

# Introduction

## *Fetal Development as Global Development*

### FEED THE FUTURE

Between 1969 and 1977, a team of scientists fed supplemental nutrition to thousands of women and children in four Guatemalan communities. In two of the communities, the scientists set up feeding stations containing a drink of vitamins and sugar they called *fresco*. In the other two communities, the stations contained a thick protein powder prepared with sugar and dry skim milk they called *atole*. For nearly a decade, scientists offered people in the four communities unlimited amounts of either the fresco or the atole drink twice daily and recorded the amounts that pregnant women and children consumed. They also measured the bodies of the babies involved in the study and, as they grew, conducted IQ tests on them as well. The randomized decision about which communities drank protein and which drank fresco would allow the scientists to assess the outcomes of consuming the high protein drink—what would soon become known worldwide as “better nutrition.”

Several generations later, the study is frequently held up as a gold standard for scientific research. The scientists had been meticulous in their records, and many of the babies born into the study are still monitored as adults today. Scientists have collected and analyzed new data on education, income, and height to show that the protein babies eventually grew taller, did better in school, and earned more money relative to their fresco-village peers. Anthropometric measures were the only biological data collected in the initial phase of the

study, but scientists have since collected biomarkers from blood and other tissues to make claims about the importance of better nutrition in early life on long-term cardiovascular health and, more recently, executive functioning and mental fitness.

At a Feed the Future summit of international leaders in 2010, US secretary of state Hillary Clinton launched a global movement focusing on “better nutrition” in early life. She did not cite the Guatemala study, but many scientists have pointed to it as foundational to her agenda. One of the study’s most conclusive and enduring findings was that human development has a “critical window.” If babies were introduced to the high-protein diet after they were about two years of age, it made little difference for later outcomes. It was the early developmental period during the window of pregnancy and breastfeeding that mattered. Clinton called this “the first 1,000 days of life,” explaining the idea of the critical window to her audience at the United Nations as follows:

When I talk about nutrition, people are often surprised to learn that undernutrition is a major problem for which we have basic, affordable solutions, such as vitamin and mineral supplements, fortified foods, and nutrition education. . . . We also know enough about the science of nutrition to know these interventions have the biggest impact when they occur during the first 1,000 days of a child’s existence. That begins with pregnancy and continues through a child’s second birthday. Interventions after that second birthday make a difference but often cannot undo the damage that was done because of the undernutrition during the first 1,000 days. So we can be very targeted with our investments to save and improve the greatest number of lives.

But while we have life-saving solutions, they remain out of reach for hundreds of millions of people worldwide. And it also is a problem that even when we have such solutions, when it comes to delivering them—particularly to rural communities—the last mile is the longest. (Clinton 2010)

In the years after the Feed the Future summit, the “first 1,000 days of life” agenda would become an organizing force in the field of maternal nutrition. “We must intervene early. If we don’t act we’ll lose the opportunity,” a policy maker told me at a nutrition conference in 2015. He then underscored the urgency of the time frame: “It really is an emergency.” Companies and institutions addressing humanitarian relief, economic development, food and agriculture, and global health would all be connected through the push for better nutrition in the first thousand days. Charities such as Save the Children and CARE and many of USAID’s international programs would focus their aid on this critical window. The women and babies who once drank protein or sugar water and the Guatemalan researchers who fed and studied them would come to shape political



FIGURE 3. Women wait at a nutrient supplement distribution site in San Juan Ostuncalco. Photo by author, 2017.

agendas worldwide as policy makers declared the “early life” period as key to global development.

### ONE THOUSAND WINDOWS INTO AMERICAN VIOLENCE

This book is an ethnography of the agenda to improve nutrition in the window of the first thousand days of life in Guatemala. I trace the emergence of the agenda through a historical analysis of the four-village study. In response to how the first thousand days agenda has specifically targeted rural communities—what Clinton referred to as “that last, long mile of development aid”—I also examine how the agenda was deployed in the Maya-Mam communities surrounding San Juan Ostuncalco, located roughly an hour from Guatemala’s second-largest city, Xela.

The dozens of small, rural communities that surround the city of San Juan are a prime spot for development projects. Since I began traveling there in 2008, urban health care workers and nongovernmental organization (NGO) employees have run a variety of maternal nutrition interventions throughout the region. The communities are routinely characterized as a site of “extreme poverty” (Angeles et al. 2014). Their proximity to Xela also makes them convenient for development organizations, since their doctors, engineers, and project managers can live with the comforts of city life while undertaking rural aid work. As a result, the region is a place that is, in the words of the Indigenous studies scholar Eve Tuck (2009, 412), “saturated in the fantasies of outsiders.” Signs covered in development project acronyms are scattered throughout the communities. CERPOCAL gave away goats; CGAP provided financial empowerment service for the poor; CIPCA trained youth in agriculture techniques; DFAP provided food assistance; Save the Children and PCI offered maternal health services; PHAST provided hygiene education; PIRR gave trainings to help reduce risk; and so on. People in San Juan don’t know what many of the acronyms stand for (neither do I), but the broader meaning is clear: the region is underdeveloped and needs outside help.

Social theorists have vociferously critiqued the harm caused by development projects that seek to bring progress and modernity to the so-called Global South. The historian David Carey (2009, 290) writes that twentieth-century economic stimulation plans in Guatemala dispossessed small-scale farmers, most of whom were Maya, by transferring their land to large-scale foreign and domestic landowners. This dispossession, carried out in the name of development, has reinforced one of the world’s most unjust systems of landownership, with 2.5 percent of farmers holding 65 percent of the country’s arable land (Carey 2009, 290). As the anthropologist Arturo Escobar (1995) has long noted, development was but another name for imperialism—a trap that disguises the poison as the cure. Escobar’s general argument is that the West’s push to bring progress and development to Latin America became, in practice, a way of maintaining “power and domination” (xvi).

A core argument of this book is that the twenty-first-century focus on fetal development at the heart of the first thousand days agenda serves to heighten and extend this power and domination, adding a clear dimension of gender violence to the violence that Escobar highlights in the broader colonial projects of modernity. That biological growth and economic growth are both termed “development” is not merely a case of semantic slippage. Both aspirations of development—one biological, one financial—impose a violent teleology of competitive and individualized growth and advancement on community relations, opening the door to “untold exploitation and oppression” (Escobar 1995, 4). My book shows how today’s efforts to improve fetal development harm the communities targeted by these interventions, transforming the maternal body into a site of imagined potential, future economic prosperity, while leaving actual women—and their families—further isolated, undernourished, and dispossessed. The premise of the first thousand days agenda is that women who have spent a lifetime gardening, farming, and cooking are ignorant about how to eat. The agenda recasts the hunger people feel as private companies buy up communal lands and toxic agrochemicals blanket their landscapes as a deficiency in their bodies and intellects. It supplants care for communal-based systems of nourishment with scientific concern for women’s anatomy and children’s biological growth. The political and social problems communities face are diagnosed as a problem of maternal malnutrition, legitimizing control over what women feed themselves and others, when and whether they engage in motherhood, and how—and indeed if—they move and live.

*Mal* in Spanish (as in its Latin root) has a double meaning: (1) incorrect or wrong and (2) evil, cruel, or causing harm. Typically, when people speak of maternal malnutrition they are thinking about the first sense of *mal*: malnutrition is a condition where a woman has not had the proper diet, and, as a result, her nutrition is inadequate or incorrect. I write the term with the hyphen to slow down this association and thereby open up the possibility that the second root of *mal* is at play. *Mal-nutrition*—the title of this book—suggests that the problem that rural Guatemalan women face has less to do with an inadequacy in their bodies than with the frequently harmful orientation of the field of nutrition. Much as Vandana Shiva (1988) has used the term “mal-development” to describe how the field of development destroys and dispossesses as it portends to save, mal-nutrition describes the practice of making people hungry in the name of health.

Academics who have studied “first 1,000 days of life” interventions globally have drawn attention to how frequently these programs harm women (Manderson 2016; Flood et al. 2018; Pentecost and Ross 2019; Woo Kinshella, Moore, and Elango 2020). In her research in Guatemala, the anthropologist Alejandra Colom (2015) illustrates how the agenda’s emphasis on prenatal care required girls, some of whom had become pregnant following rape, to carry pregnancies that might be dangerous or unwanted. She illustrates how the Guatemalan government deployed

the language of maternal health to legitimize the surveillance and control of the bodies of girls and women.

*Mal-nutrition* illustrates how the window of the first thousand days gains its violence efficacy by linking women's reproductive biology to the social activities of eating and food production, using quotidian mealtime practices as another means of exerting control over pregnancy, childbirth, breastfeeding—and women and their communities more broadly. The nutrition supplements that accompanied the agenda in San Juan Ostuncalco saddled women with the responsibility for “the future” while also undermining their extensive knowledge about how to reproduce food and kin. Legitimate concerns that women had about bodily and land sovereignty and safe passage across political borders all became redefined as problems of access to or education about nutrients in “early life.”

When Hillary Clinton helped popularize “the first 1,000 days of life” in reference to a maternal nutrition intervention, it may have seemed that it was merely a snappy way to discuss the early phases of fetal development. Still, it has never been lost on me that what has become a catchphrase for maternal health programs places the start of life at conception, a threat to the reproductive autonomy of the very women it claims to defend. When I have asked global health policy makers what they think about the fact that the first thousand days of life campaign has an antiabortion message embedded in it, they have mostly shrugged this off as irrelevant. “We’re just referring to the period of early development,” one policy maker told me at an international conference on the topic. He added, “In fact, we really want to be able to target the ‘pre-pregnant woman,’ since the decisions that women make before they are pregnant also matter for their children’s long-term health.”

This was the genius of the slogan. “The first 1,000 days of life” starts life at conception, appealing to conservative antiabortion groups, such as the Catholic organizations that would eventually become involved with intervention monitoring and evaluation in San Juan Ostuncalco, Guatemala. It also directs attention away from the systemic violence that is reproduced in structures of law and policy. The slogan undermines women’s bodily autonomy twofold. It smuggles restrictive antiabortion politics into a maternal health campaign. It also implies that the primary way to keep children from harm is for women to eat and behave properly, undercutting women’s expertise in the domains of family and food.

Policy makers in and beyond Guatemala spoke about how a critical window of biological development in the first 1,000 days shapes the rest of the life course with effects on national and global prosperity. I instead came to see the window of one thousand days as a window into paradigmatic techniques of American violence, in which cruelty is interwoven into care, communal relations are anatomized and individualized, and control of mealtimes and mothering serves as a means of controlling the broader reproduction of privilege and power.

English speakers commonly refer to the US as “America” while designating Guatemala as part of *Latin America*. In contrast, my use of the category America



encompasses both Guatemala and the United States. To be clear, Guatemala and the United States have different national and cultural identities, but the category America helps me name a shared imperial-colonial experience as well as the complex entanglements of national boundaries I encountered in my research. For example, there were the Guatemalan origins of the science driving Hillary Clinton's US-based Feed the Future summit and other American nutrient initiatives that blended US and Guatemalan research. There was also the basic organizational structure of USAID-Guatemala, which was dependent on US funding structures and responsive to US political pressures but also run predominantly by Guatemalans who brought their critical insights to bear on how USAID's agenda was carried out. Contravening an image of a clear, delineated border, it was not always clear where one country started and the other stopped, and the category America allows me to point to these interdependencies.

Many of the people I spoke with also held complex and fluid American identities. Several of the scientists I interviewed in Guatemala had some affiliation with the US by virtue of citizenship or academic training, but they also held multiple and diverse claims to national belonging. Dr. Noel Solomons—a longtime mentor and a key informant for this book—was born and raised in Boston, but he also spent decades running an independent nutrition research center headquartered in Guatemala City. He, in turn, described the key scientists running the four-village study as “polynational”: a Peruvian Jew who was a German exile, two US citizens (one of whom moved permanently to Guatemala and became a Guatemalan national), a Swiss physician, and a Honduran anthropologist.

National identity was also nuanced in communities surrounding San Juan, where nearly everyone has family who lives on the north side of the Mexico-US border—some with US passports or green cards, some without. Many people in Maya-Mam communities do not fully identify with the Guatemalan state, with its Spanish-speaking political headquarters located in the distant capital (Nichols 2022). While territorial boundaries are often rigid and violent, they can also be murky. For much of the twentieth century, many Guatemalans did not have to travel to be on US-operated soil because the land they lived on was owned and managed by the powerful United Fruit Company, with close ties to high-ranking US government officials. The US flag iconography throughout the Guatemalan countryside was a potent reminder of the entanglements of US and Guatemalan history and the legitimate claim that Guatemalans make to US belonging.

I classify the violence that accompanies maternal nutrition policies targeting the window of the first thousand days of life as *American* violence to point to a structuring force of violent motherhood in the Americas that supersedes the specific national boundaries of either Guatemala or the US. There is a risk that people will hear the US recentered, minimizing the central role Guatemalans have played in the field of international nutrition. Yet Guatemalans also lay claim to the geographic title of America, and it is my hope that explicitly including

Guatemala within the category of America will unsettle the US-centered story that people in the US commonly tell about their histories and themselves.

#### SUPPLEMENTING MAL-NUTRITION

In 2012, the recently elected Guatemalan president, Otto Pérez Molina, and his vice president, Roxana Baldetti, announced their *Pacto Hambre Cero*, or Zero Hunger Pact (FAO 2012). The pact had become the cornerstone of their social programs, and their signature program for eliminating hunger was a maternal health intervention titled “*La Ventana de los Mil Días*,” or “The Window of 1,000 Days.”

The ten-step intervention targeted the early stages of biological development, from pregnancy through breastfeeding, when cell differentiation and growth is especially prolific and the human body is undergoing rapid physiological development. This is also a period where the nascent human being is fed directly by the maternal body—first in utero and then in breast milk. The World Health Organization (WHO) recommends that infants breastfeed exclusively until they are six months, but that breastfeeding should continue for up to two years, at least. As the WHO cautions, “Breastfed children perform better on intelligence tests, are less likely to be overweight or obese and less prone to diabetes later in life” (WHO 2023). These first thousand days marked an altricial, extended fetal period where the mother and child are expected to be united through eating and feeding. Targeting the mother was a way of intervening upon the child, as was targeting the child a way of intervening upon the mother.

The steps of Pérez Molina’s Window of 1,000 Days agenda were as follows: (1) promote and support breastfeeding, (2) improve complementary feeding (after six months), (3) improve hygiene practices with a focus on handwashing, (4) distribute vitamin A supplementation, (5) encourage the therapeutic use of zinc to combat diarrhea, (6) distribute powdered micronutrients, (7) vaccinate and deworm children, (8) provide pregnant women with iron and folic acid to prevent or treat anemia, (9) iodize salt, and (10) fortify basic foods with micronutrients. In its focus on the food and nutrients the mother-child dyad consumed, the intervention would reduce hunger, stabilize the country, and make Guatemala—and the world—a better place.

Pérez Molina launched his health agenda in a small town outside of Todos Santos, Huehuetenango, symbolically chosen because of its location in the Guatemalan municipality reported to have Guatemala’s highest incidence of chronic malnutrition. In an impassioned speech, Pérez Molina cited the rate of hunger among the town’s schoolchildren as 95 percent and promised his majority-Indigenous onlookers, “We will not allow this to continue to rise. We will do our best to ensure that your rates drop, and that they drop drastically.” He promoted his visit as the first time that a Guatemalan president had ever visited this Mam-speaking municipality, but Pérez Molina was no stranger to Guatemala’s



Indigenous countryside. As a major under General Efraín Ríos Montt, Pérez Molina directed counterinsurgency efforts in the Ixil triangle in 1982–83, serving in a command position at the site where Guatemala’s genocide was its most vicious, during its deadliest years.<sup>1</sup>

When Pérez Molina was running for president, the Indigenous-led organization Waqib Kej presented a letter to the United Nations Special Rapporteur on Torture reporting that a documentary made in 1982 features Pérez Molina walking casually near four battered corpses. In the film a subordinate explains that these men had been prisoners who wouldn’t talk when handed over to the major—“not when we asked nicely and not when we were mean” (Andrés 2019). Reputable human rights organizations have accused Pérez Molina of being directly engaged in torture and at the helm of genocide. Though he denied this, he played up the thirty years he spent in the military during his presidential campaign, running on the slogan, “¡Mano dura, cabeza y corazón!” (Iron fist, head, and heart!) (Wirtz and Andrade 2011). Now that he had been elected president, he was promising his constituents that he would improve life for Guatemalans by connecting an iron fist to an iron supplement.

Over the coming years, as Pérez Molina and Baldetti were promoting the end of childhood hunger as central to the mission of the presidency, they were also dismantling government-funded health programs. One of Pérez Molina’s first presidential acts was to transfer maternal health care in the rural western highlands to USAID, giving the agency for international development the mandate to carry out his “zero hunger pact.”

As USAID was setting up its interventions, Pérez Molina and Baldetti met with officials from the World Food Programme in the highland city of Totonicapán, a city close to San Juan Ostuncalco. The gathering presented an opportunity to publicize their Window of 1,000 Days agenda for a larger audience. The national census, which had just been released, showed that seven of every ten children in the municipality were dangerously small, and health experts pointed to nutrient deficiencies acquired in utero and infancy as the cause.

Speaking to a crowd of women wearing traditional Maya clothing, Baldetti distributed packages of powdered nutrient supplements called “Mi Comidita”—My Little Food—for babies between six and twenty-four months. She repeated the powder’s motto to the crowd: “With love one grows better.” A footnote to the theatrics was that the funds for this particular nutrient powder came from a \$2 million dollar grant from the Canadian government, which was also at the time involved in expanding its controversial hydroelectric dams and nickel mines in Guatemala. Indigenous Guatemalans widely held the dams to be a source of “dirty energy,” and social movements had arisen throughout the country to protest how Guatemalans were being forced to drink polluted water so that transnational corporations could acquire obscene profits (Granovsky-Larsen 2018; Nolin and Russell 2021). None of this was supposed to be evident that day, however. Instead, the

giveaway was intended to showcase the Guatemalan government's commitment to combating malnutrition and the international community's support.

Not long after the supplement giveaway event, both Pérez Molina and Baldetti were imprisoned in a massive embezzlement scandal, caught stealing large sums of governmental money for their personal gain. They had claimed to care, using "early life nutrition" as evidence they were making things better, but their acts of social improvement would be shown to be a sham. Pérez Molina and Baldetti had explicitly campaigned on a platform that emphasized improving nutrition in early life. Their arrest called their broader agenda into question. For many people in San Juan, the Window of 1,000 Days agenda did not imply betterment but duplicity.

On the eve of Pérez Molina's arrest, the cultural critic Francisco Goldman (2015) wrote, "Otto Pérez Molina is an embodiment of the role the Army has played in Guatemala in the past half-century. . . . Pérez Molina represented a perfect union of Guatemala's past terrors and its current model of power." Goldman is thinking about how Pérez Molina merged the explicit violence of "murder, disappearances, torture, clandestine prisons and graves" with the political violence of corruption and the erosion of democracy. But we can also think about how Pérez Molina mobilized military imagery in his promise to fight hunger, legitimating the spread of the military state into domestic spaces of kitchens and homes. As recently as 2024, a United Nations webpage about Guatemala described Pérez Molina's cabinet as prioritizing security, economic empowerment, and poverty eradication through antihunger efforts (UN Women). The very same president linked to Indigenous massacre in the 1980s had mobilized nutrition as a show of force.

In 2015, when hundreds of thousands of civic protesters joined in collective objection against Pérez Molina, they were responding, in part, to the Janus-faced problem of mal-nutrition. On one face, nutrition functions as a farcical technology: political leaders had co-opted and hijacked the language of good nutrition to extract resources from the state. The shiny, desirable veneer of "maternal nutrition" allows a politician with a history of destabilizing Guatemala to consolidate military and political power to engage in more of the same. Despite his calls for better nutrition, it had become clear that Pérez Molina's goal was to steal large sums of money from Guatemalans and their government. The problem, in other words, is that nutrition was absent when politicians promised it was there.

On the other face, nutrition was not only a mirage, but a powerful force. The supplements, the vitamins and minerals, the fortifications and powdered micro-nutrients all strengthened the very processed and profit-based food system that further exploited farmworkers while dispossessing them from their land. The Window of 1,000 Days agenda transformed the problem of hunger into a problem of inadequate nutrient composition in the maternal body, to be solved by scientists and overcome by more development. It cemented a vision of health that pushed supplements as a solution to hunger and poverty. Locating the source of

hunger in women's reproductive biology harmed women while also undermining their considerable skills in political revolution, labor mobilizations, and collective organizing. As my book shows, the agenda claimed to be helping people who were hungry and poor, but structurally speaking, the more successful it was—the stronger the field of maternal nutrition became—the more it would end up reproducing violence.

## A BIOLOGY OF VIOLENCE

In the Maya-Mam language there is no word for “violence,” but everyone in San Juan knows and uses the Spanish word *violencia*. “We did not have violence in our history the way we do now,” María García Maldonado, a Maya-Mam lawyer, told me. Though warfare had existed in the past, García Maldonado's point was that the patriarchy and misogyny that made news reports of femicide a daily occurrence in the Guatemalan countryside were—like the word *violence* itself—a legacy of conquest. This was a view widely held by other Maya-Mam and K'iche' people in the region with whom I spoke, who pointed to how they continue to live with the pain of colonialism that their ancestors had suffered.

Scientists working in Guatemala offered a biological explanation for the idea that the harms of conquest endure into the present. They frequently cited the archeological record as evidence that long term physical and emotional violence had become embodied in the human skeleton, pointing out that Maya people were generally taller in the 1550s than they are today. An article in the *Annals of Human Biology* points to a decline in adult mean stature in Latin America between conquest until 1939 (Bogin and Keep 1999). Its title, “Eight Thousand Years of Economic and Political History in Latin America Revealed by Anthropometry,” sums up the idea that suffering expresses itself in stature.

An influential paper presented at the Pan American Health Organization in 1968 by the Guatemalan pediatrician Moisés Béhar (1968) points to the land dispossession that crushed Maya food and cultivation practices following conquest as a primary cause of present-day nutritional deficiencies contributing to shortness in height. Precolonial people, he writes, “were in general strong and healthy” (9). He cites the sixteenth-century colonial priest, Diego de Landa, who had reported back to Spain that Maya babies “grew wonderfully handsome and fat during the first two years” and stayed “bonny and mischievous” throughout their active childhood (8). In contrast, writes Béhar, “we cannot say the same about the majority of preschool children of Mayan descent today; they are usually apathetic and frequently very sick” (10).

Béhar was the second director of the Institute of Nutrition of Central America and Panama (INCAP), taking over from the US-born food scientist and physician Nevin Scrimshaw, who was appointed INCAP's founding director by the United Nations in 1949. Béhar was its director from 1961 to 1974, the period in

which the four-village maternal nutrition study of atole and fresco was launched. Born to Turkish Jewish immigrants in Huehuetenango, Béhar spent his childhood in the high-altitude mountains of San Marcos and Quetzaltenango before attending medical school in Guatemala City, then specializing in pediatrics and hepatology at the University of Paris, and finally completing a master's degree in public health at Harvard. In 1974, the WHO would recruit him to direct their nutrition programs in Geneva, which he did for several years. It was written in his obituary that spending his childhood in Guatemala's pristine western highlands gave him a love of the natural world that would stay with him throughout his life.

Béhar was prescient in linking malnutrition to the acute violence of Spanish colonialism. In his 1968 paper he writes:

Food intake at the present time is barely adequate for adults and frequently inadequate for children. As a result, the environmental stresses, particularly the heavy burden of frequent infections in early childhood, have caused poor nutritional conditions for the general population, with frequent and severe cases of nutritional deficiencies found particularly in early childhood. . . . The socio-cultural and economic changes that have taken place after the conquest have deteriorated the diet of the present Indians and resulted in serious nutritional problems, among which protein deficiency, particularly in small children, is the most important. (1968, 13–18)

The phrase “structural violence” is typically credited to the sociologist Johan Galtung (1969), who sought to give a name to the psychological harm produced by poverty and social repression that leads to an experience of suffering. Galtung developed the phrase in contrast to the “direct violence” of war or military action, but he also described these two forms of violence as highly interdependent in producing selective and unequal premature death and/or disability. At the turn of the twenty-first century, the anthropologist and physician Paul Farmer (2004) would popularize the term “structural violence” in anthropology to describe “the social machinery of oppression” (see also Farmer 1996). He wrote that structural violence “constricts the agency of its victims. It tightens a physical noose around their necks, and this garroting determines the way in which resources—food, medicine, even affection—are allocated and experienced” (2004, 315). As a specialist in tuberculosis and AIDS, Farmer was interested in illustrating how racist and exploitative systems impair human biological function. He wrote:

How does structural violence take its toll? Sometimes with bombs or even airplanes turned into bombs or with bullets. However spectacular, terrorism and retaliatory bombardments are but minor players in terms of the body count. Structural violence, at the root of much terrorism and bombardment, is much more likely to wither bodies slowly, very often through infectious diseases. . . . Racism and related sentiments—disregard, even hatred, for the poor—underlie the current lack of resolve to address these and other problems squarely. (2004, 315, 317)

Though Béhar did not use the phrase “structural violence” himself, his writings showcased how violence of all kinds becomes embedded—and embodied—in human biology with deadly effects. This concern for embodiment was important—even radical—because of its potential to upend common racist ideas that Maya people inherently had inferior blood and that an influx of “European blood” would save the nation from Indigenous vices and deficiencies (Angel Asturias 1923; see also Casaús Arzú 1998). Instead Béhar argued that Maya physiological impairment was a consequence of colonial violence, including “environmental stresses” such as infection and disease.

In theory, this marked a departure from the widespread idea that the biology of Maya people was *inherently* defective. And yet Béhar’s overarching thesis that malnutrition caused physiological impairment left in place the troubling idea that Maya bodies were inadequate and inferior. The cause was different (bad environment vs. bad blood), but the resultant message was the same: there was something wrong with Maya bodies and Maya people. For example, Béhar linked physiological impairment to mental aptitude, moving quickly from deficiency in the food supply to deficiency in intelligence. He wrote that most Maya children and adults suffered from subclinical and unrecognized forms of malnutrition that likely had the consequence of “interfering significantly with mental development in children and with work performance in adults” (1968, 14). Characterizing “practically all the Indian populations” as being “associated with low educational and economic levels and poor sanitary conditions,” Béhar then offered an assimilationist solution based on proper integration into the ecological and cultural conditions of Western civilization (16).

It might seem that a focus on how inequality becomes embodied will provide a platform for fighting against—and transforming—this inequality. This is precisely why many epidemiologists and anthropologists have drawn attention to the embodiment of harmful social forces such as poverty and racism. But as I show in the chapters that follow, the story about the impaired biology of hungry Maya people also undermined Indigenous sovereignty over bodies, food, and land. It became used to uphold poverty, legitimizing what Farmer (2004, 317) referred to as the “disregard, even hatred” of Indigenous people, women, and the poor.

Farmer, in his emphasis on the embodiment of inequality, advocates for scientists to pay attention to the “materiality of the social,” his point being that poverty weakens biology and makes people sick. But next to the materiality of the social, we must also consider the materiality of theory, asking how ideas about embodied poverty become self-fulfilling. Clearly hunger can have negative physiological effects. Eating matters in material ways. But so too do the stories that we tell about bodies, since they shape where we direct our attention and the subsequent possibilities for action.

One influential outcome of scientific interest in embodiment, which this book critiques in detail, is that US psychologists arrived in Guatemala to probe and

analyze Guatemalan intelligence, running several randomized nutrition trials to study cognitive and emotional development of babies (Barrett, Radke-Yarrow, and Klein 1982; Barrett and Radke-Yarrow 1985). These studies of maternal nutrition, some of which continue to the present day, focused public attention on how certain kinds of eating behaviors and mothering practices produced intellectual and physiological deficiency in early life and how this deficiency would become set, irreparably, in brain and bone. This was not science that fought to change socially conditioned racism or to overturn colonial definitions of intelligence. Instead, it was science that narrowed in on biological processes such as the “inhibition of brain growth and myelination during critical periods of neural development,” as described by a recent publication about the effects of malnutrition in Guatemalan children (Ramírez-Luzuriaga et al. 2021). This was science that helped naturalize the idea that the pregnant and breastfeeding body was a key site for the origin of social and biological pathology. It was also science that supported the development of commercially available nutrient-filled products to enhance growth (and with it, intelligence, happiness, well-roundedness etc.) in the first thousand days. Diet during pregnancy—not conquest—was held as a primary determinant of cognitive acuity. Maternal nutrition, not antiracist collective action, was treated as key to psychological well-being and social and emotional health.

The Window of 1,000 Days agenda is a direct legacy of Béhar’s observations about the embodiment of inequality. Béhar’s writing on food and nutrition during conquest had emphasized how disadvantages in infancy become fixed in human biology, the repercussions magnifying over the course of life, and, as I discuss in later chapters, also passed down to children, who inherit their mother’s disadvantaged biology in the womb. Yet if policy makers frame early life nutrition as a way to intervene in—and transform—disadvantage, nutrition also becomes a means by which disadvantage is reproduced. The biological framing of malnutrition empowers nutrient-based capitalist food economies. Locating hunger in Maya women’s bodies had the effect of limiting their bodily and reproductive autonomy. Pregnancy, breastfeeding, and motherhood—all sites of potential power and community connection—became sites of state and scientific control.

#### REPRODUCTION OR TRANSFORMATION?

The initial plan for my research, funded by a three-year fellowship from the Dutch Science Foundation that began in 2015, was to study Pérez Molina and Baldetti’s Window of 1,000 Days policy programs and interventions. By the time I arrived in Guatemala at the start of January 2016, Pérez Molina and Baldetti were behind bars. I anticipated I would need to radically reimagine my focus on the Window of 1,000 Days agenda upon the collapse of the presidency. In fact, the presidential arrest changed very little about maternal health projects in the region, where interventions focused on the first thousand days of “early life,” continued to flourish,



not transforming, as it first looked as if they might when Pérez Molina and Baldetti were arrested.

The next presidential cabinet, headed by military-backed president Jimmy Morales, who served from 2016 to 2020, developed the World Bank-funded program Grow Healthy (*Crecer Sano*) as part of its National Strategy for the Prevention of Chronic Malnutrition. Grow Healthy targeted pregnant women and children between the ages of 0 and 3, including “a course on maternal and child nutrition in the first 1000 days to improve knowledge and skills related to the prevention of chronic malnutrition” (FANTA Project 2018). Alejandro Giammattei, who succeeded Morales to the presidency in 2020, initiated the National Crusade for Nutrition (*Gobierno de la República 2020–2024 2020*), which also focused on interventions targeting the first thousand days of life. In referring to the agenda as a crusade, its advocates did not attempt to diminish the field of maternal nutrition’s ideological underpinnings, or its likeness to a religious holy war.

I came to understand that the Window of 1,000 Days intervention had the capacity to transcend individual Guatemala presidencies because of how it has emerged out of decades of partnerships between scientists, policy makers, and development professionals. Guatemala’s national government spends very little on nutrition; as USAID reports, only 2.4 percent of Guatemala’s gross domestic product is directed to health services—the lowest percentage in all of Latin America (USAID 2017). Pérez Molina used nutrition to promote his presidency, but rural nutrition programs were largely run by global institutions and NGOs, part of a wave of privatization in which public and commercial interests merged (Chary and Rohloff 2015; Beck 2017; Hall-Clifford 2024).

The Guatemalan Ministry of Health had its name on the pamphlets and posters promoting the Window of 1,000 Days agenda, but the projects were also branded with the USAID logo, which featured the US flag, as well as with the logo of Save the Children. Meanwhile, for people in San Juan, the specific ten-step Window of 1,000 Days intervention was but a continuation of similar nutrition projects that had come and gone in their communities. Small tape measures and infant growth boards float around rural communities, detritus of development workers who have left them behind. Home-run bodegas sold chocolate-, vanilla-, or strawberry-flavored nutrient supplements for children next to chips and lollipops. For decades, supplements have been a primary source of poverty relief efforts in Guatemala, with CARE, the World Food Programme, and other UN organizations involved in their distribution. A wide range of humanitarian and commercial nutrient supplements—Incaparina, Vitacereal, the US-produced corn-soy supplement blend called CSB, *Bienestarina*, *Plumpy’Nut*, *Mi Comidita*, *Herbalife*, or *Omnilife*—can be found in rural hamlets and urban centers alike.

“Guatemala is a petri dish for research on maternal malnutrition,” a scientist who worked at INCAP through the 1980s told me. This assertion that the small country has made an outsized impact on the field of nutrition was widely shared.

Diana Martínez (a pseudonym) was another Guatemalan nutrition scientist who similarly described Guatemala as an “experimental laboratory” for nutrition. To emphasize her point, she shared her experience setting up a randomized control trial for supplements with me.

In 2016, Diana had been contracted by the philanthropic wing of a US-based nutrition company to assist with trial research to test the efficacy of a peanut-based emergency food supplement similar to Plumpy’Nut designed to treat severe malnutrition in pregnant women and babies. She scoured small rural towns throughout Guatemala in search of a place where people were not already regularly consuming supplements, since this would have interfered with the trial’s findings. But everywhere she went she found supplements in use.

After considerable effort, Diana finally came across a small town where supplements didn’t seem to be in broad circulation. She began to secure contacts within the community and to initiate the process of ethics review. Industry scientists shipped her some of their products as she made preparations for the trial to start. Then, one day early into the work, she happened to enter the town’s main Catholic church. On the wall, she noticed a flier for peanut paste, and on further inspection, she learned that one of the church’s priests was involved with direct-to-consumer distribution of a nutrient supplement to women in the community. She told me of standing in the nave and raising her arms. “There are no nutrition virgins in Guatemala,” she shouted her frustration to the heavens.

Indeed, the field of nutrition has deeply shaped what and how most Guatemalans eat, with supplemental nutrition woven into the fabric of daily life. Since its founding in 1949, INCAP has produced thousands of peer-reviewed articles on nutrition, contributing tremendously to global sciences of nutritional health. The institute helped develop standardized nutrient recommendations and a comprehensive food composition table used by UN organizations worldwide and has been responsible for promoting the availability, accessibility, and acceptability of supplemental nutrition throughout the Americas and the world. Its scientists have carried out research on every known vitamin and mineral, developing short- and long-term research projects into deficiencies, imbalances, economic outcomes, human capital, childrearing practices, and so on. The institute has served as the intellectual home for numerous longitudinal nutrition studies that track pregnant women and babies through adolescence, adulthood, and the process of aging. Nutrition is a robust and widely debated field of science in the country.

And still Guatemala consistently ranks as having one of the largest crises of chronic malnutrition on earth. Today Guatemala has more asylum seekers waiting for their cases to be processed by US courts than any other country, and the rate of people leaving has grown each year (TRAC 2022). As the anthropologist Megan Carney (2015) found in her work with Guatemalans living in the US, many were unable to feed their families in Guatemala and were forced to migrate because of “unending hunger.”

The theme of how harmful structures reproduce themselves even as people and organizations ostensibly work toward change remained the most haunting and enduring as I carried out my research. Dozens of aid projects in rural Guatemala were established with the expressed goal of ending hunger in women's and children's lives. By intervening in an early phase of fetal and infant development, they claimed to be acting to transform structural violence to bring about lasting change. And yet women, especially Indigenous women, remained extraordinarily persecuted and marginalized. So much political energy claimed to be making things better, with so little transformation taking place. Instead the very actions that claimed to be improving the nation (and the world) provided a haven for corruption, defined Guatemala as a site of scientific experimentation, forced a narrow idea of motherhood on young women who may have wanted something else for their lives, and advanced US economic and neocolonial interests in the region.

Observing how harm happened in the name of care, I wondered how my work as an anthropologist could be any different. Given that deep structures shape the possibilities for action, how can we act in ways that make these structures reproduce themselves in other ways? Since systems are frequently designed to ensure their own reproduction, how can they be broken (and remade) to bring about meaningful change?

I had been taught to think about performativity as one response to these questions: seemingly small changes in representation can iterate through time, eventually producing a changed social order. This is an optimistic social theory—one that refuses to grant powerful people and institutions the omnipotence they claim to have. And yet Sara Ahmed's (2006) "nonperformativity" seemed to better describe the nutrition interventions that unfolded around me. Ahmed uses nonperformativity in the context of academic diversity committees that perform antiracism in order to shore up racist practice. She draws on Austin's theory of a speech act as having material effects to point out that some speech seems to act, but no change results: "Such speech acts do not do what they say: they do not, as it were, commit a person, organization, or state to an action. Instead, they are nonperformatives. They are speech acts that read as if they are performatives, and this 'reading' generates its own effect" (104).

When racism in the university persists, we might be inclined to see this as a *failure* of the diversity committee. Ahmed turns this around to suggest that nonperformatives "work" precisely by not bringing about the effects that they name. "In my model of the 'nonperformative,'" she writes, "the failure of the speech act to do what it says is not a failure of intent or even circumstance, but it is actually what the speech act is doing. In other words, the nonperformative does not 'fail to act' because of conditions that are external to the speech act: rather, it 'works' because it fails to bring about what it names" (2006, 105).

Sameena Mulla's ethnography of sexual assault interventions, *The Violence of Care* (2014), extends Ahmed's observations about how calling for change

can prevent change from taking place. Mulla worked with rape victims and the forensic examinations system that professed to care about them but ultimately left them underserved and undermined other forms of care they needed. She writes that the violence of the interventions she studied was “not simply corrective but foundational, as it re-founds the state’s social order, drawing the actors back into its structures and underwriting the social contract by which they abide” (227).

*Mal-Nutrition* is a study of how maternal nutrition interventions likewise become foundational to the social systems they claim to transform so that even seemingly well-meaning individuals using state-of-the-art research techniques from an established scientific discipline would end up reproducing harm. Some might see the considerable energy that has gone into maternal nutrition and the persistence of hunger in Guatemala as a paradox, which would make sense if the main goal of nutrition science was, indeed, hunger’s amelioration. In this book, I suggest the “failure” of maternal nutrition to ameliorate hunger is not a paradox or contradiction but a predictable outcome of the body- and nutrient-centered focus of the field. If we seriously consider Ahmed’s and Mulla’s illustration of how systems we live within are organized to ensure that some people suffer, we begin to see the persistence of hunger not as a *failure* of nutrition but as a system that *works* because it does not bring about change.

#### HISTORIA AS METHOD

In my research on obesity, I had developed a rebellious method. Against a commonly held medical view of obesity as a problem of bodies to be studied in clinics with doctors or nutritionists, I drew a lesson from the field of food studies to see obesity as a problem rooted in politics and history (Guthman 2011; Landecker 2011; Penniman and Washington 2018; Reese 2019). Accordingly, I began to travel to farms, spending my days walking along riverbanks to trace stories of growing and selling food. This method became this book: instead of looking at malnutrition as an inadequacy of nutrients to be treated in clinics, I turned my attention to directions I had been socialized to ignore: landscapes instead of bodies, collective politics instead of an individual’s diet.

The anthropologists Dána-Ain Davis and Crista Craven (2016) describe attention as one of our most powerful tools. It is in learning to be attentive to marginality while addressing how power differentials can structure the research process that ethnographers can “contribute to a more transformative politics,” they write (13). The work of ethnography, as I put it into practice, was the work of learning from others where and how to give my attention to overlooked places, including those full of silences and absence. The feminist philosopher Jeannette Pols (2015) describes this approach to ethnography as a “rescriptive” practice. She uses the term “rescription” to emphasize how anthropology does not neutrally *describe*

the world as it is but folds knowledge and values acquired through fieldwork together into a re-description—or rescription.

Because I approached all people I interviewed as experts, I have been tempted to use their real names in my analysis.<sup>2</sup> Instead, I have decided to use pseudonyms for all but a few scientists and journalists who are public figures or people who are my coauthors in other venues. My reason for using pseudonyms is to emphasize the interpretive character of my analysis and to differentiate myself from a journalist who is in the position of reporting facts. I have gone to great length to transcribe and translate interviews and lectures with precision, but I also see this book as a “tale of interlocking stories,” in the words of Isabelle Stengers (2017). Stengers uses this phrase to describe the importance of collecting stories whose legitimacy arises not because they are true in a universal sense of truth—that is, true from any position—but because of the explicit positions they take, which help imagine different ideas and thus live in different ways.

The anthropologist Luísa Reis Castro (2019) notes how Latin languages do not separate the practice of “storytelling” from history in the way the English language does. Reis Castro leaves the word *história* in the Portuguese language of her fieldwork both to distance her historical accounting from a universalist singular history and to remind readers of the uneasily translated concepts and experiences that shape ethnographic practice. Likewise, the Spanish-language *historia* encompasses the idea that the past is made both by the stories we tell and by the way we tell them. To write an anthropology of *historias* is to use expertise gained through research to retell familiar and historic stories in ways that will alter both past and present, changing our attention and with this, fostering transformative possibilities.

When Paul Diener, a US cultural anthropologist, studied protein deficiency in Guatemala in the 1970s he found that the people he interviewed had a question of their own for him: “Why was I in eastern Guatemala, among a people so poor, funded by an agency of the United States government and performing the research I was engaged in?” (1982, 255). A half century later, people also asked me this question. In my case, I was doing ethnographic research in Guatemala to learn from Guatemalans about how nutrition programs impacted their lives. But cognizant that I am partially connected to a community of scientists who have treated Guatemala as a petri dish for scientific experimentation, I wanted to shift my gaze away from Guatemalan bodies and minds and toward the practices and effects of communities of scientists. In fact, I decided to take seriously the question posed to me about why I was there—even to make it a topic of analysis by seeking out scientists who were engaging with anthropological methods to study and analyze their work.

Spending time with anthropologically inclined nutrition scientists in Guatemala has offered me a way of conceptualizing the possibilities and limits of my own field’s history of liberal and decolonial commitments. Anthropologists, like

nutritionists, are frequently engaged in a moral project of doing good. And yet in both fields, this project frequently becomes, as Mulla (2014, 227) warns us, “not simply corrective but foundational,” drawing its actors back into violent structures. Lee Baker (2021) analyzes the history of anthropology to ask how a field with such antiracist principles could nonetheless reproduce such racist scholarship. He is adamant that we reflect on situations where well-intentioned anthropologists—those working with seemingly sincere commitments to social justice—ended up producing harmful theories. My book analyzes the field of nutrition, but it does so in a way that places the field of anthropology in the frame. Insofar as a goal of my work is to understand how nutrition science may be done otherwise, I hope this may offer insight into how to remake anthropology otherwise, too.

### HISTORIA AS FIELD

I have carried out place-based ethnographic fieldwork off and on in Guatemala since 2000 (see chapters 4 and 5; and Yates-Doerr 2015). Visits to San Juan and conversations with women living there between 2008 and 2022 helped anchor my research on the Window of 1,000 Days. But instead of spending my time in San Juan looking inward at village life, as in traditional rural ethnography, I draw on my time in San Juan to look outward at the circulations of global capital and nutrition science. Policy makers framed San Juan as the endpoint—the “last long mile”—of development. Meanwhile, I saw it as a place where grounded alternatives to nutrition policy were originating and which, in turn, could teach me about the broader field of maternal nutrition. Rather than primarily “deep hanging out” (Rosaldo, cited by Clifford 1996) in a single community, as was the anthropological convention for much of the twentieth century, my focus in this book is the circulations of knowledge. This is an ethnography of a policy agenda and not of a place.

I found one inroad to this work by attending international nutrition science conferences, where global health experts would present on panels and I could speak with them afterward. Much of my “fieldwork” also entailed online activities following social media accounts, live webinars, and the YouTube archives of relevant maternal health nutrition organizations. In 2016, while on a break from listening to the Sixty-Ninth World Health Assembly of the World Health Organization on my computer, I bumped into an anthropology colleague at our department’s espresso machine. My colleague also studied global health experts, and we both traveled frequently, so I was excited to let him in on the pre-COVID-19-era secret that I had just been listening to Margaret Chan describe the agenda for the Sustainable Development Goals to the global health community while also scanning the #GlobalHealth hashtag for public reactions. “I’m in Switzerland, without leaving Amsterdam,” I shared. My colleague, not convinced, responded, “That stuff that they broadcast—it’s just theater. The real stuff is happening in the backrooms, behind closed doors.”





FIGURE 4. I carried out much of the book's research at nutrition science conferences such as the World Congress of Public Health Nutrition meeting in Gran Canaria, shown here, held at a critical moment in the design of the Sustainable Development Goals. Photo by author, 2014.

My colleague is right that much of the power in global health nutrition happens out of view and that one anthropological method might focus on gaining access to exclusive, elite spaces (see also Norum 2005). Indeed, this book draws on research based on professional relations with nutrition scientists and policy makers that I have worked decades to build and maintain, including observations made while sitting in boardrooms and at restaurant tables with people who hold political and scientific power such as expert consultants to the WHO or editors of major scientific journals.

But it is also the case that there is much to be learned in nutrition's surface or public representations. The anthropologist Emily Martin has illustrated how cultural stereotypes permeate the concepts of reproductive biology. She offers the analytic tactic of "waking up sleeping metaphors" as a means of intervening in what she calls "bad science"—that is, science that reproduces sexist and racist stereotypes as truth (1991, xxii). Though Martin's work is highly attuned to "raw and brutal" power, she makes clear that anthropologists do not always need to gain access into the backrooms of scientific policy to understand how this power takes hold (xxiv). We can also analyze the stories publicly told by scientists and policy

makers to understand the seemingly subtle or naturalist assumptions buried in the language. From there, we can learn to tell stories that will have less sexist and racist effects.

Accordingly, while the book is grounded in research with people, it is also based on a close reading of policy documents, scientific papers, press briefings released by global organizations, and journalistic accounts of Guatemalan hunger. Though this may constitute an unconventional sense of “the field,” analyzing across these sites of knowledge production offered me a way to track the complex circulations of the Window of 1,000 Days. Take, for example, the report used to promote Guatemala’s National Crusade for Nutrition, which states:

Poverty and extreme poverty are among Guatemala’s biggest problems. Together with food insecurity, they accentuate the intergenerational cycle of poverty and malnutrition. . . . Malnutrition and micronutrient deficiencies, including iron deficiency anemia in children under 5 years of age, have adverse consequences on cognitive development, especially if they occur in a critical period such as growth and brain differentiation, the peak of which is seen in boys and girls under two years of age. Damage during this period can be irreversible, affecting both early childhood development and national development alike. (Reliefweb 2020)

I am interested in this narrative about “Guatemala’s biggest problems” precisely because it is so widely accepted. In the chapters that follow, I trace how policy statements come to impact people’s lives, asking what happens when scientists view malnutrition as intergenerational or when health professionals frame poverty as a problem in the baby’s brain. What are the effects of treating in utero malnutrition as irreversible? How are mothers, their children, and their communities affected by policies that link fetal and national development? What does the narrative that the key to the future lies in early life development occlude? Guatemala’s nutrition crusade claimed to be improving Guatemalans lives through its work to improve the maternal diet. My question was not *whether* it worked but rather *how* did it work: Where does it direct attention? What does it mobilize? How do ideas about malnutrition stabilize as common sense, and where are the openings for challenging and transforming the field?

Each chapter in this book is composed through the warp and weft of various fieldwork historias that answer these questions. I frequently move between seemingly distant sites and points in time to tell a narrative that is more layered than linear and chronological. I often break words apart, writing, for example, about mal-nutrition, bio-logics, in/equality, or co-laboration. I do this to reassemble familiar concepts in a way that they take an altered shape. In this sense, the organization of the book reflects the method of historia. Studying maternal nutrition policy ethnographically allowed me to see connections that were not initially self-evident, and I use the space of writing to stitch these threads together in new ways. My association of writing with weaving is not incidental. Statisticians

routinely refer to Guatemalan women as illiterate. These same women are also, however, expert weavers who have been using the craft of fabric making to tell historias of their communities. Against often-overwhelming violence, they are structurers: they keep track of—and reproduce—place and time. They at once reveal and remake. I have likewise learned from them: in threading together different historias, we can shape the world anew.

An overarching lesson that emerges from the historias in the book is that the field of maternal nutrition policy should move away from its focus on the weak bodies and deficient diets of women and children to instead focus on political and economic violence often authorized by experts and the state. For one concrete lesson: people with policy-making power who care about reducing hunger should work to expand reproductive sovereignty that grants women control over if and when they have children.

Working toward reproductive sovereignty also necessitates the reimagining of what and how bodies reproduce. The Window of 1,000 Days agenda gains harmful force by turning structural problems into narrowly defined reproductive problems, targeting a woman's womb as the critical environment for the future child. Likewise, strategies for resisting the harm of the intervention come from reimagining the terrain of reproductive health to encompass care for other kinds of environments. In Guatemala, the fight against hunger must be tightly linked to the fight for land sovereignty—encompassing agrarian reforms that return political autonomy over food production to Indigenous communities—and border-crossing sovereignty that ensures safe passage across political territories. Free and safe movement across borders is especially crucial for the Guatemalan communities employed in the transnational work of agricultural production and the kin that support them. To mitigate hunger, each of these critical aspects of community-centered nourishment must be addressed.

Another lesson of the book is that strategies to effectively diminish hunger will also quickly become co-opted, made vacuous and nonperformative as a way of reducing their power. Accordingly, the book does not offer universally applicable recommendations for achieving sovereignty of bodies, borders, and food. It rather emphasizes the necessarily situational politics required to nourish people and their land. In her fieldwork with weavers in Cartago, Colombia, Tania Pérez-Bustos (2016) learned that their expertise rested on an ability to both entangle and disentangle. Likewise, the work of weaving historias does not seek a stable master narrative for how to bring about transformation but an orientation to knowledge production committed to telling and retelling historias as they unravel and re-form.

The first three chapters of the book delve into the history of the Window of 1,000 Days agenda, detailing, respectively, historias of military violence, the racist science of stunting, and Guatemala's Longitudinal Study of Human Capital. These opening chapters examine how global health experts have come to

frame malnutrition as a problem of women's biologies and the nutrients they eat. Countering the narrative that describes hunger among Guatemala's agricultural communities as an ironic tragedy, I show how this hunger has been willfully, systematically reproduced by elite politicians and the knowledge systems upon which they draw.

Chapter 4 and 5, at the midpoint of the book, examine how the Window of 1,000 Days agenda is affecting Guatemalan life today. I describe projects meant to fight gender inequality and improve maternal health. I point to how this fight frequently saddled pregnant women with domestic responsibilities while undermining the intergenerational networks of support on which mothers might otherwise draw. I also illustrate how women were working to counter commonly told narratives of "embodied inequality." Hardship made them strong and agile—not deficient and weak—and they use this strength and agility to advance forms of reproductive justice that nourish collective networks of kin and care.

The book then turns back to a "critical window of opportunity" in twentieth-century history when nutrition scientists were working to link nutrition to Indigenous knowledge of the land. It considers how the military intervened into these efforts, forcing maternal nutrition into a science of supplements. In reflecting on the successes and failures of scientists' efforts to break nutrition's histories of violence, I also consider the possibilities and limits of my role as an anthropologist who studies nutrition. I note how often both fields of anthropology and nutrition fall into the trap of individualizing responsibility. In the company of Guatemalan scientists, midwives, and mothers, I ask what it might look like to take *collective responsibility* for health, bodies, and their futures. The book returns to the theme of method in its last full chapter. This position in the book's organization reflects the lesson that methods of science and policy should not come from afar but should emerge out of community engagement. Methods may not be what we start with but what we learn in doing fieldwork. And very often, a good research process may be a sought-after end in itself.

I conclude where I began, at the grave of Claudia Gómez González, which I visited again in 2022 as the public health precautions surrounding the coronavirus pandemic began to subside. I highlight the challenges of poverty that people in San Juan, who have lived through decades of intensive nutrition intervention, continue to face. Conversations with scientists and anthropologists allow me to reflect on where the field of maternal nutrition finds itself today: still up against the harmful reproductive power of mal-nutrition but also working to break old cycles, build community support and solidarity, and bring about collective change.