

# Dental Help For Migrants

by CHARLES OSTER, D.D.S.\*

It's probably not your idea of a dental office. No padded waiting room furniture, no stereo, no plush décor. It's actually a battered old trailer that looks as if it spent its best years in a hippie commune. Peering amidst the graffiti on its side, however, you can see the great seal of the State of New York. The "waiting room" is a padded board guaranteed to remind you that you have a gluteus maximus. The operatory—into which some contortionist jimmied two dentist's chairs and equipment—might make decent living space for a family of raccoons. This is the New York State Migrant Center Dental Facility.

I worked in the trailer one summer and fall after being contacted by Jeanne Stearns, the migrant center's coordinator of health services. Jeanne and Gloria Mattera, director of the migrant center, were made aware years ago that poor dental health was one of the most prevalent problems of the migrant population. They obtained a state Health Department grant to run the facility and eked equipment and supplies out of a host of sources. Every year they recruit dentists in the area to work through the three month harvesting season.

I'd always fancied I was rather worldly about teeth, but I was not at all prepared for what I found at the trailer. Most of the patients I see in my practice seek a dentist every six months or so and maintain fairly healthy mouths. Migrants see the dentist sporadically if at all, and then usually in pain. The contrast was shocking to me.

Most of the really bad mouths belonged to the adult laborers. Their young children, it turned out, had pretty good teeth. Thus, the focus of the children's clinic, which ran for five weeks during the daytime hours in the summer, was prevention. Winning these kids over to toothbrushing and proper diets was no easy task. Take the natural aversion that we *all* have to going to the dentist, add a cultural background in which preventive dental care is as frequent as

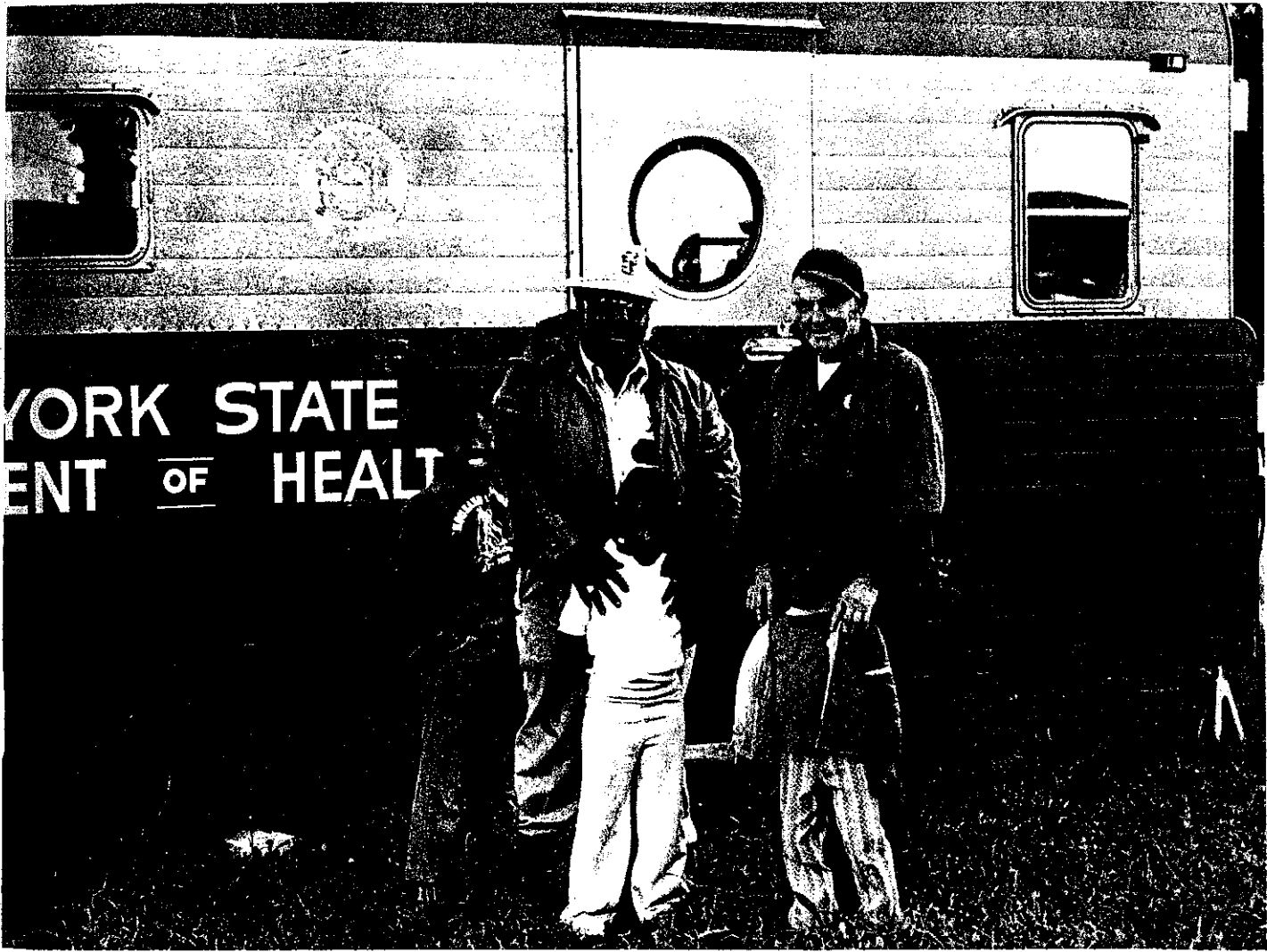
picnics on the moon, throw in a dash of peer group conditioning, impose all this on a 7-year-old mentality and you have an idea how readily the children took to us. Credit for hours of dedication and applied child psychology goes to Debbie Loper, our hygienist, who finally had most of the kids grinning from ear to ear, proudly brandishing their toothbrushes, and begging for daily tooth cleanings!

Real problems start to show up in the adolescents. Some of the saddest cases I saw were 14- and 15-year-olds who needed dentures, a service the migrant center didn't provide due to lack of funds. Looking at these children's mouths, a dentist experienced only with mainstream Americans might estimate that these and most migrant youngsters were much older than their actual ages. Deterioration progresses rapidly when children have no education and no professional care.

The evening clinic, which began in late August, was run after sundown to accommodate the adult laborers, who worked from dawn to dusk in the fields. The trailer was moved from the college campus in Geneseo to a potato field in the middle of NOWHERE. Here we were more or less centrally located among the camps where the laborers resided.

In the daytime clinic the children sauntered over to the trailer from their classes. But in the evening clinic we had no such luxury, we had to drive to and fro among the camps each night soliciting patients. Our solicitor/chauffeur/human road map, Vicki Bird, would pick up and return recruits from three or four of the widely spaced camps during the night. Even though the camps are not the pits of violence and squalor that popular wisdom would suggest, the living conditions are quite sub-standard and it's easy to understand why a young woman like Vicki would not want the job. I soon found out, though, that her dedication to the migrants far outweighed any implied threat. All of the migrant center staff shared her concern and dedication. They labored endlessly—on modest salaries—at programs designed to help the laborers better themselves through job training or education. Whenever, through their efforts, a migrant moved into Job Corps or college, it was like the hosts of angels rejoicing over a repentant soul! (Yes, Virginia, there are federally-funded programs like this!)

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**APPRECIATIVE PATIENTS**—Migrants stand in front of the New York State Migrant Center Dental Facility in Geneseo. The facility has helped ease the prevalent dental problems of the migrant population.

I soon began to find out what conjured such dedication out of the staff. The migrants were spontaneous and likable people, and they were very receptive to and grateful for the care we gave them.

Friends have accused me of acquiring an Albert Schweitzer syndrome, playing great white healer to the blighted Zambian natives. Well, syndrome or no, it's not very often that a dentist gets to repair as many broken smiles and relieve as much pain as I did at the migrant center. Nothing is routine there, unless you call massive dental problems routine. In my downtown practice I see people that need a couple of fillings, x-rays, maybe a crown, and the personal interplay isn't nearly as gratifying. I left the trailer every night feeling 10 feet tall, feeling that I'd really helped someone.

As an expenditure of public funds, the dental facility could never be considered wasteful. Sounds like we're blowing our horn, right? Well, I would challenge anyone to investigate the need, see what benefits we produce and *still* claim the money's being frittered away. I was appalled

when a local citizen told me candidly that she was disgusted that "government money was being thrown away on the laborers, most of whom were black and therefore had great teeth anyway." If you believe that, then I've got a bridge in Brooklyn I'd like to sell you. As for whether tax money should pay for such services, it's already being done for other groups via Medicaid and other programs. The problem is to see that all needy people get the care, while not depriving those who have it.

The migrants follow the warm weather south, so the trailer packs up in mid-October and is stored until the following harvest. Life at the migrant center turns to other programs and we of the dental personnel return to our sedate private practices. I don't yet know if I'll get the chance to work at the Geneseo Migrant Center Dental Facility again, but I'll never forget what providing a vital service for a warm and grateful group of people feels like. And I'll never forget what a heart-warmer a smile can be, especially when I helped put it there. □