

Change within the Change: Pregnancy, Liminality and Adventure Tourism in Mexico

Journal:	Tourism Geographies
Manuscript ID	RTXG-2018-0252.R4
Manuscript Type:	Research Article
Keywords:	gender, pregnancy, liminality, rhizomatic body, adventure tourism, Mexico < LATIN AMERICA, LATIN AMERICA

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Sincerely,

The Editors of *Tourism Geographies*

Change within the Change: Pregnancy, Liminality and Adventure Tourism in Mexico

Despite the growing number of pregnant women engaging in outdoor adventure activities. very few studies have explored pregnancy or the specific needs and challenges of pregnant women in tourism research. To fill this gap in the literature, we examine the participation of pregnant women in adventure tourism through the theoretical lens of liminality. Conceptualising pregnancy as a liminal stage in which women are "suspended" between two statuses, opens diverse possibilities to delve into women's experiences of embodiment, bodily image and control. In this sense, pregnancy is understood as an "internal change", which adds specific challenges to women's practice of adventure tourism, including bodily changes and different perceptions of risk-taking. Similarly, the context of adventure tourism provides an ideal space to reflect on liminal transitions and the "outside changes" that pregnant women go through in the predominantly masculinised spaces that characterise this tourism segment. Semi-structured interviews were conducted with 35 Mexican women who actively pursue adventure tourism and who had engaged in these activities during at least one pregnancy. The analysis indicates the importance of norms and social expectations experienced by pregnant women when doing adventure tourism. The concept of the "rhizomatic body" proved to be a valuable tool when looking at the social taboos, prohibitions and rules that apply to pregnant women in specific sociocultural contexts (in this case, Mexico). By reframing and reconceptualising pregnant women and their practice of adventure activities, the social construction of pregnancy is elucidated. Finally, the study contributes to the understanding of alternative models and experiences of being a woman in gendered spaces, while shedding light on relevant behavioural patterns among pregnant tourists and the sociocultural impacts of these patterns.

Keywords: gender, pregnancy, liminality, rhizomatic body, adventure tourism, Mexico, Latin America.

Introduction

Anthropologists have extensively theorised on the notion of liminality to explain the construction of meaning during critical social and life events and their associated rituals and ceremonies. A major life event that has been examined through the framework of liminality is pregnancy. Following Turner (1969) and Van Gennep (1960), during the liminal period of pregnancy, a woman is conceived as "suspended" between two statuses (e.g. a working woman and a 'mother to be'), leading to the construction of multiple selves (Ladge, Clair & Greenberg, 2012; Noble & Walker, 1997). The theoretical perspective of liminality has opened possibilities to examine women's experiences of embodiment, bodily image or control during pregnancy (Nash, 2012; Ogle, Tyner & Schofield-Tomschin, 2013); as well as to understand normative (i.e. conforming to social norms) and non-normative pregnancy experiences (Côté-Arsenault, Brody & Dombeck, 2009).

Adding to the literature on liminality and pregnancy, this paper seeks to examine the participation of pregnant women in adventure tourism, as a context in which women may craft or carefully produce a non-normative pregnancy. Tourism, and in particular, adventure tourism, serves as an ideal space to reflect on liminal transitions. It works as a place of freedom, role subversion and, as Graburn (1989) suggests, a place to experience separation from routinised lives, where it is possible to be temporarily free from secular obligations and imposed roles (Trauer & Ryan, 2005). The recent spatial turn within cultural geography, tourism and urban studies also offers creative ways of theorising the fluidity of social relations, paying particular attention to women's embodied practices (see Dallen, 2018; Hannam, Sheller & Urry, 2006; Mahon-Daly & Andrews, 2002; Soja 1989; Xu, 2018).

The liminal (and the liminoid) we explore here are not exclusively concerned with identity transformations. What intrigues us when studying the participation of pregnant women in adventure tourism is the kind of liminality that represents the transformation of social status and compliance with social norms (Van Gennep, 1960), while recreating antagonisms between settling and moving, between a pregnant body and a woman's body, a woman at risk and a child at risk. The point of such enquiry is to foreground transition, the inside change (pregnancy) within the outside change (participation in adventure tourism).

In the Mexican context, where we conducted our research, normative expectations of pregnancy sustain that risky activities should be avoided. Thus, pregnant women who participate in adventure tourism are seen as having a defiant attitude and are heavily questioned by different groups of people, including family members, friends, service providers and other tourists. The social relevance of this study lies precisely in highlighting how women struggle with the physical, psychological and sociocultural impacts of a major inside change (pregnancy), while exploring a context of external change (adventure tourism) in which women can resist some of the gendered ideologies associated with pregnancy.

The article is organised as follows. First, we present the liminal as a theoretical perspective and its application to explain pregnancy (internal change). We follow with an explanation of how liminality, pregnancy and adventure tourism (external change) interact. The research context (Mexico) and methodological choices are then explained, followed by the analysis and discussion of the findings. Finally, we present the study conclusions and recommendations for future research.

Liminality and pregnancy

The notion of liminality has been extensively theorised to make sense of change, mobility, transition, transit, in-between-ness and any state of hybridity or transformation (Borg & Söderlund, 2013; Ibarra & Obaduru, 2016; Turner, 1996, 1974, 1987; Underthun & Jordhus-Lier, 2017; Van Gennep, 1960). Turner (1969, 1974, 1987) and Van Gennep (1960) focused on the in-between spaces and transitional moments when apparent distraction and ambiguity are experienced during rites of passage and transformations. Bridges (1980 [1974]) referred to the liminal as a "neutral zone", a space of reconstruction or an empty space where a new sense of the self could gestate. A more sophisticated elaboration suggests the need to acknowledge the essentiality of the liminal and the need to consider mobile and nomadic transitions as existential conditions of the social to regenerate, even without a conscious intention (Braidotti, 1994). Social researchers have found inspiration in the concept of liminality to explain changes in everyday life and recent approaches highlight how liminality is embedded in daily practices with dual outcomes (Borg & Söderlund, 2013; Daniel & Ellis-Chadwick, 2016; Mahon-Daly & Andrews, 2002).

The theoretical perspective of liminality, in particular the contributions of Van Gennep (1960) and Turner (1969), are useful to view pregnancy as a transformational space between social structures, where women experience, navigate and enact an inbetween identity. Ladge, Claire and Greenberg (2012) describe how the individual and the social construction of pregnancy as a liminal state operate in working women. The authors emphasise the identity transition along the process and suggest that crossdomain identity transitions (i.e. those occurring when an individual's work identity must be adapted to integrate a non-work identity like motherhood), appear to differ in complexity from sequential identity transitions (e.g. the change from one job to another).

The literature on liminality and pregnancy has also examined the positive and negative effects of pregnancy on women's transformational stages (Aiken & Trussell, 2017; Hebl et al., 2007; Jackson, 2009; Kawash, 2011). Particular attention has been given to norms and expectations, as they play a substantial role in women's identity and personal change (Aiken & Trussell, 2017; Davis-Floyd, 2003; Jordan, 1993; Mercer, 2004; Sánchez Bringas, Espinosa Islas, Ezcurdia & Torres, 2004). Another relevant area of study is how pregnancy affects a woman's physical, psychological and social self (Côté-Arsenault et al., 2009). On a physical level, the changing body and the clothes women need to use epitomise the in-between status women experience during pregnancy and even after giving birth (Ogle et al., 2013). On a psychological and social level, the negotiations women undertake to move in and out of public spaces while breastfeeding can be constructed as a liminal act where different feelings, including shame, arise (Mahon-Daly & Andrews, 2002).

Cultural interpretations of liminality and pregnancy

The liminal is subject to cultural relativist interpretations. Comparative studies across societies have shown that the construction of the liminal state of pregnancy differs depending on the cultural context (Jordan, 1993). In Western cultures, pregnancy is often viewed through a medical but not a sociocultural lens (Davis-Floyd, 1992). Western medicine tends to associate pregnancy with risk and the pregnant woman has been construed as a sick patient at risk of death (Lupton, 1994). Authors who adopt a sociocultural lens criticise the medical rhetoric that promotes the objectification of both patients and their bodies (Leder, 1992); while noting that societal and institutional advice interact with gender stereotypes and may be opposed to women's preferences (Mahon-Daly and Andrews, 2002).

The dominant medical view focuses on multiple phases of assistance, care and protection, but underscores how pregnancy contributes to a multiplicity of representations for women. The literature suggests that considering a pregnant woman only as a pregnant body in need of medical care limits the multifaceted and complex social nature of the woman and her individual status during gestation (Colman & Colman 1973/1974; Clarke, Shim, Mamo, Fosket & Fishman, 2003; Mahon-Daly & Andrews, 2002). Being aware of the liminal nature of pregnancy helps us to consider the rigidity of the ritualization that is usually embedded as an indissoluble part of the pregnancy, as well as the taboos associated with the uses of the female body during pregnancy and the fantasies constructed around the risk to the foetus.

Finally, research has signposted that context and culture mediate the liminal period of pregnancy and have an impact on women's experiences. Negative impacts emerge from the non-compliance with sociocultural norms or expectations. For example, in her examination of cultural models and pregnancy in the state of Jalisco, Mexico, Jackson (2009) concluded that pregnant women who did not comply with culturally appropriate behaviour, as a consequence of others' reactions, experienced higher rates of psychological and social stress. Likewise, in the United States, Hebl et al. (2007) found that pregnant women evoked hostile or benevolent reactions depending on whether they conformed to or strayed from the traditional feminine gender roles.

Liminality, pregnancy and adventure tourism

The previous section highlighted how normative experiences emerge from the interactions of cultural interpretations and traditions of pregnancy (e.g. the Western medical tradition), and the sociocultural constructions of gender and femininity, which impose restrictions on the "pregnant body" (Lupton, 1994), including limitations to

physical activity or sports. Even though moderate physical exercise is usually recommended during pregnancy in industrialized and emerging countries, women receive mixed messages about the type, frequency, intensity and duration of physical activity (for a systematic review see Sánchez-García et al., 2016). This section expands the inquiry of liminality and pregnancy, by examining women's participation in adventure tourism as a context that opens possibilities for "non-normative" pregnancy experiences.

Pregnancy has rarely been examined in tourism studies, except within the category of health and medical tourism (e.g. Hall, 2011). However, a few scholars have shown interest on the social implications of pregnancy for female travellers (Voigt & Laing, 2010); the restrictions imposed by this liminal state (Small, 2005); and its importance in crafting role identities (Klann, 2017). The studies on gender and adventure tourism have focused more broadly on analysing the different levels of female and male participation, showing an underrepresentation of women in outdoor activities (Clinch & Filimonau, 2016; Doran, 2016; Kay & Laberge, 2004; Roggenbuck & Lucas, 1986). Among the reasons suggested are the social actors' needs to avoid risk due to the instability and inconsistencies produced during the social construction of multiple selves (Mitchell, 1983).

In our view, adventure tourism constitutes a relevant activity to explore pregnant women's experiences of liminality. The river, the mountain, the sea, the gullies or the dunes are common scenarios of adventure tourism, but are not usually associated with pregnancy. In fact, adventure tourism has reinforced the masculinisation of these spaces through the links with physical strength, the challenge to nature and the assertive management of risk, characteristics traditionally ascribed to men (Clinch & Filimonau, 2016) as opposed to women or pregnant women. Furthermore, the gender and tourism

scholarship has examined the devaluation of women's presence in adventure activities through promoting images of women's emotionality in the face of challenges (Doran, 2016; Kay & Laberge, 2004), focusing on the caregiving aspects of these activities (Pomfret & Doran, 2015), or minimising women's technical capacity (Stoddart, 2010). These images contribute to the construction and naturalisation of gender roles and to the hyper masculinisation of adventure spaces that impose restrictions to women, particularly to pregnant women.

The masculinisation of adventure spaces produces barriers that hinder women's participation and exclude them during pregnancy, but also during other stages of their life. For example, Díaz-Carrión (2012) reported the restrictions experienced by young local women interested in rafting in the state of Veracruz, Mexico; Kay and Laberge (2004) explained how motherhood has been constructed as a limitation to pursuing adventure race activities; while Doran (2016) pointed out the restraints experienced by women mountaineers during their active life.

The rhizomatic body

Scholars have drawn from the literature on liminality, pregnancy and adventure tourism to examine the conditioning of women's expressions of corporality and the perceived barriers to women's access and use of adventure spaces (Comley, 2016). A relevant example of women's resistance to these barriers is the dynamic construction of women's bodily identity depicted by Knijnik, Horton and Cruz (2010) in their work about the "rhizomatic body" of Brazilian professional women surfers, who contest the normative female body and open new interpretations for multiple representations of femininity. The authors build on Markula's (2006) reading of Foucault, highlighting how the discourses around femininity and the feminine body may be used to dominate

women. Recognising that no sport or recreation activity on its own facilitates liberating practices, Markula (2006) applies the Deleuzian "rhizomatic" model of thinking to imagine feminine bodies in a positive light beyond the binary opposition between femininity and masculinity, allowing for a more fluid and changeable conceptualisation. Similarly, Mahon-Daly and Andrews (2002) explore how women who breastfeed in public spaces are in a liminal state of time and space, and experience this "rhizomatic" or fluid body during the transition between biological and sociocultural roles.

Adventure tourism is a fruitful field of study for contesting the normative woman's body and understanding the representation of the "rhizomatic body." Kay and Laberge (2004) analysed further examples of how strong women with athletic bodies were criticised because of the normative constructions of the female soft and docile body. Similarly, Comley (2016) described how women surfers often experience conflict while receiving unwanted male attention and patronising. In this case, the "rhizomatic body" had to navigate between traditionally feminine/masculine identities in a space where their presence was marginal. Pomfret and Doran (2015) highlighted women's abandonment or change in mountaineering habits because of pregnancy. In order to craft a different identity, some women climbers had to differentiate themselves from traditional femininity to be recognised by their commitment rather than their gender, just like the "rhizomatic" Brazilian surfers. Alternatively, in Chisholm's (2008) study, climber Lynn Hill utilises her "sexed body" to develop her own style and gain recognition in a male-dominated world where the feminine is often undervalued. Thus, Hill's experience exemplifies the potential for transformation through a process that is consistent with the "rhizomatic body".

In our opinion, the concept of the "rhizomatic body" is useful when addressing liminality as a space for pregnant women to challenge and address taboos, prohibitions

and rules. This notion can be applied to normative pregnancy when crafting non-normative pregnancy identities through the participation in adventure tourism. In consistency with the concept of liminality (Ibarra & Obodaru, 2016; Turner, 1969, 1974, 1987; Van Gennep, 1960), the "rhizomatic body" embodies the construction of meaning through experiences of transitional moments characterised by ambiguity and transformation, emerging as a catalyst for alternative, non-normative pregnancy.

The experience of the "rhizomatic body" is essentially liminoid. The liminoid implies the symbolic construction of the liminal passage and the transition according to how it is represented by the individual imaginary. When concrete and visible liminal phases are diluted, the liminoid (individual, ambiguous, not socially constrained transfigurations in space and time) occurs. It is a phase in which the transition has not taken place as a concrete ritual stage, but it is imagined in function of how it is individually constructed. In this case, the woman imagines herself through a state she's leaving, a *mujer* (a woman, unitary, a person) and a state she is acquiring, a *mamá* (a mother, plural, two people - she and her child). In the process of representing herself, the subject self-imposes what is symbolically acceptable and unacceptable. According to Turner (1974), the liminoid phase between leaving one state and taking up another is evidenced in the subject (dreams, fantasies, favourite reading and entertainment) and in those with whom she is leaving and joining (their myths about her, treatment of her, and so on).

Based on the literature review, we have constructed a model to guide the investigation of liminality, pregnancy and adventure tourism (see Figure 1). The theoretical perspective of liminality will allow us to explore pregnancy (inside change) as a liminal-liminoid state, constructed in the context of the particular Mexican cultural taboos, prohibitions and rules. We expect these normative interpretations to follow

societal and institutional advice, while promoting gender stereotypes that influence women's behaviours (as per Mahon-Daly & Andrews, 2002). Given that play and performance are fundamental to understanding how the liminal and the liminoid states work, the pregnant woman must lend herself to playing the role of future mother and to become "responsible" for taking care of her and the future baby. This role is symbolically constructed as opposed to a woman who participates in adventure tourism (external change), where risk, freedom or lack of control, among other characteristics can generate spaces for transgression and for the development of non-normative pregnancy experiences. In this sense, our study will investigate the relationship between liminality and pregnancy (inside change), within the unique context of adventure tourism (outside change), where women can resist some of the gender ideologies associated with pregnancy.

Figure 1. Liminality in pregnant women performing adventure tourism.

Source: Authors.

Method

The study's main purpose is to examine Mexican women's participation in adventure tourism during the liminal period of pregnancy, and to explore the possibilities for non-normative pregnancies. A qualitative design was adopted to facilitate the analysis of the gender dimensions in tourism (Nunkoo, Hall & Ladsawut, 2017), as well as to understand the participants' context and pregnancy experiences (Martinez-Pascual, Abuin, Perez de Heredia & Palacios-Ceña, 2016; Osuchowski-Sanchez, Tigges,

Mendelson, Lobo & Clark, 2012).

Semi-structured interviews were chosen as the main data collection instrument in order to listen to participants' voices directly and to understand their "interpretations, experiences and spatialities of social life" (Dowling, Lloyd & Suchet-Pearson, 2016, p. 680). Tourism and geography scholars have found interviews a particularly useful method to examine bodily and gendered experiences (Bondi, 2003; Díaz-Carrión, 2012; McDowell, 1999; Seow & Brown, 2018), which make them an appropriate technique for this study. The interview guide was informed by the literature review on liminality, pregnancy and adventure tourism and covered questions on the adventure tourism experience, changes during pregnancy and gender roles and expectations, to apprehend the interpretations of normative and non-normative pregnancy in Mexican women.

During the first stage of research, key contacts were made in adventure tourism clubs and other formal associations, as well as through specialised adventure tourism agencies. A total of 35 semi-structured interviews were conducted through purposeful snowball sampling (Palinkas et al., 2013; Tajeddini, Ratten & Denisa, 2017). Inclusion criteria were to be a Mexican woman and to have pursued adventure tourism activities during part of their pregnancy. Nearly half of the interviews were conducted face-to-face (n=15). The rest were conducted using information and communication technologies (ICTs) and software applications (Skype, Google Hangouts, Facebook or WhatsApp). All of the interviews (face-to-face and non-face-to-face) were conducted in Spanish, audio recorded and then transcribed into text for analysis. Interviews lasted an average of 80 minutes and the transcriptions generated about 1,000 pages in Spanish. Pseudonyms were employed in lieu of participants' names and some demographic details were excluded from the results in order to ensure anonymity and confidentiality.

The demographics of the sample are presented in Table 1. The average age of women participants was 36.8 years, with an average number of 1.6 children aged 12.2 on average. Only one woman was retired, the remaining 34 worked in a diverse range of fields. 17 women work in the private sector, 13 in the public sector and the remaining 4 in the third sector (e.g. NGOs). The majority of the participants held a university degree (32). This is particularly relevant in a country where access to higher education is limited (OECD, 2018).

Table 1. Participants' demographics.

Source: Authors.

Qualitative content analysis was employed to systematically examine the textual data with the purpose of elucidating themes (Bengtsson, 2016; Thomas, 1994). This technique has proved effective in previous gender and tourism studies to examine participants' lived experiences (Camprubí & Coromina, 2016; Hsieh & Shannon, 2005; Neuendorf, 2011). The systematic process entailed coding, examination of meaning and provision of a description through both manifest and latent content analysis (Graneheim, Lindgren & Lundman, 2017).

During the manifest content stage, we reviewed the surface structure of the discourse analysis in order to get a preliminary interpretation about the meanings of pregnancy. This first stage was useful to identify the informants' perception into the way pregnancy was experienced as a liminal state and the restrictions it imposed in the use of adventure tourism spaces. Reflective notes were generated to describe the trends of participants' perspectives and to organise the initial codes (Hsieh & Shannon, 2005; Neuendorf, 2011). During the second phase of latent analysis, we focused on the

underlying meaning through the construction of a concept map (see Figure 2).

Following the strategies recommended by Hsieh and Shannon (2005), Bengtsson (2016) and Neuendorf (2011), the concept map summarized the recurrent unifying ideas that characterised the experiences of participants (i.e. emotional challenge, body change and freedom). The relevance of these themes was assessed in terms of capturing an important relation to the overall research question. This process was useful in understanding context as well as circumstances regarding pregnancy, liminality and adventure tourism.

Figure 2. Concept map.

Source: Authors.

Particular attention was devoted to identifying researcher biases or *a priori* assumptions. Some strategies employed to minimise bias over the course of analysis included: referring back to the theoretical framework, triangulating data (i.e. contrasting the interview data with the researcher observations and notes taken during the fieldwork), showing field notes to colleagues, and keeping the overall research question firmly in mind (Miles & Huberman, 1994). Initial impressions and interpretations of the data were revised through the hermeneutic spiral approach. Different interpretations were then examined and contextualised and agreements were reached on the meanings of the text within its context (Lindseth & Norberg, 2004). Member checking of the transcribed interviews and translated versions was also required (Lietz & Zayas, 2013).

Findings

According to the participants' age and life cycle stage, the following categories can be used to characterise women who engage in adventure tourism in Mexico. In order to explore pregnancy, the women from our sample fall under categories 3, 4 and 5:

- (1) children and adolescents,
- (2) women with no children,
- (3) women with babies, 34.2%
- (4) women with young children, 37.1% and
- (5) women with older children, 28.5%.

As shown in Table 1, participants practised the following adventure tourism activities: abseiling, climbing, mountaineering, paragliding, caving, kayaking, rafting, surf and scuba diving. Sometimes they alternated between different adventure sports, but one activity prevailed. The choice of adventure activity was closely related to the place of residence. For instance, women who lived in Southern Mexico (e.g. Oaxaca, Veracruz, Quintana Roo) had more opportunities to engage in fresh water sports like kayaking or rafting in nearby rivers (10 out of 12), whereas those living in Central and Northern Mexico (e.g. Mexico City, Puebla, San Luis Potosí, Nuevo León) found abseiling, climbing, mountaineering or paragliding more accessible (16 out of 18). Women who lived in the Baja Peninsula preferred salt water activities like surfing or scuba diving (4 out of 5).

The average of years practising the activity was 16.4 and most women became involved in adventure tourism before having children. Only five of the interviewees got involved with adventure activities after having their first child, but experienced a second pregnancy while pursuing adventure activities. All women reported a break (of months, but in some cases of years) due to pregnancy and childbirth. All of the participants

resided in cities and travelled to adventure tourism destinations to practise their preferred sport at least once a month. Those who did abseiling reported the possibility of training in sport facilities in their own cities, while those who engaged in water activities and lived near the sea also tried to train regularly. Even if some of these activities did not formally account as adventure tourism, they were seen as an extension of it because they were related to the tourists' training.

Every woman's story was unique, but two broad categories could be identified when exploring participants' introduction to adventure activities. For women over 55 years old, it was the relatives or someone who they were in a close relationship with (mainly a male member of the family such as the father, the brother, the husband or boyfriend) who invited them to try the activity. Women under 55 reported diverse forms of engagement with adventure tourism. Even if there may have been a male influencer, the presence of female friends or relatives who did adventure sports, or emerging connections through specialized clubs, became incentives to pursue adventure tourism. It was evident that the growing popularity of adventure tourism in Mexico has opened new gateways for women to engage in adventure activities.

All interviewees considered themselves as part of the expert sector (Giddy & Web, 2018), even though a few of them had initially engaged with adventure tourism through a more commercial experience. This was more evident in the younger cohort from our sample. Women's main motivation to pursue adventure activities after trying them for the first time was to feel stronger and to experience risk after the successful engagement with challenging activities, as illustrated in the following account:

'I enjoy the way I feel after doing a difficult path or crowning, you know it is like "resist you can do it" and then you get to the top and it is wow! Priceless.... you can apply that philosophy to your daily life too' (Olga).

Similar to Olga, the majority of participants considered they experienced a liminal state of challenge and freedom and overcoming risks as motivation to practise adventure tourism. Even though their initial engagement in adventure tourism activities did not take place during pregnancy, we found that the motivation of overcoming risks in adventure tourism remained an important element during the liminal period of pregnancy. To be motivated to pursue adventure activities suggested to us how our participants tried to subvert the normative impositions of what pregnancy means in the Mexican context.

Freedom, risk and the pregnant woman

Freedom and risk are among the intrinsic characteristics of adventure tourism (Mu & Nepal, 2015) and they appeared as the main challenges for women, especially during pregnancy. Some of the participants practised adventure tourism before having children, but others already had offspring when they began to engage in adventure activities. Despite their initial condition, women in general struggled with the reconstruction of themselves while doing adventure tourism during their pregnancy. As stated previously, normative and non-normative pregnancy refers to specific cultural constructions (Jordan, 1993), thus the construction of women's own cultural scripts demands a certain amount of creativity (Ibarra & Obodaru, 2016) as Daniela recalled in her account:

'You know [adopting risk] is contrary to the idea of being a woman. This doesn't apply to men... it is understood that if men undertake risk this is normal... but if it is a woman [who undertakes risky activities] then it's madness, even if you do not want to have children'.

As Mu and Nepal (2015) highlighted, adventure tourists have different perceptions of risk and according to their individual experiences, different strategies aimed to reduce the risk can be chosen. However, as Daniela stated above, this is not available to all and in the case of pregnant women risk could be amplified.

Normative expectations of pregnancy maintain that risky activities should be avoided. Pregnant women who participate in adventure tourism in Mexico are seen as having a defiant attitude. This was the case explained by Aurora:

'Some people didn't understand why I liked to practise adventure activities, they took me for a fool...well, it was worse when I became pregnant, even my mother didn't approve it'.

Even though moderate physical activity is usually recommended during pregnancy, there is a lack of consensus if adventurous physical activities should be also prescribed to pregnant women (Mata et al., 2010). Most women interviewed were aware of the risks involving the practise of adventurous physical activities during pregnancy, but in their opinion a pregnant woman is able to do outdoor activities during the first months and eventually, introducing some changes in their routine, to continue with the activities:

'I stopped doing II or III class rafting, but I kept kayaking in flat waters, or if I was used to a solo kayak I changed to a tandem kayak, but my doctor told me I could keep practising during the first months of pregnancy and until I considered and it wasn't strenuous activity and I think it was good because it helped me to relax' (Rosario, 27 years-old).

Pregnancy could be an experience considered with several restrictions under the normative lens and the participation in adventure activities can be one of them. As Mata

et al. (2010) stated some obstetricians and gynaecologists do not recommend the pursuit of physical activity during pregnancy. However, when some of our participants first learned about their pregnancy, they decided to continue engaging in adventure activities. An important number of participants recalled getting negative feedback from their gynaecologists and being disappointed. This situation is illustrated by Andrea: 'I was healthy but physicians considered climbing as a high risk activity for a pregnant woman even during the first months. I got scared especially when one told me that my insurance wouldn't cover any accident during the pregnancy, travel agencies didn't want to do it. I joined my friends sometimes.... I felt a lot of anger...It was unfair. I quit during 3 or 4 years. Now I think I could have kept climbing but at that time I followed everything others told me about avoiding risk'.

Andrea's testimony is an example of a normative ideal of pregnancy not only due to the importance given to medical opinion (including the advice by the insurance company or the travel agencies) where the absence of risk is regarded as the natural thing to do. Andrea's opinion also exposes the rupture from a normative experience characterised by self-fulfilment and maternal response. In her case, pregnancy was experienced as a process full of contradictory emotions, and having to quit climbing was felt as a big loss.

For Susana and Laura, medical support was considered as critical as family support in their search for constructing their own status as pregnant women.

'It isn't easy, for some people you are like crazy, others consider you are nuts or even stupid... but if your body responds to you I think you should keep practising adventure activities' (Susana).

Even if our participants struggled trying to balance the risk factor in their preferred activities, they ended up managing risk and pregnancy in a way that allowed

them to perform a non-normative representation of themselves as pregnant women.

They become more aware of the physiological challenges of their pregnant bodies rather than responding to the prevalent sociocultural norms and the social pressure. Laura considered that physiological changes and the characteristics of the outdoor activity were the main reasons to stop doing abseiling during her pregnancy:

"...you know, your body changes and even if you are in a good shape as your weight increases you are less agile too... your belly and hips fatten too....it wasn't that I felt ridiculous....it was more that it takes you twice as much energy.... but you know, when I was pregnant I wished there could be some indoor abseiling facilities for pregnant women....it seemed like a good idea to me...if there are yoga class for pregnant woman, why not?".

Laura thought abseiling was a safe activity, not exempt of risk but safe, and she did not recall receiving any medical recommendation to abandon the activity as long as she continued being healthy:

'I think that some doctors are more traditional and others are less, in my case my gynaecologist was a woman who also, eventually, practised adventure activities... so she gave me some advice but it didn't feel like a warning or something'.

Maritza, who kept doing kayak up until the last two months of her two pregnancies, reported a similar experience:

'I lived abroad during my first pregnancy and doctors weren't as traditional as in Mexico and people are more used to outdoor activities...so I think it was important. So during my second pregnancy when a doctor told me about being careful I just didn't consider stop kayaking.... nothing had happened to me

before, so it was safe. I had very good friends who encouraged me and took care of me so I didn't feel like an expat...although at one point I did feel that way' (Maritza).

Alternatively, some of the participants considered their pregnancy to be more a normative experience. As Andrea stated, the pregnant woman who avoids risk is heavily enforced even when the woman has a record of either health or intensive physical activity. In the participant's opinion there is a relevant social representation of the pregnancy as a transitional stage where the pregnant woman will inevitably strengthen her maternal instinct in accordance with the normative experience:

'Since you enjoy risk and freedom in adventure activities and you have faced some gendered questioning.... you think.... hey! It's over, but to be pregnant and to keep doing rafting is still a challenge... you even ponder if you really will be a bad mother because you put your baby at risk before birth' (Maritza).

Participants confirmed that they stopped doing adventure activities once their pregnancy advanced (Alicia, Evelyn, Laura and Maritza). Even for those who continued to engage with other outdoor activities regarded as safer (e.g. hiking), their pregnancy eventually drove them away from all adventure activities. According to their testimonies, the decision to stop pursuing these activities mostly related to the changes they experienced in their bodies during pregnancy, rather than because of the need to avoid risk *per se*; as Aurora stated:

'There's a time, during the last two months [of the pregnancy] that your body is heavy and it feels like you move in slow motion and it becomes uncomfortable.... you know, the adventure is not near your house so you have to travel and it is less enjoyable'.

As is suggested by participants' testimonies, their embodied experience is full of negotiations to avoid being excluded from adventure spaces, where risk was considered a fundamental aspect of their narrative. Women also faced the external and internal questioning of their ability to care for their future child. As Andrea suggested in her account, in order to circumvent further criticism, some women opted to perform in concordance to the normative identity, but this decision was not necessarily free of emotional charge.

Embodying the pregnancy

In their research about body and surfers Knijnik et al. (2010) draw insights from the "rhizomatic body" to explore the multiple and dynamic interactions over it, the way it is constructed and the way women try to liberate it. By using the concept of "rhizomatic body" to analyse the case of pregnant woman who participate in adventure tourism, it is possible to examine the interconnections between the experiences of embodiment during pregnancy with the negative connotations of body transformations, which are clearly liminal, as illustrated in the following account:

'The way your body changes, you probably do not feel comfortable for a while.... well in fact I never felt comfortable at all! [laugh]" (Maritza).

As well as positive connotations of body transformations:

'I became more confident... I do not know I felt that way, to give birth can be messy but it is powerful at the same time. I was strong so to experience pregnancy with all that questioning and continue kayaking...it was good' (Maritza).

Participants built the narratives of their non-normative pregnancy with references to physiological changes as well as social pressure. A relevant factor for women to continue doing adventure activities during their pregnancy was having a supportive environment, as illustrated in Evelyn's account:

'Well, you get bigger and slower, eventually you know you can practise the activity but you feel sorry for slowing down the others...but you know? I just had fantastic mates they not only took care of me but also encouraged me all the time' (Evelyn).

Despite the bodily changes, some participants were also able to experience their pregnancy as a non-normative "rhizomatic" state without major restrictions, as Alicia explained:

'You can't pretend nothing will happen, even if you dislike [the fact that] your body will change, your mind you know? in adventure activities both are inseparable, well both will change...but change is ok...so you just have to face it, not fight against, this isn't a fight, if you feel bad, stop doing it, or if you have to rest, you have to rest.... but do not allow others to decide [on your behalf]'.

The majority of participants expressed strong opinions about being able to have the final say regarding their participation in adventure tourism during pregnancy. As Susana pointed out:

'Decades ago pregnant women had to rest in their homes, physical exercise was banned, decades later it was ok to do some sports, but things keep changing and as long as your body responds you aren't risking anything, so just welcome your new temporal body and go for it [laughs]'.

Some of the negative consequences of bodily changes from the liminal period of pregnancy while engaging in adventure activities were related to specialised outfits: 'Nothing fits you, you have to use bigger footwear and clothing and it can be very expensive' (Alicia).

Or equipment:

'Harnesses aren't designed for pregnant women... there are some but it isn't easy to get them. I could get one because I bought it second hand from a woman who bought it in Canada, and when I didn't need it I sold it to another pregnant climber. But I was lucky it isn't easy to get one of them' (Laura).

Outfit and equipment were considered important constraints that were not easily resolved for some activities. However, changes in outfit size or the need for special equipment during pregnancy may not be as recurrent in other activities:

'I don't think that this will be relevant for rafting.... it depends on the body too... some women don't experience the same symptoms [during pregnancy] nor in the same degree... I just disliked my body when my life saver didn't close' (Susana).

In order to embrace movement, freedom and risk beyond the normative experience, pregnant women had to deal with bodily changes and had to manage physically and emotionally challenging phases. This process of embodiment is full of liminal changes and has the potential to generate outcomes that can be employed to trigger richer non-normative experiences of pregnancy. The pursuit of adventure activities can be adjusted to create new identities for women in a sociocultural context where adventure, risk-taking and challenging physical activities are not legitimised for women in general, nor for pregnant women in particular. For instance, in Laura's

personal process, challenge became the core element to construct a new representation of herself, through play and performance:

'To me... risk is something vital, I always liked outdoor activities and engaged in them since I was a child. I felt good while doing something different from the rest... it was nice to be different I was able to create who I am. To think were you are going, to plan the trip, to do [adventure activities], it shapes you, it changes you, it makes you strong and you project it' (Laura).

Instead of considering risk as something negative to avoid, Laura's account shows risk can be converted into a positive element in general and during pregnancy. In this sense, Laura was able to reinforce her non-normative experience:

'When someone intended to convince me to stop I considered I was healthy... I was in a good shape... I felt good.... I enjoyed the experience... my baby was fine too... Why stop then?'

For pregnant women this process of embodiment requires support and social guidance. Precisely, one of the main challenges for women who participated in adventure activities during pregnancy was obtaining the guidance necessary to craft their new role. Some women could get social support from medical professionals and other networks (family, friends, adventure clubs) and recognized the value of such networks (like Alicia, Evelyn or Susana); but at the end, the most relevant role was performed by the women themselves.

In their experience of this liminal process, women identified past experiences as a relevant resource to craft their new status as pregnant women. For instance, Alicia, described her achievement of constructing a more confident sense of self through her past involvement with play and performance:

'It was more difficult the first time...because...you know everything is more difficult the first time... I stopped climbing after the 5th month... a lot of people...my family and friends both questioned me... first I tried to make fun of their questioning but at the end I was tired.... even my husband questioned me. When I became pregnant of my second child it was...not easy because I also faced some questioning but I was more prepared and had more experience so it was less difficult'.

Similar to Alicia, Susana also took advantage of past experiences, specifically based on references from her childhood: 'My mother isn't ... like the typical Mexican mother, so it was like hey! My brothers and I survived... I was confident and it was very helpful'.

In order to pursue non-normative experiences in this liminal process, pregnant women who engaged in adventure tourism introduced risk as a crucial element, bringing together various personal resources, including past liminal experiences, in order to perform a positive embodied experience.

Discussion

Moderate exercise or physical activity is frequently recommended during pregnancy, but some hesitation still prevails. As a result, sports or strenuous activities are discouraged based on ethical issues rather than the risk itself (Sánchez García et al., 2016; Mata et al., 2010). In the Mexican context, since there does not seem to be a medical consensus on the level and type of physical activity during a healthy pregnancy, the challenge for pregnant tourists is to decide whether to continue or abandon

adventure activities mainly based on social pressure and a combination of taboos, prohibitions and rules that discourage risk. We recognize that adventure activities are not exempt from risk for pregnant tourists, but we want to highlight how social restrictions seem to be the norm even in the cases where women are healthy and the physiological changes linked to pregnancy do not seem to endanger the woman or the foetus.

By conceptualising pregnancy as a liminal stage, we were able to explore the role of normative pregnancy and how some women are able to create alternative representations of pregnant women and generate non-normative experiences supported by their participation in adventure tourism. For these women, the crafting of a nonnormative experience has to challenge cultural taboos, prohibitions and rules. Through the management of challenge, freedom and risk, adventure tourism spaces can become spaces for transgression where pregnant woman have the potential to construct alternative experiences during the liminal stage of pregnancy. Sánchez Bringas et al. (2004) remind us that new experiences can be interpreted from traditional models (i.e. normative pregnancy). However, this should not be considered as a limitation, because it is precisely during liminal stages that individuals can take advantage of the conflict and tensions generated through non-normative processes. For example, female adventure tourists have used the spaces of adventure to trigger non-normative processes (Kay & Laberge, 2004; Myers, 2010; Pomfret & Doran, 2015) just as Knijnik et al. (2010) considered, some pregnant women craft "rhizomatic bodies" as a relevant process towards developing capacities that will help them during their pregnancy and ulterior motherhood.

The liminal state and the possibility to escape from everyday life lie at the core of any tourist activity. In adventure tourism spaces, female tourists can perform non-

normative processes where challenge, freedom, lack of control and risk allow them to generate alternative representations of womanhood that differ from traditional or normative representations. Adventure spaces are then constructed as spaces for play and performance but also as spaces of transgression, where a pregnant woman can contest normative processes.

Traditions, cultural practices and symbolic constructions shape the way in which pregnant women create their identity. In the Mexican context, such restrictions become even more challenging for pregnant women who participate in adventure activities, especially when these activities are regarded as dangerous or physically demanding (e.g. rafting, abseiling, mountain biking or rock climbing, among others). In this sense, the social construction of normative pregnancy as a liminal stage where risk is avoided has played a restrictive role that forces some women to abandon all adventure tourism activities during pregnancy.

Conclusions

Among our findings, we want to highlight the use of adventure activities as important in the crafting of non-normative pregnancy for those women who actively engaged in these activities before becoming pregnant. Further research on this topic could shed light on the construction and meanings of non-normative identities for female adventure tourists in different cultural contexts.

Due to the key components of physical challenge, risk and expertise, adventure tourism often appears as a liminal space not open to pregnant women due to normative expectations that dictate avoiding risk or strenuous physical exercise. In Mexico, pregnancy is a phase with strong symbolism attached to it, despite the social changes in reproductive behaviour experienced during the past few decades. As we stated before,

pregnancy as a liminal phase tends to be strongly related to a normative experience that requires continuous medical surveillance. As exemplified in the accounts of the study participants, pregnant women who continued doing adventure activities engaged in processes of resistance, but also contributed to generating broader representations of what it is to be a woman. These women experienced non-normative liminality (centred on risk-taking), while contesting cultural taboos associated with the female body during pregnancy. Indeed, women potentially use the liminal spaces of adventure tourism for transformation, or even transgression, where they can break apart from the normative experience of "being pregnant".

Understanding the meaning of the liminality of pregnancy in women who participate in adventure tourism provides deeper insights into women's expectations and the way those expectations intertwine with social constructions of pregnancy and ulterior motherhood in Mexico. Such an understanding might be helpful in the crafting of more diverse models and experiences of being a woman in gendered spaces and for tourism and geography research to fully grasp behavioural patterns of pregnant tourists and their sociocultural impacts. Tourist enterprises could also benefit by redesigning their offers with a more diversified set of products depending on the phase of pregnancy (1, 2 or 3+ months of pregnancy), and the perceptions of what is "adventurous" and what is not. Indeed, further research on the topic could be extended to other activities that women perform during pregnancy and that are not considered as "adventurous" or risky, such as cleaning, washing, cooking or carrying babies and heavy shopping bags. Future research can also look at the role that private and public networks, such as family, friends, associations, and clubs play in supporting the construction of nonnormative experiences for women in adventure tourism at different stages of their life cycle.

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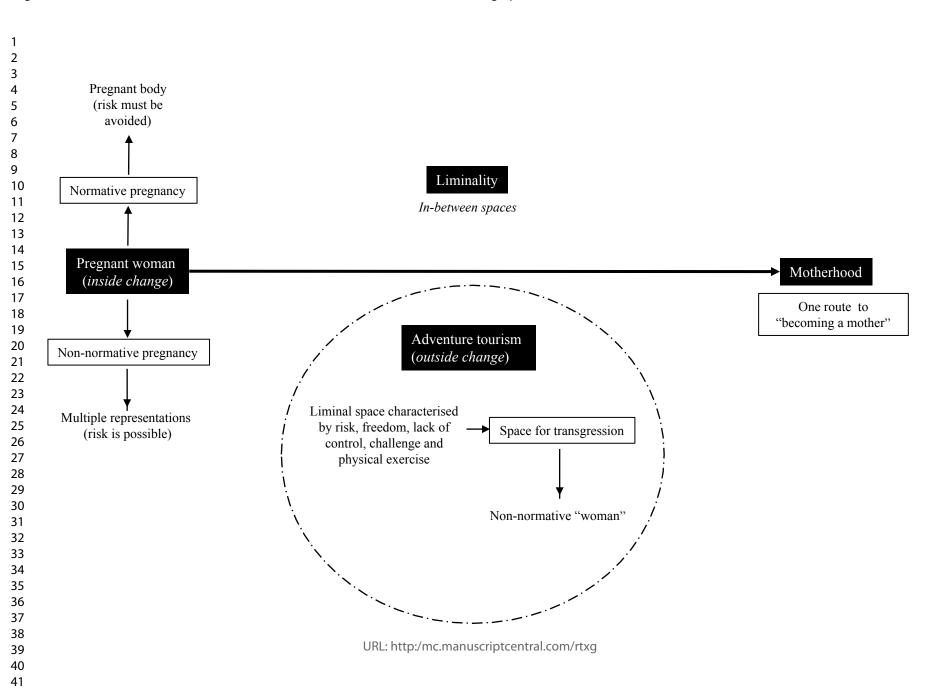
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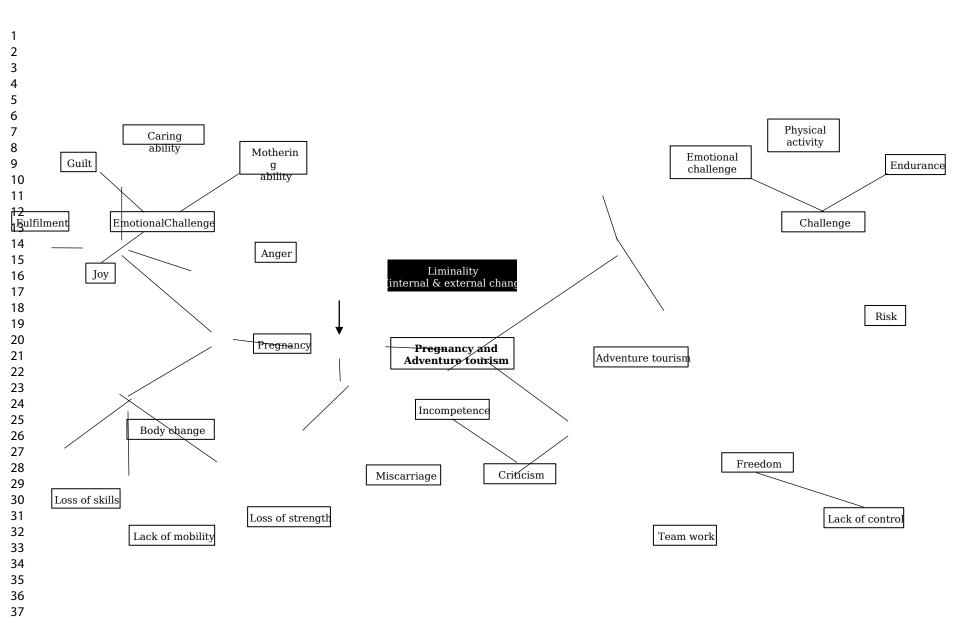
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39 40 41

Name	Age	Occupation	State of Residence	Years practicing Adventure tourism	Activity performed
Alicia	41	Entrepreneur & professor	Mexico City	13	mountaineering
Andrea	34	Travel agent	San Luis Potosí	12	climbing
Antonia	63	Consultant	Puebla	39	mountaineering
Ariana	32	Professor	Veracruz	15	caving
Aurora	50	Manager	Veracruz	28	scuba diving
Berenice	28	Professor	Mexico City	14	mountaineering
Carla	41	Entrepreneur	Veracruz	25	mountaineering
Cristina	53	Accountant	Puebla	26	mountaineering
Daniela	27	Dentist	Oaxaca	13	kayaking
Diana	40	Doctor	Baja California Sur	23	scuba diving
Elena	29	Professor	Mexico City	13	abseiling
Elisa	35	PhD Student & Professor	Mexico City	21	caving
Ericka	26	Entrepreneur	Veracruz	12	kayaking
Evelyn	48	Dentist	Nuevo León	23	mountaineering
Giselle	25	Accountant	Veracruz	9	kayaking
Gloria	65	Retired	Puebla	40	mountaineering
Imelda	41	Consultant	Mexico City	22	paragliding
Irene	26	Entrepreneur	Baja California	8	abseiling
Karina	35	Lawyer & Consultant	Oaxaca	9	kayaking
Laura	29	Architect	Mexico City	12	abseiling
Liliana	41	Psychologist	Veracruz	12	rafting
Lina	33	Veterinarian	Baja California	11	surfing
Maritza	32	Entrepreneur	Baja California Sur	10	kayaking
Mireya	24	Dentist	Mexico City	4	abseiling
Nadia	26	Consultant	Veracruz	8	paragliding
Olga	33	Entrepreneur & Professor	Edo. de México	8	mountaineering
Patricia	49	Lawyer & Professor	Querétaro	25	mountaineering
Raquel	50	Professor	Oaxaca	26	scuba diving
Rosario	27	Veterinarian	Oaxaca	13	rafting
Sara	39	Consultant	Mexico City	12	paragliding
Susana	26	Accountant	Baja California	11	surfing
Teresa	32	Professor	Sonora	15	abseiling
Verónica	41	Psychologist	Quintana Roo	15	scuba diving
Yuliana	38	Architect	Mexico City	16	surfing
Yulissa	31	Consultant	Mexico City	11	scuba diving

10 & 7



Translations Spanish-English

Spanish (Español)	English		
¿sabes? Primero, la idea de las mujeres y el	you know women first is contrary to the		
riesgo no checan, incluso hoy si ves a un	idea of risking a woman, even now if it is a		
hombre hacer algo riesgoso, es normal ¿no?	men the one doing a risking activity is		
pero si es una mujer, entonces es una loura,	regarded as normal but it is still considered		
incluso si no tienes hijos.	madness just because you are a woman, even		
metuso si no tienes mjos.	if you don't want to have children.		
Hay quien no entiende la razón por la que	Some people didn't understand why I liked to		
hago esto, te toman por locay es peor	practice adventure activities, they took me for		
cuando estás embarazada, hasta mi mamá	a foolwell, it was worse when I became		
estaba en contra.			
	pregnant, even my mother didn't approve it.		
De plano dejé de hacer rápidos II ó III, pero	I stopped doing II or III class rafting, but I		
no dejé de hacerlo en aguas planas, o cambié	kept kayaking in flat waters, or if I was used		
de tipo de kayak de uno de una plaza a un	to a solo kayak I changed to a tandem kayak,		
tandem pero mi doctor me dijo de seguir con	but my doctor told me I could keep practicing		
el kayak los primeros meses del embarazo y	during the first months of pregnancy and until		
así hasta que yo lo considerara correcto, que	I considered and it wasn't strenuous activity		
no fuera muy fuerte la actividad y eso fue	and I think it was good because it helped me		
Bueno porque entonces yo relax.	to relax.		
Era una persona sana y el medico me	I was healthy but physicians considered		
dijo que el ascenso era una actividad de	climbing as a high risk activity for a		
riesgo para una embarazada hasta en los	pregnant woman even during the first		
primeros meses. Me asusté y luego me	months. I got scared especially when		
dijeron que mi seguro medico no cubría	one told me that my insurance would		
accidents durante el embarazo, las	not cover any accident during the		
agencias no querían llevarme. Algunas	pregnancy, travel agencies didn't want		
veces salí con mis amigos me sentía	to do it. I joined my friends		
enojada no era justo Dejé de practicar	sometimes I felt a lot of angerIt		
3 ó 4 años. Ahora lo veo y pienso que	was unfair. I quit during 3 or 4 years.		
no debí parar pero en ese entonces	Now I think I could have kept climbing		
seguí el consejo de otros sobre no hacer	but at that time I followed everything		
actividades de riesgo.	others told me about avoiding risk.		
Es complicado, hay quienes de plano te toman	It isn't easy, for some people you are like		
por loca, otros tonta o por idiota pero yo	crazy, others consider you are nuts or even		
creo que sit u cuerpo responde yo creo que sí	stupid but if your body responds to you I		
puedes seguir con tu práctica.	think you should keep practicing adventure		
	activities		
Pues ya sabes, tu cuerpo cambia incluso si	you know, your body changes and even if		
estás en Buena forma pesas más y te vuelves	you are in a good shape as your weight		
menos ágil engordas de la cintura y las	increases you are less agile too your belly		
caderas no es que te vayas a ver ridícula	and hips fatten tooit wasn't that I felt		
es como que todo te toma el doble de	ridiculousit was more that it takes you		
energía;no? cuando estaba embarazada	twice as much energy but you know, when		
5 6 52 52 52 52			

como que me hubiera gustado que existieran	I was pregnant I wished there could be some
instalaciones de rappel para mujeres	indoor abseiling facilities for pregnant
embarazadascreo que es buena ideasi	womenit seemed like a good idea to meif
hasta hay clases de yoga para embarazadas	there are yoga class for pregnant woman, why
¿por qué no?.	not?
Creo que algunos médicos son más	I think that some doctors are more traditional
tradicionales que otros, mi ginecóloga por	and others are less, in my case my
ejemplo practicaba actividades de aventura	gynaecologist was a woman who also,
y ella me dió algunos consejos pero no	eventually, practiced adventure activities
prohibitivos o cosa así.	so she gave me some advice but it didn't feel
	like a warning or something.
Muchos años estuve fuera del país cuando mi	I lived abroad during my first pregnancy and
primer embarazo y allá los médicos son	doctors we're not as traditional as in Mexico
menos tradicionales y la gente hace más	and people are more used to outdoor
actividades al exteriorcreo que eso es	activitiesso I think it was important. So
importante. Y durante mi Segundo embarazo	during my second pregnancy when a doctor
fue cuando el médico me dijo que fuera más	told me about being careful I just didn't
cuidadosa y de dejar de hacer raftingnada	consider stop practicing kayaking nothing
me había pasado antes y entonces pues no me	had happened to me before, so it was safe. I
dió miedo. Tengo muy Buenos amigos que	had very good friends who encouraged me
me animaron a no parar y pues fue positivo	and took care of me so I didn't feel like an
aunque no siempre fue así.	expatalthough at one point I did feel that
	way.
Como está el factor riesgo y el sentirse libre	Since you enjoy risk and freedom in
pues no es raro que enfrentes	adventure activities and you have faced some
cuestionamientospero pues piensas hey!	gendered questioning you think hey!
Ya pasó, ahora cuando estás embarazada y	it's over, but to be pregnant and to keep
sigues con el rafting pues si es un retohasta	practicing rafting is still a challenge you
te preguntas si vas a resultar una mala mama	even ponder if you really will be a bad mother
por arriesgar a tu bebé desde antes de nacer.	because you put your baby at risk before
	birth.
Hay una etapa, en los últimos dos meses que	there is a time, during the last two months [of
tu cuerpo pesa más y sientes como que te	
	the pregnancy] that your body is heavy and it
mueves en cámara lenta y es poco cómodo	the pregnancy] that your body is heavy and it feels like you move in slow motion and it
y pues la aventura no está como que afuerita	feels like you move in slow motion and it becomes uncomfortable you know, the
y pues la aventura no está como que afuerita de tu casa y tienes que salir y pues como que	feels like you move in slow motion and it becomes uncomfortable you know, the adventure isn't near your house so you have
y pues la aventura no está como que afuerita de tu casa y tienes que salir y pues como que no es agradable ¿no?.	feels like you move in slow motion and it becomes uncomfortable you know, the adventure isn't near your house so you have to travel and it is less enjoyable.
y pues la aventura no está como que afuerita de tu casa y tienes que salir y pues como que no es agradable ¿no?. "Te vuelves más segurano sé, así lo vives,	feels like you move in slow motion and it becomes uncomfortable you know, the adventure isn't near your house so you have to travel and it is less enjoyable. I became more confident I don't know I felt
y pues la aventura no está como que afuerita de tu casa y tienes que salir y pues como que no es agradable ¿no?. "Te vuelves más segurano sé, así lo vives, dar a luz es un lío pero te sientes también	feels like you move in slow motion and it becomes uncomfortable you know, the adventure isn't near your house so you have to travel and it is less enjoyable. I became more confident I don't know I felt that way, to give birth can be messy but it's
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y pues la aventura no está como que afuerita de tu casa y tienes que salir y pues como que no es agradable ¿no?. "Te vuelves más segurano sé, así lo vives, dar a luz es un lío pero te sientes también segura al mismo tiempo. Fue importante el embarazo y seguir con el kayakfue bueno.	feels like you move in slow motion and it becomes uncomfortable you know, the adventure isn't near your house so you have to travel and it is less enjoyable. I became more confident I don't know I felt that way, to give birth can be messy but it's powerful at the same time. I was strong so to experience pregnancy with all that questioning and continue kayakingit was good.

pues yo tengo unos compañeros increíbles que me cuidaban y me animaban todo el tiempo ¿no?. Puedes hacer como que no pasa nada, aún cuando no sea agradable pues cambia tu cuerpo, tu mente ¿no? cuando haces cosas de Aventura ambos van juntos, pues los don cambian...pero el cambio es OK...pues solo tienes que aceptarlo, no ire n su contra, sit e sientes mal, pues paras, o si hay que descansar pues lo haces...pero no debes de dejar que otros decidan por ti. Hace años que las embarazadas se quedaban en su casa y hacer ejercicio estaba prohibidísimo, pero las cosas cambian y mientras tu cuerpo responda pues no hay riesgo, así que solo le das la bienvenida a tu nuevo cuerpo y adelante [risas].

Nada te queda, usas zapatos más grandes y ropa también puede ser muy caro.

El arnés no está diseñado para embarazadas...sí hay pero no es fácil comprarlos. Yo tuve uno de segunda mano que una chica trajo de Canadá, y cuando ya no lo necesité se lo vendí a pasé a otra embarazada. Pero yo tuve suerte no es sencillo poder comprarlos.

No me parece que eso sea importante para el rafting...depende de tu cuerpo también...algunas mujeres no experimentan lo mismo [durante el embarazo] ni en la misma medida...solo me molesté cuando mi salvavidas dejó de cerrarme.

Para mí el riesgo es básico, siempre me gustaron hacer cosas fuera, desde niña. Me sentía bien de hacer cosas distintas al resto...me gustaba ser diferente, es lo que me hizo quien soy. Pensar dónde vas, planear el viaje, hacer la actividad, te cambia, te vuelves más fuerte y eso se nota.

Cuando alguien me desaconsejó pensé que estaba sana...en buena forma...que me

others...but you know? I just had fantastic mates they not only took care of me but also encouraged me all the time.

You can't pretend nothing will happen, even if you dislike [the fact that] your body will change, your mind you know? in adventure activities both are inseparable, well both will change...but change it's ok...so you just have to face it, not fight against, this isn't a fight, if you feel bad, stop doing it, or if you have to rest, you have to rest.... but don't allow others to decide [on your behalf].

decades ago pregnant woman had to rest in their homes, physical exercise was banned, decades later it was ok to do some sports, but things keep changing and as long as your body responds you aren't risking anything, so just welcome your new temporal body and go for it [laughs].

nothing fits you, you have to use bigger footwear and clothing and it can be very expensive.

Harnesses aren't designed for pregnant women... there are some but it isn't easy to get them. I could get one because I bought it second hand from a woman who bought it in Canada, and when I didn't need it I sold it to another pregnant climber. But I was lucky it isn't easy to get one of them.

I don't think that this will be relevant for rafting.... it depends on the body too... some women don't experience the same symptoms [during pregnancy] nor in the same degree... I just disliked my body when my life saver didn't close.

To me.. risk is something vital, I always liked outdoor activities and practiced them since I was a child. I felt good while doing something different from the rest... it was nice to be different I was able to create who I am. To think were you are going, to plan the trip, to practice [adventure activities], it shapes you, it changes you, it makes you strong and you project it

when someone intended to convince me to stop I considered I was healthy... I was in a

gustaba hacerlo...que mi bebé estaba bien y entonces ¿por qué parar?

Fue más complicada la primera vez...pues

Fue más complicada la primera vez...pues porque...todo es más dificil la primera vez.. dejé entonces de escalar después del 5to mes...mucha gente...mi familia, mis amigos me criticaban...primero traté de tomarlo con buen humor pero al final te cansa...hasta mi esposo me criticaba. Cuando me embaracé de mi segundo hijo tampoco fue fácil porque me criticaban también pero yo estaba más preparada y tenía más experiencia y eso lo hizo menos complicado.

Mi mamá no es como que la típica mamá mexicana, y fijate mis hermanos y yo sobrevivimos...así que eso me dio confianza y también fue de gran ayuda.

good shape... I felt good.... I enjoyed the experience... my baby was fine too...Why stop then?

It was more difficult the first time...because...you know everything is more difficult the first time... I stopped climbing after the 5th month... a lot of people...my family and friends both questioned me... first I tried to make fun of their questioning but at the end I was tired.... even my husband questioned me. When I became pregnant of my second child it was...not easy because I also faced some questioning but I was more prepared and had more experience so it was less difficult.

My mother is not ... like the typical Mexican mother, so it was like hey! my brothers and I survived... I was confident and it was very helpful.