵ As I will explain below, medical abortion by means of pharmaceuticals is also available in private clinics and practices in Morocco.

³⁰⁶ In the meanwhile she had had a son; she had discovered she was pregnant only at the fifth month, since she claimed she had had her menstrual cycle until that moment.

³⁰⁷ It is worth noting that *kebda* in Moroccan Arabic means also the “seat of love and affection. Like blood, it is a metaphor for unconditional instinctual love, vegetatively embodied” (Bargach, 2002: 79). The author adds that members of the families of adoptive children say “*rebit l-kebda*” to refer to the act of nurturing and educating children, whereas in general it means “to grow to love” (ibidem).

³⁰⁸ She uses this term even if she had had a medical and not a surgical abortion.

³⁰⁹ Drip-feed.

didn't immediately understand what had happened and nobody asked me why I was there. They didn't 'bother' me: the doctor was well-known in the clinic and they didn't cause him any problems" (Boutaina, November 2011).

Boutaina tells the details of this painful experience which could have caused her death, even if she does not know why; she says that the doctor should have explained to her that the pill might have had such effects. A friend of Boutaina, who was with us and listened to her story, argued that the doctor should have told her "*l-dwa*" (medicine or remedy), i.e. how that drug worked, so that she knew how to behave – in general and in case of complications. The first time Boutaina had not had any side-effects nor complications, but the second time – for unknown reasons – she might have died if a neighbour had not intervened. Moreover, it is worth noting the ambiguity of the role played by the doctor: he actually rescued Boutaina by taking her to a clinic, so he apparently took on the responsibility of the complications arisen. On the other hand, he probably feared the potential penal consequences in case of his patient's death or if she was taken somewhere else; or, again, if Boutaina told his name to other doctors or to the police. As Boutaina said, the doctor was actually known at the clinic where she was taken and therefore "had no problems": this sheds light, hence, on a sort of 'complicity' between the doctor and the clinic where he took Boutaina. Moreover – because of current legislation about induced abortion – it was not only the doctor who could potentially be denounced to the police and sanctioned, but Boutaina as well.

In regard to this point, a social worker dealing – on behalf of a local NGO – with unwed mothers who give birth in public hospitals in Casablanca actually told me about the case of a young woman who had been arrested after having been hospitalized because of what had been recognised by a doctor as an abortion attempt. The girl was taken to hospital for heavy bleeding that had allegedly been self-inflicted by a wooden stick that she had put in her vagina. Therefore, as remarked by this social worker, it may well happen that girls are arrested after having given birth in public Moroccan hospitals as well as after having attempted to induce an abortion. During my fieldwork with NGO social workers in some of Casablanca's maternity wards I also got to know a similar case directly: a girl had

just been hospitalized for what had been presented as a miscarriage, as she was a few weeks pregnant. Since she was not married, the health personnel told the social worker to go and see her, even if ‘technically’ she was not an unwed mother. The social worker explained to me that it was still unclear whether it was the patient who was in charge of the hospital fees or if the NGO might play a role and support her for fees and for bureaucratic release procedures. Besides, she said, it had to be made clear whether it dealt with an abortion attempt or with a “real” miscarriage: the social worker mistrusted the girl because her tale sounded very vague, as she claimed, for instance, that her partner – the potential biological father – had gone to France and had disappeared even though he had promised he would marry her and provide her with emigration documents.

The newly-hospitalised patient maintained she had no mobile phone to be reached at by the NGO, but – after repeated requests by the social worker – she was obliged to give her the phone number of her mother, who had arrived in the meanwhile from the other side of the city. Hence, overlapping and diverse forms of control over the bodies and on the movements of young women in relation to their sexuality and reproductive experiences emerge, whether they deal with the direct intervention and surveillance of the hospital staff and the police or with softer but suffused forms of control enacted by actors keen on contrasting the role of the police and the criminalisation of out-of-wedlock pregnancies and births.

As I realised throughout my fieldwork and by discussing this issue with many different women with diverse social and economic backgrounds, surgical abortion is not the only ‘medicalised’ method used or sought for to interrupt pregnancy in Morocco – Boutaina’s case was emblematic in this sense. Some private clinics in Casablanca provide medical abortion with pharmaceuticals that may be imported from abroad: I have to make clear that I do not have any exact quantitative data on the entity of this phenomena, but the ethnographic examples I will draw on illustrate some of its crucial features, for instance the fact that medical abortion represents a profitable market as well as a method sought for by women of heterogeneous backgrounds. Boutaina’s example presented above already showed how a poor woman deals with risks and uncertainties embedded in the recourse to this method without medical ‘supervision’. The other two examples I will make

concern a relatively well-off young educated woman turning to a clinic – where she was hospitalised for her medical abortion – and another young woman, who instead took an abortive pill at a clinic but was not hospitalised afterwards.

The first case was told to me by Younes³¹⁰, the girl’s current partner, but since he had been directly involved his perspective is equally significant. Younes told me that his girlfriend – a PhD student with whom he has been in a relationship for about one year – recurred to medical abortion because that method also allowed her to preserve her virginity. It was Younes who, knowing a nurse of one of Casablanca’s most expensive private clinics, provided the information about costs and conditions of a medical abortion: they paid the doctor approximately nine thousand dirham; Younes’ partner spent less than twenty-four hours in the clinic and, as he stressed, the morning after having taken the pill she was “standing, perfectly alright”. He heard that four to five medical abortions are performed each week in this clinic and that with each ‘treatment’ doctors earn about one thousand euro – he expressed the doctor’s profit in euro and not in dirham this time.

Whereas twenty-four-year-old Jamila turned to a different clinic – located in another central district in Casablanca – as suggested by a friend of hers. It probably deals with a well-known ‘*clinique*’ – as she said in French even if our conversation was in *darija* – or it might be a medical practice. However, it is not an ‘underground clinic’ and Jamila noticed that many women were there for the same reason:

“I paid *khamsin elf l-ryal*³¹¹ [fifty thousand *ryal*]...Yes, it’s expensive. I did it as I was two and a half months pregnant. I *ate* a pill³¹² at nine in the morning and I stayed there until seven in the evening. I got home by car. After having taken the pill I started bleeding heavily. I didn’t do any surgery. I just took the pill. A friend of mine had done

³¹⁰ I dealt with his story in Chapter Three.

³¹¹ It corresponds to about two thousand five hundred dirham (approximately 250 euro). It is an ‘alternative’ way of calculating the local currency.

³¹² “*l-fanida*” is the same word used for “candy”.

the *curettage*³¹³ at the same clinic. Many women were there... Not just girls who *go out*. My mother gave me the money to do it. It was the first time I had got pregnant” (Jamila, November 2011).

Jamila’s account is rife with some crucial themes: she told me she was living with her mother in a district of the *medina l-qdima* – the old medina – not that far from the ‘clinic’. She had given up going to school very early, as she also started to ‘go out’, that is to sell sex. Jamila looks a bit younger than her age, despite some scars on her cheeks: her description of her ‘day-hospital’ was very calm and made it seem something ‘normal’, just a matter of paying and waiting. Everything ran smoothly – unlike in Boutaina’s case, for instance. The normality of her experience was also highlighted by her stress on the fact that all the – numerous – women who were there to have an abortion were not only poor and were not only women who regularly sell sex. Jamila underscored this feature because we had actually met at a local NGO which targets girls and women who engage in the commerce of sex – and who are cast as ‘sex workers’ (*professionnelles du sexe*)³¹⁴; they are involved in STIs and HIV prevention activities and are provided with information on contraception by means of collective sessions. Hence, her statement is far more telling than a mere description, as it hints that in spite of class differences all women found themselves in the same place and were involved in something illicit. Actually, also at the beginning of our conversation Jamila assumed that I wanted to know if it was a *haram* practice, even if I had not mentioned that aspect. However, she said first of all that many women were there for the same reason and that everything was “normal”, a sort of routine in that clinic, as if this fact accounted on

³¹³ The fact that abortion is referred to using this other term has been observed also in other contexts, in which women’s reproductive strategies and ‘the edges’ of fertility and motherhood blur the definition of pregnancy termination. Sargent (Sargent, 1989) in her ethnography among women in urban Benin notes that curettage being legal, hospital physicians registered the high demand for this intervention, which ultimately masked unsuccessfully induced abortion.

³¹⁴ I will deal with the problematisation of the creation of this category in Chapter Five.

the one hand for its not being *haram* and, on the other, for its normality and for its commodification despite religious restrictions³¹⁵.

During a group meeting at the NGO mentioned above, the issue of abortion had been raised by the personnel, so Jamila and other participants had also given insights taken from their own experiences. Thus, the existence of surgical and medical ways of interrupting pregnancy had been discussed between the NGO personnel and its beneficiaries. Afterwards, I further raised this issue with one of the members of the organisation, who said she was quite surprised to find out that “women” – including her beneficiaries – instead of having a surgical abortion took abortive pills to induce bleeding or use other drugs to be applied locally – into their genitals – to the same goal. Actually, she only knew³¹⁶ that an abortive pill exists in Morocco and that it is legally used in the infectious diseases service of one of Morocco’s main hospitals in the cases in which pregnant women living with HIV have to terminate their pregnancy. This NGO employee underlined that this ‘*comprimé*’ – pill – produced by one of the world’s main pharmaceutical companies is “exclusively provided to women living with HIV *who cannot bear children*”, therefore she put emphasis on the fact that its use is limited to a very specific circumstance and to therapeutic use. Moreover, although this NGO’s activities of information and education for women who engage in (different forms of) commercial sex deal also with the prevention of abortion – since they broadly touch on sexual and reproductive health matters – the personnel maintained that their beneficiaries do not have “that problem”. Nevertheless, I argue that – if it may be partly realistic – this discourse is strongly informed by non-governmental rhetoric and understandably upholds this organisation’s credibility.

2.3 Online and over the counter

The account provided by this NGO professional illustrates, hence, the official side of the presence of the abortive pill in Morocco, while – as some of the above cases have shown – also private medical practices and clinics do provide –at a cost –

³¹⁵ Which, as I shall explain, are not monolithic.

³¹⁶ She made clear it was not the domain she works in, as she leads the programme for STIs and HIV/AIDS prevention addressed to ‘sex workers’.

medical abortions. It is not clear whether all of them are provoked with the same drug used in hospital for HIV positive women or if private doctors recur to other kind of drugs, used as abortifacients. I have not had the chance to talk to any of the doctors – whether general practitioners or gynaecologists – who provide these kinds of drugs, nor did I investigated the question of the illegal – black – pharmaceutical market to interrogate potential overlaps between the two domains, but I have dealt into more depth with the issue of legal and available pharmaceuticals that can be bought – also in Morocco – at pharmacies and used in ‘overmedication’ as abortive, even if they are not meant to be so³¹⁷. I first touched on this issue through the websites of an international network of organisations whose activities and campaigns are aimed at women living in countries where abortion is illegal³¹⁸. These organisations seek to contrast morbidity and mortality linked to unsafe abortion by selling specific drugs along with the provision of information on how to use them to have a “safe abortion”. Even if on these websites some Moroccan women tell their abortion stories – by answering a few questions of a survey – and account for the purchase of such drugs via the internet, I have not found any similar cases either among my acquaintances nor among my direct informants, i.e. unwed mothers and other young women encountered in the field.

However, I started questioning the potential spread of such methods of purchase of drugs at abortive aim as one of those European organisations chose Morocco as the next country to be addressed with a campaign to raise awareness on clandestine abortion and its consequences on women’s health and, therefore, with advocacy for its decriminalisation. Indeed, the last stretch of my fieldwork incidentally coincided with some initiatives, lead by a Moroccan organisation in collaboration with a European NGO³¹⁹, both of which campaign for the decriminalisation of abortion

³¹⁷ Moreover, there is also widespread ‘confusion’ between the ‘abortive pill’ and ‘emergency contraception pill’, which has actually been legal in Morocco since 2008; it is available without prescription and can be bought in pharmacies. See INED (2013), Fortier (2010).

³¹⁸ <https://www.womenonweb.org/> [accessed July 2012].

³¹⁹ This NGO is part of the same network which sells abortive drugs via the Internet; they conduct campaigns in all countries where abortion is illegal or hardly accessible and this – in 2012 – was the first time they chose Morocco and a Muslim country for their campaigns.

fostering a neat ‘pro-choice’ approach. I decided to look closer at these events to see what discourses they mobilised and what their stakes were in relation to issues dealing with women’s bodies and reproduction. I also questioned in what ways such discourses declined notions like ‘choice’ in the Moroccan context and in relation to local sensitivities, as well as the dialectic with other local actors, seemed to me also an issue of great interest, on the background of the research I had conducted across local organisations for unwed mothers, whereby both beneficiaries and the personnel articulated diverse and contested discourses – and practices – on unwanted pregnancies and abortion.

What is relevant in the European-Moroccan campaign against the decriminalisation of abortion is that their main goal was to make women aware of the fact that – as indicated also by Hessini (2007) – a drug sold in common pharmacies for the treatment of gastric and rheumatic pathologies³²⁰ can actually be used to induce abortion until the twelfth week of pregnancy without recurring to other methods, deemed more dangerous and/or expensive by the promoters of these initiatives. Therefore, first of all, an eye-catching public event³²¹ – that I was able to attend as

Morocco had been selected as a potential target. Some local groups and organisations working or campaigning on women’s health or explicitly on abortion had previously been contacted. As I got to know directly, the first organisation they contacted was the above-mentioned organisation which advocates for the decriminalisation of abortion. Yet, its founder refused to collaborate, so the European NGO turned to a youth movement, whose activities focus on diverse themes clustered around the concept of “individual freedoms”. I will focus on the differences among these actors and groups further in the next section, since their heterogeneous and sometimes divergent positions make views and conceptions on the body, reproduction, the boundaries of ‘life’ and their socio-political stakes explicit.

³²⁰ Its two active ingredients are Diclofenac and Misoprostol. The brand name under which it is known in Morocco is Artotec, which is slightly different from the name used elsewhere (Arthrotec); its two active ingredients are used to treat osteoarthritis and rheumatoid arthritis in people at high risk for developing stomach or intestinal ulcers.

³²¹ That has subsequently been reported by several national but especially international media organisations, since it consisted in the sailing of the European NGO boat in international waters close to the Moroccan coast. Medical staff and other activists were on the boat which was supposed to give information on safe medical abortion, besides raising institutional concern. However, the ship came to a northern Moroccan harbour a few days before the established date and had contacts mainly with foreign journalists and only briefly faced the protesters who had gathered in the harbour. Further details on this episode will be discussed in the following sections on the local ‘production’ of ethics on reproduction and abortion.

an observer – was organised to raise attention on the issue of illegal abortion in Morocco. Then a “hotline” – a mobile phone number – was subsequently created to provide women with information on the drug – already used in Morocco as a drug for rheumatic disease – and on the ways it has to be used at abortive aim. The same instructions are available on the website of the European NGO which has run similar initiatives in other countries. Information on how to perform an abortion with pills is provided in all languages of the countries where abortion is illegal and underlines it is based on research conducted by the WHO. Local partners – i.e. the Moroccan group³²² – spread information on the internet through social networks and launched a petition on an international and very popular petition website. The leaders of this group intended to diffuse flyers and information with more conventional methods, in order to reach women who do not access the internet. Yet, I had no chances to observe this kind of ‘grass roots’ activity during my stay in Morocco, therefore I cannot state if they have taken place or not. Instead, I have had several opportunities to discuss this initiative with female and male activists, scientists, theologians, physicians, students and journalists³²³, all coming from very diverse backgrounds. They discussed this theme from very heterogeneous perspectives, although most of them expressed their profound scepticism and sometimes harsh criticism concerning the ways in which this action had been conceived and put into being by the European organisation and by its Moroccan partner. The overall implications of this initiative in the specific context of Morocco were at the core of the debate.

Whether such techniques have subsequently been used – an aspect that I could not investigate directly so far – the meaning of these kinds of campaigns and actions is also to be questioned itself, for it is rife with a multiplicity of interesting as well as controversial aspects. To begin with, the fact that the organiser was a European organisation in collaboration with a Moroccan group lacking social legitimisation, contributed to the perception and the widespread understanding of this event as a

³²² Whose first public event had also been highly mediatised as it consisted in eating in public during Ramadan; the goal of this initiative was indeed to reclaim ‘freedom of conscience’ and the secularisation of Moroccan society.

³²³ These contested meanings accorded to this initiative and to the overall issue of abortion in Morocco will be discussed later in this chapter.

neo-colonial attempt made by western secular feminists to claim “freedom” on behalf of Muslim women. This idea was clearly expressed among people of very distant backgrounds and political orientations who followed, attended or openly contested the event. Locally, the European-Moroccan initiatives have also been interpreted as another demonstration of the European neglect of the wealth of well-rooted women and feminist organisations in Morocco. The latter³²⁴ – despite their extremely diverse approaches – claimed that their own struggles and grass-roots work have been totally denied and obscured – as if they had never existed. These political actions have been judged as attempts to demonstrate that Moroccan women needed western feminists to liberate and “*save*” them (Abu-Lughod, 2002 ; 2013)

The distance between the European NGO – and its Moroccan partner – and local realities accounts both for the high symbolic impact of this campaign and for the actual lack of contact with local social worlds, with the initiatives that had already been carried out in the same domain, as well as for the lack of awareness of material conditions of life of the alleged target of this ‘top-down’ action. I now aim to address the local scenarios which allow a broader questioning of the possible controversial outcomes and of the impact of the potential use of the methods promoted by this campaign. Therefore, since in the previous pages I have delved into different experiences of pregnancy termination or attempts, by seeking to shed light on the ways in which the ‘edges of fertility’ are moulded and embodied in very nuanced modes, I now wish to rethink them in relation to the possible recourse to the techniques suggested and promoted by the European and Moroccan organisations, since they necessarily have to be understood and problematised according both to local scenarios of meaning and to local resources.

I do not know any woman who has resorted to that abortive drug by following those NGOs’ advice, nevertheless I shall try to outline some relevant issues, that I deem important for a thorough reflection on the subject of safe/unsafe abortion in this context. Obviously, my insight is ethnographically grounded in the research I

³²⁴ I refer, of course, to the members and activists I met in the weeks preceding and following this event.

have carried out among unwed mothers, hence this perspective necessarily informs my considerations on the potential diffusion and use of this drug among these and other young women. Notably, I argue that the (potential) diffusion of this information might assume pretty different connotations for well-off, educated women and for poor and/or uneducated women – because wealthy (or relatively wealthy) women might access clinics or emergency care in case of complications. Low-educated or illiterate women would probably have more difficulties in following the prescriptions for using this drug as an abortive pill, in particular in the case of complications; not to mention the fact, that – as recommended on the NGO website – a clinic or a doctor should be easily reachable, which would mean affording to pay a – presumably – high sum of money at any time or seeking to access public health services, which might require a formal or informal payment too. Therefore, I argue that a new kind of stratified access to health care would take shape if women started to use this over the counter drug by buying it either from pharmacies, from the black market, or online.

Moreover, I think that the potential spread of such practices among women of lower socio-economic classes should further be seen in relation to the plurality of local knowledge and practices of the body, menstruation and reproduction. I question for instance the fact that for these women – including my informants – the use of this drug might be fostered among other domestic practices, which do not necessarily include the recourse to medical professionals and which include initial attempts based on the ingestion and other uses – combustion, fumigation – of herbal products. The recourse to chemical toxic products (bought at a grocery – *l-hanout*) at abortive aim has been mentioned by some of my acquaintances, such as the aforementioned Afef – the young sister of a friend of mine – as a method used by teenagers who cannot afford or who fear turning to local pharmacies, clinics or medical practices. These practices have also been reported by a physician who had been working in the emergency room of a public hospital in another large urban centre.

I had contacted this doctor to collect additional information on the issue of suicide attempts among young – pregnant – women since one of his colleagues had

repeatedly raised this question in public talks, debates and private interviews³²⁵. I actually wanted to understand whether the emphasis on that point – girls’ suicide attempts (allegedly) due to unwanted pregnancies – was linked less to a recurring issue, than to the aim to raise public and institutional attention towards the cause of the decriminalisation of abortion. Despite the lack of quantitative data on suicide attempts – in general and regarding this aspect – the number was said to be “low”. Most cases, among the ones observed in the past, dealt with the ingestion of toxic substances³²⁶ in youth – in general – and more specifically among young women, who were subsequently found to be pregnant. In the same hospital I was taken to the “centre for women victims of violence”, where the doctors and nurses in charge of the centre stressed that the “real” causes behind the suicide attempts of their patients can hardly be detected, including when the aim of the ingestion of toxic substances is allegedly the induction of abortion – and not necessarily suicide.

Yet, in this hospital – like in organisations for unwed mothers and their children – girls/women cite “failed marriage promises” to give account for the stressful situation which leads them to attempt suicide. Other women – who have not necessarily attempted suicide – are assisted in this centre because they experience violent relationships with their – often co-habiting – partners, who refuse to formally recognise the paternity of their children. Thus, these cases deal with women who might officially be recognised as ‘*mères célibataires*’ according to (some of) the criteria set by Moroccan NGOs, but who might not turn to them for help. However, the doctors in charge of this centre – one of whom had previously worked in the emergency room of the same hospital – maintain that suicide attempts linked to out-of-wedlock and allegedly “unwanted” pregnancies have decreased in recent years, probably due to the recourse to other ‘solutions’ such as widespread and relatively available clandestine surgical abortion, the possibility to give babies up for formal or informal adoption or other ‘arrangements’, including

³²⁵ I also wanted to explore this issue for other reasons. Indeed, the issue of suicide and suicide attempts among young – pregnant – women had already arisen in informal talks with my informants, who claimed having thought of suicide at some point after having discovered their pregnancy.

³²⁶ Like rat poison or ‘natural’ substances which – if taken in massive doses – can be toxic.

the access to resources provided by the non-governmental sector³²⁷. While none of my informants has ever resorted to such strong and dangerous substances or poison, some have actually resorted – as a first or secondary attempt to induce abortion – to multiple doses of aspirin combined with coke. Yet, as far as they are concerned, non-biomedical attempts are made first of all – or solely – by resorting to herbal products, which are – not always, but more often – less effective than pharmaceuticals, especially if we consider the active principle contained in the drug sponsored by the European and Moroccan organisation for self-inducing abortions.

If such a drug was included among the domestic techniques to regulate one's fertility by overmedication, its effects should be questioned, since they may be harmful or unexpected³²⁸. Indeed, another concern may regard its efficacy: it might be overlooked precisely because it is easily available over the counter and because its price³²⁹ is definitely lower than any other currently widespread medicalised method – i.e. medical or surgical abortion performed by doctors or nurses. I argue that while its cheap price might make it as widely affordable as 'traditional' methods – or probably much cheaper – the fact that it should be individually managed by women, without the intervention of any other 'expert' runs against all local and – broadly speaking – 'traditional' ways of dealing with reproduction, menstruation, birth or abortion, which usually draw on local repertoires of female embodied knowledge. Conversely, the prescriptions for the use of this drug are based on the assumption of the individual purchase and management of medical abortion, which may equally be inadequate. Hence, although the aim of the promoters of such "affordable" methods is to make women less vulnerable to the constraints they face in the management of their fertility, in contexts in which "safe" abortion – like birth – seems circumscribed to wealthy women, the spread of

³²⁷ The director of this centre was also a member of a local association which provided social, medical and legal assistance to people in some deprived urban areas, including homeless mothers and children who might also fit into the category of 'unwed mother' and 'illegitimate' children.

³²⁸ Such as in the aforementioned case of Boutaina.

³²⁹ A package containing thirty tablets costs one hundred dirham, but to perform an abortion only twelve tablets are needed.

the awareness of the abortive effects of that drug might not necessarily grant conditions of safety, especially for poorer women.

As I have stressed above, I argue that – whenever information on the availability and the properties of the drug in question were widely known – its price might be one of the reasons for its adoption. Its price may grant its accessibility, but it may simultaneously suggest different features, such as its not being effective: indeed, according to local constructions of the efficacy of drugs – either ‘traditional’ or ‘biomedical’ – its price might also suggest that it will hardly provoke any strong side-effects, hence its potential risks might not be envisaged at all. This view also lies upon the widespread lay beliefs about the overall low efficacy of pharmaceuticals commercialised in Morocco. In the context of Morocco’s political economy of health these two issues dealing with the role of pharmaceuticals – among which the ones that may potentially be used at abortive aims, as sponsored by the European and Moroccan NGOs striving for the right to “reproductive choice” – are not to be overlooked. Notably, they allow a deeper understanding of its – potential – reception, perception, uses or misuses, that may aptly be conceptualised as their *social lives* (Reynolds-Whyte, et al., 2002), their social uses, assumptions and attributions of efficacy: “the lives that medicines have with people and between people. These lives are imbued with the practical artfulness and purpose that characterize technology. They are lived in relation to problems and contexts” (ibidem: 14) The combination of its low cost and the assumptions about low efficacy of Moroccan drugs are two key elements that can be taken into consideration only through an attentive insight into local realities and – more particularly – in those of the access to health care for poorer men and women, whereby the action of paying goes well beyond a mere technical issue or transaction. It represents itself and above all a symbolic investment, adding to the efficacy of any drug or service paid. Thus, I ultimately argue that the effects of the drug in question might be overlooked by its potential users, according to local views and understandings of the pharmaceuticals on the market.

§ 3 Manipulating ambiguity³³⁰

“*attar* [Herbalist]: This is the strongest... its name is *hantita*³³¹. Then you have *l-harmel*³³² and *shih*³³³ ... Nooo, no *sheeba*³³⁴. Who told you that? Yes, everything which is hot. But *hantita* is what works best: you take a *majmar* [brazier], yes what you use to do *bkhur*, then you burn *hantita*, you wear a *jellaba* and you stand on it. In the meantime you eat a mix of twenty-five spices with honey... at the same time! This works also with pregnant women up to the third month. *Hadu, garanti* [that one is guaranteed], in a minute! Other people here sell other stuff, but it doesn't work, believe me.

I [Irene]: How much is it... *approximately*³³⁵?

H: It's 2000 dirham, *lalla*³³⁶ ... once or twice. You have to try a second time if the first doesn't work. You have to buy three or four grams.

I: It's *very* expensive! Who are the women who buy it? And... are they all girls or also married women?

H: Both... Also married women want 'it to go down'. *Wa l-bnat* [and girls]... I'd say they are '*ashirin fi l-mya*, 20% of the clients this year. They come from Marrakech, Casa, Essaouira, Rabat... everywhere.

³³⁰ (Scheper-Hughes, 1992: 335).

³³¹ Mentioned also by Hessini in relation to Morocco (Hessini, 2007) among the local methods of inducing abortion. It may also be called "*hantiit*": a resin of the roots of *Ferula assa-foetida*. In other countries in the Maghreb it is called *anjudan*. It originally comes from Central Asia (Bellakhdar, 2006) and is cultivated in India. Its uses encompass the ones as a contraceptive and abortifacient.

³³² *peganum harmala* (rue); Centre Anti Poison et de pharmacovigilance Maroc: http://www.capm.ma/protocol/Harmel_Protocole.pdf [accessed March 2013].

³³³ *Artemisia herba-alba* (wormwood or *Armoise blanche*).

³³⁴ *Artemisia arborescens* - absinthe ; commonly used in the winter time to prepare tea.

³³⁵ I was aware that the price he was about to tell me might not be the same he would tell to local women; I was travelling and none of my *marrakshi* acquaintances was with me during this unexpected visit at the *souq*.

³³⁶ "Madame".

Because, you know, here in Marrakech there's no sea and the air is good for growing plants... I think. The matter is also that I'm well-known.

I: Is it allowed, it's no problem... to drink this 'tea' and use these methods to 'make it go down'...?

H: It's *haram*. Yes, it is. But these are just whores... they go to the disco, they go out at night. Of course they have these problems! Well, most of them, maybe not all of them 'go out'.

I: Is *hantita* used in other ways?

H: No. It comes from India. It's my father who first got it in Morocco. And I am the only one who sells it... and another one in Rabat. And another one in Fès." (Marrakech, July 2011).

The practices described so far account for the flexible and sometimes blurred 'edges' or 'borders' of fertility, whereby the end of menstruation and the uncertainties surrounding it might be experienced as a liminal time, in which attempts to retrieve the flow of blood can be enacted. As we have seen, a plurality of resources are simultaneously drawn upon, whereby resources cast – and socially recognised – as traditional are sought for before or in addition to others – such as pharmaceuticals – provided that they can afford recurring to all these methods. The notion of 'traditional' methods and resources emerged in the discussion of different ethnographic cases illustrating the shifting understandings of 'traditional' methods: the knowledge of the techniques of fertility regulation is indeed fluid, changing, situational and highly dependent on the subjects' symbolic and material resources. The practices evoked by my informants among young women and unwed mothers – as well as by some health professionals – have also been observed elsewhere (Jansen, 1987) and discussed in relation to women's strategies and ways of disclosing their recourse to such methods and products. However, unlike in the context studied by Jansen, my informants – even the ones coming from rural areas or smaller urban centres – never mentioned recurring to a *mra kabira* – a *qabla* or 'traditional midwife' – but rather suggested a fragmental knowledge of plants, chemical products or drugs that can be deployed as abortifacients or to regulate one's fertility. This may explain why, unlike the knowledge and practices

described by Molina (1997) in relation to the migrant women in her ethnography in Buenos Aires, most girls in my research did not acknowledge the effectiveness of plant infusions.

In questioning the embodied meanings ascribed to the retention or flow of menstrual blood and in reflecting on the ways young women acted upon it, I necessarily rethought the birth practices that I have previously investigated in other parts of Morocco, where so-called traditional techniques constitute the main symbolic as well as practical resources. At the same time, I observed how local knowledge and practices embedded in the experience of the *qablat* – local non-trained midwives – illuminated the fluidity of this body of knowledge, in that they might eclectically and pragmatically combine it with techniques or products inherent to biomedical models of birth – as discussed by Obermeyer (2000a) for other parts of Morocco. On the other hand, this is illustrated by the fact that these methods of managing pregnancy and labour – grounded in local ethnophysiological notions of the body – were simultaneously drawn upon in the services provided by trained midwives working in state-lead health facilities (Capelli, 2011a).

Most significant is the fact that local trained midwives – like Badiha, who did not work in public health services – sometimes attended home births by recurring to biomedical knowledge and by proudly combining it with some local practices such as the use of certain plants aimed at enhancing labour. This accounts for her pluralism as well as for the ambivalence and the contingency informing the recourse to the available sources of health care, in a context of considerable structural constraints, which also hinder the access to emergency services. Nevertheless, in discussing the central concerns for women’s reproductive health in her isolated and deprived hometown, Badiha conceptualised risk – in childbirth – in terms of knowledge, skills and balance between what she designated as “traditional” and “modern” knowledge. Furthermore, in virtue of her knowledge of the “traditional” model of birth, she critically evaluated the role of local – mostly un- or informally trained – birth attendants and their uses of plants during labour, that she considered inaccurate and irrational.

As an example, she illustrated the different uses of *qarfa* – cinnamon – mentioned to me also by some local untrained birth attendants: this plant is used for its property of stimulating the uterus’s contractions and of accelerating labour.

However, Badiha was aware that its use encompasses risks, as – like other plants – without dosing it, it can be toxic. Therefore – unlike TBAs³³⁷ – she uses *qarfa* by administering it according to precise criteria³³⁸. Risks, in her view, are also embedded in TBAs’ attitudes towards women and vice versa: she said that TBAs always “listen” to women’s requests and never refuse to give further quantities of a product – even if not needed. They were said to ignore the fact that *qarfa* may have side-effects, just like “normal”³³⁹ medication. Badiha, maintained that the features of a product like *qarfa* are to appreciate not just by increasing its quantity, but also by understanding the right moment to administer it since it is not effective at all times. Thus, attending births needs both self-confidence and accurate knowledge, whereby the right timing is a crucial dimension, as Badiha asserted:

“Sometimes, although a woman suffers and is not dilated, TBAs just *wait* and do nothing, until complications occur, and they cannot do anything else and women are taken to the hospital – but it is already *too late*. They *play with fire*” (Badiha, Ifli, June 2009).

According to Badiha, TBAs “play with fire”, that is they are unduly self-confident, even in cases described as falling beyond their competences: in most cases they say they *can* do that and that is enough for them to dare to attend birth. Thus, Badiha highlighted the structural aspects informing birth in Ifli and sketched out features of the local model of birth and the role of untrained³⁴⁰, ‘traditional’ practitioners, called *qablat*. Furthermore, Badiha’s account opened up core themes such as the understandings of safety and risk in relation to medical pluralistic references (Greenwood, 1981) and their eclectic combination in the practices of birth: as shown by the stories of my informants living in urban Morocco, these themes are highly relevant also to the practices fostered by women – and young women – to

³³⁷ This stands for “traditional birth attendants”.

³³⁸ She underlined that she was constantly in contact with the doctor, “as if it was *he* who gave that product”.

³³⁹ She referred to biomedical drugs.

³⁴⁰ I refer to official biomedical training.

deal with alleged or proven unwanted pregnancies by recurring to a plurality of methods and resources and by weighing up the conditions of risk they might entail. Notably, Badiha provided me with an insight into the use of *qarfa*, a plant which is also widely used by TBAs who I met in other parts of the town of Ifli and whose use is not circumscribed to labour, since it is also among the plants used to enhance the flow of menstrual blood.

The porosity of the boundaries between healing and potentially harmful practices and the ambiguity embedded in the same practice or remedy is acutely conveyed by Pandolfo:

“A local term, *ddwa* (remedy/poison) captures this duplicity well. In medicine, as in life, it depicts what heals and what harms at the same time. On the one hand the possibility of life (as emerging from death) is a matter of dosage, a recipe, in the traditional medical sense; on the other, independent of any possible dosage effort, the remedy has in itself the principle of death” (Pandolfo, 1989: 19).

These practices introduce the theme of the local symbolism of the flow and retention of blood which is central in looking also at how women manipulate ambiguity (Scheper-Hughes, 1992: 335) surrounding the uses of substances: these might be seen either as ways to enhance the flow of blood or they might be drawn upon as abortifacients. The products that can be purchased at herbalists like the one I mentioned above are some of the remedies to which my informants recurred, even if they claimed they hardly work; in other cases, they said they could not afford repeated attempts with the whole array of products sold by herbalists.

However, cases of intoxication with ‘natural remedies’ like *harmel* – *peganum harmala* (rue) – have been reported by the personnel of the emergency room of a public hospital that I visited³⁴¹ and are dealt with by the Moroccan Anti-poison centre³⁴² and they are linked explicitly to this plant’s abortive effects.

³⁴¹ This deals with the hospital that I mentioned in the previous paragraph (§ 2.2).

³⁴² Centre Anti Poison et de pharmacovigilance Maroc:
http://www.capm.ma/protocol/Harmel_Protocole.pdf

Hence, just like cinnamon's – and other plants' – action on the flow of blood, also the recourse to other types of remedies might affect women's bodies in different and sometimes unpredictable ways, if their use is not backed by expert knowledge. This is the case of all my informants who in most cases cannot draw upon the experience of 'women healers', but have rather to bargain the costs of the remedies they seek, along with issues of concealment and secrecy. In this sense, also potential risks or harmful side-effects of the practices fostered are faced mainly outside symbolic and relational frameworks such as the ones described by Badiha – the above-cited midwife – although with reference to childbirth. Her eclectic and reflexive approach definitely differs from my young informants' emergency, contingent and simultaneous recourse both to 'traditional' – herbal – remedies and to pharmaceuticals – sometimes in combination with other products. These observations underpin the reflection on the potential spread of domestic uses of pharmaceuticals in overmedication as abortifacients, as in the case of the drug commercialised in Morocco as a pharmaceutical for rheumatic disease and sponsored by the European NGO (and its Moroccan partners) as a safe medical abortive practice to be autonomously performed by women.

Many of my informants cast as traditional – *taqlidiyyn* – a wealth of local, non-biomedical resources available at herbalists – '*attar* – or at other shops at – relatively – low cost. Besides – as previously mentioned – especially younger girls might combine other non-herbal and non-pharmaceutical products like coke, known for their – real or alleged – abortive effects if associated with drugs like aspirin. I now aim to give further ethnographic insights into the story of one of the main subjects of my research, Nawal, in relation to her multiple and diverse ways of dealing with and managing the 'edges' of fertility – and the uncertain early stages of pregnancy. Her strategies are emblematic of the plurality of methods fostered by women – not just because of financial constraints – and of the ambivalence of some of these techniques, whose uncertain outcomes overlap with precarious and deeply uncertain relationships with male partners and/or with other actors, such as one's family³⁴³.

³⁴³ The sort of relationship with partners and family shapes the attitudes towards abortion attempts: as shown by other examples, even unsuccessful attempts and thus pregnancy and

However, at least at some point – after having ascertained it – Nawal was firmly determined to put an end to her pregnancy, by recurring to a wide array of methods. I still wonder if, knowing about the aforementioned ‘hidden’ abortifacient³⁴⁴, she would have recurred to it as well, given its over-the-counter availability and potential “magnetism” as a drug (Scheper-Hughes, 1992: 200). That drug might have looked like a potential solution, which still had not been provided by all other means or by all other persons she had turned to: irrespective of its potential harmful and/or unpredictable effects, it might have appeared as worth trying, just like she had tried many other products and methods.

Nawal briefly told me an oversimplified version of her story, for the first time, in the TV room of the shelter for unwed mothers where she was spending a few weeks. In recalling her reaction to the discovery of her pregnancy, she only explained she had taken “seven *aspro* with coke... then yogurt with cinnamon... then wore a tight *semta* [belt]...*safi* [that’s it]. It’s God’s will [*Dieu a voulu*³⁴⁵].” (Nawal, June 2011). In the following meeting at the charity – that she soon left – she also told me about another attempt she had made by contacting some acquaintances who she trusted, that is her former employers:

“Well, in the meanwhile – at the sixth month – I sought another solution. You know, the first time we met I told you that I worked in a house in Casablanca for three years during the summer to pay for my studies. I worked for two ladies: I call one of them *khalti* [maternal aunt], she lives in Syria all year long, because she’s married to a Syrian man as his second wife. So, I searched for her sister who lives in Marrakech to tell her about ‘my trouble’, but she told me that she could have helped me find a solution only if I was still one or two

childbirth are interpreted by unwed women not only as God’s will, but also as potential ways towards reconciliation with male partners.

³⁴⁴ The abortion inducing drug in commerce in Morocco for treating rheumatic disease exists in other countries with different brand names, although the active principles are the same: yet, in some other countries it has been banned or it is sold only under prescription, as the increase of its use as an abortifacient had been observed.

³⁴⁵ She strove to speak French.

months pregnant. She told me she would have given me money to go to a doctor to... make the baby ‘fall’. But it was too late. I even went to a *cyber* [internet point] and called the other lady who lives in Syria: she told me she would search for a *jama‘iyya* [an association³⁴⁶] but never called me back. Anyway... while I worked for them I never left home for three months, except when I had to buy something for them.” (Nawal, June 2011).

About six months later her description of the “solution” she had searched for was far more detailed:

“N: I was about three and half months pregnant when I found it out. I tried *everything*. I did lots of running, of hard work, I kept moving and running around, I went to the gym³⁴⁷. I *ate* something...I took nine...*nine* [she shows me also with her hands to emphasize it] *aspro*, three at a time. I ate *danone* with...what’s its name...? Yes, *qarfā*. I did *bkhur* by burning herbs...*hantita*.

I: I know about it, a ‘*attar* in Marrakech³⁴⁸ showed it to me. I think it’s very expensive...

N: I bought it in my hometown. I paid 300 dirham for it. I burnt it in a *mejmar* [brazier], took off my underwear and stood upon it so that the smoke entered [my body] and *did something*...but it didn’t work, no. Well, now I think it may have done some harm to my child’s health³⁴⁹.

³⁴⁶ She implicitly meant an organisation for unwed mothers.

³⁴⁷ Nawal told me she had had a motorbike accident in which she had injured a leg, so she had stayed at home for several weeks; only afterwards she had been taken to a doctor by her boyfriend (the soldier) before trying many different methods to induce an abortion. Nevertheless, I wonder if her ‘accident’ might have resulted from one of her abortion attempts.

³⁴⁸ A part of Marrakech’s central *souq* traditionally occupied by herbalists’ stands. Although it has become very touristy, as the rest of the *souq*, it is still regularly frequented by people from Marrakech and its surroundings.

³⁴⁹ *Bkhur* – besides being commonly used to turn ‘*ayn* [evil eye] away – is part of local repertoires of knowledge on birth, as burning wood and plants at the onset of labour is

Then I drank *coke* with *aspro*, again. I tried *everything*, also to fasten a *semta* [belt] on my womb as tight as I could. The director of the *foyer*³⁵⁰ asked me if I had drunk anything to ‘*push the baby away*’... Before trying all that, I was taken to a doctor for an ultrasound by the *militaire* [soldier]³⁵¹ because I already suspected I was pregnant. He paid the doctor because he wanted me to have an abortion, but it was too late. The doctor told me that at three and half or four months I might have died. From that ultrasound it seemed a baby girl, but it later turned out to be a boy – through the ultrasound I did at the eighth month when I was already in *Casa*. He still thinks it was a girl and does not know he has died. Somebody told me he says around that I took ‘his daughter’ away and that he would do me some harm if he ever finds me! Even if he looked a little bit like him, I’m not quite sure if he was actually his son, anyway... Since I was in Marrakech, before coming here [to Casablanca] I even went to a famous doctor, but I was asked up to 1 *billion*... no, 1 *million* dirham! There were lots of people there...” (Nawal, December 2011).

Nawal’s narration – observed at different periods and across the unfolding of events – sheds light on all the strategies she had enacted to find “the solution” to her trouble. In her narrative, she emphasized her search for “the solution”: by this she meant the resources she mobilised in the phase of uncertainty surrounding the discovery of pregnancy and the dilemmas of establishing the child’s biological paternity. However, beyond her pragmatism, her search for help also illuminates further biographical details which are entangled in her current experience. Notably, her summer labour migration to the house of the two women in Casablanca – she stressed – was linked to the economic situation of her parents, which she often

aimed at heating the woman’s body to favour delivery. However, it is among the practices that are blamed by trained health professionals, who deem it harmful for the baby and to the woman, as it may cause respiratory problems.

³⁵⁰ The shelter for unwed mothers.

³⁵¹ One of the two men to whom her child’s paternity was ascribed.

blamed for it. Whereas, the relationship with one of the two ladies was fashioned as a kin relationship – she said she used to call her *khalti* – and presents her as a successful and wealthy woman. Her marriage with a man from the Middle East adds to the broader picture of ‘success’ ascribed to her employer. Yet, her trust in this relation is deceived by the lack of support by both her former employers. Moreover, mentioning this relation allows Nawal to morally reframe her seasonal work at this house, an activity that she presents as the only means by which she could finance her studies. To emphasize this dimension and her self-representation as a naive and decent girl, during our second meeting at the charity, she also added that she never used to ‘go out’ while working in Casablanca. She did not explain whether she had no love affairs nor sexual relations – nor did I ask about it – but I argue that argument was part of her construction of a gender subjectivity able to adapt to the charity’s context, where she was portrayed instead as a “prostitute” – a former and potential one – particularly when the issue of the two ‘potential fathers’ had been disclosed.

The approaches fostered by young women in negotiating their sexuality and morality out-of-wedlock as contested fields has to be further examined. In this case – as in others – these relationships with male partners – whether they entail romance, affection and/or sexual-economic exchanges – build themselves on layers of precariousness experienced within one’s household and reproduced in the relationships they build when they – temporarily and/or repeatedly – leave that household. The precariousness of such bonds emerged indeed in times of crisis, such as the ones Nawal had experienced since the discovery of her pregnancy³⁵². This is the relational and material context in which her manifold attempts to interrupt her pregnancy were enacted. I also argue that – besides ‘domestic’ remedies – Nawal might have dared recur to another drug like a ‘hidden’ abortifacient, by challenging its potential unexpected outcomes.

³⁵² As I will further discuss in the fifth chapter, relational precariousness in Nawal’s life emerged significantly throughout her trajectory and in the distress she experienced both before and after the death of her son.

Methods usually seen as traditional – based on local pharmacopeia – are also widely understood, both by married and unmarried women, as having mostly ‘uncertain’ outcomes. Hence, especially by married or older women they are known for not necessarily leading to an abortion, whereby this intrinsic uncertainty also makes them more flexible and suitable for notions of destiny or God’s will as the ultimate determinant of the continuation of pregnancy or its termination:

“*Shufi* [look], Irene... it’s not just those young girls³⁵³ who go to the herbalist and drink those blends of plants when they don’t have their period. I can tell you, married women do that. Also my mother did it. She *drank* something, because she didn’t feel like bearing another child, but... it didn’t work... and she gave birth to my younger sister!”
(a friend, October 2011).

Local and broadly defined as traditional methods of regulating menstruation and enhancing the flow of blood might be used by women – irrespective of their marital status – without necessarily recognising that a pregnancy is going on, or sometimes just when they suspect it. Therefore this space is characterised by dilemmas, as women strive to “balance moralities bound by Islam and socially negotiated moralities linked to their families” (Huntington, 1999: 187): seeking to disrupt a – suspected – pregnancy is not necessarily in contradiction to God’s will, according to the “belief that it remains in God’s power to make a woman bear more children regardless her actions” (ibidem). These predicaments, as noted by Seif El Dawla (et al., 1998), highlight that in the management of fertility women “may fashion their own interpretation of God’s will that is more congenial than official theology to the needs of reproduction in everyday life” (ibidem: 99). Coherently, unsuccessful abortion attempts were seen by young women, as examples of divine intervention despite their individual actions.

However, in absence of urine tests and ultrasound scans – both in the case of desired and undesired pregnancy – the recognition of pregnancy might “unfold slowly” (Belton, 2007 : 57) and also significantly lie upon ideas of destiny and

³⁵³ She referred to my informants.

divine will, highlighted by many of my informants' narratives which – after several abortion attempts – ultimately ascribed the birth – and then, sometimes, the infant's death – of their children to divine will: “*Kolchi men Allah* [everything – comes – from God]”, as Nawal repeated. ‘Fuzzy’ understandings of menstruation and pregnancy allow flexibility and an “ambiguous space” (Belton, 2007 : 58) of some weeks or months in which women might either recur to traditional emmenagogues or just wait. Otherwise, those who can afford it, might access ultrasound technologies to confirm pregnancy and then – as the stories of my informants have shown – face the situation according to their financial and relational resources and by framing their experience from moral and religious points of view. If “early pregnancy is a fragile and liminal state” (Belton, 2007 : 58), especially if it is not confirmed, I argue that this feature of indeterminacy accounts for the porosity of its moral boundaries, whereby notions like intention or choice towards pregnancy and/or its termination might not fully grasp the meaning of these women's reproductive experiences.

Hence, the use of spices and herbal products connected to the flow of blood both before and during menstruation, as well as during labour and after childbirth, calls for attention to local – and at times ambivalent – meanings ascribed to these products, that cannot be acknowledged without paying attention to local embodied metaphors and to ethnophysiological notions of the balance of hot and cold and of openness and obstruction, for instance. In the cases of my informants, the uncertainty of the first phase – in which they do not “see [menstrual] blood” – the association with pregnancy is still a “tenuous one” (Molina, 1997: 152) – is often accompanied by the recourse to ‘hot’ – *harr* – herbal remedies often bought at herbalists – chosen if renowned, or just because they are situated far from one's household and acquaintances. While Molina highlights that the shared attribute of the plants used for abortion or contraception by *criollo* migrant women in Buenos Aires is their being strong and powerful, and as such bitter or sharp (ibidem), in Morocco these properties reside in their being *harr* – hot. This is exemplified also by *msakhen*, a mixture of plants used in the dish of *rfisa* and considered one of the hottest and “dangerous” spices if taken inappropriately, as I have been reminded

both at ‘*attar*’ in a *kissaria* (indoor market)³⁵⁴ and by some young (unmarried) friends who – while eating *rfisa* – told me that “*gher l-mra* [only a woman]” adds it to her portion of food. Its properties are ambivalent, notably older women explained to me that *msakhen* is actually eaten and added to food explicitly to ‘heat’ the body and inner organs, both to the aim of conception and to that of contraception according to dosage and combination with other ingredients.

Some girls – as illustrated by the examples I have made – might not have financial resources to have a urine pregnancy test at a pharmacy, or they just do not want to spend their money on it. However, they may not seek or may not have access to exact methods to establish if they are pregnant or not. Only a few do access ultrasound scans to have the ultimate evidence. This may account for the acknowledgement of the absence of blood but not necessarily for the recognition of a potential pregnancy and, as a consequence, of the stigma attached to abortion or its attempt (Belton, 2007 : 52). This is why I agree that this ambiguous space – and time – might be seen as a “liminal state of fecundity” (Liamputtong, 2007 : xii).

Thus, ‘traditional’ or rather ‘domestic’ techniques are drawn upon to try – at least – to minimize the occurrence of pregnancy; otherwise at early stages they seek to induce bleeding to claim the occurrence of miscarriage, given the criminalisation of induced abortion in the Moroccan penal code. Yet, the ingestion of abortive substances in the first weeks of amenorrhea, the presentation of alleged miscarriages and the induction of abortion drive to re-question the local boundaries of abortion, pregnancy termination and abortive practices, as well as their – diverse – understandings. Hence, the practices discussed so far drive to interrogate the diversity of local shared understandings of reproductive disruptions and the ways they are experienced: I would rather suggest different terms to question this theme, by conceptualising it in terms of uncertain and flexible ‘borders’ or ‘edges’ of fertility. This perspective pushes to shift attention from the beginning and the end of pregnancy as an objectified status, to the focus on embodied experiences and the ways they are signified by specific subjects in their social embeddedness.

Belton (2007) refers to ‘liminality’ precisely to describe early stages, at which pregnancy is not fully recognised yet, allowing therefore the recourse to methods

³⁵⁴ In a *hay sh’abi*, a working class district of Casablanca.

of ‘traditional fertility regulation’ that can be practiced without necessarily acknowledging this act as an induced abortion, or – as aptly argued by Molina (1997) – the remedies taken for ‘coldness’ and ‘blood circulation’ leave an “open question” (ibidem: 153) on whether bleeding was an abortion or of ‘coldness’ had been cured. As Scheper-Hughes put it – in reference to the women of the *Alto do Cruzeiro* in North-eastern Brazil – “traditional remedies were never referred to as having ‘abortive’ properties but rather as ‘regulating the normal menstrual cycle’” (Scheper-Hughes, 1992). Therefore, being grounded and given meaning amidst uncertainty, such practices might be at odds with biomedical views which clearly define pregnancy beginning and its termination. Belton suggests that in the border region between Thailand and Burma where she conducted her research there might not be a shared understanding of what an abortion is, so its comprehension remains ‘ambiguous’ – both for women and for health personnel – notably because of the lack of technological equipment and also in virtue of local idioms related to blood and to its ‘block’ in women’s bodies. Local herbal medicines are actually used to enhance the flow of blood after periods of amenorrhea, leaving thus the causes behind it unquestioned – whether it dealt with pregnancy or not. Similarly, the practices described by Molina (1997) elucidate how differences between contraception and abortion may be blurred for *criollo* women in her research, since they associate pregnancy with frequent intercourse “rather than with the mere absence of menstruation, meaning that an early abortion can be easily confused with a heavy menstruation” (ibidem: 155). Delaney (1991) explores how the process of “coming into being” (ibidem: 10) is elaborated in a Turkish village and highlights how notions of “life” (*can*), rather than “spirit” (*ruh*) come into play in the acknowledgement of pregnancy, whereas abortion and miscarriage were not clearly distinguished by local midwives, who indicated them with the same word (ibidem).

Thus, the reflection on the notion of ‘liminality’ in relation to fecundity and to fertility regulation are relevant to my research among (young) Moroccan women, as they also call for a further problematisation of the concepts and imageries on the ‘foetal condition’ (Boltanski, 2007). When pregnancy tests, medical consultations, consultations at local midwives or *qablat* – local birth attendants – are not available and when amenorrhea and irregular menstrual cycle are part of women’s embodied

experience, the exact ‘beginnings’ of pregnancy cannot be detected (Boltanski, 2007). As noted by Boltanski, until the beginning of the 19th Century biomedical doctors did not recognise pregnancy until women did not perceive foetal movements; that was also the moment when pregnancy could become public (Duden, 1994). Hence, the lapse of time between the end of menstruation and foetal ‘animation’ – or ‘quickenings’ (ibidem) – constituted an indefinite and blurred period during which any practice performed on women’s bodies could not be understood as “abortion” or “pregnancy termination” as such. That would have referred only to interventions made after the foetus’ animation, before which the absence of menstruation opened up different interpretations and possibilities, among which – but not necessarily – pregnancy.

Boltanski argues that the ambivalence towards this status is significant in that women could informally fear being pregnant without disclosing it and could – simultaneously – officially behave as if amenorrhea had pathological causes requiring treatment, such as the ingestion of herbal medicines officially aimed at retrieving the menstrual cycle, but were as a matter of fact abortive substances. In this regard – as hinted by Boltanski – an ethnographic example from Nancy Scheper-Hughes’ *Death without weeping* (Scheper-Hughes, 1992) is highly relevant. The author explains how in the dispensary of the *favela* where she carried out research in the 1980s – and where she had previously volunteered – nuns used to give women information about fertility-regulation based on the use of local plants without seeing it in contradiction to their religious values in so far as herbs were ‘natural’ and seen as God’s creatures (Scheper-Hughes, 1992 : 334). By practicing menstrual induction, women – with the help of nuns – seemed “taking advantage of the considerable ambiguity surrounding menstruation. A late period might be seen as the first sign of pregnancy *or* as the symptom of a sluggish system requiring an herbal purgative” (ibidem). The author adds that this aspect might make ‘natural’ menstrual-inducing remedies compatible with menstrual-inducing pharmaceuticals³⁵⁵ and with other methods of manipulating a late period by overmedication, that is by drawing on some pharmaceuticals’ side-effects. The

³⁵⁵ Whose use is highly controversial in Western countries, whereas it is very widespread in Morocco.

latter being widely known among women, they might increase the ‘normal’ intake of drugs during the first weeks of pregnancy, without acknowledging this as an intentional abortion attempt (Scheper-Hughes, 1992 : 335). This kind of ambivalence has emerged significantly also in some of my informants’ accounts: whereas some stated they had taken ‘something’ even after more than two months without their menstrual cycle, others located their attempts with herbal products mostly at early stages. They were aware of the limits of these methods at advanced pregnancy and – in some cases – of the potential harmful effects on foetuses. Interestingly, these – as emerged from some of the accounts cited – may be conceived by some girls as their “babies” since the early stages after the recognition of an ongoing pregnancy³⁵⁶. Grounding my insights on these reflections on the multiple ambiguities arising in the process of recognition of pregnancy and on the ways to manipulate them enacted by women, I shall interrogate the construction and the negotiation of local ethics and politics of life and the moral struggles surrounding the issue of out-of-wedlock pregnancies and births.

§ 4 Bodies, souls, lives, cells and desires

“*Roh*, a coming into life as a living body. The term *roh*, hastily translated as soul by scholars quick to assimilate difference to Christian metaphysics (...) colloquially indicates, quite technically, articulation, an extension, or better, a consequence of the closing of a *rbta*, which "gathers up" something in existence and creates a body of movement. Contrary to Western common sense, it is not running water that has *roh*, but water that has been obstructed and detoured into another flow, neither flowing, nor stagnant. *Roh* is generated by something coming in between. Something is brought to existence that did not exist before and comes thereafter apart. *Roh* exists only in the interim, actualized by the closing of an obstruction. The transient body of a garden is similarly brought to being by the forced circulation of

³⁵⁶ Not to mention when pregnancy is recognised at an advanced stage – the fourth or fifth month.

water, as is the human body by a system of "closed" articulations (*mfasil*) and liquid circulation" (Pandolfo, 1989: 14)³⁵⁷.

Boltanski (2007) discusses the arrangements which concur to regulate the relations between sexuality and generation, whose aim is to avoid the existence of human beings – “in the flesh” (ibidem: 77) – who would not yet deserve the ascription and confirmation of their humanity by virtue of formal recognition, unlike in a situation of legitimacy. The author draws in particular on the categories of official and unofficial elaborated by Bourdieu (1977): the first concerns all which is public and collective – which is ascribed to men – and what is “secret, clandestine and private” to women (ibidem: 41), whereby this sphere would be condemned to exist as “shameful” (ibidem). This distinction concerns for Bourdieu male power over the representation of kinship and thus fulfils a political function, whereby female power is exercised in unofficial ways, for instance in influencing matrimonial matters. Boltanski takes this argument further and discusses it in relation to the power wielded by women in the domain of reproduction and birth, on which in his view the power of women in relation to the disruption of reproduction – hence, abortive practice – is considered as a “paradigm” of the specificity of female unofficial power as opposed to the male official one (Boltanski, 2007 : 22).

Boltanski ultimately argues that this form of domestic power is such, to the extent to which it remains hidden and illegitimate (ibidem) and shifts attention to Devereux’s work (Devereux, 1955)³⁵⁸ in hinting that this may explain why it deals with an “under-represented” question (Boltanski, 2007: 23). However, what is

³⁵⁷ “To describe how life is produced in the womb, women use, once again, the example of water. Water runs pure in the irrigation canals, they say, but in itself does not produce anything. Similarly sperm, colloquially called *lma' diel rrajl* (the water of the man), is also pure (*safy*) and in itself does not produce anything. It is sterile. Within the world of wetness, both water and sperm are "white"; they have a certain quality of dryness (sterility, the death of fertility). In order to use running water to irrigate the gardens, it must be obstructed, its flow stopped somewhere and diverted into a field. In this way, water loses sterility. In coming into the world, purity becomes polluted” (Pandolfo, 1989: 17).

³⁵⁸ Devereux in this work – in the section on “Illegitimacy and abortion” (Devereux, 1955: 151) – aptly notes that “undue emphasis on illegitimacy as the major cause of abortion” results from an ethnocentric bias of observers, since illegitimacy is seen in “[their] own societies” (ibidem) as one of the major motivations for abortion.

relevant to the present work is the productivity of the arrangements and the dialectic between official and unofficial, which design and redefine boundaries and categories of humanity. In this sense – and to ground these reflections in my ethnography – attention should be brought to the ways the aforementioned edges and borders of fertility are meant: this aspect refers indeed to the dilemmas of concealment and disclosure discussed so far and questions whether these ‘illicit’ pregnancies should be understood in relation to ‘thresholds’ – after which women ascertain their condition and act upon its social dimensions – or to the multiple forms of ambiguity and ambivalence that precede that passage. The ethnographic investigation of these aspects has brought to the fore the foetal condition (Boltanski, 2007), i.e. the representations and the status of the unborn also matter, primarily for women and simultaneously in the social and wider relational contexts in which their embodied experience is situated. The “surplus bodies” – as Bargach (2002) has aptly defined them – of illegitimate children – the “bastards”, the “*wulad l-haram*” – as well as the “exiled bodies” (Kapchan, 1996: 202) of the women who bore them, still matter and emerge as the core of political debate and mobilisations on the decriminalisation of abortion in Morocco.

In this framework, some local – very diverse – bioethical perspectives have emerged as such after the public action organised by the European NGO and its Moroccan partner: I do not mean that before this episode I had not been able to elaborate on those issues, or that I had not questioned out-of-wedlock births by interrogating the boundaries of fertility and the ways of representing and ‘making meaning’ of the unborn. These themes had already emerged during my fieldwork in the different encounters both with public health professionals and across local organisations for unwed mothers, besides women themselves and their narratives, in which the unborn might be ascribed personhood according to the multiple features and forces that I have described so far. It did not deal with homogenous representations at all, whereby the ascription of personhood to the unborn or to the newborns hinged upon manifold conditions, which ultimately lead them to give birth, without necessarily nuancing this processes in terms of desire, intention, constraint. As aptly argued by Morgan (1997) – although in relation to different landscapes – personhood would rather result from a ”constellation of embedded social practices that render the contents of the womb as ambiguous and uncertain.

[In Ecuador] the course of pregnancy is governed by women themselves, who use overlapping and sometimes competing discourses to make sense of their own circumstances and the will of God” (ibidem: 324). These experiences were rather reconfigured by young Moroccan women as contingent modes of challenging uncertainty.

As we have seen, some of these women describe a potential abortion as *haram* and at odds with religiously framed moralities, but the ways in which they come to terms with pregnancy disruption rather hints at the imbrications of different moralities, whereby the main reference is the power of divine will to overwhelm human action. Similar perceptions on abortion and contraception have been noted by Weigl (2010) in research on reproductive health among women in urban Northern India, whereby ways of acting upon one’s fertility were generically defined as interferences with divine will. Nevertheless, this seemed to rely more on a widespread “misconception” (Weigl, 2010: 214) on the generalised prohibition of contraception within Islam that was mainly channelled by local religious leaders rather than by reliance on the nuances embedded in the sources of Islamic jurisprudence (ibidem: 215). Yet – for the women in my research – such an approach relies strongly on women’s embodied experiences of pregnancy, on ethnophysiological notions of blood retention and flow. In this sense, it draws precisely on women’s power to manipulate these ambiguities and does not bring to the fore any other reference or underlying reason why abortion should be avoided, notably before or after a certain time. Whereas the notion of *ensoulment* and its inscription in a defined temporal framework, is foundational to the boundaries of generation.

In order to question to what extent these configurations of meaning are articulated in relation to the Islamic elaboration on generation, I shall give an overview of how this domain is framed within Islam. Musallam argues that “Islamic attitude towards generation” (Musallam, 1983: 53) is based on two key elements, i.e. the equal contribution of females and males in generation (ibidem: 53) and the definition of the foetus as “a new creation which progresses through stages of differentiation [moreover] Quranic references left no doubt that the foetus undergoes a series of

transformations before becoming human (...) the two most important passages are undoubtedly Sura XXII, 4 and Sura XXIII, 12-14. The first is from the chapter of *The Pilgrimage*³⁵⁹:

O mankind! If you are in doubt as to the Resurrection,
(a) [consider] that we have created you of earth;
(b) of semen;
(c) then of a blood-like clot;
(d) then of a lump of flesh,
(dd) [which is] formed or not formed;
so that we may demonstrate to you [our power];
and we establish in the wombs what we will,
till a stated term;
then we bring you out as infants...

The second is from the chapter of *The Believers*³⁶⁰:

(a) We created man of a quintessence of clay,
(b) Then we placed him as semen in a firm receptacle,
(c) then we formed the semen into a blood-like clot;
(d) then we formed the clot into a lump of flesh;
Then we formed out of that lump of bones
and clothed the bones with flesh;
(dd) then we made him another creation.
So blessed be God the best Creator” (ibidem)³⁶¹.

³⁵⁹ Sura *Al-Hajj* .

³⁶⁰ Sura *Al-Muminuna*.

³⁶¹ Musallam quotes these as the most significant passages regarding this issue, according to the importance they have received in Quranic exegesis and in Islamic jurisprudence (Musallam, 1983: 53).

(b), (c) and (d) describe the first stages of the foetus, i.e. a period of 40 days from conception, called *nutfa* (semen); a second stage of 40 days called ‘*alaqa* (“blood-like clot”) and a third – after other 40 days – is *mudgha* (“lump of flesh”). At the end of the first 120 days the foetus is ensouled (dd). Reference to these three stages is to be found first in the *hadith*³⁶² – hadith and not in the Qur’an, however this concept of ensoulment strongly influenced the legislation in Islamic law on abortion. This explanation of foetal development³⁶³, hence, ascribes the feature of humanity at the moment of ensoulment, which is seen as “the crucial event before which the foetus was not a person” (Musallam, 1983: 59). As remarked by Musallam and in relevant literature (Atighetchi, 2010a; 2010b; Obermeyer, 1994; Bowen, 1997; Weigl, 2010), there are significant differences³⁶⁴ in Islamic jurisprudence (*fiqh*)³⁶⁵ as to the definition of the limits for abortion, however “all *ulama* concur in stating that abortion is universally forbidden when it involves the killing of a soul. The intricacies of the argument as delineated in *fiqh* – and as debated today – turn on two factors: the point of creation or ensoulment of the foetus and the health of the mother” (Bowen, 1997 : 163). These two aspects are also pivotal in analysing the development of the debates on abortion in Morocco, in so far as some actors draw predominantly on the doctrinal aspects concerning the development of the foetus – both prior *and* after ensoulment – while others rely on the same sources to state that abortion is licit under certain conditions. Thus, the progressive development of the

³⁶² Atighetchi (2010b) explains that the *hadith* collected by Bukhari affirms that ensoulment takes place after 120 days.

³⁶³ It agrees with the Galenic account of foetal development (ibidem: 54).

³⁶⁴ The majority of Shafi’ite jurists allowed abortion within 40 or 42 days with the authorization of the spouses (Atighetchi, 2010a). Whereas, many Hanbalites tolerated the interruption of pregnancy within 40, 80 or 120 days of fertilization (ibidem).

³⁶⁵ Which in Morocco adheres to the Maliki School which historically forbade abortion also before the first 40 days; Maliki law generally forbade it after four months but allowed it for therapeutic reasons. Contemporary approaches to abortion are quite restrictive, although they may encompass some ‘nuances’, such as those provided in the final declaration of the 1971 Rabat conference on Islam and family planning (Atighetchi, 2010b). The doctrinal position of the Maliki and other schools is summed up by Bowen (1997): “Some schools of Islamic law—the Malikis, the Imami Shi’is, the Ibadis, and the Zahiris—hold abortion at any time to be the killing of a potential person. The majority of jurists of these schools believe that the foetus is ensouled at conception” (Bowen, 1997: 164).

foetus and its infusion with the soul (*ruh*) seem the decisive features for the definition of the boundaries of human life³⁶⁶.

However, the insights of a physician – who I met and interviewed in depth after the public ‘pro-choice’ action³⁶⁷ – further lead me to rethink these ‘boundaries’, i.e. to look at this question in different terms by bringing attention to deeper local and contextual dimensions. To begin with – given that I have focused on out-of-wedlock pregnancies and births – it is to be recalled that it would be misleading to make an implicit assumption about pregnancy termination and extramarital relations or what some media define as “sexual freedom”. Actually, I have often been warned against this over-simplified view, given that – both in the past and in the present – many married women incur similar problems when facing an unwanted pregnancy. Moreover, since the *fiqh* has always elaborated ‘solutions’ to frame extramarital births – like *ragued* – emphasis is put on the need to elaborate further modes of dealing with similar issues in a changing social, cultural and historical context, by relying strongly on “social wisdom” and local symbolic resources. A significant way of formulating this idea is that it has to be grounded in its historical perspective, because erasing it – and circumscribing the issue of abortion to current times and out-of-wedlock pregnancies – means overlooking both women’s history, their lived experiences and the history of Islamic jurisprudence. Fertility and its management – including pregnancy termination – were lived in “absolute silence” and were left “unspoken” precisely as a coping strategy. Conversely – this physician argues – speaking out against these issues and addressing them overtly in the public sphere, particularly through ‘shocking’ actions put forth by foreign feminists – might just complicate local ‘coping strategies’ and might potentially hinder debates

³⁶⁶ The fact that its timing varies according to the different interpretations ascribes greater flexibility to attitudes towards abortion in the diverse legal contexts, although it should be stressed that current legislation adopted by Nation-States result both from the ruling legal tradition – such as the Maliki in Morocco – and by the legacy of former colonial laws, which influenced the codification of these issues (Hessini, 2007).

³⁶⁷ In which she did not participate: she was neither a ‘pro-choice’ supporter, nor a ‘right-to-life’ activist. For confidentiality reasons I have chosen to keep this informant anonymous.

that were already taking place according to very different, yet “more adequate” modalities.

Furthermore, ‘external’ initiatives – as the aforementioned one – were defined as the trigger of moralising discourses which assume “Arab-Muslim authenticity” as their frame of reference and narrow down the broad scope of interpretations provided by Islamic sources and their interpretations to a very limited conceptual framework of the ‘beginnings’ and the ‘ends’ of human life. Such approaches, in my interlocutor’s advice ultimately dismiss “historical forms of social wisdom” inherent to the Moroccan reality, in which “distressful conditions” – such as out-of-wedlock pregnancies and births – could be dealt with, without addressing the question directly, but rather by drawing on the “*wisdom of silence*”. According to this perspective, thinking merely in terms of ‘limits’ may easily lead to conceptualising reproductive practices in terms of the “right to life”, whereas this idea – formulated in these terms – has been until now alien to the local context.

A similar perspective has been put forth by another interlocutor with a medical background who stressed that “Islamic revival, political Islam, has a view which is more conservative than the classic Islamic vision. Political Islam seems having a *Christian* approach to abortion., for instance. We observe nowadays a view which completely opposes that of classical Islamic knowledge” (personal communication, October 2012). In this sense, the recourse to classical interpretations of law would avoid ‘reductionist’ approaches and would open up “manoeuvring room for people who need access to disapproved procedures” (Bowen, 1997: 181). ‘Historical wisdom’ would enable for instance to decriminalise abortion on the grounds of a wider and more flexible array of reasons, starting from incest, rape and ‘dramatic’ situations, which – according to this informant – might include also *other* cases implying some sort of risk for women. Hence, risk is drawn upon exactly for its being very flexible, whereby also “not desiring” is also cast as a potential risk: not desiring, explicitly or implicitly refusing pregnancy³⁶⁸ are included in the possible cases eligible for medical abortion, whereby refusing – or not acknowledging – is also conceptualised as a form of “resistance” and of expression of one’s desire to give birth despite unfavourable conditions and the family’s opposition.

³⁶⁸ Like in the cases of young women who may not openly acknowledge pregnancy until up to seventh month.

So, why the current self-proclaimed ‘right-to-life’ Islamic approach has been defined closer to a Christian approach to abortion? Although the above statement explicitly hinted at Northern American right-to-life movements (Ginsburg, 1989), it might also apply to some ‘pro-life’ Italian Catholic groups (Mattalucci, 2012): in this regard, I can say that the members of Moroccan right-to-life groups were actually glad to know about and willing to get in touch with similar Italian organisations³⁶⁹ because they said they may share converging views concerning the attribution of ‘human life’ to the embryo from conception:

“For me it’s clear, it’s since the beginning, since the first day. Since that day life has to be respected. There are phases – embryo, foetus – but the richness of life is also in the first cell. If we look at it at the microscopic level, we see that it’s organised, systematised, it’s unique. The first cell that is fecundated is unique, it cannot be repeated. The DNA of an embryo is unique. And then it starts differentiating...I think that even the ‘*ulama* [Muslim scholars] who talked about the 40th and 120th day [should see it this way] (...) if people became aware of the mystery of life, it’d be amazing. It’s extraordinary what goes on, this cell differentiation...So, I’ll say we have to preserve this life because it’s really complete. The question of the 40 days it’s the soul... It’s the time in which God sends Malak, the angel which is responsible for the soul (...) The embryo will become a human being. Why should the human being intervene? For me, as a believer, the end of life depends on Allah. Human beings should not intervene in life because they don’t create it. (...)

Then you have science. I see the amazing scientific sides in the life of the embryo. Human beings have to respect limits and human limits are the creation and the end of this life. In the name of what right does a woman have to put an end to the life of a creature? The embryo is different, it’s other than herself. The fact that she bears this embryo in her womb doesn’t grant her this right of freedom or rather this

³⁶⁹ Their existence came up during our dialogues.

freedom to do whatever she wants with her body. It's not her body, she carries it [the embryo] and the proof is that the blood group is different...Many things are different. DNA is different. If Allah has chosen that the embryo grows in the woman's womb, it won't be the woman who will *abuse* of this embryo." (general practitioner and 'right-to life' activist, November 2012).

From this excerpt it becomes clear that the phases of foetal development described by Islamic texts may be drawn upon in different ways, whereby this doctor and activist combines her scientific knowledge and Islamic embryology: this view enables her to give an account of the female body as a vessel for the embryo, described as an entity other than herself. According to this perspective, "life" as potential humanity and as God's creature is to be found in cells, whose features of uniqueness and completeness are drawn upon to claim the need to 'protect' them against any kind of "abuse", even prior to ensoulment. Interestingly, the advice of this woman and that of a gynaecologist and fellow activist in this right-to-life organisation, rely significantly on their biomedical knowledge, which is inscribed in a – type of – Islamic bioethical framework in two ways. First of all, by both women Islamic embryology is described as the main source of knowledge concerning reproductive processes, while their medical background and professional experience simultaneously reinforce their view on the embryo³⁷⁰ as a creature of God, which – as such – needs to be preserved. Secondly, this discourse fits into these women's political activism: although they had had previous experiences of activism in Islamic political movements³⁷¹, they were declining their engagement in the cause of 'right to life', which mirrored their broader ideas of society, gender and education. These two women – as well as other activists who I met and who have no medical background – took part in the demonstration against the European-Moroccan 'action' for the decriminalisation of abortion. They considered it offensive to

³⁷⁰ "The fact that I'm a doctor, that I did embryology, that I'm aware of the mysteries of life and that it's something extraordinary, this has consolidated my beliefs." (doctor and activist, November 2012).

³⁷¹ We did not discuss their story of activism, but they had mentioned it. They positioned themselves in critical terms towards the Islamist party, to which the current head of government belongs.

Moroccan women's dignity, as a mere imposition of the supposed priorities for women, a threat to their "identity as Muslims and Moroccans", in addition to the controversial and biased representations of Muslim women in Europe. These were the main reasons why the counter-demonstrations³⁷² – which I observed³⁷³ – drew on the claim of religious identity which was expressed by recurring to the rhetoric of the right to life and by showing placards and pictures of foetuses which defined abortion as a crime.

Before the European-Moroccan activists started advocating for the decriminalisation of abortion according to "reproductive choice", local actors had elaborated on the question of abortion starting from diverse standpoints, although public initiatives which have explicitly focused on it – involving also actors who deal with unwed mothers and their children – have been organised by physicians working in public hospitals. These physicians – who have founded a non-profit organisation – foster indeed a public health perspective and advocate for the decriminalisation of abortion, that – in the current situation of illegality – is defined primarily as a risky and unsafe

³⁷² Within the scope of this work I cannot give further details on the dynamics of these demonstrations, although they certainly deserve further attention, both for the analysis of the repertoires mobilised by all actors involved (organisers and protesters), as well as for the methodological stakes this event has raised in term of my positionality as a researcher. The activists whom I quote in these pages are not all the ones I met at the demonstration and whom I subsequently interviewed in Rabat and Casablanca.

³⁷³ When I went to the northern Moroccan town where the 'action' was supposed to take place, I was aware that it might have been difficult to demonstrate that I was not a foreign journalist nor a supporter of the organisation which had organised this initiative. However, the time spent on the 'scene' of the counter-demonstration was fruitful and I was able to get in touch with some actors involved, who I met afterwards, besides the richness of the 'observant participation' at this kind of event. Yet, some teenagers who joined the counter-demonstration – and might have been 'recruited' to that aim – addressed me and a friend by saying "*dégage!*" [go away], as they thought that we were among the pro-choice European activists or journalists. A considerably different and very friendly encounter was instead that some of the women among the demonstrators, who actually addressed us in the first place to explain their positions in the demonstration and on the abortion issue overall. Being members of organisations working – among others – with unwed mothers in northern Morocco, they were willing to highlight their peculiarities and differences from bigger Casablanca-based associations and warmly invited me to visit them – although for contingent reasons I was not able to do so. Some of these activists were at the same time members of women groups within Islamic political movements.

practice causing women's morbidity and mortality, whereby these affirmations are based on the one hand on clinical practice and 'informal'³⁷⁴ estimations, and on the other on data provided by the WHO³⁷⁵. Secondly, this physician's advocacy aims to reduce the market of illegal abortion hinting at the immorality of the commodification of such practice; he stresses at the same time that the decriminalisation of this practice would also decrease the risks for the practitioners themselves, who would not risk heavy sanctions as currently happens. The most relevant features within the current research are first of all that this perspective strives to build a dialogue with local institutions in order to initiate a process of reform, based on the modification of existent legislation, which allows therapeutic abortion in the first trimester when the mother's life is in danger or in case of serious foetal malformations(Art. 453 of the Penal Code) . Such a change – according to this perspective – would be possible by re-interpreting and extending the notion of 'health'– already present in the current Moroccan law³⁷⁶ – to all situations encompassing some form of – bodily or social – risk for women. Interestingly, in this view women's health is defined both in relation to potential hazards caused by

³⁷⁴ Such estimations rely on the personal and direct knowledge of the medical private and public sector, that the founder of this organisation has gathered throughout his professional life. This is one of the aspects for which he is accused of 'inventing' the quantity of – "traditional and medicalised" – abortions performed daily in the country, which he estimates between 600 and 800.

³⁷⁵ "Unsafe abortion is defined as a procedure for terminating an unwanted pregnancy either by persons lacking the necessary skills or in an environment lacking the minimal medical standards, or both (WHO 1993), and it is something that approximately 20 million worldwide undergo each year resulting in substantial levels of morbidity and mortality (WHO1994)" (Huntington, 1999: 175). These health consequences have been the focus of the development of policies to contrast the phenomena and have been addressed by the 1994 International Conference on Population and Development in Cairo, in whose 'Programme of Action' unsafe abortion was defined as "a major public health concern", that had to be reduced "through expanded and improved family planning services (...) in all cases, women should have access to quality services for the management of complications arising from abortion (ICPD, 8.25)" (ibidem).

³⁷⁶ It is governed – as in Algeria and Jordan – by the Penal Code, based on French colonial law, which allowed abortion to save the woman's life or preserve her health (Hessini, 2007).

unsafe abortion, but emphasis is put more broadly on women's mental health³⁷⁷ and on the 'social illnesses' that unwanted and/or illegitimate pregnancy might generate. To an opposite – yet, intersecting – extent, also a doctor and 'right to life' – *l-haq l-hayat* – activist voices her concern on the role of pregnancy regulation for women suffering from mental illness:

“There are some pathologies and there should be prevention! There should be a health system which doesn't abandon those women, which rather takes care of them, because they are ill! Like for people who have TB – they are not abandoned, there's a programme to cure people with TB, because there's AIDS beneath...So health professionals go to their homes, take care of them. Mentally ill people should also be taken care of properly. Whereas mentally ill women aren't taken care of! And when they get pregnant...*allez*, let's do an IVG! So, IVG becomes the key for everything! For rape, incest, mental illness...” (doctor and pro-life activist, November 2012).

Hence – in both physicians discourses – reference is explicitly made to out-of-wedlock pregnancies, although pregnancies resulting from sexual abuse, rape, incest – and their potential outcomes in terms of distress and suicide attempts – are looked at from very different perspectives. To this regard –in relation to the 'public health approach' – a young journalist stated: “They don't dare ask the complete liberalisation of abortion because that would be linked to 'free' and out-of-wedlock sexuality. They want to go step by step... they speak of social misery and dramas and draw on the WHO definition of health. We [she refers to some colleagues of hers] are more radical, we strive for women's freedom and for their rights over their bodies” (personal communication, October 2012). The public health perspective ultimately strives for the decriminalisation of abortion by circumscribing it to the aforementioned cases and excluding – or circumventing – the question of reproductive choice as the ground on which the decriminalisation of abortion is

³⁷⁷ Risk for physical and mental health are formally included among the grounds for abortion in Algeria (Hessini, 2007: 78).

advocated. Finally, what is also highly relevant, is the comparison made with other Muslim countries where abortion is legal under certain conditions: Turkey, among others³⁷⁸, is often cited in public speeches by this physician, who openly questions why Morocco should not aspire to “development” as other Muslim countries do. Hence, this discourse locates illegal, clandestine and unsafe abortion as the ultimate mark of Morocco’s “underdevelopment”, whereas the legislation of abortion is portrayed as emblematic of development and “progressive interpretations of Islam” (Hessini, 2007: 75).

Interestingly the notion of “development” is frequently drawn upon also by an opponent of the above cited physician and advocate, yet in a different way. The other activist – a general practitioner – emphasizes indeed that “underdevelopment” depends on the conflation of “religion” and “local traditions”, whereas change can occur only if society “gets rid” of them. Radical change in this view can occur only if mutual respect and gender equality, which are stressed as intrinsic features to Islam, are put at the core of social relationships and sexual behaviour. The representation of the embryo emerges in her view as the best example of the fulfilment of equality between males and females, in that it results from their equal ‘contribution’ and responsibility, whereas putting blame only on one of the partners corresponds to an “underdeveloped” way of conceiving gender relation and sexuality:

“In society, I think change starts with women: it’s not like it was earlier, when society was more dominated by men – that was underdevelopment, which implied that even within marriage men cheated their wives. I think things are starting to change. For example, women and girls are starting to have out-of-wedlock relations too. But

³⁷⁸ Tunisia – whose law dates to 1973 – and Turkey – whose law dates to 1983 – allow early abortion on request. In Tunisia, this implied that it could be legally requested within the first trimester, without the husband’s authorisation (Hessini, 2007: 79). Delaney (1991) notes that before 1983 – and during her fieldwork – abortion was becoming a matter “of official concern and policy (...) abortion caused five times as many deaths as traffic accidents, and Turkey has one of the highest traffic fatality rates in the world [like Morocco]. Deaths due to abortion were also ten times as many as deaths from all other kinds of accidents” (ibidem: 58-59).

women actually fear pregnancy. We cannot split sexual behaviour in two... Allah made things so that there's not just pleasure, there's reproduction, pregnancy... Humanity must continue. So the two [partners] are linked to each other: so women always have feared pregnancy, because if it occurs it is refused and she cannot do anything. While men... after having satisfied their pleasure, they get rid of responsibility, while this embryo is the result of two persons. So, the man is as responsible as the woman in the name of equality. If pregnancy occurs, it 'emanates' from two persons.

But I think it is an underdeveloped view... because it stigmatises women. Society doesn't tolerate her, in so far as she bears that embryo in her body. Men are actually not visible. This is why feminist movements *came* to 'liberate women and give them freedom', so that women said 'I'm free and I have freedom of choice, so I do this and I do that...': so extremism is not good in both senses, I mean condemning women or giving her the free authority to do whatever she wishes of herself it's not good for society and humanity. A balanced view would condemn both of them [male and female], both have to be responsible both towards sexual behaviour and towards the embryo – who says 'embryo' , says 'two people'. “ (doctor and activist, November 2012).

This physician, hence, focuses on the embryo and argues that education is crucial in guiding youths towards correct sexual behaviour³⁷⁹, otherwise the risk envisaged is that of “relational anarchy”, whose victim would ultimately be “the little embryo”. Abortion is described as “a criminal act” and the fact that – in her opinion – it is too often taken as “an easy solution” for broader social, economic

³⁷⁹ In which she includes premarital abstinence, early marriage and – in that case – contraception within marriage for very young couples. In relation to out-of-wedlock sex she argued: “It makes no sense to say ‘this is *haram* and this is *halal*’, it's not the goal. Everybody knows for instance that out-of-wedlock sexuality it's *haram*...just like all young people know that drugs aren't good for health [she works as a general practitioners on addictions with youth] but they will look for drugs and make use of drugs: it's the same with sexual relationships (...) religion is a way to protect oneself” (doctor and activist, November, 2012).

and moral problems is sharply criticised, as it would not tackle their “real” causes. In particular, she questions the way sexual behaviour is intended and addresses its being “non-responsible” as a major cause of social disorder:

“This [out-of-wedlock relationships] problem exists. For out-of-wedlock relationships, for instance, abortion is not a solution. It’s a crime. A true solution solves the problem – of rape, incest etc. Abortion won’t stop this. The problem is: what lies behind these phenomena, what makes sexual behaviour a non-responsible behaviour? According to my education, sexual behaviour is responsible; this is how I raise my children. You have to be responsible of sexual intercourse. If you don’t want to get pregnant, you just have to calculate this before. If you make a mistake... Do it once, not twice. You have chosen to have out-of-wedlock sexual intercourse? It’s *haram*, but it’s your problem, it’s your choice. But, the second mistake would be to stop the life of a creature. The beginning and the end of this creature do not hinge upon you. We get into a vicious circle, so the true question is how to solve the real causes and solve them. We are a society which after all has its own identity, its own religion, its character... If we want a change, we have to reflect and act upon this. If we do abortions, we are going to do more abortions. We’ll have more and more IVGs... Besides, according to the experience of the countries which provide IVGs, women keep doing that” (doctor and activist, November 2012).

Most importantly, in this activist’s view – which mirrors to a certain extent those of some of my informants among unwed mothers – if ‘mistakes’ can be accepted and inscribed in an individual framework, ending pregnancy – resulted from those ‘mistakes’ – would be *the* greater mistake, in so far as it would affect the life of another “creature”, the embryo. The elaboration of Islamic jurisprudence regarding abortion in case of extramarital pregnancy is not formulated as such, indeed “all schools of thought forbid the termination of pregnancy that results from illicit sexual activity, such as an extra-marital relationship” (Hessini, 2007: 77). The *fiqh*

assumes that all women who need to undergo abortion are married; the possibility of extra-marital pregnancy is not encompassed in these texts. Hence, “no conditions can rationalize abortion as religiously permitted unless pregnancy occurs within marriage” (Bowen 1997: 169). Therefore, if we consider these statements and discuss them in relation to the case of unmarried childbearing women, we would be stuck in a sort of impasse. However, the aforementioned activist located the occurrence of out-of-wedlock pregnancies within the context of the lack of education, deprivation, poverty, as the ultimate conditions which can explain and justify a “non responsible” sexual behaviour. Thus, society as a whole is considered as ‘responsible’ for their ‘irresponsibility’, whereby condemnation, stigmatisation and blame are deemed useless:

“Why hide the truth? Why not accept the truth? Why not accept the responsibility of the lack of education, that her parents should have given her [the pregnant girl]? We are in a situation of underdevelopment: parents don’t do their job, schools don’t, teachers don’t... We need education to hold on to our values, to pay attention to what we do and take over responsibility for our behaviour, to discern things...Why become ‘judges’? A woman who has made a mistake...Mistakes are human! Why not forgive her and accept that child? He’s done nothing! Why not respect his life? Maybe his future will be better...Also for that girl [the mother]” (doctor and activist, November 2012).

CHAPTER FIVE

The emergence of unwed motherhood in Moroccan society: between the politics of care and ambivalent appropriations

Introduction

“‘excess’ children’ (...) street children in Brazil tend to be viewed as both a public scandal and public nuisance. They are now referred to either as ‘abandoned’ children or as marginals. The first connotes pity for the child (and blame for the neglectful mother), whereas the second connotes fear. But both labels justify radical interventions and the removal of these all too public ‘pests’ from the landscape of modern, congested cities in Brazil (...) Most of the children are today, as in the 1960s, ‘supernumerary’ children of impoverished single mothers” (Scheper-Hughes, 1992 : 240).

In the previous sections of this work I have shed light on the trajectories of young Moroccan women who have borne children outside marriage and I have focused mostly on the urban horizons and social landscapes in which I encountered them. I have simultaneously looked at the ties and the tensions which sustained the relationships some of them cultivated with their households, siblings, former and current partners and hometowns. Yet, as I have made clear, my ethnography has been largely based in a variety of institutional and non-governmental sites, in close interaction with the personnel – either of public health services or of local organisations. This perspective has provided several enriching insights, which enabled me to interrogate the social significance of out-of-wedlock births in contemporary Moroccan society from further points of view. In what follows I aim to call into question the discourses, the measures, the tools and the practices that have specifically been tailored on and addressed to the category of unwed mothers

and their children in order to explore the extents to which they are politically as well as morally productive. I shall discuss how unwed motherhood as a category has been defined and deployed according to an array of instruments within the nongovernmental sector, although it reaches far beyond it and drives to rethink notions of care, marginality, (gendered notions of) vulnerability and risk in the broader political economies of health and care.

In questioning these aspects, I draw on the reflection developed by Ticktin (2011) as she contends that “politics based on care and protection [are] produced as a moral imperative to relieve suffering” (ibidem: 3)³⁸⁰ and that benevolence and compassion emerge as the core of political life, especially in conditions of crisis and emergencies. Ticktin goes further in arguing that such “regimes of care” – constituted for instance by some NGOs and human rights organisations – are “a set of regulated discourses and practices” (ibidem) which would ultimately discard other forms of change for “the disenfranchised” or “the primary subject[s] of care” (ibidem). Ticktin’s perspective is highly relevant to my argument for at least two reasons: her analysis takes issue with medical humanitarianism³⁸¹ and with the movement of violence against women and, in so doing, she throws into relief the ways in which politics based on the protection of suffering bodies produce them as morally legitimate (ibidem: 4). This perspective also enables us to see how “the humanity” produced by measures based on care and compassion is simultaneously addressed with forms of policing or surveillance, moving “too easily from endangered to dangerous, innocent to delinquent” (ibidem: 5) and potentially reproducing inequalities. Indeed, in critiquing the local forms of humanitarian reason (Fassin, 2012) and its regimes of care, I do not fail to consider the forms of structural violence (Farmer, 1999; 2004) and social suffering (Kleinman, Das, Lock, 1997)³⁸² which suffuse the biographies and the everyday landscaped

³⁸⁰ She develops this reflection in relation to immigration policies and “humanitarian measures” in contemporary France.

³⁸¹ Among others, she looks at some organisations which are currently also based in Morocco, i.e. the same NGO has been established in Morocco as a local ‘branch’ of the French one.

³⁸² “Social suffering results from what political, economic, and institutional power does to people, and reciprocally, how these forms of power themselves influence responses to social problems. Included under the category of social suffering are conditions that are

navigated by the young women in this research. The ways in which this large body of anthropological literature has brought to the fore that larger structural forces underpin subjective experiences cannot be dismissed, even within a broader questioning of the measures aimed at ‘reducing’ forms of suffering and precariousness. The reflection raised by Butt (2002) is also relevant to certain aspects of this work, in so far as she calls into question the anthropological production of emotional tales embodied by what she calls the “suffering stranger [who] condenses life histories into emblematic, personalized moments” (Butt, 2002: 6), as mere examples of “facile empathy” (ibidem: 7). This sort of account, according to this author, “uses emotional appeal to create an impression of closeness even as it furthers detachment” (ibidem: 10), whereby ‘suffering strangers’ would ultimately become “icons” to call attention to global inequalities and result in further calls for humanitarian action. Since I have drawn upon some of the anthropological scholarship that Butt takes issue with, I shall make clear that I have sought rather to evoke and to put subjective experiences at the centre of this work “in that they can help clarify the range of meanings behind suffering” (ibidem: 9) and to foster a similar approach when dealing with other dimensions of human experience.

Before questioning the politics of care that I observed unfolding throughout the contexts in which I conducted my fieldwork, I shall begin (§1) by building once again on a story which has spanned these pages, that is Nawal’s. The choice to concentrate on her trajectory is obviously not a coincidence: the aspects of her biography that I have highlighted provided the hints to exploring and problematising some controversial issues regarding out-of-wedlock births, as well as the winding pathways embarked on by many other young women. Yet, although it is dense and complex – or probably exactly for this reason – I wish to make clear that by discussing this case I do not mean to suggest that her trajectory is emblematic of *all* others. Moreover, I actually lost contact with Nawal, at a moment in which she was about to make a decision concerning her immediate

usually divided under separate fields, conditions that simultaneously involve health, welfare, legal, moral and religious issues. They destabilize established categories” (Kleinman, Das, Lock, 1997: ix).

future, hence I cannot even say how her ‘trajectory’ – at least during the time of my fieldwork – was unfolding. This premise was meant to stress that the events that I am going to deal with in the following pages have been chosen as significant ethnographic material for a deeper understanding of the everyday life and challenges faced by some of these young women. Emphasis put on their coping strategies and survival – theirs and their children’s – is an entry to a wider reflection on the ambiguities and the discrepancies of the politics of care tailored on specific – ‘vulnerable’ – subjects. On the other hand, touching on the issue of infant mortality within the discourse on unwed motherhood, allows to broaden the reflection on the boundaries of human life and on its diverse local bioethical elaborations, which I have discussed in the previous chapter in relation to the multiple and contradictory experiences of pregnancy and to the embodied practices to – potentially – disrupt it.

Indeed, I shall argue that similar ‘blurred’ and shifting understandings may be mobilised also in confronting infant mortality in a context of uncertainty, such as that experienced by Nawal – and Zohr. In looking at this issue, I will draw significantly on Nancy Scheper-Hughes’ ethnography conducted among north-eastern Brazilian shantytown women on their experiences of maternity and loss (Scheper-Hughes, 1992). Hence, a critical approach to these aspects of the lives of my research subjects is not meant to further reinforce their representation as victims ‘as such’, nor to infuse this account of young Moroccan women with additional compassion – a notion that I am actually taking issue with. I rather argue that the forms of compassion surrounding unwed mothers – in the contexts that I got to know – are sometimes ambiguous, in so far as they re-articulate moral categories functional to the delivery of assistance. However, the portrayal I give of Nawal – as well as of other *bnat* – shows rather that victimhood is a social and cultural construct: indeed, besides the overriding forces and the various constraints which suggest these women’s subordination, I have sought to highlight also the aspects which actually contradict it and the features which show their – more or less implicit – complicity in sustaining or in actively crafting the (sometimes) distressing situations they experience.

Thus, I will build upon the reflection the I have elaborated so far as a background to re-thinking and exploring further dimensions of unwed motherhood, by focusing on social and health services and institutions which organise and deliver forms of care to women and children. I shall argue that these institutions and organisations may be seen as sites of production and enactment of a peculiar ‘compassional gaze’, by which I mean a set of views, discourses and practices connected to notions of – health and gender – vulnerability, of which (certain types of) unwed mothers and their children are emblematic examples. Hence, (§2) I shall base my insights into my fieldwork across State-lead health services, local charities and non-governmental organisations in order to problematise the functioning of the dispositifs by which care is delivered and how they contribute to fabricating specific kinds of beneficiaries³⁸³. Since I have already focused upon some of the aspects of the charities’ and NGOs’ initiatives for unwed mothers, I will further explore their stakes by calling into question their imbrications with governmental initiatives which tackle social and health inequalities, although these are expressed in the depoliticised language of social and/or gender “vulnerability”, which allows a tacit and implicit inclusion of unmarried women and their children in regimes of (primary) care by the Ministry of Health. I shall argue that these aspects inherent to the social construction and ‘management’ of unwed motherhood – both in non-governmental and governmental arenas – are to be understood in the historical dimension, i.e. within the institutionalisation of the management of reproduction, birth, maternal and child care.

I wish to draw attention to the enactment of the dispositifs of care within the governmental and non-governmental fields, by which specific categories are created and targeted as beneficiaries and users. Hence, also the ‘emergence’ of

³⁸³ The beneficiaries are either called “*les mamans*”, in French, or “*l-bnat*”, in Moroccan *darija*, the latter meaning both “girls” and “daughters”: here the French term is mainly used in third person when referring to the beneficiaries, whereas the Moroccan term is commonly used by the personnel of the charities to address the beneficiaries and in talk between personnel and the beneficiaries – although of course such nuances and uses are flexible. What needs to be underscored, is that the French term is predominantly used also in formal and official discourses or when dealing with visitors, journalists and activists as well as having entered the rhetoric on unwed motherhood, at least in the *bidawi* context, where the personnel – at least at some levels, in the administrative and pedagogic sections – is mostly educated and French speaking.

unwed mothers and their children may be understood as part of a process of the ‘institutionalisation’ of (maternal and child) care³⁸⁴. I have already brought attention (Chapter Three) to projects which focus on sexual health within the non-governmental domain, in order to question the extent to which they challenge, or rather contribute to reproduce, assumptions and forms of stigma attached to female’s sexuality, sexual-monetary transactions and out-of-wedlock births or abortion. I will now look at other ‘pedagogic’ activities addressed to unwed mothers within local charities (§ 3), in so far as the specific focus on hygiene, prevention and bodily propriety – combined with tools of education, skills development and professional training – is in my opinion a potent metaphor for the endeavour to reconfigure a modern and socially acceptable figure of unwed mother.

While the aspects that I have emphasized in the third and fourth chapters touch on the construction of moralities through practices aimed at disciplining and reframing female out-of-wedlock sexuality, by connecting it in ambivalent ways either to unawareness or to risky behaviours and while the question of ‘abandonment’ was mainly evoked by non-governmental actors in relation to the prevention of infant abandonment by their biological mothers, a similar theme resonates further in the accounts of other NGO professionals or volunteers when discussing the social destinies of these young women once outside the charities. The former beneficiaries are further infantilised by bringing – renewed – attention to their bodily integrity and health, which would ultimately motivate the need to “protect” and “not to abandon these women”.

³⁸⁴ Hence, a broader reflection on the politics of care lies at the core of the ethnography of out-of-wedlock births and unwed motherhood in contemporary Moroccan society and calls for its contextualisation in the larger political economy of health, in which different sorts of inequalities – not just those referable to unwed motherhood – are increasingly reduced and re-formulated in the depoliticised terms of vulnerability, hence diverting attention from overarching structural processes which may (re)produce them.

§ 1 Love, remedies and poisons

Nawal is among the women who showed her staunch determination to raise her child despite her family's hostility and her own mother's pressures to abandon her newborn³⁸⁵. Yet, as I shall elaborate on, the need to conciliate the diverging duties of daughter, the economic resources for herself and those for her household, and her role as a mother engendered a series of constraints and distressing situations, including her child's death when he was about five months old, while she was some hundreds of kilometres away, at her *bled* where she had had to travel for the celebration of *Eid l-Kebir*.

Why do I deem meaningful to the aim of this work to reflect upon this episode? Although it is (almost) the only case of infant mortality which occurred among my informants' children, I shall emphasize its significance as – as I shall make clear – it embodies the issue of loss, beyond the child's loss itself. In reflecting on maternity and mortality in the Middle Atlas in the 1970s, Maher (Maher, 1984) argues that – although child mortality was attributed to “the greed and neglect of mothers, it [was] more likely to be due (...) to the neglect of the mother's physiological needs” (ibidem: 111). The author referred to a wider array of issues concerning childbearing, breastfeeding and child-rearing in that specific context – in relation to young, but married women. Yet, this observation seems to me relevant, in that it sheds light on the tensions embedded in the imagery of women's selfishness, greed for material goods and lust for illicit sexuality³⁸⁶ as threats to their children, in contrast to the conditions of women's material deprivation or precariousness. I argue that the moral cleavage between caretaking mothers and those who ‘turn away’ from these chores is consistent with the emphasis put by some unwed mothers on the ‘good’ and the ‘bad’ girls, even among their room or charity ‘peers’, not to mention unwed mothers ‘outside’ those enclosed spaces. I mean that certain representations of femininity and motherhood provided by women themselves blame the material and sexual triggers of mother's – real or alleged – child neglect or abandonment. Hence, I think that this sort of moral ambivalence evoked by the women described by Maher reverberates in the tensions

³⁸⁵ Chapter One.

³⁸⁶ Coherent to current imageries discussed in the previous chapters.

spanning the experiences of my research subjects, among which – probably more than in others – in Nawal’s story.

In seeking to elaborate on the episode of Ayoub³⁸⁷’s death, I draw significantly on Scheper-Hughes’ reflections on “*Moral relativism and the primacy of the ethical*” (Scheper-Hughes, 1992 : 21) as this drove me to reframe my insights and raw ethnographic materials and emotions. In this work, as well as in others (Scheper-Hughes, 1995), Scheper-Hughes’ argument builds on the idea that anthropology *is* to “think about cultural institutions and practices in moral or ethical terms” (Scheper-Hughes, 1992 : 21) and is as such “ethically grounded” (Scheper-Hughes, 1995: 410). Following the theologian Buber, she questions the “suspension of the ethical” (Buber, 1952, in Scheper-Hughes, 1992: 22) in relation to the Old Testament story in which Abraham/Ibrahim is commanded by God to sacrifice his only son, which in the Judeo-Christian tradition is Isaac, whereas in the Muslim tradition it is Ismail. In obeying, Abraham submits to divine command. The theologian – argues Scheper-Hughes – actually asks how humans “can distinguish the voice of the Divine from the false prophets, who imitate the voice of God and continually demand that humans make various kinds of human sacrifices” (ibidem: 22). Scheper-Hughes, hence, thinks of a “suspension of the ethical” in relation to her shantytown women, who seemed to have suspended “compassion, empathic love and care – toward some of their weak and sickly infants” (ibidem: 22). The author stresses that the practices of these women are not to be seen as cultural products, but rather as by-products of social history and overarching economic and political forces, which have actually ‘suspended the ethical’ in relation to those women, while mentioning also the Catholic Church’s considerable “moral ambivalence about female reproduction” (ibidem: 22).

Therefore, my approach to Nawal’s child’s death – as emblematic of “chronic scarcity and loss” (ibidem: 15) – is necessarily mediated by this kind of perspective, which interrogates the boundaries of the ethical without reducing them to – what I shall call – ‘compassional tales’. I wish rather to examine them in the

³⁸⁷ Nawal changed his name at least three times before choosing it: so each time I saw her in the child’s first weeks of life, he had a different name. Of course, like all other names I use in this work, “Ayoub” is a pseudonym.

moral productiveness of the diverse dispositifs of care addressed implicitly and explicitly to unwed mothers and their children by a wealth of actors and organisations; in the filial duties to which most young women are bound as income producers and economic subjects; in the configurations of power which may surround or engender sexual-economic transactions; in the ambiguities of love and romance; in the position of subalternity intrinsic in their service in the houses of women of higher economic status; in the forced ‘delegation’ – and monetization – of child care to other women-caregivers, the *morabbiyat*; in the ambivalent conditions of the negotiation of sexual intercourse or in the deals featuring in the market of abortion, out-of-wedlock births and forms of children circulation and – secret (Bargach, 2002) or sometimes ‘forced’ – “adoptions”³⁸⁸. These aspects ultimately account for the ways in which violence is to be found in the subjects’ everyday life, as clearly shown by ethnographies such as Scheper-Hughes’. Here, I shall argue that even when it does not deal with the “routinization” (Scheper-Hughes, 1992: 20) of infant death – as is the case of my research environment – the normalisation and the ‘making ordinary’ of conditions of hardship emerges in controversial ways also along the trajectories of some of my research subjects.

³⁸⁸ Nancy Scheper-Hughes speaks of “trade in babies (...) When coercion, bribery and trickery are involved in [Brazilian] child adoption, the humanitarian gesture is easily unmasked as little more than institutionalized reproductive theft that puts the bodies of poor women in the Third World at the disposal of affluent men and women in Brazil and elsewhere. But regardless of the form it takes, the trade in babies has contributed to the chronic state of panic that I am describing and to [Alto residents’] perceptions of bodily destinies that are out of their control” (Scheper-Hughes, 1992: 242). Whereas adoptions without the parents’ consent or outside formal circuits of adoption are also referred to as “reproductive trafficking” (ibidem: 244). I have not dealt directly with similar cases, although an acquaintance described a relevant episode, which she had witnessed in a public hospital, where a newborn was given to a foreign couple right after birth. The newborn was then taken to the consulate of the couple’s home country and registered as their biological child. However, ‘scandals’ concerning circuits of secret illegal adoptions of Moroccan infants by European families have been reported by the press in recent years, although they may concern previous decades: http://sociedad.elpais.com/sociedad/2013/05/08/actualidad/1368010519_544227.html [accessed 18th May 2013]; <http://arabpress.eu/marocco-danze-macabre/> [accessed 11th June 2013]. The countries mentioned in these articles are not the only ones involved in secret or informal adoptions; for instance, the case witnessed by my acquaintance in a public hospital involved a couple coming from a different country.

What – beyond the chronological concomitance – lies under the sacrifice of a lamb at Nawal’s *bled* and her child’s death? What makes me consider as relevant – or critical – the concept of “suspension of the ethical” when dealing with Nawal’s story – or with its ‘bits’ that she shared with me? Let me start from the end, i.e. from my – last – meeting with Nawal a few weeks after her child’s death. Nawal touched on that issue, yet it was in relation to her other current problems. Nawal told me that after her son’s death she turned to one of the charities which had given her some support (when she first rented a room with other girls) : a social worker told her that a lawyer had read the documents produced by the hospital about her child’s death and that it resulted “normal”, so the case was closed.

Nawal told me she was a bit confused, but sought to forget and carry on. She rather asked me why I was so sad about Ayoub’s death: I replied that I was sorry for her because on that day she seemed desperate to me, from the phone call in which she told me what had happened, to the very moment in which I met her at the hospital. Since the day of Ayoub’s death, she had once met the *morabbiya* with whom she had left him when she had headed to her *bled* for the celebration of *Eid l-Kebir* – however, the child had been left with that woman on a regular basis and rarely spent more than a few hours with Nawal, even when she was not at work. The *morabbiya* maintained she had done no harm to the baby, who was like a son to her: she said that he had not fallen and the causes of his death were unknown to her. Yet, Nawal wondered if he had actually fallen and said that she had noticed that a part of his face was red when she saw his body. Although she ultimately ascribed his death to God’s will, she still wished she had been with him and had given him medication; if she, and not the other woman, had taken him to hospital – she thought – he would have survived. Whereas she was on her way back from the *bled*. In the previous months, since he was about a month and a half, her son had already been sick and taken to the doctor at two different public hospitals, where she had been given drugs – *al-dwa*³⁸⁹ – special powdered milk to be bought at the

³⁸⁹ In chapter four I drew on what Pandolfo (1989) notes about the meaning of the term *dwā*: its duplicity hints at something which depending on its dosage can either be a remedy or a poison, hence “what heals and what harms at the same time. On the one hand the possibility of life (as emerging from death) is a matter of dosage, a recipe, in the traditional medical sense; on the other, independent of any possible dosage effort, the remedy has in itself the principle of death” (Pandolfo, 1989: 19). I argue this way of

pharmacy, “*kolchi*” [everything], that she claimed having given him for fevers and diarrhoea; she had also been to some charities’ dispensary, where she had also been provided with powdered milk and drugs.

The first time she had to take Ayoub to hospital for severe diarrhoea, it was also a *morabbiya*’s fault, she claimed. Maybe, Nawal said, her son had died because of dirt too, since that woman’s house was “very dirty and dirt – *muskha* – was everywhere, on his clothes, on the feeding bottle”. She claimed that the baby was already dead when he was taken to hospital: she thought the *morabbiya* had lied when she said that she had taken him to the emergency room and that she had lost her mobile phone number and could not let her know that Ayoub was desperately sick. Indeed, Nawal had allegedly told that woman to ring her in case of problems – even if she stressed that she had left nappies, drugs and milk to last for at least four to five days, before her return. Providing the child caregiver with this amount of goods and buying gifts in food and clothes to take to her house for the *Eid* had implied a considerable financial effort for Nawal, but she had no alternatives because she was not allowed to take the baby with her, nor could she go home with no gifts and no money. Therefore, she *had* to trust the *morabbiya* too, although after Ayoub’s death she had suspected the woman had some responsibilities in it.

Nevertheless, when I reached Nawal at the hospital on the very day of her baby’s death, she did not accuse that woman, who was also there (with other women and with Nawal’s sister’s fiancé). The caregiver – probably at least some thirty years older than Nawal – looked sad and at times in despair about Ayoub’s death. She repeatedly cried and shouted her sorrow, by hugging Nawal and even me and by throwing herself violently on the ground in front of the hospital’s gate in the middle of the crowd; by holding our arms and by staring into our eyes, she also said to us that if her husband ever found out about this, he would have divorced her and she would have found herself “*fi l-zanqa* [in the street]”. Nawal, then, sustained her physically and helped her to get up, while telling her not to worry so much. She was almost laughing as she said to her: “Come on, don’t worry! Next time *insha’allah...I’ll make you two, two of them* [babies], is that right?!”: a

conceiving *ddwa*, aptly describes also the strategies enacted by Nawal in seeking to heal her child’s recurrent sickness.

sentence which initially struck me, even if in the ‘emotional turmoil’ we were all in, I could not but take it as another example of the ambivalent relations these words wove into.

Nawal turned the tragedy into a ‘women’s joke’ by promising the *morabbiya* further babies to take care of, as if it dealt with a woman of her family, thus establishing – even if temporarily – a bond of intimacy with a person who she actually paid to look after the baby. On the other hand, the *morabbiya*’s reaction – whether it displayed authentic sorrow or not – and Nawal’s response also interrogated me, in that it necessarily contrasted Nawal’s mother’s behaviour (or at least what I got to know about it directly and through Nawal). The woman, since Ayoub’s birth, sought to convince her daughter to get rid of him, through promises and gifts she made to her on her visits to the charities where the girl was. Moreover, as reported by Nawal, her mother’s reaction to the child’s death was a technical one, as she ordered her to gather her “stuff” and to return to her village. Otherwise, her mother told her that if she stayed in Casablanca, she should earn enough money to motivate her permanence there. It dealt, however, with expectations that Nawal could not live up to, given the precarious jobs she found. Yet, I deem the whole situation worthy of reflection because of the ways the different actors gave meaning to the infant’s birth, survival, and death and to the stakes of each situation, whether it dealt with moral, material or social stakes, whereby the presence of the child and its care lead to redefining the boundaries of relatedness, trust, care and intimacy. The fact that Nawal had to entrust her child to that woman and had to pay her for this task is coherent to the economic pressures and requests exercised by her mother, whether the child was alive, abandoned or dead. I argue that the material challenges faced by Nawal in her coping strategies may be seen as emblematic of the ways in which – structural – violence insinuates in the interstices of everyday life, notably as it is embodied in mother-child relations and impacts on the ways care and infant feeding are delivered by most unwed mothers I got to know. When walking away from the hospital on the evening of the day in which Ayoub died, Nawal and I walked side by side a few steps away from the other people – her former flatmate Zohr, another young woman who had been Ayoub’s first *morabbiya*, the old *morabbiya* and Nawal’s sister’s fiancé. Then she started remembering about the problems she had always

had with bottle-feeding: she had mentioned in previous meetings that she had been given powdered milk from a charity in Ayoub's first weeks of life, but she had subsequently complained about the fact that she had – allegedly – been denied it after a while.

Another time she had simply said: “*Safi* [that's it]... they have told me that there is no more milk!”, but at the time I did not know how that service actually worked, as my ‘*stage*’ at that charity's dispensary had been reported. Otherwise I would have noticed that according to the charity's organisation there should have been some specific reason for suspending the provision of powdered milk to a one-month-old baby – as it is supposed to last much longer. During the time spent at the same charity's dispensary, I was told that the milk delivery was organised according to precise criteria, among which the registration of each time a beneficiary was given powdered milk cans, in order to avoid “abuses”, since it had been discovered that some beneficiaries took too many cans and – allegedly – sold them to other women. For these reasons girls signed or left their finger prints on the register every time they were given powdered milk. After having heard about ‘abuses’ I remembered what Nawal had told me a few months earlier: she had said that at some point she had been denied powdered milk from the charity. Still, I had no elements to prove (or I refused?) the possibility that she might be among the ones who – given financial constraints – had ‘abused’ in those ways of the charity's aid by making a trade of powdered milk, which might have ultimately been detrimental to her child's health. However, that thought came only superficially to my mind and I never thought of asking Nawal for more details. After all, if she had had some problems or misunderstandings with that charity's milk delivery service it might have been for some other reason as well. Besides, I retrospectively wondered if my further interest in the reasons which stopped her from being a beneficiary of the milk delivery service might cause her mistrust towards me – considering that gaining her trust had not been as easy process.

After she stopped receiving milk from the charity, Nawal claimed that she had bought the same milk³⁹⁰ at pharmacies, although it was very expensive for her.

³⁹⁰ The powdered milk provided by local NGOs to their beneficiaries is produced by a leading corporation in the field of infant formulas. In previous decades, this corporation was often accused as being responsible for infant deaths in many countries worldwide;

Then Ayoub started getting sick, so she was very strict about the bottle-feeding indications she had been given by the doctor she had seen. Nevertheless, the price of the milk – she said – drove her to alternate the ‘right’ and expensive formula of the pharmacy with the much cheaper and easily available one³⁹¹. Even if she was aware that it was not suited for such a small baby at all, she stressed: “I thought... well, *just for a while*, then I’ll switch back to the pharmacy milk”. Infant-feeding was an activity that she could not constantly control herself, as she argued that she placed the baby at a *morabbiya* quite early, when he was about four months old: a month before his death she actually stressed that he stayed there all week long – even overnight – and that he was the youngest of the babies in that woman’s house, but she could not help it. Before leaving the baby for prolonged periods of time – during which she spent only a few hours with him – at the house of that woman who she paid a considerable part of her wages as a waitress, she had spent a couple of troublesome months in which she had not always had a permanent shelter and in which, while at work, she had to leave the baby with the people with whom she subsequently shared a room³⁹² or sometimes with a *morabbiya* of the same neighbourhood, who she obviously paid and who she deemed responsible for Ayoub’s first sickness. Hence, it emerges how, since his birth, Nawal’s son’s care had to a certain extent to be delegated to somebody else, this feature – the ‘*disembodiment of care*’ – being intrinsic to his condition as the son of an unwed mother, who lacked support both from her parents and from her former partner(s). This feature, hence, is not to be overlooked either, as – as noted by Schepers-Hughes in her analysis of the changing patterns of infant and child mortality in a Brazilian shantytown – “the mother’s youth and relative inexperience sometimes played a part in her children’s deaths, as did the fact that many Alto women were

bottle-feeding was labelled as “The Baby-killer” (Maher, 1984: 111) based on the fact that in conditions of poor sanitation bottle-fed babies are more likely to develop infections and diarrhoea than breastfed ones. Schepers-Hughes also discusses the role played by this type of – at the time – ‘new’ killer (Schepers-Hughes, 1992: 280).

³⁹¹ It is produced by the same brand, but this type is cheaper and suited only for weaned children. It is commonly sold in groceries and shops.

³⁹² Other unwed mothers or a divorced woman with her two daughters.

single and unsupported during the earlier pregnancies and births” (Scheper-Hughes, 1992 : 310).

Furthermore, the fact that she had not been able to represent herself as a virtuous girl to the charities with which she had progressively interacted made her neither entitled nor eligible for their *prise en charge*, as she actually did not fit into the morally driven criteria set by most of these organisations. These aspects complicate the contextualisation of Nawal’s coping strategies and may help with understanding why some of the ones she enacted were even in her eyes controversial and ethically ambiguous – for example feeding the baby with powdered milk suitable for much older and weaned children. The fact that she did not actually manage to provide a safe environment and healthy living conditions for the baby are to be seen in relation to her firm intention to raise her son in contrast to her mother’s insistence for his immediate abandonment and to some actions she performed on the child’s body since his birth. These suggested her awareness of the uncertainty which marked his existence since then and that she symbolically sought to contrast, notably by putting a small version of the Qur’an in the cloth – *l-gmat* – with which she wrapped the newborn . She proudly showed this to me the first time we met at the first shelter she was at: after having told me the first ‘version’ of her story she conducted me to the dormitory where Ayoub was lying in a crib, his eyebrows drawn by a light line of *koḥl* (antimony).

When I subsequently visited her at her first room outside charities, in the most deprived part of a well-known *sha’bi* neighbourhood, she showed me the black stones bracelets that she had put on her son’s and the other babies’ arms to protect them from ‘*ayn* – evil eye. The latter were the children of the girls with whom she shared that room, on the first floor of a gloomy and seemingly crumbling house, where they were allowed to share a fridge owned by the landlady. On that morning of the end of July, the four roommates were all there and when I arrived, one was cleaning the floor outside the room, whose remaining tiles still showed a decoration. They soon boiled water for tea that we had with the pastries I brought from a bakery around the corner, where I had immediately been asked if I needed anything and who I was looking for– probably because it was unusual to see a

*nsraniya*³⁹³ over there. While chatting and drinking tea, the girls introduced themselves and their stories; the babies lay in a row on an old blanket on one a – charity donated – *firash* [mattress]. They were her son Ayoub, Zineb (Zohr’s daughter) and two other babies, which in the following months I got to know that only one of them was still alive. When talking about Zohr, one of her former flatmates – and also former roommate at one of the charities – Nawal just said that – although she had already lost two children³⁹⁴ – Zohr “did not care”, did not “think about that anymore... she forgot about *all that...*” and emphasized this by a gesture of her hand.

On that morning it seemed to me that Nawal had lost weight since the previous time we had met and for the first time she looked strained and a bit worried even if she had found an accommodation and a job in the kitchen of a restaurant on Casablanca’s *corniche*. She told me about her first visit to the hospital’s emergency room a few days earlier, as she had actually tried to reach me on the phone. I was outside *Casa* at a wedding and I had only found a missed called from an unknown number – it was her call from a public phone. The doctor had given Ayoub medication to stop the baby’s diarrhoea and dehydration and they soon went home; she wondered if it was the powdered milk itself which had caused Ayoub’s diarrhoea or maybe the fact that – despite her recommendations – the *morabbiya* did not pay attention to hygiene and to correct doses when preparing the feeding formula. She showed me one of the drugs she had to administer to her son and carefully read the instructions on its box; in the meanwhile she also gave the baby some herbal tea – *l-lwisa* – which was also supposed to help him recover. Right after Ayoub’s death, as Nawal sought to understand why that had happened and to make meaning of it, she also recalled having tried to cure the baby by all possible means, including those herbal teas, even in the periods when she shifted from “the right” powdered milk to “the wrong” one, which she identified as one of the possible causes of Ayoub’s recurrent sickness.

It is worth noting, thus, that Nawal – at least partially – acknowledged that she had done something which might have potentially been harmful to her already

³⁹³ “Christian” or “stranger”.

³⁹⁴ Whereas as we met at a charity for the first time, she said she had only had one daughter.

unhealthy infant and that she was to a certain extent conscious about it as, for purported economic reasons, she oscillated between suitable and inadequate bottle-feeding formulas. Yet, she also described all the elements which might make up the “average environment of child death’ [as the] set of conditions that place the infant at great jeopardy of sickness and death” (Scheper-Hughes 1992 : 272) like the dirt, that she saw “everywhere” in the houses of the women who she paid to look after the baby. Besides, she hinted at their alleged inability to feed the baby properly: she was nevertheless compelled to leave him at their houses, where “there is no light and no air”. At the same time, she made clear that she visited her son at the *morabbiya* anytime she wanted, but she did not take him home at night, even when she stopped working early in the afternoon. If she left him there only during the day she would pay 100 dirham, whereas for day and night she was charged 200 dirham. Therefore, she had even been given her salary in advance, because of these expenses due to the upcoming *Eid el kebir*.

While investigating local aetiologies of child mortality with her research subjects, Nancy Scheper-Hughes highlights the contested notions of neglect emerging from the narratives of shantytown women. Indeed, they stressed that they *could not* take care of their children because of overarching constraints and not as a mere matter of will. Notably, they argued that they were obliged to leave their children at home alone while they went to work. Moreover, the *Alto* women clearly pointed out that it was the “ruse” – *engano* – of feeding formula to kill their children, since most could not afford to buy two cans of powdered milk per week – but only one. This meant that infants and children were mostly fed on water, which made their blood ‘turn to water’ as well (Scheper-Hughes, 1992 : 313).

In this context, as in the one in which most of my informants lived, money seemed to be the solution to women’s problems: hence, at stake is less women’s ability or ‘failure’ than “external constraints on the ability to care for their offspring” (ibidem, 314). Another relevant example made by Scheper-Hughes concerns the socio-economic changes that have contributed to modifying gender relations and marriage patterns, the latter becoming less formal and more transitory, whereby she argues “the ways of symbolically establishing a child’s legitimacy take on new forms, some of them harmful” (ibidem: 323). By this, reference is made to households whose core is constituted by mother and children, whereby the father

may not live with them, but defines his role by the means of “a highly symbolic transaction”, i.e. the provision of powdered milk cans, being listed on the newborn’s “birth certificate” (ibidem: 324) and as a way to confirm his sexual interest towards the woman’s body, whose breasts might be ‘spoiled’ by breastfeeding.

In the cases of my informants, such a symbolic transaction was not attached to powdered milk as a way of re-affirming a bond between the women and their partners – at least not in the cases I got to know in detail – but material and financial support received from male partners, ‘boyfriends’ and occasionally by the ‘biological fathers’ certainly enabled the purchase of powdered milk. The latter is reconfigured as another commodity. Scheper-Hughes sees her shantytown women’s coping and infant nurturing strategies as body praxis, whereby the very act of breastfeeding or that of buying or being provided with canned powdered milk is emblematic of the “somatization of scarcity and deprivation” (ibidem: 326) in which women’s bodies, bodily substances – breast milk – and bodily practices – breastfeeding or its withdrawal – were a “medium of exchange between personal and social metaphors, symbols and meanings” (ibidem). Withdrawing from breastfeeding was in that case also a matter of self-representation as weak and unable to breastfeed, while in the cases of my research subjects it dealt less with this aspect than with the pressure to find work. Working shifts were for them basically incompatible with prolonged breastfeeding, although the consequences of such arrangements – as shown by Nawal’s son’s case – may be equally deadly in conditions of scarcity³⁹⁵. Nawal’s aetiology of her child’s death encompassed her memories of what she had been asked at the first charity where she had been given shelter: as I have described (Chapter Four), the director of the shelter had asked if she had ever drunk anything – i.e. potentially toxic substances – to get rid of the baby when she discovered her pregnancy, suggesting that that might be the reason for the baby’s ill health³⁹⁶. His sickness – according to that woman – might have

³⁹⁵ As argued by Scheper-Hughes: “poverty interacts in many different ways to produce child mortality and to shape reproductive thinking and practice” (Scheper-Hughes, 1992: 326).

³⁹⁶ This question has been discussed in chapter four.

been caused by those substances even if their effects had not been immediately evident. It must be noted that this woman's attitude towards Nawal and her relatives was very stigmatizing from the beginning. The social worker probably thought she had been cheated by Nawal's explanations about the alleged paternity of the baby: initially, Nawal had not mentioned her doubts on the baby's biological paternity and the fact that she was unsure whether "the military" or "the other man" was the "true father".

The head of the social workers³⁹⁷ bluntly told me that she was convinced that Nawal had been engaging in prostitution for a long time – during each of her summer stays in Casablanca – and that that was her and her sister's future; besides her mother, her older sister – with whom I have only talked with on the phone – had also visited her at that first shelter and she and her 'fiancé' had provided some clothes for the newborn. Yet, the social worker's first impression in dealing with the two sisters and in observing their look and behaviour was doubtless: "...Don't you see, a girl like her... Once outside [the charity], with a small baby on her back... what can she do? She's young, she looks good and she's attractive...She will immediately start to go out! It's clear. And her sister, she came here, she sat on the sofa and soon uncovered her legs in order to be seen by our male co-workers! You see, *it's a family of whores!*" (Social worker, Summer 2011). This episode and other conversations I had with this social worker exemplify the blame she put on Nawal, including her caretaking skills, given the judgement on her overall conduct. However, Nawal's ultimate statements on her child's death were expressed by repeating "*Ayoub ma'a Allah* [Ayoub is with God]" and "*Kolchi men Allah* [everything comes from God]", like she had said to me when giving an account of her pregnancy.

Despite the fact Nawal's experience had always been "dense with conflict" (Maher, 1984: 123), both Ayoub's birth and his death were, according to Nawal's way of giving meaning to this event, a matter of God's will³⁹⁸. In looking at *rituals of grief*

³⁹⁷ I have mentioned this in chapter three (§ 4) as well.

³⁹⁸ In elaborating on the local notion of "letting go" in relation to child sickness and death in North-eastern Brazil and in discussing notions of resignation to child death, Schepers-Hughes maintains that mothers see themselves as "cooperating with God's plans and not (as in the case of induced abortion) as thwarting God [because] the true, real, cause of death

performed by women facing child loss, Maher (Maher, 1984) describes how these were addressed by other – older – women: “‘You are still young, you will have more. This one was Satan come to plague you. You should be glad he’s gone’.” (ibidem: 124). Maher argues that grief was thus interpreted “in terms of a possession by an evil, supernatural agent. At other times they said ‘Allah took him away just as he brought him. What can you do about it? If he’d been walking or talking there’d be more to cry about’” (ibidem). The author also explains how women sought to channel the mother’s “illegitimate sentiments” (ibidem: 125) into appropriate behaviour – for instance, not crying and not showing her grief during the *sadaqa* – the feast of almsgiving. Her sentiments in that case were deemed illegitimate because the mother – whose name was Zineb – longed for her child instead of her husband and because attachment to the child was considered – by the other women – inadequate, given he still lacked importance “as a social being [and] the women minimize[d] the death of children and present in positive terms Zineb’s future as a mother” (ibidem). As we have seen, this scene recalls the one I mentioned above, in which Nawal – herself, and not the other women – actually drew on irony to reverse the situation of grief and ‘promised’ her son’s caretaker that she would have had more children and indeed, twins. While in the episode described by Maher the woman’s first child was not considered as a full social being – even if it had been born within marriage – also in Nawal’s case his social significance – and his very existence – had been concretely thwarted, for instance by his grandmother who suggested to “leave him on the beach”. Contrary to simplistic and superficial statements of a purported ‘Islamic’ acceptance of a human being’s destiny, Nawal’s despair towards the discovery of her child’s death also deserves attention, for her loss was not circumscribed to that night nor to the following days, even if she apparently sought ‘not to think too much about it’ and to carry on in her everyday life.

I shall draw again on Scheper-Hughes’ analysis in arguing that Nawal’s love towards her child was not “deficient or absent (...) but rather that its life history, its course, is [was] different, shaped by overwhelming economic and cultural

is seen as a deficiency in the child, not in his or her poor, distracted mother” (Scheper-Hughes, 1992 : 370).

constraints” (Scheper-Hughes, 1992 : 341), according to which “emotion is shaped by political and economic context as well as by culture” (ibidem). In dealing with what the author calls the “pragmatics of motherhood” (ibidem), she actually brings attention to the fact that when (early) human life is already precarious, such as in slums and shantytowns – or in some urban peripheries of Casablanca – “indifference” might enhance understandings and embodied practices of risk in mothers’ care of their vulnerable infants, whereby it is hard to clearly detect the boundaries of ‘intentionality’ and awareness of risk, as illustrated by Nawal’s case, notably by her troubled narratives and ‘re-constructions’ of her months with Ayoub. However, shedding light on potential neglect in the aetiology of infant mortality, “one must be careful not to isolate it from its origins in pernicious social and economic relations” (Scheper-Hughes, 1992 : 356) by turning rather to the massive role played in the case of unwed mothers – as well as of other working(class) women – by extremely precarious working conditions, which – as I have sought to stress so far – are grounded in deeper socio-economic, regional and broadly structural inequalities and which are embodied by young, female, wage labour circulating in the Moroccan kingdom. Only in so far as we take social and historical realities into account, can we grasp the “ambiguities of mothering” (ibidem, 356) in which, as for Nawal, forms of neglect or distance and attachment coexist.

§ 2 Rethinking care and vulnerability

After having focused on Nawal’s case as emblematic of the social production of scarcity, precariousness and – to certain extent – of the ambiguous boundaries of care in a context of distressing family and social relations and material hardship, I shall now discuss how the condition of unwed motherhood, or the diverse situations of uncertainty engendered by out-of-wedlock pregnancies, call for a rethinking of the measures and strategies put into being to deal with these issues by diverse social and political actors. I shall draw particular attention to the dynamics they bring about and the interactions between these – mainly non-governmental actors and charities – and the people addressed by what I call “dispositifs of care”, i.e. the so called *mustafidat*, very often designated with the French *beneficiaries*,

i.e. beneficiaries or recipients of social and healthcare (and sometimes also of legal assistance).

2.1 The humanitarian field

Hence, I shall bring attention to the diverse non-governmental actors dealing with the issue of out-of-wedlock births and unwed motherhood in Morocco. Young women and/or their children are selected as the beneficiaries of a variety of activities and services of charities, NGOs, shelters. To begin with, it is worth questioning the processes of construction – and mobilisation of the category of unwed mothers in policies and measures - which often draw on notions of vulnerability and risk. Even if the term unwed mother – or *mère célibataire* – in the non-governmental arena is taken for granted, I wished to show that it refers to a multiplicity of biographies and trajectories³⁹⁹.

In recent decades an increasing number of local – not-exclusively female – organisations have begun to use the French term *mère célibataire* to designate women “in distress”, or “abandoned women” with children, to whom support, help/aid, assistance and sometimes temporary accommodation or professional training are offered. At the same time, the aim of this work was – and still is – to break or to challenge ‘taboos’ concerning out-of-wedlock births, a social reality that is currently impossible to fashion uniquely in informal arrangements or by means of tacit strategies, that one of my informants in chapter four called “social wisdom” or the “deal of silence”. Furthermore, the multiplication of organisations for single and unmarried women has coincided with the growth of the humanitarian sector in Morocco, that is, when the action of national and international non-governmental actors started benefiting from the support of royal initiatives (Bono, 2010). Seeking to deconstruct the category of unwed mothers produced in the

³⁹⁹ The questions raised in the following paragraphs have been elaborated in the paper «Soigner les mères célibataires : les mutations de l'accès au service public et des figures de gratuité», presented at the international workshop *Le gouvernement à distance au Maroc: une lecture politique des transformations économiques et sociales à l'heure de la contestation*, organised by Centre Marocain de Sciences Sociales (CM2S), Fonds d'analyse des sociétés politiques (FASOPO), Torino World Affairs Institute (T.WAI), and CESEM - Rabat.

context of Moroccan civil society is key to ethnographic accounts of a political economy of health able to grasp the imbrications of multiple rationalities, notably what we might refer to as “humanitarian reason” (Fassin, 2012) and ‘technocratic’ logics (Pierru, 2007), to the extent to which both logics in this case draw on the notion of a ‘target’ created in the non-governmental domain. This notion is to be found simultaneously – even in slightly different ways – in the formulation of public policies directed at the disenfranchised (Ticktin, 2011), referred to as ‘the poor’ and the ‘vulnerable’.

In order to discuss the role of intermediation played by some local charities in relation to unwed mothers, it is worth taking childbirth in public hospitals as a relevant example, as these are the structures where most unwed mothers currently give birth (Cherkaoui, 2010). Although only some cities and hospitals are involved in such programmes and partnerships, some NGOs take on the costs of hospitalisation of delivering or newly-delivered unwed women and, thus, allow them to access this service without being charged with any expenses and without having to apply for the *shahadat l-ihtiyaj* or “*certificat d’indigence*”, that is a certificate attesting one’s poverty. However, since the end of 2012 it does not officially exist anymore, but the procedure to obtain it required turning to the *moqata’a*⁴⁰⁰, especially if women did not have either a personal ID, nor proof of residence. Hence, these kind of charities acquired centrality in the last two decades as a ‘third party’, who paid on behalf of hospitalised unwed women and who took on bureaucratic and administrative tasks – for which they are oriented to the charities’ bureau. Among the goals of these kind of charities is the contrast with the phenomenon of (hospital) abandonment of newborns and infants, as well as the potential trade in babies in and around hospitals (Bargach, 2001; 2002; Cherkaoui, 2010) or the practice of ‘informal adoption’ by which children are given to couples with whom they have no blood ties and who register them at the civil registrar as if they were their biological children (Bargach, 2002).

By means of their intermediation, non-governmental actors provide a form of free – yet temporary alternative to that provided by state-driven measures, such as the

⁴⁰⁰ *Arrondissement*, local authority.

aforementioned ‘certificate of poverty’ for hospitalisation. Hence, the role played by charities – while contrasting the criminalisation of out-of-wedlock birth – simultaneously informs other patterns of care within a public health service. Charities pay for women’s hospitalisation and for their release or – earlier – to manage their application for the ‘certificate of poverty’ – which exempted them from a part of or from the whole charge. Yet, such a dynamic might give way to novel forms of assistance and – simultaneous – control of the young women who accept⁴⁰¹ the support of the charities, since their relationship with institutions – hospitals, local administrations and tribunals – is not direct, but rather mediated by non-governmental actors and by their criteria. Moreover, the charities whose target are unwed mothers provide them with powdered milk and newborn and infant primary healthcare. Despite the fact most local organisations promote breastfeeding and seek to “educate” their beneficiaries about it, this – as I have stressed when focusing on Nawal’s case – is fairly incompatible with the urgency to find a job as soon as possible after childbirth. Therefore, some charities offer to selected beneficiaries a fixed number of powdered milk cans during the infant’s first months⁴⁰². This service was conceived to alleviate the women’s financial burden represented by milk purchased at pharmacies, that is – as highlighted by virtually all women – at the core of their weekly budget.

Nevertheless, as I have previously (§1) stressed, this service is monitored in order to avoid potential abuses in the delivery of canned milk powder or its potential (alleged) trade outside the charity. Its personnel added that this service differs from those offered by state-lead health centres, in that at a charity women not only benefit from free primary healthcare for their infants by a nurse, but if needed

⁴⁰¹ Some women may not accept the help of the charities. During my fieldwork in hospitals with social workers, however, even women who were reluctant or even suspicious ultimately accepted to have their fees for hospitalisation paid by the charity, lest they subsequently turned to its headquarters to have indications on the civil registration of children. It is more than understandable that for patients in maternity wards it might be difficult to be administered a questionnaire with several – and intimate – questions in only a few minutes by a stranger, whose prescriptions she is demanded to follow once outside. However, these ‘incursions into the intimate’ are currently deemed the – only? – feasible approach to prevent infant abandonment, or the fact that children born out-of-wedlock are not registered at the civil registrar.

⁴⁰² Generally for seven months.

“they are given drugs, powdered milk...*kolchi fabor* [all is free of charge] for them. Moreover, unwed mothers can have access to administrative services at our offices and women found by social workers in hospitals’ maternity wards are directed here to open their ‘medical dossier’” (personnel at Charity I, November 2011). It is also to be noted that some women come from the other side of the city to benefit from healthcare and medication for their newborns, instead of turning to state-lead public health centres closer to their place: hence, non-governmental actors play an alternative role to state-lead structures, constantly described as overwhelmed by users⁴⁰³ and unable to offer them specific services. Whereas at charities users are selected by experts, such as social workers.

Some other structures define themselves as “socio-medical” (Charity II): deriving from charities – thus, being private – they offer paediatric healthcare focusing on the fight against infant mortality through the promotion of breastfeeding, addressing particularly women who live in precarious economic conditions, without charging them for the services or at “concurrent prices”, as stated by members of the personnel (interview, October 2012). Sometimes women are offered powdered milk provided by other charities or bought thanks to benefactors. Although these medical practices – *ambulatoires* – do not specifically target unwed mothers, they receive those who are sent there by other local organisations, or who arrive there through informal networks – i.e. by word of mouth between neighbours and acquaintances. Here, emphasis is put on the fact that it is the personnel itself who manages potential beneficiaries, on the base of previous experience: “Here we deliver care to all deprived infants (...) It’s a socio-medical centre, we do understand if patients are poor and needy or not” (interview, October 2012).

The presence of these ‘socio-medical’ charitable bodies in Morocco is inextricably linked to the country’s colonial history: “Les nourrissons sans mere, ceux dont les mères sont malades, et ceux don’t les mères n’ont pas de lait ont beaucoup de peine

⁴⁰³ State-lead health centres – that are sometimes called “*sbitar*”, but rather dispensaries and not hospitals – actually serve a very large population, which might encompass the inhabitants of several districts. This has been repeatedly stressed in relation to one specific area of Casablanca by the personnel of a public health centre, although official data of the Ministry of Health also highlights this feature

à s'élever en général ; ils sont voués à la mort certaine dans le milieu indigène” (Delanoé, 1949: 74), wrote a French doctor in recalling her activity since the beginning of the Protectorate. This tenet lead her to support the creation of charitable institutions aimed at providing sterile conditions for artificial feeding to infants and newborns : “ces êtres sans défense dont la vie ne tient que par un biberon – doivent être un devoir pour tout pays, dont ces petits sont la force, l'avenir et l'honneur (...) nous diminuerons la mortalité des nourrissons qui ne demandent qu'à vivre, nous diminuerons la mortinatalité, en soignant les femmes indigènes, spécifiques pour la plupart et très influençables à nos moyens de traitement modernes (...) Sauver les vies, rendre les vies possibles, c'est faire œuvre sociale au premier chef” (ibidem : 76). The provision of sterilised artificial milk in these clinics was – and still is – coupled by regular paediatric consultations in dispensaries, grounded on the requisite of strict medical surveillance and on the assumption that these initiatives stem from “humanitarian sentiments, national needs, and charity” (ibidem: 86)⁴⁰⁴. Hunt (1999) emphasizes how “anxieties about good mothercraft” (Hunt, 1999: 240) in Europe at the beginning of the twentieth century corresponded to the establishment of charitable leagues ‘for the protection of childhood’ aimed at saving babies’ lives, which were soon followed by the creation of milk-dispensing clinics – homologous to the ones praised by the aforementioned French doctor and which are still active in Morocco.

I argue that the historical ‘depth’ and the social significance of such structures emerges clearly in observing some ‘generational’ features in the ways patients make use of them. Notably, at this centre, a four-month infant was given paediatric care, while his mother was given instructions on breastfeeding: the young woman explained that when she was a child she was the recipient of the services of the same health centre, where she came, some twenty years earlier accompanied by her own mother, although they were living in a *chaabi* district at a relative distance from the business neighbourhood where the health centre is located. The infant’s

⁴⁰⁴ “des sentiments humanitaires, d'un besoin national, de la bienfaisance” (Delanoé, 1949: 86).

mother was not married⁴⁰⁵ and coincidentally lived a few meters from the headquarters of the aforementioned charity for unwed mothers (Charity I): she stated that she did not turn to it because she was convinced that the latter did not ‘give’ enough in material terms to its beneficiaries, whose administrative requests and temporary powdered milk delivery were not considered sufficient. In listening to this story and in commenting on it with the personnel of the charity’s dispensary, we wondered if she had ever sought to access the services of her next-door NGO: had she been refused? That would have explained the critiques towards the ways in which that NGO deals with unwed mothers – an approach that this young woman bluntly judged insufficient and even ‘greedy’. Thus, for her baby this other ‘socio-medical’ centre – where she had been cared for as a child, and where her own mother took her – was deemed more suitable. Their material constraints were staunchly underlined by the two women, although they said they did not know anything about the possibility of applying for the – recently introduced – RAMED⁴⁰⁶ card, which would allow them to benefit from healthcare for free or at reduced fees at public health structures.

2.2 *mustafidat* – becoming ‘beneficiaries’

Besides dispensaries, the local landscape of “charitable health care” (Turshen, 1999: 86) includes organisations whose vocation is ‘social and medical’ – as the one cited above (Charity II) – have their own clinics, which are private and virtually require the payment of a fee. However, its personnel stresses that these structures deal specifically with the people who present themselves as deprived and unable to pay even the minimal fee. This is due to the lack of social workers who may otherwise “investigate” if patients are *actually* poor. It is the INDH⁴⁰⁷ or the Ministry of Health to be in charge of such issues and who ‘investigate’ the

⁴⁰⁵ Her ‘fiancé’ is in jail and she claims he intended to marry her.

⁴⁰⁶“Regime d’assistance medicale [pour les economiquement demunis]” or *nizaaam l-mossa’ada l-ṭebbiya*.

⁴⁰⁷ *Initiative Nationale pour le Développement Humain (l-mobadara l-wataniya l-tanmiya l-bashariya* - “National Initiative for Human Development”).

financial situation of their patients: “our tariffs are inferior to those of public hospitals because the INDH pays half and we pay the rest (...) For abandoned infants we pay, or if their mothers are not married, but now we usually send them to the INDH. If it’s a charity [for unwed mothers] who sends them here, they guarantee for the patients” (Charity II, October 2012). Hence, one’s deprivation must be ascertained or associated with some criteria and bureaucratic procedures, such as partnerships between non-governmental and private-charitable bodies or, again, between different non-governmental actors, notably in the case of “abandoned children” or those born to unmarried women. This was a necessary premise to introducing how these procedures, rules and patterns of access – ultimately these “regimes of care” (Ticktin, 2011) – weave into the biographies of my research subjects and how they strive to fit into the different categories produced by different sorts of institutions to have access to services or medical assistance for them and their children.

Moreover, these dynamics illustrate how the delivery of healthcare to (targets of) populations defined as vulnerable has to be understood beyond their quantitative dimensions, but rather as overlapping systems of eligibility, which actually contribute to objectifying one’s social and economic conditions. In this framework, a system which aims to be inclusive, such as the RAMEL, by some is deemed nevertheless insufficient, as it covers only consultations and examinations in the public health sector. Any other service beyond this coverage has to be paid or financed by third parties, as in the private-charitable sector, such as the one exemplified by this clinic.

Naima’s⁴⁰⁸ daughter is among this clinic’s former beneficiaries: with no shelter in Casablanca⁴⁰⁹, pregnant, unmarried and subsequently the mother of a premature newborn, Naima was supported by up to four charities and in some periods by two at a time and hers may be understood as an exemplary “moral career” (Parizot et al., 2005) as a patient and beneficiary. She managed to enter the non-governmental circuit in virtue of her status and of her daughter’s ill health. For these reasons she was assisted without charges both in public health and in non-governmental

⁴⁰⁸ See also Chapter Two and Three.

⁴⁰⁹ She came from a small town in a region in the South.

structures thanks to the role played either by organisations whose main goal is the protection and support of unwed mothers or by others who receive women in situations identified as distressing or vulnerable, such as living mainly on the street. Particularly on public occasions, Naima emphasized her gratitude towards the different associations, which also offered her some opportunities for gaining professional qualifications by financing some training courses. Regardless, she privately – and repeatedly – acknowledged that without the ‘clandestine’ financial support from one of her sisters – the only one who knew her situation – and, to a lesser extent, her boyfriend’s help, she would not have been able to afford all her charges alone: the rent, food and basic needs of her daughter. She often wondered “how the other girls manage to pay for everything” and felt lucky, given her sister’s and her boyfriend’s support.

Besides the aforementioned forms of assistance, unwed mothers involved in certain NGOs’ programmes in Casablanca can benefit from primary healthcare for their children or from consultations at general practitioners. They are also directed to specialist doctors who offer free consultations within their collaboration as volunteers for those charities. Hence, these initiatives lie less upon the right to medical coverage, than on the immediate accessibility to health structures. This is based – as it has been noted in relation to “the sick poor” in France (Parizot, 2003) on the availability of doctors willing to offer care and consultations without charging patients, or on the doctors’ volunteer activities in local associations’ dispensaries. Emphasis on the accessibility to healthcare based on volunteering and philanthropy clearly emerges in the activities of Moroccan NGOs based in Casablanca, whose explicit target – as we have seen – are unwed mothers and their children. The main feature of this type of care or *prise en charge* is that it is conditioned to the status of beneficiary of a certain NGO, which is generally limited to a circumscribed period of time within the space of local NGOs or within the network of doctors offering free consultations in the private sector. In some cases it deals with doctors employed in public health who are also volunteers at NGOs and as such offer consultations and medication to the beneficiaries-patients also in public health centres, where these women would not otherwise be admitted

given that access – mostly – hinges upon residence (in a region, town, urban district).

Thus, we can distinguish different dimensions of the role of ‘intermediation’ played by non-governmental actors. By intermediation I mean the role of actors who aim to facilitate the relations between unwed mothers and – for example – administrations or health services: assistance, empowerment, economic and material support, connection between beneficiaries and health services, private medical practices or other charities⁴¹⁰ are some examples. This multiplication of actions implies the potential overlapping between different regimes of care, even if their beneficiaries are potentially the same – as Naima’s case has aptly illustrated. My focus on the politics and the regimes of care within the Moroccan humanitarian landscape – which I have examined in the context of Casablanca – should not overlook the fact that less formalised or institutionalised forms of care exist and are exemplified by the cases in which – also for unwed mothers – medical fees are paid by their employers. Notably, Oujdane, is a woman in her mid-twenties who moved to Casablanca from the South and had always worked as a housemaid. At the time of her first pregnancy⁴¹¹, she had had the fees for prenatal care – blood tests, ultrasound scans – and for childbirth paid for by her employers, who took her to a private clinic. She subsequently started working at another house, but for her second pregnancy her new employers did not take her to any clinic: Oujdane did not actually disclose if she had left the house before revealing that she was pregnant. However, this time she had no prenatal care and gave birth in a public hospital, where she benefited from the assistance of a charity which paid the fees of her hospitalisation. Following the suggestion of a neighbour, Oujdane subsequently turned to the dispensary of another charity (Charity II) in search of paediatric care to her second born, for which she was not charged any fees.

Hence, such services aim to improve the accessibility to healthcare on the everyday level, in order to respond to their targets’ immediate needs, without combining this

⁴¹⁰ This adds to the activities of advocacy and to the campaigns for the promotion of the rights of young women (such as young maids – ‘*petites bonnes*’) and unwed mothers and their children.

⁴¹¹ Her first child was raised by her mother in her native town; she was still wondering whether to disclose the birth of her second child to her family or to temporarily conceal it.

approach with an explicit discourse on medical assistance as a right. This does not only raise a reflection on the understandings of the concept of care, but also on the relations of assistance (Parizot, 2003, 2005), notably on their social significance. Therefore, a core issue needs to be interrogated: the potential relations of dependency generated by the fact of being a *moustafida* – a beneficiary – of services which offer or channel patterns of assistance. The latter target women not only in so far as they live in economic distressing situations, but rather because they are considered as deserving care on humanitarian grounds; they are ascribed with dignity and are – as such – entitled to being helped (Parizot, 2003 : 221). This would result from a “learning process”⁴¹² (Bono, 2013: 69) or as a process of apprenticeship and initiation to norms, rules, behaviours and the adoption of symbolic references inherent not only to the realm of the services dedicated to the destitute (Parizot, 2003 : 12), but also intrinsic to the repertory of human rights. For this reason, the stake for the beneficiaries may not be mere help or assistance, but a way of being delivered healthcare, the latter being conceived above all as a relation of human help or a “humanistic” relationship (ibidem: 226). Namely, a nurse employed by a charity emphatically maintained that “nothing is free of charge in Morocco!”: she argued that both her work, volunteer work and other measures for the sick poor rather rest upon features that she defined “human” – *insaniyn* – and inherent to the people who dedicate themselves to them. In order to grasp the scope of non-governmental and civil society actors in the Moroccan political economy of health and the implications of their role in the provision of care to unwed mothers and their children, it is worth noting their intertwinement. The examples which follow shed light on the multiplicity and the imbrications of patterns of care delivered by charities even in the itinerary of a single subject.

Fatiha lives in Casablanca where, since the birth of her daughter, she rents a room in a house with other young women and their children. Coming from Eastern Morocco, she had initially settled down in the city in order to work in a factory,

⁴¹² Bono (2013) observes similar dynamics in the politics of the employability of young people in contemporary Morocco : “ différentes modalités d’apprentissage de l’employabilité propres au ‘pauvres’ ” (Bono, 2013 : 69).

where, as a salaried worker, she had the right to medical assistance⁴¹³, but when she found out that she was pregnant, she quit her job without communicating anything to her employers. Reysoo (Reysoo, 2005) discusses how marital status, class and age influence the recruitment of female workers in the textile industry in Morocco and questions “the gendered context of this workforce” (ibidem: 126) within the socio-economic transformations of gender identities and relations. Particularly, she concentrates on “the ambivalence of the productive and reproductive capacities of women” (ibidem) embedded in firm management. Although the focus on the theme of female employment in industrial factories is – as such – beyond the scope of this research and has been discussed elsewhere in detail (Bouasria, 2013; Bourquia, 2002, in Reysoo, 2005) I shall just recall that – with Fatiha, as in other cases – no formal dismissal procedures were applied, given that young female workers quit their job when they fall pregnant. Yet, Reysoo concludes that “the absence of overt pregnancy screening of the manufacturers’ (...) female workers in Morocco is based on a representation of the feminine gender of young women as being sexually inactive” (Reysoo, 2005: 135), whereas they would withdraw from work merely “out of shame” (ibidem: 134). Although, this clear-cut view is not completely pertinent to gender representations of young females that I have discussed in these pages, the former factory workers among my informants had actually quit their jobs because of pregnancy and, as Fatiha did, they sometimes regretted it. Indeed, since quitting her job, Fatiha benefited from the support of different charities and received some professional training at one of them. Here, she had neither a job contract nor a salary and – despite her intention to look for a “true” job – she stressed that she patiently struggled to pursue this collaboration⁴¹⁴, yet she viewed this full-time activity as unpaid work, whereas medical assistance and other temporary benefits – such as the crèche for her daughter – pushed her not to leave the charity’s programme⁴¹⁵. In the domain of charities some eligibility

⁴¹³ “*La mutuelle*”.

⁴¹⁴ She ‘collaborates’ as a beneficiary, i.e. she has some tasks in the charity’s activities – for instance in the kitchen – which allow her to benefit from the crèche for her child.

⁴¹⁵ I have subsequently been told by one of Fatiha’s former charity - and house - mates that she had actually left the charity’s programmes a few months later because – through some

criteria are set in order for the beneficiaries to be provided with some services, including healthcare: the primary requirement is generally not to have more than one child. Moreover, as in Fatiha's case, if a beneficiary finds a job before the end of her programme in the charity, she should give up certain services, such as paediatric care and the crèche. Therefore, the free – even if temporary⁴¹⁶ – delivery of healthcare within the framework of the charities' programmes compensates to a certain extent taking part in the charities' so called 'income generating' activities, which do not guarantee the beneficiaries a formal salary.

However, views and insights on this point are – obviously – heterogeneous: notably, Halima⁴¹⁷ had been offered a job, which was consistent with her education⁴¹⁸ and which would have granted her a relatively good salary. Irrespective of these apparent advantages, she preferred to work within the 'income generating' activities of a charity – other than Fatiha's – which targets specifically unwed mothers and their children and whose goal is to "reinforce families" also by focusing on women as agents of small entrepreneurial projects and artisanal activities, which they might pursue after the end of their programme. Nevertheless, Halima's income stemming from her work – or rather participation? – in the non-governmental field was – according to her estimations – lower than what she would have earned working 'outside', which meant simultaneously the acquisition of a radically different status: that of beneficiary instead of as unwed working mother. Halima, conceived of this choice as a temporary solution, which she inscribed in the – hoped for – reconciliation with her family of origin, whereby entering the charity's programme implied the benefit of healthcare and other services – a crèche – without having to be charged further fees.

Recalling the story of Amina⁴¹⁹ may be useful, in so far as it is relevant to this discussion of the 'dispositifs of care' – which focus specifically on 'single',

acquaintances – she had found a job as a housemaid in a nearby town, where she ultimately decided to move with her daughter.

⁴¹⁶ Between a few months and two to three years.

⁴¹⁷ I have dealt with her story in chapter one.

⁴¹⁸ She had a high-school diploma.

⁴¹⁹ I have dealt with Amina's story in the Second and in the Third chapter.

‘unmarried’, women and mothers – in contemporary urban Morocco. Notably, it interrogates the boundaries of existent regimes of care, which are currently being formulated and target populations identified as vulnerable and deserving. Since the birth of her child, she had initially been supported by a Casablanca-based charity, although after a while her sickness prevented her from taking part in the training and ‘income generating’ activities included for the unwed mothers in the programme, which meant the charity could not support her anymore, as she did not actively participate in the programme. At the same time, her child was also often sick and his health seemed to be deteriorating, but the charity – according to Amina’s ‘foster family’⁴²⁰ – could not take on the case, which seemed incompatible with the goals of professional training and work placement, given that she could not take part in any of the activities planned for that goal.

In this regard, it is worth bearing in mind what a member of another NGO stressed when we both witnessed the continual demands of aid from one of this organisation’s former beneficiaries: the latter repeatedly asked for medical support for her sick child, but the NGO professional bluntly told her not to ever come back because they could not do *anything* for her, as it was a matter of public health and as such beyond their scope of action. She then explained to me that her reaction was motivated by the insistence of that woman, as well as by her conviction that NGOs should not act through “charity” and that – not only for the most vulnerable cases, but in general – access to public health should be equal and guaranteed. This was presented as the only way for NGOs to focus on “their goals”, that is – in this case – on professional development and work placement of young women, as the main pathway to “dignity” for their children’s future. Therefore, on the one hand, a sort of ‘pragmatic’ coherence underlies the NGO-professional’s statement – i.e. the claim of a specialization of their organisation in ‘skills development’ and work placement as contrasted to mere ‘assistance’.

On the other hand, her reaction towards the continuous requests for help are not to be overlooked and may account for what Fassin aptly calls “compassion fatigue”

⁴²⁰ As explained in the third chapter, both Amina and her son ended up living with a family with whom they had no blood ties.

(Fassin, 2012 : 3) – that I look at also as a form of ‘*routinization*’ of care⁴²¹ – as the ambivalence of the agents of aid and the “wearing down of moral sentiments until they turn into indifference or even aggressiveness toward the victims of misfortune” (ibidem : 3), in a relational framework (compassion) which, according to the author, cannot aspire to any form of reciprocity. I had no direct insights into the process by which the charity in question stated that Amina and her baby could not be supported anymore, as it had happened a few years earlier, therefore I do not know if she sought to resist that decision or if she sought the charity’s help regardless. Yet, her ill health was decisive in determining her departure from the charity. However, since she had left, her child was raised by a family who had learned of their situation and who took care of the baby’s health; as the years went by, the fees of her schooling were paid with the support of some Northern European benefactors.

Amina worked as a housemaid and caregiver for some elderly people and never received any other material support, given that she could not draw on any family bonds and that she spent part of her childhood in a *jama’iyya l-khayriya* – an orphanage, in a Southern Moroccan region, where she came from. After a few years of room-sharing with other young women in different parts of Casablanca and after having lived for other periods with the people she worked for, she settled down in the same house where her son also lived. Once she had found a job with a regular contract, providing her with a – modest – salary, Amina obtained a “*mutuelle*” – a form of health coverage. Hence, if she ever decided to apply, she would not result eligible for the scheme of health assistance for “the poor” and the “socially vulnerable” – such as the RAMEL. Informal adjustments and new bonds seem to ‘fill the gap(s)’ inherent to the enactment of dispositifs for the vulnerable and the “excluded” (Parizot, 2003). Such discrepancies further interrogate the processes by which such categories are put into being and ultimately made ‘operational’, both in the non-governmental field and through public policies, which are actually often intertwined and co-operate in the production of ambiguous

⁴²¹ At least in some contexts and in specific situations. This issue probably emerges more neatly in Casablanca and in its non-governmental domain than in other contexts, where similar projects are implemented on a smaller scale.

notions of vulnerability and in their uses by the actors involved, including the so-called beneficiaries.

2.3 Marginality and the compassionate politics of care

After having shed light on the tensions inherent to the field of care tailored to unwed mothers and their children in the non-governmental field in Casablanca, the notion of marginality in relation to these subjects has to be critically rethought in virtue of some ambivalent modes of inclusion and purported integration they are the object of. The following excerpt from a conversation with a health professional and charity volunteer is emblematic in this regard:

“Unwed mothers were a population marginalised by the State, by people, by religion. ...Nowadays, there is *l-dustur l-jdid*, the new Constitution, nobody marginalises them anymore ! There are NGOs and local *jama'iyat* and these populations have diminished...Street children, drug addicts, unwed mothers: there is a movement towards these people, there are media, films, publicity... It's the King who pushed us to do this! The State now pays for these people, that's why NGOs want to work on these issues! and the INDH pays them.

Regarding public health, unwed mothers are like the public, like the other people. And they are going to be encompassed in the RAMED 'insurance' (...) It's the doctor or a nurse of the health centre who will select them⁴²², not an NGO. Girls come here for their children's vaccination. The personnel knows them..it's their right, they have to benefit of the same services” (doctor at a public health centre and volunteer at an NGO for unwed mothers and at another organisation in the domain of health assistance to the urban poor; December 2011).

⁴²² The procedures to apply for the RAMED card are different from what was stated by this woman: the forms have to be filled and submitted to the local administrations as well as a wealth of other documents and certificates.

This passage is highly significant for the controversial dynamics embedded in the intersection of non-governmental and State-lead actors in the provision of social care and healthcare for categories identified as vulnerable. At the heart of this sort of government lies the depoliticisation of healthcare: coherent to this approach is the delivery of care to precise targets, who emerge both from the social and the moral order, but also from a certain pragmatism in the ‘management’ of poverty. In this view, poverty is objectified as intrinsic to given categories of the population as a moral an individual feature.

As we have seen, the provision of healthcare for unwed mothers as implemented by non-governmental actors and indirectly by the State – or by NGOs in cooperation with the State - is based on the targeting of this category of women as monolithic, yet, not only on financial grounds: notions which are inherent to the humanitarian realm, such as that of social and health vulnerability are also mobilised. Hence, the case of unwed mothers and their children is emblematic of a government which draws on ‘targets’ – or “*cibles*” – ultimately contributing to depoliticising their condition. Building on notions such as vulnerability, these measures fail to question these women’s (non)status, but rather reifies it. The politics which target bounded groups as the beneficiaries of free healthcare or of partial exemptions⁴²³ from medical fees are played out as compassionate practices (Ticktin, 2011). As such, they ultimately dismiss any political dimension of the access to healthcare and of its underlying socio-economic conditions. I argue that the construction of such targets is based on humanitarian and hence, moral, criteria which do not exclusively encompass income: this process ultimately reinforces compassionate politics (Beneduce, Taliani, 2013: 259), whereby compliance to their norms seems to be the only condition to becoming their beneficiaries (ibidem).

Notably, Moroccan debates on public health policies are reduced to the question of providing healthcare to “the poor”⁴²⁴. Hence, such a dynamic is underpinned by the

⁴²³ See Olivier de Sardan, Ridde (2012).

⁴²⁴ Research on public policies in Sub-Saharan Africa (De Sardan, Ridde, 2012) show that one of their major stakes is to associate measures for the exemption of medical fees with others aimed at ensuring the quality of care, so that they do not result in a dualistic system, in which low quality free healthcare would be destined to the poor, whereas paying and

affirmation of a dualistic healthcare system (Pierru, 2007 : 225) or the fragmentation and the organisation of the provision of healthcare as a hierarchy, whereby care is conceived as a *service* for differentiated users, and not as a public service. Thus, users would be differentiated according both to their financial resources and to criteria referring to the relational domain, such as marital status, or to – precarious – living conditions. The ways in which aid is delivered to categories identified as the most deprived – such as that of unwed mothers produced in the non-governmental domain – seem to be inscribed in a depoliticised context (Catusse, 2008: 222). Hence, the implications and the potential ambiguities of the government of (biological) bodies (Fassin, 2004) by means of the re-organisation of healthcare based on the definition of bounded targets has to be called into question.

Hence, to what extent do these dispositifs and their imbrications contribute to differentiating specific categories of “conditional beneficiaries” (Catusse, 2008: 47) I argue that “personalised, individualised and patron-client⁴²⁵ relationships” (ibidem) between the individuals and different sorts of organisations are at stake in the specific case of unwed mothers as a – potentially – ‘emerging category’. Furthermore, if we consider the aspect of inequality in the access to care, that these programmes seek to reduce or eliminate, we must also question if and to what extent their eligibility criteria potentially create *new* categories of vulnerability, which subjects draw on in order to represent themselves as eligible vis-à-vis institutions. One’s claim of entitlement on the ground of moral – and not only quantitative – criteria is all the more relevant in the case of unwed mothers in Morocco, in so far as this condition is generally represented – particularly in the local non-governmental sector – in terms of family reject and social marginality. Ultimately, a condition that, since its emergence, has until the present day been considered in terms of stigma, might conversely fit into eligibility criteria for services dedicated to specific ‘disadvantaged’ or ‘vulnerable’ targets. Besides, it is

better quality healthcare would be accessible to the others – which is actually already the tendency in Morocco.

⁴²⁵ “relations (...) clientélisées” (Catusse, 2008: 47).

worth noting that the notion of solidarity (*l-taḍamun*) – instead of being grounded (only) in the sphere of the (extended) family – would now be ascribed to the State⁴²⁶. This shift may be operated through institutional discourses on ‘the social’ and through the enactment of dispositifs such as the extension of medical coverage, like the RAMED – which aims to transform the ways of accessing healthcare as a public service. The concept of solidarity deserves attention as it underpins all the dispositifs and measures which directly or indirectly – implicitly or explicitly – touch on the subjects currently identified as unwed mothers and their children. Fassin (2012) addresses what he deems a paradox, that is that moral sentiments are directed overwhelmingly at the poorest and the most vulnerable, which makes “the politics of compassion (...) a politics of inequality”, while moral sentiments only stem from the recognition of others as fellow human beings and therefore make “the politics of compassion (...) a politics of solidarity”. Hence, the critical rethinking of these notions underpin my argument, in so far as an ethnography of unwed motherhood and of the dispositifs put forth to manage it necessarily collide with the “tension between inequality and solidarity, between a relation of domination and a relation of assistance [which is] constitutive of all humanitarian government” (Fassin, 2012 : 3). In this framework, the exchange between the beneficiaries of aid and their benefactors is seen as necessarily asymmetrical, whereby – as argued by Fassin – the beneficiaries are aware that they are expected to be humble rather than claim right (ibidem: 4).

Thus, the asymmetry inherent to compassion is intrinsically political and as such it has to be critiqued, particularly because humanitarian reason governs *precarious*

⁴²⁶ In Morocco, in the last three decades actors other than the State – like NGOs and international organisations – have contributed to informing the notion of poverty and vulnerability by setting criteria like income, human development (Destremau, 2001). Discourses around poverty are declined in technocratic measures (Destremau, 2001), which allow the exercising of power through the ‘diagnosis’ – ‘*le diagnostique*’ - and the management of poverty as a mode of government. As stressed by Bono (2013), current ways of dealing with poverty have been inaugurated in the early 2000s in the studies of the World Bank, where poverty lines have been established to identify poor or vulnerable populations, according to their level of consumption in relation to poverty lines. Accordingly, approaches based on the aforementioned notions of ‘human development’ give way at the same time to analyses of the “gendered dimensions of poverty” and its “feminization” (Skalli, 2001).

lives (ibidem)⁴²⁷ brought into existence by being protected and revealed by humanitarian government and that the exercise of compassion in the public space is directed “to those who can generally be constituted as victims of an overwhelming fate” (ibidem). Thus, a questioning of the notion of solidarity – *l-tadamoun* – and of its potential ascription to the State and its institutions – and to NGOs, I would add – enables us to look at how the purported exclusion and marginalisation of unwed mothers is dealt with. The latter is to a certain extent reversed by the rhetoric of inclusion and the equality of rights claimed by institutions and laws – as the above-cited doctor maintained. At the same time, it seems that state-lead institutions have appropriated understandings of solidarity which might otherwise be inherent to the sphere of kinship, but have been re-shaped and have massively been mobilised by non-governmental actors in recent decades.

Notably, since 2005 poverty in Morocco has been contrasted mainly by means of the INDH (Bono, 2010): its enactment is based on the identification of individuals who match “the characteristics of a precise definition of poverty” (Bono, 2013: 69), which coherently fit into the politics built on bounded and homogeneous categories.

At the same time, these standards of eligibility are strictly intertwined with “bureaucratic procedures grounded in generalisation, standardisation and traceability of the features demanded to these individuals” (Bono, 2013: 69). As illustrated by the case of unwed mothers and their production as a social category and as a target, care cannot be acted out without the creation of typologies of potential beneficiaries. However, as we have seen, the selection of beneficiaries – with a “*niveau*”⁴²⁸ – is often individualised and similarly to the case of youth employability described by Bono (2013), eligibility itself is not sufficient and this process looks rather like a “competition between individuals, who show their attitudes to master (...) the bureaucratic and disciplinary logic of the initiatives

⁴²⁷ The author refers to Judith Butler’s (2004) *Precarious life: the powers of mourning and violence*, London: Verso.

⁴²⁸ “*Elles ont le niveau*” – “they have a good level [of education or training]” – is the expression by which an NGO’s social worker described to one of her colleagues the young women who had just been to her office to ‘apply’ for the admission to the NGO’s programme.

aimed at their [work] placement” (Bono, 2013: 72). Hence, individual responsibility emerges as a core feature in what we may define as *technocratic* measures (Destremau, 2001), in which poverty is measured according to quantitative criteria and, simultaneously, according to notions which combine local constructions of social marginality with their conceptualisation in terms of vulnerability forms of “humanitarian reason”⁴²⁹ (Fassin, 2012) or “new humanitarianism” (Ticktin, 2011).

The focus on the construction of the figure of the unwed mother and on the definition of her and her children as vulnerable targets for non-governmental and State-lead policies has brought attention to the fact that this kind of government unfolds through a multiplicity of tools which stem simultaneously from a technocratic logic and from an humanitarian sphere. I shall call attention to some features which are inherent to both the governmental and the non-governmental sector and which shed light on the reconfiguration of services and initiatives for unwed mothers. Notably, these are underpinned by logics of management and technocracy, where poverty and – social, gender and health – vulnerability are subordinate to the submission of ‘proof’ and ‘certifications’ in order to match previously established standards and budgets. The following passage is emblematic in this respect:

“Unwed mothers are included in the RAMED...You just have to be poor, then you have to give proof of being *majohra*, abandoned by her husband, by the father of her children. They just have to say that he’s left, that he is an *harraga*⁴³⁰ in Italy, or in France, it doesn’t matter where he is...To prove that one is disenfranchised – even earlier with the temporary certificate of poverty – social workers of NGOs needed a report of an external social worker. It will take maybe five years for

⁴²⁹ “This morally driven, politically ambiguous, and deeply paradoxical strength of the weak I propose to call humanitarian reason” (Fassin, 2012 : xii).

⁴³⁰ The term, literally “those who burn”, derives from *hreg*, “burning”. It indicates undocumented migrants and it is a metaphor for the infraction, the risks and the potential non-return intrinsic to this type of migration (Vacchiano, 2007).

the RAMED to work: now it is destroying these people!” (employee of a public hospital, November 2012).

This point of view illustrates that in the framework of a State-lead programme of care, providing proof of one’s eligibility is paramount: this is grounded in processes of recognition which concern one’s *relational* rather than uniquely financial and material sphere⁴³¹. In order to apply for a RAMED card one must submit to the local authorities a dossier including a form, a copy of one’s ID and one of the persons over the age of eighteen in charge, the photos of the person who is applying and of his/her spouse, a certification of “collective life” and a certification aimed at proving that the children living with the person who applies for the RAMED card are thoroughly and permanently supported financially; a certification of the income of every salaried member of the household and a certificate of residence is also required⁴³².

In looking at the bureaucratic processes by which the State “fabricates subjects and social relations” throughout migration and asylum policies, Taliani and Beneduce (2013: 233) reflect on how these dispositifs “regulate fluxes, temporalities, experiences and choices, engender novel *habitus*, mould behaviour, moral attitudes and representations and trigger counter-hegemonic or *tactic*⁴³³ practices” (ibidem: 233). In questioning how unwed mothers fit into the schemes of vulnerability and poverty prescribed by RAMED, it is worth noting that a range of proofs are required from the applicants in order to be eligible. Hence, I argue that the above perspective and its stress on the demand of “continuous negotiations on the meaning of everyday existence” (Beneduce, Taliani, 2013: 234) within the landscapes of bureaucracy is also suited to the pathways that the applicants of RAMED potentially undertake.

⁴³¹ There are two categories of RAMED beneficiaries, according to their income : persons who are defined in “vulnerable ” situations, who have a one-year card requiring the payment of 120 dirham (around 10 euro) per year, implying a maximum of 500 dirham per family Persons defined as “poor ” have a two-year RAMED card and do not have to pay any annual fee.

⁴³² <https://www.ramed.ma/SInformer/Pages/ConditionsAdhesion.html#S1>; <https://www.ramed.ma/SInformer/Pages/CommentPostuler.html> [accessed July 2012]

⁴³³ (Certeau, 1980).

The fact of not disposing of these proofs legitimises these subjects to turn to ‘third parties’ – charities, benefactors and employers – who might pay for them. This process simultaneously normalises the fact that these disenfranchised subjects – like many others, after all – can neither pay themselves for their medical fees, nor access healthcare without charge *as a right*. Even though RAMED included – more or less explicitly – unwed-mothers and their child(ren) among its potential beneficiaries, this would nevertheless hinge upon a certificate of residence, which cannot be obtained if the landlord – for instance – refuses to provide a receipt of the payment of the rent. Furthermore, this proof may not be available, in general and particularly for some of my research subjects, as they leave their households for a wide array of reasons.

Hence, from a formal point of view, proving one’s presence and residence in the places where one – sometimes temporarily – settles down, might not be straightforward if we consider all the proof one is required to produce. Despite the paucity of research on this issue, as I have discussed in the first and third chapter, female forms of work mobility and inner migration are indeed widespread in Morocco (Cheikh, Péraldi, 2009) and several of my informants have embarked upon such pathways even prior to *l-mashakil* – ‘the trouble’ – of out-of-wedlock pregnancy. These forms of circulation do not necessarily encompass a fixed residence nor the introduction into the formal job market. Likewise – although some NGOs claim it happens less frequently – some of these women⁴³⁴ do not have their children’s national ID, certificates of birth, thus they may not register them at the civil registrar. These realities ultimately call into question State-lead dispositifs based on ‘geographical’ parameters and on mechanisms of identification: the categorisation inherent to RAMED does not reflect all nuances of socio-economic mobility and precariousness, which may prevent the provision of the required proof in order to follow the bureaucratic procedures for the submission of a valid dossier. This may be seen as a paradox of “the government of the precarious” (Fassin,

⁴³⁴ For instance those who give birth in hospitals other than those with which NGOs collaborate.

2012: x). Hence, forms of vulnerability are reconfigured with the implementation of a wealth of programmes, whose vocation would rather be inclusive⁴³⁵.

The “paradigm of a politics of compassion” (Fassin, 2012: 1) also enters state-lead health policies and nourishes the forms of “humanitarian government [as the] deployment of moral sentiments in contemporary politics” (ibidem : 1); “*government*” is meant by Didier Fassin in Foucauldian terms as “the set of procedures established and actions conducted in order to manage, regulate, and support the existence of human beings: government includes but exceeds the intervention of the state, local administrations, international bodies, and political institutions more generally” (ibidem: 1, 2). The realm of the “humanitarian” should be understood in Fassin’s view as the “articulation between reason and emotion that defines moral sentiments” (ibidem : 2), whereby humanitarianism becomes “a language that inextricably links values and affects, and serves both to define and to justify discourses and practices of the government of human beings” (ibidem: 2).

§ 3 Governing bodies

So far I have sketched out the “moral landscape” (Fassin 2012 : ix) in which unwed motherhood is to be situated within contemporary Moroccan society and particularly in the urban *bidawi* landscape, where I have focused on some ‘dispositifs of care’, their design and implementation. Hence, the “ordinary situations (...) characterized by precariousness” (ibidem : x) embodied by young unmarried women and their children currently mobilise a set of humanitarian instruments which draw overwhelmingly on the “mobilization of empathy”⁴³⁶ (ibidem : x). I have discussed so far some measures and projects that I deemed significant for the ways in which the condition of out-of-wedlock pregnancy and birth is regarded as a potential socially disruptive and threatening event.

In the previous sections of this chapter, I have shed light on the peculiarities of the public hospital setting and on the diverse and divergent measures enacted to manage the “surplus bodies” (Bargach, 2002) of children born out-of-wedlock and

⁴³⁵ Like the RAMED.

⁴³⁶ “(...) rather than the recognition of rights” (ibidem : x).

the “exiled bodies” (Kapchan, 1996 : 202) of the women who are their biological mothers in this context at – or after – birth: I also focused on the different actors willing to govern the presence and the social destinies of unwed women’s newborns – NGOs, individuals, ‘traders’, health personnel. I have thus drawn attention to some of the measures directed at unwed mothers’ everyday life and coping strategies by providing them primary and paediatric health as well as – for instance – powdered milk and – at a different level, for some of them – administrative support, professional training, “pedagogic” activities and – potentially – work placement, besides limited and time-restricted accommodation facilities.

Over the previous chapters, I have mentioned some restrictions and selection criteria fostered by NGOs directed at unwed mothers, as well as diverse measures and programmes that I have defined “*dispositifs* of care”. I shall reflect upon them, as specific forms of governing bodies and shaping subjects. To begin with, some organisations are not supposed to admit their beneficiaries – or potential ones – before they give birth, whereas they can refer them to other charities⁴³⁷ that take on different tasks, such as giving the girls shelter before and soon after birth. Notably, a centre run by catholic nuns accepts girls starting from the seventh month of pregnancy, but those who come from far away may be admitted even earlier, if there is room for them and if they can provide their ID – useful for the future inscription of the baby to the civil registrar – and if they do not intend to abandon the baby; even minors would not usually be accepted by this centre, lest they have an ID. They may accept women who already have other children, provided they leave their other baby/babies elsewhere when moving to their centre⁴³⁸. However,

⁴³⁷ These organisations work in a network, although it is not an official one: they basically cooperate when possible, given their mutual knowledge. As it has emerged in relation to the trajectories of some of my informants – for example with Imane (chapter three), charities based in Casablanca are also in touch with similar NGOs located in other regions of the country. Some beneficiaries of these smaller charities may be sent or directed to Casablanca to enter larger charities’ programmes.

⁴³⁸ This is what the social worker of another NGO told me about the selection criteria adopted at this centre, which I visited although I was not allowed to go back for fieldwork activities.

other shelters run by local NGOs might accept women who already have one or more children, although their service explicitly targets the period around childbirth for women – and potentially children – who have no other shelter or who come from other parts of the country. Such structures, therefore, constitute a primary kind of assistance, whose goal is to face immediate emergencies, according to the broader “mandate to manage social emergencies” (Ticktin, 2011: 70): the mission of these organisations, hence, is played out as an “emergency social service” (ibidem: 71).

Thus, the girls who live at shelters before giving birth and short afterwards may not try to enter or may not be directed to a further NGO programme, for which they might not be considered suited, for instance if they cannot give proof of being able to conform to its schedules and tasks. Proof or eligibility criteria might be represented by one’s language skills, education, previous work experience and training⁴³⁹. Besides these elements, and in addition to the demonstration of one’s flexibility to times and rules of a non-governmental programme, I argue that in the framework of the NGOs where some girls are admitted to pursue training and activities of ‘empowerment’, a precise imagery of the modern beneficiary is taking shape.

Emphasis in these organisations is put considerably on the “changing profiles” of the beneficiaries and on the fact that some of them – at least in some of the largest, ‘second level’⁴⁴⁰ organisations – are educated, some of them hold diplomas and degrees and are fluent in French. All these elements contrast, indeed, with the stereotype of the illiterate housemaid and then unwed mother which pervaded the imagery of unwed motherhood in the early years when this figure was shaped within the civil society arena, and which – I argue – still exists, although it is glossed differently across the diverse contexts and organisations. The stratification

⁴³⁹ Additionally, these elements might also be relevant in the potential subsequent recruitment of former beneficiaries as personnel of the NGO that had assisted them or of other organisations. Among my informants one actually obtained a job at the NGO by which she had been supported with her child.

⁴⁴⁰ For “second level” organisations, here I refer to the organisations where girls may be admitted as beneficiaries only after childbirth; it deals with organisations that provide them with training in different domains (aimed at work placement) as well as pedagogic activities, besides primary healthcare and free medical consultations.

of the kinds of tools of assistance, care and ‘empowerment’ delivered to the beneficiaries who I have encountered across the diverse non-governmental settings, became increasingly meaningful as time went by. The differentiation and stratification inherent to the management of out-of-wedlock births and unwed motherhood was bluntly made explicit – among others – by an NGO employee:

“Listen, can you imagine a girl *who has never held a fork*⁴⁴¹ in her hands in her whole life being sent to work in a restaurant or in a café?! Not all girls are worth being trained the same way... it would probably be useless” (NGO employee, summer 2011).

Hence, these features highlight that the non-governmental and charity domain is diverse and stratified, whereby some structures and initiatives are solely aimed at giving young women a shelter for a short time, in which they may also be helped to manage administrative procedures connected to the birth certificate and the children’s inscription in the civil registrar. These kinds of organisations are not meant to provide further services, and their beneficiaries start searching for jobs as soon as they leave the shelter. I argue that those who are not considered as skilled or suitable for entering non-governmental programmes are those who fit less in the imagery of modernity (and moral acceptability), on which some local NGOs seek to build their social and political legitimacy.

Given this scenario, it is worth exploring the aforementioned issues of ‘modernity’ and morally-constructed acceptability in the imagery of unwed motherhood in the framework of the charities and NGOs that I have taken into account. Hence, modernity may be understood according to standards like education, language proficiency and other sorts of professional skills, which make them potentially prone to speak about their stories in the media, documentaries or national and international gatherings of NGOs. Whereas, ‘morally-constructed’ acceptability in relation to the issue of sexuality and its role in the legitimisation of these subjects

⁴⁴¹ I was particularly struck by this example, which evokes the “knife and fork doctrine [i.e.] the early twentieth century Protestant missionary nickname for the idea that introducing cutlery use was an efficient way to alter eating customs and domesticate the ‘savage’ milieu of Congoland” (Hunt, 1999: 121).

in the non-governmental domain, draws upon what may be considered as the primary criteria for selection: only women who prove that they have given birth to *one* child can be selected as beneficiaries; the same women must not be involved in relationships with multiple partners, nor with relationships which potentially include monetary transactions⁴⁴². In Naima's words: "I have a boyfriend, I have told it to the social worker because it's not a problem for me to say it. She said 'that's fine'. I date only this guy and the most important thing for them [the charity] is that we have only one partner... We can have a boyfriend, it's not forbidden, but without money." (Naima, summer 2011).

When touching on the issue of the access to healthcare for unwed mothers, Dr. Y.⁴⁴³ – a public health practitioner and volunteer at a charity for unwed mothers – said that she offered free consultation at the charity or at the health centre that she manages in another district, since the nearby health centre is overwhelmed with patients, who in her opinion are not given enough attention, especially at the "relational level". This practitioner told me that an acquaintance had questioned her engagement in a charity which helps unwed mothers by contrasting it to the fact that she wears a veil: she asserted that she saw no contradiction between the two things, whereas she claimed that her goal was precisely to help and support those "disadvantaged women" and their children, in order – for instance – to prevent their future involvement in "activities of prostitution". This doctor emphasized her "privileged" relationships with current and former beneficiaries and the fact that she does not 'show off' with her colleagues or with people in general, because she helps and listens to those women's suffering spontaneously. She maintained:

⁴⁴² Of course, social workers do not have the means to verify if all their beneficiaries are involved in relationships which contravene these rules, or they can do it only to a certain extent. However, certain kinds of programmes which involve their beneficiaries for several hours per day allow the personnel to have a broad overview on the women's lives and relationships. Moreover the beneficiaries' accommodations are usually in the proximity of the NGOs' headquarters.

⁴⁴³ Instead of using a fictive name, I use a fictive initial for the name of this doctor.

“You cannot let them down! Even when they are not the charity’s beneficiaries anymore... They need to be helped, oriented... Plus, it’s so hard for them to find a job... They must be involved more and more, even in other projects” (Dr.Y., summer 2011).

The doctor insisted that further attention has to be paid to unwed mothers’ and their children’s “future outside the charity”, whereby “once outside” their main demands are said to concern “child health, sexually transmitted infections and gynaecological issues, depression and anxiety” (Dr. Y.), for which this health professional strives to provide care and medication herself or to direct them to other centres or practitioners⁴⁴⁴. While for the *bnat* who are still at the charity where this doctor works at, sessions and group meetings are organised to provide them with information on contraception, but also to elicit discussions on sexuality and intimate relations:

“There’s no need to be shy... They need to have relationships [sexual intercourse]. If you hide them, you are going to be *contaminated*... A woman must protect herself, in order to avoid any disease afterwards! It’s normal to have sex, fear doesn’t help: they have to understand what protection means. For example, they cannot come back to this charity if they get pregnant again” (Dr. Y., summer 2011).

I have already brought attention⁴⁴⁵ to some “pedagogic” activities organised within organisations specifically targeting unwed mothers. Although this practitioner and other social workers claimed that current discourses and health campaigns associate sex and diseases, by “showing only the bad sides of sex and [by] spreading fear among youth” (Social worker, spring 2011), in order to be admitted to some charity’s shelters, potential beneficiaries have to be tested for HIV. Besides, on the day of the test, they take part in sessions on sexual health and the prevention of HIV and STIs at other Moroccan organisations, which focus on

⁴⁴⁴ As I have explained in § 1 in this chapter.

⁴⁴⁵ In Chapter Three.

HIV/AIDS prevention. I shall make clear that when I first approached these organisations, I was told that my research might be relevant to them – and vice versa – since “most [of their] beneficiaries are unwed mothers”. Hence, although this work does not focus on HIV/AIDS in Morocco, nor on the politics of prevention and treatment as such, I will outline a few issues stemmed by my fieldwork in one ‘branch’ of one of those organisations, by highlighting the aspects that may broaden the perspective fostered so far. As I have mentioned in previous sections when dealing with the stories of some of my research subjects, I mainly attended weekly sessions on sexual health directed at women identified as ‘sex workers’, whereby I found out that among those who had children, some had previously been the beneficiaries of local charities for unwed mothers. The example of Naima – who I mentioned above – is emblematic in regard with (apparently) “contradictory existential trajectories” (Beneduce, Taliani, 2006: 433) because, while she was benefiting from a programme for unwed mothers and was often presented as a ‘model’ in this sense, she simultaneously attended these other sessions, which were explicitly tailored for women who are supposed to ‘go out a lot’ – even if it is not always the case. However, it is not this multiple ascription to apparent divergent frameworks that is worth attention, but rather the ways in which Naima fashioned it: she was glad to meet me after almost a year and she spontaneously turned to me as we coincidentally met at this organisation. She also added she had told me she used to go there from time to time, “because it’s good” and found her different ‘affiliations’ did not conflict⁴⁴⁶.

As a premise it is to be noted that Moroccan NGOs strive to prevent the epidemic by targeting precise groups within which the prevalence and the growth of HIV has been observed. Above all, in focusing on the ‘risk group’ cast as “female sex workers”, we have to recall that this is an externally generated category, which emerged as such namely within NGOs programmes on HIV prevention⁴⁴⁷: the French term ‘*professionnelles du sexe*’ or “*travailleuses du sexe*” is officially used when mentioning the recipients of some of their programmes of HIV prevention,

⁴⁴⁶ Despite her claim of not engaging in relationships with multiple partners.

⁴⁴⁷ These programmes receive both national and international funding.

while *l-bnat* is the generic term commonly used in referring to the beneficiaries. As widely discussed in medical anthropological research in recent decades (Schoepf, 1992, Glick Schiller et al., 1994, Parker, 2006), public health approaches which explicitly target key groups as being intrinsically concerned by risk of STIs and HIV infection and/or transmission and which focus on ‘risky behaviours’ of the individuals end up neglecting the social determinants of health and put blame on the individuals, instead of shedding light on the social production of disease (Farmer, 1999). Such views – translated into public health policies and measures – ultimately contribute to the social production of stigma and may significantly inform local moralities. I have to make clear that the idea that sex workers constitute a ‘core group’ and are implicated in the transmission of HIV stems from biomedically oriented epidemiological research, suggesting that female sex workers were the ones to be targeted with health promotion campaigns (Parker, 2006)⁴⁴⁸.

The local organizations that allowed me to carry out my participant observation and to gather these insights are pioneers of the prevention and care of HIV/AIDS in the Maghreb and the Middle East. They have also contributed to ‘breaching the silence’ on these matters and they campaign against social stigma on HIV by seeking to inform and to raise awareness among as many social actors as possible. In this framework, a large part of their work consists in targeting ‘key groups’ – such as women and girls identified as female ‘sex workers’ – with specific information sessions, collective meetings and with ‘proximity’ activities aimed at the prevention of STIs and HIV/AIDS. At the headquarter of the association and during outreach activities, condoms are regularly provided as well as free

⁴⁴⁸ The concept of a ‘risk group’ stems in particular from the first decade of the AIDS epidemic and has contributed to shaping the imagery in which HIV was seen as circumscribed to certain – marginalized – bounded ‘subgroups’ or to ‘socially deviant populations’ of [the U.S.] society (Glick Schiller et al., 1994), whose – presumed – behavior was deemed worthy of attention rather than the social features that helped to understand the transmission of the infection. These are the premises to conceive sex workers as a bounded and homogeneous group, which could be identified by its sexual behaviour – for instance, several sexual contacts - and, therefore, for its vulnerability to infection and eventually to its transmission (Parker, 2006).

consultations, testing, counseling and direction to ‘sensitive’⁴⁴⁹ public health services for contraceptive methods; leisure activities – like shared meals and parties – are also part of these programmes.

However, I shall argue that the assumption underpinning these initiatives is that women conceived and defined as ‘sex workers’ are as such considered ‘at risk’ and are often represented as a bounded group. This category – as discussed in chapter three – is not always consistent with women’s experiences and understandings, but is nonetheless used to identify a ‘risk group’, constituted by women of different ages and marital status: yet, many of them are young and unmarried⁴⁵⁰. Thus, not only is female sexuality associated with notions of risk, but class, income and sometimes marital status become additional factors which contribute to shaping local understandings and “a political economy” of risk (Quaranta, 2006: 283). Notably, fostering the category of sex workers for (inner-immigrant), low-income (unwed) women having one or multiple sexual partners, from which they receive

⁴⁴⁹ As some of the personnel of the association explained to me, their users – *beneficiaries* – were referred to some specific public health centers in Casablanca, where some of the volunteers of the association also worked – or with which they collaborated – so women/girls were less likely to be mistreated being unwed women seeking contraceptive methods or turning to the facility for other sexual health-related issues. In these health centers – as the personnel of the association stressed when talking to the women – any service and medication given is free of charge. Yet, the reason that usually prevents unmarried women – overall – from turning to them is that public health centers are for the resident population and that the great majority of women patients for sexual and reproductive health issues are (resident) married women, the only ones who are supposed to benefit from these health facilities.

⁴⁵⁰ Besides, it is noteworthy that – at least so far – notions of risk are explicitly fostered by NGOs only in regard to their users, i.e. women who sell sex and who have a low socio-economic status. Hence, even if NGOs are aware of other forms of commercial sex, practiced by women of higher socio-economic standing, they distinguish their users from the ‘broader public’ (i.e. society in general). For instance, they specify that “married women” would never take part in any of those ‘information and education’ meetings on sexually transmitted infections and that if they did, they would be “shocked” by the issues dealt with and by the ways of talking about sexual intercourse and sex in general: hence, the – actual or potential – participants of these sessions at NGOs are ‘clearly’ acknowledged and targeted as ‘professional sex workers’ and differentiated from ‘the rest of women’, for instance from ‘married women’. Marital status is then another aspect which potentially discriminates ‘sex workers’ from ‘women in general’ – in the eyes of prevention policies too – and may also suggest that risk resides in female sexuality as practiced by unwed women.

economic or material support might turn out to be further stigmatizing. In seeking to understand and to critically analyze notions of ‘risk’ and vulnerability in relation to gender in sexual health politics in urban Morocco, the insights provided by Brooke G. Schoepf (Schoepf, 1991, 1992, 2001) are particularly illuminating in that she points out that inequalities and poverty constitute the main triggers of the AIDS epidemic. She refers to the Central African context, but this may be relevant to other contexts in which unequal gender and class relations shape and reproduce the structures of power that create the disease and determine the ways people – notably women – experience illness. Sexual issues, as stressed by Schoepf, have to be seen as “entangled in the fabric of social relations” (Schoepf, 1991: 753). Putting sexuality into a social context also helps to understand the changing response to HIV/AIDS, in terms of ‘prevention’ and ‘education’ strategies that do not ideologically address abstract individuals, but rather the social actors embedded in specific sets of relations.

For instance, although they may actually be at higher risk, targeting ‘sex workers’ as a high risk group, would divert attention from “the socioeconomic conditions that oblige many women to rely on sexual exchanges for subsistence [and it would] avoid(s) the fact that due to [widespread] infection, many spouses and other regular partners are at risk. Schoepf points out that the aim of the reduction of ‘risk’ should involve society as a whole. The mere dissemination of information, furthermore, reveals its limits in contrasting the spread of the epidemic: the core issue, indeed, is that social structures themselves create situations exposing people to risk (Schoepf, 1991). Global inequalities become gendered in so far as they come to be inscribed locally in the bodies of girls who “cannot control the relations of power that put their lives at risk” (Schoepf, 2001, p.336). Gender, then, is of central concern in the AIDS epidemic and in its representations, yet it is often associated with the controversial term of vulnerability: it evokes passivity while concealing the role played by some women in negotiating sexual relations. The conflation of the two terms may deflect attention from the processes that produce ‘vulnerability’. On the other hand, agency should not be overlooked either, for over-emphasizing this dimension when dealing with people’s survival strategies may obscure that they are captured in webs of power or constraints which leave little scope for ‘negotiation’ (Schoepf, 2001). Gender relations, therefore, have to be examined in the light of

economic relations by bearing in mind that most of the female ‘sex workers’ benefiting from these NGOs’ programmes are described as low-income, unwed women coming to the city from the countryside in search of wage labour.

Whether the focus of such programmes is sexuality framed as ‘infantilising’ sexual education or sessions on sexual health, contraception, HIV and STIs prevention for women cast as sex workers, I argue that these – sometimes controversial – approaches are key to understanding how young women’s sexuality is constructed within these specific arenas as something that has to be ‘managed’ and protected responsibly. Therefore, this understanding of responsibility further resonates – or contrasts – with the discourses on premarital sexuality that have been outlined in the previous chapters, in which ‘responsibility’ and ‘intention’ can be declined in multiple, nuanced and contradictory ways. In discussing the processes of bureaucratisation inherent to the neo-liberal order (Hibou, 2013) and specifically embedded in migration policies, particularly those involving single Nigerian mothers in Italy, Beneduce and Taliani emphasize that “the body, sex, care, socio-economic assistance, all represent privileged sites for exerting (or controlling) sovereignty and ‘governmentality’⁴⁵¹” (Beneduce, Taliani, 2013: 232).

Thus, I will raise some further reflections on the sessions of “awareness” on hygiene and primary health delivered to different groups of beneficiaries of one of the charities where I started my fieldwork. Since the nurses who conducted it came from Europe and were Francophone, the session on “*Health: rights and duties*” had been translated from French to *darija* by one of the beneficiaries. Stress was put mostly on prevention, on “eating well (lots of fruits and vegetables), moving, having a good night’s sleep, being clean and keeping a clean environment, not taking drugs, not smoking nor drinking alcohol”, followed by a wealth of recommendations on hygiene. A few days later, I took part in a similar meeting with another group of beneficiaries, which was held at another structure of the same charity, but in the outskirts of the city. The presentation dealt with the same topics, although it was translated by a social worker and the importance of hygiene

⁴⁵¹ The authors refer to the concept coined by Michel Foucault (1994) *Dits et écrits Tome II*, 1976-1988, Paris: Gallimard.

and of taking care of oneself and of the propriety of one's body was increasingly stressed by the nursing students. At the end of the session, they underlined that girls should be aware that they were very lucky as their health and medical fees were being cared for and paid by the charity and simply concluded by saying: "healthcare costs a lot of money!" The description of some elements of the sessions on health and hygiene is worth noting for it gives an account of the kind of tools which make up the scenario of care for unwed mothers and their children within the non-governmental domain in Casablanca.

Hence, prescriptions regarding behaviours and conduct were central to these activities: staying healthy, finding a job and earning a salary in order to raise and educate their children are dependent – within these non-governmental discourses – also on one's individual responsibility and on one's ability to take care of oneself, to prevent risks for oneself and one's children. Nevertheless, the core issues in the sessions on hygiene and health sounded alien to the actual living conditions of most of the "beneficiaries". Yet, the attention brought to hygiene in one's living environment and to the care of one's body seemed to me highly significant, in so far as it 'gave flesh' to the overall endeavour of the (re)construction of a 'virtuous' unwed mother, or as Hunt puts it: "maternal hygiene would enable monogamous marriage, clean lives and bodies, and spiritual transformation" (Hunt, 1999: 227)⁴⁵². Hence, the purported right to raise her child, claimed by many charities on behalf of these women, is simultaneously meant as her duty or even an obligation – or a sort of debt – towards society and – to a different extent – to the people by whom or the institutions by which she had been supported. Whereas, raising and educating her child – i.e. to be granted that right – beneficiaries are administered "moral instruction" (Stoler, 2010: 69) and are demanded to conform to certain criteria and normative frameworks, among which that of not having previously had children and not getting pregnant after having been admitted to the NGOs' programme. Yet, these requirements may have controversial outcomes:

⁴⁵² Although the author refers to the activities of a Protestant mission in 1950s Congo, I found this remark relevant in giving an account of the approach fostered by some actors and charities in the specific field of out-of-wedlock motherhood in contemporary Morocco.

“There are inspections at night, in their rooms, in order to check if they are at home with their babies. Otherwise, they may be judged and potentially sanctioned and sometimes expelled by the charity’s programme. There are some beneficiaries who are not wise at all and can make the same mistake again... they are not aware! That’s why they need to be watched: we have to stand by them... They’re like kids, they have to be cared for” (Dr.Y., summer 2011).

“You know, it’s really hard to deal with those girls... You can’t trust them. You never know what they’re up to. One day they are assisted by a charity, the next day they are on their own back *fi l-zenqa*... and they can’t stop, they’re back and forth from the street, going out with different people. I know one who was let down by the *jama’iyya* [charity] because she got pregnant again. But then she got pregnant, I think, two or three times in a row: she *gives* her children [to somebody else]. She might do it for money. I’ve also heard the last time she gave birth at hospital, somebody asked the doctors to do her *l-‘amaliyya*⁴⁵³... So she won’t do it again. Many girls go back to the street, either for going out or for begging” (an acquaintance, autumn 2012).

Despite presenting somewhat ‘extreme’ themes and examples of forms of control of the women in question, these excerpts of conversations with persons living or working in close contact with unwed mothers – give some insights into the tangle of – ambiguous and fluid – values attached to these women as sexual beings, while their morality as mothers is simultaneously under scrutiny. In discussing sexual and racial politics in the context of European colonisation in Indonesia, Stoler (2010) aptly argues that “the politics of compassion and charity” (ibidem: 69) and the emphasis on the “protection” (ibidem) of children⁴⁵⁴ was tightly bound to the

⁴⁵³ She meant that the unaware woman had had an hysterectomy.

⁴⁵⁴ The author refers to children born of native women and Europeans (Stoler, 2010 :68 – 69).

attention to their “native mothers” (ibidem), both seen as the embodiment of moral danger. Although the contexts in question are different, Stoler’s endeavour at tracing “deeper genealogies of the political and the intimate” (ibidem: 9) by seeking to identify “the political stakes lodged in what is defined as public or private” (ibidem), seemed to me relevant in so far as it reverberates in the creation of subjects and bodies that I focus on in my research, and particularly in the politics of the body which suffuses the diverse institutional contexts examined.

These examples – as well as everyday practices within the NGO scenario – account for sexuality as a contested issue and, despite its apparent ‘silencing’ behind the deployment of the rhetoric of naivety and unawareness, I argue it remains at the core of the categorisation of unwed mothers. Notably, their initial ‘deviance’ from sexual norms engendered their current condition, in which they are considered – as in the above statements – as prone to undertaking similar pathways and encounter the same ‘troubles’ again, i.e. further pregnancies or new problems, such as sexually transmitted diseases. What is worth noting, is the way in which forms of control of the beneficiaries’ behaviour are described: their alleged mistakes are ascribed to their lack of awareness, rather than – for instance – to their voluntary engagement in love affairs and sexual intercourse. This view is coherent to the imagery of social acceptability, embodied by this sort of unaware and irresponsible female sexuality. However, interestingly, the issue of control is combined with the urge to take care of unwed mothers: the diverse dispositifs put into being by manifold actors and agencies across the non-governmental domain – in intersection with public health – is emblematic of the tension between these poles, whereby the attention drawn to their bodies and sexuality is motivated by the need to uphold the social order as well. Whereas, the second excerpt is emblematic of an – apparently – contrasting perspective, in which that young woman’s reproductive capacity is displayed and (maybe) commodified outside an institutional and normative framework, because – although commonly cast as immoral – the fact that she gives her biological children to somebody else is inscribed, after all, in the social order.

CONCLUSION

While I was carrying out my earlier fieldwork on birth practices in a small town in eastern Morocco – Ifli – I often found myself among unmarried women of all ages, at mosques, pre-electoral meetings, post-electoral celebrations, local associations, wedding ceremonies and *sadaqat*, (female) households. One time I was asked about my research topic, the middle aged woman who asked the question replied: “So, you are not interested in how we, the unmarried, the widowed, the divorcees, how we, the other women live? There are many of us here... You only want to talk to married women, right?” The question was certainly thought-provoking, although that woman was ironic and had already noticed that I spent time with the *‘asibat* as well, although I knew that my research topic did not touch directly on their lives and preoccupations. Besides, I became aware that for me, as a foreign – yet – *bent* student-ethnographer it was not straightforward to discuss details on women’s birth experiences or on the *qablat*’s practices. While I was in the same town I also spent time with female neighbours who were also unmarried, although younger; they were unemployed and spent most of their time between house chores and activities like embroidery and painting. However, when I left the town to head to the region’s main town, two of these young women also left and indeed disclosed their impatience to have some fun, walk around, go to cafés, go to the sea side and stay away from home for the summer, or at least until Ramadan. They were heading to a town on the Atlantic coast to see some relatives and acquaintances, hence our pathways split: however, our trip by bus was itself pretty insightful, in so far as they stressed that their lives were not circumscribed to the spaces where we used to meet. (Maybe) too old to get married and too young to “stay at home all the time”, they affirmed their desire to inhabit and move back and forth from different spaces differently, while I could not avoid noticing the chatting, flirting and joking between young females – including my neighbours – and males once on that bus. Evoking these memories is not meant to recall the reasons why I undertook this current work, nor to present it as a sort of answer to the ways I had been interrogated by previous fieldwork in Morocco. In the introduction to *Cultural*

Intimacy Herzfeld (2005) writes: “To many people throughout the world we are both the signs and the agents of an intrusion, not just into private lives, but also into the privacy of nations – an intrusion into the collective space I have chosen to call *cultural intimacy* (...) as one means of defining and understanding the sore zones of cultural sensitivity” (Herzfeld, 2005: x). The author relies on this understanding of cultural intimacy to counter the dismissals of the validity of anthropological research as relegated to “mere anecdote, mere hearsay, mere minorities, mere marginals and eccentrics”, and as such as a “violation of cultural intimacy”, which from the point of view of “elite forces” would overlook the most relevant concerns of nations (ibidem: x). I was confronted with similar “politics of significance” (ibidem) at the beginning of my fieldwork, when the presence of unwed women in the maternity wards of public hospitals was either dismissed as ‘invisible’, or ‘non-discriminated’, or as of concern to civil society only, or, again, as normalised and hence irrelevant. While, on the other hand, the survival of the biological bodies and the social destinies of the newborns of the same women were at the core of the preoccupations of my interlocutors in the medical staff. Analogous “diagnostics” (Herzfeld, 2005: x) were made by other female physicians who outweighed the attention put by some of their colleagues or by other social actors on issues like out-of-wedlock births and unsafe abortion, by asserting their irrelevance in the context of Morocco, while maternal mortality due to unsafe birth conditions in deprived regions was highlighted as the primary public health concern. Ironically, when I encountered precisely this topic while researching birth practices in an area, which turned out to be one of the most destitute of the country, I was given other medical ‘advice’, i.e. not to focus on such marginal and ‘traditional’ practices performed by women healers and perpetuated thanks to the “conservatism” – expressed rather as “backwardness” – of local women, who were blamed for risking or losing their lives due to the “refusal” of the male-medical gaze⁴⁵⁵.

Thus, the above mentioned thought-provoking question – that I had been asked by a woman in a mosque in Ifli – to a certain extent also interrogates the ways in which I looked into ‘uncomfortable’ issues like out-of-wedlock pregnancies and

⁴⁵⁵ Whereas, of course, the issues at stake could not be formulated in such over-simplified terms.

births, and the ways they are socially shaped in the portions of contemporary Moroccan society that I got enmeshed with for my doctoral research. The domain I have explored may actually be seen as what Herzfeld calls “sore zones of cultural sensitivity” (ibidem: x), although its current and increasing “therapeutic publicity” (Berlant, 1998: 281) through the non-governmental machinery and the media may suggest that this part of the social body does not ‘ache’ painfully.

With this research I aimed to explore the experiences of Moroccan women who give birth outside marriage and I wished to convey the complexity of this theme by opening up some core questions concerning the role of family ties by which birth is shaped, thwarted or detached; the moralities surrounding pre-marital or non-conjugal relations and the negotiations of intimacy and ‘sexual selves’; relational uncertainties and material precariousness as the conditions in which fertility is experienced and pregnancy acknowledged, concealed, disclosed or disrupted. I simultaneously brought attention to the resources mobilised by young women, who confront contingency through a wealth of arrangements, which enable them to circumvent or adjust potential distress by drawing on existing or novel bonds and relations. These tensions imbue women’s urban pathways and coping strategies along with their encounters with institutions, health services and non-governmental initiatives tailored on the NGO-bound category of unwed mother. I have sought to problematise the relational and epistemological stakes of research on subjects who ‘break the rules’ and who I have encountered within or thanks to structures and programmes designed to support them, while my positioning and ethnographic self was necessarily confronted with the relations of power which suffuse the politics and the regimes of care directed at these women and their children. In what follows, I shall on the one hand recall the themes underlying each section of this work by highlighting their broader anthropological relevance, and on the other I will hint at the potentialities of further research and elaboration on some aspects raised by this ethnography.

I started by sketching out the scenarios of birth and the ways in which they weave into the social fabric of kinship, family ties and the simultaneous gendered constructions of bodies, selves and persons. Indeed, I wanted to emphasize the

relevance of symbolic and relational resources which ascribe meaning to reproductive and birthing processes and which recognise mothers and children as social beings. Whereas, the situations experienced by young unmarried women lack or threaten many of these symbolic and relational resources. Indeed, both the discovery and the mistimed acknowledgement of pregnancy a few months before delivery engender a wealth of concealment strategies within or outside one's household and community. Body techniques are coupled by the search for solutions, concerning arrangements in the relation to biological fathers, one's family and employers. As illustrated by the story of Halima (Chapter One, 1.2), women may seek individuals or couples willing to raise their children, although they may change their minds after birth. Nawal's stubborn intention to keep her child against her mother's advice, insistent rumours and her sibling's suspicions was based instead on her reliance on at least one of "the two fathers" of her son Ayoub: Nawal's investment in these relationships despite their intrinsic uncertainties – and their partial overlaps – may be re-thought in relation to her aspirations to enfranchise herself from her parents and their material constraints.

Hence, the dynamics surrounding the disclosure and the – failed – concealment of Nawal's pregnancy have to be understood in terms of the search for potential stability with one of the two partners. Doing away both with the script of naivety and with that of deviance, the ways in which Nawal and other young women act upon their fertility, suggest that it may rather be conceived as a "bet" that may either disrupt or stabilize [urban] affairs and ambitions" (van der Sijpt, 2012 : 81). Mouna's endeavour to reconfigure her new self and her role as an unwed mother is grounded in her longing for her earlier life as a successful student, upon which her parents relied heavily. Longing, in this sense, stems both from the feeling of having deceived family expectations and from having at the same been deceived by male partners – or, again, of having 'mistimed' pregnancy with the 'wrong' person. The reconfiguration of selves and ambitions previously channelled in education – as for Mouna – may be addressed in the NGO sector, where as a beneficiary she was trained to potentially pursue a career in the same field. These pathways concern rather a neat minority of the subjects of my research, yet they are significant of some of the dynamics inherent to the local non-governmental arena, that I discussed in chapter five in more depth. What I have emphasized in chapter one is

rather the absence of a legal institutional framework in which conception and birth take place and the ways in which these relations ‘other than marriage’ produce illegitimacy. I have reflected on this aspect by drawing on participant observation – or rather ‘observant participation’ – at the services of legal support offered by Casablanca-based charities, which strive to ascribe informal relations some criteria that – according to art. 156 of the 2004 Moudawana – may grant legitimacy to childbirth: children conceived within the period of official engagement (as established by art. 5 of the Moudawana) are to be considered legitimate; whereas, according to the same article, if there is no agreement on biological paternity, recourse to DNA testing can be attempted.

This, however, is hardly feasible for most of the unwed mothers I have met, even among the beneficiaries of the charities in question: women do not have the ‘proof’ that an official engagement took place, because they were mostly informal relationships. What is at stake in these attempts to circumvent and draw on existing legal tools, which are often described as ‘empowering’ women? What is most relevant to my argument is that legal voids concerning – for instance – the attribution of the family booklet (*l-hal l-madaniyya*), may be both beneficial and detrimental to unwed mothers. Its attribution – thanks to the intermediation of NGOs – may grant legal identity and civil status and enable – for example – the enrolment of children in school and their vaccination. On the other hand, it may be argued that the registration of the children of unwed mothers and the attribution of the family booklet to unwed women institutionalises and normalises this condition, as if fathers did not exist. The role played by NGOs in supporting women in the access to administrations to obtain ‘the papers’ – *l-waraq* – may paradoxically discourage potential arrangements aimed at sharing responsibilities, other than pushing biological fathers to marry and immediately divorce women. A broader reflection can be made in rethinking the changes intrinsic in recent elaborations of family law, particularly the addition of genetic proof and biological ‘truths’: this sort of biological and genetic evidence counters classical Islamic jurisprudence, which allow “social *bricolages*” (Fortier, 2011) of juridical elements aimed at ascribing legitimate filiation to children and to safeguarding their mothers. The 2004 Moudawana reduced the length of pregnancy to one year and introduced the DNA test, which – contrary to what is commonly thought – may be used to

disavow and *not* to prove paternity. This was, for instance, the argument used by one of the two potential biological fathers of Nawal's child: while she staunchly defended the DNA test as her last resort, she was actually ambivalent regarding this tool, because she was also aware that that evidence could not be further manipulated.

Social *bricolage* potentially allowed by formulations and interpretations of Islamic jurisprudence, such as the flexible length of pregnancy mentioned above are not applicable to out-of-wedlock pregnancies, given that any child born less than six months after the conclusion of marriage or more than one year after its dissolution is considered illegitimate (Cherkaoui, 2010: 83): if she had ever decided to seek legitimisation (rather unlikely, however) this formulation would not have allowed Saida (Chapter 1, § 2.3) to present her pregnancy as legitimate, given that her husband had emigrated and been away from home for a longer time. Her story is emblematic of the limits of the creation of bounded categories such as 'unwed mother', since a woman like Saida had to pretend to be unmarried to access the benefits offered by a charity, which would have hardly deemed credible the demand of support from a young woman whose situation seemed even more complicated than that of 'standard' beneficiaries – above all, because she was officially married.

The stories of the women that I sketched in chapter one were aimed at giving a broad overview of the tensions which span their itineraries and that they seek to manage by drawing on diverse relational resources, whether they come from urban contexts or Casablanca itself or from other regions of the country. If pregnancy and birth in distressing conditions and relational uncertainties may themselves trigger or enhance female mobility, this feature certainly deserves closer attention both in further directions of the anthropology of migration and labour, and simultaneously in their class and gendered dimensions. Limited research on inner migration and female forms of mobility (Viché, 2009) has been carried out in Morocco, while, on the other hand, research on female labour in urban Morocco (Bouasria, 2013; Reysoo, 2005; Labari, 2004) and on its shifting patterns may broaden the understanding of the stakes of contemporary feminine subjectivities and forms of female autonomy in Moroccan society. Although I have approached these questions through my research on unwed mothers, I have progressively realised

how the convergence of multiple and intersecting layers of socio-economic forces and larger structural inequalities engender young women's mobility from one region to another; while, at the same time, for many women mobility stems rather by additional aspirations to autonomy and to different experiences of the self, which do not necessarily imply permanent ruptures with one's family. Distance, and the material and moral negotiations it implies, is experienced – before or simultaneously with motherhood – as another way of shaping and affirming one's status, yet in different terms than the transition from *bent* to *mra* embedded in marriage. However, as observed by Cheikh (2009) it is worth noting that – if compared to transnational migration – mobility within Morocco is more likely to be stigmatised – even if partially or totally triggered by economic support for one's family – because it still cast doubts on women's conduct.

I described the urban horizons navigated by young women and the tensions between their multiple duties and ambitions also in chapter three, in which I interrogated how “intimate politics” (Hoodfar, 1997) weave into these scenarios of mobility, autonomous urbanisation and – as for my informants – childbearing. The stories of Zohr and Nawal illustrated quite clearly that even in the seemingly highly distressing and troubled circumstances, women cannot be seen as mere victims – neither when looking at the events which lead to abandonment, infant death and deceit, nor when looking at how they grappled with them. In this sense, their moving within or back and forth from *Casa*, is emblematic of the ‘fluctuations’ underpinning both their relations with the ‘willing’ or ‘denying’ biological fathers and their socio-economic precariousness. The latter emerges at the core of the narratives of the young women, who come from rural neighbouring or distant regions – since childhood or shortly afterwards – to work as housemaids in well-off *bidawi* houses.

Whether alone or partially relying on their extended families based in Casablanca, their experience of service significantly shapes their trajectories and the ways they imagine and act upon relations fashioned in terms of love, romance, attachment and simultaneously their search for stability. The significance of these life-long experiences of service as housemaids and the embodiment of steep class – and regional – inequalities by domestic workers deserves further and closer attention. Notably, the ‘blind search for love’ addressed by some social workers to give an

account for these women's purported 'inclination' to illusory and deceitful love affairs, is in my opinion partially misleading, because it deflects attention from the very corporeal dimensions of labour and its commodification. Whereas on the other hand, these experience tell about a permanent lack of intimacy and – paradoxically – domesticity, unlike in the case of Amina – and her child – who built 'alternative' bloodless ties (Bargach, 2002) with their foster family.

Whereas in this case, reciprocation seemed rather at stake, I have illustrated how in other cases – such as Yasmine's – the acceptance of children born out-of-wedlock in one's household may entail a sort of debt and compromise, in terms of economic pressures and one's ambivalent – or forced – distancing from home. Naima, instead, aimed to acquire financial autonomy precisely with the aim of eventually re-presenting herself and her child to her family, but in the meanwhile she could only make up an alternative tale to justify her being far from home. Hence, I argue that shifting gender roles and contested subjectivities can be appreciated through the ethnography of women and young women who negotiate spaces and scopes of autonomy either 'on their own', or – rather – in the tensions between domesticity and 'the outside', whereby the worth of such an approach would be to ground these insights on contemporary femininities in local class and power relations and in the regional and structural specificities, in which female mobility and inner migration is experienced and acted upon. Not only Casablanca, but many other sites in Morocco allow the development of this sort of perspective, in so far as women – both married and unmarried – are employed according to the diverse regional peculiarities and economic sectors, as illustrated by the biographies of some of the subjects of this research, coming from – or working in – different parts of the country. The routes of labour migration of Moroccan women on their own, moreover, should be considered by looking at the mobility towards the Gulf: studies and proper research on this issue are scarce and hint mostly at 'trafficking' and commercial sex. I have had some insights into the mobility to the Gulf through the experiences of some acquaintances who highlighted the attractiveness of these perspectives in the eyes of young women, especially if compared to Europe. By turning attention to the routes of female working mobility within and from the South, anthropological research may ultimately gain renewed questions and novel perspectives.

The ethnographic process has brought about a wealth of methodological questions regarding positionality and the understanding of fieldwork as involving practical, intellectual and emotional dimensions, all making up one's *ethnographic self* (Coffey, 1999), which is defined and re-defined throughout the different stages of fieldwork and writing in productive, yet problematic ways. In these conclusive remarks I aim to rethink some of the aspects of my ethnographic experience that I raised in chapter two, which may expand the notion of reflexivity as the work and the endeavour of a continuously "positioned (and repositioned) subject" (Rosaldo, 1989: 7), where "the notion of position also refers to how life experiences both enable and inhibit particular kinds of insight" (ibidem: 19). During this work occasional discomfort and ambiguities inherent to inter-subjective experience in fieldwork may have surfaced, while I have widely acknowledged that "there is some room for misunderstanding" (Wikan, 1992: 474).

In my case, I ascribed this to various reasons, among which the biographical differences and other necessary distances between myself and the main subjects of this research, i.e. unwed mothers and women who were either younger or older than I. Whereas I have shed light on the other bonds engendered by or reinforced through my fieldwork, with people other than unwed mothers. Despite the "uncertain, at times opaque, conditions of intimate and uncomfortable encounters in all their eventuality" (Mahmood, 2005: 199), I should now accentuate that in particular with some of these women I built rather strong relations of trust, which lasted beyond the boundaries of this research. Reflecting on the asymmetries necessarily informing ethnographic encounters should not overlook one of the most controversial yet – potentially – "epistemologically productive" (Kulick, 1995: 20) tools of anthropology, i.e. (forms or scopes of) empathy, as "the ways in which people gain knowledge of others and reveal, allow, or conceal knowledge of themselves" (Hollan, Jason Throop, 2008: 389), which demands "imaginative and emotional capacities" (ibidem: 391). To sum up these reflections on the role of emotions and their – potential or hoped for – epistemological productivity, I shall just add that having been myself – more or less – acutely 'vulnerable' and hardly rational during some of the months spent in the field, may have made my experience closer to Rosaldo's (1989) positioned subject and to Wikan's idea of

“resonance” (Wikan, 1992), even if I acknowledge the limits of such a posture and the inevitable failures of understanding.

Besides the embodied nature of fieldwork and the gendered ethnographic self, the fact that during this fieldwork – unlike in my previous experience – I was not concerned in the same way by the production of a suitable and acceptable body image in terms of propriety of dress and – predominantly – ‘modest demeanour’, which had been highly appreciated in the aforementioned town of Ifli, did not mean that negotiating body boundaries in the metropolitan space or in institutional settings was less demanding or that it was not ethnographically productive. Conversely, this specific field has rather implied multiple efforts at establishing accepted roles in diverse relational contexts: for instance, the representation of my marital status in the relations with unwed mothers, my host families and friends and with other actors, with whom I had more formal interactions differed greatly and hinted that not only how we represent ourselves, but the ways in which our sexuality is constructed by our informants (Coffey, 1999: 80) contribute to the production of ethnographic knowledge. For instance, this was particularly true when Naima sought to know more about me, as she told me that she assumed that I had a Moroccan boyfriend, since I had until that time been vague about my relationship – that in general I could cast quite flexibly as marriage or as a ‘long-term’ relationship. In domestic contexts I strove to emphasize my role of ‘dutiful daughter’ (Abu-Lughod, 1988) or rather of *bent darhoum* or of partner/wife, to outweigh the stress put by my host families on the fact that I was spending such a long time far from home: this was in some cases attenuated by my father’s almost unplanned, yet much appreciated, visit to one of the families, whose house became one of my ‘homes’ in the field.

Conversely, being coincidentally seen by the same people in the whereabouts of a place as ‘dodgy’ as a hostel, while I was expected to be either at a conference outside *Casa* or ‘at home’ might have jeopardised the trust underlying our relationship – yet it did not. At the same time, the fact that – for contingent reasons – none of my host or ‘foster’ families ever met my partner even when he came to Morocco, enhanced the attention towards my lone presence in Morocco and – for example – the ironic remarks that the *mul l-dar* – “the master” of the house – gave proof of considerable patience towards me. Additionally, this posture turned into

scrutiny by some women of my host family, who sometimes interfered with frequent or prolonged meetings between me and – younger – male members of the family, although we all lived basically in the same household. On the other hand, when I was outside these domestic environments, my status – whether cast as marriage or not – somehow shaped fieldwork relations: notably, my own experience has both elicited issues concerning love, romance and ‘affairs’, but may also have, to some extent, hindered or – necessarily conditioned – them, given some of my informants’ efforts to fit into the imageries of sexual naivety promoted by the organisations which supported them and through which we met. Similar – yet opposite – processes and approaches featured other organisations, which target the ‘loose girls’ and ‘girls who go out’ instead.

As I have illustrated, however, the appropriation of these imageries is situated, tactic and dynamic: these nuances and non-linear subjective trajectories emerged over time, through the rapport built with some women in particular. These problematic aspects embedded in the negotiation of my ethnographic role reverberate in the perspective that I have fostered, i.e. a predominantly female point of view, which demanded probably greater efforts of deconstruction and problematisation of my informants’ narratives particularly concerning the relationships with the ‘biological fathers’ of their children and/or other partners, which in our encounters – especially if mediated by institutional contexts, health professional or social workers – tended sometimes to perpetuate certain scripts of gender relations and plots – which might include sexual violence – which opposed a female victim and a male oppressor.

This specific question – which spanned chapter three (3.2) – drove me to read these plots by drawing notably to Ticktin’s (2011) reflection, which – despite building on research conducted in France with Algerian and Moroccan women beneficiaries of charities – seems particularly apt in discussing the cases I encountered, because of their being situated in a context of assistance, in which the tangle of ‘compassional tales’ and tales of violence might have ‘humanitarian’ outcomes. Ticktin argues that her interlocutors’ narratives followed “clear plotlines” (ibidem: 145), which resonated with “Orientalist fantasies that turn on the idea that non-Western and particularly Muslim cultures are more patriarchal than Western ones” (ibidem:

145), this being embodied by violent men. Furthermore, such representations seem to echo the essentialised ideology of masculinity with which Fanon (1952; 2011) takes issue in the famous essay *The North African Syndrome*, in which the sexuality of male Algerian immigrants is pathologized as intrinsically violent and prone to engaging in relationships with prostitutes (Fanon, 2011: 99). This view would give way, as argued by Ticktin, to initiatives aimed at rescuing or “save[ing]” (Abu-Lughod, 2002; 2013) Muslim women.

Ticktin ultimately states that the problematisation of these peculiar ‘plots’ is not intended to dismiss the actual experiences of violence lived by women, but rather to underline their challenge in telling stories of violence, without having them inscribed into Orientalist scenarios. Although the plotlines which emerged in some of the tales of the charities’ beneficiaries were situated in Morocco, they emerged within encounters with me, but primarily within the context of organisations which, despite being Moroccan, are nevertheless subject to an array of externally-set standards and parameters⁴⁵⁶, related to their original establishment as European charities and NGOs⁴⁵⁷. Thus, I argue that these elements make up the scenario that Ticktin calls “neo-colonial regime of care [which] casts Muslim women as victims to be saved” (ibidem: 150), although in the case I examined a similar rhetoric – at the core of non-governmental dispositifs – is appropriated by Moroccan social actors themselves.

Hence, these dimensions have emerged as crucial and inherently political. The contexts and the relational frameworks in which encounters unfolded are necessarily entangled in power relations that I was aware of, but which I could not always act upon, because of the institutional settings, in – or through which – I met the subjects of this research. On the other hand, due to the fact that I was myself under scrutiny and the control of the same organisations – or institutions – and their employees, my interactions, relations and more or less subtle contrasts with some of them raised another array of ethical and methodological questions, besides eliciting key insights into the contemporary construction of unwed motherhood(s),

⁴⁵⁶ By funding agencies, for instance.

⁴⁵⁷ Some of which are of Christian inspiration, if not explicitly run by Catholic nuns.

gender ideals and ‘models’ of suitable or desirable beneficiaries within those specific contexts.

The exploration of the trajectories of young women was based on the urban context of Casablanca, as an in-between geographical space between home and different horizons, uncertainties and possibilities. *Casa* has emerged as a context in which young females do not only negotiate the occurrence of birth outside wedlock: this experience stems from and is inscribed in diverse biographical pathways, in which re-definitions of female sexual and economic autonomy, family ties and duties, new bonds and arrangements, desires, aspirations and deceptions all come into play. I called upon the diverse notions of romance and love imageries in that they are mobilised in contested ways both by young unwed mothers and in the rhetoric which pervades the organisations which help them: in this sense the register of manipulation and naivety is deployed to explain romance and subsequent female abandonment by their partners, while also the claim of the ‘absence of love’ and commitment is drawn upon – specifically by social workers – to cast these as superficial relations in virtue of the girls’ poverty or economic precariousness, seen as the unique element to orient their relations.

In this view the ‘troubles’ – *l-mashakil* – connected to out-of-wedlock pregnancy are the trigger of the disruption of romance and ideals of intimacy that “make things turn out in unpredictable scenarios” (Berlant, 1998: 281) and may ultimately engender “moral dramas of estrangement” (ibidem). The ways young women narrate and reconfigure their experiences in terms of losing and recapturing one’s self also call for attention towards the tangled “normative practices, fantasies, institutions, and ideologies that organise people’s worlds” (Berlant, 1998: 282) – or I would rather say, through which they organise their worlds and inform their desires. The non-linear trajectories of the young women at the centre of this research and their oscillations between competing moral frameworks and re-moralising endeavours, speak of the “continuities and discontinuities within the intimate field [and of its] impacts on the categorization of experience and subjectivity” (ibidem). Counter-narratives of romantic imageries have been voiced by some unwed mothers – like Bouchra (Chapter Three, 3. 1) – who clearly opposed both the script of manipulation, passivity and violence and that of pure

‘illusory’ romance, to the extent to which they were keenly aware of the temporary nature of their relationships, that they located outside conjugal imagery.

The tensions spanning the dynamics of the disclosure, concealment and management of out-of-wedlock pregnancies and births emerge in a more complex and nuanced way by taking into account male insights, that – for an array of reasons that have already been mentioned – have been explored only partially and certainly deserve further attention. A more problematic perspective emerges from male accounts, which allows for the rethinking of the accounts of unwed mothers outside the mere framework of victimhood. However, many of my female informants themselves hinted at balanced or overtly disillusioned views on female active engagement, complicity or manipulation in the relationships with the biological fathers of their children or with other partners, which suggests that the understanding of these relationships in the sole terms of a ‘double standard’ does not do justice to the multiple arrangements underlying heterosexual relations, including the occurrence of births outside marriage. Such a perspective has been useful in the critical appraisal of female narratives which built on the idiom of coercion and as such seemed to erase the subject’s agency and awareness, evoking ‘enclosure’ and ideals of domesticated sexuality in contrast to other dominant scripts of female ‘dangerous’ sexuality.

Fitna is described by Pandolfo (1997) as follows: “a polysemic concept at the limit of representation and thought, mark of an intractable difference, fracture, schism, disjunction, or separation – separation from oneself – the figure of an exile that is constitutive of the position of subject, as both a possibility and a loss. Ambivalent and paradoxical to the end, in the Qur’an *al-fitna* is the excess, the testing and ordeal that is both the transgression and the foundation of God’s law. In its colloquial use, it evokes the other states of madness and love, the cutting force of discord, violence, and war, and speaks of straying off familiar paths” (Pandolfo, 1997: 5).

I argue that the configuration of subjectivity as a possibility and at the same time as a loss lies at the core of the experiences of most young women in this research, for whom separation along strayed itineraries is what constitutes them as subjects. The plotlines voiced by young women simultaneously hint at the imagery of the loss of one’s self, which may nevertheless be drawn upon as a time and scope for

inhabiting boundaries and normative frameworks (Mahmood, 2005) in transitional, provisional and conflicting modes.

Going beyond dichotomous views of restrictions or subordination and resistance (ibidem), young women's shifting and even ambivalent plots ultimately suggest both the inadequacy of notions of mere individual agency and choice, and the potential reconfigurations of paradigms beyond the "controlling script of danger and oppression" (Bakare-Yusuf, 2013: 31). A problematic approach to these themes seems appropriate, since, as stressed by Massad (2007) : "while the premodern West attacked the world of Islam's alleged sexual licentiousness, the modern West attacks its alleged repression of sexual freedoms" (ibidem: 37). Hence, a broader complicated view is to be fostered when questioning the ways in which intimate relationships with male partners are given meaning, whereby intimacy may be intrinsically bound to diverse forms of material and financial support, which cannot be reduced to uniform understandings of commercial sex based on young women's economic precariousness. The significance of crossing thresholds, both in metaphorical and literal ways, is continuously redefined over young women's trajectories, whereby also sexual-monetary transactions may be, on the one hand, a means of carving out niches of intimacy and spaces of security and, on the other, they may be drawn upon to fit into those spaces of 'transition' evoked above. It is this *flou* and these in-between interstices that allow to further imagine and shape one's horizons and aspirations.

The porosity of the boundaries of intention, consent and desire, which imbue the ways in which young women design intimate relationships and the dynamics of pregnancy disclosure or concealment reverberate in the modes of embodying and acknowledging its potential disruption. In chapter four, I sought to give an account of the intricacies of this aspect of the trajectories of young women, in that they call for further attention to the multiple frames of reference that are drawn upon, far beyond reductionist constructions of the body and evidence-based views on reproduction. The practices and the symbolic resources mobilised by these women poignantly illuminate that desires or disruptions are shaped at the edge of relational arrangements: being mostly uncertain, the latter come into play in the (mis)timing of pregnancy, which may not ultimately be undesired as such. I have sought to

illustrate how such ambivalences and uncertainties are embodied in the practices aimed at managing fertility and in the – more or less – explicit ways of disrupting it. These aspects are necessarily entangled in local scenarios, resources and structural conditions, according to which disclosure and concealment hinge also upon potential abortive practices. This comes to terms with the availability and the type of methods ‘on the market’ and the stakes they entail, whereby risks – similarly to desires – are structured according to nuances, which do not merely affect the physical body, but involve moral dilemmas that may be made explicit as blunt reference to the sphere of ‘the illicit’, although they are grounded in more complex and socially situated moral arrangements.

These are actually embodied in the modes in which ambiguity is manipulated through a wealth of domestic or ‘traditional’ techniques of fertility regulation and enhancement of blood flow, which – as with childbirth and labour – may simultaneously be a remedy and also cause harm. Hence, idioms of ambiguity are entangled with those of risk at precise ‘edges’ or ‘liminal states’ of fertility, which allow flexible – moral – attitudes towards both pregnancy and its disruption. Although – for these reasons and a set of conjunctures – such attempts may not be at stake in these young women’s trajectories, they fit into the idiom of ambiguity, which is at the core of the tensions between the official and the unofficial (Bourdieu, 1977) or the inside and the outside, what is made explicit and what remains a hidden, female and ‘tacit’ forms of social wisdom. However, diverse approaches and stances unfold and are voiced both in public health and through different forms of activism or ‘denunciation’ surrounding the issue of abortion and agendas for reproductive health. These diverse postures and practices show how “biopolitical rationalities change over time, new tactics, truths, and moral regimes emerge. In parallel, they transform subjectivities and foment strategies of negotiation, contestation, and resistance” (Krause, De Zordo, 2012: 3): this perspective seems particularly appropriate in looking at emerging Islamic ‘right-to-life’ discourses and activism, a domain that certainly deserves further attention within studies on reproduction, health, body politics and biomedicine in the context of Morocco – not to mention that it is worth considering within the wider framework of female activism in Islamic political movements.

While ‘choice’ and ‘body ownership’ is claimed by some activists and contrasted with notions like the ‘right to life’ of the unborn articulated through Islamic embryology, more nuanced positions draw on other more flexible interpretations of Islamic texts and cast ‘pro-life’ approaches equally alien to local sensitivities, just like ideas of mere individual choice, which are widely perceived as external, neo-colonial impositions aimed at “saving” Muslim women (Abu-Lughod, 2002). What is more closely linked to the question of pregnancy and birth outside marriage by calling into question the place of unwed mothers in Moroccan society, is a public health vision which moves from the prevention of unsafe abortion conditions to demanding changes based on current legislation, which allows therapeutic abortion when the woman’s life is in danger. To this aim, mental health and wider potential social ‘risks’ are encompassed in this type of advocacy for the decriminalisation of abortion: among potential social dangers, unwanted pregnancies of underage and/or unmarried women and the presence of the “surplus bodies” (Bargach, 2002) of illegitimate children are often included and pinpointed as the very embodiment of ‘underdevelopment’, while a relevant legislation is advocated in the name of ‘development’.

Hence, through the exploration of these different – yet sometimes intersecting or converging – languages which draw on public health, state policies, biomedicine, Islamic embryology and activism, I wanted to illuminate the tensions and the predicaments spanning Moroccan society in relation to female sexuality, body politics, reproductive processes and their manifold manipulations, the intertwining of biomedical technologies with – diverse – Islamic interpretations, and the definitions of human life in terms of (diverse sorts of) boundaries. This has emerged as a relatively new field of inquiry and has raised further research questions which are beyond the scope of this work, although they may concern the making and re-making of persons, bodies and ties⁴⁵⁸. These insights obviously do not concern only of out-of-wedlock pregnancies and births, however these are often

⁴⁵⁸ Some of the doctors interviewed, for instance, often called into question the issue of surrogate motherhood and the conservation of embryos, by interrogating their boundaries from Islamic bioethical points of view. Another relevant question arisen from my fieldwork across hospitals and clinics is the use of medical technologies aimed at enabling the survival of premature babies.

drawn upon as the epitome of the pitfalls of reproductive politics, public health and education, and become to a certain extent a battleground for contesting lives (Ginsburg, 1989) and normalising bodies in society at large. They account at the same time for the role of technology in the management of life – both at its beginnings and at its ends (Kaufman, Morgan, 2005) – and for projects of “nation-building and subject-making” (Krause, De Zordo, 2012: 140), according to which “notions of self, citizenship, life and its management are linked to the production of knowledge and political forms of regulation” (Kaufman, Morgan, 2005: 317).

I argue that the different perspectives evoked – in chapter four and not only – by drawing on the narratives of women and other social actors, either in public health or social work, shed light on the production of unwed mothers and their children as specific sorts of social beings, who are revealed, protected and cared for in virtue of their anomaly and potential abjection, which make them “politically productive entities” (ibidem: 332). I have taken this perspective further in chapter five, by discussing the ways the current ‘publicity’ and emergence of unwed motherhood in Moroccan society unfolds through the non-governmental arena. Indeed, the creation of specific dispositifs tailored to these subjects interrogates how “living persons are governed – that is, made healthy and sick, valuable and vulnerable visible and invisible, expendable, profitable and mortal through regulatory, biomedical, ethical, and political structures as well as through strategies of citizenship, appropriation [resistance and resilience]” (ibidem).

Despite the controversies and the potential constraints of doing part of fieldwork across organisations and public health, and regardless of my occasional regret of not being able to “minimise my identity as a researcher” (Okely, 1983: 41), I now realise that confronting the intricacies of the bureaucracy of public health and the dynamics implicit in the access to local organisations was part of the research, in which I myself sought – sometimes successfully – to literally circumvent obstacles of access. Notably, it is to this extent that I could deepen the understanding of how some organisations design “the terrain of the biopolitical [and how] it is they more than the state who are now organizing the production of life (who and what is valued, who will be supported and who left behind)” (Piot, 2010: 135). I aimed to call attention to how those “surplus” (Bargach, 2002) bodies of the ‘illegitimate’

children and those of their mothers actually *matter* (Butler, 1993), not only as an affair between oneself and one's family, but increasingly between the self and the State, or rather a multiplicity of institutions and organisations as key social and political actors.

Still a relatively unexplored domain – and certainly deserving further investigation – another core question brought about by this research and underpinning this work is, notably, how bodies ascribed with diverse and contested forms of socially significant lives are governed (Fassin, Memmi, 2004) and, as such, made political (Lock, Scheper-Hughes, 1987). The story of Nawal and the ways in which she made meaning of her child's death have further shed light on the dimensions of ambiguity and its manipulations, which were discussed in relation to sexuality and fertility, to the extent to which they touch on the everyday moral predicaments faced by unwed mothers and their coping arrangements, notably towards child sickness. The articulations of moralities – towards death as well as towards birth – are not simply over-determined by overarching structural – yet powerful – forces, but weave into the tactics and the strategies enacted by young women, who may – nevertheless – inscribe their ultimate outcomes in the framework of destiny and divine will. These examples addressing scarcity and loss and the ambivalences of attachment in situations of deep uncertainty also call for attention to the cleavages of the politics of care and the ways they are appropriated by young women.

The focus on the politics of care and particularly on its 'compassional' dimensions seemed relevant to the ethnography of unwed motherhood and their children in the context of Casablanca, although a similar perspective aptly describes the formulation of public policies which target the disenfranchised (Ticktin, 2011) and that are put into being in different sectors of Moroccan society, above all in the formulation of forms of health assistance and medical coverage – such as the *RAMED*⁴⁵⁹. I wished to show how the provision of state-lead measures of socio-medical assistance to populations targeted as 'at risk' or 'vulnerable' – including unwed mothers – are entangled with the programmes of various sorts of charitable bodies and organisations, whose underlying humanitarian reason(s) must be seen in an historical dimension, notably in discourses, knowledge and practices grounded

⁴⁵⁹ *Régime d'assistance médicale* [pour les économiquement démunis].

in the country's colonial history and in the postcolonial neo-liberal proliferation of a wealth of non-governmental organisations, which – as noted by Mahmood (2005) – “enveloped the entire social fabric of the Middle East, impacting everything from pedagogical techniques to conceptions of moral and bodily health to patterns of familial and extra-familial relations” (ibidem: 191).

The core theme underlining the role of these dispositifs in relation to the trajectories of the subjects of this research is that the multiplication of – sometimes overlapping – regimes of care (Ticktin, 2011) designs eligible individuals according to precise criteria to which one must comply. The moral terms – such as social, health and gender vulnerability – in which these categories are circumscribed ultimately objectify and depoliticise the conditions of precariousness in which ‘beneficiaries’ live. Although forms of vulnerability seem to become a paradigm for the ‘application’ for certain statuses and services, through the examples of some of the subjects of this research, I argue that NGO-bound categories are appropriated and drawn upon in multiple and contested ways in the sense of *tactiques* (Certeau, 1980)⁴⁶⁰. On the other hand, I have highlighted that the dynamics which produce differentiated categories of ‘targets’ may differentiate between subjects who are ‘more deserving’ (Willen, 2012) than others, by displaying the flaws of this ‘biopolitics of compassion’. Indeed, at the same time, some organisations strive to build novel imageries of their beneficiaries and of unwed mothers as educated and outspoken, self-aware citizens – which also differentiates between deserving and undeserving beneficiaries. Yet, the government of bodies (Fassin, Memmi, 2004) unravels in manifold ways, which through the language and the practices of care, compassion and protection discloses underlying contradictory assumptions on the dangers embodied by disenfranchised women: the register of protection and individual responsibility against ‘risks’ in terms of pregnancies and sexually transmitted infections, prescriptions concerning hygiene and bodily propriety weave into different measures directed at ‘unwed mothers’, which may –nevertheless – easily shift to other NGO-bound categories like that of ‘sex worker’, whereas NGO actors have generally struggled against this

⁴⁶⁰ “‘*tactique*’, un calcul qui ne peut pas compter sur un propre, ni donc sur une frontière qui distingue l’autre comme une totalité visible (...) du fait de son non-lieu, la tactique dépend du temps, vigilante à y ‘saisir au vol’ des possibilités de profit” (Certeau, 1980: 21).

sort of conflation. However, I think that implicit or tacit confluences inherent to these initiatives and ambivalent appropriations of such categories by women, are emblematic of the continuous negotiations of the boundaries of bodies and selves, which follow the pathways of subjective aspirations at the edge of relational uncertainties and material precariousness. These tenuous borders and shifting meanings speak of winding trajectories, in which – again – notions of awareness or unawareness, responsibility and ‘self-management’, as well as changing and contested desires are played out.

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