The Intersectionality of Environmental and Reproductive Justice in Post-Roe Texas

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Introduction:

Environmental justice (EJ) and (RJ) are often framed as separate issues, but for so many communities on the Texas Gulf Coast, environmental degradation and a lack of reproductive healthcare access are not only concurrent concerns but, instead, inextricable conditions shaping daily life. In neighborhoods like Charlton-Pollard and Hillcrest, residents face industrial pollution, elevated health risks, and after Dobbs, one of the most restrictive reproductive healthcare landscapes in the country. These overlapping conditions make safe pregnancy, reproductive autonomy, and the ability to parent in healthy environments deeply interconnected concerns.

This project asks: *How are organizations responding to the Dobbs decision, and how do environmental health hazards compound the reproductive health impacts of restricted abortion access?* Using Charlton-Pollard and Hillcrest as case studies, this research examines how EJ and RJ organizations approach these intersecting crises and where their efforts fall short.

This case study documents how environmental and reproductive injustices converge in these communities, analyzes how organizations are responding within this landscape, and identifies gaps and proposes policy recommendations that meaningfully incorporate RJ and EJ frameworks. This work ultimately seeks to clarify what effective organizational and policy responses must look like in communities facing both toxic exposure and reproductive oppression.

Background/Context:

Charlton Pollard and Hillcrest were chosen as case study sites because both neighborhoods embody the convergence of environmental and reproductive injustice. Both are

historically segregated communities, serving majority Black and Latino residents, and situated next to a complex of refineries and petrochemical plants emitting harmful pollutants into residential areas. All of these characteristics classify the neighborhoods as fenceline communities. At the same time, the communities bear the compounded health burdens rather unique to the Gulf Coast communities within Texas due to severely restricted reproductive health access. The Dobbs decision eliminated in-state abortion access entirely, now forcing residents to travel more than nine hours to reach the nearest clinic, a barrier that disproportionately impacts low-income communities already managing environmental health crises.

Beaumont:

Figure 1:

The Charlton Pollard neighborhood in relation to Beaumont (Apple Maps)

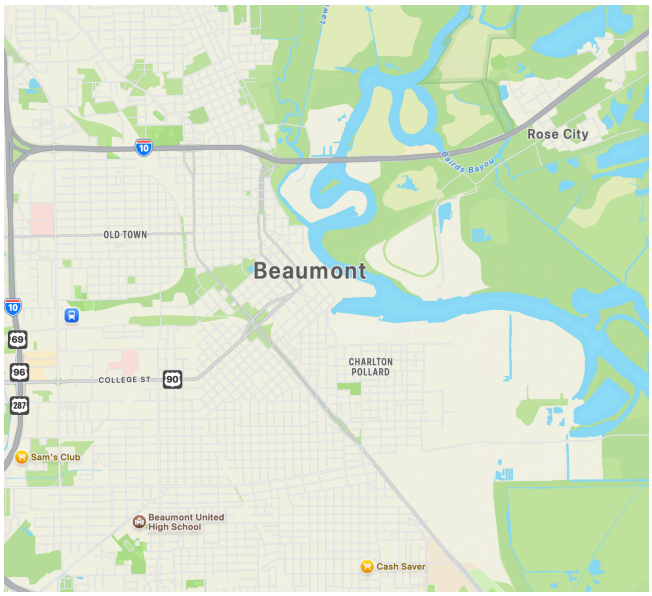
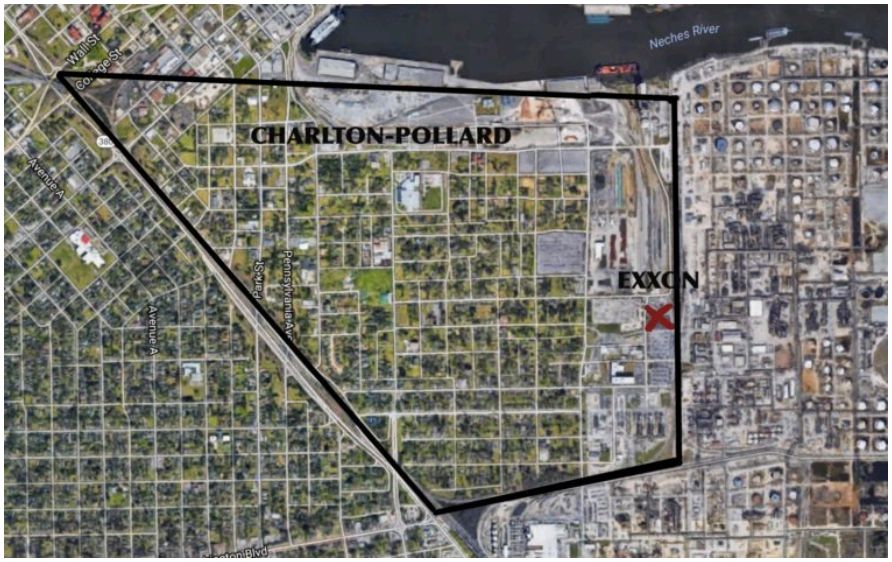


Figure 2:

The Exxon Mobil Refinery in relation to the Charlton Pollard neighborhood (Sadasivam, 2017)



The neighborhood of Charlton Pollard in Beaumont, Texas, is most notable for its proximity to the large ExxonMobil Refinery, one of the largest in the US (Mahoney, 2023). The neighborhood has been documented by state agencies to have unusually high levels of benzene, hydrogen sulfide, sulfur dioxide, and other toxic emissions. The refinery itself is known to emit at least 13 different carcinogens, including chromium, nickel, and cobalt compounds (Shaw, Younes, 2021). The surrounding area has an estimated excess lifetime cancer risk from industrial sources of about 1 in 2,500, or 3.9 times the EPA's acceptable risk (Shaw, Younes, 2021). “The EPA’s threshold for an acceptable level of cancer risk is 1 in 10,000, meaning that of 10,000 people living in an area, there would likely be one additional case of cancer over a lifetime of exposure ” (Shaw, Younes, 2021). These findings reveal that residents of the Charlton-Pollard neighborhood face a significantly elevated cancer risk due to prolonged exposure to industrial pollutants, illustrating how environmental hazards in fenceline communities far exceed federal safety standards.

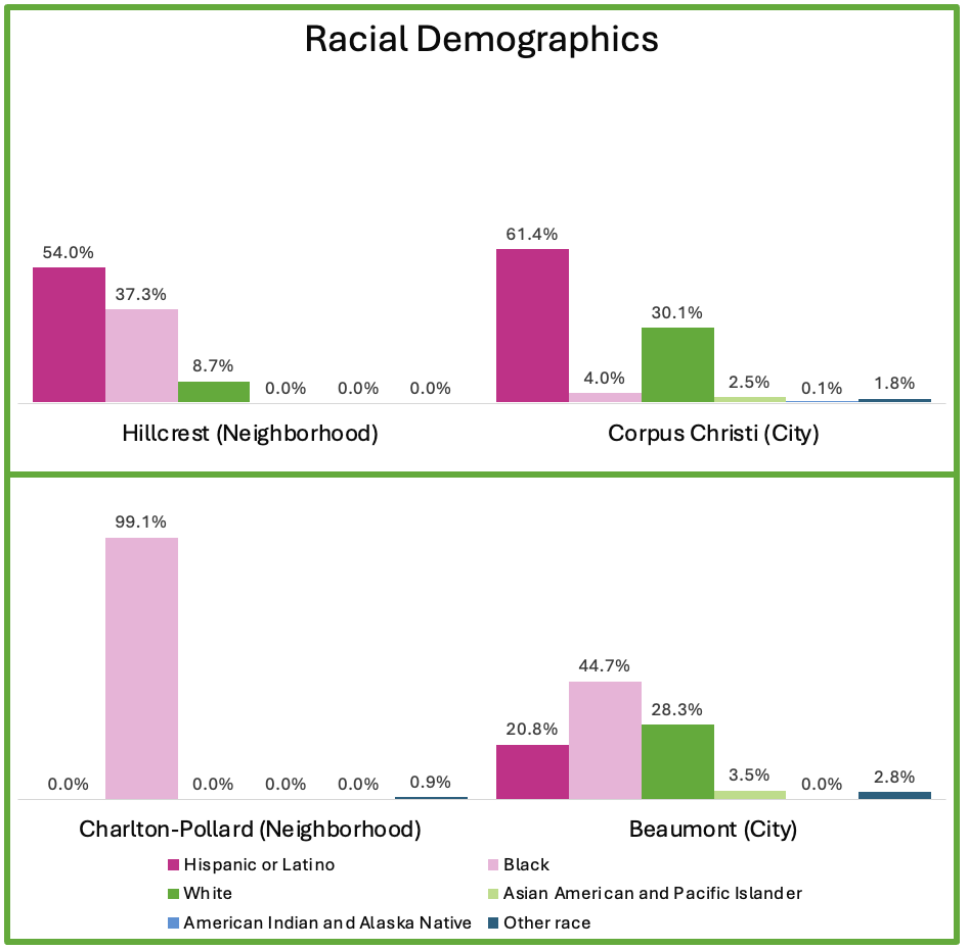
The Charlton Pollard neighborhood is an environmental justice community because a significant portion of residents live below the poverty line, and many have limited options for

relocation even when faced with industrial encroachment or pollution (Mahoney, 2023). Additionally, Charlton-Pollard has been a historically black neighborhood in Beaumont, Texas, since the late 1800s (Linsley, 2014). As of 2025, the community is about 99.1% African American and is recognized as an environmental justice area due to its segregation and proximity to industrial pollution (U.S. Census).

There is a common consensus among the community about the response and reaction to the pollution and industry actions. Residents view certain proposed fixes, such as an air monitor located more than a mile away, as “insulting” and insufficient to their lived reality (Lerner, 2017). Many residents have expressed frustration and feel that decades of complaints to the Texas Commission on Environmental Quality (TCEQ) were ignored or dismissed (Sadasivam, 2017).

Figure 3:

Racial demographics of Charlton Pollard and Hillcrest in relation to their respective cities. (Social Explorer Tables, 2023 American Community Survey [5-Year Estimates], https://www.socialexplorer.com/explore-tables.)



Corpus Christi:

Figure 4:

Refinery Row complex map (ATSDR, 2016)

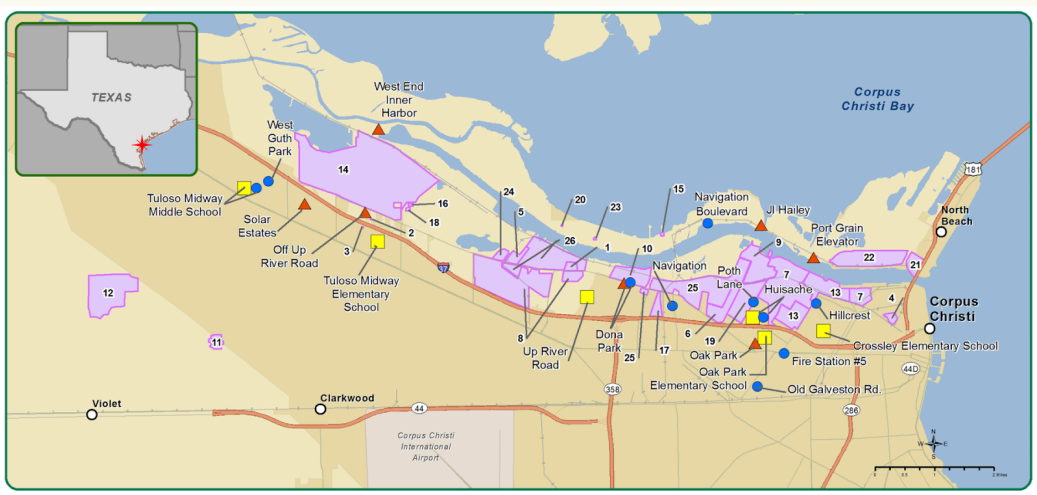
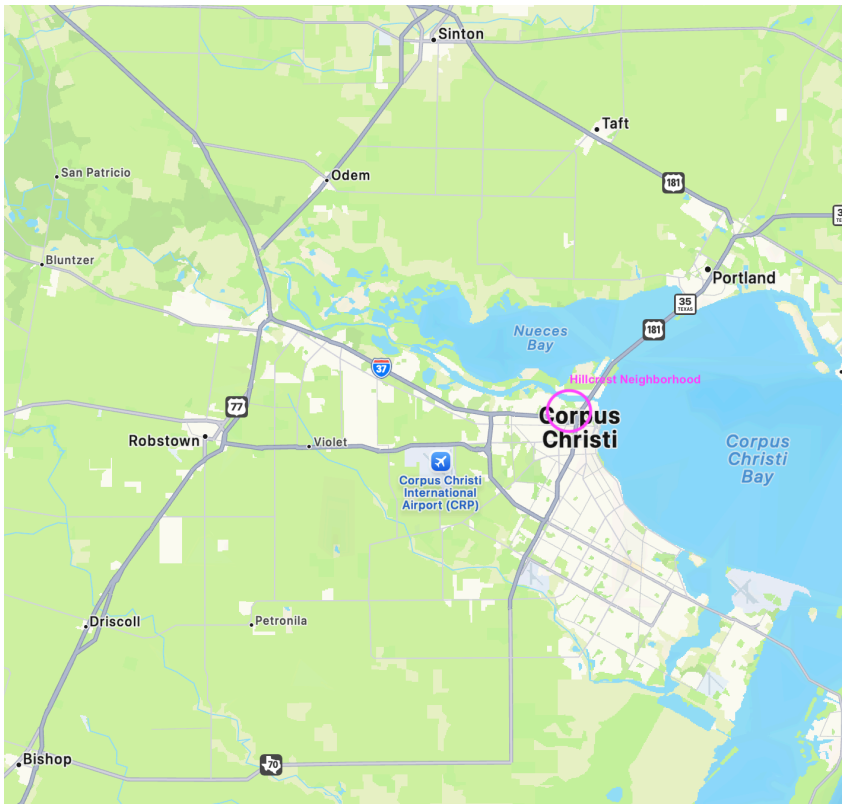


Figure 5:

Hillcrest neighborhood in relation to Corpus Cristi (Apple Maps)



As of 2024, Corpus Christi became the world's third-largest crude export terminal. With the U.S. exporting more than 4 million barrels per day (bpd), Corpus Christi exports 2.3 million

bpd. (Paraskova, 2024). Corpus Christi's capacity to export the voluminous amounts of crude oil is due to the abundance of refineries located in the area. Some of these refineries include Flint Hills Resources Corpus Christi West Refinery, the Valero Corpus Christi Refinery (Bill Greehey Refinery), and the CITGO Corpus Christi Refinery. The relevance of this abundance of refineries is the fact that they all fall along a ten-mile stretch that is directly adjacent to a residential area on the North side of Corpus Christi, now titled "Refinery Row".

Air pollution above permitted levels was detected almost every day of the year in 2019. Petroleum refineries release harmful air pollutants such as benzene, carbon monoxide, and particulate matter in addition to greenhouse gas emissions. The health effects that have been commonly reported from the area are asthma, certain cancers, and two types of birth defects (ATSDR, 2016).

On Refinery Row, there is a consensus among neighborhoods such as Hillcrest and Dona Park that they live in "fenceline communities". They have noted the constant sights, smells, and dangers of heavy pollution as most of their backyards contain views of the enormous refinery complexes (Henry, 2011). Health effects that are most commonly reported amongst first-hand accounts and local reports are asthma, cancer, and birth defects. Most communities are aware of scientific air quality reports that have been produced in the areas, but there is skepticism over their legitimacy and comprehensiveness (Henry, 2011). People who live in these areas claim to see the physical effects of what is going on (Holloway, 2019). People also have fears that these reports will miss the mixtures that occur in an environment when multiple pollutants are present. Regulatory agencies only test for individual chemicals, not for combinations, and when living in a place like Refinery Row, mixtures of pollutants and chemicals are prevalent on a daily basis (Holloway, 2019).

The environmental conditions in Charlton-Pollard and Hillcrest illustrate how pollution burdens directly intersect with reproductive justice. Chronic exposure to petrochemical and refinery emissions, such as benzene, sulfur dioxide, and other carcinogens, has well-documented links to adverse reproductive and maternal health outcomes, including higher rates of miscarriages, infertility, low-birth-weight infants, and birth defects (Latifi, 2025). For residents of these fenceline communities, the ability to safely become pregnant, carry a pregnancy to term, or avoid pregnancy altogether is shaped by the environmental risks imposed on them. Additionally, the risks are not only related to pregnancy and maternal health. The Dobbs decision has minimized reproductive healthcare in general, not just abortion care. Women have little to no access to reproductive health care due to clinic closures and insurance premiums. As a result, communities already facing elevated environmental health risks must also navigate one of the most restrictive reproductive health systems in the country, linking environmental injustice and reproductive injustice as inseparable conditions shaping daily life in these neighborhoods.

Reproductive Context:

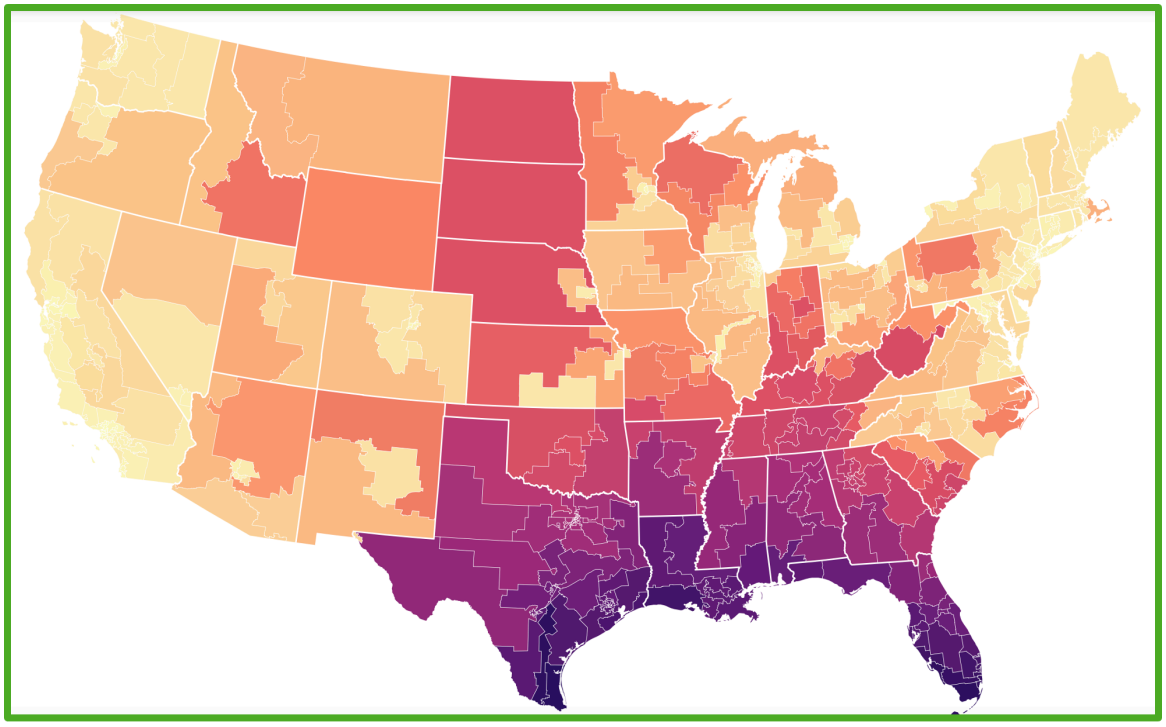
Texas serves as a critical reproductive health case study because it has long functioned as a policy testing ground for some of the most restrictive abortion measures in the country. Its size, population diversity, and historically underfunded reproductive healthcare infrastructure make the consequences of clinic closures and reduced access more especially pronounced.

Texas has not had proper reproductive healthcare or abortion access since HB2 was passed in 2014. Primary research has focused on the effects of Texas HB2 and the documented impact of abortion restrictions on Texas residents. Analysis employs physical distance as a key metric for measuring the effects of abortion clinic closures and reduced healthcare access (Gold and Hasstedt, 2016). This metric allows for a quantitative analysis of measuring the impact of a

lack of access. An analysis of the pre-2013 HB2 and post-2013 HB2 environment reveals significant changes in accessibility, which is essential for analyzing post-Roe effects, as literature and data are not entirely up to date due to its more recent overturn (Gold and Hasstedt, 2016). Prior to HB2's implementation, the average distance a woman traveled to reach her nearest abortion provider was approximately 15 miles (Gerdts, 2016). Following the bill's enactment in 2014, this distance increased by more than 20 miles, with the average distance expanding to 53 miles to the nearest clinic (Gerdts, 2016). Additional research highlights the hardships women experience whose nearest clinic was forced to close. Some of these hardships include overnight stays, expenses exceeding $100, frustrated demand for medication abortion, and appointments scheduled later than preferred (Gerdts, 2016). Post-HB2 data indicate that 24% of women in the nearest-clinic-closed group experienced three or more hardships, representing a 20% increase compared to the nearest-clinic-opened group. Notably, wait times increased across all clinics regardless of proximity to closures (Gerdts, 2016).

Figure 6:

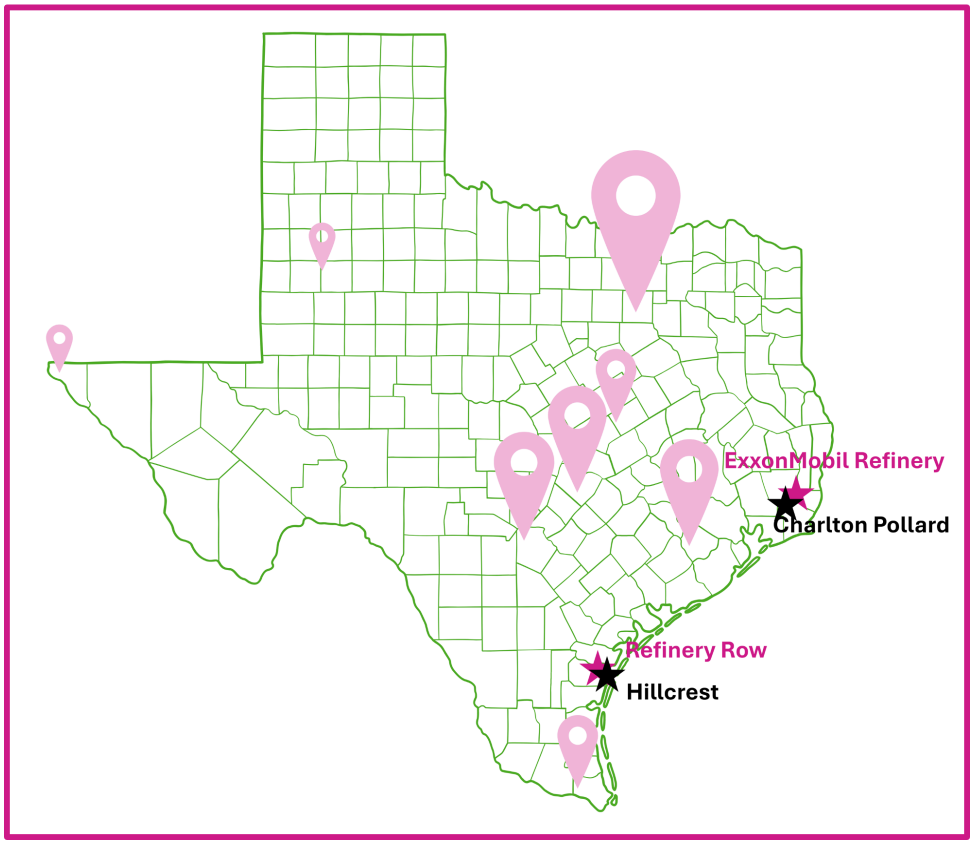
Drive Time to Nearest Abortion Clinic (Center for American Progress, 2024)



House Bill 1280 created Chapter 170A of the Texas Health & Safety Code. According to Section 3 of the bill, Chapter 170A would go into effect 30 days after federal law allowed individual states to prohibit abortions. The trigger that would and did set off House Bill 1280 was the U.S. Supreme Court issuing a judgment that overrules *Roe v. Wade* and *Planned Parenthood v. Casey* and allows individual states to prohibit abortions. The trigger ban criminalizes performing an abortion in the state of Texas. People who get abortions are not prosecuted under the law, and people are still able to cross state lines to get the procedure.

Figure 7:

General Clinic Access in Relation to Clinic Closures (Planned Parenthood, 2025)



In addition to restrictive reproductive healthcare, the healthcare landscape in general is severely limited in terms of access. Even before HB2, Texas had some of the highest rates of uninsured women of reproductive age and some of the lowest levels of public investment in family planning services, magnifying the effects of any additional barriers (Novack, 2019). As a result, restrictions implemented in Texas do not operate in a vacuum, but rather they occur within a broader context of limited Medicaid expansion, rural hospital closures, and deeply politicized reproductive health governance. In Texas alone, 13 clinics closed entirely, with 9 others having to transition into alternative services (McCann & Walker, 2023). This makes Texas an early indicator of how restrictive policies can reverberate across large geographic regions, shaping trends in maternal health outcomes, contraceptive access, and reproductive autonomy. Understanding Texas as a case study is, therefore, essential not only for assessing the immediate

impacts of post-Roe realities but also for anticipating how similar policies may affect other states that adopt Texas-style restrictions.

Literature Review:

Environmental Racism and Its Roots in Texas:

The concept of environmental racism was coined by Robert D. Bullard, a commendable advocate for environmental justice. A disproportionate burden of pollution has weighed heavily on minority communities of color for as long as the United States has prioritized rapid industrialization. Polluting industries have "followed the 'path of least resistance,' meaning black and poor communities have been disproportionately burdened with the types of externalities (Bullard, 1990)." One major facilitator of this uneven burden is the not-in-my-backyard (NIMBY) phenomenon, in which communities with greater political power deflect industrial hazards away from their own neighborhoods. When environmental movements have been led primarily by white, upper-middle-class advocates, their victories often result in the relocation of harmful facilities.

South Texas offers a clear illustration of how environmental racism shapes the siting of hazardous waste facilities and perpetuates spatial segregation. The South, and Texas specifically, has led the nation in attracting polluting industries (Bullard, 1990). "Many industrial firms, especially waste disposal companies and industries that have a long history of pollution violations, came to view the black community as a 'pushover' lacking community organization, environmental consciousness, and with strong and blind pro-business politics." (Bullard, 1990)." This perception allowed industries to justify concentrating hazardous operations in Black neighborhoods, reinforcing a cycle in which marginalization, economic vulnerability, and environmental harm fed into one another and made these communities easy targets for future

industrial siting. South Texas specifically is a product of environmental racism. As Bullard argues, “White racism is a factor in the impoverishment of black communities and has made it easier for black residential areas to become the dumping grounds for all types of health-threatening toxins (Bullard, 1990).” Further enforcing this cycle, relocation is not an option for most residents experiencing these conditions. “The result of the nation’s apartheid-type policies has been limited mobility, reduced housing options and residential packages, and decreased environmental choices for black households. (Bullard, 1990)” Decades of state-enforced segregation have trapped residents in neighborhoods like Hillcrest and Charlton Pollard, where environmental harms threaten their health, leaving them with few real alternatives.

Texas Environmental Justice Communities

Texas operates more than thirty refineries that process approximately 6.3 million barrels of crude oil daily, representing one-third of the nation's total refining capacity (Office of Texas Governor, 2025). This concentration of industrial infrastructure forces nearby communities to bear significant health burdens. Residents living in proximity to these facilities face elevated risks of cancer and respiratory illnesses, with pregnant women experiencing compounded vulnerabilities. Prenatal exposure to refinery emissions is associated with high blood pressure in birthing parents, low infant birthweight, decreased fetal brain development, and increased autism risk when PM2.5 exposure occurs during the third trimester (Harris County Public Health, 2025). Additionally, in a review of more than 45 published research articles, it was discovered that there

is moderate evidence for increased risk of miscarriage, prostate cancer, birth defects, and decreased semen quality due to exposure to oil and gas extraction activities (Balise, 2016).

There are prominent examples of communities, otherwise known as “fenceline” communities, that are experiencing health burdens in Texas. “As tens of thousands of new chemicals have been synthesized, highly unequal patterns of exposure to pollution waste streams have resulted, with communities living on the “fenceline” of such industries being particularly at risk of harmful exposures (Johnston, Cushing, 2020).” Corpus Christi's "Refinery Row," where residents live amongst multiple petroleum processing facilities, Beaumont's neighborhoods adjacent to the ExxonMobil refinery complex, and Port Arthur's "American Sacrifice Zone," a possible landmark for the end of the controversial Keystone XL Pipeline, are all examples of fenceline communities in Texas (Mogerman, 2025).

Corpus Christi’s “Refinery Row” is an area on the north side of Corpus Christi, home to ten miles worth of petrochemical facilities (ATSDR, 2016). Due to the more than 150 chemicals found within the surrounding air, health effects, specifically birth defects, have been found to be more common in the surrounding area. “Two heart defects… were slightly more common in children of mothers living within 2 miles of Refinery Row compared with children of mothers living 10 or more miles away (ASTDR, 2016).” Additional health effects include higher rates of asthma and cancer.

Communities within Corpus Cristi, that are classified as the most overburdened, are communities located along Refinery Row (Stasio, 2023). Overburdened communities, as defined by the EPA, are “ minority, low‑income, tribal and indigenous populations or communities in the United States that potentially experience disproportionate environmental harms and risks due to exposures or cumulative impacts or greater vulnerability to environmental hazards.” As of 2020,

73% of residents living in Corpus Christi identify as Black, Indigenous, or people of color (BIPOC) compared to just 58% of Texas residents (U.S. Census, 2020)(Stasio, 2023).

This crossover of reported health issues by communities that are predominantly communities of color is not unique to Refinery Row. The Charlton-Pollard neighborhood, located in Beaumont, Texas, which is home to ExxonMobil's extensive refinery complex, is 78.5% African American (U.S. Census, 2024). These demographic patterns reflect successive waves of economic migration, first driven by the lumber industry in the early 1900s, which actively recruited African American workers, and later sustained by the oil boom that created additional employment opportunities in the region (Linsley, 2014). Residents in the area experience the effects of nitrogen oxides, volatile organic compounds, benzene, and particulate matter, all of which cause respiratory damage, cardiovascular harm, and increased cancer risk (EPA, 2017).

Environmental Justice and Reproductive Justice Framework

While these public health consequences alone demand urgent intervention, what transforms this into an environmental justice issue is the disproportionate burden placed on minority communities. These populations do not merely happen to live near refineries; they are systematically concentrated around industrial facilities through historical patterns of discriminatory zoning, economic marginalization, and limited housing mobility (Bullard, 2008). Texas is home to a geography of inequality where race and class inherently determine exposure to environmental harm. Understanding these disparities requires a framework that explicitly centers equity and structural inequality (Joseph et al., 2025). Robert Bullard developed key

aspects of the environmental justice framework. The ultimate goal is to eliminate the persistent, significant racial and socioeconomic disparities in the distribution of hazardous waste facilities that exist throughout the country (Bullard, 2008).

Another framework that is essential to better understanding the burdens of these Texas communities is reproductive justice, which extends beyond reproductive rights. Examining reproductive rights in isolation ignores the systemic barriers that fundamentally determine whether access to those rights is even feasible. A legal right to healthcare becomes meaningless when a community lacks accessible clinics, when environmental pollution causes pregnancy complications, or when economic precarity prevents them from affording prenatal care. Focusing solely on individual rights and choices, while simultaneously important, ignores how structural inequalities create burdening conditions under which many people are seeking reproductive healthcare. A pregnant person living in a community surrounded by refinery complexes and petrochemical facilities doesn't simply need the right to a healthy pregnancy. They need their community to be free from toxic exposure in the first place. Therefore, protecting reproductive health requires dismantling the systemic forces that render individual rights ineffective. We must shift from a narrow rights-based framework that emphasizes personal choice to a structural analysis that addresses the economic, environmental, and political conditions enabling safe and dignified reproduction (Ross, 2017).

To describe the most linear connection between both justice frameworks, one of the key pillars within reproductive justice is the right to parent children in a safe and healthy environment (Ross, 2017). However, their interconnectedness goes further. Both frameworks were established due to an acknowledgement that policy and reform fall short in assessing the systemic root of both issues, often involving race and economic conditions. Environmental

exposure during pregnancy and critical developmental periods creates health inequities that create socioeconomic divisions, as well as amplify existing ones. Environmental injustices become permanently embedded when communities have no option but to remain in hazardous areas, and pollution fails to dwindle. Injustices are compounded when reproductive health begins to take a toll due to proximity to hazardous sites. Consequently, environmental pollution acts as a barrier to reproductive health, converting immediate toxic exposure into lasting cycles of marginalization that affect families across generations (Dennings, 2020). These dynamics reveal how reproductive and environmental justice are inseparable struggles, both demanding systemic change to ensure that all communities can live and parent in environments free from harm.

Another term that highlights the intersection of the two issues is ecofeminism. The term ecofeminism was coined by the French feminist Françoise d'Eaubonne. d'Eaubonne links the oppression of women to environmental degradation and builds on the critical connections between the patriarchal domination of nature and the exploitation of women. In her work in *What Could an Ecofeminist Society Be*, she details how the patriarchy directly causes environmental devastation.

Environmental and Reproductive Justice Organizations

When intersectionality is applied effectively, it generates meaningful, equitable change across both domains. Organizations that define and tackle issues spanning both EJ and RJ sectors challenge the traditional separation of these fields. EJ/RJ work as one idea means supporting the rights of women and families to live in an environment that supports their health and ability to reproduce, if and how they choose (Zimmerman Miao, 2009).

Intersectional work is most commonly led by women's organizing and indigenous movements in the U.S., particularly because these groups find environmental justice issues and reproductive justice issues to be inseparable (Zimmerman, Miao, 2009). The EJ/RJ approach is presented as a paradigm shift, moving away from single-issue efforts for incremental change toward a pragmatic and collaborative method designed to ignite transformative change. The report *Fertile Ground* highlights the powerful contributions these groups are making to secure safer and healthier environments for women, children, and communities. The findings are organized around the innovative impacts and effective organizing strategies employed by 24 different selected organizations across the nation. Each organization demonstrates intersectional analysis, which integrates gender, race, and class, and helps them avoid the pitfalls of single-issue politics. Additionally, they are able to effectively address the complex, lived experiences of impacted communities, which too often succumb to invisibility.

Most similarly translated to this case study is the work of the New Orleans Women's Health and Justice Initiative (WHJI), which is an established EJ/RJ organization. WHJI was established to address the injustices that followed Hurricane Katrina, focusing particularly on the racialized and economic-based gender inequality experienced by women in the region, which is a central concern of the RJ movement. The structure and activism of WHJI's work most closely align with the work that needs to be done to address a post-Roe landscape in Texas. WHJI successfully challenged legislation proposed by a Louisiana State Representative that sought to pay low-income women receiving public assistance and housing subsidies $1000 to be sterilized (Zimmerman, Miao, 2009). This policy exemplified a direct target of low-income women of color, simply for population control. In fighting this legislation, WHJI identified such punitive measures as reproductive violence, which they define as "an interlocking system of control,

domination, and inequality through the regulation, criminalization, and subjugation of women of color and poor women's bodies, reproduction, sexuality, and motherhood" (Zimmerman, Miao, 2009).

The initiative established the New Orleans Women's Health Clinic (NOWHC), which provides comprehensive sexual and reproductive health services alongside reproductive organizing and health education advocacy to address the root causes of health disparities. By directly fighting state policies that seek to criminalize or control the reproduction of marginalized women, WHJI models the proactive strategies needed in environments where legal abortion access is curtailed, and punitive actions against women of color and poor women are common.

By building a framework that centralizes the ability to reproduce and parent in a safe environment, EJ/RJ organizers ensure that the original mandate of EJ remains a core focus, even as they pursue complementary "proactive" solutions. This comprehensive vision may help groups resist policy cooptation, which seeks to narrow EJ solely to individual behavioral change or amenity provision (Harrison, 2016). EJ policy failures cannot be explained solely through state or industry co-optation (Harrison, 2016). Internal divisions within the EJ movement, which have been argued to be fragmented, also shape policy outcomes. Harrison argues there is a disconnect between activists who prioritize regulatory reform and hazard reduction, and those who embrace more individualized, service-oriented, or entrepreneurial approaches, such as community gardens and nutrition programs. She argues that this "new common sense" reframing of EJ shifts responsibility away from the state and undermines the movement's longstanding emphasis on structural change,while simultaneously appearing more actionable or fundable, which is additionally harmful (Harrison, 2016). This dynamic risks diluting the transformative

aims of EJ by replacing collective, rights-based demands with individual interventions that leave underlying inequalities intact.

This analysis of fragmentation with the EJ movement provides an important lens for understanding how organizations operating at the RJ/EJ intersection respond and should respond to these conditions. Arguing that EJ actors are shifting toward individualized, "proactive," or entrepreneurial solutions, while others remain committed to structural hazard reduction (Harrison, 2016), offers a warning for RJ organizations navigating similar pressures. As reproductive health infrastructures are dismantled and marginalized communities face heightened toxic exposures, surveillance, and policy changes, movements could risk losing transformative power when they shift state accountability to individualized change. For intersectional work, this argument stresses the need to avoid cooptation and stay focused on structural, rights-based strategies that address environmental racism and reproductive oppression as interconnected issues (Harrison, 2016).

Impact of Conservative Policy Since Dobbs

Environmental hazards that impact health are critical issues on their own; however, what makes Texas a breeding ground for the amplified intersection of environmental justice and reproductive justice is the absence of reproductive healthcare in the state. The reproductive justice framework emphasizes the necessity of improving access to reproductive healthcare and advocates for dismantling systems of oppression that hinder reproductive freedom based on race, gender identity, class, socioeconomic status, or sexual orientation (Hall et al., 2024). Reproductive justice thus demands comprehensive access to reproductive healthcare alongside

the structural conditions, which include economic security and environmental safety. These elements make meaningful reproductive decision-making possible.

The framework is being entirely dismantled in the state of Texas. Most notably, the defunding of Planned Parenthood has systematically destroyed healthcare access for women in Texas. It is important to note that Planned Parenthood is not just a site for abortion, but a location where people can receive an abundance of healthcare services, and oftentimes services that they rely on for their general health. A “defunded” Planned Parenthood looks like the removal of health centers from Medicaid, which has a devastating effect on public health. (Every Texan, 2025). “If anti-abortion lawmakers in Congress succeed in 'defunding' Planned Parenthood, nearly 200 health centers are at risk of closure, and more than 1.1 million patients could lose access to essential care, like birth control, wellness visits, STI tests, and cancer screenings. More than half of Planned Parenthood patients are covered by Medicaid for their health care services (Johnson, 2025).”

Texas exemplifies the compounding harms that emerge when environmental injustice collides with reproductive healthcare restrictions. The state's abortion bans eliminate access to essential pregnancy-related care, forcing individuals to travel hundreds of miles across state lines or carry nonviable or dangerous pregnancies to term (Hall et al., 2024). This burden is particularly unique and exacerbated in Texas because of its sheer size (Gerdts et al., 2016). These travel requirements render abortion functionally inaccessible for those without financial resources, reliable transportation, or the ability to take time away from work and childcare responsibilities, barriers that disproportionately affect the same communities already burdened by refinery and manufacturing pollution. When federal Medicaid funding restrictions are layered onto state-level abortion bans, the impact on poor and marginalized populations becomes even

more severe, as over half of all abortions occur among individuals living below the federal poverty line (Hall et al., 2024). Independent of abortion care, Planned Parenthood provides over 9 million services to more than 2 million patients each year, often serving as the only accessible healthcare option for underserved populations (Planned Parenthood, 2025). The reproductive justice framework reveals how these are not separate crises but connected forms of neglect. Communities systematically exposed to environmental harm are also denied the healthcare infrastructure to protect their reproductive autonomy.

Impact Exacerbated for Texas EJ Communities

The convergence of environmental harm and healthcare restriction creates unique consequences for environmental justice communities in Texas. For pregnant women in fenceline neighborhoods like Refinery Row or Charlton-Pollard, the compounding effects are detrimental to their well-being. They face elevated risks of pregnancy complications due to toxic exposure while simultaneously being denied access to the reproductive healthcare necessary to manage those risks (Dennings, 2022). Women living within two miles of petrochemical facilities already experience higher rates of birth defects and pregnancy-related health issues, yet Texas's abortion bans and the defunding of Planned Parenthood eliminate their options for prenatal monitoring, high-risk pregnancy care, and essential reproductive health services (Planned Parenthood, 2025). These communities cannot afford to relocate away from pollution, access alternative healthcare providers, or travel out of state when options are limited in their region. The result creates a cycle of vulnerability (Dennings, 2020). Environmental toxins compromise reproductive health outcomes at the same time that healthcare safety nets are federally prohibited. While affluent

communities can mitigate environmental risks through residential choice and private healthcare alternatives, low-income communities of color bear a disproportionate burden of both crises simultaneously.

Research Methods and Analysis:

My initial plan for this case study was to interview various reproductive and environmental organizations in Texas. I sent out a multitude of emails and direct messages via social media to gauge interest in interview participation. Unfortunately, very minimal responses were received. One interview was successfully conducted, which primarily aided my research on the reproductive justice side and provided additional insight into the organization's consideration of environmental justice issues. Due to the minimal number of obtained interviews, I utilized Johnny Saldaña's qualitative coding methods to analyze press releases, news articles, and social media pages to dissect how organizations are responding (Saldaña, 2016). Press releases and news articles were most helpful in dissecting codes and code groups. Most of my code groups were split by theme, but once I found intersecting themes and ideas, I was able to develop code groups that combined both justice issues. All of this discourse analysis was used to answer my main and subsequent research questions: How are organizations responding to the Dobbs decision? How do environmental health hazards in these communities compound the reproductive health impacts of restricted abortion access?

Findings:

Low interview participation constitutes a finding in itself, revealing organizational reluctance to engage intersectionally. Several organizations acknowledged the inquiry but did not

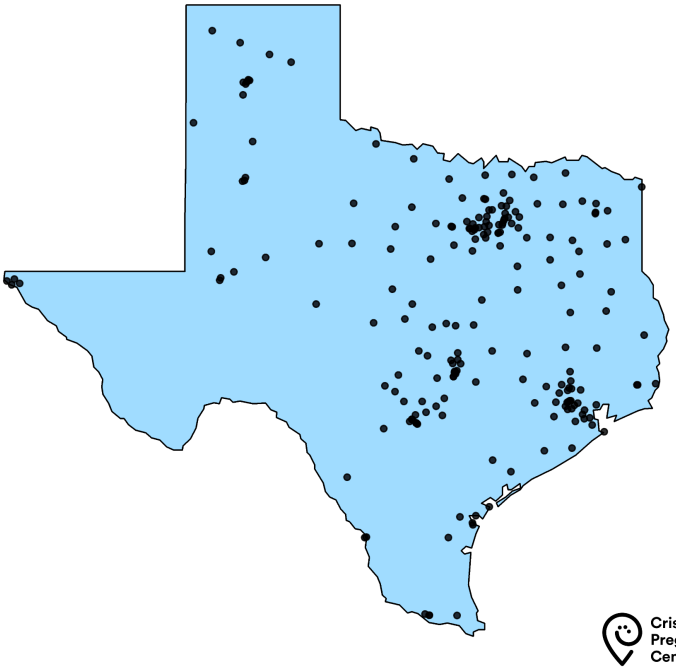
follow through on scheduling interviews, suggesting a possible intentional avoidance. In Texas's current climate, abortion stigma and fear of legal or political repercussions likely prevent environmental justice organizations from publicly addressing reproductive health. Vice versa, reproductive justice organizations in Texas are already facing a poor healthcare system and a complete abortion ban, diminishing their capacity to expand their advocacy scope. This siloing, driven by stigma, fear, limited resources, and strategic necessity, leaves environmental justice communities without coordinated support for their intersecting crises.

Religion in Texas contributes largely to the fear and stigma surrounding intersectionality and reproductive healthcare. One of the ways in which this presents itself in Texas is the sheer number of Crisis Pregnancy Centers (CPCs). CPCs are religious non-profit organizations that aim to deter people from having abortions. They oppose contraception and comprehensive sex education, as well as target people seeking reproductive healthcare. In Texas, prior to the Supreme Court's Roe v. Wade reversal, CPCs outnumbered abortion clinics 9 to 1 (Crisis Pregnancy Center, 2025).

Figure 8:

Crisis pregnancy centers in Texas

Crisis Pregnancy Centers (CPCs) in Texas, 2024



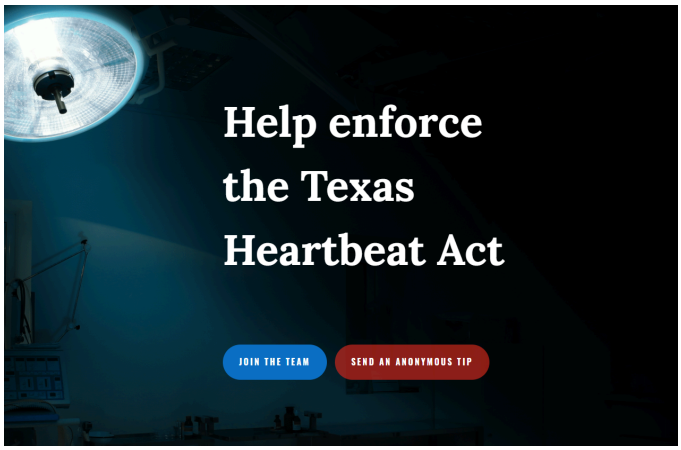
Swartzendruber A and Lambert D. Crisis Pregnancy Center Map. https://www.cpcmap.com. Published January 2025.

While abortion is no longer provided in Texas, Planned Parenthood still exists, providing other forms of reproductive healthcare. As of 2024, there were 27 brick-and-mortar Planned Parenthood locations throughout the entire state of Texas and 205 CPCs.

The strong presence of pro-life Christians in Texas maintains a negative stigma surrounding reproductive healthcare, abortion, and intersectionality. Texas's S.B. 8 law exemplifies how Christian anti-abortion activism creates a climate of fear and surveillance around reproductive healthcare. The legislation empowers any private citizen, regardless of their connection to Texas or the patient, to sue abortion providers and anyone assisting patients seeking care after six weeks of pregnancy, with successful plaintiffs receiving a minimum $10,000 bounty (Texas Policy Research Staff, 2025). Conservative Christian organizations, including the Southern Baptist Convention's Ethics and Religious Liberty Commission,

championed the law as advancing their movement's goals. Texas Right to Life, a Christian advocacy group, established a 'Pro-Life Whistleblower' website encouraging anonymous reporting of suspected violations (Jenkins, 2021). This enforcement mechanism, rooted in religious ideology and incentivizing community surveillance, reinforces the intense stigma surrounding reproductive healthcare in Texas and creates barriers for organizations attempting to provide or discuss abortion access.

Figure 9: Texas Right to Life website asking for tips of those violating Texas SB 8 (prolifewhistleblower.com)



Although these compounding issues would normally force community members to relocate, poverty and systemic neglect are limiting residents' ability to do that. In the rare scenarios when residents are offered buyouts or relocation programs, they are often insufficient or inequitable. Communities also report feeling trapped in the homes and neighborhoods they have lived in for generations (Griest, 2012). Expecting residents to uproot their lives instead of addressing the environmental hazards that are pushing them out places the burden on those already harmed, rather than on the systems responsible for creating these conditions. These burdens have been placed disproportionately on people of color because they are the ones living

in the neighborhood who bear the greatest burden. The presence of minority groups living along Refinery Row stems from decades of discriminatory housing and zoning policies. Historically, Black and Latino families were steered into these industrial zones and denied opportunities to move elsewhere (Lerner, 2017). The legacy of segregation and industrial zoning has created a lasting geographic divide, and refinery corporations' refusal to sufficiently pay out community members for their land is locking them into cycles that are nearly impossible to escape.

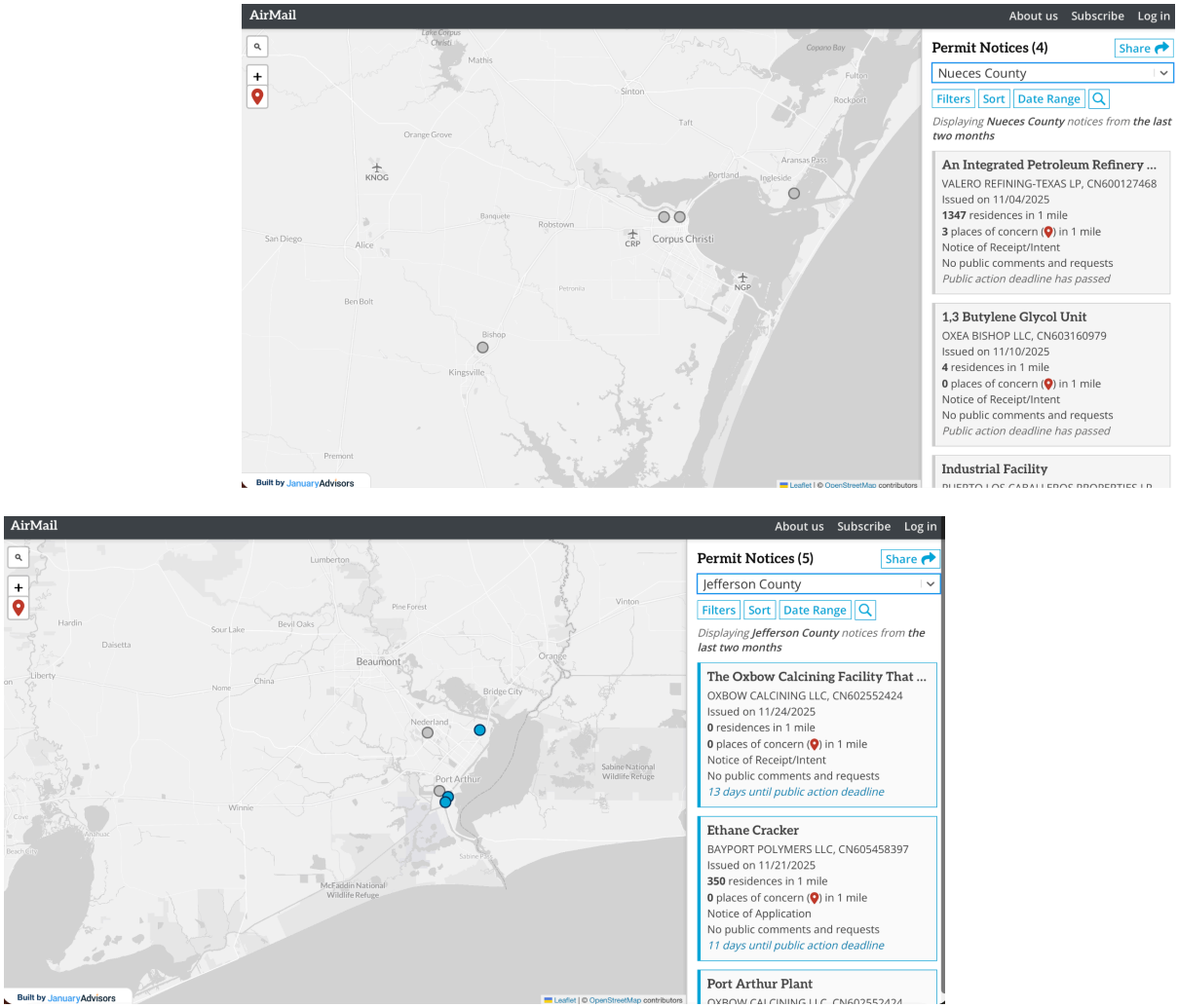
How are organizations responding:

Nonprofit organizations play a critical role in addressing the challenges these neighborhoods face. Examining how they respond to policy decisions that disproportionately burden residents is essential for shaping future policy. This insight helps identify which strategies effectively address intersectional concerns and where significant gaps in support and accountability still remain.

Air Alliance Houston has made tremendous strides in addressing environmental justice issues that are most prevalent in South Texas. Their most recent initiative is a lawsuit against the current administration for unlawfully terminating $3 billion in EPA grant programs designed to fund public health and community resilience initiatives in all 50 states (Hanson, 2025). The Trump administration's EPA eliminated all environmental justice offices and "equity-related" grant programs, including the ECJP grant that funded the expansion of a program called "AirMail" (Slattery, 2025; Hanson, 2025). AirMail was designed as a free tool to help advocates track and take action on polluter permit notices in their area. The most common notices come from petrochemical and refinery companies (Air Alliance Houston). With the grant terminated, the planned expansion of these public participation efforts across the Texas Gulf Coast has come

to a halt. The program was intended to notify community members when a polluting project is proposed within a certain radius of their neighborhood, what the health impacts might be, and how they can speak up about the project (Hanson, 2025).

Figure 10: AirMail tool created by Air Alliance Houston



Although not directly rooted in the reproductive justice movement, a project like this can play a critical role in helping women, especially pregnant women, access the care, information, and living conditions they need to lead healthy lives. In a landscape where reproductive health care is increasingly limited, it becomes even more essential for women to understand how their environment affects their bodies and pregnancies. A program of this kind has the potential to

shield women from the compounded harms of living in environmental justice communities while navigating the challenges of a post-Roe world. This notification system directly addresses the EJ aspect, but where the gap can be addressed in RJ is by placing these notification systems in reproductive healthcare deserts.

More directly addressing the intersection, Air Alliance Houston has involvement in an Environmental Justice Working Group led by a non-profit organization called Nuturely. The coalition plans to pursue a range of actions aimed at protecting maternal and infant health from environmental harms (Air Alliance Houston). Their work includes promoting education for consumers and health-care providers about environmental risks, developing toolkits to help local and state emergency planners properly account for pregnant people, and advancing policies that expand free toxic-exposure testing and remediation funding (Nurturely). They also aim to strengthen workplace accommodations for pregnant individuals and to improve data collection on birth outcomes in order to better identify and address significant environmental hazards.

Fund Texas Choice:

After the overturn of Roe v. Wade, it was unclear as to whether abortion funds could continue to operate, as so much of the discourse around abortion in the South and Texas specifically centered on criminalization. Fund Texas Choice temporarily halted its practical-support operations because of legal threats from the Texas Attorney General, who suggested that helping Texans travel out of state for abortions could be prosecuted under pre-Roe criminal statutes (Goldenstein, 2025). This pause left many clients without support while the organization sought clarity and protection (Wolf, 2023). In response, Fund Texas Choice joined other abortion funds in filing a federal lawsuit challenging the state's attempts to criminalize their work. In February 2023, a federal judge issued an injunction shielding abortion funds from

prosecution for supporting out-of-state care, allowing Fund Texas Choice to resume its hotline and restart travel, lodging, and logistical support for Texans seeking abortions (Wolf, 2023).

After confirmation that the injunction would protect organizations like Fund Texas Choice from prosecution, the Fund was able to start up in-state operations again. “Fund Texas Choice reopened its hotline to Texans in March (of 2023), and call volume has increased steadily since. The fund helped 527 Texans access abortions this year and spent more than $560,000 on client travel between January and September (Wolf, 2023).”

In addition to addressing the overturn of Roe, Fund Texas Choice has verbally highlighted the intersection of climate issues and reproductive choice, although tangible solutions are still not present in their work. They have openly criticized Texas Governor Greg Abbott on his continued attack on reproductive rights and his ignoring of climate issues that affect thousands of Texans. The Fund argues that political leaders are attacking reproductive healthcare rather than meeting the urgent needs of many Texans, including directing resources toward climate-related disasters, strengthening public education, and expanding healthcare access (Fund Texas Choice, 2025). By calling attention and urging for the address of these overlapping injustices, Fund Texas Choice underscores that reproductive justice cannot be separated from environmental conditions, political representation, or community safety.

In an interview with Fund Texas Choice’s communication coordinator, Rimsha Syed, I was able to directly ask questions about the response to the Dobbs decision and the intersection of environmental and reproductive justice. Syed described her organization as a practical abortion support provider that has operated statewide in Texas for over a decade, helping people travel out of state to access abortion care. Syed emphasized that healthcare access in Texas is severely limited across the board, with over 31 million residents facing barriers, including an

extremely high uninsured population, limited rural healthcare facilities, and one of the worst maternal mortality rates in the country, particularly for Black and Latinx communities.

Even before the Dobbs decision, Texas had heavily restricted abortion access through state legislation. House Bill 2, passed in 2013, closed nearly 75% of abortion clinics in the state, primarily in rural and low-income areas. This restriction, along with subsequent bills like SB8, progressively increased the need for out-of-state travel services. Currently, Fund Texas Choice clients travel an average of 1,500 miles to access care, nearly double the 800 miles they traveled prior to recent bans (Syed, 2025). These journeys vary significantly depending on individual circumstances, with some people flying and others driving, and many needing companions for language support, safety, or due to their age.

Syed expressed deep concern about the current landscape in Texas, where abortion is completely banned, and people are dying due to a lack of access and physicians' fear of prosecution. Syed noted that the intentionally confusing legal framework deters providers from offering even life-saving care. A fourth abortion ban, HB7, was set to take effect on December 4th, though the organization remains committed to adapting and continuing its support services as it has through previous restrictions.

Regarding the intersection of reproductive and environmental justice, Syed connected the issues through the reproductive justice framework, particularly the right to parent children in safe and sustainable communities. She argued that denying abortion access overlaps with denying clean air, water, and adequate disaster response, all of which are denials of safety, autonomy, and human dignity. While Fund Texas Choice doesn't focus directly on environmental justice work, they collaborate with environmental justice organizations to educate communities about these intersections and demonstrate that "fighting for one is fighting for the other."

Planned Parenthood Texas Votes:

PPTV is responding to the post-Dobbs crisis in Texas by publicly calling out the state's total abortion ban for causing preventable deaths, especially among Black and Latino women. Citing recent investigations linking the ban to rising maternal deaths, sepsis cases, and delayed medical care, PPTV frames the situation as a "politically manufactured crisis" created by lawmakers who criminalized standard reproductive health care (Hayes-McMahon, 2025). In response, PPTV is using its political arm to hold those lawmakers accountable, vowing to ensure Texans remember who enacted these policies (Planned Parenthood, 2025).

PPTV's post-Dobbs strategy centers on advocacy, public messaging, and electoral mobilization to challenge the abortion ban and the broader health-care crisis it has produced. In order to receive PAC support from Planned Parenthood, candidates must commit "100%" to reproductive healthcare access. PPTV organizes statewide volunteer efforts such as voter-registration drives, canvassing events, and get-out-the-vote actions and recruits community leaders to help expand turnout in key districts (Planned Parenthood). They also engage in down-ballot and local elections, as well as ballot-measure campaigns, framing voting as a critical tool for reversing Texas's abortion ban and addressing the maternal-health crisis that has worsened since Dobbs. Across all of this work, PPTV positions electoral organizing as the pathway for Texans to hold lawmakers accountable for restrictive policies and to push for systemic change.

Planned Parenthood is a clear example of an organization lacking the capacity to address intersectional concepts due to a hostile political landscape. Since the overturn of Roe v. Wade, Planned Parenthood has faced numerous attacks by the Trump Administration and other states

that have issued abortion bans. Their organizational efforts can only travel so far, so they choose to prioritize reproductive health efforts.

CIDA:

Community organizing grounded in environmental justice is already taking place in South Texas. Organizations like The Community In-Power and Development Association (CIDA) demonstrate that local groups are not only willing to confront these challenges, but are actively naming and addressing the disproportionate environmental burdens placed on communities of color.

CIDA in Port Arthur has received attention for several major community-based environmental justice and climate-resilience initiatives. They partnered with the Houston Advanced Research Center to release EQUIP PA, an equity-informed climate resilience plan addressing environmental risks and community-driven solutions. CIDA also opened Port Arthur's first resilience hub, the HK Activity Center, which serves as an emergency shelter, community training site, and youth entrepreneurship space. The organization continues to host grassroots events like "Community Conversations" to engage residents directly. These projects have drawn attention from partner organizations and demonstrate CIDA's growing role in environmental justice, community development, and climate preparedness in Port Arthur. Port Arthur exists in a very similar landscape to the neighborhoods of Hillcrest and Charlton Pollard.

Islander Feminists:

Since the overturning of *Roe v. Wade*, Islander Feminists at Texas A&M, Corpus Christi (TAMUCC) have become an extremely active reproductive justice organization. While their original work was concentrated on the A&M campus, the need for their services in Corpus

Christi has brought their services outside of the college campus. They expanded their on-campus organizing by distributing free condoms, lube, safe-sex kits, and especially emergency contraception, while also launching a free Plan B delivery service to ensure students could access it discreetly (Jane's Due Process, 2025). They organized educational events like "Sexual Health 101" with campus health clinicians, created a petition demanding that TAMUCC provide accessible emergency contraception and better reproductive-health resources, and gathered hundreds of signatures. Beyond campus, they have rallied and marched in Corpus Christi, particularly after the Dobbs leak, speaking publicly about bodily autonomy and the dangers of abortion bans (Islander Feminists). They've also issued statements to local news outlets, worked to destigmatize abortion, and served as a quiet resource hub for anyone in the community needing reproductive-health supplies, information, or support. Overall, their work blends protest, mutual aid, and health education, forming a grassroots reproductive-justice network in Corpus Christi, an area traditionally lacking in this field, in the post-Dobbs era.

Intersectional Work:

While intersectional response is limited, it is still present in the work of some organizations. Air Alliance Houston has placed an emphasis on how toxic exposure, flooding, and climate disasters directly impact maternal and reproductive health, particularly in marginalized areas. In response to this, they aim to create planning tools to ensure pregnant individuals are included in emergency responses, which is especially critical for neighborhoods on the Gulf who experience a multitude of different natural disasters. Additionally, the Islander Feminists continuously incorporate ecofeminist perspectives into their missions and educational forums. They discuss climate change, gender equality, environmental issues, and social injustices. However, many organizations stop at acknowledging the intersection between EJ and

RJ without translating that awareness into concrete action or measurable outcomes. While recognition is an important first step, it does not by itself create change. Organizations can assert that these overlapping issues matter, but until they commit resources and strategies to directly confront the harms faced by affected communities, such statements remain largely symbolic.

Where the Gap Comes From:

The limited response to my interview inquiry itself constitutes a finding worth mentioning. While some organizations never responded, others acknowledged the request but failed to commit to a meeting time despite follow-up attempts. This pattern suggests that many organizations may lack the capacity or willingness to engage in discussions about intersectional work, which was explicitly mentioned in the interview inquiry. This organizational reluctance likely reflects a broader gap between rhetorical commitment to intersectionality and actual practice. Many reproductive justice organizations feature environmental justice content on their websites or social media. Similarly, environmental justice organizations may include brief mentions of reproductive health in their materials. However, this surface-level acknowledgment rarely translates into concrete action or programmatic integration.

These organizations recognize intersectionality as important in theory, positioning themselves as aware and progressive, yet fail to embed this understanding into their operational work. Organizations acknowledge that environmental hazards and reproductive injustice compound one another, but this recognition doesn't reshape their advocacy, campaign design, or coalition-building efforts. The absence of interview responses, therefore, speaks about the current state of intersectional organizing in Texas. It possibly suggests that despite growing awareness of how environmental and reproductive crises overlap, particularly in environmental justice communities, few organizations have developed the infrastructure, expertise, or political

will to address these issues holistically. This gap leaves communities facing compounded injustices without the coordinated support they urgently need.

Through qualitative coding and analysis of organizational communications, an asymmetry emerged, with reproductive justice organizations frequently referencing environmental justice in their materials, and environmental justice organizations more rarely mentioning reproductive justice. This one-directional acknowledgment reveals additional critical barriers to intersectional organizing in Texas's current political climate.

The minimal conversation from environmental justice organizations likely stems from strategic self-preservation in a hostile political environment. Abortion and reproductive healthcare have become so intensely politicized in Texas that any association with these issues can carry substantial risk. Environmental justice organizations, often already fighting uphill battles for funding, community trust, and policy change, may calculate that mixing their work with reproductive justice would jeopardize their core mission. The stigma surrounding abortion, fueled by religious opposition, the S.B. 8 enforcement, and the threat of legal consequences, creates a chilling effect that extends beyond reproductive health organizations to anyone who might publicly connect these issues.

This asymmetry ultimately undermines both movements. Environmental justice organizations cannot fully address maternal mortality, birth defects, and pregnancy complications in polluted communities without discussing reproductive healthcare access. Reproductive justice organizations cannot adequately serve clients facing pregnancy decisions in toxic environments without addressing environmental remediation. Unfortunately, the political climate forces organizations into defensive positions where organizational survival requires narrowing focus precisely when communities need expansive, coordinated responses to compounded crises.

Recommendations:

Reproductive justice frameworks need to be integrated into all environmental remediation plans. State and local agencies should require that any cleanup, pollution mitigation, or infrastructure redesign in Charlton-Pollard and Hillcrest explicitly assess impacts on pregnancy, fertility, maternal health, and long-term child well-being. Organizations can partner with public health experts to produce community health impact assessments that link toxic exposure to reproductive outcomes, ensuring that remediation plans address these interconnected harms rather than treating them as separate issues. By requiring a holistic RJ framework in remediation discussions, this ensures that environmental agencies are forced to confront the complex structural violence of pollution, rather than addressing simple, non-controversial symptoms or relying on individual behavioral changes. Harrison's critique of co-opted environmental justice warns that shifting toward amenities, education, or individual-level fixes ultimately absolves the state of its responsibility to protect vulnerable communities (Harrison, 2015). For meaningful integration of frameworks like Reproductive Justice in Remediation, advocates must institutionalize these approaches as mandatory, rights-based protections, not optional add-ons. Organizations should therefore resist any effort by agencies or outside actors to dilute the work into voluntary or depoliticized projects, ensuring the focus remains on structural accountability and enforceable state obligations. In essence, Harrison's work provides the theoretical framework to argue that the failure to address reproductive health through environmental remediation is a direct consequence of the dilution of traditional, hazard-focused EJ priorities. Implementing the RJ framework is thus a vital move to correct this historical deviation by repositioning regulatory action to the material health impacts faced by vulnerable communities.

To address the racial segregation shaping environmental and reproductive harms along the Gulf of Texas, organizations must advocate for reforms to zoning and land-use policies that created these inequities in the first place. Community organizing and grassroots activism can play a direct role in influencing city and county planners, but meaningful change requires action at both the nonprofit and governmental levels. As Bullard argues, “Discrimination in housing, employment, education, public accommodations, and municipal service delivery has to be attacked through legislative mandates after considerable agitation from civil rights organizations. (Bullard, 1990)” Grassroots organizing is the best way to combat existing patterns of segregation and harmful land-use practices, grassroots organizing. However, proactive measures to ensure the prohibition of these injustices don't repeat themselves are also necessary. In this context, policy reform must prohibit the future siting of polluting facilities near homes, schools, and clinics, and prioritize land-use patterns that protect community health rather than endanger it. Simultaneously, community organizations can advocate for resident-led zoning advisory boards, ensuring that those most affected have real power to shape the land-use decisions that directly impact their bodies, families, and long-term well-being.

Texas organizations need to expand and implement comprehensive, community-based reproductive healthcare. Similar to the work of the Islander Feminists, programs like this need to be prioritized in fenceline communities and reproductive healthcare deserts. Integrating EJ and RJ means ensuring that healthcare access addresses both toxic environments and reproductive autonomy. Policymakers should mandate community-based reproductive healthcare programs that include information on environmental exposures, fertility risks, maternal health, and chronic disease. Organizations can host workshops and integrate environmental health literacy into existing reproductive health outreach. Similarly, state health departments should develop

placement criteria for reproductive health clinics that prioritize EJ-burdened areas like Charlton-Pollard and Hillcrest, where environmental hazards exacerbate reproductive health risks. Local organizations can advocate for mobile clinics, expanded hours, and culturally competent care, ensuring that reproductive services remain accessible despite political or geographic barriers.

Conclusion:

The Texas neighborhoods, Charlton-Pollard and Hillcrest, reveal how environmental and reproductive injustice are not parallel issues, but connected conditions created by decades of discriminatory zoning, environmentally hazardous production, and increasingly restrictive reproductive health policies. Additionally, these neighborhoods now navigate a post-Roe landscape in which access to reproductive healthcare is constrained by distance, cost, stigma, and fear. These compounding issues directly counter the pillars of reproductive justice, which is the right to have children, the right to not have children, and the most intersectional pillar, the right to parent children in safe and healthy environments (Ross, 2017).

This case study demonstrates that although some organizations acknowledge the EJ/RJ intersection, operational intersectional work is rare. Environmental justice organizations fear the political risk of encompassing reproductive issues and reproductive justice organizations are overwhelmed by Texas's hostile policy environment. Additionally, the difficulty obtaining interview participants reveals how fragile intersectional organizing has become in Texas. As a result, communities lack the coordinated response that is necessary to aid their fight against these compounding issues.

To directly address this, integrating reproductive justice frameworks into environmental remediation, reforming harmful land-use policies, expanding community-centered reproductive

healthcare, and prioritizing clinic access in EJ communities are all necessary steps. Addressing the realities of environmental and reproductive injustice requires sustainable, collaborative, and politically courageous work. Communities like Charlton-Pollard and Hillcrest are not the only communities experiencing these burdens. They exemplify what happens when a perfect storm occurs, and leaves behind a multitude of overlapping injustices. Their conditions demand an integrated response that challenges the systems placing their health, autonomy, and futures at risk.

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