

Future of Migrant Workers Looking Up

Traverse City Doctor Works to Raise Many Standards for Group

The future health, social status and educational standards of more than 200,000 Southern migratory workers who each year visit Michigan to labor in its fields and orchards may be materially affected by the continued activity of a Traverse City physician who has devoted years of his life to the improvement of their working and living conditions.

He is Dr. E. F. Sladek who, besides carrying the burden of an uncommonly heavy private practice, has been one of the busiest members of the Governor's Commission on Migratory Labor.

But Dr. Sladek's interest in the welfare of members of the vast army of "pickers" that invades Michigan each year long antedates his position on this State board.

His concern for the well-being of these workers was aroused approximately seven years ago when Dr. Sladek was Chairman of the Council of the Michigan State Medical Society.

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Because Traverse City is in the heart of the cherry-picking region, he was often confronted during his tours of duty at the Traverse City Hospital with the fact of an ever-increasing number of active tuberculosis cases among Southern cherry-pickers working in the orchards.

"I found," he observed, "that although this disease among the workers had not quite reached epidemic proportions, there was a distinct possibility that it might do so. Particularly was it significant that the incidence of TB among these Southern people was approximately 50 times as great as among residents of this area. We took care of a few of them, but so many of the others, given preliminary therapy, then would disappear and never report again for treatment.

"This particular group, over which there was no control, seems to be growing instead of diminishing in number, and the condition applies not only to those with incipient or advanced cases of TB, but also to those with several other diseases, including those stemming from malnutrition.

"There apparently is no easy or simple way to improve the health standards of these 'uncontrollable' groups.

"The way of life of the migrant family is such that, by heritage and custom, they have become accustomed to a diet lacking both in quantity and in essential food elements—vitamins and minerals. Contributing factors are their economic status and their unfamiliarity with the use of vegetables and other nutritious foods.

"In illness, their utter lack of previous experience with doctors, dentists and hospitals contributes greatly to a possibly dangerous delay in seeking medical care.

"Many of these people are not familiar with, or concerned about, modern housing, or in the basic concept of good sanitation facilities."

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Dr. Sladek says that while "it is almost impossible to legislate any widespread improvement of these conditions," he has recently made several suggestions to the Michigan Commission of which he is a member.

"This study commission, composed of 26 persons and representing nearly every faction that might be concerned with migrant labor in the State, is going about its task, I believe, in a sensible manner.

"Unlike other State groups of this nature, it is not bent upon making a grab for Federal funds to carry on the task of quickly improving the lot of the migrant laborer. Rather, it is



Dr. E. F. Sladek, who has been a Traverse City physician for 34 years, and who has spent much time and effort to improve the lot of the State's migratory workers, is pictured above in his office conferring with his wife, who is his chief assistant. Mrs. Sladek herself is a dietitian.

seeking means and finances within the capabilities of local governmental units and with the full co-operation of employer groups," Dr. Sladek said in crediting the entire Commission with already having worked out certain phases of an over-all plan now being perfected in detail.

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Recent suggestions he has advanced to the Commission include:

Legislation to amend the Workmen's Compensation Act to provide coverage for all farm employes, for injuries on the job.

Legislation to provide a State sanitary code that requires every farm labor camp with 10 or more persons to have a State Health Department permit. This, he points out, should include powers of inspection and of enforcement of minimal standards, including availability of pure water, adequate and safe toilet facilities and proper garbage disposal.

A legislative appropriation to the State Department of Health for additional personnel and equipment for tuberculosis screening units; for mass examinations on a voluntary basis within the migrant working areas.

He adds that it is his suggestion that such additional personnel and equipment should be sufficient to process, read and report quickly on the results of examinations before the migrant leaves a specific area and is unable to be traced.

He adds that, in his opinion, sufficient authority should be vested in each County Health Officer to institutionalize positive cases.

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Further suggestions he has submitted to the Commission, Dr. Sladek says, include a proposal to provide legislation for adequate temporary relief for needy migrant farm workers and he has suggested elimination of the six months' residency requirement; administration on a local county level, so that investigation of actual financial need is more easily established, and possibly the matching of State and County funds for this purpose.

Dr. Sladek has also projected the possibility of encouraging the purchase of prepayment medical and hospital care on an employer-employee participation basis.

Two Michigan medical care and hospital services, he asserts, are now willing to cover

the migrant worker with medical care insurance and a suggested figure for such coverage would be approximately \$11 per month per family.

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Dr. Sladek further has proposed the establishment of rural and community health councils in those areas employing migrants, particularly from an educational standpoint.

"These councils", he explains, "could actively stimulate better housing for migrants; classes in nutrition and simple health measures; classes in English for migrants on a progressive basis, area-to-area, as the workers move from crop to crop; participation in community church services; setting up of recreational areas and playgrounds in the crop areas and on the fringes of towns; organization of seasonal day-nursery schools; publication and distribution of pamphlets in Spanish and English covering such subjects as health practices, care of property, local laws, etc."

The Traverse City physician has made other suggestions including more specific recommendations for a "Michigan Migrant Workers Health and Social Fund" as a non-profit organization and has projected a method of financing such an effort.

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A graduate of the University of Illinois in 1918, Dr. Sladek served his residency in Chicago's Michael Reese Hospital, then went to Traverse City, establishing practice as a proctologist there in 1919.

He was Secretary of the Grand Traverse County Medical Society and President of the Michigan Society in 1948 and 1949 following a term of three years as Chairman of the State Society's Council, from 1944 to 1947.

In 1949, he was also President of the Associated States' Postgraduate Committees, a group of postgraduate committees of State medical societies, and he served a term as President of the National Conference on Medical Service.

A veteran of World War I, Dr. Sladek is a member of the American Legion, of the Traverse City Elks. He is a Knights Templar, Traverse City Commandery No. 41, and a member of Lawndale Lodge, F & AM.

Dr. Sladek's chief assistant, both at home and at the office, is Mrs. Sladek, herself a dietitian, who arranges his time and his appointments with amazing efficiency.