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Intimate liminality in Spain's berry industry

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Abstract

Spain's berry industry relies on the agricultural labour of both local and seasonal migrant workers. A significant part of this migrant workforce comprises Moroccan mothers who leave their children with relatives in order to perform this wage labour. The bilateral recruitment regime favours the employment of Moroccan women with children for this labour to ensure that workers return home at the end of the harvesting season. Drawing on multi-site ethnographic research in Spain and Morocco, this study revealed the effects of this bilateral labour regime on the intimate lives of migrant workers. We argue that the geopolitical prescriptions of this labour migration regime, along with the working and living conditions of migrant workers in Huelva, result in experiences of intimate liminality. We examined these experiences by exploring: (1) how the role of female workers as mothers becomes liminal as transnational labour agreements marginalise and outsource care obligations, (2) how governmental neglect of migrant workers' occupational health exposes them to reproductive health risks and (3) how this neglect places them in a liminal space in terms of access to healthcare, and (4) how, despite their liminality, migrant workers contest precarious conditions through everyday solidarity practices. We advance a feminist approach to liminality, emphasising the importance of an embodied, intersectional, and multiscalar perspective.

KEYWORDS

family separation, feminist geopolitics, labour migration, liminality, reproductive health

1 | INTRODUCTION

When I was working while pregnant, I was carrying the same [amount of berry boxes] as the others. The employer told me that I could get help, but I didn't, I wanted to work well.

(Rachida, agricultural worker, 2022)

Rachida¹ has been coming to Huelva in Spain for seven years, to harvest berries to improve her family's financial situation in Morocco. Being one of over 10,000 Moroccan women in the bilateral labour migration programme² between Spain

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and Morocco, each year between January and June, she leaves her four children with her aunt to work as an agricultural seasonal worker in Spain's berry fields. The work itself is physically demanding and leaves its mark on her health, which manifests through chronic back pain and anxiety attacks – conditions that often remain untreated due to access barriers to the local health system. Many Moroccan women working in Huelva's agriculture experience emotional distress due to harsh treatment at work and separation from their families. During their time in Spain, some of their main concerns are to earn as much money as possible for their families and be recruited again next year. Due to seasonal migration, these workers live between two places over the year, 'being neither here nor there' but somewhere 'betwixt and between' multiple spaces in time (Turner, 1967, p. 96). In this paper, we develop the notion of intimate liminality by analysing the impact of the transnational labour migration policies between Morocco and Spain on the reproductive lives of Moroccan female workers – in terms of both care relations and their (access to) reproductive healthcare.

To be recruited by the Moroccan authorities to work in Huelva, workers must be female, married or divorced, between 25 and 45 years old, and have children under the age of 14. This transnational demographic policy is primarily geopolitical: Spain and Morocco assume that women's care obligations and emotional bonds to their children ensure their return to Morocco at the season's end. Employers also prefer migrant mothers as workers as they expect less resistance from them due to family dependency and financial necessity. Hence, their 'reproductive biographies' (Perler & Schurr, 2021) shape their access to Huelva's agricultural labour market. This gendered and demographic recruitment strategy also means that care and reproductive health are key issues in migrant mothers' lives.

The main foci of previous research have been the gendered migration regime, the devaluation of female labour, and the precarious working conditions faced by female agricultural labourers in Huelva's berry industry (Castillero-Quesada, 2020a; de Castro et al., 2019; Hellio, 2014; Moreno Nieto, 2013; Moreno Nieto & Hellio, 2012; Zeneidi, 2013). These grievances have become more visible since the global COVID-19 pandemic (Castillero-Quesada, 2020b; Güell, 2022; Molinero-Gerbeau, 2021). Globally, a growing body of research also points to the alarming health risks migrants face while working in foreign countries (Hansen & Donohoe, 2003; Zimmerman et al., 2011). This is particularly true for farmworkers, who are exposed to environmental pollutants such as pesticides (Barbour & Guthman, 2018; Guthman, 2019; Harthorn, 2003; Holmes, 2013; Saxton, 2015). However, the gender-specific health risks of female migrant workers and their access to reproductive healthcare – especially in delicate situations such as pregnancy – have received little attention. While few studies on the Canadian (Cohen & Caxaj, 2018) or US (Galarneau, 2013) context address this topic, the subject is largely untreated in Huelva (Escrivà & Komposch, 2024). Migrant workers' care and reproductive health concerns in Huelva may be less visible than non-compliance with labour laws or citizenship challenges, but they are as relevant for the women concerned.

We advance a feminist approach to the concept of liminality to understand Moroccan women's lived realities within this transnational labour migration regime. A study on agricultural migrant workers in Italy (Raeymaekers, 2019) shows that liminality includes both 'spaces where power is effectuated through the multiple overlapping boundaries that emerge in the midst of various conflicting claims to exercise control and govern populations' and spaces where 'the agency of marginalized populations to contest [can be enhanced]' (p. 130). Yet how does this liminal position between two nation-states play out for female migrant workers with regard to their reproductive lives? How do international, national, and local policies for migrant workers push them into liminality? How does this liminal position affect their intimate lives? And how do migrant workers themselves contest the precarious conditions of work, health, and life that assign them a liminal space within the nation-state and its society? Asking who produces and governs liminal spaces, and who shapes or fights against them, this paper demonstrates the need for an embodied, multiscalar, and intersectional analysis of liminality.

This article first revisits the literature on liminality in geography in general and feminist geopolitics in particular. After presenting the methods, we then discuss multiple aspects of intimate liminality, showing (1) how transnational labour migration policies enforce family separation, (2) how governmental neglect of migrant workers' experiences exposes them to reproductive health risks and (3) how this neglect places them in a liminal space in terms of access to healthcare, and (4) how migrant workers and activists contest liminality. In the conclusion, we assess the potential of a feminist perspective on liminal spaces for exploring the struggle over reproductive justice³ in the context of migrant labour.

2 | A FEMINIST GEOPOLITICAL LENS ON LIMINALITY

The word liminality derives from the Latin term 'limen', meaning threshold. The concept of liminality was first introduced by the anthropologist Arnold van Gennep (1960) and developed by Victor Turner (1967), who used it to analyse

the ambiguity of transitional periods and spaces between ‘two relatively fixed or stable conditions’ (p. 93). Turner also called those who occupy liminal spaces ‘transitional beings’, who are ‘neither one thing or another; or maybe both; or neither here nor there; or maybe nowhere... and are at the very least ‘betwixt and between’ all the recognized fixed points in space-time of structural classification’ (p. 96). This ‘betwixt and between’ renders ‘transitional beings’ structurally invisible since they lose their ‘classification’ in one territory (often in one nation for migrants) without gaining full classification (and the associated rights) in the new one. Moreover, this loss of classification accurately describes the realities of workers who temporarily migrate from one place to another. Being ‘neither here nor there’, they fall out of place-bounded structures, resources, and benefits. As Hennebry et al. (2016) point out regarding transnational temporary migration programmes in Canada, liminality ‘is produced through a confluence of structural factors which keep these individuals in a permanently temporary limbo’ (p. 523).

While liminality has been applied to many different topics in the social sciences (for an overview, see Downey et al., 2016), its engagement within geography has been somewhat limited (McConnell & Dittmer, 2018; Senanayake, 2022), which is surprising given the importance of place and space for the concept. While Shields (1991) engaged with the liminality of spatially and socially marginal places as early as the 1990s, only recently has the concept received greater attention, especially in cultural, social, and political geography (Banfield, 2020; McConnell, 2017). Geographers have engaged with liminality to conceptualise the growing number of in-between spaces as a consequence of neoliberalisation and globalisation and have examined refugee spaces (Hyndman, 2000), diplomacy and geopolitical processes in overseas territories (McConnell & Dittmer, 2018), peacebuilding-processes in cities (McDowell & Croke, 2019), and foodbanks as strategies to deal with neoliberal austerity politics (Cloke et al., 2017). While research on liminality in labour geography (Underthun & Jordhus-Lier, 2018), reproductive geography (Bagelman & Gitome, 2021; Mountz, 2021), and health geography (Senanayake, 2022) exist, the intersection of these fields in the context of seasonal labour migration has not yet been explored within the theoretical perspective of liminality.

In this paper, we advance a feminist approach to liminality, arguing that this feminist lens contributes to understanding how liminal spaces are (re)produced and how inequalities and injustices affect the way that liminal spaces are experienced and manoeuvred differently by differently marked bodies. Our notion of intimate liminality is informed by the work of feminist political geographers (McConnell, 2017; McConnell & Dittmer, 2018; Senanayake, 2022). Considering intimacy as ‘forms of close affective encounter’ (Oswin & Olund, 2010, p. 62), we define intimate liminality as the emotional and embodied effects of being in a societal, political, economic, and territorial liminal position on one’s (reproductive) health and social relationships with partners, children, family members, and friends. We developed the notion of intimate liminality by first looking at how it affects migrant mothers’ emotional capacity for close encounters with close individuals while at the same time it opens possibilities for new affective encounters with people in a similar liminal position. Second, we call for engaging with how liminality results from migrant women’s mundane, embodied experiences of living between two different nation-states and their positionalities as mothers and workers. Third, we advance an intersectional analysis of liminality (Senanayake, 2022), highlighting how different power relations and structures shape the lived experiences of intimate liminality. Patricia Zavella (2011) describes how liminality leads to a transnational migrant imaginary of ‘peripheral vision’, which ‘expresses subjects’ sense of economic, social, cultural or political vulnerability in a globalised world’ (p. 8). When analysing liminality in transnational spaces, a multiscalar approach (Pratt & Rosner, 2012) necessarily considers how global, national, regional, and local politics (re)produce intimate liminality for differently marked bodies. Asking who governs, shapes, or contests liminal spaces reveals the geopolitical character of intimate liminality.

3 | METHODS

The paper builds on multi-site ethnographic (Marcus, 1995) fieldwork in Spain and Morocco conducted from April 2020 to June 2023 (a total of eight months across four stays) by Nora Komposch. The research constituted observations and informal conversations in workers’ homes, workplaces, hospitals, and health centres in Huelva and different regions of Morocco. Nora accompanied female workers on their journey to Huelva and visited their families in their Moroccan hometowns. Over 40 formal interviews were conducted with seasonal workers, doctors, midwives, employers, Spanish and Moroccan public administrators, activists, and unionists.⁴ Furthermore, many informal conversations took place with activists, workers, and their family members (in person or remotely via WhatsApp), which were recorded in field-notes. The interviews contained biographic and problem-centred questions (Rosenthal, 2007; Witzel, 2000), were conducted in Spanish or French, or facilitated through interpreters in Darija (Moroccan Arabic),⁵ and lasted from 20 min to

3h. Additionally, Nora organised two participatory body-mapping workshops (Gastaldo et al., 2012) with a total of 10 participants to communicate body-related knowledge collectively using creative methods. Interviews and workshops were recorded, transcribed, and analysed through open and focused coding using MAXQDA qualitative software. Emerging themes from the interviews and workshops were compared with observation fieldnotes to triangulate the multiple data sources.

4 | THE GLOBAL-INTIMATE: GOVERNING MOTHERS' TRANSNATIONAL LABOUR MIGRATION

Similarly to California, where most of the berries for the North American food market are produced (Holmes, 2013; Wells, 1996), Huelva serves as the berry chamber for Europe. Berry production is a labour-intensive industry, which for decades has demanded the recruitment of large numbers of seasonal foreign workers alongside local workers. Roughly half of the approximately 100,000 workers employed in the Andalusian berry industry each year are migrant workers (Escrivà, 2022); most migrate seasonally to Huelva. In recent decades, the composition has become increasingly multinational and feminised. As in many other low-paid sectors, the myth that women have more delicate hands (making them preferred over men for berry-picking) has shaped the discourse of gender-based worker selection. As has been shown in other sectors, such as the Maquiladoras in Mexico, this discourse constructs female workers as more productive, skilful, and compliant (Salzinger, 2003). This social imagery is not reflective of actual ability but instead says much about the industry's desired attributes and gender stereotypes (Elson & Pearson, 1981; Wright, 2006). This gender discourse also conceals the fact that employers opt for female workers to secure cheap labour due to structural gender wage inequalities (Reddy, 2007). Initially, a large part of the female labour force came from Eastern European countries, such as Poland, Romania, and Bulgaria (Escrivà, 2022). Seasonal migration from these regions has diminished with their entry into the European Union (EU), but Eastern European workers still constitute an important part of Huelva's current labour force (Molinero-Gerbeau, 2021). The recruitment of Moroccan women began in the mid-2000s through collaboration between Aeneas (a European Commission programme to assist member countries in migration management), the municipality of Cartaya (one of the major berry producing regions of Huelva), and Morocco's National Agency for the Promotion of Employment and Skills (Anapec). With EU funding support, a specific recruitment programme was established between Morocco and Spain, which each year offers 7000–20,000 Moroccan women the opportunity to work in Huelva (Escrivà, 2022).

Selected Moroccan women must be 25 to 45 years of age, from a rural area, and have a child under the age of 14. The former mayor of Cartaya, Juan Millán, referred to as 'the architect of Huelva's guest-worker programme', stated that mothers were chosen since it was anticipated they would willingly return home to attend to their children (cited in Glass et al., 2014, p. 12). As diverse human rights reports show, the selection criteria for Huelva's berry industry are discriminatory and non-compliant with Spanish and EU legislation (Doval Hernández et al., 2021; Hellio et al., 2019). This may be why a Moroccan public administrator emphasised that the selection criteria are not strict, but merely reflect preference:

You cannot select everyone, that would be impossible, so you must choose. Until now we give priority to women with children [...]. We think that they are more in need of money, right? They must feed their family. So that's the reason, it is not at all discriminatory. It is just a prioritisation, it's not a criterion [...]. And then there's also... well... there's also another thing ... obviously ... well, it's a circular migration programme, right? For this programme to survive, the worker must respect the commitment to return. That's important. That contributes to the sustainability of the programme, that's another level to it.

(Staff member of the Moroccan public administration, 2023)

As the quote evidences, this demographic recruitment strategy is justified in the name of a 'pro-women' and 'co-development' policy (Macías Llaga et al., 2016). Gender and motherhood are proven during the application process by submitting birth certificates indicating the age of each child. This assertion about the 'other level' of the 'importance of returning home' reveals the geopolitical construction of the transnational seasonal labour migration system, which focuses on a specific gender, family status, nationality, and class profile. This highlights the Spanish and Moroccan intention to guarantee that the workers will repatriate on completion of their work tenure. This geopolitical aspect was also clearly addressed by a Spanish public administrator:

Why a family profile? [...] If a woman [for example] has four children and supports her wider family, [...] she has a very big family responsibility. Evidently, that person is much more likely to return home and fulfil her contract [...].

(Staff member of the Spanish public administration, 2023)

Moroccan mothers are expected to leave their children to dedicate their time in Spain to their labour. While many have already experienced family separation because of distant work periods in their own country (Hellio, 2013), this transnational seasonal labour regime forces them to outsource their reproductive parenting labour to other (mostly female) family members over a longer period. This separation of reproduction and production must be read from an intersectional perspective to understand how the (emotional) pain of certain bodies is normalised: 'Migrant labour has historically separated children from families; yet this class-based division of labour, rather than soliciting white empathy, pathologizes migrant parents and naturalizes labourers' suffering' (Smith et al., 2019, p. 145).

Meryem, a strawberry picker, described vividly the separation from her children. In a body-mapping workshop, she drew a sea on her chest, where she also painted her broken heart. On either side of the sea, she painted two figures, one referring to herself and the other to her son, who stayed in Morocco:

My heart is hurting a lot because my son is so far away. The sea lies between us. It is very painful not being able to see my family. [...] At the same time, I also feel strong and think that, if I want, I can achieve a lot. I hope to be able to bring my son to Spain one day.

(Meryem, agricultural worker, 2022)

This account illustrates the poignant emotional anguish that arose from Meryem's intimate experience of physical separation from her child resulting from her wish to fulfil her parental duties. While her child was why she was in Spain, she suffered from the separation. In Turner's (1967) words, emotionally, Meryem is 'neither here nor there' but more 'betwixt and between all the recognized fixed points in space-time of structural classification' (p. 96). As a result of being physically in one place but emotionally in another, female migrant workers experience intimate liminality. Mothers' ambitions to provide their children with a better future conflict with the emotional pain of mothering across distance (Banta & Pratt, 2022; Pratt, 2012).

In their study of Huelva's selection criteria for its berry industry, Glass et al. (2014) argue that employers and state agencies create an image of the compliant mother as the ideal worker: 'Maternal self-sacrifice is assumed to motivate Moroccan women's out-migration for seasonal agriculture, while maternal devotion is assumed to motivate their return' (p. 15). Similar to parent- and gender-specific selection processes in other migrant labour agricultural contexts, the parenthood of Moroccan women should serve as 'collateral against non-return' (Basok, 2000, p. 224). However, as the following quote indicates, such rules are not a guarantee that migrant women will not overstay their Spanish work visas:

If I didn't have children, I wouldn't need that much money. But to finance the lives of my children, I need more money, so I stayed here. Like this, I can support them financially all year round. [...] Being separated is very hard but I am in contact with my daughters every day, helping them with their homework, always via WhatsApp.

(Aicha, agricultural worker, 2023)

Aicha stayed in Spain precisely because of her care obligations. Finding employment in Morocco was challenging for her due to her rural background and low level of education. Furthermore, the increasing frequency of droughts has significantly reduced opportunities for agricultural labour. The financial strain of supporting her family led her to remain in Spain all year long. Despite being physically distant from her children, she used digital technologies to stay connected and care for them from her liminal position, reducing feelings of distance through real-time video images, similar to other mothers who perform long-distance mothering duties (e.g., Longhurst, 2013).

By forcing workers to separate their reproductive and productive lives, this recruitment model between Spain and Morocco alters the process of motherhood and engenders an intimate liminality of emotional suffering for migrant workers on a global scale. Such transnational labour policies enable selective migration and thus encourage mothers – especially those with little education from rural areas in the Global South – to temporarily change their place of residence. Moroccan mothers who participate in this transnational labour migration regime thus experience intimate liminality due to separation from their children and the inability to physically care for them, which they partially ease through digital technologies.

5 | THE NATIONAL-INTIMATE: EXPERIENCING REPRODUCTIVE HEALTH PROBLEMS THROUGH GOVERNMENTAL NEGLECT

Zeneidi (2013) called the labour migration system between Morocco and Huelva a prime example of what Dikeç (2009) described as 'spaces of lawlessness' (p. 183). Although laws guaranteeing decent working conditions and basic needs access to (reproductive) healthcare are included in Spanish labour laws and bi-national agreements, non-compliance is widespread. Applying an intersectional perspective, we show that 'nothing embodies and illustrates inequality more materially than our health' (Sparke, 2014, p. 680). This section of this paper specifically outlines how governmental neglect of migrant workers' basic rights renders these 'transitional beings' (Turner, 1967) and their reproductive health problems invisible. First, we highlight how a lack of governmental inspections can result in reproductive health risks due to daily exposure to pesticides. Second, we point out how migrant workers' intersectional identities complicate their access to adequate health facilities in rural areas. We argue that the lack of access to reproductive health is another aspect of intimate liminality.

Research suggests a clear link between occupational exposure to pesticides and harm to reproductive health (Fucic et al., 2021; Hanke & Jurewicz, 2004; Istvan et al., 2021). Strawberries rate particularly high among fruits where high levels of endocrine disruptor pesticides⁶ are used (Veillerette & Lauverjat, 2013). Barbour and Guthman (2018) found evidence of reproductive health damages in California's strawberry industry, where female migrant farmworkers reported severe harm, including miscarriages and birth defects; these women also experienced mental stress due to the 'additional moral burden on women farmworkers who are made responsible for protecting future populations' (p. 1). Guthman (2019) further stated that, whereas acute pesticide-related symptoms such as 'difficulty breathing, itching and burning, tearing, nausea, headaches' are known, 'the disproportionate adverse effects from chronic exposures on farmworkers is a story much less told, but no less pernicious' (p. 148). Similar events occur in Huelva, as told by a former female strawberry picker:

Under the polytunnels, there is no escape from the heat or the spray. Sometimes they fumigate next to you, and you have no protection. Then the headaches and stomach aches begin, and who knows what the long-term effects might be?

(Lina, former agricultural worker and unionist, 2022)

As Lina indicated, the immediate effects of pesticide use are notable, but the longer-term implications are much harder to detect. This span between directly apparent short- and long-term effects on workers' (reproductive) health, which can emerge once they return to Morocco, is another aspect of intimate liminality. As Senanayake (2022) demonstrates, a spatial-temporal approach to the concept of liminality can be helpful for understanding 'the instability and "messiness" of distinctions between health and sickness in contexts where there is prevailing uncertainty about the source and toxicity of environmental exposures' (p. 364). While temporal migratory regimes position migrants within in-between spaces, it is the long-term effects of being societally positioned in liminality that affect migrant workers' wellbeing.

The in-betweenness and the related spatiotemporal separation of the eventual intimate-level damage and effects on workers' bodies make traceability, and therefore accountability for the harm, very difficult (Sabin et al., 2023). In addition, the workers' social position as migrants with low-level education makes it highly challenging for them to claim their rights and hold those responsible to account. Due to the (often) low severity of the short-term effects and barriers to accessing the Spanish health system (discussed below), many workers do not seek medical help. Thus, their health problems often stay untreated and invisible in Spanish health statistics – which also prevents government controls being more widely enforced. Moreover, as the accumulated and long-term effects of pesticide exposure may emerge only years later (when a worker is back in Morocco), the medical links to Spain's place-bounded agricultural labour are so difficult to make that any compensation claims would be practically impossible to process.

The transitional passage of seasonal labour makes it highly challenging to prove the links between certain health risks due to environmental toxin exposure. Using qualitative research methods, it is very difficult to establish a direct link between pathologies and chemical exposure. In addition, many other factors, including other environmental toxins,⁷ may determine reproductive health. However, strawberry pickers such as Rachida link their and their children's ailments with their work in Huelva:

I worked here while pregnant and since then me and my son are not in good health. I have constant urine infections and my son's legs are not the same length and he is often sick. [...] I link this to the work here because my other three children are all in good health.

(Rachida, agricultural worker, 2022)

Reports and newspaper articles indicate that unauthorised (and thus particularly harmful) pesticides were applied to the plants in parts of the Spanish berry industry until at least 2022 (Echevarria, 2023; Veillerette & Lauerjat, 2013). Similar processes have been observed by anthropologist Barbara Harthorn (2003), who studied pesticide exposure in Californian farmworkers and argued for a structural violence analysis and a greater focus on the systematic production of health inequality. More government inspections and greater transparency about the (level of) chemicals used are crucial for to prevent farms disobeying toxin bans. According to the unionists and workers we talked with, while regular state-prescribed company inspections do occur, they often do not sufficiently inquire into the working and health conditions of migrant workers. Company owners often know about the inspection in advance and can obscure illegal working conditions, such as the lack of protective equipment against pesticide exposure. In addition, migrant workers' lack of language skills and their structural dependencies on their employers prevent many workers from reporting labour law violations to inspectors. Intimate liminality results from the gap between existing laws and regulations in Spanish politics, and the state's unwillingness to enforce laws to protect migrant workers' (reproductive) health from damaging toxins. The nation-state's neglect of migrant workers' (reproductive) health affects the lives of workers and their children in intimate ways. The long-term consequences of toxic exposure not only threaten their psychological and physiological health but also impact family economies when mothers eventually assume the economic burden of long-term health effects back in Morocco.

6 | THE REGIONAL-INTIMATE: ENCOUNTERING ACCESS BARRIERS TO REPRODUCTIVE HEALTH

Besides the reproductive health problems from pesticide exposure faced by workers, their intimate liminality is manifested in the regional administration's neglect of their (reproductive) healthcare needs. Although Spain has a universal healthcare system that guarantees free healthcare to all citizens (migrant workers included), many migrant workers struggle to access this on a regional scale during their seasonal stay. Thereby, they become what Sparke (2017) called 'biological sub-citizens' – they are less protected by state laws and have less access to social services as a consequence of their sub-citizenship status. Access to reproductive healthcare in the berry-picking context is highly important since most women who migrate to Huelva are at reproductive age due to the demographic recruitment strategy. The difficulties accessing healthcare arise from territorial marginalisation, language and cultural barriers, and insufficient information about the health system (Escrivà & Komposch, 2024). The region's hospitals are mainly concentrated around Huelva's capital city, although several small village health centres provide basic healthcare. The migrant workers live on the strawberry farms in simple houses or trailers, which are typically far from urban centres or villages. The regional government provides little or, in some regions, no public transport, meaning that workers are forced to walk or organise their own transport. This corresponds to Mountz's (2011, p. 387) findings regarding the territorial liminality of refugees: 'They are detained remotely and therefore removed quietly from support, access and rights'. The remoteness of housing inhibits access to basic needs, such as legal representation, social integration, and healthcare. The physical strain of long-distance walking, frequent accidents, and the risk of sexual assault, especially when women walk by night, further complicate access. Consequently, many workers refrain from consulting reproductive health services:

We don't go to see the gynaecologist. [...] If something is hurting, we just take a paracetamol [a painkiller]. [...] If you don't know the language, it is very difficult. [...] I told the company many times that I need to see a doctor, but they said: 'We have a lot of work', 'we don't have anyone to drive you and help you with the translation'. So, I couldn't go.

(Malika, agricultural worker, 2023)

As Malika's statement indicates, the isolation in liminal spaces occurs through territorial marginalisation as well as through insufficient infrastructural and social integration policies in Huelva, such as public transport and translation services. A minority of Moroccan workers speak Spanish at a level sufficient for health checks and consultations.

Some health centres and hospitals in the region provide a telephone translation service. However, the information about this service is not systematically communicated to the workers, and most will not visit a doctor without someone who could serve as a translator.

An additional barrier to migrant workers' access to reproductive healthcare is the paucity of information on the healthcare system and its corresponding amenities, such as the Health Card (*tarjeta sanitaria*). This enables migrant workers to identify themselves in hospitals and health centres, have a personalised medical record in the system, make medical appointments, and get tests and medicines prescribed. Without this card, it is only possible to access emergency health services; all other services (including specialised reproductive healthcare and prevention checks with midwives) are inaccessible. As mentioned in the bilateral labour agreement regarding Moroccan seasonal workers, the state obliges each employer to provide each worker with a Health Card on their arrival. However, many workers report they have not received the card or any information on how to obtain one. This has resulted in important checks for many reproductive health issues, such as pregnancy checks, not being undertaken, or women ending up in emergency services with issues that should have been addressed at regular check-ups. According to a midwife in the region, 'the main obstacle is that they [pregnant migrant farmworkers] don't come to the analysis' (midwife, 2022). It is important to look more closely at the reasons for this discrepancy between theoretical access and the non-utilisation of healthcare. As Sparke (2017) writes:

There is a tendency in more neoliberal societies to focus only on individual behaviors as an explanation. This can quickly turn in socio-cultural discourse into a way of blaming the victims and obscuring the more complex causal pathways in which poverty, oppression, dangerous behavior, and embodied experiences of biological sub-citizenship all intertwine.

(p. 291)

Zeneidi (2013) describes how the berry industry's main aim is to make migrant workers work as efficiently as possible. Hence, illnesses or pregnancies, which reduce workers' efficiency, become problematic for employers. As Rachida's statement at the beginning of this paper shows, many women internalise the idea of pregnancy as a 'problem' for work. Basic needs, including attending reproductive health services, take a back seat in this neoliberal market logic. Migrant farmworkers mostly visit the doctor only in an emergency; thus, their needs and health conditions are rendered structurally invisible. This invisibility reinforces their intimate liminality – through their not being able to access the Spanish or Moroccan health systems during their time in Huelva – and heightens the short- and long-term health risks for mothers and children alike.

The discrepancy between the workers' needs and services offered suggests that this intimate liminality is (geo) politically desirable. The government's neglect of migrant workers' potential health issues through pesticide exposure indicates how the workers' realities are rendered invisible through their liminal status. Furthermore, the location of migrant residences, the lack of transportation and translation facilities, and little information about the healthcare system reveal how liminality often manifests itself through the absence of infrastructures, information, and resources rather than through visible barriers. This demonstrates the importance of investigating liminal spaces if we are to address the structural invisibility resulting from intersecting power relations that marginalise certain groups. These 'circular' labour migration regimes, aimed at enabling rich states to prevent permanent immigration (Zeneidi, 2013), are designed to create as little integration into systems of national healthcare and social welfare as possible. Neoliberal state logic gives Spanish authorities – at both the national and regional levels – a financial interest in ensuring that migrants receive as few health services as possible; thus, migrant workers do not incur costs or feel entitled to certain rights in their place of work. At the end of the picking season, they are expected to leave Spain without delay, and preferably without receiving any healthcare services or social benefits. In theory, the Spanish state enables free healthcare for migrant workers. However, in reality, the state's insufficient control of employer law compliance fails to ensure migrant workers' rights to occupational health. Their access to reproductive healthcare is delayed until the end of the season (when there is less work and more free time) or until they are back in their home country. This externalisation of healthcare expenses to Morocco benefits both the employers, who avoid additional bureaucratic work and possible absences, and the Spanish state and local governments, who save on healthcare costs. Hence, intimate liminality results from governmental neglect at the national and regional levels affecting the wellbeing and health of migrant workers and their children.

7 | THE LOCAL-INTIMATE: EVERYDAY PRACTICES OF CONTESTING LIMINALITY

The three preceding sections discuss the challenges workers face regarding their reproductive lives, which arise from the transnational labour migration regime and the Spanish government's systematic neglect of enforcing labour and healthcare rights. Acknowledging the inherent systemic obstacles that define the intimate liminality of seasonal farmworkers in Huelva, the workers' mundane tactics of contestation are noteworthy. As Senanayake (2022) writes, 'liminality as an increasingly common experience might in itself form the basis for new forms of intervention and action' (p. 374). Notwithstanding the arduous circumstances for practising resistance in the agricultural labour sector in Huelva,⁸ many workers develop dissent, mutual support, and self-governance practices. In so doing, they challenge and cope with their physically and socially isolated intimate liminality during their stay in Huelva. Workers contest such liminality through self-organised healthcare and mundane practices of solidarity. When workers were asked in our interviews how they dealt with, circumvented, and navigated the multiple barriers to accessing (reproductive) healthcare in Huelva, one worker answered: 'We help each other out with our own means. For example, if a colleague is in pain, we take olive oil, heat it up, and massage each other' (Meryem, agricultural worker, 2022). Despite the precarious working conditions, many workers helped each other deal with health issues:

When my co-worker said she had [breast] cancer, I told her not to say anything to the employer, so that she wouldn't get fired. We helped her with the [strawberry] boxes because she couldn't carry them.

(Cristina, agricultural worker, 2022)

Joining forces with local grassroots organisations was another method through which workers strived for reproductive justice. Through transnational feminist practices of solidarity, workers and activists mobilise their diverse resources across multiple categories of difference (Grewal & Kaplan, 1994; Mohanty, 2003). To tackle the diverse obstacles they faced in their liminal work and living arrangements, workers collaborated with local organisations, such as the Andalusian workers' union Sindicato Andaluz de los trabajadores (founded in 2007), the Huelva-based feminist collective Mujeres 24H (founded in 2018), and the feminist union Jornaleras de Huelva en Lucha (founded in 2020). These organisations support workers in legal lawsuits and address issues connected to intimate liminality, such as sexual assault at work, which frequently occurs because of the workers' precarious position and related power relations (Güell, 2022). Furthermore, workers address territorial isolation and difficulties accessing health services at the local level with different unions, as recounted by a unionist:

If the workers go to town to buy food or see the doctor, they have to walk up to 10 km loaded with groceries. They sometimes also pay taxis to drive them – something that the company should be in charge of. We have demanded several times that the authorities establish a bus line for the workers.

(Unionist, 2023)

Due to the lack of local public transport, migrant farmworkers pay between €20 and €40 to unlicensed cab drivers to take them to the health centre and translate for them once there.⁹ Unions and collectives frequently accompany workers to health centres for free. Together with the collective Mujeres 24H, Nora and Angels also regularly offered such transport. Thanks to the broad social networks of Moroccan workers, the contact information of activists with vehicles was quickly circulated. Expanding the Moroccan social networks to local activists also helped the workers to transcend the constraints of intimate liminality, such as isolation and loneliness. Some women successively built local networks through friendships and participating in local social movements, while remaining anonymous due to the risk of repression. With the feminist union, Jornaleras de Huelva en Lucha, in May 2022, approximately 10 Moroccan workers orchestrated a rally in front of their company premises. Accompanied by an international film team, they publicly denounced their employer's mistreatment, insufficient provision of services and information, and failure to remunerate them for overtime. As one protester explained:

Why should we keep quiet? We should defend ourselves. [...] One of us had a wound (in the breast area) and could only treat it with onions. She would have needed medical treatment. But the doctor said she would need a Health Card and therefore sent her away. [...]. He said she should ask the company to organise her a Health Card. But since the company didn't give her the document, she had to self-medicate.

(Mina, agricultural worker in the documentary movie *The Invisibles*, directed by Rufer, 2023)¹⁰

Mina's statement indicates her demand for certain rights in a country where she had been contributing to the economy for years. By voicing her claim, she questioned the liminal status assigned to her as a migrant worker. Through collaboration with journalists and activists who reported on their protests in local, national, and international news outlets and on social media, this group of workers managed to raise public awareness about the (reproductive) injustices that migrant workers face and their political claims to improve their situation. By using a 'strategy of weaving in and between multiple scales of power to create new spaces of participation and new forms of consciousness and discourse' (Blackwell, 2023, p. 4), they worked on what Blackwell calls multiple 'scales of resistance'. Through public attention to their concerns, this group challenged the logic of structural invisibility that characterised the intimate liminality they were forced to work and live in. Considering the hurdles that migrant women face due to their gender, citizenship, and class, this process of self-determination is particularly significant. Through vocalisation and increased visibility, they asserted their agency and challenged existing power structures. Moreover, giving their concerns more visibility paved the way for legislative change at the national level. The international solidarity of social movements at the global level further enables 'social geographic imaginations and associated practices connecting people across borders, including through transnational migrant activism' (Mitchell & Sparke, 2020, p. 1048). Collectively sharing a liminal position, migrant workers fostered new intimate relationships with co-workers, developing solidary practices that alleviated emotional suffering in their quotidian lives. These intimate relationships also formed the basis for political organising and acts of resistance, which systematically connected political actors at different scales.

8 | CONCLUSION

This paper demonstrates the potential of a feminist approach to liminality, analysing how the liminal position of female Moroccan farmworkers in the Spanish berry industry affects their intimate lives as mothers and workers.

At the global level, the bilateral migration agreement between Spain and Morocco has resulted in demographic selection that encourages mothers to temporarily migrate. However, this agreement simultaneously prevents these mothers from physically exercising their reproductive care. Emotionally, they experience intimate liminality due to territorial separation from their children, which can be partially overcome by digital communication. While the Spanish government guarantees to preserve the bilateral migration agreement, it absolves itself of any obligation to family life and caregiving responsibilities within national boundaries. This transnational agreement shows how global labour migration regimes and the intimate lives of migrants are inextricably interwoven (Pratt & Rosner, 2012). At the national scale, the lack of state measures to protect migrant workers' health from pesticides indicates how, as transitional beings, their realities become invisible in liminality. At the same time, regional authorities fall short of providing migrant workers with the necessary infrastructure for them to access their rights to Spain's universal health system, which results in another aspect of intimate liminality. A lack of transportation, health cards, translation facilities, and information means that workers often refrain from, or delay, seeing doctors or midwives. Accordingly, their medical needs are rendered structurally invisible, which Turner (1967) describes as indicative of liminality. Moreover, through this structural invisibility, statistics and hospital reports fail to reveal the extent of the problems faced by migrant workers due to their harsh working conditions and limited access to health-care infrastructures. Such examples show how intimate liminality manifests itself not through clearly visible barriers, but through politics of neglect and the absence of facilities and resources. Through revealing the lack of governmental protection at the national level and lack of access to reproductive healthcare at the regional level, we demonstrate how migrant workers are considered 'sub-citizens' as the nation-state fails to protect their bodies from health risks or give them access to universal state services. Our study further illustrates how the boundaries of liminality can be altered and challenged through everyday practices of contestation. Through self-organised healthcare, mutual support, and political actions with grassroots organisations, workers challenged the logic of liminality that renders the problems of migrant workers invisible and their lives marginal. The more they strengthened their place-bound social networks, the more their status improved. Raising their voices in political actions allowed them to step out of the structural invisibility of liminality.

A feminist approach to liminality focuses on the entanglements of scale and intersectional differences to understand current struggles for reproductive justice. We unveil the multiscale interwovenness of what we call 'reproductive geopolitics' (Perler et al., 2023) by showing the entanglements of transnational migration agreements, governmental policies of neglect at the national and regional scale, tactics of contestation at the local scale, and workers' bodily experiences of liminality on an intimate scale. That these scales are difficult to delineate from each other and are intrinsically linked is exemplified by the strategies of contestation. They initially occur at the local scale but jump towards the global scale through social media, international journalism, and solidarity networks. Our empirical work revealed that, although the intimate liminality of seasonal agricultural labour might appear as a solidified construct that is difficult to

transform, there are ways of contesting, and thus redefining, liminal spaces. However, our analysis shows that responsibility for (re)constructing intimate liminality can be situated at certain scales. Mapping responsibility for the status quo and spaces of resistance helps us to direct criticism for inhumane living and working conditions directly to the responsible level, as well as visualise the agency of the actors who fight against politics that maintain migrant workers in a state of liminality. As a former berry worker and unionist recounted, it is the intimate experience of suffering and rage that leads migrant workers to contest liminality across different scales:

We often lose our voices [laughs], and eventually we find them back, but eh, well, the truth is that we are few, but we have a lot, a lot of rage inside, from so much barbarity we have seen. We are transforming our rage into struggle and in the end, that's what has made it possible for us to do all this, the networking, collaborating with other organisations with other collectives of organised women in other places.

(Lina, former worker and unionist, 2023)

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DATA AVAILABILITY STATEMENT

Research data are not shared in order to protect the identity of the participants.

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ENDNOTES

¹ All names of interview participants have been anonymised.

² The labour migration agreement between Spain and Morocco is commonly called a 'circular migration programme'. Following the critiques of other scholars (Castles & Ozkul, 2014), we avoid the rather normative term 'circular' as it implies a voluntary return that is not present in this bilateral programme. We further demonstrate in this paper that the workers' return is not guaranteed.

³ 'Reproductive justice' was first developed in the USA in the 1990s by Black feminists expressing their discontent with white liberal feminist struggles for abortion. It has since turned into an important concept for feminist movements and research. Reproductive justice includes the right (not) to have children and to parent them in safe and healthy environments (Ross & Solinger, 2017), and will only be achieved 'when women and girls have the economic, social and political power and resources to make healthy decisions about [their] bodies, sexuality and reproduction for [them and their] families and communities in all areas of our lives' (Asian Communities for Reproductive Justice, 2005, p. 4).

⁴ Some participants were interviewed several times and some group interviews were conducted.

⁵ Note that Nora's positionality is shaped by her background as a white woman who was mainly socialised in predominantly Christian Switzerland. The two interpreters, who were both Moroccan, contributed significantly to cultural understanding in addition to the linguistic translation work.

⁶ Endocrine disruptors are chemicals that mimic or interfere with the body's hormones, known as the endocrine system (for more information, see De Prada Redondo, 2018).

⁷ Huelva is home to a fertiliser industry waste dump and an immense chemical industrial park, which, according to multiple studies, are co-responsible for Huelva having one of the highest cancer rates in Spain (e.g., García-Pérez et al., 2020). Both are located adjacent to Huelva's strawberry fields and the temporary housing for migrant workers, who are constantly exposed to these environmental health risks.

⁸ According to multiple interview statements from workers, activists, and unionists, many workers in Huelva's berry industry refrain from publicly denouncing the non-compliance of labour laws by their employers out of fear of losing their job and being forced to leave the

country. Multiple scholars have observed that extended borderlands can represent ‘assemblages of fear’ (van Houtum & Pijpers, 2008, p. 158) that are built through intertwined ‘geopolitical and everyday processes, events and actions’ (Pain & Smith, 2008, p. 14).

⁹Daily strawberry harvest wages range from €38 to €55.

¹⁰Nora and Angels supported and advised the film team on site and also appear as informants in the documentary.

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