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Title of Document: "WATCH WHAT HE CHEWS" THE

MATERNAL BURDEN FOR LEAD POISONING IN BALTIMORE, MD

Samantha Sloan DiNatale, M.S. in Geography

& Systems, 2025

Directed By: Dr. Dena Aufseeser, Associate Professor,

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This master's thesis takes a gendered lens in the examination of who has been historically blamed for Baltimore, Maryland's lead poisoning epidemic. Using mixed qualitative methods, I investigate how the framing of lead poisoning as a "slum" and "minority" problem in newspaper media contributed to harmful class-based and racialized narratives of maternal responsibility that painted the mothers of lead-poisoned children as "careless," "ignorant," and "neglectful." Such a form of scapegoating places the burden of preventing lead exposure on mothers, increasing their household labor, and overlooks broader contributors, such as lead companies and the inaction of state entities. This analysis highlights the need to challenge these narratives and reframe Baltimore's lead poisoning epidemic to shift away from the individualization of responsibility, contributing to more equitable and intersectional environmental health discourse.

# "WATCH WHAT HE CHEWS": THE MATERNAL BURDEN FOR LEAD POISONING IN BALTIMORE, MD

By

Samantha Sloan DiNatale

Thesis submitted to the Faculty of the Graduate School of the University of Maryland, Baltimore County, in partial fulfillment of the requirements for the degree of Master of Science in Geography and Environmental Systems

2025

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## Dedication

To the mothers of Baltimore City — your voices and your experiences matter.

## Acknowledgements

This endeavor was not a one-woman show. First and foremost, I would like to thank my advisor, Dr. Dena Aufseeser, for her guidance and patience as I navigated the weathered seas of graduate school for the first time. I also thank my committee members, Dr. Yolanda Valencia and Dr. Dawn Biehler, for their continued kindness, understanding, and dedication that shone through in every step of the process.

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Chapter 1: Toxicity, motherhood, and blame: A literature review

## Introduction

Thousands of years ago, the ancient Romans drew connections between identified metals and planets based on similarities in their characteristics. These metals, known now as the seven metals of antiquity, include gold, silver, copper, iron, mercury, tin, and lead. The latter, lead, became associated with the planet Saturn, seemingly due to their shared gray hue and, "as lead was heavy and dull, it was the least valued of all metals," thus making it the perfect match for the slowest and farthest planet from Earth (known at the time) (Habashi, 2008, p. 190; Almirantis, 2005). The seven identified planets also corresponded with and were named after a Roman god who shared their name.



Figure I: Francisco Goya's "Saturn Devouring His Son." c. 1820-1823.

A key story in Saturn's mythology was that he would swallow his children as soon as they were born to avoid fulfilling a prophecy that they would overthrow him (Berens, 2016). This action inspired Francisco Goya's eerie "Saturn Devouring His Son" (Figure I). As the god Saturn is infamous for devouring his children, lead is modernly known for a very similar act – poisoning the minds of children, permanently affecting their brains and development, and potentially causing a lifetime of strife. In other words, Goya's painting is representative of the harmful effects of lead, particularly in the context of children.

This master's thesis combines the historical and the contemporary to construct a narrative of mother-blame during Baltimore's lead poisoning epidemic. Through a mixed-qualitative methods approach, I explore the ways in which Baltimore's "slum" areas were associated with lead poisoning, and how that served to pathologize "slum parents" while obscuring the structural origins of lead poisoning. In Chapter One, I explore the historical and theoretical contexts of this project, drawing from an interdisciplinary set of literature: public health, environmental justice, social reproduction, and so on. Chapter Two highlights the importance of storytelling as I provide an overview of my selected methods. Chapter Three presents the findings of these methods: clippings from Baltimore City newspapers, interviews with lead poisoning professionals, and fieldwork visits. Chapter Four concludes this thesis by delving into the broader implications of this work before offering a series of recommendations for future research and efforts.

The following review builds up the literature that informs and contextualizes my master's thesis project. I begin with an overview of lead and frame lead poisoning as an environmental injustice, specifically within the context of Baltimore, Maryland. I then explore the role of gender with environmental justice, adhering to calls for more intersectional environmental justice literature. I conclude by exploring social reproduction to address my overarching argument that lead poisoning increases the work of mothers in the private realm of the home to protect their children.

## The insidious and ubiquitous life of lead

### A metal of modernity

Lead is malleable, anti-corrosive, easily available, and workable (CLEAR Corps Detroit, n.d.). These characteristics make this metal usable for countless purposes. The ancient Romans sweetened their wines with lead acetate – a "slow poison, this delicious syrup" – a trend also picked up by European nations in the eighteenth and nineteenth centuries (TIME, 1966; Needleman, 1999; Mai, 2006; Wani et al., 2016). The ancient Egyptians and Mesopotamians adorned their eyelids with galena, a darker form of lead, and, much later, the "nouveau riche" women in the post-Civil War era and actresses in twentieth-century America lightened their faces with white lead powder and enamel (Witkowski and Parish, 2001, p. 369). The women of ancient China and Rome consumed mixtures of liquid lead and mercury with the intent of using it as a contraceptive (Skuy, 1995; Brazan, 2018). Its main uses, though, rest in leaded paint, pipes, and gasoline. Here, I focus on lead paint as it is consistently the main source of human exposure, especially in Baltimore City (Jacobs et al., 2002; Maryland Department of the Environment, 2025).

Lead-based paints were popular as they were "easy to apply and highly durable; they held their color well, dried quickly, and resisted cracking" (Fee, 1990, p. 574). The first white lead business in the United States was founded in Philadelphia in 1804, with white lead becoming a major force in the economy as it was the main additive of lead-based paints (Rainhorn, 2013). Initially used on the exteriors of farms, homes,

and stores, it shifted to an interior use to accommodate the ever-growing urban regions (Reich, 1992). Leaded paint was not only used to cover walls; it was used on furniture, including cribs, toys, windowsills, porches, and more. Over time, lead paint falls from walls and other painted surfaces as sweet chips and dust, allowing for easy exposure (Fee, 1990).

#### A disease of childhood

Lead poisoning was initially thought of as an occupational disease, primarily affecting adults working as painters or smelters. Lead is incredibly harmful to the human body, even with small, trace amounts of lead, measured in μg/dL, having strong and long-lasting impacts. Lead can be ingested, absorbed, and/or inhaled, making for relatively easy exposure to the heavy metal (Wani et al., 2016). Among adults, lead poisoning can result in reproductive, respiratory, and/or neurological effects, in addition to heart, kidney, and nerve problems (Wani et al., 2016; Navas-Acien, 2007; Gennart et al., 1992). For those who are pregnant, lead exposure may increase the risk of miscarriage, affect the fetus's size at birth, harm the brain, kidneys, and/or nervous system, and/or cause developmental delays at birth (CDC, 2025). This vulnerability is unique to fetuses and children, which drove lead poisoning to gain traction as a "childhood disease." As young children are constantly developing, they are more susceptible to lead's long-term effects, including "damage to the brain and nervous system, slowed growth and development, learning and behavior problems, and hearing and speech problems" (CDC, 2024a; Lanphear et al., 2005). As science around lead developed, the Centers for Disease Control have

repeatedly lowered the blood lead reference value, which is used as a benchmark to identify children with elevated blood lead levels. The current "acceptable" amount of lead in a child's blood is  $3.5~\mu g/dL$  (CDC, 2024b). Therefore, if a child tests at  $3.5~\mu g/dL$  or above, they are medically considered to have lead poisoning. However, it is crucial to note that there is no safe level of lead in blood (ibid.). To reiterate, even small trace amounts of lead may cause irreparable harm to children.

In 2023, 363 Baltimore City children between the ages of 0 and 72 months tested at blood lead levels higher than 5 µg/dL (Maryland Department of the Environment, 2025). Baltimore City has the highest lead poisoning rates in the state, with hundreds of children in the city alone are testing at elevated levels every year. This demonstrates the need to continue to address lead poisoning.

### Tuck's (2009) desire-based framework

The aforementioned cognitive impacts of elevated blood lead levels branch into other aspects of a child's life. Lead exposure, even at lower levels, can lead to drops in IQ (Landrigan et al., 1975; Needleman et al., 1979). More specifically, early exposure to lead can drop an IQ from 2-7 points (Nation and Gleaves, 2001; Needleman and Gatsonis, 1990; Schwartz, 1994; Lanphear et al., 2005). Grandjean and Landrigan (2014) estimate that lead exposure contributes to an annual loss of more than 22.9 million IQ points in American children aged 0 through 5. Similarly, lead exposure is also associated with decreased performance on standardized intelligence tests (Canfield, 2003; Lanphear et al., 2005; Wasserman et al., 2003; Sorenson et al., 2019;

Magzamen et al., 2013) and with ADHD (Braun et al., 2006), childhood conduct problems (Needleman, 1996), and aggression (Olympio et al., 2010), among others.

On the other hand, though, adults diagnosed with lead poisoning as children are pushing to dispel these often-negative stigmas and associations. Angel King Wilson, producer of the Baltimore-based lead documentary "Hiding in the Walls," highlights the stories of multiple individuals poisoned as children, in part to display that lead poisoning survivors are not bound to the narratives pushed forth in the aforementioned studies. Despite being poisoned, adult survivors go on to carve their own paths forward, breaking through barriers placed upon them by academic and medical research findings. This draws in Tuck's (2009) desire-based framework, which acts as the antithesis to the damage-centered framework. Tuck (2009) defines the latter as scholars, whether it be intentionally or unintentionally, naming oppression as the sole definer of a community. A desire-based framework, then, draws on the nuances and complexities of humans and humanness beyond a focal point of damage. Rather than only focus on the harmful and lingering health effects of lead – which are assumed to relegate a child to academic and social failure – we must, as Tuck (2009) urges, "depathologize the experiences of dispossessed and disenfranchised communities so that people are seen as more than broken and conquered" (p. 416) – that is, explore the lives of survivors through possibility, hope, and futurity. In doing so, we honor their self-determination and resilience, rejecting narratives of damage in favor of ones that affirm life.

#### The undue influence of the Lead Industries Association

Despite knowing of these harmful impacts, lead companies banded together to ensure lead was continuously used in public and private spaces. They formed the Lead Industries Association (LIA) in 1928, whose key sponsors were The National Lead Company and St. Joseph Lead Co., with joining members including the American Smelting and Refining Co., Anaconda Company, Eagle-Picher, Glidden Co., Hecla Mining Co., and the Sherwin-Williams Co. (Reich, 1992; Rabin, 2008). The "central function of the LIA was to promote the sale of its members' products" (Rabin, 2008, p. 1585). While this became increasingly challenging over the course of the 20th century due to increasing awareness of lead's health impacts, the LIA utilized numerous strategies in defense of rising assertions that lead was poisoning America's children. In this section, I focus specifically on the efforts pertaining to lead paint.

Although to a limited extent, scholars have explored the strategies of the LIA to purposefully lessen their responsibility for the impacts of lead. Reich (1992) identified such efforts as "[opposing] regulation of lead, ...[minimizing] the significance of lead poisoning, and... [promoting] lead products" (p. 21). First, I briefly focus on efforts to oppose the regulation of lead and the promotion of lead products. The related National Paint Varnish and Lacquer Association (NPVLA), which included several members of the LIA, was a trade association with a "nationwide legislative committee in place" (Reich, 1992, p. 23). The NPVLA played a key role in lobbying against paint labeling laws or getting them repealed soon after they were enacted (Rabin, 2006; Markowitz and Rosner, 2013). These efforts were a

success in Baltimore, where a lead-labeling law was repealed in the first year of its enactment (Markowitz and Rosner, 2013). Alternatively, the LIA also focused on the promotion of lead paint. Gottesfeld (2022) identifies various LIA marketing themes, such as: "(1) the use of lead is 'modern' and 'advanced'; (2) lead is 'durable' and 'clean'; (3) lead is 'essential,' 'green,' 'sustainable,' 'low carbon' and 'responsible'; and (4) lead is safe because it is not banned and even is required under government specifications" (p. 724). Further, Rabin (2006) notes how ads often included imagery of infants and young children, "thereby implying that lead paint was a safe product" and not toxic (p. 4). For example, Figure II depicts "The Dutch Boy," a young and healthy character repeatedly utilized by the National Lead Company to depict lead paint as safe (National Library of Medicine, n.d.).

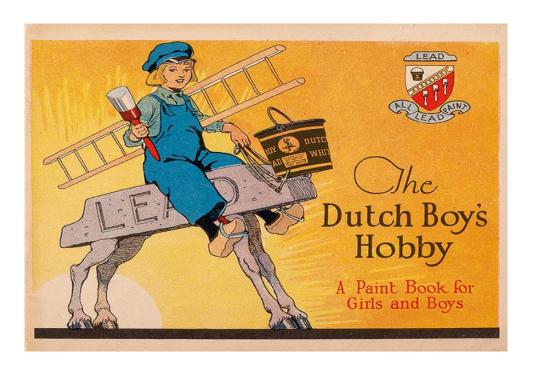


Figure II: National Lead Company advertisement for white lead paint, depicting "The Dutch Boy."

Courtesy of the National Library of Medicine. 1926.

I shift my focus now to the LIA's attempts at minimizing the significance of lead poisoning. The LIA "actively [funded] scientists and organizations that [downplayed] the hazards of lead and [published] favorable reports questioning consensus science or [placed] blame on nonindustrial sources of exposure" (Gottesfeld, 2022, p. 724). It is this latter point of shifting blame that is of particular interest to this review. Through claims made by the LIA, the organization sought to make lead poisoning an issue of "parental education," particularly for parents of color in "slum" areas. Manfred Bowditch, the Director of Health and Safety for the LIA, repeatedly shared sentiments through correspondence and reports expressing his view that "the problem of lead poisoning in children will be with us for as long as there are slums" (Chowkwanyun et al., 2018). Further, he goes on to write that "until we can find means to (a) get rid of our slums, and (b) educate the relatively ineducable parent, the problem will continue to plague us" (ibid.). Throughout the historical record, Bowditch emphasizes the importance of "[educating] the parents," though taking a racialized approach in stating "most of the cases are in Negro and Puerto Rican families, and how does one tackle that job?" (ibid.). Rather than assume responsibility for the lead poisoning epidemic, Bowditch and others at LIA shared sentiments that instead pushed the blame onto the parents of lead-poisoned children, a strategy that was highly successful. Lanphear (2007) summarizes it well: "For far too long, we chose to deny the burgeoning evidence about lead toxicity. Swayed by industry's expertly packaged arguments, public health officials and pediatricians found it

convenient to blame the consequences of lead toxicity on poverty, poor parenting, or pica" (p. 484).

In sum, "...the industry placed its own economic interests ahead of the welfare of the nation's children" (Markowitz and Rosner, 2000, p. 36). In other words, the lead industry sacrificed generations of American children to continue its profiteering. Through means of opposing regulation, promoting lead products with absolving thematic messages, and tampering with public perception of lead, strong and meaningful action against lead exposure would be delayed, allowing for the continued poisoning of generations of children. When examining just why it took so long for lead to be remediated, it is crucial that these aforementioned actions of the lead companies and the Lead Industries Association are blamed.

#### Lead (in)action

The efforts of paint companies inflicted delays upon actions by local, state, and federal agencies. However, it is also relevant to note that the public health efforts of the early 1900s were focused on "the individual rather than the environment" (Rabin, 2006, p. 4). The main preventative measures for lead poisoning throughout the 1920s and 1930s were public warnings and education programs (Fee, 1990; Rabin, 2006). Rabin (2006) cites the sentiments of Charles Chapin, a health commissioner of Providence, Rhode Island, throughout the early 1930s: "With minor exception, municipal cleanliness does little to prevent infection or decrease the death rate. Municipal cleanliness is no panacea. It will make no demonstratable difference in a

city's mortality whether its streets are clean or not, whether the garbage is removed promptly or allowed to accumulate, or whether it has a plumbing law'" (Chapin in Rabin, 2006, pp. 4-5). Rabin (2006) goes on to explain that, with "such a viewpoint it is easy to see why child lead poisoning was not seen as a public health problem, but rather one to be addressed by the individual child's parents and physician" (pp. 4-5). This notion of self-responsibility for health persisted for several decades.

The first major federal ruling targeting lead paint in the United States emerged only in 1978 when the U.S. Consumer Product Safety Commission banned consumers' use of lead paint in residential properties. Lead paint was also targeted in other federal policies and regulations, including the Toxic Substances Control Act (1976) and the Residential Lead-Based Paint Hazard Reduction Act (1992). States hold the power to craft their own regulations regarding lead paint. Maryland, for example, has a unique policy often looked at as one of the strongest in the country. This includes, but is not limited to, the 1994 "Maryland Reduction of Lead Risk in Housing" law, which was landmark legislation in part requiring all housing built prior to 1978 to be inspected for lead before it's rented (Maryland Department of the Environment, n.d.).

Over the past few decades, Maryland has efficiently partnered with various federal and inter- and intra-state agencies and non-profits to tackle the lead poisoning epidemic, contributing to a 98% reduction in lead poisoning rates in the state (Barry-Jester, 2015). However, early enforcement of Maryland's lead laws was weak and stalled (ibid.). The city's "lack of will for serious investment" affected the ability to

fund and execute lead-related programming (ibid.). This lack of action is an ongoing critique of the government's handling of environmental justice issues by environmental justice scholars. The following section will identify lead poisoning as an environmental injustice, contextualizing this assertion in the details of Baltimore's segregated history.

## A "legacy of indifference"

Tracing housing injustice in Baltimore City

In 1910, Baltimore City codified housing discrimination into law with Ordinance 610, becoming the first city in the United States to do so. This ordinance legalized segregation, prohibiting Black residents from moving into predominantly white neighborhoods and vice versa. Baltimore crafted this ordinance, which subsequently acted as a blueprint for other cities, with the intention of "preserving peace, preventing conflict and ill feeling between the white and colored races in Baltimore city, and promoting the general welfare of the city by providing, so far as practicable, for the use of separate blocks by white and colored people for residences, churches, and schools" (Baltimore, Md., 1911). The underlying reality of the ordinance rests in that:

"...many Progressives [agreed] that poor blacks should be quarantined in isolated slums in order to reduce the incidents of civil disturbance, to prevent the spread of communicable disease into the nearby white neighborhoods, and

to protect property values among the white majority" (Power, 1983; p. 301).

Although rendered unconstitutional by the Supreme Court in 1917, white Baltimoreans found other ways to maintain segregation, such as in the form of racially restrictive covenants (Friedman, 2010). These covenants, often instituted by developers, barred African Americans from leasing, purchasing, or residing in the homes the developers themselves built. Despite making up 20% of the population in 1930s Baltimore, African Americans only occupied 2% of its land area (ibid.). This form of racial zoning, which was entirely government-sanctioned, was soon followed by redlining, an infamous practice utilized by the Homeowners Loan Corporation (HOLC).

Founded in 1933 as a way to reinvigorate the economy post-Depression, the HOLC was intended to "protect the small homeowner from foreclosure, relieve him of part of the burden of excessive interest and principal payments incurred during a period of higher values and higher earning power, and declare that it was national policy to protect homeownership" (Jackson, 1985, pp. 195-196). In other words, the HOLC was to aid those with mortgages, so homeowners did not have to foreclose on their properties. To do this, the HOLC made security lending maps that color-coded neighborhoods in cities across the United States in a ranked system that ranged across four categories: A/best (green), B/still desirable (blue), C/definitely declining (yellow), and D/hazardous (red). However, in this map-making process, the demographics of those living in these neighborhoods played a greater role than

housing structure (Jackson, 1985). For example, the Mount Clare to Druid Hill area was listed as "hazardous," with its detrimental influences being "obsolescence" and a high "concentration" of African Americans (Nelson et al., 2023). Baltimore's southern peninsula was deemed "hazardous" in part due to an "infiltration" of African Americans (ibid.). These labels persist across time. In Baltimore, 69% of these once labeled "hazardous" neighborhoods are now low-to-moderate income and/or minority neighborhoods (Mitchell and Franco, 2018). Pickett et al. (2023) characterize the redlining maps as "emblematic of the decades of discriminatory and segregationist policies" (p. 793). The Federal Housing Administration's actions further perpetuated the HOLC's discriminatory policies.

The Federal Housing Administration (FHA), established in 1934, was supposed to "encourage improvement in housing standards and conditions, to facilitate sound home financing on reasonable terms, and to exert a stabilizing influence on the mortgage movement" (Jackson, 1985, p. 203). Simply put, the FHA would insure loans for Baltimore residents to build their own homes and lower mortgage costs by partnering with private lenders. However, the FHA's policy of "economically sound" loans was interpreted in such a way that the agency avoided granting loans in core urban neighborhoods, locations in which Black residents had already been restricted by previous practices" (Pickett et al., 2023, p. 793). The FHA did not insure loans given to Black residents and only aided white homeowners. The FHA solidified its legacy as one that contributed to the "decay of inner-city neighborhoods by stripping"

them of their middle-class constituency," this constituency having moved to an economically and racially segregated suburbia (Jackson, 1985, p. 206).

In reviewing the work done by the HOLC and FHA, "neither program was tasked with defying the existing patterns of segregation, and neither did" (Rose, 2022).

While the HOLC reflected discriminatory beliefs of the time, the FHA acted on them, perpetuating patterns of segregation that persist in the modern day. The HOLC and FHA effectively shaped Baltimore into a hyper-segregated city. In describing the demographic patterns of Baltimore, Dr. Lawrence Brown (2021) coined "The Black Butterfly and the White L." A majority of Black Baltimore residents live in the "butterfly," while a majority of white Baltimore residents live in the "L." The conditions of the "Two Baltimores" differ sharply (Brown, 2016). The disparities between them include underfunded public schools and public transportation in the Black Butterfly compared to the White L (ibid.). It is clear that Black Baltimoreans were devalued and "discarded" into their own spaces with high concentrations of poverty and poor housing conditions, essentially abandoned by their white neighbors and their government (Pulido, 2017).

As a result of the aforementioned forms of housing discrimination, Black families were forced into inner city housing, which comprises older housing stock. Baltimore "has one of the largest inventories of old housing stock of any major city in America" (Maryland Department of the Environment, 2020, p. 19). As the residential use of lead paint wasn't federally banned until 1978, homes built before then pose a

significant risk of lead exposure. Thus, Black children face a disproportionate exposure to lead hazards. Wheeler et al.'s (2019) study measuring lead levels in Maryland found that the strongest socioeconomic factors that played into higher levels of lead exposure were the percentage of homes built before 1940 and the percentage of the African American population. In Aning (2022), Barbara Berney highlights the connection between data on housing stock and population demographics:

"Lead poisoning resulted from bad housing conditions. Blacks were forced into bad housing by discrimination. The housing was allowed to deteriorate by gouging landlords and city housing officials, who did little to eliminate the problem or protect the health of the children affected."

Policies of racial zoning, racialized covenants, and redlining, in tandem with white flight, drove Black residents into precarious housing situations. Their mobility was rendered nonexistent, and they were trapped in "internal colonies" where the government employed "politics of abandonment," allowing for infrastructure to crumble and communities to slowly be poisoned by lead as lead companies were able to continue reaping a profit (Pulido, 2017). The government and elected officials failed to be proactive and left a "legacy of decades of indifference" (Haner, 2000). Baltimore's lead poisoning epidemic must be treated as an environmental injustice.

## Gender and environmental justice

## History of environmental justice

The fight for environmental justice in the United States began with conflicts between Indigenous groups and colonizers over Indigenous land. However, protests in predominantly Black, rural, and low-income Warren County, North Carolina, over a proposed polychlorinated biphenyl (PCB) landfill in the late 1970s and early 1980s are commonly considered to be the onset of the modern environmental justice movement. Groups across space and time have struggled against governmental entities and industries/corporations in the quest to be free of "bad" environmental disamenities (i.e., toxic/polluting industries). Environmental injustices occur when there is a disproportionate exposure to these disamenities, often along lines of race and class, with marginalized groups facing a greater burden. Further conceptualizations of environmental injustices include a lack of access to "good" environmental amenities (i.e., green spaces) and/or differing perceptions of what it is an amenity/disamenity (Buckley et al., 2019). On this latter point, Buckley, Boone, and Lord (2019) state it is "good practice to exercise caution before concluding that a particular section of the city or segment of the population is suffering from an environmental injustice, or, conversely, it is benefiting from an equitable distribution of something we value" (p. 62). These same marginalized groups do not often get included in the decision-making processes as to where these amenities or disamenities are placed. It is important to note that these communities are not merely defined by

the presence of environmental injustices; as Tuck (2009) suggests, these communities are more than just "damaged" – there is joy and living beyond injustice.

Protesters in Warren County accused the state of selecting the site due to the county being poor and predominantly Black (The Washington Post, 1982). Five years later, in 1987, the United Church of Christ published a landmark study affirming these assertions, finding that "race proved to be the most significant among variables tested in association with the location of commercial hazardous waste facilities" (Lee, 1987, p. xiii). The study also found that socioeconomic status was a variable with a level of influence, although to a lesser extent (Lee, 1987). Environmental justice scholars have since investigated the power of race and class in determining environmental injustices (Pulido, 2016, 2017; Faiver-Serna, 2021; Vasudevan, 2021; Hinze and Chrysochoou, 2024).

Examples beyond that of Warren County include sea-level rise displacing Black, Georgian coastal communities (Hardy et al., 2022), Indigenous Californian groups being barred from accessing ancestral lands to tend to and gather traditional basketweaving material (Dent et al., 2023), and lead-infected water poisoning the poor, Black, and often youth population of Flint, Michigan (Pulido, 2016). These examples do not serve as an exhaustive list of environmental injustices perpetrated against communities across the United States. Instead, they represent disproportionate exposure's deeply pervasive, shape-shifting, and multi-scalar nature.

### Critical environmental justice

The environmental justice field continues to grow and evolve due to its comparatively newer nature. Brulle and Pellow (2005) coined the "critical environmental justice (CEJ) framework," building upon the work of countless scholars engaging within CEJ before it had an explicit name. Scholarly works and fields that informed the CEJ framework can be found in Table I (Pellow, 2016). The framework responds to "limitations and tensions within EJ Studies" (Pellow, 2016, p. 3), which address intersectionality, scale, the role of the state, and dispensability. The first pillar of CEJ is of particular interest to this review, bringing forth "questions concerning the degree to which scholars should place emphasis on one or more social categories of difference (e.g., race, class, gender, sexuality, species, etc.)" (Pellow, 2016, p. 3).

Field	Scholarly work(s)		
Environmental Justice Studies	Adamson, 2011; Bell, 2013; Bullard, 2000; Cole and Foster, 2000		
Critical Race Theory	Goldberg, 2002		
Critical Race Feminism	Hong, 2006; Smith, 2015		
Ethnic Studies	Márquez, 2014		
Gender and Sexuality Studies and Ecofeminism	Buckingham and Kulcur, 2010; Gaard, 2004		
Ethnic Studies	Bennett, 2009		
Anti-Authoritarian/Anarchist Theory	Scott, 2010; Smith, 2011		

Table I: Fields and scholarly works David Pellow credits as having inspired his critical environmental justice theory (2016).

"And" not "or" - origins of intersectionality

Kimberlé Crenshaw is known to have "coined" the praxis of intersectionality via her articles "Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics" (1989) and "Mapping the Margins: Intersectionality, Identity Politics, and Violence against Women of Color" (1991). In the former article (1989), Crenshaw explored the discrimination against laid-off Black female General Motors employees by highlighting the court case DeGraffenreid v. General Motors. The plaintiffs of this case, who were all Black women, were forced to choose whether they were discriminated against on the basis of their sex or their race. The plaintiffs, though, argued this was a case of sex *and* race discrimination, which the judge denied. Crenshaw thus urges readers to "consider an analogy to traffic in an intersection, coming and going in all four directions... If an accident happens in an intersection, it can be caused by cars traveling from any number of directions and, sometimes, from all of them" (Crenshaw, 1989, p. 149). Rather than solely assess oppression through individual traffic lanes (i.e. "or"), Crenshaw calls for bringing in additional lanes to assess the "accident" (the "and") – intersectionality. Ryder (2017) emphasizes the importance of intersectionality, stating "when we fail to account for how these interlocking systems work to oppress people, we omit people's complex experiences of oppression...as a result, we are not able to adequately address and redress those who have been subordinated" (p. 86).

However, to assert that the history of intersectionality began with Crenshaw would erase the work of countless women of color who have been "doing" intersectionality in the century prior to Crenshaw's work (Collins and Bilge, 2016). While intersectionality's theoretical underpinnings are derived from Black feminist thought (such as, but not limited to, Black Feminist Thought: Knowledge, Consciousness, and the Politics of Empowerment by Patricia Hill Collins (1990), Women, Race, and Class by Angela Davis (1981), The Black Woman, ed. by Toni Cade (1970); Double Jeopardy: To Be Black and Female by Frances Beal (1969); Combahee River Collective's "A Black Feminist Statement" (1995), "Ain't I A Woman" by Sojourner Truth (1840), A Voice from the South, By a Black Woman of the South by Anna Julia Cooper (1892)), Chicana and Latina women, Indigenous women, and Asian-American women have long drawn attention to the racism they faced in feminist movements (Kohl et al., 2025; Crenshaw, 1991; Collins and Bilge, 2016). In addition to being a theory, intersectionality is also a lived experience; "people's multiple social identities affect their lived experiences in both specific place-based ways and relationally across time and space" (Kohl et al., 2025, p. 109).

Thus, I am interested in heeding Pellow's (2016) calls to examine the ways in which intersectionality affects lived experiences with environmental justice. Beyond race and class, scholars have also investigated how lanes of (dis)ability (Jampel, 2018; Chakraborty et al., 2019), age (Day, 2010), spirituality and religion (Cladis, 2019; Al-Kohlani and Campbell, 2021), and (im)migration status (Ybarra, 2020; Hernandez et al., 2015), to name just a few, have shaped experiences of environmental justice. In

this review, I focus on emphasizing the role of gender in my analyses of environmental justice.

Gender, race, and class in environmental justice activism

Although their presence in activism has largely been obscured from historical narratives, women have been widely involved in movements relating to social justice (Gardner et al., 2024). More specifically, women of color have and continue to make up the frontlines of the environmental justice movement (EJM) in the United States (Bell, 2016; Brown & Ferguson, 1995; Gottlieb, 2005; Krauss, 1994; Perkins, 2012; Stover and Cable, 2017; Peeples and Deluca, 2006). Through their participation in social clubs, middle-class Black women sought to improve "sanitation and municipal housekeeping" in Progressive-era urban spaces (Stover and Cable, 2017, p. 687). In the early 1980s, Dollie Burwell was key in acquiring the church's support in mobilizing efforts against the PCB landfill in Warren County (Lattimore, 2023; Togami and Staggenborg, 2017). At the same time in Chicago, Hazel Johnson founded "People for Community Recovery," which sought to address the elevated cancer rates in her community of Altgeld Gardens, which was built on top of a toxic waste dump (Lattimore, 2023). Considered the "mothers of environmental justice," many women of color have followed in the footsteps of Burwell and Johnson (ibid.).

Prior to exploring further examples of EJ activism by and for WOC, I must emphasize the various forms of activism undertaken in communities across the United States. Due to state failures in achieving meaningful change for EJ

communities, said communities engage in both quotidian and spectacular acts of resistance to ameliorate the injustices they face (Bruno, 2024; Milligan et al., 2021). Bruno (2024) critiques environmental justice scholarship for "essentializing Black life" to what she calls "sensational" or "spectacular activism," or bigger acts, such as "protests, litigation, and grassroots movement building" (pp. 75, 78). Kohl and McCutcheon (2023) reinforce this point, claiming that "many societies teach people to listen to those who are the loudest, socializing them to speak up for themselves and use their voices to convey their message" (p. 157). However, Bruno (2024) urges an increased focus on "quotidian, everyday acts for Black life and futurity" (p. 78). This includes acts of caring (i.e., developing mutual aid organizations in the face of environmental disasters, such as Hurricane Katrina (McKane et al., 2023)) and refusal (i.e., remaining in place, despite threats of polluting industries) (Bruno, 2024). Forms of care and refusal work to achieve two means of Black living and futurism: (1) "shaping an ecosystem of care [makes] livable possible in 'unlivable' spaces" and, (2) "if we reframe our understanding of 'resistance' and 'agency' within EJ to position the very act of building connection to a place, desiring for your family and future generations to inhabit and build their own connections to this place, and staying put because it is home – as acts of refusal to be denied such possibilities for yourself and for future generations" (Bruno, 2024, pp. 83-85).

With these different forms of activism in mind, I now highlight the efforts for environmental justice by women of color across the United States. Kim (2021) writes of Latina and Asian American immigrant women who utilized emotional politics and

"disquiet" to fight against the BP Arco oil refinery in Los Angeles, California, which was driving cancer-related deaths and childhood asthma rates, among other health impacts, in surrounding communities. Dennis and Bell (2020) highlight how Indigenous women were at the forefront of the movement that sought to protect the land threatened by the Dakota Access Pipeline (DAPL) in North Dakota, through means of ceremonies and nonviolent civil disobedience (p. 381). Kohl and McCutcheon (2023) outline the "quiet acts of refusal" of the Newtown Florist Club, founded and run by Black women in Gainesville, Georgia, who tend to those who are sick and dying in the community and act as flower bearers during funerals. Due to these consistent acts of care, the Newtown Florist Club was able to draw linkages between the similar causes of death for Gainesville residents and the high number of polluting industries in the area, broadening their focus to include issues of environmental justice. Additionally, White (2011) draws attention to Black women's use of urban gardening in Detroit, Michigan, as a form of "self-reliance and selfdetermination" in the face of food apartheid (p. 19). Beyond grassroots activism, African American women are working from within the state at the U.S. Environmental Protection Agency to address issues of environmental injustice (Kohl, 2019).

The activism and professional work of women of color have transcended space and time as they fight for healthy living conditions for themselves, their families, and their communities. In the next section, I will explore potential motivations for action,

including the contradictions inherent in identifying women as activists while also reaffirming their roles as mothers "who should care."

#### Women's motivations for activism

Studies of women's motivations for participating in the EJM have largely equipped the "traditional environmental justice narrative," or "maternalism"/ "the motherhood effect" (Perkins, 2012; Stover and Cable, 2017; Togami and Staggenborg, 2017).

Scholars argue that women, and mothers in particular, are uniquely positioned in the private sphere to observe and experience environmental injustices, especially when they manifest in health issues (Brown and Ferguson, 1995; Stover and Cable, 2017).

Seager (1996) notes that:

"Because women, worldwide, still have primary responsibility for feeding, housing, and childcare, they are often the first to notice when the water smells peculiar, when the laundry gets dingier with each wash, when children develop mysterious ailments – or they are the first to worry that these assaults in family safety and health are imminent" (p. 280).

Thus, Perkins (2012) characterizes the "traditional environmental justice narrative" as when "apolitical women personally experience a specific environmental problem and are motivated to become activists in order to protect the health of their families." This narrative has three key implications: 1) women have no prior political experience; 2) they have to experience the problem they're fighting against themselves; and 3) they

become activists as an extension of their role as housewives/mothers (Perkins, 2012). An example of this narrative includes Lois Gibbs, a white housewife and mother who is well-known for her activism in the neighborhood of Love Canal, which was built on top of a toxic dump site. She leveraged her status as a housewife and mother as she fought for non-toxic schooling and housing for her son. These roles, though, were also used against her as her concerns were discredited, and she was labeled a "hysterical housewife" (Sze, 2017).

Environmental justice literature has reproduced these narratives. Some scholars tend to describe women's involvement in an essentializing manner, generalizing all women as being inspired by the threat of toxins to their family (Krauss, 1994; Peeples and DeLuca, 2006). Similarly, Gottlieb (2005) describes the EJM as "a movement of housewives" (375). Stover and Cable (2017) argue that focusing primarily on motherhood as a driver for EJM participation risks: 1) "[obscuring] nuances and variations within women's motivations for environmental activism," 2) "[excluding] women activists who are not mothers," and 3) "[minimizing] the political nature of women's environmental justice activism, reifying traditional and restrictive constructions of femininity" (p. 694).

Perkins (2012) counters this traditional, maternalist narrative by "[pushing] back against conceptualizations of women environmental justice activists as housewives and mothers" (p. 77). She identifies multiple pathways into EJ activism rather than solely motherhood. These pathways do include experiencing environmental injustices

themselves and through others, but also include pathways through a deeper understanding of the social justice issues underlying environmental issues, prior activist experience, and through recruitment (Perkins, 2012). Identifying these "alternative" pathways into EJ activism is incredibly important. Perkins (2012) states:

"Painting women environmental justice advocates in general as people who spontaneously became advocates after environmental threats to their families discounts women's capacity for holding abstract political commitments and values, their political experiences, and their capacity for strategic thinking. It also negates women activists who have no children, or reduces them to being valued only for their future reproductive capacity, and obscures the importance of social movement organizations and larger societal structures in drawing women into activism" (p. 89).

In utilizing this reductionist narrative, scholars risk failing to tell the real stories of women activists, reproducing problematic discourses about women's societal roles. In the same breath, I am by no means critiquing women who engage in environmental justice activism to protect their families. Some women draw from their identities as mothers as a source of purpose and empowerment (Bell and Braun, 2010; Larkins, 2018). However, I am critiquing the lack of research on women activists and their reasons for engaging in activism. It is not as one-dimensional as it is often portrayed.

Environmental justice scholars, when examining women's roles in activism, have often equipped the traditional environmental justice narrative when defining the reason for women's political engagement. However, assuming this narrative renders other pathways into activism invisible, and removes the stories of women activists from the EJ historical narrative. While motherhood was and still is a valid reason for engaging in environmental justice activism, it was also used to disavow claims of harm in public discourse, such as the case with Lois Gibbs. I argue this framing was also used to place responsibility on mothers for the environmental harms affecting their children, positioning them as both the protectors and the scapegoats. This dual role reinforces societal expectations of mothers while obscuring systemic contributors to environmental harm, further entrenching the blame on individual women rather than addressing broader structural failures and inequities.

# Starring Roles

The protector: mothers and care work

Casting the mother in the starring role of "the protector" has long been central to environmental justice research. Bell (2013) writes of Appalachian activist Maria Gunnoe's fight against the coal mining industry who firmly states "the women are more fierce...The reason is they're more responsible and obligated to the future, mainly because of the fact that the future holds their children's health, their children's well-being" (p. 21).

Care work is inherent to the role of "the protector." Done in the private and public sectors as paid or unpaid labor, care work is the job of attending to others. England (2005) cites examples including "child care providers, teachers, nurses, doctors, and therapists" – forms of paid labor – and parents raising children and family members attending to "disabled kin" – forms of unpaid labor (p. 381). It is important to emphasize that care work is also based on webs of connections and relationality, challenging the notion of the "self-made man" as everyone, at one point or another, receives care from another person; everyone, at some point, is dependent upon another (Harrington Meyer et al., 2000). Care work is messy and embodied, often physically and emotionally intensive, as care workers must ensure the survival of the individual they are entrusted to look after. It is also not exclusive to fellow humans; MacGregor et al. (2022) briefly explore women's care for non-human subjects, such as animals, plants, and spaces. However, this review solely focuses on the care work between humans.

Care work and social reproduction, a feminist and Marxist theory, are often discussed alongside one another (MacGregor et al., 2022). Di Chiro (2008) defines social reproduction as "the intersecting complex of political-economic, socio-cultural, and material-environmental processes required to maintain everyday life and sustain human cultures and communities on a daily basis and intergenerationally" (p. 281). Alternatively, MacGregor et al. (2022) define social reproduction as "[referring] to the daily and generational renewal of life that is essential to sustaining societies and their economies" (p. 13). With these definitions in mind, social reproduction consists

of childbirth and childrearing, which contribute to maintaining cultural norms and the workforce. Social reproduction literature often highlights how unpaid or underpaid labor, usually performed by women, supports the capitalist system by sustaining the workforce without generating profit. Therefore, care work is a key element of social production, particularly in terms of the aforementioned childbirth and childrearing. While these tasks are not solely performed by women, they are disproportionately performed by women and, more specifically, mothers (Adatti et al., 2018; MacGregor et al., 2022). Cranford (2007) explores the gendered dimensions of social reproduction, as it is "organized through gender inequalities within families since men's wage earning in the public realm of production is valued and visibly contributes to the family's reproduction while women's reproductive work of caring for children and housework is unpaid, undervalued, and relegated to invisibility in the private realm" (pp. 362-363).

In addition to being gendered, care work is also racialized and classed. Romero and Pérez (2015) cite the lingering effects of colonialism, "outsourcing" labor, and race-based stereotypes as factors contributing to racialized care work. In settler colonial societies like the United States, "our national imagination of mistress-maid relationships is still represented by the faithful servant, the saving Maria and the Mammy figure, which serves to mask long hours, low wages, lack of health care benefits, or social security" (p. 176). These inequalities are also reflected in the "contemporary global care chain," where the majority of domestic workers in the United States are women from regions who have "experienced U.S. colonial and

neocolonial interventions," such as Latin America, the Caribbean, and the Pacific Islands (Romero and Pérez, 2015, p. 176). Thus, racialized women – Black,
Indigenous, Latina, and Asian women – have historically been relegated to domestic and caregiving roles and still are. This is exacerbated as care work is increasingly performed by migrant women from the Global South in wealthier, predominantly white countries. The use of racialized women is amplified by stereotypes asserting that "women of color, including immigrants, experience having their skills treated as 'natural' or 'cultural' qualities that construct them as 'ideal' nannies, caretakers, or domestic workers" (ibid.). Additionally, care work often flows from lower-income women to middle- and upper-class households. Wealthier families are better able to outsource their care to those with fewer economic options. Racialized and working-class women are overrepresented in the lowest-paid, most precarious caregiving roles, while the work itself is continuously devalued because of who performs it.

Feminist scholars emphasize the importance of the everyday in geographical research (and beyond) (Askins, 2015; Dyck, 2005; MacGregor et al., 2022). This interest in the everyday stems from observations that women and their "lives and [labors]... the inequalities they experience by virtue of being women" were not well-represented in research and policy (Hall, 2020, p. 813). Akin to prior discussion around quotidian activism, examining women's everyday acts "requires attention to the ordinary, and the unexceptional" (Rose, 1993; p. 22). In drawing back to care work, this form of labor done by women in the home is often done quietly. In bringing attention to it, the lived experiences of women – "binding agents that keep everything oiled, ticking" in

the processes of social reproduction – are visibilized and thus able to be connected to broader power structures and imbalances (Hall, 2020, p. 814). This closer look into everyday acts allows us to examine the impact climate change and environmental injustices have on the lives of women and mothers.

MacGregor et al. (2022) identify the following as major climate change impacts on humans: extreme and unpredictable weather, food insecurity and scarcity, water insecurity and scarcity, energy insecurity/fuel scarcity, poverty, health threats, migration and displacement, and conflict (pp. 33-34). While MacGregor et al. (2022) preface these impacts by saying rural and low-income countries of the global South are more vulnerable, they still affect communities within more industrialized nations - the focus of this review. As established in the prior sections, low-income communities and communities of color disproportionately shoulder the brunt of climate change, whose impacts are devastating and long-lasting. Additionally, the United Nations Framework Convention on Climate Change (UNFCCC) drafted a Gender Action Plan recognizing that "climate change impacts on women and men can often differ owing to historical and current gender inequalities and multidimensional factors and can be more pronounced in developing countries and for local communities and Indigenous Peoples" (p. 23). In other words, women feel the impacts of climate change differently from men, as they conceptualize, experience, and adapt to it differently (MacGregor, 2010). MacGregor (2010) elaborates on this point in stating "women are more dramatically affected by environmental degradation than men, due to their social roles as provisioners and carers" (p. 131).

Thus, in the face of climate change, women's roles as carers are exacerbated. To protect their children from environmental harm, the everyday labor mothers perform increases as they engage in pro-environmental behavior. The increased labor from climate change is intensified by neoliberal policies, which Maniates (2001) terms as creating the "individualization of responsibility." Neoliberal policies, in lieu of public programs and services, emphasize market-based, privatized, and individual responsibility for well-being. This may include cutting social programs such as food stamps and housing assistance and has recently extended towards environmental solutions. As Maniates (2001) suggests, planting a tree or buying a bike – individual acts – are pushed as individualized actions consumers can take to lessen the climate crisis, as opposed to direct governmental action. Therefore, this neoliberal approach to environmental issues, pushing individual actions, directly affects women in caring roles. As opposed to the "individualization of responsibility," Dzialo's (2017) "feminization of environmental responsibility" is much more fitting.

Two common strategies in addressing climate change include adaptation and mitigation (MacGregor, 2010). In their own ways, the responsibility for both adaptation and mitigation can fall upon mothers as pro-environmental behavior is increasingly becoming an individualized, household activity to protect the health of children. Regarding adaptation, women are primarily responsible for shopping in a household (MacGregor, 2010). Scholars have discussed how some mothers have conformed to principles of "shopping green" or "precautionary consumption"

(Cousins, 2021; MacKendrick and Cairns, 2019; Cairns et al., 2013; MacKendrick, 2014). MacKendrick (2014) provides a definition of precautionary consumption, which:

"...involves scrutinizing what one eats, drinks, and breathes and applies to one's skin and hair (e.g., lotions, shampoos, cosmetics, and soaps) to minimize personal exposure to synthetic chemicals. It entails restricting children's movements and activities (e.g., by preventing them from mouthing toys and crawling on dusty floors) and monitoring the safety of all objects (e.g., by checking the type of plastic used in a baby bottle)" (p. 707).

Precautionary consumption requires additional labor as mothers have to determine what products are considered "safe" to bring into the home. Cousins (2021) elaborates on this, stating "women must not only navigate conflicting streams of information when making consumption choices, but must also engage in the emotional work of meeting these increased expectations of 'good mothering' without appearing excessively anxious" (p. 9). Other attempts at greening the home include composting and recycling, among others. It is also important to note that precautionary consumption is really only an option for mothers who have the time and finances to do so.

Other scholars have written of mitigation strategies enacted in the home in response to environmental threats (Sze, 2006; Sze, 2017; Bryson et al., 2001). Such strategies

include cleaning and housekeeping. Sze (2006, 2017) details the emphasis placed upon housekeeping by formal institutions – the National Institute of Allergy and Infectious Diseases and the National Institute for Environmental Health Sciences – when mitigating the impacts of asthma in New York City. Bryson et al. (2001) outline the "domestic-based interventions" provided by public health officials in Australian lead smelting towns, such as using wet mops over brooms, preventing young children from putting dirty fingers in their mouths, and vigorous dusting (p. 761). In both case studies, blame and responsibility were shifted away from the entities truly at fault and onto the individual.

At-home climate adaptation and mitigation strategies emphasize individualized actions that fall upon mothers to uphold due to gender inequalities in domestic labor. These pushes for precautionary consumption and increased housekeeping practices, though, do not come from thin air. While governmental institutions and corporations push these narratives to avoid culpability and continue earning a profit, the media especially plays a role in reinforcing and reproducing these narratives (Mello and Tan, 2016). MacKendrick (2010) researched the role of newspaper media in the framing of responsibility for chemical accumulation in the body, finding that newspaper articles placed a heavy emphasis on the power of precautionary consumption. Further, Bellows (1998) discovered frames surrounding parental responsibility in newspaper analyses of articles focused on lead poisoning. What these narratives fail to communicate is that these practices only provide temporary

protection from environmental harms and shift focus away from the underlying causes of environmental harms and health inequalities.

## The scapegoat: mothers and blame

However, these narratives also serve an alternative purpose. Painting mothers as responsible for protecting their children from toxic harms implies that, if they are to "fail," if their children are exposed to said toxic harm, then they are to blame. This idea of mother-blame, of "scapegoating," is not a new concept; it has been around since the dawn of Christianity and the Middle Ages (Sommerfeld, 1989). Today, mothers are known to be blamed for the health "inadequacies" or "failures" that affect their children. Mothers are labeled "neglectful and uncaring" when their children are clinically obese (Friedman, 2014, p. 19). Mothers are deemed "monstrous, unnatural, and selfish" for medicating their children with "invisible disabilities" (Blum, 2007, p. 222). In the process of caring for their children with substance use disorders, mothers are called "enablers" (St-Amant and Schwind, 2021, p. 474).

Mother-blame is also rampant in cases of lead poisoning. Bryson et al. (2001) found that mothers were called "ignorant and dirty" and "irresponsible" when their children were lead poisoned, despite being surrounded by lead smelters. In legal suits taken against landlords, lead pigment manufacturers, and lead paint manufacturers for childhood lead poisoning cases, the defense would often blame the parents'/mothers' intellectual abilities and/or the parents'/mothers' lack of supervision or housekeeping (Fentiman, 2017). These arguments "may rely on stereotypes about poor, minority,

and less-well-educated parents that are implicitly predicated on notions of genetic determinism and poor parenting" (Fentiman, 2017, p. 229). Mothers specifically were commonly attacked by the defense, labeled as "negligent, not only because of gender-based stereotypes about which parent provides child care and house-cleaning but also because many children poisoned by lead live only with their mothers" (ibid.). Drawing from class-, race-, and gender-based stereotypes and stigmas, mothers were cast as to blame for the lead poisoning of their own children.

Shifting the responsibility of environmental protection onto mothers and blaming them when things go awry works well together for corporations and regulating bodies attempting to avoid repercussions for continuing "business as usual" despite the damages their actions (or lack thereof) bring. By failing to hold those who are truly responsible accountable, justice becomes harder to achieve for survivors of lead poisoning and other toxic exposures. Additionally, mothers are forced to perform additional labor on a daily basis to protect their children and fulfill constructed ideas of what it means to be a "good mother." As the climate crisis continues and worsens, the labor mothers must perform will only increase, making the burden they already face heavier.

# Summary

In this review, I began with a brief outline of childhood lead poisoning, which has plagued America for the past century. I then established lead poisoning as an environmental injustice, shaped by decades of housing discrimination in Baltimore, Maryland. These processes of discrimination relegated Black and low-income

families to the city's older housing stock, which put residents at greater risk for lead exposure. I subsequently explored environmental justice and the growing field of critical environmental justice, which in part advocates for increased intersectionality in environmental justice literature. With an eye on intersectionality, I pushed for environmental justice literature that utilized lenses of race, class, and gender, the latter often left out of the narrative. I highlighted women's role in environmental and environmental justice activism, touching on how the identity of "mother" is often used as a mobilizing force, but how it is also applied broadly to women's activism as a monolith. Switching pace, I turned to how women's activism is an extension of the care work they disproportionately perform both inside the home and out. This care work is exacerbated under the climate crisis, in which the daily tasks they perform include climate adaptation and/or climate mitigation strategies that offer temporary protections from environmental hazards. These strategies work to individualize responsibility in what Dzialo (2017) calls "the feminization of environmental responsibility." However, this also clears a path for mother-blame when children's health goes awry. I concluded by highlighting how this is a trend in the framing of lead poisoning, before touching on broader implications.

The following chapter will explore the methods utilized in this project. Drawing from examples of MacKendrick (2010), Bellows (1998), and Mello and Tan (2016), I perform a content analysis of Baltimore, Maryland newspapers to explore how responsibility was framed for the lead poisoning epidemic.

Chapter 2: A mixed-qualitative methods, multi-temporal approach

## Introduction

In Chapter 1, I wove together various strands of literature to explore how mothers, in the face of environmental injustices, are responsibilized for the protection of their children and are blamed when their children are exposed to environmental harms. I now take an empirical turn, actively seeking out instances of mother-blame in Baltimore, Maryland, throughout the lead poisoning epidemic. With this methods chapter, I give an overview of my mixed-qualitative methods approach, where I combined archival studies, interviews, and field visits to tell the marginalized story of Baltimore mothers and their experiences with lead poisoning. The goal of this chapter is to explore the tools I utilize to add nuance to the existing narratives surrounding Baltimore and lead poisoning, and challenge the stereotypes placed upon Baltimore mothers in the face of lead poisoning.

"Storying for change"

A "storytelling species"

Sylvia Wynter defines humans as a "storytelling species" (McKittrick et al., 2018, p. 867). Storytelling is "how people make sense of the world and our place in it, an iterative process of interpreting reality through observation and the exchange of

ideas" (Vasudevan et al., 2023, p. 1728). Stories themselves are a "form of survival and resistance" used to "make visible" lived experiences, especially in the face of oppression (Kohl, 2022, pp. 33-34). As a historical geographer, I am deeply invested in ensuring stories and narratives "hidden from history" are uncovered and told (Rowbotham, 1975). Of particular interest are the stories of women, who have often been hidden from historical narratives. Rose and Ogborn (1988) critique the field of historical geography for its failure to tell these stories. In failing to tell them, women "disappear from the reconstructed past as if they had never been," thus "propagating an inaccurate understanding of the past" (p. 305). In an attempt to propagate *multiple* understandings of the past, I utilize a mixed-qualitative methods approach, taking a gendered lens to explore subjective experiences with lead poisoning.

In the following subsections, I explore the power of storytelling within environmental justice. I then share my own story, situating myself and my life experiences in my work.

# Environmental justice storytelling

Stories carry the capacity for change – "storying (for) change" (Cameron, 2012, p. 579). Stories have the power to elicit empathy; they have "affective, embodied, [and] emotional dimensions" that "do not simply represent…they affect, they move" (Cameron, 2012, p. 581). Drawing from "Indigenous, Black, and third world and women of color feminist traditions," stories break from positivist, Western means of

knowledge production, instead emphasizing experience, dialogue, care, and personal accountability as sources of meaning (Vasudevan et al., 2023, p. 1729; Hill Collins, 1991).

Through these subjective sources of meaning, stories of environmental injustices can be amplified. The spaces "marked by environmental injustices" are "largely invisible in wider public imaginations" (Houston, 2013, p. 420). In producing environmental justice stories, "narratives and practices [are created] that offer particular insight into what it means to live in degraded and 'shadowed' ecosystems," bringing such an experience into "collective and public knowledge" (ibid., pp. 421-424). In their justification for environmental justice storytelling, Adams et al. (2024) emphasize how "...it is important to investigate the ways in which exposed communities preserve their stories and how their collective memories come into play in efforts to seek redress as well as push for social change" (p. 1300). Thus, environmental justice storytelling seeks to accomplish three tasks: 1) shape collective memory, 2) achieve justice, and 3) ensure these patterns of environmental harm do not persist elsewhere (ibid). Embedded in these goals are themes of care: care for shared experiences and history, care for community members, and care for those you do not directly know, so as to avoid repeating the toxic mistakes of the past.

In the case of environmental victories, the remaining landscape is often unchanged (Houston, 2013). Therefore, "what lives on, and what becomes important to environmental justice struggles elsewhere, is the presence of stories that remind us

that actions count" (ibid., p. 433). These environmental justice stories can be represented in a variety of formats, such as film (Vasudevan and Kearny, 2016), zines (Velasco et al., 2020), quilts (Adams et al., 2024), and toxic tours (Houston, 2013).

As explored in Chapter 1, the Lead Industries Association (LIA) and its partner corporations shaped collective memory, blaming poor mothers of color for the lead poisoning of their children. In such a gross misrepresentation, it is imperative that stories of environmental injustice are shared in efforts to redress the past, present, and future.

## Storytelling my positionality

Prior to delving deeper into my methods, I will first explore my own histories and stories with these methods. My research relies heavily on the willingness of others to share their stories (both in the past and in the present), so it is only just that I reciprocate and share my own. This idea can largely be credited to Shawn Wilson, author of "Research is Ceremony: Indigenous Research Methods," where he states, "an idea cannot be taken out of [relational context] and still maintain its shape" (Wilson, 2008, p. 8).

I come to this research as a first-generation graduate student from a working-class background. These identities (first-generation and working-class/low-income) allowed me to participate in the Ronald E. McNair Post-Baccalaureate Achievement Program, more commonly known as the McNair Scholars Program, as an

undergraduate student at the University of New Hampshire, a predominantly white institution (PWI). The McNair Scholars Program gives students underrepresented in higher education (students of color, first-generation, and high financial need) professional, academic, and research opportunities to prepare for graduate school. I highlight this experience as it has shaped how I engaged with my master's thesis project.

During my first summer as a McNair Scholar, I conducted a project that told a distinct story, one of resentment by Seacoast, New Hampshire locals towards perceived elitists associated with UNH who fought off an oil refinery that was projected to bring in economic prosperity. My project relied on accessing the Milne Special Collections and Archives at UNH, scouring 1960s and 1970s newspapers for articles, opinion pieces, and letters from both proponents and opponents to gauge why they held the opinions they did. I was particularly enamored by this process, formulating my own environmental narrative as I uncovered stories and perspectives thought to be lost to time. I was privileged to conduct a second research project over a second summer, where I learned of the Nez Perce Tribe's connections to fishing and water, and how these relationships have been stifled due to settler colonialism. Through this project, I became abundantly aware of my positionality and how I, a white, non-Indigenous person at a land-grant institution, was researching an Indigenous community I had no prior connection with. From these research experiences, I came to understand the methods I enjoy, ones that allow me to tell stories, and the significance of acknowledging one's positionality in the process of prioritizing ethical and reciprocal

engagement. This latter value of reciprocal engagement is reflected in my participation in the Interdisciplinary Consortium for Applied Research in the Environment (ICARE) program throughout the course of this project. I hosted a movie showing of Angel King Wilson and David Sebastiao's "Hiding in the Walls" documentary for National Lead Poisoning Prevention Week and volunteered at UMBC's Special Collections as an archivist.

As a white, cisgender woman from Massachusetts, it is important to note my distance from the community I am currently researching. While my economic background allows me to empathize with harmful class-based comments, I am unable to fully relate to Baltimore's mothers of color due to my geographic origins and my race. Further, I am not a mother, nor has anyone I personally know experienced lead poisoning. Throughout my research, I continuously reflect on how my identity as an outsider and as a member of an educational institution affects my work, both in my interactions with participants and my interpretation of key documents.

In taking a feminist approach to my research, I seek out narrative-based methods that emphasize lived experience. Therefore, I utilize the textual analysis of archival documents, interviews, and field experiences to explore mother-blame in Baltimore. I will mainly focus on archival studies and interviews, as they are my main sources of knowledge production. I will provide an overview of each of these two methods as derived from the broader literature, including how they draw on care, before delving into how I personally utilized each method. Additionally, I will briefly touch upon

various field methods that were incredibly valuable in this project. Informing my process is the question: how was blame constructed for lead poisoning in Baltimore, Maryland?

## Methods

### Archives

Radical empathy in the archives

I sought out the archives as my main site of inquiry. The archive is "a place or space in which materials of historic interest or social significance are stored, presented, and ordered" (Moore, 2010, p. 263). Materials may include various text-based documents such as journals, reports, or correspondence, as well as maps, photographs, artworks, clothing, and audio and video recordings (Cope, 2025, p. 431). Of course, this list is non-exhaustive. In recent years, digital archives have become increasingly popular, especially in the face of the worsening climate crisis that threatens the physical infrastructure of "traditional" archival spaces (Carbajal and Caswell, 2021). Digital archives can be "born-digital," such as social media posts or e-mails that are collected and preserved, or "analogue records," such as the tangible materials listed above, which are digitized, collected, and preserved (ibid., p. 1104). My project utilized "analogue records" – printed newspapers that have been digitized. I will touch more on this in the next section.

Digital archives have the ability to surpass spatiotemporal boundaries, allowing for increased accessibility to spaces that typically necessitate travel and, inherently, resources. Accessing digital archives has its own barriers, though, requiring an electronic device and a stable Internet connection. Along the same vein, digital archives possess their own unique challenges due to their online format. In their article about critical digital archives, Carbajal and Caswell (2021) explore ongoing debates surrounding digital records. Issues range from maintaining the resources needed to store the records (i.e., infrastructure, labor, financial resources), to managing the sheer number of records available for digitization, to ensuring metadata (data about the data) is accurate and detailed (ibid.). Underlying all of these issues are questions of equity and justice – for the archivist, the subject of the record, and the larger community that utilizes archives, physically or digitally. For this chapter, though, I will focus on these questions in the context of the subject of the record.

Scholars have argued against the perception of archivists and archives as a "neutral space" or "laboratory" of knowledge production, an impartial place where records are stored (Cifor and Wood, 2017; Faria et al., 2021; Schwartz and Cook, 2002; Withers, 2002). Rather, they are sites infused with power imbalances and misrepresentations. Archives and archivists have the power to shape the collective memory of communities (Schwartz and Cook, 2002). Decisions about who/what to preserve and who/what not to preserve have led to "archival silences" (Carbajal and Caswell, 2021). The archives were made by and for those in power, and that is historically who they've served and prioritized. Thus, the histories of "children, enslaved people, poor

people, women, racially and ethnically marginalized people, and other social groups" are painfully missing from the archives (Cope, 2025, p. 434). Archives then become places of "violence, erasure, and exclusion toward racialized and marginalized groups, who may not see themselves or their histories represented in the institution" (Wideman, 2022, p. 396).

Feminist historical geographers push for a feminist ethics approach to archival research to address these inequities (Caswell and Cifor, 2016, 2019; Cifor and Wood, 2017; Faria et al., 2021; McDonagh, 2018; Moore, 2018; Carbajal and Caswell, 2021; Crawford and Mills, 2020). Caswell and Cifor (2016, 2019) specifically call for a feminist ethics of care approach that prioritizes radical empathy, or "a learned process of direct and deep connection between the self and another that emphasizes human commonality through 'thinking and feeling into the minds of others'" (2016, p. 30). In this way, archivists are "seen as caregivers, bound to records creators, subjects, users, and communities through a web of mutual affective responsibility" (Caswell and Cifor, 2016, p. 24). By rooting archival practice in relationality, archivists move beyond neutral positions and into emotionally laden work that emphasizes their responsibility to their stakeholders and their records. Archivists are thus able to better listen to the voices of marginalized communities who have been left out of the archives and identify/address these structural issues in subsequent steps of archival work. Christen and Anderson (2019) emphasize the "profession wide 'failure of care' that has continued to prop up racist, colonial, and unjust scaffolding within archives and then recreate these same systems in digital archives" (p. 112). By embodying

care-full practices in the archives, these spaces historically fraught with exclusion can become ones that re-center the stories of marginalized communities.

#### Archives in action

My archival journey began with communication with Megan Craynon, Deputy Director of the Maryland State Archives. Given my outsider status, I wasn't quite sure where to look and turned to the expertise of a professional. I knew I wanted to examine newspapers specifically; Markowitz and Rosner (2013) emphasize the "greater role the press was playing in bringing the severity of lead poisoning to the attention of the general public" (p. 33). With her advice, I got a membership for "newspapers.com," a digital repository for nearly 30,000 newspapers from across the globe. However, drawing from prior discussion on digital archives, there are inherent biases built into what is digitized on this website and what isn't. For example, the countries with newspapers digitized are predominantly Western nations, such as the United States, Canada, and Australia. While this isn't an explicit issue in the context of my research, it depicts how Western history is continuously preserved. On the flip side, however, it may also reflect labor and resource constraints. Turning to a more localized perspective, only three newspapers from the Baltimore area were nearly fully digitized on the website when I first began this project in the summer of 2024. The main newspaper digitized from the Baltimore region was The Baltimore Sun/Evening Sun, so the vast majority of my clippings are from this source. However, this renders the perspectives of those from other newspapers invisible. This includes the Afro-American, a Baltimore-based African American newspaper, a vast majority

of which wasn't digitized on the site until November 2024. To make up for this lack of diverse perspectives, I sought out an alternative source to locate articles within the Afro-American.

Despite its limitations, "newspapers.com" is a rich resource. I used the search string "lead poisoning" as published in Baltimore, Maryland, which outputs all articles that mention the phrase "lead poisoning" published in Baltimore, Maryland. I selected "lead poisoning" as severe cases of lead exposure, ones that warrant media attention, are likely to mention this phrase. Additionally, lead is frequently talked about in its ability to "poison." This phrase is a limitation itself. Some articles may discuss lead poisoning or matters surrounding lead exposure without explicitly using that phrase. At the time of my search, this search string outputted nearly 5,000 articles dated between 1840 and 2024. To avoid over-extending my scope, I remained with my original search string, keeping in mind the articles I am potentially missing.

While the majority of my archival materials were pulled from "newspapers.com," I also turned to physical materials. At the recommendation of a UMBC faculty member, I reached out to Jeni Spamer, Deputy City Archivist at the Baltimore City Archives (BCA). She searched through BCA archival content, pulling boxes from Mayor William Donald Schaefer's papers and Mayor Kurt Schmoke's papers that contained mentions of "lead poisoning." While I stumbled across an occasional newspaper clipping, these boxes more so contained reports and studies, correspondence, educational materials, meeting notes, and letters.

With these digital and physical materials, I used textual analysis to look for patterns of maternal blame in newspaper clippings and governmental records. However, it is important to acknowledge that the "selection of texts and contexts is necessarily selective and therefore partial, neglectful, and harmful" and thus the "processing and analyzing of texts is also selective and therefore partial, neglectful, and harmful" (Doel, 2025, pp. 588-589). As I mentioned above, due to a lack of digitized Baltimore newspapers and a carefully chosen search string, it is certain that some articles that may have been relevant were left out. However, I choose to supplement my archival work with methods that draw on the lived experiences of those who are affected by lead, which I now turn to.

### Interviews

### Care-full virtual interviewing

As I sorted through newspaper articles and conducted textual analysis, I was simultaneously conducting interviews. McDowell (2010) highlights the ways in which interviews and newspaper articles bounce off one another, stating how "newspaper articles... [may be] useful in providing both context and validation of the material collected through interviewing people" (p. 158). My interviewees were to be 1) over the age of 18, 2) employed in the state of Maryland, and 3) working, in some capacity, with issues of lead and lead exposure. I essentially looked to speak with lead poisoning professionals in Maryland, hoping to gain a better grasp of the work actively being done in the state to address lead and explore their experiences working

in the field. My interview questions can be found in Figure III. However, as I will touch on in Chapter 3, several questions gave relevant insights that align with the project's scope.

- 1. Can you describe your background and what led you to work in the field of lead poisoning?
- 2. What are your primary tasks and responsibilities in your current role?
- 3. What strategies have been effective in addressing lead poisoning based on your experience?
- 4. How has public awareness influenced efforts to address lead poisoning?
  - a. How would you assess the level of public awareness regarding lead poisoning?
- 5. What are the common community perceptions about lead poisoning that you have encountered, if any?
  - a. Are there any stigmas associated with lead poisoning that you have observed in your work?
- 6. What are the current challenges in combating lead poisoning?
- 7. What is the current approach for supporting adults who have previously suffered from lead poisoning?
- 8. From your professional standpoint, what does the future of battling lead poisoning look like?
- 9. In future efforts to combat lead poisoning, how do you envision incorporating the voices of those most affected by it?

Figure III: List of my interview questions as approved by UMBC's Institutional Review Board.

Given my status as a novice interviewer, I felt most comfortable conducting structured interviews, following the list of questions in Figure 1 in the order they are presented (Johnston and Longhurst, 2025). Before I began interviews, I took the necessary steps to receive approval from UMBC's Institutional Review Board (IRB). I completed human subjects training and an IRB application (IRB #1483), equipped with the necessary consent forms for participants to receive. In accordance with my IRB protocol, potential participants were identified by their presence on their

employer's public websites and were emailed directly with an approved recruitment email. If they expressed interest, the interviews were scheduled on a day/time that was most convenient for the interviewee on a synchronous, virtual meeting platform of their choice.

The interviews were completed online, adding unique elements for consideration. Since the COVID-19 pandemic, remote interviews have increased in popularity, despite in-person interviews being referred to as "the gold standard" (O'Quinn et al., 2024; Holt, 2010; Howlett, 2021). Remote interviews were selected in lieu of inperson interviews primarily due to increased accessibility, removing any potential transportation barriers. While access to electronic devices and a stable Internet connection could have been a challenge, interviews were conducted during business hours, where participants had access to both via their professional positions. Some scholars highlight increased privacy as a positive aspect of remote interviews, particularly in the context of the home (O'Quinn et al., 2024). However, given that these interviews took place during business hours, the participants were all at their places of employment. This may have affected what they wanted to say out of concern for being overheard by bosses and/or co-workers.

While my interviews did not exclusively center on women, I ensured that my interview protocol followed feminist ethics of care. I was attuned to potential power imbalances, which, before starting, did not seem to be present. I, a graduate student, was interviewing individuals who (1) are older than I, (2) have more knowledge and

experience on the topic of discussion, and (3) have established careers in the field. McDowell (2010) describes how interviewing government officials and politicians may render the interviewer as the "less powerful party" (p. 161). However, given the sensitive nature of some of the topics discussed, I realized the power I held from the information I received. I will explore this more in the following chapter. Additionally, I infused care in all of my interactions with my participants – an important development in feminist qualitative interviewing (Herron, 2023). Care was particularly apparent in how I tackled issues of privacy. I conducted all interviews in my own personal space, behind closed doors, and with headphones. Further, the interviews were not recorded. Detailed notes were taken throughout the interview, with any identifying information excluded. Each participant was given a pseudonym (i.e., Participant 1, Participant 2, etc.) and, to further protect their identities, gender neutral pronouns have been and will continue to be used (they/them), especially when discussing their individual responses.

#### Field visits

#### Into the field

Although a small component of my research, I also attended various community events to immerse myself in the lead work actively being done in Maryland. These "field" experiences go hand-in-hand with my interviews, contextualizing my archival findings in the present day. I remotely attended the Lead Poisoning Prevention Commission's monthly meeting, learning about the ongoing struggles (and successes) in addressing lead exposure in Maryland. Further, I attended several events for

National Lead Poisoning Prevention Week, including a press conference held by Green and Healthy Homes Initiative (GHHI), a Baltimore-based non-profit responsible for aiding in a 98% reduction in lead poisoning rates, and a subsequent community day/resource fair. Lastly, I was able to shadow the staff during a lead testing clinic at a regional hospital. I attended these events with a bias towards mentions of mother-blame and the individualized notions of responsibility. I will explore my observations from the National Lead Poisoning Prevention Week and my visit to the lead clinic in the subsequent chapter.

There are various ways to be present in field visits; however, I chose to be a quiet participant. I observed the commission meetings, sat in the back of the press conference, and floated through the tables at the resource fair. While I was an active listener and participant, I did not want to take up much space at these meetings and events that were not intended for me, but to help those directly affected by lead poisoning. I forwent a notebook and pencil, but was also introduced by my partner mentor at Green and Healthy Homes Initiative as a UMBC student when interacting with those manning tables at the resource fair. It was incredibly important to me not to be the "extractive researcher" at these events.

# Summary

Stories have the capacity to ignite change. With this chapter, I highlighted the three methods I use to tell the story of Baltimore's lead poisoning epidemic and the hidden experiences of Baltimore City mothers as they were written off and blamed for their children's lead poisoning. In using a mixed-qualitative approach, I intend to layer

historical and contemporary insight as I construct a multi-dimensional narrative: how blame was originally placed, how it persisted, and how it lives on. With each method, I prioritized care – care for the archival records, care for the records' subjects, care for my interview participants, and care for others in attendance at lead-related events I attended. In Chapter 3, I will explore the results of these aforementioned methods.

# Chapter 3: A caricature of neglect

## Introduction

This chapter explores the outcomes of my methods as outlined in Chapter 2. With these results, I paint a historical narrative depicting the ways in which mothers were responsibilized and blamed for childhood lead poisoning in Baltimore, Maryland. Then, drawing from contemporary interviews and fieldwork, I argue that these assertions of blame have persisted across time, manifesting in barriers to accessing lead treatment today. In addition to themes of mother-blame and individualization, I explore the daily struggles facing lead poisoning professionals in the face of increasing political and economic precarity. I conclude with the implications of these findings.

### Archival methods

### A historical narrative of mother-blame in Baltimore, MD

This section will act as an archive dedicated to revealing the narratives that pinned the blame of lead poisoning onto parents and, more specifically, mothers. Additionally, clippings will also be included that individualize responsibility by shifting actions onto parents and mothers. While much blame was placed upon landlords for failing to address lead exposure in their properties in Baltimore newspapers, I do not include them in this thesis so as to focus on the harmful narratives shared regarding Baltimore mothers. I present the clippings and associated quotes in chronological order to depict

how sentiments changed and developed over time. With this archive, I find that the race and class of Baltimore City mothers were weaponized against them, used to wrongly stereotype them as "neglectful slum mothers" who are responsible for their children's lead poisoning. Wherever possible, I try to conceal the identities of people, especially children, in the clippings, as they did not have a proper chance to consent to be included. Considering some of those children have made it to adulthood today, it is important to conceal their identities and grant them the anonymity they were not originally afforded.

Freshly out of World War II in Baltimore, Maryland, it was becoming increasingly clear that lead poisoning, once perceived as an occupational disease, was now one that could also affect children. At this point in time, lead poisoning cases were so severe that they resulted in death, emphasizing the significance of addressing exposure. In August of 1946, three children passed from "nibbling newly painted objects in their homes," resulting in a "special warning' calling on parents to 'guard young children from nibbling newly painted or repainted window sills, door jambs, steps or shutters" (3 Children Dead of Lead Poisoning, 1946). Many advisories for lead paint poisoning called for the increased watchfulness of parents, who were, in the eyes of public health officials, supposed to prevent young children from eating paint or chewing on painted surfaces. There were also calls upon parents to advocate for formative legislation to fight against the exposure of young children to lead paint. As Figure IV depicts a baby bringing a toy to his mouth, the article warns readers of the dangers of lead poisoning, urging parents to be "cognizant of this danger and keep

their youngsters from chewing nursery furniture and toys, window sills and other woodwork that are covered with lead paint" (*Watch What He Chews*, 1947). The article then goes on to urge "women of America" to "request legislation requiring manufacturers to indicate when lead paint was used on furniture in toys" (ibid.). In doing so, said "women of America" would "help to lessen the incidences of lead poisoning and protect innocent children" (ibid.). This article calls upon women of America, specifically, likely drawing on their roles as mothers, to advocate for legislation that would strengthen labeling laws.

These articles create caricatures of the "super" mother or the "patriotic" mother. "Super mothering" draws on themes of "over-care," "over-protection," "over-emotional investment," and "over-expectation of oneself" (Mohammadi et al., 2015, p. 49). "Super" mothers "[strive] to be exceptional mothers by performing all of their mothering responsibilities without fatigue and exhaustion, and who are ready to do everything to support their child" (ibid.). Shrouded with heightened and often unrealistic expectations, this archetype is consistent throughout this historical narrative, as "over-care" and "over-protection" are expected from mothers to fulfill the image of the "good mother," one who keeps her child safe from lead exposure. Yet, especially for mothers with multiple children, it is particularly difficult to monitor their children's every move in addition to other responsibilities. Furthermore, the idea of a "patriotic" mother, especially prevalent following the conclusion of World War II, was one that "moved the task of maternal work from her private sphere to the public arena," where "mothers were depicted as caring for the nation's children

and their families" (Garner and Slattery, 2010, p. 149). The article suggests that the legislation would help "protect innocent children," not "your" innocent children. In other words, mothers are called upon to help protect America's children more broadly.

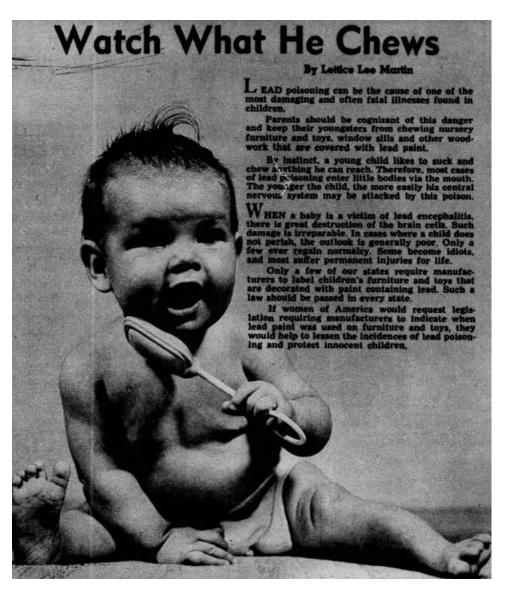


Figure IV: "Watch What He Chews." *The Baltimore Sun*, February 9, 1947. Page 134.

Soon after "women of America" were called on to advocate for labeling legislation, a similar bill was passed through Maryland's 1949 General Assembly that required "all toys, play-things and children's furniture decorated with anything injurious to youngsters to be labeled 'poison'" (Lead Poison Warning Given, 1949). In the same breath, though, the State Department on Health "is making every reasonable effort to enforce this law,' but the 'constant vigilance of parents and others responsible for the well being of young children is necessary" (ibid.). This law was not even in place for a year before there were calls to repeal it. Headed by the executive vice president of the Retail Merchants Association, an organization created to "give the industry a statewide presence" in Maryland, a group against the law stated it "was vague in definition and had caused endless confusion among retailers and manufacturers handling toys and juvenile furniture" (Maryland Retailers Alliance, n.d.; Ask Paint Law Repeal, 1949). In response to these calls, the chief of the division of legal administration at the State Department of Health said "he could find no cases on record in Maryland of a child's being affected by eating the finish of new toys or furniture," and that "many cases of lead poisoning among infants from exterior surfaces, window sills and repainted furniture would not be prevented by the law" (ibid.). This undermines the law, which may have prevented the death of a 4-year-old girl who, despite there being "no cases" on eating the finish off furniture, passed away from gnawing the painted wood off a desk (Figure V). In the 1950 General Assembly, the law was repealed, likely due to the influence of the lead industry (House Votes To Repeal Poison Law About Children's Toys, 1950). Thus, the primary protector for childhood lead poisoning once again shifted back to the

caregivers. Regardless, though, it is important to note that labeling still placed quite a bit of responsibility upon the parents/mothers, as shopping for paint required extra research and time, in line with MacKendrick's (2014) "precautionary consumption."



Figure V: "She Ate The Paint Off Everything." The Evening Sun, August 18, 1949. Page 34.



Figure VI: "Distribution of 199 Cases of Lead Poisoning in Children From Ingestion of Paint." The Evening Sun, June 30, 1949. Page 33.

The early 1950s were plagued by skyrocketing lead poisoning cases and deaths. At the same time, the geographic patterns began to emerge as to where lead poisoning cases were occurring (Figure VI). Dr. Huntington Williams, a Baltimore doctor (and later Baltimore's Commissioner of Health) well known for his lead efforts "[warns] parents to be on the lookout" for sources of lead paint exposure, before offering several suggestions, particularly to parents in "the poorer economic sections of the city" where lead poisoning cases appear to be concentrated (Fee, 2011; *Lead Poisoning In Children Has Death Rate Nearly One To Three*, 1949). Dr. Williams advises parents to observe their children "carefully" to ensure they don't chew lead-

painted objects and eat paint flakes (ibid.). While still drawing on themes of watchfulness, Dr. Williams also identifies the disproportionate rates of lead poisoning cases, particularly amongst Baltimore's "poor economic sections" (ibid.). The City Health Department issued several similar statements, claiming "lead poisoning among children is a 'preventable disease depending largely on the care and watchfulness of parents" (Parents Told About Lead Poisoning, 1950). It is important to note that this article in particular was placed on the "Woman's Page." Additionally, they also "urged families to be 'more attentive to their children's activities" (Lead Poisoning Fatal to Child, 3, 1950). These suggestions were likely to fall on mothers due to the disproportionate burden of household and caregiving responsibilities. This is especially true given the time period; the 1950s were settled between World War II, as women were returning to their work as housewives following taking up factory jobs in men's wartime absence ("We Can Do It!"), but prior to the major feminist movements of the 1960s and 1970s. Buckingham-Hatfield (2000) states, "in 1950, the proportion of traditional families (that is, waged father, unwaged mother, and one to four dependent children) in the USA was 60 per cent" (p. 65). With the implementation of the "nuclear family," it is clear that, while the men of the households were at work, women were expected to shoulder the "care and watchfulness" as urged by state and local government agencies.

In the wake of 77 childhood lead poisoning cases and 9 deaths in 1951 – disproportionately in "slum or so-called underprivileged areas where the residents usually rent their homes" – the Director of the Bureau of Industrial Hygiene of the

Baltimore City Health Department, Charles E. Couchman, seems to rebuke the previous advisories of the City Health Department (Lead Poisons 57 Children in City, 1951). Mr. Couchman emphasizes "the need to remove the paint cannot be minimized by attempts to place the responsibility for preventing the children's eating it on parents" (ibid.). He goes on to be quoted as saying, "most of these families...do not employ servants. Furthermore, one mother may have to look after from one to seven children. It is virtually impossible – considering all the cooking, washing, cleaning, bickering with collectors and salesmen and the thousand and one other things these housewives are plagued with – to expect them to keep a close track on what all these children are chewing on" (ibid.). Ahead of his time as the defense of "housewives," Mr. Couchman argues that mothers cannot realistically be expected to watch every action of their children, simultaneously breaking down ideas about the "super" mother. It is also important to note that, on June 29, 1951, a Baltimore-specific regulation was adopted by the commissioner of health that forbade the use of leaded paint inside a residential home. This came before the federal ban on lead paint in 1978.

Mr. Couchman, though, seemed to be alone in this sentiment. In a letter to The Baltimore Sun after announcements of these 1951 case numbers, a Baltimore resident writes that "a mother with six or seven children cannot be expected to see that her children do not engage in chewing lead-painted surfaces. I have little patience in cases where parents, unable to feed, house, and clothe properly and also train properly two or three children, bring another half dozen into the world" (*Letters to The Editor:* 

Blame For Lead Poisonings, 1951). This same resident goes on to suggest that tenants be punished for allowing their children to undo the lead remediation work of landlords, usually due to "indolence or indifference" (ibid.). A professor of pediatrics at Johns Hopkins University, Dr. Francis F. Schwentker, "considers the ignorance of parents to blame [for lead poisoning] and thus sees the problem as one of educating mothers to stop their children from eating paint, just as they now stop their children from turning on the gas range, poking fingers into light sockets and lighting matches" (The Question Of Blame For Lead Poisonings, 1951). Further, another letter writer claims that children in blighted, "slum areas" lack "close supervision, and the mothers have not yet heard of the dangers involved in letting their children gnaw on window sills" (The Critical Season For Lead Poisoning, 1952).

While Mr. Couchman draws on the families' status as "slum dwellers" as a site for empathy and understanding, others instead use it as a site of contention, painting mothers as having too many children that they are unable to take care of, or being ignorant and ineducable. This contributes to the archetype of the "welfare" mother, a single mother on social welfare programs who is viewed as "suspect and potentially undeserving... accused of being lazy, unmotivated, of cheating the system or having additional children simply to increase the amount of their benefit check" (Seccombe et al. 1998, pp. 850). The figure of the "welfare" mother is an intersectional one, as "our society despises poor women, particularly African American poor women, who are seen as rejecting the traditional nuclear family that contains at least one and possibly two breadwinners and, instead, 'choosing' to remain dependent on the public

dole" (ibid.). As lead poisoning was becoming better understood as a disease that affected low-income communities of color, public sentiments about "welfare" mothers and those in poverty continue the cycle of blame against poor women of color. Observations of increased rates of lead poisoning in slums continued, with "the lead poisoning rate eleven times as great" in "blighted sections of the city...as in nonblighted sections" (Parley Told Slums Foster Crime, 1954). Director of the statistical section of the Baltimore City Health Department, Dr. Matthew L. Taback, argues that this "[makes] a mockery of the term 'there's no place like home'" (ibid.). Further, another article outlines how "slum householders often make brave efforts to hide the worst," including old, leaded paint (Try To Hide The Worst, 1954). These narratives tethered lead poisoning to Baltimore's so-called "slum areas," drawing problematic depictions of disposability, decay, and toxicity. This image allowed outsiders to write off the lead poisoning problem, framing it as an issue of "slums" and "slum parents" rather than a public health failure/crisis. As McKittrick (2011) argues, Black spaces are often imagined as "imperiled and dangerous," producing geographies of abandonment where environmental harm is both expected and ignored (p. 951).



Figure VII: "Killer On The Window Sill." *The Baltimore Sun*, October 17, 1951. Page 34.

At the same time, the number of court cases began to rise. In 1955, a father sued the store where he bought leaded paint, which had given his son a "permanent disability from lead poisoning from the paint" (\$11,000 Suit Charges Poisoning From Paint, 1955). Another 1955 case was filed by parents against their landlord after their son "suffered lead paint poisoning from eating paint used on interior window sills" (Paint-Poisoning Suits Filed, 1955). The government also increased their actions, with Dr. Williams appointing a lead poisoning prevention committee that was to "restudy the lead poisoning problem and recommend protective measures 'so that Baltimore children will be protected against lead poisoning as far as possible, as we

protect them against small pox and diphtheria" (*Poisoning Study Unit Formed*, 1956). However, despite store owners and landlords taking the fall in the courts from individual suits from residents and governmental entities being formed to better address the epidemic, mothers and parents were still the targets of the newspaper media. In continuing themes of "[indolent]" or ["indifferent"] mothers or parents, another article writes of lead poisoning as "a serious disease which roots in carelessness," citing that no campaign or program to address lead will be successful without the "full co-operation of parents and guardians of small children" (*Lead Poisoning*, 1956). Furthermore, another author suggests that lead poisoning is "usually due to carelessness on the part of parents" (*Paint Danger*, 1957). The answer, then, is "parent education and co-operation to eliminate lead paint from the reach of children" (ibid.).

As the 1950s crept to a close, 1957 became the second-worst year of lead poisoning cases and deaths following 1951 (*Lead Poisoning Reported Second Highest On Record*, 1957). Many public comments from 1957 drew on themes I've already highlighted. The City Health Department made yet another announcement about how "parents should also exercise close supervision over all activities of the very young and not allow them to chew on window sills or other painted objects either inside or outside the house" (*Lead-Poisoning Cases Total 4*, 1957). In drawing from class-based comments, another resident stated that "the poisonings are confined almost exclusively to blighted areas of the city, where children of teething age gnaw on lead-painted window sills or [eat] bits of flaking paint. The parents often are beyond reach

of most channels of education, which is one unfortunate aspect of the problem" (*Preventable Deaths*, 1957). Public nurse Mrs. Mary Lanahan, another notable figure due to her work on childhood lead poisoning, said that "many children will be mentally and physically disabled for life – a possibility that would have been considerably lessened if parents had taken action sooner" (*Lead Poison Fight Noted*, 1957). However, a new means of blaming parents – in this case, mothers – emerged. Pica, a medical condition in which people swallow hazardous, non-food items (and typically a cause of lead poisoning), was incorrectly thought to be due to the "frustration of the child in his relations with his mother." Blaming pica on a mother's assumed physical or psychological unavailability, mothers were then pushed to "help prevent its perpetuation" by recognizing the dependency of a child on its mother (*Child's Desire To Eat Paint Held Dangerous Symptom*, 1957). This relates to prior discussions in Chapter 1 of how mothers are blamed for the various health outcomes of their children.

Dr. Williams, in the following year, urged "City [Council's] passage of an ordinance requiring warning labels on lead paint" (*Law To Label Lead Paint Is Urged*, 1958; *Label It Poison*, 1958). Subsequent debates on what this label should say emerged, with disagreements between the City Health Department and the Maryland Paint, Varnish, and Lacquer Association (MPVLA). The City Health Department claimed the label should read "Warning – Contains lead. Harmful if eaten. Do not apply on any interior surfaces of a dwelling, or of a place used for the care of children, or on window sills, toys, cribs, or other furniture" (*Advice Of Experts Sought In Council* 

Fiscal Matter, 1958). The MPVLA suggested the following label: "Contains lead. Harmful if eaten. Do not apply on toys, furniture or interior surfaces which might be chewed by children" (ibid.). Not only is the MPVLA's suggested label less urgent, it is also less comprehensive about what lead paint should and should not be used on. While it is unclear which wording was officially adopted, the ordinance was passed and put into effect on July 9, 1958. Just a few months later, in early September, Dr. Williams reported that 1958 was its "worst year in the history of lead-paint poisoning," with 93 children poisoned.

The year 1959 saw parents entering court on lead-related matters. An African American man was arrested and fined for "[failing] to remove deteriorated paint, which was eaten by his child and caused the infant to develop lead poisoning" (Father Is Fined For Poison Paint, 1959). The father of four's defense was that "he could not afford to get the work done" (ibid.). In another case, an African American woman was fined for "ignoring a Health Department order to have her children examined for possible lead poisoning" (Frisk Yields Cost of Fine, 1959). In her appearance at court, she brought testing results that proved her children were in good health. In response, the magistrate "levied the minimum fine in order not to deprive [her children] of milk" (ibid.). As lead poisoning predominantly affected children of color with Black children having a seven times higher rate of lead poisoning than white children (as of 1952), parents of color were disproportionately penalized for being unable to afford lead testing and abatement procedures, which likely

exacerbated ongoing economic struggles (*Parents Warned Of Lead-Paint Poisoning*, 1952).

Lead poisoning cases continued to increase into the early 1960s, as did sentiments of mother-blame. The author of To Prevent Poisoning: Watch Child Carefully asserted that lead poisoning "occurs when the child is left unattended to chew the window sill or some other painted object" (*The Evening Sun*, 1960). The author goes on to say that "it may be virtually impossible to keep all poisons away from the child, but it is simpler to teach the child not to eat things. When a favorite painted toy goes up to the mouth it isn't cute and it shouldn't go unnoticed by the mother." Furthermore, Dr. Williams emphasizes "the critical importance of the mother's supervision of her children" in the face of surging lead poisoning cases (City Has 1st Paint Death, Paralytic Polio Case of '61, 1961). Dr. Williams follows this statement up by claiming that "the mother can prevent lead paint poisoning by closely watching the child's play activities" (ibid.). Lastly, journalist Donald Bremner paints a picture of a disarrayed mother as he outlines Baltimore City's new plan to tackle lead poisoning – "instead of removing the paint from the child's reach, the new program is intended to impress the person who cares for the child with the importance of watching it and keeping it from nibbling the paint" (New Method Used To Fight Poison By Lead Paint, 1962). This program effectively shifts all responsibility onto the caregiver of the household, as lead is left in the home, and the only source of protection for the child requires 24/7 surveillance. An individual wrote that such procedures, involving the heavy presence of inspectors, "brings [a] head-on collision two guiding principles

in American life. The first is the belief that a man's home is his castle, which our forefathers expressed in a Fourth Amendment guarantee against unreasonable search and seizure. The second, which is basic to our concept of the public welfare, is the belief that no man (or his home) is an island and that what he does, good or bad, affects his neighbors and the community at large" (*When Inspectors Knock*, 1963). The first point is of interest; this "new method" blurs the lines between public and private space, as the home, commonly perceived as private, is privy to additional scrutiny. This is what Carmona (2021) calls "the public-isation of private space," the boundaries of which are often gendered.

The early 1960s also saw broader assertions of parent-blame. As such, Mary Lanahan claimed that a "lack of parental supervision of teething age children was the prime contributing factor in child lead paint poisoning" (*Paint Poison Cases Gain*, 1961). Juxtaposing this claim against the seeming "hands-off" program highlighted in the prior paragraph brings up the question: if parents are to blame, then why make parents the primary method in prevention? In another message, Dr. Williams stated that "if parents do not exercise very close supervision of their young children, the number of cases will continue to mount" (*7 Cases Of Lead Poisoning By Paint Reported In City*, 1961). In the following year, Elkins Dahle, the Director of the Bureau of Industrial Hygiene, states that, "in many cases, [the] poisoning of children was simply the result of ignorance on the part of parents [on] the dangerous of swallowing the poisonous matter" (*Sanitarian To Visit Homes In Study of Poison Cases*, 1962). It is important to note that this quote from Fahle is reflective of alleged

findings of the "public education" study program, as mentioned in the prior paragraph.

The late 1960s and early 1970s carried familiar themes among growing criticisms that "you'd think that by now this is one problem we'd have licked" (Lou Panos: Inside Baltimore, 1967). In continued grasps for control, the NPVLA sent a message to "parents of small children living in older dwellings that have crumbling and flaking painted surfaces," urging them to "scrape and sandpaper these surfaces before their children can nibble on them" (Parents Warned On Lead Poisoning, 1966). If they cannot do this, they suggest that "at the very least, parents should keep children away from the flaking, peeling, crumbling, and blistered spots" (ibid.). The irony of this message is palpable, considering the measures the NPVLA took to propagandize lead paint. The Baltimore City Health Department issued a similar warning to parents, stating that "this disease of early childhood...can be overcome only by parental knowledge of this danger, the removal of peeling paint and the supervision of young children until they have outgrown the dangerous lead paint years" (Alert On Lead Paint Issued To Parents, 1967). Another article writes of a working mother with an "eight year old...at home to take care of the kids who like to stick things in their mouths" (Mothballs, Lead Poisoning, Children's Hazards, 1968). With the turn of the decade, we continue with sentiments relating to parental responsibility, with statements of "the basic responsibility rests with parents who should see that lead paint is never within the reach of small children" (Lead Paint, 1970). Another important note rests in the ongoing historical timeline; this repeated emphasis and

focus on maternal responsibility pre-dates neoliberalism, which did not become popularized in American politics by former President Ronald Reagan until the early 1980s.

As debates intensified as to who is responsible for addressing lead in rental properties, whether it be the tenant or the landlord, a Baltimore realtor and property manager asserted that "the parent is the culprit in failing to protect a child from eating paint chips" (*Lead-poisoning results cited at City Council hearing on paint laws*, 1981). Dr. Hugo Moser of the John F. Kennedy Institute's lead clinic responded with "there is no way a parent could be expected to control a child's normal touching and contact with the dust. The dust gets on a child's hands and then is ingested" (ibid.). A Baltimore resident made the following assertions regarding lead poisoning:

"The core problem in the lead poisoning of children is negligent parents.

These same negligent parents are also responsible for a great many other problems. They batter kids that bother them and this gives rise to street and school violence. Lead poisoning is an example of child neglect just like intentional starvation or abuse. The parents should be punished."

Don Walls continues this theme of shifting blame onto "negligent parents" by stating, "No blame for hyperactivity is aimed at the inferior diet delivered to many inner-city children. No blame for inept learning abilities is placed on parents who take no interest in education or on overcrowded households full of distractions from

schoolwork. No blame is suggested for fetal brain damage from drug and alcohol use or from smoking by more than half of the child-bearing women living in the innercity" (*Creating a panic over lead-poisoning*, 1991). Such narratives of "no blame for parents" may have led to a "punitive" bill that would have fined parents \$100 for not getting their children tested for lead poisoning, reflecting earlier punitive measures taken against Black parents who could not afford abating or testing their children (*Fining parents isn't the way to confront lead poisoning*, 2000).

Similar to mothers being urged to watch their children more closely, they were also told to clean, contributing to the increased work they must do around the home. A strict regimen was outlined:

"Mothers were told to dust, wash, and wet mop window sills and floors, and a team of two workers was sent in to do the exact same cleanup every two weeks for a period of a year. Mothers were urged to wash their children's hands before and after every meal and before bedtime" (*Special measures said to cut lead poisoning*, 1983). Such directions reflect the work of *promotoras de salud* (community health workers) in modern-day Los Angeles, who conduct home visits to educate mothers on individualized asthma action plans and home environmental assessments (Faiver-Serna, 2021). Both the plans and assessments are to "measure the fact that [the mother] had received asthma education and understood her role and responsibility in managing her child's asthma" (Faiver-Serna, 2021, p. 148).

Across the next twenty years, pressures on lead poisoning, which came to be known as "ghetto malaria," persisted (\$9 Million Later: Paint With Lead Still A Threat, 1978). In this time period, local, state, and federal entities brought matters of lead poisoning to the legislature and the courts, working to establish plans and solutions that "get the lead out." This was especially paramount as alternative sources of lead exposure, such as leaded gasoline and lead in water, became increasingly apparent. This chronological "gap" in my findings does not represent decreased focus on lead poisoning; instead, it represents the shift from private-based solutions (i.e., being told to watch children more closely) to public-based solutions (i.e., laws, studies).

Despite this shift, such narratives of mother-blame do not remain in the past. In 2015, Kenneth C. Holt, the Secretary of Housing and Community Development for the State of Maryland, told an "anecdotal story" that a "mother could just put a lead fishing weight in her child's mouth, then take the child in for testing and a landlord would be liable for providing a child with housing until the age of 18" (*Ease landlord lead liability, housing chief proposes*, 2015). Such a comment from a governmental official is egregious, spreading false narratives, perpetuating stigmas about mothers of lead-poisoned children, and bringing back remnants of the "welfare" mother archetype. Baltimore residents were outraged at this comment, and many of them called for his resignation. However, this never came, and Secretary Holt remained in his position despite "[stereotyping] specific sectors of Baltimore" (*Readers Respond: Holt should step down*, 2015). However, the fact that there was public pushback — even if he was able to remain in his position — showed how perceptions of mothers

and their role in lead exposure have shifted. Amidst a time of great support for lead poisoning legislation sixty years after Baltimore started addressing lead, I go back to 1990, where Jim Keck and other lead experts summarize the problem of lead poisoning well: "one of the reasons lead poisoning doesn't capture the public imagination is that it has been stereotyped as the problem of inner city children eating paint chips [unbeknownst] to neglectful mothers" (*Panel told of lead poisoning*, 1990).

"Please help me live my life again": Baltimore mothers and letter writing as activism

In direct opposition to this narrative of "neglectful mothers," I found letters preserved at the Baltimore City Archives that reveal *one* of the ways in which Baltimore City mothers attempted to take control of their situation with lead exposure, as they redefined their spaces in the face of government abandonment. I emphasize that this is *just one* example of mothers acting; mothers were likely acting in other forms, but this is what is documented in the city archives.

Letter writing is a form of activism (Nieves, 2020). In her exploration of a "Letter Writing as Activism" assignment for her class, which guided her students to "examine their lives and write truth to power," Nieves (2020) reflects on their experiences of empowerment after writing a letter (p. 101). As one student wrote, "letter writing empowered me as a student and as a Latina because it helped me understand that my voice is so much louder than I can ever understand" (Nieves,

2020, p. 99). However, Nieves (2020) also examines the drawbacks, rooted in getting responses that weren't "general block letters" (p. 100). Cohen (2002), in his analysis of children's letters to former First Lady Eleanor Roosevelt during the Great Depression, found that, while these children were "victims" of the Depression, their letters were a "testament to their refusal to be passive in the face of hard times" (p. 27). Thus, these letters from Baltimore City mothers depict how they refused to be passive in times of extreme hardship.

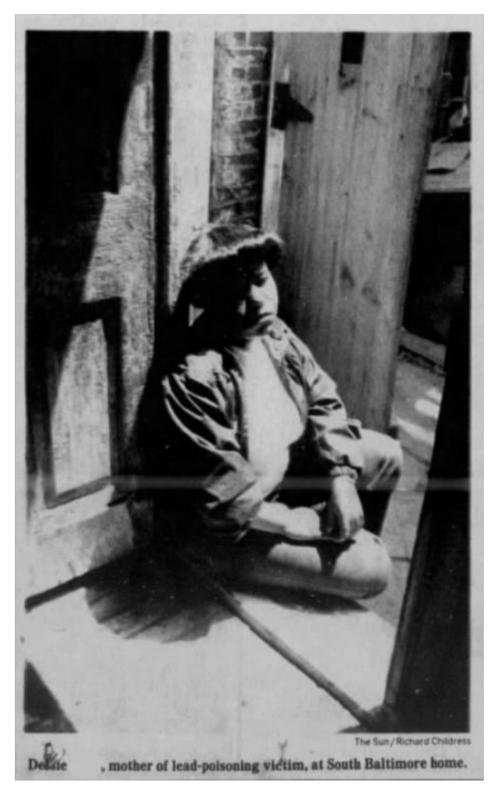


Figure VIII: "Debate on lead paint: vital public health issue." David Brown, *The Baltimore Sun*, May 29, 1983. Page 1.

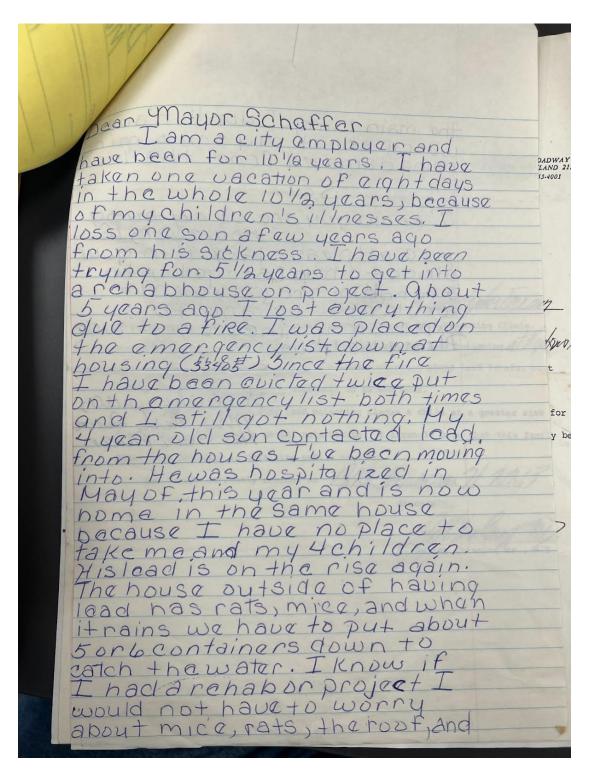


Figure IX: Gere's Letter, #1.

Baltimore City Archives, Mayor's Office records, William Donald Schaefer, box 669, "Lead Paint."

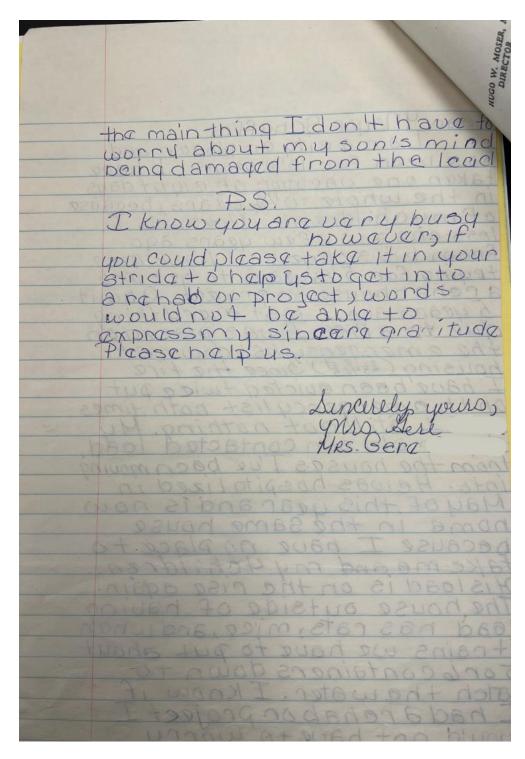


Figure X: Gere's Letter, #2.
Baltimore City Archives, Mayor's Office records, William Donald Schaefer, box 669, "Lead Paint."

I first focus on a handwritten letter from Gere, a Baltimore City employee whose son was lead poisoned. Gere emphasizes her dedication to her role as a city employee, describing how she has only ever taken eight days off work in her ten-and-a-half years of service due to her children's illnesses. Gere has faced child loss, displacement due to a fire, and struggles to get government-funded housing. Her current residence, plagued by rats, mice, and a leaky roof, has given her four-year-old son lead poisoning. She is unable to secure alternative housing for herself and her four children, so they continue to reside in the same home that exposed her son to lead. In her letter, Gere requests help from Mayor Schaefer in getting into a rehab or project, where she won't have to worry about "mice, rats, the roof, and the main thing... [her] son's mind being damaged from the lead" (Figures IX and X).

Gere constructs a narrative that reinforces and challenges the dominant ideas surrounding responsibility, poverty, and motherhood. Gere fulfills expectations of the "deserving poor" – she emphasizes her decade-long commitment to the city and her continued care for her children, portraying traits which are typically demanded from social welfare recipients. Yet, her letter subtly disrupts these expectations. Through a painted self-portrait of grief and hardship, Gere exposes the structural injustices that have failed her and her children, despite her many years of dedicated service. Her letter rejects the stereotype of the poor neglectful mother, instead reframing her family's suffering as a product of structural neglect as opposed to personal irresponsibility. Further, as both a city employee and a housing-insecure mother, Gere complicates the often-assumed divide between the state and its marginalized citizens.

Like Nieves' (2020) student, Gere leveraged her voice in a space that excludes those like her. Her voice – humble, yet insistent – demands to be seen not as an exception, but as a reflection of a broader systemic injustice, forcing those in power – Mayor Schaefer – to reckon with the contradiction of a government that can employ a woman for over a decade, but cannot guarantee safe and healthy housing for her children at home.

I now turn to Marlene, a repeat letter-writer to Mayor Schaefer. Marlene's letter is palpable with emotion as she explains how her young daughter is in the hospital with a severe case of lead poisoning, an especially frustrating situation considering Marlene's repeated attempts at securing rehabilitation housing and/or Section 8. At a minimum, Marlene has been fighting with the Housing Department since 1976, as she writes this current letter in 1984. Marlene shares that the hospital will not let her daughter come home until she has successfully gotten lead-free housing. Marlene attached a letter directly from the pediatric hospital, corroborating her need for "appropriate housing" (Figure XII). She begs Mayor Schaefer to "please do something. There are housing sitting around doing nothing and I am hurting please help me live my life again" (Figure XI).

Marlene's letter reflects the same failures that Gere experienced; rather than the result of inaction or personal irresponsibility, her child's lead poisoning is the result of a system that has repeatedly failed her despite her years-long efforts to secure safe housing. Marlene's inclusion of official validation of her claims from the pediatric

hospital underscores the legitimacy of her need. Her direct appeal to Mayor Schaefer exposes the emotional tolls of systemic neglect and challenges the notion that poor women simply wait passively for help. Like Gere, Marlene reinforces aspects of the "deserving poor" narrative through her focus on her child's welfare and her persistence in navigating the housing system, but she also pushes back against deeper assumptions. Her letter demands urgency and exposes the neglect of the Housing Department.

	Marlens
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	1/10/04
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Salti	I.D. NO. 22903. My BABY is In The
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	Mrs Marlene I.D. No
	L.V. IVO
MA WEST	

Figure XI: Marlene's Letter.

Baltimore City Archives, Mayor's Office records, William Donald Schaefer, box 855, "Lead Poisoning - Lead Paint, 1985-1986."

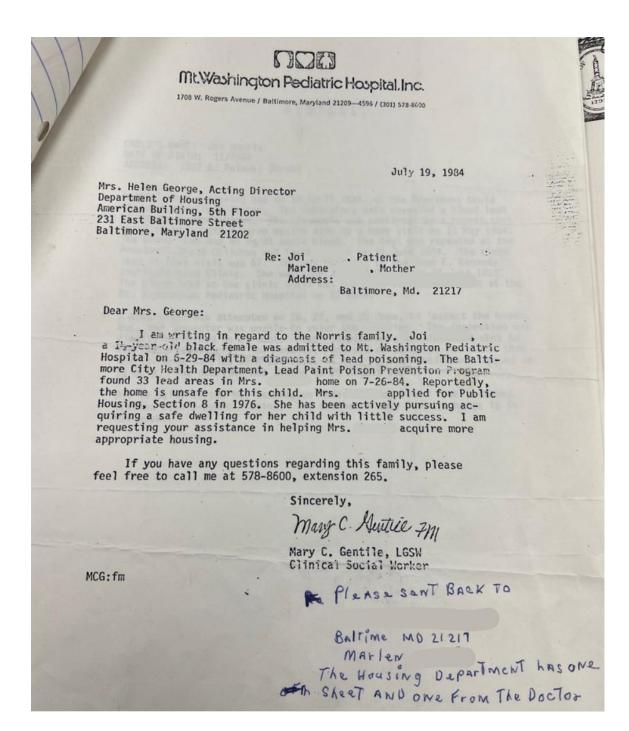


Figure XII: Marlene's Supplemental Document.

Baltimore City Archives, Mayor's Office records, William Donald Schaefer, box 855, "Lead Poisoning - Lead Paint, 1985-1986."

Musmeri Peres

Donna

Baltimore, Maryland 21205 August 18, 1986

Mr. Steven H. Sachs Attorney General Munsey Building 7 North Calvert Street Baltimore, Maryland 21202

Dear Attorney General Sachs:

This letter is concerning my son Darryl , Jr., who is eighteen (18) months old, and now has lead poisoning. I have been living at Street since August 19, 1982, and the house is deplorable. There is chip paint visiable from the ceilings, walls, windows, and the floors. To this date, there has never been any maintenance done to improve the condition of the apartments in this house.

Darryl was tested April, 1986 at Johns Hopkins Hospital, and his lead count was diagnosed at 25. Mr. D. Woods, from the Baltimore City Health Department, came out on July 1, 1986, and retested Darryl and his sister (Donnita) for lead. Donnita was diagnosed as lead free, but Darryl's lead count remained the same. We discussed lead poisoning, and children with lead poisoning, the effects, symptoms, and what can be done to bring down a high lead count.

After Mrs. Woods visit, I called the Housing Complaints Inspector, on July 10, 1986. The Housing Inspector sent out Mr. Brewer on July 22, 1986. He took samples from my apartment, and told me Darryl's lead count had increased to 50. Immediately after the Inspector's visit, I contacted JSM Management (my landlord). He was unavailable, so I spoke with his secretary. I informed her of the condition of the apartment, and the status of my son's health. I received no results nor response from the landlord.

Dr. Ann Kavaugh, Johns Hopkins Hospital, examined Darryl again, and his lead count was diagnosed at 51. Dr. Kavaugh told me that his lead count was entering the danger zone, especially for a child his age. She also stated, Darryl should not be in the apartment, because he would be continuously subjected to a lead poisoning environment. Having a lead count this high, she recommended referring Darryl to a specialist.

Dr. Kavaugh's recommendation to refer Darryl to a specialist was a great relief, but nothing materialized. I did not hear from her again, and there was no follow-up.

Figure XIII: Donna's Letter, #1.

Baltimore City Archives, Mayor's Office records, William Donald Schaefer, box 855, "Lead Poisoning - Lead Paint, 1985-1986."

Attorney General Sachs Page Two

I made several calls to many organizations, agencies, and city programs, and received no assistance. It seems as though, I am being prejudged, pushed aside, put on hold, and probably ignored because I am young, poor, and black; depicted by these resources as a shiftless, lazy, ignorant, welfare recipient.

Because of these attitudes, my child is a victim of neglect, and abuse credited to programs established to assist the under privileged; but in all actuality, pays the bills for the well breed shiftless, lazy, ignorant middle class people who disregard people with problems such as mine. I know this is a personal opinion, but this is what was reflected to me from "city employees".

The last referral I made for Darryl was at the Kennedy Institute. His lead count was diagnosed at 60.

Since my son's exposure to lead poisoning, his attitude has changed. He is not healthy nor energetic; has no sparkle in his eyes; has lost his appetite (on a special diet), and sleeps for hours.

Eventually, JSM Management sent out an employee to examine the apartment. He took a sample (one piece of chipped paint) from the ceiling of the children's bedroom, and plaster from my bedroom wall. He told me that the landlord said "if there was any lead visible in the house, he would paint it over. That was the last I heard from the landlord (results, zero).

My child is not doing any better. As a mother I am deeply concerned about his health, and at this point I am distressed, depressed, and angry. I do not know what to do next. Mr. Sachs this is why I am writing to you. My neighbor stated she read an article in the Daily Record where you were discussing lead poisoning as an issue, and the negligence of the City on this issue.

Please help me! I am very much afraid for my child's life. You seem to be my last hope! I have no phone, my mailing address is on page one.

P.S.

As of this date, the child on the first floor has also been diagnosed as a lead poison victim.

cc: The Honorable Parren J. Mitchell The Honorable William Donald Schaefer Councilman Kweisi Mfume Mr. George Buntin - NAACP

Figure XIV: Donna's Letter, #2.

Baltimore City Archives, Mayor's Office records, William Donald Schaefer, box 855, "Lead Poisoning - Lead Paint, 1985-1986."

Lastly, I examine a typed letter from Donna, whose young son has lead poisoning.

Writing methodically, Donna recounts who she spoke to, what they said, what actions

were taken (or not), and what results were received (or not). Drawing in specific names and dates, Donna frames herself as a proactive parent: calling housing inspectors, doctors, organizations, agencies, and city programs, all with little or no relief. Donna's letter is drowning in anguish as she repeatedly expresses how she is "distressed, depressed, and angry," unsure of what to do next as she fears for her child's life. She concludes by referring to Attorney General Sachs as her "last hope" (XIV).

Unlike Gere and Marlene, Donna distances herself from the "deserving poor" narrative. She references the harmful perceptions outsiders may have of her — "young, poor, and black... a shiftless, lazy, ignorant, welfare recipient" and how these work together to make her feel "prejudged, pushed aside, put on hold, and probably ignored" in the eyes of public health and housing institutions (Figure XIII). She goes on to critique programs "established to help the under privileged" for failing in their prescribed duty and instead "[paying] the bills for the well breed shiftless, lazy, ignorant middle class people who disregard people with problems such as mine" (Figure XII). More than just a plea, Donna's letter exposes the racialized neglect in Baltimore City, exposing how stereotypes of "welfare mothers" justify inaction and invalidate the voices of poor Black women.

The letters from Gere, Marlene, and Donna are quiet yet powerful forms of resistance, acting in direct opposition to narratives of neglectful, irresponsible poor mothers constructed in *The Baltimore Sun* and *The Evening Sun*. Distanced from passive

recipients of aid, these three women document their persistent and often futile efforts at protecting their children from the dangers of lead. Gere leverages her status as a long-serving city employee, Marlene emphasizes the urgency of her daughter's hospitalization and her years-long advocacy, and Donna directly names the racism, classism, and apathy that have rendered her voiceless and her struggles invisible. In their own ways, each woman attributes their children's lead poisoning to broader systemic inequalities and state failures rather than personal irresponsibility. These letters act as evidence of how Black women and women of color, often dismissed, have engaged in strategic and emotionally vulnerable forms of activism. These letters stand as a "testament to their refusal to be passive in the face of hard times," a testament to the everyday labor of survival and advocacy marginalized women are forced to take — not because they are irresponsible, but because the structures meant to protect them refuse to see them at all (Cohen, 2002, p. 27).

## Summary

The textual analysis of archival material revealed countless instances blaming parents and mothers for Baltimore's lead poisoning epidemic. However, I argue that, in these articles, the terms "parents" and "mothers" were synonymous due to the unequal distribution of household labor. When asking "parents" to watch their children more closely or wet mop hard surfaces, it will likely be the mothers of the household performing these tasks, as they are disproportionately responsible for the care work in the household. In their study of public comment on the 2020 El Dorado wildfires, Bloomfield and Rice (2023) note similar findings — "no comments specifically

referenced the father, he only appeared within references to the 'parents'" (p. 440). Demanding these tasks be performed simultaneously responsibilizes them for the lead exposure of their children, while also increasing the work they must perform. This is exacerbated for mothers in "slum areas" or low-class neighborhoods, who were labeled as "negligent" or "careless" when their children were lead-poisoned. However, Baltimore City mothers engaged in letter writing to government officials as a form of activism, using emotionally laden narratives about their experiences trying to protect their children from the dangers of lead. Through these letters, they directly challenge the "neglectful" mother, in addition to individualized notions of blame. I now turn to the results of my interviews, where I explore the legacy of these newspaper narratives.

## Interviews

## Framing the interviews

I conducted three (3) interviews over the summer of 2025. Additional interviews were sought out; however, it was a challenge to get responses to my recruitment emails. I theorize this may be, in part, due to the busy nature of lead poisoning professionals. This will be touched on in subsequent sections. Although they were small in number, the interviews gave incredibly powerful insights into the daily experiences of lead poisoning professionals. All three of my interviewees were dedicated Maryland state employees; two of my participants were men, while one was a woman, and two of my participants were White, while one was Black. As a reminder, the questions were

crafted prior to the establishment of an official focus on mothers being blamed for the lead poisoning of their own children. However, the inclusion of the question "Are there any stigmas associated with lead poisoning that you have observed in your work?" allowed for observations of parental blame to take shape. I will open this section with interview results that focused on broader themes of parent-blame. I will then touch on other themes that arose surrounding questions of stigmas/perceptions outside of parent-blame, public awareness of lead, challenges to lead mitigation, successes in lead mitigation strategies, and future directions.

"Why did [they] let [their] kids eat all this paint?": Parent- and motherblame

When asked about lead poisoning-associated stigmas, two participants confirmed the stigmatization of lead poisoning as a problem stemming from the care (or, rather, an assumed lack thereof) from parents. Participant 2 felt as though there is a stigma that "children eat paint," and, to prevent them from getting lead poisoning, parents must "keep them from eating paint." Further, the same participant felt that there is a perception that lead poisoning is a problem of "ineffective parenting" that will simply be fixed by "[cleaning] your house." However, the same participant countered this claim, drawing from their own experiences working in the field. Participant 2 recounted occasions where they "have been in pristine housing where children with conscientious moms eat actual chips." With this statement, the participant was indicating that, regardless of a home's supposed "cleanliness" level and a mother's education level on lead, children are at risk of lead poisoning. It is interesting to note

that the participant highlighted "conscientious moms," rather than conscientious parents.

Further, Participant 3 shared that, rather than lead poisoning being a result of "parents doing something wrong," it's the "environment not providing for families." However, this same participant followed up with the comment that they sometimes "have the thought of wishing parents would have done something differently," wondering "why did [they] let [their] kids eat all this paint?" While Participant 3 acknowledges the false narrative of parents "doing something wrong" in terms of lead exposure, they then proceed to perpetuate these same narratives, blaming parents for "letting" their children eat paint. This contributes to the image of a "careless," "neglectful," or "passive" parent, one so heavily depicted in the newspaper archives. I believe this statement is uniquely placed, likely rooted in frustrations at severe cases of lead poisoning, frustrations that are exacerbated by their position as someone working to address lead exposure. At the same time, though, their position is what makes such a comment so harmful.

It is evident that the sentiments found in newspapers did not fade with time. It was reflected in the sentiments of Kenneth C. Holt, and it was reflected in the observations of lead poisoning professionals. Two of the participants identified that lead poisoning is often viewed as the fault of the parents, and as specifically identified in the sentiments of Participant 2, mothers. I will now branch off into other observations drawn from the interviews.

Where to look: Community perceptions beyond mother-blame Parental blame was not the only community perception of lead poisoning identified by the participants. As I touched upon heavily in Chapter 1, lead poisoning is often viewed as an environmental injustice due to its disproportionate impact on lowincome communities and communities of color. Both Participant 1 and Participant 2 identified that many hold this view, that lead "only affects poor, inner city children" (Participant 2). Participant 1 follows up by saying that lead poisoning is often viewed as a "minority issue [and a] poor people issue." The perception of lead poisoning as an environmental injustice, one that primarily affects poor people of color, may have contributed to lags in addressing lead poisoning. This draws in questions of expendability and the state – how "marginalized human populations are treated – if not viewed – as inferior, and less valuable," and how that reflects in formal policy (or a lack thereof) (Pellow, 2016, p. 224). While there "may be some truth to socioeconomic conditions, that it happens in poor people's homes," Participant 1 goes on to mention that they "see homes in western Maryland [and the Eastern Shore] that are ravaged by lead." The fact that severe cases of lead exposure occur in more "affluent homes" should not go unnoticed (Participant 1). It is important to approach lead poisoning cases with an eye towards equity, to ensure that children of color, those most impacted, are not left behind. However, it is also important to ensure that

children in more "rural" areas are tested and addressed.

Further, many assume that lead paint is the "only" source of exposure affecting children (Participant 2). According to the 2023 Maryland Lead Registry Annual Surveillance Report, paint was the top source of exposure in Baltimore City (Maryland Department of the Environment, 2025). Paint was also the top hazard in pre-1950 rental-occupied housing. However, Participant 2 brings attention to increased exposure via other sources, such as "immigrant populations bringing medicinal or celebratory [objects] into the country." The report mirrors these sentiments, depicting increased hazards through spices, "immigrant," and makeup among 1950-1977 rental-occupied housing. Both Participant 2's sentiments and the MDE report feed into false narratives of the "diseased foreigner," one in which "otherness" is associated with disease, where immigrants are perceived as vectors of biological threats (Jung, 2018). The ever-changing sources of lead and geographic expectations (i.e., in rural, more "affluent" areas) cause increased challenges in mitigation, which will be explored further in a subsequent section.

# An "old thing": Public awareness of lead

When asked about public awareness of lead, participants offered a range of responses. Participant 3 noted increased public awareness of lead and its dangers, especially in the face of partnerships and attempts at community engagement. I will touch on the latter in section 3.5. However, Participant 2 acknowledged how the "general public doesn't understand it takes minor absorption to give skyrocketed rates." Further, there are gaps in understanding how "even lower levels are problematic, and it doesn't take a lot to cause concerning exposure" (Participant 2). Studies have identified how, even

at incredibly low blood lead levels, children are still affected by the impacts of lead ("there is no safe level of lead exposure"). However, given the response of Participant 2, it is evident that the public equates significant impacts of lead exposure to high blood lead levels. Further, Participant 1 highlights how the public often thinks of lead and lead exposure as an "old thing," a feat that has been "conquered." Participant 1 also claims that lead poisoning has been "normalized." This is reflected in the aforementioned documentary "Hiding in the Walls," where Danni, who was lead poisoned as a child, marks it as a cultural norm in the city. Both the gaps in education and perceptions of lead poisoning as an "old thing" act as challenges to addressing lead exposure, which I will address in the next section.

"You're a scientist and a social worker": Challenges to lead mitigation

Despite the significant strides made in Maryland, participants identified many
challenges in addressing lead poisoning. The prior discussion on lead as being
perceived as an "old thing" was called out by Participant 1 as a barrier to addressing
lead poisoning, "both in terms of reaching out to the public, working with partners,
funding... everyone doesn't care outside of those who think it's still a problem." If
the public, potential partners, and potential funding sources do not understand the
continued gravity of the lead poisoning epidemic, then how will it get adequately
addressed? Additionally, Participant 1 touched on the fact that relationships between
certain agencies are strained, which may affect inter-agency communication and the
efficacy of lead programs.

Further, while the continued lowering of the blood lead level threshold helps reach more children affected by lead, it causes lead professionals to "[scramble] to catch up to skyrocketing cases" and merely "[do] what they can" (Participant 1). Participant 2 shared similar sentiments, posing the question of "are we doing a disservice to these families and children by not providing the best public health service we could? You don't want to miss things, but when you're just cranking out numbers and inspections, there's a [missing] human element." Participant 2 revealed that, in the recent 2023 testing report, numbers went from accurately diagnosing 300 children with elevated blood lead levels to estimating 2,500-3,000 children with elevated levels. Subsequent efforts to "identify hazards that may have caused [the lead exposure]" thus become particularly challenging, where "sometimes [inspectors are] going into homes where [a] child has spent all their time and can't identify [the] source" (Participant 2). The lower blood lead levels "[broaden] the pool of hazards" (Participant 2). Further, with blood lead level thresholds so low, professionals are "shifting away from primary prevention and now going in after the child was poisoned" (Participant 2). The challenge of identifying children with elevated blood lead levels, identifying lead hazards in homes, and pushing for primary intervention under decreasing "acceptable" levels of lead is exacerbated as the workload increases, but resources remain stagnant.

This trouble with resources is consistently identified as a challenge among all three participants in the challenges outlined thus far. Participant 3 specifically acknowledged resources as a challenge to combating lead poisoning, while calling

their agency's budget "not enough." Participant 1 shared how identifying and receiving funding is a challenge, while also reflecting on difficulties in keeping inspectors, as they "don't make as much money in [the] government as they would in [the] private sector." Participant 2 reinforces this latter point, claiming that the government doesn't want to "pay state employees that much, [and they are] losing people to private companies." Participant 2 repeatedly emphasized a lack of resources, especially as the blood lead levels keep getting lowered. It was in these conversations about resources where I realized the power I held as a researcher. One participant expressed slight worry about their comments regarding resources being connected back to them. It was then that I reminded them of the processes in place to protect their identity, and especially how the meeting was not being recorded. As mentioned in Chapter 2, I thought originally that there were few power imbalances due to our differences in age, education, and professional career. However, as they were vulnerable with me about the concerns they have about their work, it became abundantly clear that I was privy to information they deemed sensitive. This point plays into earlier mentions of reflexivity; as a researcher, I am constantly aware of potential power imbalances and go about my methods with a sense of care, care for my interview participants, and their comfort.

Lastly, a main concern brought up by Participant 2 related to the transient and already-vulnerable populations. Participant 2 stressed the difficulties in "being able to intervene with families who are experiencing many other socioeconomic issues, from no housing, fear of retaliation – a lot of times, for populations being served, there are

a lot of issues that trump lead exposure." Participant 2 explored how exactly to communicate the importance of lowering a children's blood lead level, especially as they are "not incentivized to allow the government to come into their property to tell them that, in other terms, [their] parenting is lackluster." Participant 2 then explored the many hats they have to wear – these conversations are hard to have with either an environmental mindset or a public health mindset. To relate to families, Participant 2 described wearing multiple hats – an environmental hat, a public health hat, and a social worker hat. These are all required to ease the fears of families, explain how they were there to help them, and identify hazards. Participant 2 acknowledged the sensitive nature of the cultural implications of critiquing one's housing, as well as fears of being deported. Participant 2 states that, "as [the] population diversifies, it becomes more challenging to be able to intervene with those with fears of being deported, being thrown out of the house – [it] speaks to that environmental professionals involved with these children have to wear multiple hats – you're a scientist, and a social worker." It is evident that the work of lead poisoning professionals is infused with care as they must go about their face-to-face work with elements of empathy and understanding. These same concerns around immigrant populations are reflected in Participant 3's response, where they are worried about "staying on top of products coming in the U.S." In terms of transient populations, Participant 2 described how it tends to be problematic "trying to maintain and track children."

"Staying with the times": Successful mitigation strategies

These challenges do not undermine the progress made in Maryland. All three participants highlight the significance of the Maryland Lead Law (1994), which is among the strongest in the United States. This, partnered with what Participant 2 calls "staying with the times" as federal partners lower blood lead level limits, has rewarded Maryland with great success in reducing lead poisoning rates. Further, working to dispel the narrative of being seen as "the big bad government" has been effective (Participant 1). In attempting not to be seen as "the enemy," entities in Maryland have been trying to work with property owners and landlords, rather than against them. In the same breath, working "with" others, in terms of partnerships, community outreach, and community engagement, has been incredibly successful. Participant 1 lists off numerous partnerships, including nonprofit organizations such as Green and Healthy Homes Initiative, local health departments, the state's Department of Housing and Community Development, the Centers for Disease Control, the Environmental Protection Agency, and the Food and Drug Administration. Specific community events/programs outlined include volunteer time with state departments, the state fair, public forums, and outreach activities with Baltimore's Enoch Pratt Free Library ("Lead Free and Me") and the creation of a kid's calendar and coloring book with the Maryland Institute College of Art (MICA). The "environment doesn't work with borders" – Participant 1 details how conversations are held with everyone, emphasizing the amount of intergovernmental and inter-agency communication. It is important to draw back to the prior discussion of state failures in addressing environmental injustices. The federal, state, and local

governments' role in combating the lead epidemic has been fraught with inaction and abandonment. However, it is evident that Maryland is actively working towards a "lead-free" environment for all children; recipients of state action and those working for the state are not always in opposition and may blend/overlap

Lastly, in tune with Governor Wes Moore's motto of "leave no one behind,"

Maryland has implemented the universal testing of all children – "leave no child behind" (Participant 2). These strategies have informed lead poisoning professionals to the present and will inform them into the future. However, they make no clear efforts at destigmatizing lead poisoning.

Future directions and incorporating the voices of those most affected

Each participant had their own ideas as to what they envisioned as "future directions"
to combating lead poisoning. These ideas are rooted in their daily experiences and
what they've witnessed to be successful or otherwise. They are also rooted in the
reality that future directions will inevitably end up in lower blood lead reference
levels, which will become difficult to manage without increased resources. Participant
1 outlines several methods, including developing more research on who's been
impacted, increasing testing, increasing public trust (especially with refugees),
continuing coordination with local, state, and federal agencies and with other states,
transparency (i.e., list of violations), speeding up the investigation process to get into
homes, and going after the "people responsible, like lead paint
companies." Participant 2 emphasizes the ever-increasing challenges associated with

lowering the reference level, but amplified the importance of investing in Maryland's children, their education, and special education programs. Lastly, Participant 3, sharing sentiments regarding the need for increased resources, imagines improved early intervention, switching lead levels before there's an impact on labor, and "more than ever" trying to engage with communities, through ways such as having a member of community/parent of a lead poisoned child on the Lead Poisoning Prevention Commission, and hosting commission meetings in impacted communities.

## Summary

In sum, I conducted three interviews that offer a multifaceted view into the work of lead poisoning professionals. Despite the meaningful strides in Maryland's mitigation strategies, the enduring stigma that parents, particularly mothers, are to blame for their children's lead exposure continues to shape public perception. This narrative both obscures the structural and environmental roots of lead poisoning and burdens individuals navigating structural failures, such as Gere, Marlene, and Donna. The professionals I spoke with revealed the emotional and logistical complexity of this work: balancing science with the empathy of social work, all while navigating insufficient funding, ever-changing blood lead level thresholds, and populations burdened by intersecting vulnerabilities. These insights make clear that while progress has been made, transformations rest in sustained funding, research, and collaboration/relationships between states and agencies.

### Field visits

#### The events

This section explores the various in-person events I attended throughout this project. I highlight three in particular: shadowing at a lead clinic, attending the 2024 National Lead Poisoning Prevention Week Press Conference (NLPPW), and participating in the NLPPW resource fair. These experiences added an additional first-hand component to my work as I was able to directly witness the lived experiences of children and families affected by lead poisoning, and the resources that are available to them.

#### Lead clinic

The clinic had somewhat of a late start as we awaited the arrival of families. I, myself, had arrived a few minutes late, getting lost multiple times in an attempt to find the small office nestled in the back corner of the building where the team hunkered down in between visits to families. I showed up apologetic and in disarray, as I especially don't like being late. I introduced myself to the all-female team, a fact that stuck out to me. As part of my introduction, I explained my research project to the head nurse, giving a broad overview of the strong traces of mother-blame I found in Baltimore newspapers. Her expression didn't change, nor did she have the "jaw drop" or the "of course they were blamed" moment as others usually do when I explain to them my findings. Instead, she responded that people *still* blame mothers – she has encountered instances where individuals are afraid to reach out for resources

out of fear of being blamed, and has heard stories of lead inspectors, who go into homes to determine sources of lead exposure, blaming the mother of the household. To me, the nurse's comments tied my project together – mothers were actively blamed in the newspaper media, which, as observed by lead poisoning professionals, stigmatized lead poisoning as the fault of "negligent mothers," who, in the modern day, are hesitant to reach out for help. This made me wonder, how many families are not receiving the care they need out of fear of being blamed?

As we continued various small talk, I watched as the social worker used Google Translate to communicate in Spanish with parents using a messaging platform, and ordered Lyft rides, a ride-sharing app, for those with transportation barriers using hospital funds. As someone who relies on public transportation, this latter effort was particularly impactful to me. Nobody should go without important medical care due to a lack of transportation or because they're unable to afford the commute. As I asked about the Lyft rides, the social worker explained they're able to occasionally order them for families coming in, so long as the finances are available. They also offer remote visits and check-ins in particularly strenuous circumstances. This emphasized the sentiment that many families are dealing with intersecting issues, as Participant 2 discussed in their interview. However, the staff at the lead clinic understood this and offered the necessary services that made visits accessible for families.

In fact, what struck me most was the dedication and care these women at the lead clinic had for their work and their patients. The head nurse told me that the clinic sees a flow of new and old patients, with the old patients returning every 2-3 months for a check-in. Yet, the staff easily remembered the most minute details about each child and their situation and even talked of children who weren't coming that day. They remember because they care. They also extended care to the parents of patients. As I played with a young child to keep them busy while the practitioners spoke with their mother through a remote translator on wheels, the mother emotionally expressed fears of U.S. Immigration and Customs Enforcement (ICE) and was thinking of returning to her country of origin. As Participant 2 explained in their interview, it is becoming increasingly challenging to help families who fear deportation. While I will explore this in greater detail in the final section of this chapter, how will increased ICE presence affect the ability of children of immigrant parents or immigrant children to get lead treatment?

Shadowing at the lead clinic was a grounding experience. I felt the hard work, the urgency, and the care of the staff, and I felt empathy and anger at the precarious situations these children are in, at the fault of a man-made epidemic. Leaving the clinic, I wondered more about the barrier facing families in attaining lead treatment, whether inspired by mother-blame, or ongoing political and humanitarian crises, both of which I will explore in the final chapter.

#### NLPPW Statewide Kick-Off Press Conference

Sitting in one of the back rows of Baltimore Unity Hall's meeting space, I watched as others filed into the room and greeted those they were familiar with. As I did not recognize anyone, I kept to myself, instead reviewing the agenda. Printed across the top of the page was 2024's theme – "30 Years of Lead Poisoning Prevention: Bright Futures Start Lead Free." I couldn't help but wonder, what about children whose lives didn't start lead-free? Are their futures suddenly not as bright? I think now of the children whom I met at the lead clinic. What about their futures? I think of Angel and David's documentary, in which they detail the bright futures of adult lead poisoning survivors. While bright futures should start lead-free, they often don't.

On the agenda, I noticed there was time dedicated to "family stories." While it ended up only being a minute or so (from what I believe to be the mother's nervousness at speaking in front of a larger crowd), she was given the floor to share about her experiences with lead poisoning and the ways she was supported by Green and Healthy Homes Initiative (GHHI) and other state and local agencies. In order to continue to dispel the harmful narratives constructed in newspapers that then persisted across time, space must be given to the mothers of lead-poisoned children in order to hear their stories and lived experiences.

#### NLPPW Resource Fair

Following the press conference, there was a resource fair directly across the street from Baltimore Unity Hall. There was free food and beverages, fun activities for children, and a dozen or so tables for different organizations and agencies offering various health- and community-related pamphlets. I went to every table, hearing the different "spiels" and collecting all the handouts. As I collected as much as I could, I noticed that many of the flyers work to individualize responsibility for lead exposure. The tasks they outline in the following figures are helpful guidance, such as "wash kids' hands and toys often," (Figure XV), "make sure children eat healthy low-fat foods high in iron, calcium, and Vitamin C," (Figure XVI), and avoid letting children play in bare soil (Figure XX). While these handouts give a certain power to parents to take their children's health into their own hands, it is also important to identify how this may act as a burden for some, particularly those with existing time and resource constraints (also, both may be true at once). As quoted in Figure XIX, "you have the power to help protect your children and families from the dangers of lead poisoning."



Figure XV: "Lead Exposure 101" from Green & Healthy Homes Initiative.

Handout given on Monday, October 21, 2024 at the National Lead Poisoning Prevention Week

Community Day and Resource Fair.

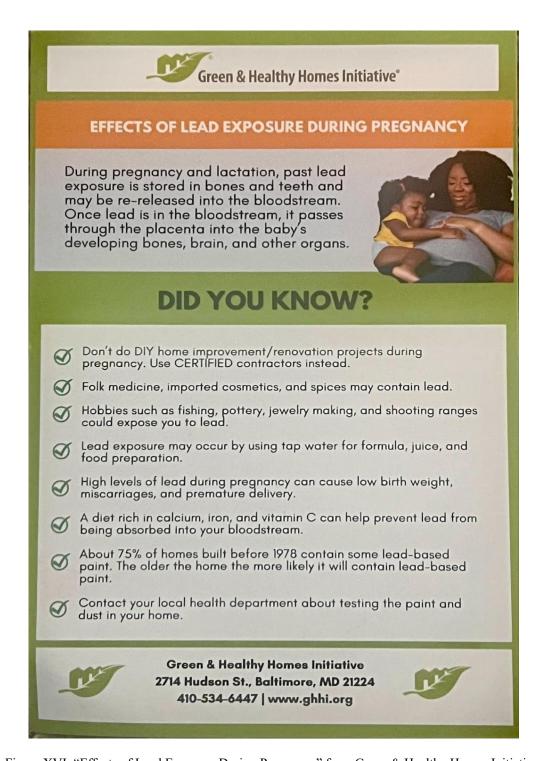


Figure XVI: "Effects of Lead Exposure During Pregnancy" from Green & Healthy Homes Initiative.

Handout given on Monday, October 21, 2024, at the National Lead Poisoning Prevention Week

Community Day and Resource Fair.

# Simple Steps to Protect Your Family from Lead Hazards

## If you think your home has lead-based paint:

- · Don't try to remove lead-based paint yourself.
- Always keep painted surfaces in good condition to minimize deterioration.
- Get your home checked for lead hazards. Find a certified inspector or risk assessor at epa.gov/lead.
- Talk to your landlord about fixing surfaces with peeling or chipping paint.
- Regularly clean floors, window sills, and other surfaces.
- Take precautions to avoid exposure to lead dust when remodeling.
- When renovating, repairing, or painting, hire only EPA- or stateapproved Lead-Safe certified renovation firms.
- Before buying, renting, or renovating your home, have it checked for lead-based paint.
- Consult your health care provider about testing your children for lead. Your pediatrician can check for lead with a simple blood test.
- · Wash children's hands, bottles, pacifiers, and toys often.
- Make sure children eat healthy, low-fat foods high in iron, calcium, and vitamin C.
- Remove shoes or wipe soil off shoes before entering your house.

Figure XVII: "Simple Steps to Protect Your Family from Lead Hazards" in the packet "Protect Your Family From Lead in Your Home" from U.S. Environmental Protection Agency, U.S. Consumer Product Safety Commission, and U.S. Department of Housing and Urban Development.

Handout given on Monday, October 21, 2024, at the National Lead Poisoning Prevention Week Community Day and Resource Fair.

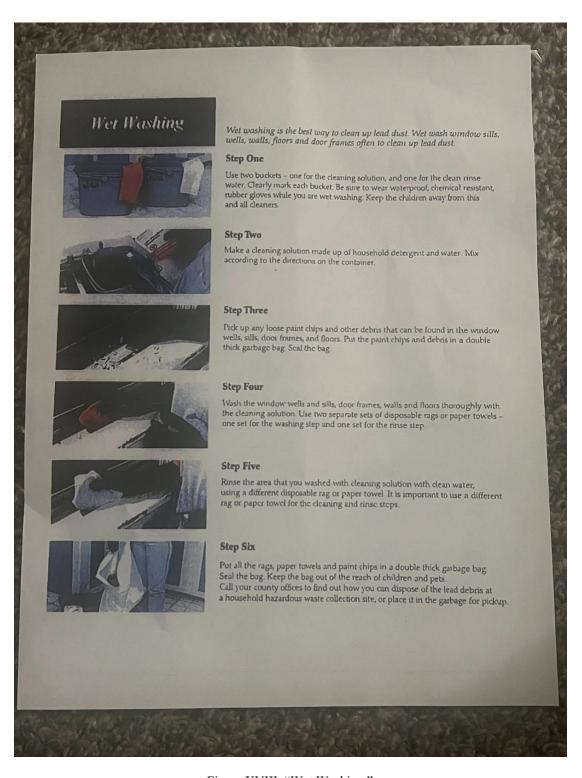


Figure XVIII: "Wet Washing."

Handout given on Monday, October 21, 2024, at the National Lead Poisoning Prevention Week
Community Day and Resource Fair.



Figure XIX: "Chips, Flakes, Peels, Dust: Find out why the smallest things in your home can be the biggest danger to your child's health" from the Maryland Department of Health, Maryland Department of the Environment, and Green and Healthy Homes Initiative.

Handout given on Monday, October 21, 2024, at the National Lead Poisoning Prevention Week Community Day and Resource Fair. Side 1.



Figure XX: "Chips, Flakes, Peels, Dust: Find out why the smallest things in your home can be the biggest danger to your child's health" from the Maryland Department of Health, Maryland Department of the Environment, and Green and Healthy Homes Initiative.

Handout given on Monday, October 21, 2024, at the National Lead Poisoning Prevention Week Community Day and Resource Fair. Side 2.

## Summary

Similar to my interviews, my field work affirmed my archival findings. By attending lead-related events, I was able to observe individualized notions of responsibility for lead poisoning; how parents/guardians have felt blamed for their children's lead poisoning, and how parents/mothers are guided in pamphlets and brochures to mitigate risk for lead poisoning through at-home practices. Yet, the fact that the voices of mothers were platformed at the National Lead Poisoning Prevention Week indicated a shift from the "neglectful mother" stereotype, and towards a sense of value for their voices, experiences, and strength.

# Conclusions

#### Introduction

This chapter constructed a narrow narrative of blame, drawing from archived newspapers, interviews with lead poisoning professionals, and field visits to a lead testing clinic and various events drawing awareness to lead poisoning. With this chapter, I had a specific focus: to shine light on the ways in which Baltimore's mothers were unjustly responsibilized for the lead poisoning of their own children. In the following section, I summarize my main takeaways.

## Main Takeaways

In Baltimore City newspapers, mothers were blamed for the lead poisoning of their children. Mothers were labeled as "negligent," "careless," and "ignorant," as health departments called upon parents and mothers to watch their children more closely to avoid exposure via ingestion. Further, mothers were also urged to follow strict cleaning practices and become widely educated about matters of lead. I argue that these directories shift the responsibility of lead poisoning off of the lead paint industries and the government, and onto mothers, just as the former intended. Included in prior sections are instances of the National Paint, Varnish, and Lacquer Association calling upon parents to ensure their children do not eat paint, or cityfunded pilot programs that, instead of removing the sources of lead, focused on the education of parents as the primary source of intervention (due to the high costs of lead abatement). I argue that associations of lead poisoning with Baltimore's "slum" areas allowed these narratives to take shape, as media constructed images of mothers comparable to those of "welfare mothers," as these neighborhoods, blighted by lead, were devalued and written off. However, they did not go in peace; Baltimore City mothers engaged in the radical act of letter writing to governmental officials to make their voices heard. These letters, containing powerful testimony, were just one way mothers fought for the protection and futurity of their children while breaking from the stereotype of the "neglectful mother."

My interviews and field experiences confirmed that these harmful stereotypes persist today. Through verbal confirmation that there have been recent instances of mother-

blame and the handing out of educational pamphlets that target the actions of parents, the legacy of blame lives on. Additionally, my interviews revealed the ongoing challenges facing lead poisoning professionals in Maryland. This is especially important to acknowledge as lead poisoning continues to be an issue in the state; therefore, it is necessary that a consistent flow of resources is dedicated to the staff. The following concluding chapter will assess the broader implications of these takeaways.

Chapter 4: Toward justice: implications and

recommendations

Introduction

Throughout this master's thesis, I painted a picture of how racialized and low-income mothers were scapegoated by the LIA, public health officials, property owners, and the broader public. Rather than demand accountability from the lead industry, which continued to produce and sell leaded paint far beyond knowing of its harm, or governmental entities, who delayed action due to costly measures, "slum mothers" were deemed as responsible, whether it be for "not cleaning enough," or "not watching their children closely enough."

In this brief concluding chapter, I examine the broader implications of these findings, drawing from ideas of Schmitt's (2018) "scapegoat ecology" and Cousins' (2021) "third shift," while emphasizing the importance of storytelling. I then offer recommendations for future research/next steps that are connected to the ongoing political, social, and economic challenges of the modern day.

# **Drawing Out Broader Implications**

"Scapegoat ecology"

The unjust blame on Baltimore mothers' shoulders must be connected to broader ideas and experiences of intersectionality and oppression. Schmitt (2018) coined the phrase "scapegoat ecology," in which "attention and vitriol [is focused on] a single person [or group] for being particularly harmful to the environment, specially blaming that person for environmental degradation even if that individual's actions have little to no largescale or long-lasting impact on broader environmental issues" (p. 153). Yet, this definition implies wrongdoing, an aspect particularly lacking for Baltimore mothers in this narrative. Therefore, I draw from Bloomfield and Rice's (2023) argument that "sexism, racism, and classism inform scapegoat ecology in that marginalized groups are more likely to be identified as worthy vessels of environmental guilt or are constructed to be so through the rhetorics of Othering" (p. 434). In other words, certain groups are more vulnerable to being scapegoated than others – groups that are gendered, racialized, and classed. These dynamics compound in the figure of the "slum mother" – a racialized, low-income caregiver constructed as neglectful. This pattern is not solely in Baltimore; Sze (2006) identified how the false assertion that dirty housing (mainly in the form of cockroaches) was a primary contributor to asthma shifted the blame onto racialized New York City mothers and their housekeeping practices, resulting in the implication that "bad moms caused asthma" (p. 104). These cases reveal a distinct pattern in which mothers of color become repositories, the scapegoats, for environmental guilt. An intersectional lens

both reveals how systems of domination shape exposure to harm *and* the narrative frameworks used to explain it.

The "Third Shift" as a Feminist Environmental Justice Concern Care work and domestic responsibilities disproportionately fall upon women, especially those who are racialized and classed. The same can be said for the labor required to manage environmental risk, such as lead exposure; women of color, particularly those who are mothers in underfunded communities, are tasked with constant vigilance: cleaning surfaces, researching hazards, navigating medical care, and advocating for the health of their children. This invisible labor - "individualized environmental risk management" – constitutes a "third shift" layered on top of paid employment and domestic responsibilities (Cousins, 2021). This labor is increasingly mirrored in other environmental contexts beyond exposure to toxins. In the face of the worsening climate crisis and the increased incidence of climate-related disaster events, such as heatwaves, floods, and wildfires, it is again women, especially in marginalized (and at-risk) communities, who are expected to adapt, protect, and endure. In the Anthropocene – an era of man-made environmental destruction – women must shoulder the burden of household labor, care work, and environmental protection, all while juggling potential public assertions of blame and responsibility. This "third shift" is not just about lead; it's about the growing expectation that care work should absorb the failures of environmental governance. Who exactly will be tackling environmental threats in the private sphere is worth continued examination.

# The Role of Narrative and Memory

Narratives play a powerful role in shaping both public opinion and policy, as witnessed in how the framing of lead poisoning as an individual mother's burden became understood, to some extent, as the truth. The dominant narrative surrounding lead poisoning has often cast mothers as lazy, inattentive, and neglectful—despite extensive evidence pointing to governmental and industrial failure. These stories, circulated through media and, although beyond the scope of this project, courtroom rhetoric, obscure the deeper systemic causes. Yet mothers, through their own voices, offer counter-narratives (i.e., in the form of letters) that resist blame and reveal the intimate, embodied consequences of environmental harm. Their stories are not only testimonials of suffering but also blueprints for what accountability and care might look like. Archival resources like ToxicDocs reveal how corporations carefully crafted their own narratives to minimize liability, highlighting the centrality of story in environmental regulation and denial alike. Future efforts must center narrative as both a methodological tool and an ethical imperative—lifting up voices that have long been ignored or discredited.

#### Recommendations

Taken together, these insights illuminate a need for a new approach, one that understands lead poisoning as a broader, systemic pattern of environmental injustice rather than one of individual inaction. The scapegoating of marginalized mothers, the gendered burden of environmental care work, and the strategic use of narrative by

both institutions and individuals all point toward a deeper set of structural failures. Addressing these failures demands a justice-oriented framework rooted in intersectionality, grounded in lived experience, and responsive to the social and political contexts in which environmental harm occurs. The following recommendations, drawn from my position and experiences as a graduate student researcher, are offered as starting points for reimagining how we respond to environmental toxicity, who we center in that response, and what forms of accountability we must pursue.

- 1. Celebrate the work of public health and environmental professionals, local clinicians, community advocates, and care workers battling the lead epidemic. While there are plenty of valid critiques regarding Maryland's history of handling the lead poisoning epidemic, the work done thus far has been paramount in reducing lead poisoning case rates. However, there is still more to be done; as there are talks of resource constraints, funding should be expanded to lessen the burden on lead poisoning professionals. As of May 2, 2025, Maryland Governor Wes Moore has allocated \$11 million to fight childhood lead poisoning in the fiscal year 2026 budget (McManus, 2025). This type of funding is significant at the local, state, and federal levels, and should continue while we still tackle lead poisoning.
- 2. Take an intersectional lens to lead poisoning research/work. Different identities and experiences compound to make lead treatment less accessible.
  Research and prevention programs must account for these intersecting

- identities, whether it be race, immigration status, class, gender, (dis)ability, etcetera. For example, lack of transportation and fear of immigration law enforcement act as barriers to receiving medical attention for lead poisoning. Funding should be utilized to create programs that support, for instance, transportation assistance and safe access for *all* families.
- 3. Address the structural causes of lead poisoning. The root causes of lead poisoning aging housing stock, segregated neighborhoods, and underinvestment in low-income communities of color must be addressed in order to shape a holistic lead poisoning initiative. I encourage the continuation of lead hazard reduction and capacity building grants as outlined in the Federal Lead Action Plan that went towards remediating low-income homes, yet I encourage the federal government to go a step further to conduct "critical research" (a main goal of the plan) that identifies the structural, man-made causes of lead poisoning.
- 4. Demand accountability from corporations and the government. Lead firms and local, state, and federal governments must be held responsible for decades of delay and deception. Communities should not bear the moral or economic burden. As interview Participant 3 suggested, the future of addressing lead poisoning may include going after those truly responsible mothers should not be scapegoated. Federal agencies and local jurisdictions should retroactively enforce, for example, the Toxic Substances Control Act, while also utilizing public nuisance law. While there have been few successful

- lawsuits against lead companies, having the backing of governmental entities is a start to change that.
- 5. Stay aware of the ongoing political shifts. The Trump Administration has made it a priority to (1) reduce federal spending and (2) deport "illegal immigrants." As a result, the Secretary of the U.S. Health and Human Services (HHS), Robert F. Kennedy Jr., fired the CDC's Childhood Lead Poisoning Prevention Program's entire staff, before rehiring them several months later (Simmons-Duffin, 2025; Tirrell & Goodman, 2025). Further, the senseless ripping apart of families has created fear amongst America's immigrant communities. As ICE continues its deportations, it is likely that families will increasingly stray from reaching out for help in an attempt to draw as little attention to themselves as possible. Both of these goals make it more challenging to address lead poisoning, stirring up resource constraints and fears of reaching out for help. We must not look away. We must acknowledge the challenges this poses to lead abatement efforts, to help children and families exposed to lead. Protections must be put in place to secure lead prevention funding and staff, while also embedding confidentiality guarantees into public health outreach.
- 6. Center the voices of mothers in research, policy, and public narratives.

  Future work should focus on mothers' experiences and stories to continue to fight against the "neglectful mother" stereotype. Their stories counter the once-dominant narratives that positioned them as negligent, instead offering powerful testimony to their resilience, expertise, and need for support. These

voices must be embedded in research, public health campaigns/efforts, and policy conversations. Maryland currently has a Lead Poisoning Prevention Commission, where a membership position is reserved for a parent of a lead-poisoned child. More can be done, however, by instituting community advisory boards, participatory and co-produced research models, and storysharing workshops.

## Conclusion: A Framework for Justice

These recommendations are intended to work together as interlocking components of a larger framework for environmental justice. They draw from intersecting insights: that childhood lead poisoning is a structural problem rather than an individual one; that mothers – especially those who are Black, Brown, low-income, and/or immigrants – carry both the weight of exposure and the blame; and that narrative, labor, and policy must all be understood as sites of both harm and potential transformation. By linking existing public health infrastructure to intersectional analysis and lived experience, we can move beyond surface-level reforms and toward enduring systemic change. Justice in this context means refusing to let any one person or group become the scapegoat for collective inaction. It means honoring the stories, struggles, and resilience of those most impacted – and using their knowledge to reimagine not only how we respond to lead, but how we build more equitable futures in the face of environmental harm.

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