Babies, Bodies, and the Production of Personhood in North America and a Native Amazonian Society

BETH A. CONKLIN and LYNN M. MORGAN

Each society must determine how its youngest will come to achieve the status of persons, how they will be recognized and granted a place within a human community. This article examines the social processes involved in turning fetuses and infants into social beings in two societies: the United States and the Wari’1 (Pakaa Nova) Indians of Rondônia, Brazil. We are specifically concerned with how cultural models of the body are invoked in the social production of personhoods. Concepts of personhood are contingent on the social meanings given to bodies—newly forming babies’ bodies in particular—and, in turn, on how body imageries are used to create and transform social relationships.

The issue of how to define personhood is, of course, at the heart of some of today’s most vexing social debates. In the United States, controversies over abortion, the use of fetal tissue, and life support for extremely premature infants reveal the beginning-of-life period to be one of deep moral ambiguity and uncertainty for the social collective. In all societies, the complexities and contradictions in normative ideologies of personhood are heightened during the
transitional moments of gestation, birth, and infancy, when personhood is imminent but not assured. The blossoming of a new life is necessarily a time when people ponder change and continuity, integration and disintegration, and the intercession of spiritual or superhuman powers.

The coming into social being of a young person is intertwined with the coming into being of a young human body. One of the ways that people try to resolve the ambiguities surrounding the status of fetuses and newborns is to invoke models of the body that locate personhood in specific bodily features. In the United States—which has been widely viewed as the epitome of individualistic concepts of the person—much of the discourse on fetal personhood revolves around contested medical definitions of when the fetal organism develops certain capacities, such as consciousness or the ability to survive outside the womb. The Wari', in contrast, locate key features of the person in social ties, and their discourse on personhood invokes a model of the body as constituted through interpersonal exchanges of body fluids and foods. Embedded in social flows, Wari' personhood is correspondingly fluid and contingent; personhood is acquired gradually, and it may be lost or attenuated under certain conditions associated with changes in social interactions and bodily composition.

Not only do particular ethnophysiological models support particular constructions of personhood, but they also support particular arrangements of power in society. The threshold when presocial beings come to acquire social significance is a time—well known to ethicists—when sharp struggles are often waged over who gets to be a person, and how, and under what circumstances. By pointing to some of the ways in which such disputes are expressed and adjudicated in two very different societies, we can identify the fault lines along which personhood is contested. For example, who is designated to authorize personhood or to sanction fetal/infant life or death? How are their actions received? Who disputes their authority and in what terms?

Personhood is a social category that is inherently dynamic; people invoke certain ideas about how persons are constituted to legitimate their actions and position themselves in relation to others:

Formalized notions of personhood are not to be construed as descriptive of a static, preordained, social world; they are instrumentalities which people actively use in constructing and reconstructing a world which adjusts values and goals
inherited from the past to the problems and exigencies which comprise their social existence in the here and now. [Jackson and Karp 1990:28]

As part of the praxis of everyday life, notions of personhood resist being reduced to essentialist categories such as the contrast between Western “individualism” and non-Western “sociocentrism” (also called “relationality”) that has dominated much of the anthropological literature. As Melford Spiro (1993:116) notes, the sociocentric/individualistic dichotomy has been “wildly overdrawn” in cross-cultural analyses of the self. While Spiro’s critique is well-founded, we nonetheless find the terms “relationality” and “individualism” appropriate for describing the relative value ascribed, respectively, to social ties and autonomous agency. In highlighting contrasts in how personhood is represented, we are not suggesting that there are radical differences in subjective experiences of the self in these two societies. Our concern is to explore differences (and parallels) in how Wari’ and North Americans use models of persons and bodies to deal with pragmatic questions about the treatment of fetuses and newborns.

This cross-cultural comparison will help to illuminate several points. First, we join a number of other anthropologists who argue that bodies (as well as persons) are the products of cultural practice rather than asocial blank slates upon which cognition, relationships, and social priorities are subsequently inscribed (Csordas 1994b; Lock 1993a; Strathern 1992a, 1992b; Turner 1995). Second, our examples emphasize that both bodies and persons are produced in social contexts. This point is particularly difficult to make in the United States, where people learn to see the body “as the biological raw material on which culture operates” (Csordas 1994b: 8) rather than as the product of both discursive and physical practices. North Americans recognize the social on the body (through ornamentation, for example, or the discipline of exercise), but they find it hard to see the social in the body, in the construction of the material, corporeal thing itself.

We share with Terence Turner a desire to counteract the “pervasive tendency [in contemporary body scholarship] to ignore or misrecognize the social nature of the body, and the multifold ways it is constituted by relations with other bodies” (Turner 1994:28). This academic myopia reflects Western ways of thinking about human physiology, conception, gestation, and birth. Our goal in this paper is to explore what a more social view of bodies and
persons might imply. Accordingly, in the following pages we devote disproportionate attention to examples from Wari’ society, in hopes that readers will see their own culture more clearly by immersing themselves in another. The sociality of the body is at the core of Wari’ concepts of the person. To a greater extent than in the United States, Wari’ ideology acknowledges babies, bodies, and persons to be the products of social action. One of the major points of contrast between the two societies is that the sociality of the Wari’ body/person is not acquired all at once; rather, sociality is a processual quality that is constructed and reconstructed on an ongoing basis among individuals and networks of people.

It is not our intent in this article to review the complex debates over abortion and fetal personhood in the contemporary United States, but it is worth pointing out that this cross-cultural comparison highlights the culture-boundedness of U.S. discourse on personhood. In particular, the processual emphasis in Wari’ notions of how persons come into being calls attention to the North American tendency to seek fixed, structural markers of personhood. This orientation has characterized both sides of the U.S. abortion debate. Pro-life (anti-abortion) advocates equate personhood with the moment of conception, when biological life begins; pro-choice advocates look for other, equally concrete markers of personhood later in gestation or birth. The fixed, irreversible nature of such criteria makes fetal personhood an either/or, all-or-nothing proposition: once a fetus is deemed to be a minimal person, it is held to have individual rights (except for age-contingent rights) on a par with those of its mother. Consequently, most contemporary U.S. thinking about pregnant women and fetuses has been framed by an assumption of “maternal-fetal conflict” (Casper 1994; Daniels 1993).

Seeking a way out of the conceptual quagmire in which one individual’s interests are pitted against another’s, theologians, humanists, bioethicists, and others often advocate less individualistic, more sociocentric approaches to personhood. The contrast between individualism and relationality that has framed many anthropological models of personhood has found its way into North American discussions of abortion and other life-and-death decisions. Recently, some feminist philosophers have taken up the idea of relationality as a criterion for fetal personhood (see, for example, Daniels 1993; Sherwin 1992; and see Morgan 1996 for a review
of feminist treatments of relationality). Various theorists have interpreted relationality in somewhat different ways, but most link personhood to a human being's capacity to establish autonomous social relationships—that is, to engage in interactions with other people that are not mediated through the mother's body. They argue that this offers an alternative basis for a moral philosophy that gives priority to maternal interests up until the point when the fetus/newborn attains a degree of corporeal independence and, hence, becomes a person.

These alternative paradigms call attention to sociality as a component of personhood, but they remain locked into two assumptions that reflect the general devaluing of physical nurturing in North American society (Ginsburg 1989). First, they see sociality in terms of dyadic relations between individuals. Second, they assume that a fully realized social capacity depends on corporeal autonomy. Embedded in the maternal body, the fetus is seen as a sort of presocial, precultural entity. Sociality is considered to be integral to personhood but not to the body itself; relationships are "the glue for linking individuals to one another, rather than being themselves constitutive of an embodied personhood" (Morgan 1996:56; and see Strathern 1992b:125).

The Wari', in contrast, place the giving and receiving of nurturance at the center of societal definitions of personhood and models of bodily development. They perceive key social relationships to be created in and through the body itself, and they remind us that individuals are embedded in larger social networks and communities. This ethnographic comparison highlights the interplay among personhood concepts, body imagery, and the social processes through which new life is created and endowed with meaning.

PERSONS AND BODIES IN ANTHROPOLOGY

Since Durkheim and Mauss, anthropologists have been interested in the social dimensions of personhood: What is a person? Is the category of "person" a cultural universal? How are persons realized through social practice? How does the concept of the person vary historically and cross-culturally? While philosophers and psychologists have emphasized cognitive approaches to understanding personhood, anthropologists have drawn attention to cultural variation in concepts of the person and self (Battaglia 1995;
Carrithers et al. 1985; Dumont 1986; Howard 1985; Kirkpatrick and White 1985; Leenhardt 1979; Mauss 1950; Shweder and Bourne 1984). Generally, anthropologists agree that “personhood” is a social status granted—in varying degrees—to those who meet (or perform) socially sanctioned criteria for membership. All societies make determinations about who can belong and be accorded social value.

Early anthropological formulations of cross-cultural personhood suggested that Western ideologies of personhood were “peculiar . . . within the context of world cultures” (Geertz 1973), and that non-Western ideologies of personhood ranged along a continuum from extreme individualism to extreme relationality or sociocentrism. Until recently, the literature tended to highlight dominant, shared conceptions of personhood within distinct cultural milieux—Hindus do this, Melanesians think that. While there is heuristic value in drawing the cross-cultural contrasts starkly, this runs the risk of overstating differences between societies while overemphasizing consensus within a society. Cultural ideologies of personhood are rarely shared uniformly by all members of a society, and people invoke different interpretations to suit different purposes. Recently, many anthropologists have turned their attention to how personhood ideologies are contested and construed in different ways within societal boundaries (Battaglia 1995:8; Ewing 1990; Maschio 1994:18; McHugh 1989; Spiro 1993; Strathern 1992a). This messier, more dynamic approach to personhood suits our purpose here; while sketching the broad contrasts between North Americans and the Wari’, we will also highlight the social contexts in which personhood is called into question. These areas of “bodily dissent” (Lock 1993a) allow us to show how each society’s dominant models of personhood are negotiated through recourse to body metaphors and ethnophysiological models. Our intention here is to add a comparative, cross-cultural dimension to the social controversies surrounding embodiment and personhood at the beginnings of life. We do this by directing the reader’s attention to the ways that personhood is produced, contested, and reformulated using the language of the body in two different societies.

Anthropological studies of the body have illuminated the extent to which explanations and images of the body are enactments of moral and social ethos (see Lock 1993a for a recent review). Although until recently the anthropological literatures on person-
hood and body concepts were largely separate from one another, the anthropological study of personhood has increasingly begun to “hover close to the body” (Desjarlais 1992:31), even in studies of industrialized countries (Csordas 1994a, 1994b; Lock 1993b; Martin 1994; Scheper-Hughes and Lock 1987; Turner 1994). Anthropologists increasingly recognize that the analysis of personhood can be advanced by paying closer attention to questions of embodiment, ethnophysiology, body metaphors, and the multifaceted interactions between flesh and society. Contrasts within and between different views of personhood can be “read” through social theories of the body. The beginning of life—the time when new flesh must be interpreted, shaped, and transformed into socially meaningful forms—is especially revealing of how competing views of personhood are “worked through the body.” As Thomas Csordas noted, “Examining what takes place at . . . cultural boundaries is critical, given the circumstances of corporeal flux and bodily transformation” (Csordas 1994b:3).

The following analysis begins broadly, with general descriptions of North American individualism and Wari’ relationality as they are manifested in personhood ideologies and body concepts. From there we move to discuss ideas about bodies and persons in contexts of biological birth, social birth, perinatal death, and infanticide. The Wari’ examples illuminate, by way of contrast, some fundamental assumptions underlying North American models of personhood. We conclude by drawing attention to the complex and contradictory nature of North American ideas about personhood, in which the purportedly material body is constructed through social praxis.

WESTERN INDIVIDUALISM AND THE ASOCIAL BODY

Western concepts of personhood are by no means monolithic; there is neither a single model among philosophers, bioethicists, and other academics, nor a single folk model in everyday discourse (Holland and Kipnis 1994; Murray 1993; Spiro 1993). Numerous scholars have identified historical changes and intracultural variations in how Europeans and North Americans conceive of persons, babies, and fetuses (Aijmer 1992; Aries 1962; Morris 1991; Scheper-Hughes 1992). Our objective here requires a different strategy: we aim to use a detailed case study from a non-Western
society to draw out underlying assumptions that tend to remain submerged when Western systems are analyzed within Western conceptual frameworks. In order to accomplish this within the confines of a single article, we must sketch the outlines of Western perspectives in rather broad strokes. While recognizing that the following discussion neglects historical intricacies and nuances of subcultural dynamism, this broadly comparative approach allows us to highlight pervasive cultural biases in how Westerners in general, and North Americans in particular, treat personhood at the beginning of the life cycle.

Discussions of Euro-American personhood have been couched almost exclusively in terms of "individualism." Social historians, philosophers, psychologists, and anthropologists have long recognized that Western ideologies of personhood prize egocentrism, self-containment, self-reliance, and social autonomy. This individualistic emphasis is evident in key values such as privacy, personal freedom, independence, and economic self-interest. Individuals are "the social actors of consequence" (Jackson and Karp 1990: 26–27) in societies founded on the ideals of laissez-faire capitalism and rugged individualism. Persons are rewarded—at least hypothetically—for being less preoccupied with social obligations than with personal well-being ("looking out for number one"). "Bumper cars" might be an apt metaphor for the way that Western individualism has been described in such accounts: bounded units seek rapid acceleration, watch out for one another cautiously or slam each other mercilessly, attempt to protect their space, yet inevitably bump into and rebound off one another. Like bumper cars, Western persons influence each other in rough, random, and fundamentally unpredictable ways.

This individualistic orientation extends to images of what the body is and how it works. The Western body is conceived as a material entity, a biological organism that is controlled largely from within by asocial ("natural") processes. Social interactions have little place in Western notions of what creates and maintains the physical body. North Americans take it for granted that one's body is separate from other bodies and bounded by the skin; to suggest otherwise seems nonsensical. The ideal body reflects social virtues: it is disciplined, controlled, restrained, and autonomous—a kind of private property (Petchesky 1995). In the United States today, the ideal competitive body comes equipped with a flexible and
adept immune system (Martin 1994). The mind-body dualism that permeates much Western thought promotes an ideal of internal hierarchy in which the rational mind should rule the pleasure-seeking body (Bordo 1993; Turner 1984).

Recently a number of scholars have pointed out that the individualism and "bumper car" mentality of Westerners (including North Americans) have been overstated. This argument has been made most forcefully with reference to intracultural variation in experiences of the self (see Ewing 1990; Gilligan 1982; Holland and Kipnis 1994; Murray 1993; Spiro 1993). Westerners experience themselves not just as autonomous individuals, but also in relation to others; in some contexts of social life, North American conceptions of the self appear more sociocentric than egocentric.

Despite variations in the relative weight given to individualism versus sociality in self-conceptions, there is a notable consistency in North Americans' basic assumptions about how the criteria for determining personhood should be established. Personhood is assumed to be located in biology, in the capacity of the individual body to perform specific functions. Across the spectrum of competing philosophies and diverse voices speaking out around issues such as the morality of aborting a fetus or terminating life support for someone in a coma, North Americans look for biological markers to define the existence of personhood. The controversies are over what those markers should be, not whether the autonomous individual body is the right place to look for them.

Locating personhood in fetal biology is consistent with a conception of personhood as a quality that accrues quickly and is fixed at a particular point in the gestational cycle. Fetal development is considered to be a natural biological process that, once set in motion, proceeds largely of its own accord. A person can be created out of a minimal social interaction; traditionally, all that was required was for two people to have sexual intercourse once. With new reproductive technologies (such as in vitro fertilization), even body-to-body contact and the physical presence of a sexual partner disappear from the person-making scenario. When personhood is understood to be ascribed by nonsocial factors, it cannot be readily rescinded, attenuated, or truncated by social action. Western persons, once established, are not easily undone.

The Western model of autonomous, internally controlled bodies makes transfers of corporeal substances between bodies a focus of
social concern. As the gene—the substance that provides the blueprint for biological identity and individual uniqueness—increasingly is considered to be the body substance most fundamental to Western personhood, the control of genetic exchanges becomes a critical issue in which medicine and the state have a growing interest. The question of regulating genes is an extension of historical U.S. concerns with controlling other body parts and products as components of the person. At the individual level, North Americans’ sense of self and personal competency has long been tied to control over the production, consumption, and elimination of body products, especially negatively coded substances such as urine, excrement, vomit, and perspiration (Sault 1994:303). Transferring certain body products (such as breastmilk, semen, and blood for transfusions) may be necessary at times, but ideas about contamination—the risk of passing pathogens or toxins—are always prominent in thinking about body-to-body transfers (Loudon 1977). The production, handling, transfer, and elimination of body products are supposed to occur in private; this insistence on privacy both reflects and perpetuates the notion of bodily autonomy and the ideal of inviolable body boundaries. In contrast, we will see that the publicly recognized transfer of certain body products is at the core of Wari’ personhood and sociality.

RELATIONAL PERSONHOOD AND EMBODIED RELATIONS

Personhood in many non-Western societies has been described as following a more relational, or sociocentric, cultural model. Rather than being an autonomous individual, the person exists in an explicitly valued set of constitutive social relations. Writing with reference to Japan, for example, Margaret Lock comments that “individuals ... are conceptualized as residing at the center of a network of obligations, so that personhood is constructed out-of-mind, beyond body, in the space of ongoing human relationships” (Lock 1995:22). Relational personhood is contingent upon creating and maintaining ties with others in a social field.

This definition works for Japan, but cross-cultural models of relational personhood must necessarily be more complicated. For the purposes of this discussion, we would like to distinguish two forms of relational personhood. These should be understood not as discrete models but more as divergent emphases in the ways that
people think about how individuals draw aspects of their identity from their position in relation to others.

The first type (exemplified by Lock’s description of Japan) situates the individual solidly in relation to other human beings in a social universe, such that personhood is synonymous with the enactment and recreation of social (especially kin-related) roles. We call such notions “structural-relational” personhood. Anthropologists have described structural-relational systems in a number of societies, especially in Asia (see, for example, Desjarlais 1992: 52–53 on the Yolmo wa of Nepal; McHugh 1989 on the Gurungs of Nepal; and Schweder and Bourne 1984:191 on the Oriya of India).

Another form of relational personhood stresses that both social relatedness and personhood develop incrementally, so that personhood is more of an interactive process than a fixed location on a social grid. Rather than being bestowed automatically at a single point in time, personhood is acquired gradually during the life-cycle; it can exist in variant degrees, and different degrees of personhood reflect different degrees of social value. The accrual of personhood is not necessarily a one-way process; under certain conditions, personhood may be lost, attenuated, withdrawn, or denied. Processual-relational systems appear to be especially common in two major areas: Melanesia and lowland South America (Amazonia and adjacent regions). The Wari’ exemplify a processual-relational system.

Throughout the world, the human body often serves as a metaphor for personhood qualities and images of individual-society relations. Everywhere, ways of thinking about bodies reflect ways of thinking about persons, but what people think about the nature of the individual body and its relation to others varies considerably. In our reading of the literature, we were intrigued to discover how frequently the two forms of relationality that we distinguish tend to be associated with two different body images. Where relational personhood refers to relatively fixed positions in social networks, analogies to the human body tend to emphasize part/whole relations: a body organ is a “cog in the wheel” of the human body, and one person’s body is a “cog in the wheel” of the social body. Robert Desjarlais, for example, observes that the Yolmo wa of Nepal see the human body—like corporate social groups—as “a hierarchical assemblage of disparate ‘organs’ loosely bound together into a
somatic whole" (1992:53). This kind of organic imagery is present in many of the societies cited above as representing structural-relational personhood.

In processual-relational systems, contrasting corporeal imagery appears with striking frequency. Such systems often emphasize notions of "shared substance"—the idea that individuals exchange substances between their bodies, and that these corporeal substances impart qualities of identity to those who incorporate them. In many Amazonian societies, for example, social groups are conceived as "communities of substance" composed of people who share body substance (Seeger et al. 1979). The human body thus becomes not just a site where relationships are signified, but a site where relationships are constituted. As Marilyn Strathern (1992a:71) comments concerning Melanesian personhood, "It is not so much that the person moves among relationships but that relationships move the person . . . the support of relationships is what gives him or her body."

Ethnophysiological models of shared substance tend to encode ideas about the fluidity of relationships and the mutability of an individual’s position in society. Socially produced body substances or body states serve as key markers of changes in social status. People use bodily idioms to talk about and define personhood and other aspects of identity; statements about individual bodies mark perceived shifts in relationships and social standing.

With their emphasis on the social collective as the source of elements that create and support the individual, shared substance models tend to correspond to societal arrangements in which the skin-bound individual is not the primary site of moral control. Rather, morality and certain decision-making powers are invested "in relational flows that extend beyond the boundaries of the flesh" (Battaglia 1995:5), often in groups of kin or others implicated in the social production of critical shared substances.

THE BIOSOCIAL CONSTRUCTION OF WARI' PERSONS

To probe the implications of how notions of processual-relational personhood play out in social life, we focus on the Wari' Indians, who live in the rainforest of western Brazil in the state of Rondônia near the Bolivian border. The Wari’ number about 1,500 people who speak a language in the Chapakuran language family
They entered contact with Brazilian national society between 1956 and 1969, and they now live in eight villages administered by the Brazilian government Indian agency. The Wari’ are notable for their insistence on treating the social and the biological as interdependent phenomena. Whereas Westerners are accustomed to thinking of consanguineal kinship as a blood relationship, the Wari’ apply the concept of “blood relations” much more broadly. The sharing of body substance (principally blood and analogous fluids) defines the ties between the members of a marital union (between husband and wife), a nuclear family, a kin network, a territorial subgroup, an ethnic group, and between a shaman and his companion animal spirit. The Wari’ exemplify the observation that many native Amazonian societies tend to see themselves not as corporate groups, but as corporeal groups—that is, as collectivities whose members are linked by shared body substance (Seeger et al. 1979). For the Wari’, not only do corporeal components define group membership, but they also define—indeed, constitute—major social status transitions. From infancy through childhood, puberty, adulthood, and old age, organic (body) transformations are considered to be integral to major changes associated with growth, maturation, and the enhancement of individuals’ socially beneficial physical and spiritual powers. Social identities are physiologically constituted.

Conversely, the Wari’ see the human body itself as a social creation that is constructed and maintained through exchanges of substance between individual bodies. The conceptual framework for this biosocial vision is an ethnophysiological model of human bodies as porous and permeable, open to penetration by the body fluids of other individuals. Blood is the primary mediator between “fisiológica and socialgica,” to borrow a phrase from Seeger et al. (1979). The Wari’ believe that blood and its analogs—breastmilk, semen, vaginal secretions, and sweat—can be transferred between people and between humans and animals through the skin, sexual intercourse, and by oral and nasal ingestion. Blood conveys qualities of identity so that interpersonal exchanges of body fluids create shared substance and, hence, shared social identity. Wari’ conceive of interpersonal attachments as shared physical substances that link individual body-selves in an organic unity that transcends the boundaries of discrete physical forms.
This vision of interconnected human bodies is at the core of Wari' concepts of personhood. What makes a being wari, a social person, is embodiment in a body that shares substance with other Wari' bodies. The Wari' envision their society as a network of bodies composed of blood and flesh that are distinct from the blood and flesh of outsiders. Traditionally, ethnicity is equated with personhood: being Wari' means being a person and—in the closed social universe of precontact life—not being Wari' meant being a nonperson, wijam (outsider, enemy). Unconnected to the Wari' corporeal network, the wijam was subhuman, a nonperson who could be killed without moral compunction or social sanctions.

The boundary between Wari' and wijam, between persons and nonpersons, traditionally has been defined by blood. So closely is personhood linked to corporeality that, as discussed below, a non-Wari' woman who undergoes a blood transformation can "become Wari'." Conversely, the destruction of shared substance (especially blood) is associated with (and can contribute to) the diminishment and attenuation of one's status as a person. Wari' social relations, bodies, and personhood change in concert with one another.

THE SOCIAL CONSTRUCTION OF THE WARI' BODY

Wari' bodies are not simply a material substrate upon which meaning is encoded. Rather, the Wari' consider flesh, blood, bones, and certain biological functions to be fundamentally social products that are made and remade through exchanges with others in a social world. Even at the earliest margins of life, there is no concept of a "natural," asocial body that exists apart from human relationships. Wari' believe that a fetus is created from the union of maternal blood (which forms fetal blood) and paternal semen (which forms the fetal body). Like many other native Amazonian peoples, they believe that conception occurs when a quantity of semen accumulates after multiple acts of sexual intercourse close together in time. Wari' women ridiculed Conklin's suggestion that one might get pregnant after a single sexual encounter: "How can you be so stupid?" they laughed. "Don't people know how to make babies in your country?"

The belief that babies come only from repeated sexual encounters means that a pregnancy cannot be regarded as a simple slip-up,
an unintended "mistake." Casual encounters do not produce babies. Rather, pregnancy is evidence of a sustained relationship between a man and a woman. Echoing Strathern’s observation concerning the Gawa of Melanesia, for the Wari’ “each individual person is an icon of a relationship” (1992a:61). The fetal body is the physical representation of its genitors’ union. Composed of maternal blood and paternal body substance, the Wari’ fetus encapsulates the relationships between its mother and father and, by extension, between their respective kin groups. The human body instantiates the social interactions that engender and maintain it.

In Western biomedical models of conception, once one sperm meets with one egg, the fetal body begins to develop through more or less automatic biological processes. The Wari’, in contrast, see the making of the fetus as a process that requires the ongoing participation of people other than the mother. Flesh and bones—the solid parts of the fetal body—are literally created out of semen and nourished by it. A Wari’ woman speaks of her children as kwerekun taxi, “flesh of my husband,” and she speaks of her husband as kwerekekem homajü, “flesh of my children” (Vilaça 1992:209). The idea that semen builds fetal bodies means that couples should have sex often during pregnancy; failure to do so is believed to endanger the fetus. Citing concrete examples, Wari’ assert that if a pregnant woman’s husband dies and she remains celibate, her baby will be born scrawny and sickly.

The nurturing properties ascribed to semen make gestation a joint project of cross-gender cooperation. The growth of the fetus is mediated not just by its relationship to its mother, but by a more complex social network that, at a minimum, includes at least one man. Wari’ babies can have multiple fathers; any man who has sex with a pregnant woman contributes semen to form the fetus’s body and has a claim to biological paternity. Whether a pregnant woman has one sexual partner or several, the point is that an infant’s coming into being is not something that happens in an isolated mother/fetus dyad. Rather, gestation is a social process that involves multiple contributions of nurturance from at least two individuals (mother and father) linked to two different kin networks. Coming into Wari’ personhood is not a process of overlaying sociality onto an asocial body. The body itself is a social creation.
DEVELOPING WARI’ PERSONS

Wari’ locate relationality during gestation simultaneously in the pregnant mother and in the fetus itself. From the earliest stages of gestation, they view fetuses as endowed with consciousness and the capacity to recognize their kin. This is expressed in their views of fetal formation: the first part of the fetus to form is believed to be the head and eyes—the locus of the recognition of social others. In the mother’s womb, the infant is said to already know its parents and love them. When women attend a difficult birth, they use this idea to hasten the delivery. The fetus, they say, knows its father and wants to be with him. To encourage the baby to come out, women call: “Hurry up, let’s go! Your father has gone to the field—go with him, help him to carry food.”

The social construction of the Wari’ body does not end at birth. At life-cycle transitions, growth and sociophysical maturation depend on inputs of body substance from other people. Rather than being bestowed automatically at a single point in time, Wari’ personhood is acquired gradually and incrementally as an individual interacts with other people and incorporates their body fluids. In contrast to atomistic, either/or models of Western personhood, the Wari’ recognize gradations of personhood that reflect different degrees of social value related to the extent of one’s social ties. This is conceptualized in the idiom of corporeal connections.

In early life a Wari’ infant’s blood is considered to be merged with its mother’s blood, and they essentially share a single social identity. This is expressed linguistically in the practice of female tekonomy whereby a woman’s own personal name changes to the name of her youngest child. (The mother of a girl named Jap, for example, is called Kam Jap: literally, “with Jap.”) Mother and infant are treated as a unit; for about six weeks after birth they remain secluded together inside their house. A major objective of this seclusion is to build the baby’s blood as it nurses at its mother’s breast. In this liminal period, the sense that newborns are still in the process of coming into social being is conveyed by naming practices. Wari’ babies traditionally do not receive a personal name until they are about six weeks old. Until then, in the Rio Lage-Rio Ribeirão area, babies of both sexes are called arawet, which translates literally as “still being made.” In the Rio
Dois Irmãos area, newborns are *waji*, connoting immaturity. (Green, unripe fruit is *oro-waji*.) An infant receives a personal name—and the mother’s name changes to that of her baby—at about the time when they begin to emerge from seclusion and interact with the wider community.

For the Wari’ mother and infant, breastfeeding is an extension of the blood transfers that characterized their relation in the womb. For the Wari’ father, providing food for mother and child after birth is an extension of his prenatal role of contributing semen to build the fetal body. The Wari’ have a central concern with ensuring that men fulfill paternal obligations, and they place great emphasis on the father’s responsibility to feed the mother (especially with blood-building meats) so that she produces strong breastmilk to nourish their baby. On the day of a birth, eagle-eyed community gossips watch to see whether a new father performs the two actions that traditionally establish social paternity: he is supposed to kill a certain bird to feed the mother and make a sling for her to carry the baby.

The idiom of shared substance expresses a heightened recognition of the interdependence of individuals as social actors (Crocker 1977). In Wari’ society, people invoke shared substance bonds to position themselves to cope with changing circumstances. The idea that children can have more than two parents, for example, can be manipulated to broaden kinship networks and foster social commitments where otherwise none would exist. In the village of Santo André, a case in point was a crippled old man named Maxun Kwarain who lived in the household of Wem Xao, a middle-aged man whose own (social) father and mother were deceased. Wem Xao called Maxun Kwarain “father” and supported him because, he explained, Maxun Kwarain had sex with Wem Xao’s mother while she was pregnant with him. The cultural theory of conception thus was turned into a kind of “old age insurance” that legitimized filial support for an otherwise childless widower. In tribal societies where an individual’s well-being depends on exchanges organized through kinship ties, shared substance ideologies can be construed to enhance individual security by multiplying potential sources of social support.
MENSTRUATION AND MALE MATURATION AS SOCIAL PROJECTS

A Wari’ child’s growth, maturation, and attainment of full personhood are simultaneously a process of developing independent social relations and developing his or her own unique body composition. The members of a nuclear family household develop intimate links of shared consanguineal substance by sleeping together, touching, and consuming the same foods. As children mature and venture into relations outside the family circle, they gradually develop their own blood and body substance. This trajectory of progressively more independent sociophysical development culminates in puberty, when adolescents attain fully adult bodies and full personhood status.

The Wari’ do not consider menarche, menstruation, or male maturation to be events produced solely within an autonomous individual body. Rather, they believe them to be produced through interactions with other people. Pre-pubertal individuals of both sexes are called by the androgynous term pijē, “child.” Adolescents attain full personhood (associated with having a body capable of fulfilling adult responsibilities) when they move into the gender-differentiated statuses of xojam (fecund, childless woman) and napiri (warrior/adult man). For both boys and girls, this status transition traditionally was conceived as a blood transformation that began when an adolescent absorbed another individual’s body fluid through the genitals.

For girls, sexual intercourse is the transformative biosocial event. Male semen is believed to have vitalizing properties that transform female blood. When a girl first has sex, the infusion of semen stimulates her blood and makes it increase in quantity so that she grows fatter, taller, and stronger—able to do women’s work. Not only is female productivity enhanced, so is female reproductivity: semen catalyzes the production of menstrual blood, the stuff of which fetuses are made.

The Wari assert that virgins do not menstruate. Throughout a woman’s reproductive life, in fact, menstrual periods are said to follow sexual intercourse. Only sexually active women menstruate; celibate widows and divorcées (theoretically) do not. Individual women privately admit that their bodies do not always conform to this logic, but they dismiss vaginal bleeding that comes after times
of celibacy by saying that it is not real menstruation. Virgins and celibate women are said to have “only a little blood” that “flows for no reason” (ao’ ximao). This set of beliefs thus constructs female fecundity as a social project. Menstrual blood (which creates fetal blood) is the product not of a woman’s autonomous body, but of a connection between her body and the body of a man.

For males, the parallel biosocial transformation that created fully adult bodies traditionally was constructed through rituals that followed the killing of a non-Wari’ enemy (wijam). (When warfare ceased in the 1960s, these rituals were abandoned and the transition to manhood became less clear-cut.) The Wari’ believe that when an enemy is killed, the enemy’s spirit-blood enters the bodies of everyone who witnessed the killing. The blood enters the killer’s body through his genitals, melds with his semen, and transforms the warrior’s blood in a manner parallel to the way that semen stimulates girls’ blood and growth. In adolescent boys, the infusion of enemy blood is said to catalyze an increase in blood that makes them grow taller, fatter, and stronger. In seasoned warriors, a new infusion of enemy blood enhances strength, vitality, courage, and resistance to disease—capacities essential to fulfilling male responsibilities for hunting and defense.

Attaining this enhancement of male bodies was a communal project predicated on cross-gender cooperation. The vitalizing enemy blood remained in the warrior’s body only as long as he observed a strict ritual seclusion, which typically lasted a month or so. Men and boys reclined together in a giant hammock and drank huge quantities of sweet maize chicha, a beverage symbolically associated with blood and female production. Their mothers, sisters, and wives spent long hours each day grinding copious quantities of maize to make the warriors’ drink. As chicha nourished their new blood, the men’s bellies swelled up in a process that some male elders liken to pregnancy. This much-admired and much-desired abdominal swelling was considered proof that the enemy really had been slain: the bodily evidence legitimated the man’s status as napiri (adult, warrior). Thus manly bodies, the napiri status, and the maintenance of male prowess were produced through collective action.

Healthy, productive adult Wari’ bodies are not only created but also maintained by active engagement in social life. A woman who disengages from sexual relations loses her fecundity; traditionally,
a man who did not participate in warfare was believed to have weak blood that made him vulnerable to illness. In both sexes, lethargy and laziness (which imply disengagement from food production and reciprocity) are believed to weaken the blood and cause illness.

**MAKING AND UN-MAKING WARI' PERSONS**

Turner notes that current (Western) theories of the body tend to treat “bodies, bodily functions, and power as products or projections of cultural discourses or symbols rather than as pragmatic individual and social activities of production and appropriation” (1994:45). Wari’ theories of the body, in contrast, posit body states to be much more than just metaphors. Individual and collective energies focus on the pragmatic production of highly valued embodied transformations that are prerequisites to valued social positions. In the absence of a bodily transformation there is no social transformation. For example, a man whose belly did not swell during the warriors’ reclusion was considered a fraud and could not claim the title of napiri, enemy-killer. The corporeal condition constitutes the social status.

The emphasis that Wari’ place on socially created body substances as determinants of social standing is most apparent on the margins of moral life where personhood is contested and social identities are redefined as individuals move between the statuses of nonperson and person. The acceptance or rejection of an individual as a person is effectuated—not just symbolized—by acting on the body to connect or sever its ties to others. We see this in two ways for becoming a Wari’ person: by transformations of blood, and by social birth.

**BECOMING WARI’ BY BLOOD**

Wari’ ethnicity/personhood is somewhat mutable, at least for women. A non-Wari’ woman can “become Wari” (wari’ pin) if she bears a Wari’ child (who is fathered by a Wari’ man and born in Wari’ territory). This is possible because, as mentioned earlier, the blood of a pregnant woman merges completely with the blood of the fetus in her womb, and the mother’s blood takes on the qualities of the child’s blood. Thus women told Conklin that she herself could become Wari’ if she married a Wari’ man and gave birth to his offspring in the village. Her blood, they said, would
become Wari’ blood, making her “truly Wari’” (ini’ wari’), “one of us.” Regardless of how well or poorly a woman speaks the Wari’ language or conforms to cultural norms, it is her blood that defines her ethnicity and, hence, her status as person or nonperson.

This process works both ways: in 1986, two Wari’ women were impregnated by Brazilian rubber-tappers and gave birth at a maternity ward in town. The mothers returned to their own village and raised their children in exemplary Wari’ fashion. However, villagers—especially their own family members—commented repeatedly and pointedly that the two mothers were no longer truly Wari’: they had lost their Wari’ blood and had become wijam, outsiders. People used statements about the women’s bodies to express criticism in a form that was both indirect (nonconfrontational) and, being rooted in ethnobiological models, essentially inarguable. The image of the women’s bodies as disconnected from the Wari’ corporeal network carried moral overtones of disapproval of their rupture from familial control.

This model of becoming and “un-becoming” a Wari’ person through childbirth applies only to the uncommon case of women who bear children conceived in interethnic sexual liaisons. The usual way that one attains personhood in Wari’ society is through social birth.

**BECOMING WARI’ BY BIRTH**

The process of becoming a person, of “coming into social being” (Poole 1981), is in many societies a slow transformation effected through a series of social rituals (Aijmer 1992). Whereas in the United States the birth canal is literally an infant’s doorway to personhood, elsewhere birth may be a “sub-social process” (Comaroff 1982), unmarked and uncelebrated. Postpartum “social birth” rituals then mark the more important transitions to personhood (Morgan 1989). Social birth thus may be distinguished from biological birth. Where biological birth is the physical expulsion of the infant from a woman’s body, social birth is the explicit acceptance of the infant by a social group. Until recently in the United States, biological birth has been synonymous with social birth and the beginnings of full social and legal personhood. The fetus became a person when a physiological event (expulsion from the womb) was imbibed with social meaning. This conflation of biological and social birth shaped the differential treatment of fetuses and infants,
a distinction codified in language and practice by the use of two separate terms (see Aries 1962; Kovit 1978). Fetuses were recognized as pre-persons or potential persons that lacked legal or juridical status. By virtue of being born alive and with bodies intact, they were transformed into active agents, into babies possessed of personhood like any other underage child. Today, some North Americans locate personhood prior to biological birth, at some stage in fetal development. Whatever marker of personhood they use, they tend to define it more as a biological than a social feature. A baby abandoned at birth—in a floating reed basket or on the doorstep of a church—is considered to be fully a person in spite of its complete lack of social ties. In the United States, it is an autonomous bodily development that marks personhood, rather than any explicit social interaction.

The Wari', in contrast, make a distinction between biological and social birth that has important consequences for the treatment of fetuses and newborns. They recognize the fetus as a potential person and call it pijé', the term used for all children until adolescence. Although they consider fetuses to be sentient, socially produced, and endowed with relational capacities, this does not automatically confer personhood on either the fetus or the newborn. Social birth is enacted by a series of socializing actions. The newborn is bathed with warm water (a symbol of social transformation); traditionally, newborns also were smeared with red annatto (Bixa orellana) body paint, a marker of Wari' personhood. The definitive enactment of social birth occurs when the mother breastfeeds the infant. With this first exchange of nurturance outside the womb, the newborn is recognized as a person, a member of its kin group and of Wari' society.

MORAL CONSIDERATIONS IN PERINATAL DEATHS

Cross-culturally, symbolic markers of social birth play a central role in shaping responses to perinatal deaths. In the United States, the conflation of biological and social birth means that miscarriage and abortion occur before fetal personhood has been acknowledged. Whatever grief and trauma family members experience, these emotions are to be expressed privately or not at all. The deaths of pre-persons occur in social silence, and their bodies become socially invisible. Aborted and miscarried fetuses com-
monly are incinerated along with other hospital waste, and funer-
ary rites are withheld (Layne 1992). Stillbirths and infant deaths,
however, are to a greater extent public tragedies, worthy of reli-
gious rites and newspaper headlines (Frey 1995). Biological birth
makes the North American fetus into an infant, transformed from
pre-person to person, with corresponding changes in gradations of
socially appropriate grieving.

Wari’ parents also experience grief over perinatal deaths, but
pre-persons—that is, miscarried fetuses and stillborn infants—are
buried without ceremony and without the ritual wailing and public
mourning observances that accompany other deaths. The corpses
of stillbirths and miscarried fetuses are buried under the family
house platform, the same place where placentae and blood spilled
in childbirth also are buried. In contrast, newborns who live long
enough to be nursed (the criterion for social birth) receive funer-
als, are mourned publicly, and are buried in the community ceme-
tery.

Cultural attitudes toward the killing of infants reflect distinctions
between social and biological birth. The term infanticide is rarely
used to apply to the murder of U.S. infants, perhaps because it
implies a normative practice associated with “uncivilized” peoples.
From an anthropological perspective, the term is ethnocentric
because it ignores any distinction that a society might make be-
tween social and biological birth. Among many non-Western peo-
pies, the killing of infants in the liminal period between biological
and social birth has been permitted without reprisal under certain
conditions (Morgan 1989; Sargent 1982). The Wari’, for example,
condoned infanticide in one situation: when a young, unmarried
girl became pregnant and the fetus’s biological father(s) refused
to marry her or could not do so because of extensive incest prohi-
bitions. Prior to the contact (before missionaries and government
agents intervened), the fate of babies conceived out of wedlock was
treated as a matter for deliberation by the mother’s close kin. The
conception theory that locates male contributions to baby-making
in building the fetal/infant body makes social paternity a relation-
ship that is constructed by actions performed on an ongoing basis;
a man has no claim to social fatherhood for a child he does not
feed. Maternity, in contrast, is based on inalienable blood ties. The
ethnophysiological model thus legitimized the maternal kin’s con-
trol over infanticide decisions.
Prior to the contact, if a young unwed mother's close senior kin agreed that the baby should not live, the killing was done by a close male relative, usually the mother's elder brother or maternal uncle (MB). Cross-culturally, socially condoned infanticide typically involves killing the infant and disposing of its corpse with actions and symbols that mark its status as nonperson or subhuman. Wari' infanticide victims traditionally were not buried respectfully under the house but were disposed of elsewhere and treated rudely with the hostile gestures otherwise reserved for enemies killed in warfare. The primacy of blood in constituting consanguinity was evident in how the maternal kin who did the killing treated the dead infant: they severed their kinship to the newborn by draining the blood from its corpse. Scrubbed white with sand and water, the bloodless flesh that remained could be regarded as non-kin, non-person (wijam).

A controversy that erupted several decades ago (before the contact) illustrates the critical significance of social birth as a marker of Wari' personhood that determines the morality of a killing. Wem Tao, an unmarried girl about 12 years old, was involved in an affair with a male cousin. By Wari' definitions, their relationship was incestuous and marriage was out of the question. When Wem Tao became pregnant, her family was outraged, and her senior relatives debated whether the baby should be allowed to live.

The decision was by no means clear-cut. For generations, the vast majority of Wari' babies have been wanted and automatically accepted as valued social beings and persons. However, the Wari' strongly believe that children need two parents; lacking paternal kin of their own, individuals born out of wedlock have impoverished social networks and are at a distinct disadvantage. Their mothers have difficulty finding a husband, and mother and child are a burden to the maternal relatives who must feed and support them.

Wem Tao's mother's elder brother, Aram, argued forcefully that her baby should be put to death. Other relatives were less certain; Wem Tao herself was given little say in the matter. Aram went away on a hunting trip and Wem Tao gave birth while he was gone. Her family decided to let the baby live. The women bathed the newborn, smeared her with red body paint, and placed her in Wem Tao's arms to nurse.
Several days later, Aram returned. Enraged at finding the baby alive, he grabbed the infant from her mother's arms and smashed her head against a log. Now the family's outrage focused on Aram. He was severely criticized, not just by the immediate relatives whose decision he contravened, but also by others in the community. This was not socially acceptable infanticide; this was murder.

Had the killing been done immediately after the baby's biological birth, it would have been deemed entirely appropriate. However, the belated killing was morally reprehensible because, in the words of one of Wem Tao's female relatives, "the baby had already sucked at its mother's breast." Social birth, established by the giving and receiving of nurturance outside the womb, had made the newborn into a social person.

This incident highlights several points about how the Wari' construe personhood. First, it reveals its social contingency: individuals do not automatically become persons simply by being born but must be incorporated into a social network. Second, it shows how Wari' use exchanges (and ruptures) of body substance (breast-milk, blood, semen, and food) not just to represent relationships but to construct and sever relationships. Third, it demonstrates how a particular ethnophysiological model empowers a particular group of people to control decisions about life, death, and personhood.

COMPLEXITIES AND TENSIONS IN CULTURAL MODELS OF PERSONHOOD

Each society's view of the person contains within it persistent tensions. Life experiences present both Wari' and North Americans with situations of "problematic personhood" that cannot necessarily be resolved satisfactorily within the parameters of a single dominant ideology. In each society, people have access to a repertoire of ideas that offer ways to think and talk about personhood. As Jackson and Karp (1990:26–27) observe, "[w]orldviews which stress the ontological priority of the collectivity do not preclude the countervailing experience of biographical uniqueness." Although social integration is of central significance among the Wari', this does not eliminate individuality. In the United States, individuality is salient in personhood ideologies, but people also voice ideas that emphasize the significance of social relation-
ships. Both North Americans and Wari' recognize qualities of individual autonomy and social interdependence. Where they differ is in the emphasis they place on these and how they invoke them in social praxis.

**WARI' INDIVIDUALISM**

Wari' experience their bodies in relation to others, but they also experience their individual subjectivity and separation. The individuating element of the Wari' personhood is the spirit (*jami-,* the immaterial essence that animates human life. When a spirit separates from its body (which happens in dreams and serious illness), it acts as an autonomous entity unrestrained by communal ties. Disembodied spirits tend to get into trouble: they get lost or wander into the asocial domain of the forest, where they may be captured by a sorcerer.

Wari' acknowledge the separateness of individuals in the idea that the interior self is unknowable to others. They seldom speculate on the motives behind someone's actions, but simply invoke the uniqueness of each individual. Paradoxically, the socially constructed body that links Wari' to one another is also a source of individuation. This is expressed in the idea that each person's body has a unique composition that reflects his or her particular social history. Individual behaviors and eccentricities are explained with reference to the body: *Je' kwerekem/-kun,* "That's the way her/his body is." However heavily elaborated are notions of the social body, Wari' still recognize that people act and experience relationships from a subjective perspective. The whole, healthy Wari' personhood is composed of both spirit and body, individuation and relatedness, autonomy and interdependence.

Wari' images of the fetus simultaneously recognize its relational embeddedness (located in the socially constructed fetal body) and its autonomy (located in the fetal spirit/consciousness). The tension between relational and individualistic qualities makes infanticide an issue of great ambivalence. While people did not publicly challenge the maternal kin group's traditional right to decide whether out-of-wedlock infants would be accepted, denying life to a newborn still seems to have been felt to be repugnant, for it collided with the strong value that Wari' place on childbearing. Moral ambivalence was intensified by the fact that the Wari' (in contrast to North Americans) make no linguistic distinction be-
tween fetus and child and do not define the fetus as deficient in essential social traits such as consciousness and relational capacities. To some extent, Wari’ seem to have recognized the arbitrariness of the criteria by which their society defined personhood, and infanticide appears to have generated conflicting emotions.

Prior to the contact, the dominant Wari’ ideology upheld the appropriateness of killing out-of-wedlock newborns and the maternal kin group’s right to do so. The “right” to life and personhood was assigned not on the basis of being an individual but according to the existence of social commitments to provide nurturance. The absence of paternal support was the only legitimate grounds for denying personhood to an infant. Conversely, breastfeeding—the extension of maternal nurturance—made the newborn into a fledgling person.

The Wari’ are not passive consumers of their society’s dominant ideology. People use it when it suits their purposes; when it does not, they invoke competing ideas that emphasize the fetus or newborn’s individuality and incipient personhood. There is evidence that many precontact infanticide decisions were contested among family members and sometimes actively opposed by the unwed mother herself. Every case of precontact infanticide that Conklin learned about came to light because a woman used the interview with the anthropologist to voice her resentment (which could not be expressed directly to her own kin) about the killing of her baby that she, as a young, dependent girl, had been powerless to prevent. These women spoke of their lost infants in terms that emphasized their equivalence to other kinds of persons; they called them “waji” or “arawet,” spoke of their gender, compared that birth to subsequent births of their other children.

In the decades since the contact, the Wari’ have almost abandoned the practice of infanticide and a number of families now support unwed mothers and fatherless children. In recent decades, there have been only a few cases of attempted infanticide, all involving young, unmarried girls. In one incident that occurred while Conklin was in the field, the girl gave birth while her family was away; their absence may have indicated covert acquiescence. A female neighbor intervened and tried to save the infant. The woman explained her action as an uncomplicated recognition of the infant’s humanity and need for nurturance: “I heard the baby [arawet] crying,” she said simply.
RELATIONALITY IN THE UNITED STATES

Just as Wari’ concepts of the person recognize elements of individualism, elements of relationalism can be found in North American views. “Official” discourses (especially those promoted by state and biomedical institutions) seek to locate the personhood of the fetus or newborn in specific biological attributes, but there is a tension between linking personhood (and the individual rights that go with it) to biological criteria and the realities of continuing physical dependency—the fetus’s embeddedness in its mother’s body and the newborn’s dependence on others for care. This contradiction between the ideal of autonomy and the reality of interdependence is one of the issues that makes debates over fetal personhood and abortion so contentious and intractable.

Tensions in the United States between individualism and relationality are invariably steeped in arguments over the appropriate reach of state power. The state often claims the authority to act as the final arbiter, the voice of decent society, in debates over personhood. Anna Tsing writes, for example, with respect to infanticide in America, “Criminalization gains its importance within a cultural setting in which the unsupervised death of a newborn is a public tragedy that cannot be resolved without a renewal of the state’s civilizing authority. Unless blame is fixed and punishment meted, society might be held to blame for not protecting life” (1990:289). The many public debates over personhood in the United States—euthanasia, assisted suicide, organ transplantation, fetal tissue research, abortion—can be viewed as sites of struggle over the form and extent of state control. State actions can have the effect of creating categories of persons and of favoring some kinds of persons over others (heterosexual, for example, over homosexual), thus supporting particular arrangements of power and stratification.

State claims to authority are often disputed by families who argue that life-and-death decisions should be left to them, or at least not overridden by state or hospital mandates. These struggles manifest the dynamic and political quality of personhood concepts; the criteria used to determine the existence (or cessation) of personhood are constantly being negotiated and readjusted (to paraphrase Jackson and Karp 1990:28) as ideas from the past are adapted to fit present circumstances. There is a tension between
the state and hospitals—which would ideally like to use uniform biological criteria to formulate treatment options—and families who are concerned with the unique circumstances affecting the person whose life hangs in the balance. An emphasis on individual rights tends to favor biological criteria, which are presumably more objective than family desires. There is, however, room enough for relationalism in North American ideologies that many people assert that ideally life-or-death decisions should be made only with input from the affected personhood and family. The importance of relationality is expressed and even respected in the U.S. context; the state’s authority to control the defining characteristics of full personhood remains partial at best.

Just as the locus of authority is open to dispute, so is the “all or nothing” character of North American personhood. Many Americans who confront difficult decisions concerning the early margins of life recognize that personhood may not be an either/or quality. There may be gradations of personhood related to social factors. Such gradations come into play, for example, in decisions about whether to terminate a pregnancy if genetic abnormalities are detected by prenatal testing (Rapp 1988), whether to prolong the life of preterm infants with slim prospects for survival (Frey 1995), or in the case of a brain-dead woman whose pregnant body was kept on a respirator until the fetus reached viability (Hartouni 1991). Family members facing such situations are often concerned about the individual’s ability to interact relationally, to form and act on emotional attachments and social interactions. Social considerations may move to the center of rationalizing a difficult decision to let a loved one (or would-be loved one) die.

A similar disjuncture between individualistic and relational representations is evident in attitudes concerning the social nature of bodies and body products. North American family life is constructed out of the giving and receiving of physical nurturance just as much as it is among the Wari’, but physical caregiving is accorded relatively little social value. In U.S. public discourse people tend to ignore the messy physicality out of which the human body is created: the contact between raw flesh, the exchanges of body substances that construct bodies, persons, and, ultimately, societies. They also prefer to ignore the even messier physicality out of which an infant is fashioned into a fully socialized being over the course of a number of years. Everyone involved in hands-on child
Care is well aware of how much it revolves around body-to-body contact and the production, elimination, and control of body products—breastmilk, urine, feces, spit-up, drool, blood, and tears. Yet the physicality of caregiving is treated largely as a private matter. Its less corporeal dimensions (such as child psychology, learning, values, discipline), in contrast, can be comfortably discussed in public. The reluctance to acknowledge what familial caregiving actually involves is perhaps most evident in the U.S. workplace, where maternity leave and family leave became federal law only in 1993.

The competing values associated with “nature” (biology) versus nurturance in North American society are evident in recent court cases in which men have asserted custody rights to children they sired whose unwed mothers gave them up for adoption. The biological father may never have seen his offspring or provided any form of child support; his claim to paternal rights rests on a single transfer of DNA. The legal rights of adoptive parents vary from state to state; their moral claim to the child is based on a social relationship constructed through days and nights of physical caregiving. That there should be a legal question about which of these radically different kinds of parental relationships has priority reveals much about North American values. The Wari’, of course, would have no problem answering this question.

CONCLUSION

Our comparison has shown how the social construction of personhood “hovers close to the body” in two societies (Desjarlais 1992:31). While it has been common for anthropologists to acknowledge that ideologies of personhood are “embodied” in many non-Western societies, we have argued that personhood is equally evident in North American ethnophysiology. Since early in this century, scholars have recognized that social values influence concepts of personhood in the West, but the recent explosion of academic interest in body theory is evidence of the extent to which Western personhood and critical aspects of self-identity increasingly are located in the body. The body has become, as Turner (1994:28) argues, “the fundamental matrix, the material infrastructure, so to speak, of the [Western] production of personhood and social identity.” Our comparison shows that both societies must
Weigh whether and when to emphasize social ties or individual autonomy, the porousness or rigidity of body boundaries, family autonomy or collective interdependence, and the freedom from or intercession of kin, state, and biomedical authorities. In both societies, gatekeeping at the portals of personhood is tied up with cultural representations of the body and with issues of power.

The Wari’ case serves as a commentary on how North Americans construe bodies, persons, and sociality. It highlights, by way of contrast, North American insistence on representing the body as a purely material, not social, entity. North Americans strenuously deny that their notions of personhood are culturally authored; it is nature, not culture, they say, that sets things up by endowing the precultural material body with the features that make it a person. Personhood can therefore be thought of as an extension of the “natural facts” rather than an amorphous or politicized concept continually recreated through social practice (Hartouni 1991). The “natural facts,” in turn, carry enormous weight when the state invokes them to justify particular social policies (such as mandatory child support payments for so-called deadbeat dads). The North American case shows how the negotiation of personhood is inextricably bound up with the power and authority of medicine and the state.

The Wari’ exemplify a contrasting notion of personhood as something that develops through explicitly valued and publicly recognized social exchanges. Sociality, body, and person are intimately interwoven and conceptually inextricable from one another. The Wari’ brand of processual-relationalism is associated with an ethnophysiological model of the body as mutable, permeable, and socially embedded, while North American models of personhood (regardless of how much weight they give to individualism or relationalism) are associated with an ethnophysiology of relatively autonomous asocial bodies. Power issues and inequities are part of the fabric of the Wari’ system as well, as evidenced by debates over infanticide that accord disproportionate power over decision-making to the mother’s maternal kin.

Wari’ babies’ bodies are fashioned out of social exchanges of corporeal substances and their personhood is constituted by deliberate acts of nurturance. North American babies’ bodies, in contrast, are perceived to grow automatically (“naturally”) after fertilization and personhood is conferred upon a physically
autonomous infant body regardless of the existence of a family or community network committed to supporting the child. Each set of values yields a series of moral trade-offs. In precontact Wari' society, infants who lacked the guarantee of a father's nurturance often were killed, but children who lived were wanted, valued, and cared for. The United States system militates forcefully against infanticide, but it produces many children whose lives are lacking in the nurturance that has been every Wari' child's social birthright.

BETH A. CONKLIN is Assistant Professor of Anthropology at Vanderbilt University, Nashville, TN.
LYNN M. MORGAN is Associate Professor of Anthropology, Department of Sociology and Anthropology, Mount Holyoke College, South Hadley, MA.

NOTES

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1. Wari'is pronounced "wah-REE," ending in a glottal stop. All Wari' words are accented on the final syllable.

2. We share with Harris 1989 a concern to differentiate among the concepts of "individual," "self," and "personhood" that are so often used almost interchangeably in anthropological analysis. We follow Harris in distinguishing "individual as a member of the human kind, self as locus of experience, and personhood as agent-in-society" (1989:599).


5. The term wari'is the first-person ("we"—inclusive) pronoun; wari'means "one of us, a person." Wari' contrasts with karawa, nonpersons: animals, things, and non-Wari' human beings (see Vilaça 1992). Prior to the contact in the 1950s and 1960s, Wari' society was extremely closed; there was no trade or peaceful relations with any other humans. While
Wari’ recognized other Indians and Brazilians to be human beings, they did not consider them to be persons, and all outsiders were considered real or potential enemies (wijam).

6. The word for body, kwere-, expresses this idea that the essence of being Wari’ is rooted in the physical body. Kwere- means “body,” but it also means “custom,” “tradition,” “habit,” “personality.” A typical Wari’ response to the question, “Why do you do that?” is, je’ kwere’xi’: Thus is our custom,” or, literally, “Thus are our bodies.”

7. An individual who is born in Wari’ territory and has at least one Wari’ parent is considered to be Wari’; but see Vilaça 1995 for another perspective.

8. Social birth can precede biological birth in the United States in part because of the availability of reproductive imaging technologies such as ultrasound, which enable parents and medical personnel to “view” the fetus before birth (Rothman 1986).

9. Personal names in this account are pseudonyms.

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