## Migrants Deserve Same Interest As Other Visitors to Colorado

Each spring Colorado anticipates a welcome onslaught of summer visitors. Resort areas refurbish their accommodations, cash register drawers are oiled and chambers of commerce unroll the welcome mats for the anticipated tourist influx.

All of us are aware of the importance these visitors play in our state's economy, and we go all out to welcome these visitors to Colorado.

Many of us are aware, however, of another influx of summer visitors equally vital to our economic well-being. Unfortunately, the extent of preparation and enthusiasm for their arrival is somewhat less. These other visitors are migrant agricultural workers and their families, who begin to arrive in April and have gone, for the most part, in November, During their stay in Colorado, they will have planted, weeded, thinned, cultivated and harvested many of our important field

Their wages and living standards are low. Many migrant families must subsist upon an average annual income of less than \$1,000. The value they place upon many of the things we take for granted is of necessity low. This includes concern for preventive health measures.

Because of residence requirements, they are largely ineligible for services available to local people. Their incomes are too low to enable them to participate in the types of insurance plans we all know so well. In medical emergencies, there is no savings account or credit union upon which they might fall back to cushion the sudden expenditures. As a result, serious health conditions go undetected. Children fail to receive the medical care, which we accept as routine for our own children. Dental conditions, which we would give our immediate attention, are left until pain becomes unbearable or until discovered by someone interested in their health and wellbeing.

## State Migrant Plan

In order to meet this need in migrant health care, the State Department of Public Health administers the State Migrant Plan for Public Health Services. This plan, funded by U.S. Public Health Service grants, provides medical care, dental care, public health nursing, environmental health services and home economics consultation. Some of these services are rendered through local health departments and funded by the State Migrant Plan through reimbursement agreements negotiated with local health departments and boards of county commissioners. Some services are rendered by state level staff. These are supervision and co-ordination of the migrant environmental health program, dental health education and dental screening, public health nursing consultation and supervision. home economics consultation, health education and medical-social services. In the San Luis Valley, a public health nurse is employed on the state level, as is a migrant housing representative. This departure from the plan format is made because there is no health department in the San Luis Valley.

Provision is also made in the State Migrant Plan for the payment of fees for medical and dental services rendered to migrant workers and their families. Prescription drugs can also be furnished to migrant patients requiring them. No provision has been made thus far, however, for in-patient hospital services.

Two years ago the bracero program was terminated because of expiration of the public law which provided for the seasonal importation of agricultural workers from Mexico. While this program was in effect, health problems with the single worker were less marked in that health screening was done prior to the importation of these laborers and certain federally imposed minimum standards had to be maintained with respect to their housing and health care.

Upon the termination of the bracero program, a large vacuum existed in the seasonal agricultural labor force. This vacuum has been filled largely through the recruiting of family groups from other states, principally Texas and New Mexico. This introduction of a greatly increased number of family units into the migrant stream created many new health care problems in that a laborer might have as many as six or eight dependents who were not working and who were, for the large part, in need of some kind of health service.

## Housing Problems

Housing problems increased inasmuch as facilities constructed for single workers proved to be unfit for family housing and were difficult to convert to such use. Many new problems developed with respect to environmental health and, unfortunately, persist today.

For many years the number of people required to assist Colorado farmers in the production of field crops has diminished because of improved seeds, efficient insec cides and the increasing mecha ization of agricultural process This decrease in required seaso al labor is deceiving unless of takes into consideration the fa that the termination of the br cero program and the resulta increase of family units has pro ably increased the numbers persons requiring health servic during their stay in Colorado.

While it can be only estimate it is believed that more th 20,000 individual migrant wor ers and family members pa through our state each agricu tural season.

These migrant farm worke and their families, our "oth summer visitors," are essential Colorado's agriculture. They a fellow American citizens w have temporarily moved fro other states or from another pa of Colorado to earn their livi in our field crop production. Th deserve our interest and atte tion as much as the visitors w come in the shiny new cars w. out-of-state license plates to vi our resort and scenic areas, r tional parks and forests duri their vacations.

> -Al Lambert Migrant Health Consultant



## Classification Under

The difficult task of classifying various rado's interstate streams for their most ben

On March 31, the Colorado Water Pollu conducted a hearing at Greelev on classifica River Basin — the first of four such basin l

A hearing on the Rio Grande River Basin will be held at 9:30 a.m., April 19 in the auditorium of Adams State College at Ala-

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mosa, ar. kansas River Basin has been scheduled for 10 a.m., April 20 at Memorial Auditorium-City Hall in Pueblo. A hearing on the

were optamed from 5,000 cn dren covering every school the county. More than 900 ch dren were detected as carriers