



“Is it worth risking your life?”: Ethnography, risk and death on the U.S.–Mexico border



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ABSTRACT

Every year, several hundred people die attempting to cross the border from Mexico into the United States, most often from dehydration and heat stroke though snake bites and violent assaults are also common. This article utilizes participant observation fieldwork in the borderlands of the US and Mexico to explore the experience of structural vulnerability and bodily health risk along the desert trek into the US. Between 2003 and 2005, the ethnographer recorded interviews and conversations with undocumented immigrants crossing the border, border patrol agents, border activists, borderland residents, and armed civilian vigilantes. In addition, he took part in a border crossing beginning in the Mexican state of Oaxaca and ending in a border patrol jail in Arizona after he and his undocumented Mexican research subjects were apprehended trekking through the borderlands. Field notes and interview transcriptions provide thick ethnographic detail demonstrating the ways in which social, ethnic, and citizenship differences as well as border policies force certain categories of people to put their bodies, health, and lives at risk in order for them and their families to survive. Yet, metaphors of individual choice deflect responsibility from global economic policy and US border policy, subtly blaming migrants for the danger – and sometimes death – they experience. The article concludes with policy changes to make US–Mexico labor migration less deadly.

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Introduction

Transnational migration is changing quantitatively and qualitatively. The International Organization for Migration (IOM) estimates that there are 214 million transnational migrants worldwide, almost 50% more than a decade prior (Migration News, 2011b). The IOM indicates that almost all countries in the world today are both sending and receiving migrants and that financial remittances from migrants are rising, in some countries making up the largest economic input (Migration News, 2010).

In the United States, immigration continues to be an important topic of debate. The U.S. has an estimated 10.8 million unauthorized foreigners according to the Current Population Survey (Migration News, 2011a), 6.1 million of whom are from Mexico according to the Pew Hispanic Center (Migration News, 2012b). In 2011, 328,000 people were apprehended by the border patrol just inside the US–Mexico border (Migration News, 2012a).

The US–Mexico border has been called the “most violent border in the world between two countries not at war with one another” (McGuire & Georges, 2003, p. 192). During the second year of my field research on immigration and health, over 500 people died in the Tucson sector of the border alone (Humane Borders, 2012; see also GAO, 2006)

and the county medical examiner had to rent a refrigerated semi truck to store the backlog of migrant bodies to be processed (*Arizona Republic* 2005). Many people died of heat stroke and dehydration, some from automobile accidents or direct violence. Migrants face numerous mortal dangers in the US–Mexico borderlands. There are Mexican and American assailants and kidnappers after their money; heat, sun, snakes and cacti after their bodies; armed American vigilantes after their freedom; and Border Patrol agents after their records.

Many scholars have concluded that US border policy is directly responsible for an increase in border deaths. Specifically, social scientists have analyzed the deadly effects of the US border policy begun in the mid-1990s known as “prevention through deterrence” – intentionally re-directing migrants to more dangerous, remote areas, including the area referred to by the US Customs and Border Patrol as the “corridor of death” (quoted in Doty, 2011, p. 608). Cornelius calls this “a strategy of immigration control that deliberately places people in harm’s way” and shows the resultant increase in deaths (2001, p. 681, see also Eschbach, Hagan, Rodriguez, Hernandez, & Bailey, 1999). He quotes Doris Meissner, former INS Commissioner, stating that this policy would attempt to close urban areas in San Diego and El Paso and “geography would do the rest” (2005, p. 779). Johnson concludes that this border policy “was deliberately formulated to maximize the physical risks for Mexican migrant workers, thereby ensuring that hundreds of them would die” (2007, p. 112). Even the US Government Accountability Office

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indicates that “border-crossing deaths have doubled since 1995” and signals a link to geographical changes in crossing routes, though falls short of linking this to upstream policy (2006, p. 1).

My Triqui (an indigenous group from the mountains of the Mexican state of Oaxaca) migrant research subjects and companions often explain their lives in terms of *sufrimiento* (suffering) in relation to their living conditions, working conditions, sicknesses, and interactions with doctors and nurses (Holmes, 2006a, 2006b, 2007, 2011, 2012). But one of the sites of *sufrimiento* most frequently described by Triqui migrants is the border crossing from Mexico into the US. One Triqui woman explained to me that she was kidnapped for ransom with her four year-old boy. They escaped with one other hostage through a window from the house where they were held captive for several days in Phoenix, Arizona. One young man described multiple chemical burns on his skin and in his lungs after being pushed and closed inside a tank on a train by his *coyote* (border crossing guide). Another man recounted being raped by a border patrol agent in exchange for his freedom. Because of the distressing numbers of deaths, their increase related to US border policy, the polarized political debates regarding immigration and the border, and the important health implications of the associated danger and trauma (see McGuire & Georges, 2003; Villarejo, 2003; see also Coker, 2004; Grønseth, 2010; McKay, MacIntyre, & Ellaway, 2003 related to the health effects of immigration in other contexts), the US–Mexico border deserves our close and focused attention.

This paper will utilize the methodology of ethnography – with its unique strengths in investigating lived experience as a long-term eye-witness, reflexively analyzing social positionality and social difference, and paying attention to linkages between micro level lived experience and macro level political economic structures – in order to analyze the experiences of suffering, fear, danger, and vulnerability in the US–Mexico borderlands. The paper makes two related but distinct arguments; the first regarding the political economic structures producing experiences of danger in the US–Mexico borderlands, and the second concerning the possibility of ethnography bringing to light such often overlooked connections while potentiating changes in public perception and policy. First, the paper argues that danger and death along the border are not, as commonly portrayed in popular and public health media, results of individual decisions rationally weighing so-called “push” and “pull” factors. Previous social science research (see Burawoy, 1976; Fernandez-Kelly & Massey, 2007; Massey, Durand & Malone, 2002; Massey & Pren, 2012; Massey, 1987; Portes & Bach, 1985; Wood, 1982) has indicated multiple ways in which politics, economics, and social networks – increasingly recognized in public health as social determinants of health – produce the risks and dangers inherent to unauthorized migration for certain structurally vulnerable groups (see Quesada, Hart, & Bourgois, 2011). The current article thickly describes the experiences of fear, risk and danger on the border and indicates that these phenomena are not experienced by migrants as chosen, but rather as imposed by larger forces outside themselves. Simultaneously, the paper demonstrates the unique lenses ethnography gives us into structural vulnerability on the border through its reflexive analysis of social positions and its attention to connections between lived experience on the ground and social, historical, political, and economic structures more broadly. I suggest that the thick description of ethnography provides complex and powerful narratives of the everyday lives of real people that have the potential to influence public opinion and policy.

Methods: participant observation on the border

Between 2003 and 2005, I spent approximately 18 months engaged in full-time ethnographic fieldwork migrating back and forth between the village of San Miguel in the mountains of Oaxaca

and the Western United States with indigenous Triqui Mexicans. This group was chosen for an ethnographic study of the impacts of migration, the border, and social structures on health because their migration to the United States was still in the relatively early process of development and because their social position as indigenous Mexicans experiencing discrimination from multiple fronts held the potential to shed unique light on the question of how social hierarchies relate to health. This fieldwork was approved by the Institutional Review Board of the University of California and included picking berries, living in labor camps, planting and harvesting corn, and trekking across the border desert from Mexico to the US. Since that time, I have continued fieldwork with my Triqui companions in shorter visits to Washington State, Oregon, California, Arizona, and the mountains of Oaxaca.

Early in my fieldwork, I decided that an ethnography of social structures, health, and migration would be incomplete without participant observation of such an important site of suffering for Latin American migrants. I had read several powerful accounts of border crossings (see especially Bustamante, 1971; Conover, 1987). However, there have been very few first-hand accounts since the significant militarization of the border post-9/11 and most of these are rather limited. For example, the Pulitzer Prize winning “Enrique’s Journey” in the L.A. Times in 2003 involved powerful photographs and stories from a train ride through Mexico to the border, but the photographer and his team did not observe the actual crossing of the border. Most of the ethnographic, journalistic, and documentary studies of the border since 9/11 similarly explore the conditions on one or both sides of the border but do not witness or participate in the immediate crossing itself.

I communicated with lawyers in the U.S. about the possibility of my crossing the border. They warned me about death by dehydration and sunstroke, kidnapping and robbery, rattlesnake poisoning, and the possibility of being misunderstood to be a *coyote* and charged with the felony of “aiding and abetting”. While contemplating the dangers and risks, I asked my Triqui companions what they thought of the possibility of my crossing the border. They warned me of robbers, armed vigilantes, rattlesnakes, and heat. At the same time, they reminded me that the border crossing is a principal site of *sufrimiento* that I should understand and write about and they began introducing me to people who might let me cross with them. While the participant observation of the border crossing offered unique experiential, bodily and contextual data and possibilities for theorization, since experiencing the danger of the borderlands first-hand, I am not sure I would make the same decision to attempt a crossing and definitely would not encourage future students of immigration to take on such risks.

Before, during, and immediately after the border crossing in which I participated, I wrote hundreds of pages of field notes involving observations, conversations, and my own embodied experiences. In addition, I took photos and tape-recorded conversations and interviews. The field notes in this article were taken during this in-depth, extended case study of a border crossing beginning with preparations in the mountains of Oaxaca and culminating in the borderlands of Arizona. The field notes are analyzed in the context of the 18 months of full-time migratory participant observation in Mexico and the US with extended indigenous Triqui families. This paper analyzes direct ethnographic field notes instead of synthesized summary statements in order to understand not only the health, bodily, and phenomenological implications of the border crossing but also the potential of ethnography to bring to light hidden realities and influence publics and policies in relation to health and immigration. The field note excerpts have been redacted due to space constraints while attempting to maintain the authentic narrative as I typed and tape-recorded during and immediately after the events in order to present clearly the immersion eyewitness narrative aspect of ethnography.

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