ONE

A Social History of Suicide in Mexico City, 1900–1930

STATISTICS CONVINCE AND CONFUSE. Citing numerical data to back a claim lends it an air of legitimacy, but scholars acknowledge that the collection and interpretation of data can be problematic. Nonetheless, part and parcel of nation building in the nineteenth century was the establishment of institutions to collect data on everything from topography to mortality rates. Mexican officials first began assembling statistics to define the geographical and geological facets of the country. Description rather than determinism motivated early data collectors. As scientific politics took hold during the Porfiriato, a cadre of specialists expanded the scope of statistics gathering to population counts and number of marriages, births, and deaths. Not long afterward, counting incidences of crimes like homicide featured heavily in the mission of these experts. Statistics took a deterministic turn when Porfirian intellectuals started to wield them to rule society and gauge its advancement.

Statistical gathering and analysis were at the root of a scientific method to measure the march of progress. Indeed, the 1889 federal government publication, the *Periódico Oficial,* was prefaced with an 1888 directive that President Díaz wanted to present data at the 1889 Paris Exposition that showed not only the "material progress, but also the moral progress" that Mexico had achieved. The presidential order mandated that all states compile criminal statistics (including data on suicide) between 1870 and 1885 and send this information to the federal government.[1] Porfirian intellectual Antonio Peñafiel claimed that the use of statistics in Mexico began with the Chichimeca ruler Nepaltzin, who mandated a count of his people when they reached the Valley of Mexico after the conquest. To Peñafiel, it was natural that Mexicans would fancy statistics centuries later; it was in their DNA. He and his colleague Emiliano

Busto believed that statistics could accurately describe society, not with words but with numbers. Moreover, analyzing statistical tables would legitimate scientific approaches to social problems like epidemic disease and crime. They shared this sentiment with their European counterparts, who produced comparative statistical studies on crime, economic production, and disease. Comparative reports allowed states to gauge their levels of progress with others. As historian Mauricio Tenorio-Trillo noted, "only in a sea of numbers provided by all nations could the statistical picture of the ideal modern nation have emerged."[2] This keen worldwide infatuation with statistics could be seen most dramatically in exhibitions at world's fairs. What better way to portray the progress and splendor of a nation than through the display of products, photographs of engineering marvels, paintings, and statistical charts that could astound tourists, immigrants, and, especially, investors? Published statistics allowed nations to communicate their modern achievements to the world. Potential financiers could read statistical tables and decide whether a financial investment would be likely bear fruit.

Like scientists, journalists wielded statistics to authenticate their arguments and claims. For example, *El Imparcial* and *Excélsior* printed statistical tables to lend authority to reporting in their pages. Numbers substantiated editorials that claimed rising crime or suicide rates in Mexico City. The collection of numerical data on population increases, railroad lines, and mining outputs signaled that Mexico was firmly on the track of progress. Journals like the *Boletín demográfico de la República Mexicana* published numerical and qualitative facts on the nation's advancement beginning in 1898. Directed by engineer José María Romero, *Boletín* published sections in French, Italian, and English. One stated aim of the publication was to prove Mexico's progress to potential foreign investors. The bulletin lauded the extensive networks of railroads in the nation and included statistics on kilometers of track laid, revenues enjoyed, and return on investment in railroad development.[3] Years later, the Mexican Academy of Jurisprudence and Legislation sponsored a series of lectures to celebrate Mexico's centennial in 1910. Francisco Barrera Lavalle delivered a lecture that same year on the history of statistics in Mexico from 1821 to 1910 that was subsequently published.[4] Barrera credited the intrepid officials of the Porfirian regime with expanding the types of data collected, which included demographic indicators like falling rates of epidemic disease.[5] The counternarrative to Mexican progress was also revealed in statistics. The average life expectancy of Mexicans was twenty-six-and-a-half years in 1900, twenty-nine years in 1910, and thirty-seven years in 1930.[6]

Infant mortality rates also concerned public health specialists, who worried that the death rate could stymie or even negate indicators of the country's advancement. A sick and dying population spelled disaster for Mexico. The physical and mental health of citizens consumed the energies of Porfirian and revolutionary statesmen alike. Statistics lent credence to stated claims about the public health of the city and legitimized the physicians and sanitation inspectors who developed programs to combat disease and raise hygiene standards among the city's population.[7] The collection and analysis of data found a home in institutionalized liberalism and gained renewed emphasis after the horrific death toll of the Mexican Revolution. Yet it is worth noting that, for all the promises of Pax Porfiriana, Mexico's population did not live longer or witness significant reductions in infant mortality rates during the reign of Porfirio Díaz.

LIBERALISM AND SCIENTIFIC POLITICS

The late nineteenth-century ushered in a new era of liberalism among Mexican politicians and intellectuals. Scientific politics defined its divergence from the liberalism of early statesmen. The Reform Wars (1855–1861), the liberal triumph after the execution of Maximilian I (1867), and the ascension of Benito Juárez to the presidential seat signaled midcentury that the political tide had firmly shifted toward institutionalized liberalism. Instead of military men, a constitution, a body of secular laws, and professional politicians populated the halls of government. Porfirio Díaz seized the presidency in 1876, withdrew from office in 1880 to allow for a peaceful succession, and then reassumed the post in 1884—disregarding statements he made previously claiming he would not seek re-election. When he took office the second time, he surrounded himself with a cadre of educated professionals who promised to lead Mexico forward by relying on measurable scientific methods. According to historian Charles Hale, this generation of men rejected doctrinaire liberalism—what they sometimes called "metaphysical politics"—for a redefined positivist liberalism that required studying Mexican society to scientifically propose policies to correct social problems. Universal truths and doctrines fell into oblivion as experts studied social maladies in situ through empirical investigation. The findings allowed them to make procedural recommendations that they believed would regenerate society.[8] Their goals were to establish order, encourage progress, and,

ultimately, secure Mexico's membership in the club of modern nations. These ideas and criticisms of the liberalism of Juárez found a voice in *La Libertad,* a newspaper supported by a government subsidy from Díaz. These experts garnered the moniker *científicos* (scientists), and among them were several intellectuals that will be mentioned throughout this study, including Justo and Santiago Sierra, Antonio Peñafiel, and Gabino Barreda.

French philosopher Auguste Comte provided the theoretical underpinnings of scientific politics. He refined his theory of positive philosophy, or positivism, in 1826. Comte believed that there was a hierarchy of sciences, from the simple and general to the more sophisticated and interconnected. Physiology (the study of the human body) and sociology (the study of such bodies as groups) were especially important to Mexican experts, and Comte ranked the latter as the most complex science and claimed that it was also undertheorized. Likewise, he considered human thinking to have a hierarchical positioning as well. Theological, or what Comte called "imaginary thinking," occupied the base range of complexity while the metaphysical made up the middle range. Scientific thinking was the most rarified and desired mode of knowledge and intellectual pursuit. Comte reasoned that scientists had abandoned the first two forms of thinking when they were analyzing the natural world but not when they were examining social phenomena. Ideally, a human mind would proceed in a positive direction from theological to scientific thinking. Metaphysical thinking (doctrinaire liberalism) was a sort of purgatorial knowledge state that científicos had passed through to reach a higher state of intellectual reasoning. Practically, this shift resulted in scientific liberals supporting the centralization of power and looking askance at popular sovereignty and other ideals of pure liberalism.[9] To men like Justo Sierra, Mexico was not ready for rule by consensus as suggested by Herbert Spencer. Public order would not emerge from a "natural strengthening of the social body."[10] A strong central authority like the Porfirian state had to be fortified, or Mexico would fail in its struggle to survive the process of evolution and extinction. Hale phrased it best: "The idea that society should be administered and not governed was an integral part of scientific politics at is origins."[11]

Although many would agree that statistics hide more than they reveal, Porfirian científicos thought that data gathering and the analysis of figures could yield answers to the etiology of suicide and other social problems, like crime. They believed that the individual made up just one part, albeit an important part, of the social organism, and thus statistics could yield

information that would provide specialists the tools to combat moral diseases. Curing individuals—or, more importantly, preventing suicide—would improve the overall health of the social body. Contemporaries like criminologist Carlos Roumaugnac doubted the accuracy of statistics, but officials relied on them to make generalizations about the health of the body politic.[12] Data allowed experts examining the phenomenon of suicide to make generalizations about voluntary death, such as when it was most likely to occur, the most common reasons an individual would take his or her own life, where and how most victims committed the deed, and which categories of people (i.e., those of which age, gender, and social class) were most likely to kill themselves. Simply put, the state of society could be read through aggregated statistics—or in other words, moral statistics. Statistics are prone to human error when they are being collected and reported. Nonetheless, they are helpful in charting certain trends or patterns over time. When approached through the lens of social construction, the practice of gathering and using moral statistics reveals much about institutional concerns and priorities in their cultural context. Suicide is an apt example of a timeless act that gained enough urgency to be recorded and analyzed at the turn of the century.

MORAL STATISTICS

Statistique morale, or the exploration of social phenomena (versus physical and natural facts), originated in early nineteenth-century Europe in the work of Parisian attorney André-Michel de Guerry and Belgian mathematician and astronomer Lambert Adolphe Quetelet. Both men posited that statistical composites "could strip away the particularities of the individual personality and come face to face with the essential properties of society."[13] Likewise, Italian physician Enrico "Henry" Morselli (1852–1929) reasoned that "official categorizers of suicides are always faced with many complex decisions to be made about these so-called psychological factors. Even the decision as to whether the individual knew the consequences of his actions is a very difficult psychological judgment in many instances."[14] Moral statistics were the fodder of sociological study at the time, and Mexican positivists like Barreda and Peñafiel embraced them as the best tools to define social problems and suggest solutions. Statistics revealed how certain measurable phenomena, like suicide and murder, recurred. Moral statisticians proposed that external factors rather than individual free will provoked suicide or murder.

Placing causality outside the individual defined suicide and violent crime as social rather than individual pathologies. If patterns of suicide and murder resembled patterns of natural death, then predictable laws "hidden from the naked eye" propelled individuals to kill themselves or others.[15] This deterministic viewpoint reasoned that, if free will operated in the commission of criminal and suicidal acts, then the rates of both would display randomness rather than regularity among certain social groups.[16] Likewise, if social laws determined behavior, then the environment could be changed to transform human beings and, ultimately, aberrant conduct.[17]

Employees working for the Dirección General de Estadística (General Board of Statistics), founded in 1882, collected, classified, and published data on a range of phenomena in Mexican society, including deaths, infant mortality, illness, crimes, and in some years, suicide. Published statistics lent legitimacy and authority to the state and its representatives, especially to public health specialists like doctors Eduardo Liceaga and Peñafiel. Rising premature death rates or incidences of epidemic illness allowed public health officials to implement policy based on what they considered the irrefutability of numerical indicators. Statistics gathering in combination with concerns about urban sanitation heralded a larger role of the state in individuals' lives, especially in the lives of the urban poor. In Mexico, public health specialists entered urban barrios to administer surveys, observe living standards, and make policy recommendations aimed at eliminating disease. The statistics they analyzed gave them the power "to impose order on most social and economic activities." Human bias interfered as well, in that most policy recommendations faulted "ignorance, backwardness and immorality of the urban population" as the root causes of disease.[18] These experts did not always comment on the fact that urban tenements often lacked methods to sanitarily dispose of human waste or the fact the infection spread quickly in crowded housing. Although believed to be objective, statistics were burdened with value-laden prejudice. Even in their collection and analysis, they could be seen as both quantitative *and* moral measures.[19]

European moral statisticians would dominate the way that suicide was approached until the early twentieth century. Their views and approaches culminated in the work of Émile Durkheim, a former student of Jean-Étienne Dominique Esquirol and the author of *Le Suicide* (1897). He argued that the moral aspect of suicide was paramount, even if external causes led individuals to self-murder. Moreover, any notion of an individual's right to extinguish his or her life was superseded by his or her subjugation to the rights of society.

In other words, taking one's life was a selfish and immoral action that had a negative impact on society.[20] Writing twenty years before Durkheim, Morselli proffered Darwinist analogies to argue that suicide, crime, and other social problems increased with the level of civilization. However, he contended that, like the linear progress of evolution, some elements fell away as societies evolved because they could not survive the process of natural selection. He did recommend education as a way to boost the wills of weak members of society, but he also took a Malthusian stance and argued that suicide and the death of frail humans were normal costs of the march of civilization.[21]

SEASONS OF SUICIDE

Many people today mistakenly believe that suicide rates spike during the holiday months. The stereotype communicates that those who spend holidays alone, when most people are enjoying the company of loved ones, are at an increased risk of committing self-murder. However, a recent article notes that the rates actually increase during springtime,[22] a finding first noted in the nineteenth century. Experts interviewed for the article theorized that semihibernation during the shorter days of the winter months exposed people to less human interaction and the accompanying frustrations that come with socializing. Likewise, work rhythms are less intense during that time, and agricultural activities come to a standstill. Spring heralds more work activity and human interaction and with it more potential for conflicts and stress. Morselli theorized that a "suicide belt" existed between latitude 47° and 57° north and between longitude 20° and 40° east. That range includes most of Western Europe. Mexico and the rest of Latin America lie outside of this alleged zone. According to Morselli, people residing in this belt possessed the strongest inclination to attempt suicide. He suggested that temperate climates, rather than extremely cold or extremely hot climates, provided the ripest conditions for self-destruction.[23] Mexico City's climate could be described as temperate, but it sat at the wrong longitude. Some researchers posit that climatic factors provoked by changing seasons trigger suicidal thoughts. Some believe that more sunshine and longer days are the culprits; others fault increases in temperature in the spring and summer months.[24] Nevertheless, historical trends seem to point to spring and summer months (no matter which hemisphere) to be the seasons of suicide. The statistics of

TABLE 1 Suicides and Suicide Attempts in Mexico City by Month and Gender, 1900–1930

Month	Total	Men	Women
January	9	7	2
February	10	6	4
March	20	9	11
April	10	6	4
May	10	6	4
June	8	5	3
July	18	9	9
August	11	9	2
September	15	11	4
October	16	7	9
November	14	10	4
December	16	6	10
Total	157	91	66

TABLE 2 Suicides and Suicide Attempts in Mexico City by Season and Gender, 1900–1930

Season	Total	Men	Women
Winter (Dec-Feb)	35	19	16
Spring (Mar-May)	40	21	19
Summer (June-Aug)	37	23	14
Autumn (Sept-Nov)	45	28	17
Total	157	91	66

suicide in Mexico City from 1900 to 1930 support this general trend. March drove the most women to suicide. September was the cruelest month for men. The suicide cases in Mexico City during this period show some patterns that mesh with studies of suicide in Mexico as a whole. In general, March, July, and September witnessed the most recorded monthly incidences of suicide among men and women (see tables 1 and 2). It was thought that the hottest months resulted in the highest incidences of suicide and crime.[25] Italian criminologist Cesare Lombroso supported this conjecture, and his Mexican peers agreed that high temperatures led to increased criminal activity.[26] Julio Guerrero wrote in 1901 that the number of fights and injuries diminished during the rainy season, when temperatures were also cooler.[27] For Mexico

City, October through May is the dry season, and June through September is the wet season. Interestingly, a 1968 study of the relationship between meteorological states and suicide found that reported suicides and suicide attempts skyrocketed in May as well. That month regularly produces the hottest temperatures nationwide.[28]

The statistics for Mexico City match national trends. Indeed, 72 percent (forty-eight) of the reported suicides and attempts among women occurred during the dry season. This statistic is of aggregated suicides and suicide attempts for the season; however, monthly peaks for women lie outside this period, in March, July, and September. The percentage of male suicide in the dry season was less striking, with 63 percent of all male suicides occurring during that climatological period. When broken down by conventional calendar seasons, the suicide rates distributed relatively equally for women, while autumn showed a spike for men. The statistics support the conjectures of theorists like Lombroso, Guerrero, and criminologist Alfonso Quiroz Cuarón, but the vagaries of reporting and archiving inquests mean that caution should be taken in making firm conclusions.[29] Mariano Ruiz-Funes García, a Spanish exile who taught at Universidad Nacional Autónoma de México, received the Lombroso prize (which celebrated the best works in medicine and criminology) in 1927 for his book *Endocrinología y criminalidad*. He theorized that climate impacted hormones, which in turn could cause immoral behaviors. A specialist in criminal law, Ruiz-Funes argued that a "primaveral crisis" struck from April to June and manifested in a rise in "blood crimes," like murder and suicide. Sexual crimes also rose during this season. He argued, "In this period of the year man, unable to control himself and dragged by the excitement of the psychomotor sphere, is in a particular state of drunkenness. These facts are attributed to red blood cells and also the endocrine glands."[30] Early twentieth-century criminologists and physicians considered crime and suicide to have physiological causes. They believed that the body and mind could be affected by patterns of temperature and rainfall.

The time of day that suicides occurred also interested scientists and jurists. Durkheim concluded that the majority of suicides in his study happened during the bustle of the workday. In her study of suicide in the 1960s and 1970s, however, Mexican sociologist María Luisa Rodríguez-Sala de Gómezgil found that most individuals killed themselves between the hours of 7:00 pm and midnight.[31] The surviving inquests examined in this study

agree with the composite profile produced by Durkheim. By and large, men decided to kill themselves during the workday, with most committing suicide between the hours of 7:00 am and 9:00 pm. Women also chose the prime hours of the workday, from 1:00 pm to 9:00 pm, to commit suicide. In total, the hours between 1:00 pm and 3:00 pm, which correspond to mealtime and siesta, witnessed the most suicides. Many shops closed during this time. For men, it may have been the window of opportunity to leave their workplace and seek the privacy of the home to commit the deed. For women, it may have been an opportune time to find privacy while the household rested.

Most men and women committed suicide in the home—70 percent and 83 percent, respectively; 75 percent of all suicides took place at home. In this respect, Mexico's suicide demographics match those of other countries, with the private spaces of the home serving as the chosen site of most individuals bent on self-murder. The majority of suicides that did not occur in the home unfolded in other quasi-private spaces, such as a hotel room, a friend's home, or a bedroom in a brothel. Only 12 percent of suicides transpired in public places like parks, streets, and cantinas (see chapter 5). However a perusal of newspapers at the beginning of the twentieth century would make a reader think that dramatic public suicides were in fact commonplace. It is curious that most of the suicides reported in newspapers did not make it into surviving court records, suggesting that certain files may have been deliberately destroyed to protect family honor.

Minors (under age twenty-one) made up the bulk of suicides and attempted suicides by women, whereas most of the men who attempted or committed suicide were between the ages of twenty-one and twenty-five. Overall, individuals aged fourteen to twenty-five had the greatest rate of suicide, and it was also this age group that had the highest number of failed suicide attempts (see tables 3 and 4). The newspapers had it right when they lamented that suicide was a curse of youth in early twentieth-century Mexico. Other nations were also fretting about their young. For instance, suicide among adolescents panicked observers in the United States at the turn of the twentieth century. Reverend Samuel Miller of New York blamed the deaths on a weakening of moral values and a society that worshipped on the "altar of individual feeling."[32] This sentiment was not lost on the social engineers of the Porfirian and revolutionary eras in Mexico. Journalists had reported suicides on a regular basis since at least the 1870s, and they shared their international counterparts' estimation that suicides were on the rise in modern

TABLE 3 Suicides and Suicide Attempts in Mexico City by Age and Gender, 1900–1930

Age	Total	Men	Women
14–20	53	16	37
21–25	42	26	16
26–35	30	19	11
36–50	16	16	0
51 and older	5	5	0
Total	146	82	64

NOTE: Only 146 out of 157 case files noted the age of the victim.

TABLE 4 Suicides and Suicide Attempts in Mexico City by Success of Attempt, Age, and Gender, 1900–1930

		Suicides	Suicide attempts	Suicides	Suicide attempts
Age	Total	*Men*		*Women*	
14–20	53	13	3	11	26
21–25	42	16	10	4	12
26–35	30	15	4	4	7
36–50	16	14	2	0	0
51 and older	5	5	0	0	0
Total	146	63	19	19	45

NOTE: Only 146 out of 157 case files noted age of victim.

urban society. This led some newspapers, like *El Imparcial* and *El Nacional,* to lament the "suicide fever" that gripped the nation. What seemed to be especially upsetting to the public was the perceived rise in youth suicide, as the young were considered to be a social group that ought to be reveling in the joys of life. This was the era when adolescence as a special stage of childhood crystallized and the need to nurture, educate, and protect these youths gained currency. In some respects, Mexican society could understand that the mentally disturbed or the newly bankrupt might seek to end their lives, but the self-killing of seemingly healthy young on the cusp of adulthood seemed inexplicable and especially frightening to many. Debates ensued about why young Mexicans sought death over hope. In essence, the fear over the future of Mexico's youth sparked a moral panic over suicide.

METHODS OF SUICIDE

More men successfully committed suicide than women (see table 5). This may have been in part due to women not being as determined as men to carry out the act, but women also employed less effective methods. In his study of suicide in 1930s Vienna, William Bowman notes that observers assumed men were more serious about taking their lives because they employed more violent methods, like the revolver or the noose. That more women failed in their attempts to commit suicide also led some to believe that they were actually seeking attention rather than death. However, statistics on attempted suicides are just as problematic as those on deaths by suicide.[33] Who knows how many attempts at suicide were concealed or how many victims were secretly treated by private family doctors? Attempted suicides might also be explained as accidents. For example, deaths reported as drownings may in fact have been suicides. The data from Mexico demonstrates that men employed firearms in 60 percent of suicide cases. Women used poisonous substances like mercury cyanide and strychnine in 64 percent of recorded cases. Poisons could certainly kill, but quick medical intervention could save lives. A well-placed gunshot, however, caused instantaneous death. The data for Mexico corresponds to what Louis Pérez found in his work on Cuba. Men and women in both nations committed self-murder with the instruments or substances they used in daily life.[34] Men were more likely to possess firearms, whereas women regularly used toxic substances in the home. Men and

TABLE 5 Suicide Methods Employed in Mexico City by Gender, 1900–1930

Method	Men	Women
Gun	55	12
Poison	18	44
Knife or cutting tool	9	3
Jumping off building	5	3
Hanging	3	0
Ingesting Matches	0	2
Drowning	1	0
Gas asphyxiation	0	1
Moving vehicle	0	1
Total	91	66

women alike would have had access to arsenic and/or mercury-based medicines that were used to treat syphilis and other ailments. An overdose of those could easily bring death.

If you possessed resources, you would find it easy to purchase a Colt .45 or Browning pistol in Mexico City at the turn of the twentieth century. *Excélsior* advertised the sale of firearms in its pages. However, newspapers referred to suicide by gunshot as the elite male's method of self-murder. Before the revolution, employing the term "aristocratic revolver" signified that a suicide victim was a man or woman of the privileged classes.[35] However, soldiers and police also had guns at their disposal. Family members and friends could thus appropriate their pistols to commit the fatal act. During the 1920s, more women started to employ firearms to kill themselves. Some, like Olivia Rosenthal, already owned guns for protection. In fact, Olivia's husband testified that she slept with her gun under her pillow because of the frequent robberies in the city.[36] That Olivia used her gun to end her life did not surprise officials. Elvira Quintanar also shot herself with her own gun in 1923. She reported in her goodbye note that she worked in the mines as an interpreter and implied that she owned a gun to ensure her safety in that male sphere. Elvira wrote vaguely about her decision to commit suicide and suggested that a quick death was preferable to "many slow deaths." [37]

Poisons were easier to procure than firearms. Pharmacies, *boticas* (small drug stores), and hardware shops sold a variety of solutions and powders that could kill. Certainly, people bought cleaning supplies, disinfectants, rat poisons, and the like on a daily basis. Deadly poisons like the various cyanides and alkaloids could be easily purchased as these substances had applications in medicine in the late nineteenth and early twentieth centuries. Arsenic trioxide, famously featured in playwright Joseph Kesselring's 1939 *Arsenic and Old Lace,* was a favored poison of murderers as it could be administered in small doses that accumulated in the victim's body over time, eventually killing him or her. Arsenic taken in a large dose destroyed the gastrointestinal tract and caused a painful death. However, the poison could be readily dissolved in water and possessed no odor, color, or taste. Scientists figured out how to isolate arsenic in a body's tissues in the 1840s.[38] Arsenic was certainly the murderer's choice of poison in the nineteenth century. Rudolph Witthaus, a chemistry professor at Colombia University and author of *Medical Jurisprudence, Forensic Medicine and Toxicology* (1896), studied 820 deaths caused by arsenic poisoning between 1752 and 1889 and determined that at least half were murders. Accidental poisoning and suicide accounted for the

other deaths. Arsenic is a heavy metal and a regular by-product of ore mining. In fact, medical treatments for infectious diseases like malaria and plague contained arsenic. Likewise, Salvarsan and Neosalvarsan, two drugs developed from 1907 to 1912 by Paul Ehrlich to treat syphilis, included arsenic and required weekly injections for a year or more. They seemed to be promising treatments, but unfortunately the side effects could be extremely disfiguring and painful, including liver damage, rashes, and general pain.[39] However, the treatment was a vast improvement over the mercury-based medicines, which caused ulcerations of the tongue and palate, swelling of the gums, and tooth loss. Veterinarians also used arsenic as a tonic to improve the health and stamina of horses.[40] When María Dolores Priego died after swallowing two spoonfuls of powdered arsenic in 1906, her friend Emilio Navarro testified that she lived in the home of a veterinarian who had the substance on hand to treat horses.[41] The inquest does not include an autopsy report, but surgeons would have employed a number of tests to determine which poison Dolores had ingested. Most tests required that tissues of the stomach or liver be macerated with a variety of chemicals. The heavy metal arsenic would leave behind a frosty layer of octahedral crystals on the test tube.[42]

Compounders included mercury, also known as quicksilver, in medicines and industrial products. Anyone would recognize mercury's silver globules from an old-fashioned thermometer or thermostat. It is toxic, although when it is ingested in this form it passes through a person's system. In fact, some people drank mercury as a cure for constipation in the mid-nineteenth century without it causing anything more acute than a sore mouth—although chronic ingestion could result in cancer.[43] Mercury bichloride, however, is an extremely lethal compound of elementary mercury and chloride in salt form. If consumed, it will lead to painful but (sometimes) quick death. Like its cousin sodium chloride (table salt), mercury bichloride absorbs readily into skin or any tissue it comes into contact with. Its corrosive properties loosen teeth and transform the stomach into a mass of bleeding ulcers. Autopsies of those poisoned by mercury presented telltale signs of damage to the kidneys, which had struggled to no avail to clear the lethal metal from the body. Since mercury bichloride was a prescribed cure for syphilis as well as a component of bedbug pesticides, laxatives, diuretics, and antiseptics, a person could easily get their hands on the lethal substance.

In 1929, Santa González Castro, a twenty-nine-year-old prostitute from Tehuantepec, traveled to Pachuca to purchase mercury bichloride from a

pharmacy. She then returned to the capital, drank several bottles of beer and anise-flavored liquor, and ingested twelve pills. Roommates intervened, and Santa lived long enough to tell investigators that she had ingested the poison because her lover, Roberto Rivera, had deceived her.[44] Similarly, years earlier, in 1914, the Spanish madam of a brothel in Mexico City discovered that one of her prostitutes, Carmen Flores, had attempted suicide with mercury bichloride. The madam summoned physicians, who determined that Carmen was suffering gastritis as a result of poisoning. Carmen told investigators that her sweetheart had cheated on her and that she had decided to swallow the pills rather than face the heartache. She suffered for five days before succumbing to the ravages of the poison on her organs.[45] Although mercury bichloride was a common treatment for syphilis, Martin I. Wilbert, an official with the United States Public Health Service, called for the restriction of the compound in 1913. He cited large numbers of accidental poisonings and suicides resulting from its ingestion and advised that it only be available by prescription.[46]

Like mercury, cyanides occur naturally in nature. They can be found, for example, in plants, peach pits, and the secretions of millipedes. Chemists experimented with several forms of cyanide in the early twentieth century, and the compounds soon found their way into household and industrial products. Pesticides and disinfectants contained hydrogen cyanide, and sodium and potassium cyanides were used in mining, photography, and metal polishing. Famously, Nazis employed Zyklon B, which contained hydrogen cyanide, in German extermination camps during World War II. Cyanide was also the suicide agent for Third Reich officers, and Eva Braun and the Goebbels family used it to die rather than face capture by Allied soldiers in 1945. In fact, consuming food from a pot recently polished with a cyanide-based agent could kill a person. As journalist Deborah Blum puts it, "cyanides were useful, plentiful, easy to acquire—and astonishingly lethal."[47]

Those bent on suicide chose the poison for its rapid effect. Even low doses could kill within forty-five minutes. Cyanides bind with hemoglobin and basically starve the body of oxygen. Death by cyanide might be quick, but it is "brutal, marked by convulsions, a desperate gasping for air, a rising bloody froth of vomit and saliva, and finally a blessed release into unconsciousness."[48] Murderers seeking to poison their targets usually avoided cyanides because they left telltale signs. Forensic investigators were able to recognize cyanide poisoning by a bluish mottling of the victim's skin and a

faint scent of almonds emanating from the body. Regardless of the gruesome effects of cyanide, many chose to ingest it anyway. Seventeen-year-old Carmen Díaz had been living in a consensual union with Homero García for six months in 1925 when he informed her that he was planning to leave the capital without her. Carmen then bought some pink pills at a botica on the pretext of killing rats and rented a room in the Hotel Juárez. The maid there testified that the young woman summoned her to deliver a note to her house at noon. When she returned the to room at midday to pick up the letter, Carmen grabbed a glass off the table and declared, "Look, I am going to poison myself." The maid fought her for the glass, but it was too late. She called other employees of the hotel, and an ambulance transported the ailing woman to the hospital. Carmen left behind letters to Homero, her mother, and her friends. She died almost a month later in the hospital.[49] Men were less likely to use poison in their suicide plans, but when they did, they also employed easily obtained chemicals. Alfonso Vallejo, a thirty-nine-year-old member of the *rurales* (rural police force), admitted before he died that he had consumed mercury cyanide, a medicine he used in the treatment of his horses. He wrote a letter specifically informing his surgeons, "I think there is no need for autopsy nor medical study. The drug I took is mercury cyanide."[50]

Other toxic chemicals and corrosives employed in suicides included iodine, cleaning fluids, kerosene, and chloroform. The last mentioned was a revolutionary anesthetic for surgeons in the nineteenth century, but at the turn of the twentieth century the American Medical Association requested that hospitals cease using it because of accidental overdoses. However, anyone could find chloroform on pharmacy shelves for many more decades. Chloroform was an ingredient in cough syrups, a common sleep aid, and a cure for seasickness, hiccups, colic, and diarrhea. It is an unpredictable mix of carbon, hydrogen, and chlorine; a small amount might kill one person but not another. Carlota Alatorre mixed it with laudanum in 1914 in an attempt to kill herself when her lover accused her of infidelity.[51] She survived. Some years later, in 1927, investigators found Luz María Berlín on the floor of the Santa Catarina church at the corner of Brasil and Nicaragua streets with an empty bottle of chloroform beside her. She died without leaving testimony.[52] Others chose potassium permanganate, a substance sold sometimes as Condy's crystals or powders. A popular and effective disinfectant in the home, potassium permanganate was also used by photographers in flash powder.

The cheapest poison could be extracted from matches. Sometimes, a carton of cigarettes came with a free box of matches, and the phosphorus tips of the matches could cause death if someone ingested enough of them. The white phosphorus causes intense gastritis and literally burns through the stomach or intestines. The handling of phosphorus could even poison the workers making matches. There was so much concern worldwide about accidental poisonings and suicides via match eating that the U.S. Congress held hearings in 1912 on white phosphorus matches.[53] In 1911, eighteen-year-old María Concepción Avendaño, who had suffered the jealousy and suspicion of her boyfriend, cut the phosphorus tips off two boxes worth of matches, dissolved them in water, and drank the fiery liquid. She survived after treatment at the Hospital Juárez.[54] Phosphorus poisoning allowed time for the victim to be rescued or even have a change of heart.

MOTIVES AND SUICIDE

A social angst seemed to have settled over the Mexico City at the turn of the twentieth century. Newspapers and broadsides reminded residents of this cultural malady daily. What drove men to pick up a revolver and fire a shot into their body? What compelled women to swallow mercury cyanide and suffer a painful and gasping death? The reasons provided in goodbye notes and testimonies of those who committed or attempted suicide were clear-cut for women. Thirty-seven percent stated that they had been deceived in love. Twenty-eight percent claimed that *disgustos* (displeasures or conflicts) with a spouse, a parent, or another loved one drove them to end their lives (see table 6). Men blamed mental illness, deception in love, financial hardship, or physical illness; however, no particular motive claimed by men stands out as the most popular. From 1900 to 1930, dishonor drove three men and three women to suicide, but the motive did not always communicate deception. For men, dishonor could be a slight to their financial reputations. The majority of women clearly asserted that emotional strife caused by conflict with loved ones or deception in romantic relationships was the cause of their morbid impulse. Men killed themselves for emotional reasons as well. Only thirteen of the fifty-nine recorded suicides and suicide attempts with a recorded motive listed the male suicide motivations of financial hardship or physical illness.[55] Emotional reasons were the leading motivations for suicide for the subjects of this study. Adolescents with little life

TABLE 6 Reasons Reported for Suicide in Mexico City by Gender, 1900–1930

Reason	Men	Women
Deception in love	7	19
Disgustos	5	16
Mental illness	9	2
Tired or bored with life	5	6
Financial hardship	7	0
Dishonor	3	3
Love	5	1
Physical Illness	6	0
Death of a loved one	1	4
Despair or sadness	4	1
Moral failings	4	1
Alcoholism	3	1
Totals	59	54

experience may have felt lost love or public slights more deeply than older people. For example, in 1911, José Díaz claimed in a letter to Francisco Vega that he would rather die than live with a public assault on his honor. A cantina owner had called him a "petty thief without shame" (ratero sin verguenza) in front of several patrons. Díaz felt so much shame that he swallowed strychnine at his workplace.[56] The surviving suicide inquests from 1900 to 1930 in Mexico City mesh with the newspaper reporting on suicide. Unrequited love or deception in love was what drove most young Mexicans to suicide in this period.

Newspaper coverage of suicides had society believing that the very rich and the chronically idle were at a higher risk of killing themselves. Others who were likely to attempt suicide included those who were not able to achieve social mobility after they moved to the city from the provinces. The suicide inquest documents remaining in the national archive today rarely line up with newspaper reports on individual suicides. Newspaper editors found that the public was most fascinated by the suicides of prominent members of capital society or aspiring migrants from the provinces. Of the fifty-five cases that reported occupation, 38 percent listed the victims as artisans. Another 20 percent were identified as *empleados,* an expansive category that included civil servants, business employees, and the like. *Comerciantes* (traders or merchants) made up 18 percent (this group also had

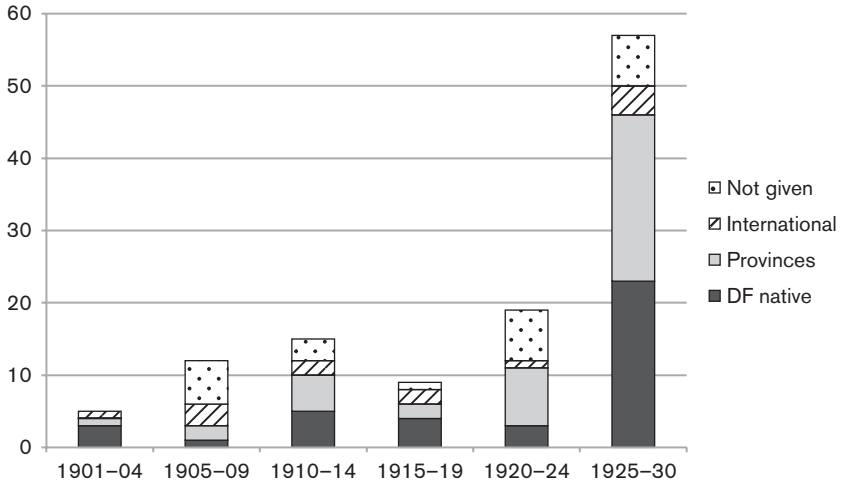

FIGURE 1. Suicides and attempted suicides in Mexico City by origin of victim, 1900–1930. Source: Suicide case files from 1900–1930, Tribunal Superior de Justicia de Distrito Federal, Archivo General de la Nación, Mexico City.

a 100 percent success rate at completing suicide). A smattering of students, professionals, soldiers, and unskilled laborers made up the remainder, 24 percent of the total.

Civil status also played a significant role in who might or might not seek self-destruction. Single men made up 76 percent of all cases. The birthplace or origin of suicides did not always make it into the documents. However, 93 of the 157 cases recorded origin. Although newspapers relished romanticizing the suicides of people that hailed from the provinces and were not able to achieve their dreams in the bustling city, in reality just as many Mexico City natives killed themselves as migrants. There was no marked different in the gender of native and migrant suicides either. However, as figure 1 demonstrates, there was some variation in the proportion of migrant suicides depending on the decade. For example, after the battles of the revolution had ceased, the number of migrant suicides outstripped the number of Mexico City native suicides. The revolution displaced rural inhabitants, especially those that had resided in villages to the north and south of Mexico City. Rural migrants flooded the capital, which saw little violence during the conflict aside from the Ten Tragic Days (La decena trágica) in 1913, when a military coup ousted President Francisco Madero and installed Victoriano Huerta. Fierce fighting broke out throughout the city, mayhem and looting ensued, and capitalinos strived to avoid stray bullets.

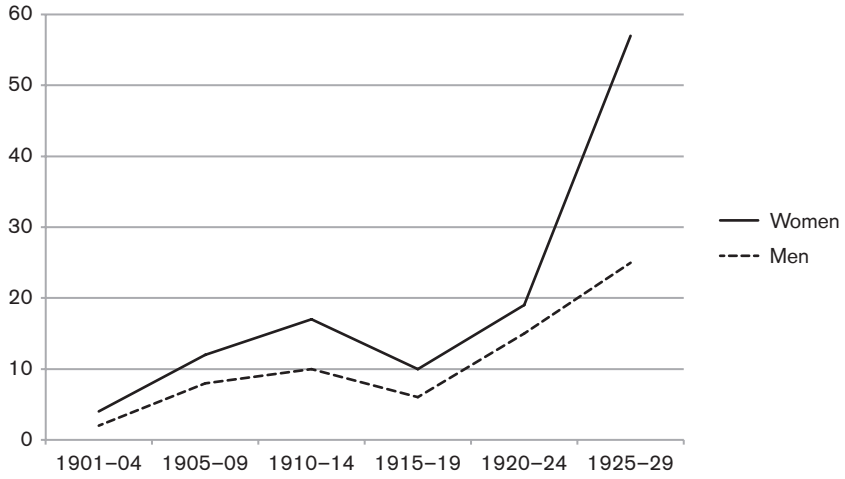

FIGURE 2. Suicides and attempted suicides in Mexico City, 1900–1930. Source: Suicide case files from 1900–1930, Tribunal Superior de Justicia de Distrito Federal, Archivo General de la Nación, Mexico City.

After a week and a half of pitched battles, residents finally had some peace, but the streets were filled with "rubble, jumbles of wire, dead horses, and dead people, and a harsh wind scattered dust and disease in all directions."[57] Migrants had been cut from their familial bonds and found themselves in a city teeming with strangers. Unrealized goals, the insecurity of daily life, and dislocation may have caused the spike in migrant suicides from 1920 to 1930. Figure 2 shows a spike in suicides after 1920, especially among women. However, the increase could be explained by the establishment of more careful archiving and the better preservation of inquests that followed the revolution, as the post-conflict peace allowed for orderly court business and recordkeeping.

Surviving archival records indicate that more suicides and attempts at suicide occurred in working-class and lower-middle-class neighborhoods of the federal district. Neighborhoods to the west and southwest of the central historical district housed more prosperous families, and these zones saw a smaller incidence of suicide than lower-class areas (see chapter 5 for a discussion of this). The greatest number of suicides hailed from barrios like Doctores and El Centro, two areas that had a majority of working-class residents. The newspapers reported plenty of suicides and attempted suicides among the more prosperous classes as well; however, inquest files have not been found for most of them.

MAP 1. Locations of suicides in Mexico City, 1900–1930. Map by Thomas Paradise.

CONCLUSION

The statistical conclusions in this chapter are based on available archival data and are thus not definitive. However, artisan, empleado, and comerciante were clearly aspirational occupations, and since 76 percent of all suicide investigations extant in the archive recorded victims as having these trades, there may be some credence to the notion that having one's chances for social mobility blocked could weaken the will to live. Mexico enjoyed material and social improvements after the revolution, but there were economic troubles in the country. Most artisan and middle-class workers could not secure mortgages to purchase houses in the modern housing developments that sprung up around the city. Although the revolutionary battles had ceased and Mexico had an elected president, the Cristero rebellion raged on from 1926 to 1929, and the Catholic Church encouraged economic boycotts. The Mexican economy started its downward decline in 1926, three years before the New York stock market crashed. By 1930, unemployment

had increased 350 percent, and the economy had contracted by one-fifth.[58] Daily pressures of securing a living must have confronted many capitalinos and led a fraction of them to seek a final exit. The eternal problem of love gone awry remained a constant through historical eras, and it especially affected women.

The government's decision to collect statistics on social problems like suicide, murder, and infant mortality also suggests that politicians desired to analyze social conditions in order to prescribe prophylactic measures to improve the moral and physical health of the social body. Statistics could also prove progress. Through keeping statistics, Mexicans would find that they were right to fear that suicidal impulses most infected the young. They would also discover that there were "seasons" of suicide for men and women alike. More generally, the collection of statistics fostered and legitimized public health campaigns to evaluate the capital's population and formulate social theories about the causes of mental illness or premature death.