

**Reconfiguring Borders:
Health-care Providers and Environmentalism in Cameron County, Texas**

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HEALTH-CARE PROVIDERS AND PRACTICAL ENVIRONMENTALISM IN CAMERON COUNTY, TEXAS

This essay explores the attempts of female health practitioners to communicate the connections between human health and the natural environment in Cameron County, Texas. Flew, et. al. (1999) argue that, globalization has brought an increase in the competition for cheap labor, depletion of natural resources, and cultural penetration from the west. They suggest it may also, however, open new possibilities for positive exchanges. Few people are so uniquely positioned to examine this phenomenon, as are residents of Cameron County, the southernmost county in the United States. Their experience in the borderlands offers a unique opportunity for understanding experiences and contexts from both a local and a global perspective.

Gloria Anzaldúa (1983, 1987,1990) envisions the possibility of moving along a continuum from geographical borderlands to *mestiza* consciousness, a perspective ideally suited to a world in which everyone lives in metaphorical borderlands. Following an overview of critical aspects of Anzaldúa's theory of borderlands, we explain our research method and offer a brief description of life in Cameron County. The bulk of the essay is devoted to a discussion of discourse elicited from women who have become involved in an anguished conflict over the connections between environmental pollution and human health in Cameron County. Their talk provides a nuanced analysis of the interconnections between people and the environment that sustains them at the same time it enriches our understanding of how communication practices contribute to the social construction of a border

consciousness.

Anzaldúa uses the physical U.S.-Mexican border as a metaphor for life. She argues that the most significant feature of borderlands is disorientation caused by the constant clash of different cultures, which are the result of arbitrary boundaries (1987). “Living on borders and in margins, keeping intact one’s shifting and multiple identity and integrity, is like trying to swim in a new element” (1987, preface). The need to compartmentalize the self is a characteristic of the dominant culture that is particularly problematic for those at the borders (1983, p. 205). She argues that the requirement for border residents to choose one of their multiple identities from which to speak probably constitutes the most powerful means of silencing (1990, p. xxiii). Anzaldúa recognizes that border inhabitants are complicit in their own silencing. She writes, “I have so internalized the borderland conflict that sometimes I feel like one cancels out the other and we are zero, nothing, no one” (1987, p. 63). The ensuing struggle out of nothingness entails a painful effort to create a *mestiza* consciousness. Despite the disorientation and pain, Anzaldúa insists “there is an exhilaration in being a participant in the further evolution of humankind, in being worked on. I have the sense that certain faculties . . . and dormant areas of consciousness are being activated, awakened” (1987, preface). The new consciousness energizes the border resident because it “comes from a continual creative motion that keeps breaking down the unitary aspect” of cultural paradigms. It enables a person to balance at the edge “where phenomena tend to collide. It is where the possibility of uniting all that is separate occurs” (1990, p. 379). Only those who internalize the borderland metaphor can “be a crossroads” (1987, p. 124) for an increasingly globalized society. Residents of Cameron County, Texas have opportunities to experience multiple cultures, beset with contradictory versions of reality each day. Their sense of

perspective and flexibility can suggest new possibilities for integrating concerns for human and environmental health.

Personal Interviews

The personal interview provides a powerful method for understanding how people order and assess their everyday world. Our goal in conducting the interviews for this project was to produce a text that would enable us to understand the social orientation Cameron County residents had negotiated, and continued to negotiate. Because we were concerned with the social construction of perspectives toward the environment, questions were designed to give them every opportunity to discuss their attitudes toward environmental issues. However, no question *required* them to discuss environmental issues. We wanted to know whether our interviewees considered the natural environment to be an important dimension of their lives, as well as how they characterized it. The interview protocol was, therefore, designed to encourage participants to tell the stories they chose to tell, with minimal outside direction (for a detailed description of techniques used to select interviewees, conduct interviews and analyze interview transcripts see Peterson, 1998).

We obtained appointments for initial interviews by telephone contact. If the person was willing to participate, a convenient time and location for the interview was arranged. We initially contacted some of the women as part of another project designed to learn how Cameron County residents conceptualized “sustainable development”. Most of our interviewees representing the medical profession happened to be women. Their sophisticated understanding of Cameron County’s systemic relations among science, economics and politics astonished us, and led us to seek additional contacts. We talked with physicians, nurses, midwives, a clinic manager and an

herbalist. All lived and worked in Cameron County, as well as serving as volunteers in various non-governmental organizations. Their ages ranged from early 20s to early 60s, with most falling between 30 and 50 years of age. Their ethnicity was mixed, and some found it impossible to define. All were proficient at English. All but two were equally comfortable conversing in Spanish. All interviews were conducted in English, however, because none of the interviewers were proficient at Spanish. All identified themselves as capable of influencing some aspects of their social system, yet frustrated by the limits of that ability.

We traveled to Cameron County several times, where we conducted interviews in locations ranging from hospital waiting rooms, to private offices, to herb gardens. Our interviewees determined the length of the interviews, with the shortest interviews taking thirty minutes and the longest over two hours. Over the course of approximately a year, we conducted additional interviews with all but one informant, and spent additional time in less formal activities with all informants. Depending on the participant and the season, our activities included participation in a family Halloween party, learning how to identify healthful native plants, and joining an annual beach cleanup. To facilitate coherence, Peterson participated in all initial interviews, with other research team members participating in various other aspects of the projects. At the conclusion of our data gathering, we provided all participants with copies of their formal interview transcripts and a summary report. We used fieldnotes taken while visiting Cameron County, proceedings and notes from public meetings, reports prepared by government and non-government organizations, and newspaper and magazine articles to contextualize our interviews and other observations.

Living in Cameron County

Cameron County, Texas, is the southern-most county on the border between the United States and Mexico. For retirees coming from all over the United States and Canada it is a paradise of western desert, northern, coastal, and tropical plants (Jahrsdoerfer and Leslie, Jr. 1988). Neotropical mammals, snakes, lizards, and salamanders and at least twenty-one bird species reach the northern limits of their range here. The Texas tortoise, long-billed curlew, and an unusual hypersaline-tolerant oyster population inhabit the tidal flats. About 700 vertebrate species have been identified in this region. The U.S. Fish and Wildlife Service maintains two traditionally bounded wildlife refuges (Santa Ana, and Laguna Atascosa), and a refuge consisting of fifty small tracts (Lower Rio Grande Valley) in the region. Santa Ana provides habitat for more endangered species than any other wildlife refuge in the United States; Laguna Atascosa was the location of the most recent ocelot and jaguarundi sightings in the United States; and Lower Rio Grande provides the beginnings of a wildlife corridor. Since the 1920s, however, more than 95 percent of the Lower Rio Grande Valley's native brushland has been cleared for development, and the rate shows no sign of slowing (Jahrsdoerfer and Leslie, Jr. 1988).

Cameron County is in the United States, but a guided nature walk through Santa Ana goes a long way toward dispelling the myth that political borders are impermeable. Our guide explained calmly that the damp undershorts we saw hooked in the thornbushes probably belonged to someone who had waded the river earlier that morning. Apparently it is common to wade across in the morning, change into dry clothing, then either remain for a few days, or return the same evening via the bridge. Neither people nor toxic substances respect the border. Instead, Cameron County residents drink water and breathe air that contain pollutants over which the United States government has no jurisdiction.

The crossing between Matamoros and Brownsville buzzes with around-the-clock activity. Some times are busier than others, and depending on their motivation, people assiduously avoid or seek out those times. Noisy lines of semi-trailors in varying states of repair belch diesel fumes. The downtown bridge has a festive air. U.S. residents wander across, fishing in their pockets for spare change to pay the toll. They return laden with tequila, vanilla, and trinkets for friends. Mexican residents return from Brownsville laden with bags bulging with those inexpensive groceries for which the United States is famous. Some eschew the bridge, preferring less public routes. Those eager for U.S. dollars find work around Brownsville, usually in the fields. Green cards are relatively easy to obtain, but they are not guaranteed. When holders of a questionable card are exposed to unsafe levels of pesticides and herbicides they cannot complain to a government agency. Instead, some of them appear unaffected, others get sick, and still others die.

Cameron County's average weekly wage in 1992 was \$362.00 (TDH-CDC, 1992). People move in and out rapidly, and many avoid the census. The Brownsville Independent School District, which is the county's largest employer, is overwhelmed with a steady flow of new immigrants (Selby, 1994). Compared to the rest of the United States, Cameron County residents have larger than average families, and smaller than average incomes. Education levels are lower, while chronic disease rates are higher. Brownsville, the county seat, lies directly across the border from *Matamoros, Tamaulipas*, Mexico. Brownsville is Cameron County's major population center, with at least 112,000 documented residents (TDH-CDC, 1992).

Maquiladora industries clustered in automotive, electrical, electronic, furniture, ceramics, textile, and chemical production promised to rescue Cameron County from its economic malaise

over a decade ago. The chemical industry has been, and is predicted to continue as, the fastest growing segment (Texas Center, 1990). *Maquiladoras* often failed to meet legal requirements for returning hazardous waste to the United States. For example, a review of Texas Water Commission records from January 1987 through June 1989 disclosed only thirty three of the approximately 600 companies operating during that time returning waste from Mexican *maquiladoras* (Texas Center, 1990). Since NAFTA, the plants are no longer referred to as *maquiladoras*, but they remain in business, and responsibility for international environmental regulation remains uncertain.

Cameron County became a media star in 1991 after a nurse informed the Texas Department of Health (TDH) that three anencephalic infants had been born in Brownsville within a 36-hour period (for a detailed account of media coverage, see Groenendyk, 1994). When TDH officials investigated, they discovered that six anencephalic infants had been born in the same hospital between 27 March and 21 May 1991. In the anencephalic fetus, the anterior end of the neural tube fails to close, resulting in either partial or complete absence of the brain. Anencephaly occurs during the first 16 to 26 days of pregnancy, and babies who are born with this condition die within a few hours (TDH-CDC, 1992). Because national rates suggest fewer than two cases per year should occur in Cameron County, the TDH contacted the Centers for Disease Control (CDC) in Atlanta, Georgia. The two organizations immediately launched an investigation of neural tube defects reported in Cameron County during the past three years (TDH-CDC, 1992). The final report was inconclusive. Based on recent studies of neural tube disorders in China, it recommended that TDH provide folic acid supplements to women of childbearing age. The only strong correlation found in the investigation was a previously

established positive relationship between low socioeconomic status and the occurrence of neural tube defects (TDH-CDC, 1992). Local medical personnel, including the nurse who had made the initial telephone call, were enraged by the report's apparent minimization of their plight.

Co-construction of the Border

The paradox of the border seeped into everyone's talk, whether they were long-time residents, or recent move-ins. The same people who claimed that the border defined their lives insisted in the next breath that it existed only in the minds of distant bureaucrats. Their discourse suggests that, rather than being nonexistent, the border has become a hyper-reality that creates a unique culture, alienating its members from other citizens of their respective nations and bonding them to each other. As Anzaldúa (1987) writes, "The U.S.-Mexican border *es una herida abierta* [an open wound] where the Third World grates against the first and bleeds. And before a scab forms it hemorrhages again, the lifeblood of two worlds merging to form a third country--a border culture" (p. 3).

All our participants stressed the interrelated concepts of border culture, complexity, and growth. They were alternately proud of, or shamed by, their status as a borderland, with its accompanying poverty, growth, migration, and cultural diversity. They also discussed the complexity of development, focusing on the complex relationship between natural and social systems. They spoke frequently of the chaotic nature of life in Cameron County, claiming that planning initiatives often failed because organizers were ignorant of life in a borderland. The border also exacerbated difficulties associated with human population growth. Many blamed uncontrolled growth for degradation of both human and environmental health.

Narratives drawn from our participants' discourse indicate a sophisticated understanding

of the complexity involved in living on the border. Everyone agreed that more knowledge was needed to cope with complex environmental problems. Most saw knowledge as developing out of some combination of science, education and experience. Those who talked about science viewed it as potentially helpful, but often harmful as used. Those who discussed education explained that it needed to be contextualized within local experience. Preferences for managing complex natural systems ranged from aggressive micro-management, to a completely "natural" approach. The range of preferences for managing human health was less broad, with even "natural" medicine applied in a very directed manner. The overall perception of growth was negative, although participants split over the valuation of industrial growth. Some labeled new manufacturing industry as positive because it expanded the region's economy. They were ambivalent, however, about whether industrial growth led to a net profit because it also increased the region's rate of human population growth, which meant that the recently expanded economy had to be shared among more people. They indicated that the number of people who had no ability to pay for needed infrastructure increased faster than the number of those who had that ability. Others found only harm in the county's industrial growth. None of our interviewees viewed the region's human population growth as a positive feature. Many had seen local and regional planning efforts overwhelmed by rampant increases in human population. Much of this discussion was related explicitly to border issues. All were involved in bi-national health care efforts, environmental plans, or education initiatives. Everyone described life in Cameron County as a process of negotiating border culture, complexity, and growth.

The women who shared their time with us were all involved to some degree in one of two organizations that were devoted to exploring the connections between the natural environment

and human health.¹ Two worked at the *Casa de Colores*, and three were founding members of the One Border foundation. Others volunteered whatever time they could.

The *Casa de Colores* is a converted farmhouse on a collective farm located in the southern corner of Cameron County. Patty Niño manages the farm and directs courses in midwifery in the converted bedrooms on the second floor. Her associate, whose name I was never sure of, teaches the section on herbal treatments and manages the aboriginal art museum on the first floor. During most of our visits to Cameron County we boarded at the *Casa*. I first saw Patty trundling a huge wheelbarrow overflowing with some sort of grassy material, crowned with a grinning toddler. The road ended at a substantial two-story farmhouse. This one was painted in brilliant shades of purple. As I stepped tentatively from my rental car, the toddler slid from her perch and ran to my side. We stared at each other until Patty and her wheelbarrow arrived. Patty spoke to her daughter in Spanish, then translated for my benefit. Then we met the museum curator. That evening I had my first lesson in herbal medicine from Gloria. The next time we spoke her name was Dolores and she demonstrated a dance form I had never seen before.

Niño became a midwife because she wanted “to present that traditional birthing experience that belongs to a family.” Midwifery provided her with a means for redirecting a society she feared was becoming increasingly alienated from the earth. She explained that, “it’s important for all communities to retain that understanding that our natural resources, all the raw materials come from the earth; that everything is made within the mother” (I1, R2). Niño assists women, particularly those who do not read or write in English, to register with the Texas Midwifery Board, so they are able to practice their craft legally. She also provides educational programs for migrant workers who have signed up to produce organic food on the cooperative

farm. Niño claimed her choices were based on “valuing the earth and trying to tread lightly. Water is one of the four elements. It’s sacred. The air is another element that is also sacred. And it feels really bad to me that people can violate those elemental things. So I ally myself with the people who are concerned that the health effects are going to continue” (I1, R32). Although I did not realize it at the time, Niño mentioned most of the other women who I would eventually interview.

Ramirez established the One Border foundation because the TDH-CDC study convinced her that without local control, human health research conducted in the Lower Rio Grande Valley would ignore environmental issues that were critical to human health in the region. After efforts to cooperate with TDH and CDC had failed, she attempted to sponsor independent research through the Brownsville Community Health Center, but discovered that the center was barred from certain activities because of its status as a federal grantee. In addition, the clinic relies on local support to obtain alternative funding necessitated by cuts in federal support. When Ramirez proposed that the clinic should sponsor further research on anencephaly, “those who are a part of the chamber of commerce, the Economic Development Foundation, and county officials and city officials were concerned that we were going to create such a ruckus with the research that the ability to bring in new industry and tourism was going to be killed.” Because the clinic “couldn’t afford to kill those relationships,” she decided to establish a “separate non-profit organization” (I2, R13).

Steiner, the nurse who had filed the original anencephaly report, also serves on the board. Participation in anencephaly research, even when supported by One Border, rather than by the clinic, angers some residents. Steiner described an incident that occurred in a “health committee

at the chamber of commerce." The Chair turned to her and asked, "if they have to do the study on anencephaly why don't they do it somewhere else? Can't they do it in Hidalgo County? They need to do it elsewhere." She rolled her eyes, then added, "And this is a *health* committee!" (I1, R33).

Steiner has spent hours going through hospital records searching for answers to the connections between environmental and human health. "We share so much," she declared. "We need to look at how we can work with *Matamoros* . . . because if you don't, you always are gonna be in a third world country. We're always gonna be dealing with that, because we're only bringing half the people up" (I2, R23).

When Brownsville's mayor repeatedly described anencephaly as "a Hispanic disease" (Terrell 1992), Steiner wondered, "are the genetics a part of the transformation of an environmental issue?" (I1, R28). She argued that, although Hispanic populations in Mexico and South America have a higher rate of anencephaly than does the U.S. population, this could be caused by environmental factors as easily as by genetics. Steiner pointed out that, even if neural tube defect rates from Mexico City provided a valid comparison, the conclusion that the victim's Hispanic heritage caused their higher rates did not necessarily follow. "Mexico City is not the cleanest city in the world either," she charged. Rather, "it's one of the worst environmental areas in the world" (I1, R29-30). "Maybe it's a lot of different causes that are happening; But let's find out what they are," she urged. "Let's don't just say, 'Oh, Hispanic. You're similar to Mexico City. That's the reason'" (I1, R31).

Maria Salazar, another nurse who volunteers with One Border, indicated that the only aspect of the situation that was "caused" by the high proportion of Hispanics in the population was the choice not to conduct extensive environmental monitoring. One factor that prevented

environmental monitoring was cost, and "if this anencephaly problem had happened in Austin, they would certainly pour a lot of money in there. But," Salazar asserted, the study was done at minimal cost "because it's on the border" (I1, R16).

Salazar explained that border existence had ironic consequences. Both people and natural resources move between *Matamoros* and Brownsville with relative freedom. "A lot of people from the States go to Mexico for their health care," she explained, because they "like the care in Mexico better." Others use Mexico's socialized medical system because they "don't have any money" to pay for care in the United States. Conversely, those who cannot "access the care there . . . come over here, [and] a lot of, umm, pregnant ladies would come and deliver over here so that a child would be an American citizen. And you know, if I was pregnant, and I could get across, I'd do it to. I'd do that for my child" (Salvador I2, R101-2). All this means that greater resources were needed on the border—the "no-man's land" claimed by neither Mexico nor the United States.

Susan Ramirez, a nurse at a local hospital, had grown up in Brownsville, married a Mexican national, raised her children near Tampico, Mexico, then returned to Brownsville. She works with One Border, as well as with several local environmental improvement organizations. She characterized the border culture as equally alien from Mexico as it is from the United States, noting,

we're part of the United States that's true; but we're kind of in a little line; a division line that's a little bit of Mexico, a little bit of the United States. This is kind of a no-man's land. And . . . for a while it was a forgotten land where people just kind of ignored us. (I1, R7)

She focused much of her conversation on living conditions among new immigrants. "You walk outside . . . their little shack," she explained, "and from about here to where that door is they will have an outhouse. And any time we have a lot of rain, the water level rises and the whole property is polluted" (I1, R13). Local business people, she maintained, have ignored this segment of the county's population because "it's not convenient that they have to be talking about the health problems here" (I1, R22). Others have said, "don't let them in schools. Y'know you've gotta get strict. You've gotta . . . build a wall. If you have to, arm it." Ramirez characterized her own perspective as more compatible with those who believe they have to "do something over there [in Mexico], . . . because that sort of thing [the wall] is not going to work" (I1, R228). Ramirez opposed NAFTA, but hoped it might remove existing obstacles to bi-national health care initiatives. She believed the existence of bi-national health care initiatives offered the only motivation that might be powerful enough to encourage Mexico and the United States to begin working together to protect the environment.

Ramirez discussed significant interconnections between human health and the broader environment. She claimed that, "if we get a cleaner environment, we'll probably have less health issue problems" (I2, R52). Later, she elaborated on this claim: "It's all interconnected; any way you look at it. It affects environment. Environment affects health. . . . All these things are interconnected" (I2, R307). Because she saw social and natural systems as intertwined, she believed that, "it has to be more of a holistic approach to this [health] problem. . . . We've got to talk to people from the agricultural department. We've got to talk to other people who are doing some great things that we're not even aware of—that we could probably help with in some way" (I2, R266). She used a simple analogy to illustrate the attitude of local business people who

refused to see the connection between industrial pollution and human health: "I mean you put two and two together and it becomes 4 for us [health care professionals]. But other people [local boosters], it's not convenient, it becomes a 5" (I1, R22).

Rosa Gomez explained her primary interest in Cameron County's development as a desire to sustain life in Cameron County, where "you have the Third World grasping at the First" (I2, R23). Gomez, who is a pediatrician, explained that she had become politically active in environmental issues because the TDH-CDC study convinced her that without local control, research conducted in the Lower Rio Grande Valley would not be serve the needs of border residents. She was not impressed by claims of scientific objectivity. "Why is it okay to include the guy from the public utilities board who says that the water inflow valve to Brownsville, Texas is nowhere near the *maquiladoras* [in the final report of the TDH-CDC study]," asked Gomez, "and it's not okay to include my statement, standing in front of the inflow valve, pointing at a *maquiladora*, saying `that's a *maquiladora*. This is the water intake valve'" (I1, R15). She accused TDH and CDC of using the precepts of epidemiology to further "their interests . . . in calming the public, first and foremost." She argued they were frightened of conducting an "investigation that might turn up some answers that may be hard to deliver" (I1, R15). Gomez resigned her position as medical director at a local clinic when a member of its board of directors demanded that she refrain from participating in One Border sponsored projects.

Straddling the Border

Our participants' discourse can help us understand how communication enables people to negotiate what it means to live in a borderland. They describe environmental issues as bounded by border culture, complexity, and growth. They articulate considerable hostility toward interest

groups they think have ignored these issues. At the same time, they express a desire to develop cooperative links among previously hostile groups of local residents. Although their discourse contains numerous statements we could critique as essentialist, patriarchal, and neo-traditional we are not motivated toward such a critique. Instead, we found their power contagious.

These women have taken advantage of chaotic border conditions to reject the sanitized account of development offered by technological experts. They offer an alternative narrative of life in Cameron County, negotiated through their own experience. They do not reject all notions of professional expertise. Instead, they offer a locally grounded perspective from which both residents and outside "experts" can invent a new understanding in order to achieve more community-validated environmental protection practices for the future.

Their most fundamental demand is that they be afforded more significant opportunities to participate in decisions regarding policy regarding their own lives. Our interviewees illustrate the sophisticated understanding of social problems possessed by many members of the lay public in their refusal to substitute a political boundary for an ecological one. They are not unaware of the difficulties involved in pursuing environmental policy at an international level. They refuse, however, to use these difficulties as an excuse to ignore fundamental problems. The Rio Grande forms a nucleus around which their region revolves. They insist that pursuing conflicting environmental policies on the river's northern and southern banks is irrational.

All borders are dangerous. Social structures are most vulnerable at their margins, because the very existence of a margin suggests another possible structure. The women of One Border and the *Casa de Colores* pose a threat to traditional development patterns at multiple levels. First, they threaten to re-direct public attention to the southern-most county in Texas, which

exists on the physical margins of both the United States and Mexico. In any culture, living on the border differs dramatically from living in the center. As boundary-spanners, our participants pose unique threats to the social system, for "the most dangerous pollution is for anything which has once emerged gaining re-entry" (Douglas, 1984, p. 123). Our informants insist on repeatedly violating this taboo. They transgress external boundaries in their insistence that environmental and human health concerns require bi-national initiatives. They transgress internal boundaries when they claim that knowledge gained through mundane experience, supplemented with their ethical and religious beliefs, provides more appropriate guidelines for development than do economics and technology. They argue that the rhetoric of economics and technology has perpetuated the logic of relegating pollutant production to the border. That border, however, is their center, if a center exists. Their rejection of the status quo threatens to disrupt both internal social relations, and relations between U.S. and Mexican interests. Their demand to be allowed a place at the table when policy is discussed is an attempt to reclaim the border as their center.

Maria Salazar's words at the conclusion of her second interview illustrate both the immediate and general utility of the border consciousness these women have developed. "I was never a fighter before," she said. "I mean I was just kind of real meek." She took a deep breath, then finished her statement, "but I think we need to be strong so I don't care what they think about me. I'll do whatever it takes" (I2, R147).

Notes

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1. Because our participants remain active residents of their community, we have used pseudonyms to protect anonymity. Interview excerpts are referenced to differentiate between the first and second interviews (I1/I2), and to indicate the response within that interview (R#).

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