

Article

Infrastructural Breaks on the Road from Birth to Death in Contemporary Russia

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Abstract: This paper addresses the problem of infrastructural breaks in two systems—the funeral market and maternity care. The authors analytically problematize how dysfunctions in the operation of these infrastructures shape the experiences of funeral and childbirth in contemporary Russia. The authors propose the conceptual model of the ‘rite of passage’, supplemented with the sociology of repair joint with the anthropology of infrastructures. Based on the ethnographic studies of the funeral market and maternity care (2015–2019), the authors uncover multiple infrastructural gaps and challenges that Russian families face while preparing for childbirth and funeral, especially in remote areas of the country. Empirical data of participant observations, in-depth and expert interviews demonstrated that continuous infrastructural failures can be considered to be an integral part of these life-cycle rituals, as both burial and maternity care arrangements never happen smoothly and unproblematically. In conclusion, the authors argue that necessity of “repairing” or patching the infrastructural gaps obtains self-sufficient symbolic meanings that possess ontological features.

Keywords: infrastructural breaks; sociology of repair; life-cycle rituals; funeral market; maternity care



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In 2015–2019, the authors of this article were independently working on their field research projects. They were separately devoted to the maternity care system and the funeral market in contemporary Russia. At a research workshop, the discussion revealed considerable similarities between research projects: our informants often mentioned their experience of interacting with an infrastructure that often malfunctioned, broke down, and produced uncertainty. For example, cemeteries were regularly flooded with water, refrigerators in morgues did not work, equipment in hospitals was out of order, and ambulance cars did not meet sanitary requirements. Moreover, our ethnographical observations confirmed what the informants said. The entire process of preparing for a funeral or childbirth requires the resolution of multiple infrastructural problems.

The symbolic significance of these events, which frame the entire cycle of human life, and their similarities (in that both deal with bodies and, inevitably, materiality) provoked us to jointly reflect on the following questions. What kind of impacts did persistent infrastructure dysfunctions have on the funeral/birth processes? How do persistent infrastructure breakdowns relate to the cultural understanding of coping? In this paper, we argue that permanent breakdowns and their elimination have symbolic meaning and have become part of the life-cycle rituals in contemporary Russia.

1. Theoretical Framework: Infrastructure, Repair and Ritual

We used several theoretical frameworks that complement each other and allowed us to explain how the repair of technical infrastructure can have symbolic meaning and be a part of a ritual.

Firstly, we refer to the classical conceptualizations of pregnancy, childbirth, and funerals in different forms and different societies as the ‘rites of passages’ (Van Gennep 1960, p. 11).

The key characteristic of these rituals, as Belgian anthropologist Arnold Van Gennep defined them, is their threefoldness: they start with the rites of separation, continue with the “transition” or liminal period itself, and end with the celebration of successful completion. Thus, rites of passage, in general, are conceptualized as ‘rites which accompany every change of place, state, social position, and age’ (Turner 1977, p. 36). Moreover, scholars have shown that the structure and function of these remain even in non-religious societies (ibid), and that ‘liminality’ concerns multiple and various cases of change and transition, both related to human lives and entire societies (Szokolczai 2009; Thomassen 2016). Our argument is that the arrangement and execution of the infrastructures of childbirth and death in modern Russia are such that they presuppose a prolonged state of transition, feeling of in-between, uncertainty, limitation of some social norms, and other properties of liminality. Thus, we aim to show that even without religious and sacred components, the organization and materiality of these processes turn them into the modern rites of passage.

Secondly are the theoretical developments in the anthropology of infrastructure. Infrastructure as an object of study was discovered by anthropologists more than twenty years ago, and it has since become a serious area of research (Larkin 2013), as evidenced by a large number of publications, as well as a separate issue of the journal *Cultural Anthropology* in 2015. Anthropologists have successfully shown how the construction of automobile roads can change the life of an entire city (Harvey and Knox 2015), the development of power lines played a key role in the creation of western states (Hughes 1993), and the emergence of the metro and railways led to the birth of a new type of urban dweller—the passenger (Hohne 2015). The infrastructural approach has been used in a number of works, e.g., to study the relationship between biopolitics and the pipeline in India (Anand 2012) and the role of the road in market relations in post-socialist countries (Harvey and Knox 2015). All works argue that infrastructure affects social life (Edwards 2002).

We can assume that infrastructure can influence not only everyday social practices but also more structural practices such as rituals, especially if we agree that in the modern world, previously sacralised (religious) rituals have ceased to be such and have become part of a more formal process. Researchers have already tried to show that rituals are associated with not only religious beliefs but also formal restrictions, including materiality. For example, Tony Walter described how different regulations of infrastructure ownership produce not only distinct institutional models of the funeral market but also different types of relationships between clients and representatives of the funeral industry, as well as construct the ritual practices themselves (Walter 2005, 2012). A similar approach can be found in the field of maternity care studies. For example, in several studies of pregnancy, maternity care, and midwifery in North America and Europe, Raymond De Vries and colleagues (2002) showed how care at birth has been shaped by state intervention, the organization of professions, and attitudes about and uses of technology (De Vries et al. 2002). The researchers argued that the ‘design’ of childbirth, on the one hand, is deeply rooted in existing political systems and cultural beliefs—hence conveying the core values of a society to birthing women (Davis-Floyd 2004, p. 2)—and, on the other hand, considerably determines the experiences of birth and comprises the set of material culture (Hennessey 2021), regular actions and ritualized practices on its own (Davis-Floyd 2004).

However, theoretical developments in the field of anthropology of infrastructure have demonstrated a number of compliance limitations that make the study of infrastructure dysfunctions complicated and that are not applicable in our cases. Thus, the anthropology of infrastructure assumes that objects exist in two conditions: ‘working’ and ‘broken’. Accordingly, the functional state is perceived as a kind of ‘normal’ state, while the dysfunctional one is not. It is taken for granted that socio-technical structures strive for ideal working conditions and the elimination of breakdowns. In our case, dysfunctions and failures are not only constant but also defining characteristics of the infrastructures. Informants considered failures as some kind of inevitable state of the infrastructure for which they were preparing.

Third, we propose to supplement the frameworks presented below with theoretical developments from the sociology of repair (Dant 2010; Henke 2000; Graham and Thrift 2007; Jerome and Pontille 2019). They allow us to consider the very process of repair or maintenance of material objects, including infrastructures, as a social activity that involves communication and exchange. For example, participants in the repair process know exactly who is responsible for fixing a particular infrastructure object, as well as who and how quickly can fix the breakdown. In this sense, the ultimate goal of the repair is not necessarily achievable because the participants can pursue their own goals based on their personal ideas and tasks (Dant 2010). As a special kind of activity, the repair process involves the formation of a specific social space or, according to Jan Chipchase, 'repair culture' (Chipchase 2005). Tim Dant notes that manual repairs have an advantage over industrial (automatic) repairs because they bring more communication into the process. Repair becomes an end in itself when the actors are not interested in the working condition of the facility and its technical serviceability. The repair process not only allows actors to communicate with each other but also builds a special regime of relations between them. We can say that such practices blur the objectivity of a thing. The normative rationality of infrastructure facilities does not matter anymore. The social meaning of interactions that arise in the process of infrastructure maintenance/repair does, though. In Goffmanian's understanding of ritual, such practices can receive their symbolic explanation from culture and everyday interpretation but not through direct indication. Moreover, A. Van Genep and R. Hertz described rites of passage, noting that they are always associated with difficulties that must be symbolically overcome (Hertz 1960).

As a result, we supplement the classical theory of 'rites of passage' with the analytical framework of the sociology of repair and the anthropology of infrastructure. Thus, using this conceptual framework, we look at the situation of maternity care and funeral services in contemporary Russia as social actions when participants actively interact with the infrastructure, trying to correct its condition and give it symbolic meaning.

2. Materials and Methods

We conducted our long-term ethnographic research in parallel. The study of the funeral industry took place in one of the central regions of Russia at a local funeral agency. It is a small private company, arranging no more than 40 funerals a month (a large company is considered to arrange more than 100 funerals a month). Within the framework of the fieldwork, this author was primarily interested in the influence of infrastructural factors on social interactions, expressed in the texts and actions of the key actors of funerals in relation to each other. Only actions that help carry out the burial of a deceased person were considered, including the problem of obtaining a body in a morgue and the need to comply with local traditional ideas about funerals. This is why employees of both the studied agency and other third-party actors, primarily competitors, local actors (workers of morgues, cemeteries, etc.), occasional participants in the funeral, and (of course) relatives of the deceased were recorded. This allowed the author to be included as a participant and observer to not only talk about the ethnography of a particular funeral agency but also describe and interpret the regional market for funeral services and its inherent funeral practices. Participant observation began in February 2016 and continued until March 2019. About a hundred different informal situations fell into the focus of research. All observations and many conversations were recorded in a field diary, but interviews were not recorded for ethical reasons and field restrictions. For this reason, the author of this article used entries from the diary.

The study of the maternity care system took place in two regions located in the central and north-western parts of the country in 2015–2019. The study was designed as a multiple-case study that considered a system comprising all medical institutions, providing assistance to pregnant women, women in labour, and new-borns within their areas as a case. The main method of data collection comprised in-depth, semi-structured interviews with medical professionals (midwives, obstetricians, neonatologists, and nurses) working

in such facilities ($n = 25$). One of the cases included observation carried out in a maternity ward (25 h), and the second one was carried out in another region in an antenatal clinic (60 h); also, the data were supplemented by observations of medical conferences, regional meetings of obstetricians–gynaecologists and neonatologists (29 h), expert interviews with representatives of different control and supervisory bodies, and patient and professional associations ($n = 8$). In addition, interviews with the families of young children (under 3 years old) living in remote settlements far from regional centres were conducted.

The interviews were recorded, transcribed verbatim, and underwent thematic coding and inductive analysis. Observations and interviews focused on the professional practices of doctors, nurses, and midwives caring for pregnant women, women in childbirth, and new-borns, as well as on the actions of healthcare managers aimed at maintaining the operation of the maternity care systems in remote districts. The fact is that obstetrics in Russia is extremely institutionalised and involves the mandatory medical supervision of pregnancy and hospitalisation at the stage of delivery, which is inevitably associated with the need to move between places of residence and medical centres. In some cases, the distance can be 100–300 km, and it involves frequent interaction with transport and hospital infrastructures.

Funerals and obstetrics are presented in separate paragraphs for the easier presentation of field material.

3. Funeral in Contemporary Russia: When Infrastructure Gets Out of Control

Contemporary Russian funerals usually take place in several stages. At the first stage, the relatives of the deceased choose a funeral company that will conduct the funeral. This stage also includes the purchase of necessary accessories, such as a coffin and included bed, a grave cross, wreaths, and their delivery to the place where the body is stored. The second stage includes the funeral itself, when the body must be taken from the morgue to the place of farewell (funeral service). Next, the relatives and the coffin with the body must be taken to the cemetery, where the coffin is eventually buried. The third and last stage consists of various memorial events. We have only described very general features of the infrastructure chain operation due to the limited size of the article.

A funeral and its preparation usually begin on the day of the death of a person and the last days until the body is buried. In addition to the selection of funeral accessories, the first and second stages address obvious infrastructure problems. For example, it is necessary to find a good place in a cemetery, make a decision regarding how the coffin with the body will be taken to the cemetery and carried to the grave, plan the route of the catafalque transport, and prepare the burial site. At this stage, one of the main tasks of the funeral company representative is to make sure that there are no unexpected overlaps in the procedure and nothing is out of order on the day of the funeral. The funeral procession must appear on time at all infrastructural points, i.e., in the morgue, at the place of farewell, and at the cemetery. At this stage, the first and most important feature of the Russian infrastructure environment—spatiality, or more precisely, the remoteness of all objects from each other in space—is manifested. A morgue, a cemetery, and a place of farewell can be located several tens of kilometres from each other. The path between the main points of the infrastructure takes most of the funeral time. The average time of a funeral (excluding the commemoration), according to the author's observations, is 3–3.5 h, of which the processes of the transportation and loading/unloading of the coffin and the body take at least two hours. The rest of the time is evenly distributed between waiting, a fairly quick funeral service/farewell, and burial in the ground. In addition to this spatial feature, it is necessary to note another specificity of the Russian funeral—time. The burial is performed within three days after death. In fact, the funeral agency should organise the entire chain of funeral logistics during such a short period of time. As a rule, there is not enough time to arrange any additional ceremonial actions, so the processes of preparing the burial site, solving infrastructure problems, and moving around replace the ritual itself.

Only today I realised that one of the distinguishing features of a funeral is the desire of relatives to organise everything in three days. Any attempts to delay or postpone the funeral lead to serious misunderstandings. Relatives are convinced that it must take three days, period. At each funeral, I watched the undertakers rushing headlong all three days to arrange everything properly and in time—morgues, cemeteries, digging a grave, hearses. Of course, it usually doesn't come to a discussion of the farewell ceremony. (Author's field diary, 12 June 2016; entry No. 99)

The first time and space reference, which the arrangement of the funeral begins with, is the exact time of the body release in the morgue. This issue is always negotiated in advance. The function of the funeral company is to ensure that the body will be released in the morgue on time (preferably at a convenient time) and without any cosmetic problems. However, most morgues do not have refrigerators or they are broken or full. This is one of the main services that relatives pay for, i.e., the body must be released without visible signs of decay. The funeral brigade provides the entrance of the hearse transport to the gate, where the body is handed over, and put in the coffin. The funeral company is a kind of intermediary between the morgue and relatives that ensures the “proper operation” of the morgue. A further schedule of the funeral is built around this time mark. The time of body delivery to the funeral service and farewell place, the route of the hearse transport, and the digging teamwork at the cemetery depend on when the body is handed over (and whether it is done on time). Any time shifts lead to serious costs.

We attended a funeral today. They started at 10 a.m., but in fact, ended at almost 3 p.m.—at this time the coffin was eventually lowered and buried. We waited an hour, if not longer, at the morgue, because Mr. N. did not want to pay money to the morgue for the release of the body. They had a conflict there again. As a result, the orderlies used the standard time-wasting practice—they say that the body is not ready yet. If you want it to be ready and released on time, you have to pay. Relatives went angry, because they spent an hour at the morgue, but in the end, everything was delayed. Eventually, they gave up, paid, and got the body, though. At the cemetery, they also had to pay again so that they could say goodbye to the body, rather than quickly bury it, as the diggers wanted. Everyone is in a hurry to do everything as quickly as possible. (Author's field diary, 18 September 2016; entry No. 135)

Contemporary Russian funerals imply that movement between infrastructure facilities (which is burdened by technical difficulties arising in the course of interaction) is necessary. The practices of transportation, choosing a route, and arranging funeral procession are associated with hearse transport as an infrastructure element. Trucks and vans are used for movement. A lack of road surface and severe weather conditions exclude even the possibility of using a sedan hearse because such a car simply would not be able to travel to most cemeteries. The lack of paved roads and communication paths between infrastructure facilities first led to the appearance of the truck hearse and then to the comprehension of long-term transportation as a necessary ritual action. As a result, in the case of contemporary Russia, it is the remoteness of infrastructural objects from each other and the need to get to each of them at a predetermined time that turn the funeral procedure into the process of the problematic transportation of the body between these objects, giving the road itself (or rather, the ‘path’ as a practice) structure-forming meaning.

The spatial and temporal characteristics of the infrastructure are closely related not only to the value of the road/path but also to infrastructure breakdown and repair. The many hours of movement of the funeral procession between infrastructural objects are spent solving problems of infrastructure dysfunction. The relatives of the deceased person consider the funeral procession to be a difficult but necessary obligation and the infrastructure problems as something natural. Such an approach turns the funeral into a kind of game quest when its participants have to solve difficult tasks at literally every infrastructure point in order to gain access to another one. One of these final points where local problems

are overcome is the cemetery. Using the cemetery as an example, the author uncovers some problems that the relatives of the deceased have to cope with.

Interaction with the cemetery as an infrastructure facility begins from the preparation for the funeral. Like the morgue, the cemetery is a must on the funeral route because a cremation service is not available for most residents of the Russian regions. The final cost of the funeral depends on the location of the cemetery, its accessibility for hearse transport, and the mode of operation.

One of the first questions that funeral directors ask when organising a funeral is: where will the person be buried? This is a fundamental point for several reasons. It is clear that, firstly, funeral directors are trying to understand whether it is possible to make money by mediating the sale, searching for a burial site, etc. But they are worried to a much greater extent about how much time it will take to get there, how to carry a coffin there, how to dig a grave there, etc. (Author's field diary, 16 May 2018; entry No. 87)

Digging a grave and preparing access to the burial site are the most important things to do in a cemetery. There might be several plans to follow. If the place is new, i.e., the deceased is not interred in an existing related grave, it is usually located in an open area. Accordingly, preparing the grave in this case can be complicated by the peculiarities of the soil and the potential for flooding with water. In this case, relatives need to find and obtain a place that will not be washed out by groundwater and floods. In addition, since 2011, sanitary standards have made it possible to dig a grave to any acceptable depth. In a number of cases, the author reported that the grave was dug to no more than 1.5 m deep (on the slope), which led to its crumbling and collapse. Therefore, it is necessary to choose a place where one can dig deep enough. The place should also be free of trees and have free access, and it is desirable that it be closer to the passage. If there is already a related burial nearby, the preparation of the site becomes more complicated. The process of digging a grave includes dismantling nearby fences, benches, and other objects that obstruct access. As noted above, the process can be complicated by the peculiarities of the soil, temperature, and 'burial history'.

Today they dug the grave for almost 5 h. They began early in the morning, at six o'clock. It was dark and cold, not to mention the fact that the cemetery was far away and you could not easily drive to it. With flashlights on their foreheads, they began to clear the place. The fence was moved so that they could approach it. Then, the top layer was hollowed with a crowbar <...> While digging the earth, they were coming across some bones, pieces of iron, and the gravedigger's most terrible problem—stones. Today they met a large cobblestone and barely got it out. It took them another hour. The bones were folded nearby. (Author's field diary, 3 January 2017; entry No. 153)

It should be noted that in most cases, municipal cemeteries are not registered in the cadastre, which means they are ownerless. Cemeteries are simply not looked after, and no one is responsible for what happens there. As a rule, even old and registered cemeteries do not pass requirements, i.e., no clear boundaries of burials, and even their number has not been defined. Sometimes this has led to paradoxical situations:

We were driving to the cemetery for 1.5 h along a country road, although it seemed to be located next to the federal highway. The graves in most cemeteries are located chaotically, they do not have a clear size and boundaries, and access to them can often be limited not only by fences but also by fallen trees, household rubbish, and simply by the features of the landscape. Paradoxically, the process of preparing the burial site includes even cleaning the path to the grave. On the way to it, you can break your legs in ravines, bumps, some incomprehensible trenches. There are no paths there. Those who bury the deceased in warm and dry weather are lucky. In the snow or in the downpour, it is impossible to walk there. It takes two days just to prepare the approach to it without starting digging the grave. I am watching them bringing special sand in order to sprinkle the path; otherwise, the relatives will fall on ice and snow. (Author's field diary, 3 January 2017; entry No. 154)

In a number of cases, the author managed to watch the funeral team transporting the coffin with the body in their arms because the hearse transport could not drive to either the grave or the cemetery, located in the depths of the forest, where the car risked skidding. There are also some other unexpected infrastructural problems that a cemetery can present. For example, a grave is always dug under a specific coffin. The width of the shoulders, i.e., the widest part of the coffin, does not matter less than its length. As already noted, there is no centralized production of coffins in Russia, nor is there a system for monitoring their quality and compliance with state standards. Therefore, coffins are often made in arbitrary shapes.

Thus, all activities in the cemetery must be closely monitored so that the infrastructure does not get out of control and break down. This belongs to the sphere of responsibility of the funeral agency, which has undertaken the organisation of the funeral, and the relatives, who must observe and control the preparation process. Relatives have a serious distrust of funeral companies based on the belief that they can firstly deceive and secondly overlook and miss something important that will affect the funeral. The cemetery is not unique in terms of possible infrastructural problems. They also occur in the morgue, where refrigerators fail and infrastructure capacity cannot cope with the flow of dead bodies, when the body must be transported to the morgue but state sanitary services may not have enough gasoline or cars to do this on time. The same happens with the installation of gravestone monuments when the earth crumbles and collapses because the coffin is made of plywood and is quickly squeezed under the weight of the earth.

The infrastructure of the funeral industry continually breaks down, turning interactions with it into a special practice. According to informants, this state of affairs is regarded, of course, as 'abnormal', and people complain about the appalling roads, cemeteries, etc. However, no attempts have been made to structurally change this situation; on the contrary, the symbolisation and even rationalisation of constant repair are ongoing: 'The completion of the funeral is regarded as a successful operation to deliver the deceased to the cemetery' (Author's field diary, 14 August 2016; entry No. 117).

4. The Infrastructure of Maternity Care in Russia

Spatial and temporal aspects are also significant characteristics of how the infrastructure of maternity care in Russia is arranged, although it has completely different timing. The 'preparatory' stage of childbirth usually lasts several months, but in some cases (for example, if it includes planning a pregnancy), it takes more than a year. Pregnancy monitoring is mandatory in Russia. As a rule, it occurs in budgetary antenatal clinics and includes a whole set of mandatory procedures and tests—observation by an obstetrician and other medical specialists, three ultrasounds, regular blood tests, and other check-ups. The very moment of childbirth, with the exception of planned caesarean sections, is an emergency situation requiring medical care in obstetric hospitals, and hospitalisation is often carried out via personal transport or ambulance (home births in Russia are illegal). With the exception of large regional centres, where there may also be private maternity homes, such hospitals comprise the maternity wards of district hospitals or perinatal centres. The last stage of maternity care is the return home of the mother with the new-born, which is not officially covered by insurance, i.e., it is organised not by state services but by young families themselves.

Thus, getting maternity care begins for rural women with the registration of a pregnancy with a local obstetrician-gynaecologist or a paramedic/midwife. Such a specialist is the main 'guide' in the maternity care system since he/she not only observes pregnancy but also determines the risk of complications, depending on which a woman can be referred to a facility of a certain level. According to the order of the Ministry of Health, there are three levels of maternity care in Russia. They are small (but closely located) maternity wards of the first level that provide assistance in normal childbirth, second-level institutions with more developed infrastructures of care (intensive care units and round-the-clock access of specialists) for certain types of pathologies and complications, and large maternity hospitals

or perinatal centres (third level) that are the most technically advanced hospitals located in regional centres and provide assistance for the most difficult cases of pregnancy and childbirth. Legally, a woman can choose the place of her childbirth, and it will be officially free for her. However, the arrangement of childbirth in a place of choice often presupposes personal negotiations with a maternity facility's staff in advance, and unofficial payments are involved in these negotiations in some cases. Hence, reaching the desired place is not always easy.

Well, on the day of birth we came to the hospital, I was about to give birth, I had labour pains, and it turned out that there was a man, Alexey Mikhailovich [it was his shift on that day]. Naturally, I was in panic [as she did not want to give birth with a male obstetrician]. I was lucky that an acquaintance of mine worked in the ambulance, so he brought me to Vypolzovo with those flashing lights on. As we arrived, we were asked, 'Why have you come?' It was just a few minutes past eleven and he [an obstetrician] said, 'Why on earth have you arrived? Couldn't I arrange it earlier?' I said, 'I don't know anything! I have a certificate, take me, I don't know anything'". (Interview dated from 14 August 2019 with a mother of three children who lives in Bologoye)

Although in the case described above, the woman had the opportunity to move to another facility and successfully did so, the network of maternity care facilities is not wide and pregnant women from remote areas prefer to get to the nearest institutions themselves in order to minimize the time and costs of travel. However, if a woman has been diagnosed with some kind of pathology or the risk of complications in childbirth is determined to be high, she will be obligatorily routed to the maternity facility of an appropriate level. Sometimes, women resort to the strategy of waiting until the last moment (i.e., the onset of labour) when their transportation will be assessed as more dangerous than giving birth in inappropriate settings.

He is handing in a referral to me [to the perinatal centre]. Well, all documents and that kind of thing. Childbirth should be within a week, so I tell him, 'I've said it. I'll give birth here' [the city the mother lives in]. But he started lecturing me. I started boiling, so I said, 'You don't want to take me, you are intimidating me! I'll come to you to give birth, I'll come with contractions, I'll wait until my water breaks'. Well, he said: "I'll send you there by ambulance!" And I replied: 'I'll start giving birth in the ambulance car, do you understand? And there is nothing, yes, there is nothing in your cars. They can't do anything in their ambulance cars, they hang by a thread. That's it'. (An interview dated from 14 August 2019 with the mother of three children who lives in Bologoye)

Mothers-to-be try to reduce the period of liminality (literally the transition between the place of living and the place of birth) because they are sure that the transport infrastructure is not safe and reliable. However, emergency hospitalisation in a maternity hospital is not always an intentional strategy for pregnant women that is used to end up in the hospital where they would like to give birth. Sometimes childbirth begins earlier than the expected date of delivery and even earlier than the date of planned hospitalisation. In such circumstances, the distance, the state of the transport infrastructure, and the equipment of the nearest maternity facility are decisive and vital for choosing the types of medical care to be provided and, consequently, critical for the condition of a woman in labour and her child. An obstetrician-gynaecologist, head of the consultative and diagnostic department with a mobile team of the perinatal centre, described the inadequacy of this infrastructure for assistance in emergency situations the following way.

We (in obstetrics) consider placental abruption as an absolute contraindication to transportation. Well, usually pregnant women die of that. It's a regional hospital, where there is no operating room and anaesthesiologist. Well, they have a gynaecologist there. They don't have the rest there, though. Imagine, the ambulance brought in a bleeding woman in labour. A diagnosis is a placental abruption. What's next? Do we call for air medical service? Now here's the real kicker because air ambulance is not teleportation. (...) So, if you need to go by air to a remote area in our country, the preparation... Well, I mean

by helicopter, of course. It'll take at least two hours. This time is enough to die twice or three times. Okay, let's go further... Well, let's say there is a doctor who can perform an operation. He can take an anaesthesiologist, but this does not mean that there is an anaesthesia machine on site, or there are sterile instruments in the operating room to be used in this case... I mean there might even be no opportunity to do that. (...) Therefore, they make the only possible decision to transport such a patient to the nearest facility where they can provide assistance. Well, the last case with such a patient was at the nearest hospital no further than the ninth of May, it's 50 km away from here. Well, naturally it ended with a caesarean section on a dead foetus because the foetus died during this time. (Interview dated from 15 May 2019 with an obstetrician-gynaecologist)

Key facilities in the obstetric care system are as significantly separated from each other as in the funeral system, and the transport system does not necessarily adequately compensate for these infrastructure gaps (both the network of the roads themselves and the availability of public transport). In the emergencies described above, this is critical and vital, but even during routine care, this state of infrastructure has significant impacts on the experiences of pregnancy and childbirth. Although women are legally entitled to choose the place of monitoring of pregnancy and delivery, their choice of a specialist or institution greatly depends on distance.

...we have an obstetrician [the city the woman lives in]. I mean, well, he can care for a pregnant, he does; but later he sends, decides where to send her. (...) I mean, I wanted to be going to see a doctor in Torzhok, who, well, I wanted to give birth to, but again, I would have to get there somehow. Well, it would take time. I mean, I would have to go there every two weeks, and it was really hard. So ... So, I decided to stay here. (An interview from 15 August 2019 with the mother of three children who lives in Spirovo)

Transportation during pregnancy and on the eve of (during) childbirth is an integral part of the entire maternity care system. Women and their families regularly have to not only move between key points but also build whole strategies on how to overcome significant distances between them. Thus, bad infrastructure is expected and understood as inevitable part of childbirth, and young families prepare to deal with this liminality by elaborating a kind of 'repair' or compensation of the infrastructural gaps.

It happened in the evening (November). It usually gets dark early here. The rain was pouring. And here there was no road at all. When they built that fish farm between Romanovo and us, they made an embankment, and only a tractor could run there. I foresaw those difficulties. So I put her (his pregnant wife) behind the wheel of Niva (ATV), and I took the wheel of the tractor. (...) I had to find a safe place for the car so that I could go on the road at any time. Here, if something had happened at night, I would simply not have taken her [pregnant wife] out at night in any way. No way. So, I hooked the car to the tractor and it started floating on this mud. (...) There were some stumps, some roots, dirt round me. I saw that everywhere through the windows. Well, finally I dragged it [the car] to Romanovo'. (Interview dated from 5 March 2019 with the father of three children who lives in the village)

Pregnant women and women in labour do not only encounter infrastructure faults arising during spatial movements. The obstetric care system has turned out to be extremely heterogeneous between different levels of institutions. Perinatal centres are the largest maternity hospitals that are exclusively located in regional centres and large cities, so patients there, as a rule, receive assistance in renovated (or recently rebuilt) premises that are comfortable and technically equipped. However, other institutions belong to maternity wards of the first and second levels, and their conditions can be very different—there might be dilapidated walls and old renovations of the late Soviet period, with common delivery rooms (where several women in labour can give birth at the same time), malfunctioning bathrooms, and other technical restrictions. One of the participants in the study described such conditions as follows.

[a woman after a caesarean section needs to find] two pairs of male hands to be taken to the second floor. No time for baths, which simply do not exist. But, humanly, they treat you well... although the conditions are awful ... (. . .) After giving birth, I could not take a shower because there was no one, although I really wanted to wash myself. There was a bidet with a broken tap. So I couldn't sit down on it just like I normally would... I couldn't do anything. I had to stretch my legs far apart trying to find a comfortable position. We would go with a bottle of water there (. . .) There was nothing on the second floor but toilets... (...) and no bidets. I mean, you wipe your upper body with napkins somehow or a wet towel. As for the lower body, you have to water it from a small glass jar because as you turn on that tap, the jet hits in an unpredictable direction. It was not a tap, but just a stream. (Interview dated from 4 March 2019 with the mother of one child who lives in Vyshny Volochyok)

The repair of devices and the invention of technical solutions, which compensate for the broken utilities described above, are integral to the experiences of birth, at least in women's narratives. It is noteworthy that poor infrastructure concerns not only the premises, living conditions, and technical devices necessary for the provision of maternity care but also the direct medical support of maternity units:

'Suddenly, there was a call. It was a local gynaecologist, He asked, 'I have an ectopic pregnancy. What should I do?' I said, 'What do you have to do? Start performing an operation.' He says, 'But we do not have an operating room. What to do?' Then he adds that they made a decision to take her to another place. Well, the nearest place is Bologoye (...) I say, 'Guys, the woman is generally not transportable. I'm going to call Bologoye.' I called Bologoye and said, 'Now they will bring you a patient with an ectopic pregnancy.' A woman on the other end answers me so casually. 'Well, so what? What's the point to bring her here? We don't have an anaesthesiologist, anyway!' (Interview dated from 15 May 2019 with an obstetrician-gynaecologist)

The data from the interviews, quoted above, show that both mothers-to-be and health providers perceived the not-working infrastructure of maternity care in remote areas as a regular (at least expected) state of the system. As previous research has demonstrated, the multiplicity of organizational and infrastructural gaps in maternity care provision comprise its intrinsic characteristics and have remained unchangeable even under multistage state reforms (Novkunskaia 2020).

5. Discussion: Overcoming in Russian Culture

In this article, we examined funerals and maternity care as non-religious systems, which are arranged in different ways and do not necessarily implicate symbolic and sacred meanings. Although the funeral industry primarily functions as a market and maternity care in remote areas mostly functions as state-funded service, we have shown that there are many similarities in the ways they work, mainly because the infrastructure is managed by the state in contemporary Russia in both cases. Such practices necessarily involve spatial transition, which quite often implies interaction with broken infrastructures and which we conceptualize as liminality. The need to constantly repair these breakdowns, although not designed, has become their integral part. Users of both systems expect that birth and death consist of multiple breakdowns. As we have argued, the need to repair broken infrastructure comprises the stage of transition itself and is thus symbolically functional. Thus, we show that the ritual can be framed not only by materiality but also by the peculiarities of its work: the state of normal functionality/breakdown is mediated by culture and technical dysfunctions are interpreted through symbolic meaning. In other words, it is important to consider not only the configuration of the infrastructure itself but also the usual modes of operation/interaction with it: the breakdown of the infrastructure may be necessary because it performs a function in the ritual.

How does repair acquire symbolism in rites in contemporary Russian culture? In her brilliant book 'Russian Talk', Nancy Ries describes how ordinary people talk to each

other, discussing the everyday difficulties of the Perestroika era. Ries notes that the central core of these conversations are complaints, which she calls litanies. 'Litanies are speeches in which a speaker expresses his/her complaints, grievances, anxiety about all sorts of troubles, difficulties, misfortunes, illnesses, losses' (Ries 1997, p. 164). Ries draws attention to the fact that litanies are built according to fairy tales, where the character, as a rule, is the narrator himself who encounters many difficulties; by overcoming them, he acquires the status of a hero. In the eyes of the narrator, even a simple trip to the grocery store turns into a brave adventure with an open ending. Ries believes that these discursive practices create the main communication environment of post-Soviet culture, where difficulties have become the desired state. We believe that the principle described in the litanies of Ries is also implemented in the practices of interaction with the infrastructures in contemporary Russia. Thus, we have answered our question regarding the impact of persistent infrastructure dysfunctions on the funeral/birth experiences in the following ways. The constant overcoming of difficulties or infrastructural breakdowns has become actualized in practices and conversations as something natural and has become the central element of narratives on funeral rituals or preparations for childbirth. Any failures in the life-cycle rituals in infrastructure require being smart, demonstrating the ability to handle them, and using the necessary social connections to solve them. As a result, the state of the infrastructure has become one of the codes of the life-cycle rituals in contemporary Russia.

6. Conclusions

We argue that contemporary Russian funerals and childbirths represent a specific format for the interaction of its participants with the infrastructural environment. As a result of this interaction, the problems of the functionality and accessibility of infrastructures are solved, wherein participants consider the dysfunctional infrastructure environment to be a natural condition. This has been clearly recorded in conversations between actors and ethnographic interviews. The problems that arise during the preparation and conduct of life-cycle rituals are actualised (and accepted) by the participants as special forms of necessary tests. For example, informants say that problems 'are everywhere, and they always existed—either the trees fill the cemetery, or the road is washed away, or the gravedigger is drunk' (Author's field diary dated from 14 August 2016; entry No. 117). The head of the League of Patients' Rights Defenders articulated the same problem with the following phrase: 'Well, let me put it this way, people don't want to complain. They might be afraid. I don't know. Or they are happy with everything, I can conclude that everything is fine'. These troubleshooting infrastructure failures are carried over to symbolic meanings. Informants describe this state as 'abnormal', but the constant 'repair' or patching infrastructural gaps is so total and possesses ontological features, which have led to the formation of a special 'repair culture'.

Infrastructure failure not only is a communicative function in the process of organizing a funeral or monitoring pregnancy and preparing for childbirth but also has an important symbolic meaning that turns funerals and obstetrics into full-fledged rites of passage associated with overcoming infrastructural problems.

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