AGRICULTURAL MIGRANTS
Background Information

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general

The following summary of background information on agricultural migrants in the United States presents a general over-view of the situation. First prepared by the Public Health Service Interbureau Committee on Migrants in October 1952, the summary has now been brought up-to-date and expanded by the Committee staff.

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Note: Material used was chiefly from Committee files and the libraries of the Department of Health, Education, and Welfare and the National Institutes of Health. Gaps in information on various points doubtless will appear since extensive research was not possible in the time available.

The Children's Bureau and Office of Education in this Department, and the Department of Agriculture and Department of Labor helped materially by supplementing and checking information compiled by the Committee.

# AGRICULTURAL MIGRANTS Background Information

#### THE AGRICULTURAL MIGRANT POPULATION

#### Definition

A migratory farm worker moves one or more times each year in search of employment, returning to a home base when no employment is available. His migration follows a seasonal course, sometimes through several States. Migration may also be confined within a single State. In no case, however, is home base near enough so the worker can return home each night.

#### Number (Ref. 1; Ref. 2, pp. 1-2)

In 1950, the latest year for which estimates are available, the migrant population included 1.4 million persons. Of these, about half were domestic workers and their nonworking dependents. Most of the remainder were Mexican nationals.

In 1949, a Nationwide study indicated that migrant workers in agriculture totaled about 1 million, excluding children under 14, many of whom were also workers.

## Factors affecting number (Ref. 3; Ref. 4, pp. 29-30, 79-80; Ref. 5, p. 16)

Annual variations in number of migrants depend on crop yields which in turn are dependent upon weather and other unpredictable factors, availability of other employment, progress in farm mechanization, and general economic conditions.

Long-term trends in employment of migrants depend chiefly on farm mechanization.

Over-all, fewer people will be needed for farm work in the future as productivity per worker increases through farm mechanization and other means. Mechanization is likely to have a substantial effect in such crops as cotton and sugar beets. Crop hand work is difficult to eliminate in fruits, berries, vegetables, and tobacco.

Progress of farm mechanization depends on general economic conditions. Larger scale production made possible through mechanization to some degree tends to absorb some of the labor released by mechanization.

Peak seasonal needs for agricultural workers in some areas have created a demand for migrants since early in the century. In the 1930's their number reached 3 or 4 million. During World War II, it declined to its lowest level. Since the war it has again risen.

Even with increased mechanization reducing the need for hand labor, there seems little likelihood that the need for agricultural migrants in some crops will totally disappear.

General characteristics (Ref. 2, p. 3; Ref. 3; Ref. 5, p. 137; Ref. 6, pp. 222-223.

Migrants belong chiefly to minority racial and nationality groups:
Negroes
Mexicans and United States citizens of Mexican descent
Native white workers from farming areas of southern Appalachians, Ozarks, and other marginal areas
Orientals
Families of recent European origin

They are chiefly persons lacking in education, occupational skills, or other requirements for obtaining regular employment readily. They include a sizeable Spanish-speaking population as well as many illiterates and near-illiterates.

Young people make up a relatively large segment of the migratory labor force; 45 per cent are under 25 and nearly half of these are in the age group 14 to 17. Many children under 14 are also workers.

Women and girls, likewise, comprise a relatively important segment of the migratory labor force. At the peak of cotton picking in 1948, women and girls made up 38 per cent of the migrant workers employed on United States farms.

Domestic migrants often have relatively large families. About 12 times as many migrant as nonmigrant families of farm wage workers have four or more children.

Contract workers from outside the continental United States are single males. Illegal entrants from Mexico include both single men and families.

Atlantic Coast

Fruits and vegetables

Negro families

Texas to North Central and Mountain States

Sugar beets

Latin-American families

Texas to Mont., N.D., and Canada

Wheat and small grain

Single men or men who leave families at home

Texas to Calif. and Miss. Delta

Cotton

Latin-American families

South Central to North Central States

Fruits and vegetables

Anglo-Saxon families

South Central States, Ariz., and s. Calif. Cotton, fruits, to n. Calif. and other and vegetables western states Latin-American, Anglo-Saxon, Indian, Negro, Filipino, and Oriental families

#### EMPLOYMENT AND EARNINGS

#### Employess (Ref. 3; Ref. 5, p. 7; Ref. 8)

Migrants are employed in nearly every State for at least short periods at peak seasons of crop production. Without them, crops in many areas could not be produced and harvested.

Nevertheless, only a relatively small proportion of the Nation's farmers—approximately 125,000 or 2 percent—depend to any significant extent on migratory labor.

In 1948, 1 percent of the farms of the United States, those using 8 man-years or more of hired labor each year-employed more than one-third of the migrant labor force. Farms using less than a full man-year of labor employed only one-fifth.

#### Migrants in relation to total farm manpower (Ref. 3; Ref. 5, pp. 6-7)

Migratory workers make up 7 percent of the Nation's total farm manpower which includes:

About 10million farmers and members of their families; 600 thousand year-round workers with 250 or more days' employment; 400 thousand regular workers with from 150 to 250 days'

400 thousand regular workers with from 150 to 250 days employment;

2½ million seasonal workers who do not migrate; 1 million migratory workers.

Shout half of the sorioultural migrants are employed in the South:

For one-third of the male migrants, farm wage work was the chief activity in 1949. For two-thirds, the chief activity was work on a farm as farm operator or unpaid family worker, off-farm work, or being out of the labor force.

The employment status of migrant workers at the end of 1949 was as follows:

- 35 percent were on farm jobs:
- 23 percent were on nonfarm jobs;
- 13 percent were unemployed and looking for work:
- 29 percent were not in the labor force (includes housewives, students, and others).

Average earnings and average period of employment (Ref. 2, pp. 7-15; Ref. 5, p. 17; Ref. 9, p. 10; Ref. 10, pp. 980-983)

Total per worker (1949 study)—
Both farm and nonfarm work:
\$514 for 131 days of work;
For males, \$655 for 116 days of work.
Farm work only:
\$352 for 70 days of work;
For males, \$442 for 79 days.
Nonfarm work only:
\$162 for 31 days of work;
For males, \$213 for 37 days of work.

Annual family earnings are estimated at between \$1,200 and \$1,500.

During the period 1940-48, farm wages for all hired farm workers including both migrants and nonmigrants ranged from less than one-third to a little more than half the wages of industrial workers.

Non-cash perquisites raise wages for seasonal farm workers by only 10 percent compared with 30 percent for regular workers.

Factors other than wage rates affecting annual earnings (Ref. 2, pp. 7-9; Ref. 3; Ref. 10, p. 995)

Time worked on farms is affected by problem of getting to right place at right time, size of yield, availability of correct information regarding need for workers, and other factors.

Continuous farm employment throughout year or greater part of year is found only in unusual situations in which workers are able to piece together a number of jobs on different farms to make a long period of employment. In 1949--

- 5 per cent of the migrant workers did farm-wage work for 250 days or more;
- 8 per cent were employed this long when nonfarm work is included;
- 70 per cent had less than 75 days at farm jobs;
- 49 per cent had less than 75 days of work when both farm and nonfarm employment are taken together.

Most of those with less than 75 days of work are not part of regular labor force.

## Recruitment and job-seeking (Ref. 5, pp. 89-102; Ref. 11)

Estimated 40 per cent of domestic farm labor force seek employment on their own, moving into seasonal work areas without prior arrangement. Of remainder, some are recruited directly by individual growers or growers, associations, some are recruited by crew leaders, and some are placed through the Farm Placement Service either individually or through crew leaders.

In general, haphazard recruitment and job-seeking lead to disorgan-ized farm labor market--

Growers tend to overstate needs; give domestic workers no pledge of work during specified periods.

Role of employment intermediary assumed by crew leaders or labor contractors leads to abuses such as misrepresentation of job opportunities and excessive fees.

Information about areas where labor will be required is disseminated by Farm Placement Service with approximate dates of peak labor requirements; no general information may be provided on estimated number of outside workers to be required nor on whether or not this number may arrive.

Farm Placement Service is currently trying to improve recruitment and job-seeking procedures in order to make employment more stable. Experiment is being conducted with workers along Atlantic Coast.

Conditions shared by domestic farm migrants with other hired farm workers (Ref. 5, pp. 16-22, 105-118; Ref. 12, pp. 31-36)

Lack of organization and bargaining power with employers; employers, on the other hand, may be organized in associations which make formal or informal agreements regarding wage levels.

Lack of employment security.

Lack of protection under various types of social legislation—
Unemployment compensation;
Workmen's compensation;
Wage and hour standards;
Old age and survivors insurance.

Factors which make organization of workers difficult:
Relatively wide dispersion of workers on scattered farms;

Heterogeneity of labor force, particularly the migrant group, some of whom are low-income farm operators part of the year or homemakers and students interested only in temporary employment;

Racial and national differences leading to antagonisms, particularly within the migrant group.

Conditions likely to affect migrants more than other farm workers (Ref. 5, pp. 1-22, 94-95, 137-139, 153-159)

Time lost from work and costs of migrating and securing employment; migrant shifts more or less continuously from employer to employer; typically employment is of chance character and any one job may be relatively brief.

Low standards of housing and sanitary facilities available to migrants in many areas.

Low annual income level and susceptibility to conditions resulting from poor nutrition, inadequate housing, and other handicaps resulting from low family purchasing power.

Travel, as well as living conditions, conducive to disease and accident. Much of travel is by private carrier, often an employer's, crew leader's, or labor contractor's truck. Accommodations for rest stops en route may be inadequate or lacking even though travel lasts for many hours, perhaps through more than one State.

Negative or indifferent community attitudes --Community is likely to feel no responsibility for health and welfare of migrents -- they are "here today and gone tomorrow."

Migrants are likely to be rejected because they are strange and have different cultural traits.

The deep-rooted tradition that migrants endanger settled community's health, morals, and property lead to suspicions, fears, and antagonisms.

## Lack of community services --

Health, education, welfare and other agencies and groups may not serve migrants because migrants fail to meet the residence requirements in the case of some services; local facilities, staff, and funds are inadequate; for other reasons.

On the part of the migrants, barriers to obtaining community services include illiteracy, inability to speak or understand English well, lack of interest and understanding, suspicions and fears based on rebuffs from community residents in various localities where they have worked.

Constant shifting from place to place results in--

Lack of educational opportunity;

Lack of opportunity to accumulate wealth, build substantial housing, and get ahead in agriculture in same way as other farm workers:

Inability to build for themselves a permanent place in the community.

#### FOREIGN WORKERS

Legal entrants (Ref. 5, pp. 37-59, 105-111; Ref. 13, pp. 7-8; Ref. 14)

Mexican workers contracted for through the international agreement with Mexico under Public Law 78 (see section on Laws and Legislative Proposals) totalled 197,000 in 1952. They were employed in 26

Contract workers are screened at border for physical defects;

Have guarantees of employment conditions and housing meeting minimum standards;

Transportation to and from border, including meals and other costs, paid for by employers;

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Workers from British West Indies and other countries recruited directly by employers on basis of negotiations with governments concerned or their agents. Work contracts provide benefits similar to those for Mexican workers. They are also subject to physical screening.

Puerto Ricans are United States citizens and therefore not subject to laws and regulations affecting aliens. However, the Puerto Rican department of labor has obtained for temporary farm workers from Puerto Rico coming to continental United States under the auspices of the department contractual guarantees similar to those provided aliens.

#### Illegal entrants (Ref. 5, pp. 69-88; Ref. 13; Ref. 15)

"Wetbacks"--Mexican workers with or without families--have long crossed the Rio Grande and other points along the Mexican border for temporary employment in agriculture in border counties. Some filter as far North as Michigan and Illinois and find employment in industry as well as agriculture.

More than 650,000 were reported to have been apprehended along the Mexican border in the first 8 months of 1953. While many are repeaters, this is offset by the estimate of the Immigration and Naturalization Service that one or more cross undetected for every one apprehended.

The wetback is not subject to physical screening, he usually will not risk deportation by seeking medical advice when he is sick, and his susceptibility to exploitation aggravate housing, sanitation, and other problems which he shares with other agricultural migrants.

#### HEALTH SITUATION AND SERVICES

## Public Health Service study (Ref. 16, pp. 63-84)

Study of interstate family transients and residents in a 3-month period during 1938 showed following disabling illness rates:

Total, adjusted to age distribution, for all interstate family transients - 239 disabling illnesses per 1,000 persons:

Total for residents of poor economic status, 154; of moderate economic status, 128; of comfortable economic status, 126.

Disabling illness rates per 1,000 persons according to broad diagnostic groups (crude rates):

Diagnostic group	transients	Residents
Respiratory	83.7	62.9
E <b>p</b> idemic	41.4	17.7
Digestive	23.0	10.9
Accidents	12.8	5.5
Puerperal (per 1,000 females	25.1	13.7
Degenerative, nervous and		
rheumatic	14,5	24.6
All other	51.2	9.2

Days of hospital care:

Family transients --

Days per 1,000 persons - 362
Days per 1,000 disabling
illnesses - 1,515
"Poor" residents-Days per 1,000 persons - 575
Days per 1,000 disabling
illnesses - 3,710

#### Public Health Service survey, 1952 (Ref. 17)

1952 survey of State venereal disease diagnostic and treatment programs covering agricultural migrants:

Mass testing at least at some time within past several years reported by 12 States: N. Y., N.J., Va., N. C., Mich., Ky., Miss., Fla., Texas, Ark., Idaho, and Ariz. Five programs covered aliens only;

Seven covered only domestic migrants.

No problem reported by 7 States: Me., N.H., Minn., Wis., Ind., Tenn., and S. C.

(See also Fresno County, Calif., study of diarrheal disease in which PHS personnel participated.)

### State and local studies and reports

#### Arizona (Ref. 20; Ref. 21, pp. 1-10)

State Department of Health is surveying problem; does some inspection and consultative work.

Death from typhoid in Pinal County camp led to probe by health officials and organization of county health and sanitation committee.

California (Ref. 20; Ref. 22, pp. 204-211)

State Department of Health cooperates with Department of Industrial Relations which has direct responsibility for inspection of housing and carrying on some sanitation activities; cooperates with San Joaquin Valley Agricultural Labor Resources Committee in research and studies; carries on other cooperative work.

Fresno County (Ref. 18, pp. 728-741; Ref. 19, pp. 94-97; Ref. 23, pp. 199-203; Ref. 25)

Study of diarrheal diseases in county, July-December 1950, showed distinct difference in rates of Shigella infection in housing project population compared with labor camps and town fringe areas; a major increase in prevalence of Shigella and incidence of diarrheal disease in labor camps following immigration of large numbers of workers for fall harvest. Data suggest that modification of a single environmental factor, water use, may significantly lower Shigella prevalence when risk of acquiring infection is great.

Survey cultures in four population groups with prevalence rates for the Genus Shigella, Fresno County, July-December 1950--

Population group	Total cultures	Percent positive
Camps Towns (fringe areas)	3,624 2,574	6•1 3•9
Housing projects Child health conferences	278	0.4
	ф. грані - офистийства вергу	0.2
Total	7,065	$4 \cdot 6$

Fresno County's Rural Health and Education Committee has grower as chairman; brings to focus efforts of various groups on needs of migrants. Program includes:

Well beby and prenatal clinics held in west-side camps under auspices of health department; medical care clinics held under auspices of hospital with welfare department representative present to determine eligibility of cases for financial assistance although no one is deprived of medical care because of residence requirements.

Barracks converted by several growers into health centers with space for clinics, home demonstration agent, Red Cross home nursing teacher, and adult education workers; some include general meeting places for movies and other recreation.

State and local health agencies carry on labor camp inspection and sanitation activities; cooperate with sugar company and other groups in providing public health nursing service, tuberculosis screening, health education, and other services.

Governor's Survey Committee on Migrant Labor set up in 1950 to study conditions in the State and to make recommendations to the legislature; asked National Child Labor Committee to make study.

Study in 1950 covered 262 families with 1,513 members: Living conditions--

Average sleeping room about 162 feet square shared by 4.2 persons.

92 per cent of families had no means of refrigeration.

13 per cent of families had an obviously unsafe water supply; only one-third could be sure of a safe water supply.

Less than 1 in 4 of pit toilets-used by most families-would have passed elementary health inspection.

60 per cent of families had no bathing facilities.

#### Health and medical care-

58 per cent of persons covered by survey had no smallpox vaccination; from 80 to 90 per cent had no diphtheria, whooping cough, or tetanus immunization.

Infant mortality rate nearly twice that for State; of babies born to migrants in last 5 years, one-third were born without a doctor in attendance and two-thirds were born outside a hospital.

86 per cent of those included in survey had not seen a doctor for past 12 months; 87 per cent had not seen a dentist.

#### Recommendations--

Establishment of State commission on migrant farm labor including representatives of agencies and voluntary groups; objectives to include to coordinate and give direction to agency programs, direct research, make recommendations for legislation, assist local groups.

#### Health:

Special detection and treatment clinics and health services with bilingual personnel;

Mobile clinics and camp clinics with services available after working hours:

Increased personnel and facilities for health, sanitation and inspection programs;

Investigation of a regional interstate approach to health problems of migrant workers;

Strengthening of code for labor camps and other housing for migrants;

Communicable disease control, health education, and other preventive measures;

Establishment of procedures for providing medical care.

Florida, Palm Beach County (Ref. 26)

Local health department tries to serve migrants; influx of approximately 20,000 each winter season puts great strain on limited staff.

Negro farm workers' families, resident as well as migrant, have stillbirth and infant mortality rates higher than those for the total Negro resident population.

Typhoid fever case among occupants in labor housing led to sanitary survey of municipality; half of 760 individual premises surveyed were unsatisfactory.

<u>Illinois</u> (Ref. 27; Ref. 28; Ref. 29)

Illinois canners' group guarantees medical care for their migratory workers; canners guarantee hospitals and physicians that their workers' bills will be paid; some employers expect repayment from workers; canners' group reported to be investigating possibility of group insurance for migrants they employ during the period while they are in Illinois.

Hoopeston Migrant Council and Migrant Committee of Northwest Suburban Branch, AAUW, in Des Plaines sponsor services for migrants, including health care.

## Michigan (Ref. 5, p. 153; Ref. 30; Ref. 31)

State Department of Health representative reported tuberculosis rate of 19 per 1,000 among migratory agricultural workers in Saginaw County compared with less than 1 per 1,000 among "normal" residents.

Committee on Education, Health, and Welfare of Migrant Workers started several years ago; interagency committee with representation from Protestant and Catholic church groups; held series of regional conferences which resulted in improving living conditions in some areas.

Experimentation in health insurance coverage reported to be planned by one grower.

New Jersey (Ref. 5, p. 157; Ref. 20)

Health department participates in Migrant Labor Board which includes representatives of other official and voluntary agencies.

Health education carried on by public health nurses through pamphlets and other means.

Labor camp inspections made by State Labor Department's Bureau of Migrant Labor; all camps with 1 or more migrants must register by law; about 2,200 camps of all sizes are inspected.

Limited medical care provided as part of venereal disease and maternal and child health programs; one clinic, full-time, with two resident nurses operates at Seabrook Farms; clinic services at Glassboro, N. J., for Puerto Rican migrants are financed by farmers' organization.

New York (Ref. 20; Ref. 32, pp. 1-10)

State health department participates in providing nursing services for migrant families; emphasis is on nursing care related to communicable diseases, the maternity cycle and child health supervision. Before peak season, conferences are held by public health nurses, their supervisors, and camp operators and owners to review services available, make an estimate of expected health needs of migrants, and plan to meet these needs. State health department requires that every camp make arrangements for medical and nursing services and list names of doctor and registered nurse.

State Department of Labor requires anyone bringing in 10 or more migrants from outside State to register; 820 migrant camp properties were under health department supervision in 1952 although some either remained unoccupied or had fewer than 10 occupants at any one time; 84 percent of the 6,972 sanitary inspections were made by State health department personnel; average of 8.2 inspections per property under supervision; many improvements made in camp properties during year.

Interdepartmental Committee on Farm and Food Processing Labor, established by Governor in 1943, includes representatives of 9 agencies whose programs directly affect migrant families; Committee's responsibility chiefly to improve effectiveness of work of each of agencies through joint planning, mutual assistance, understanding, and thorough study and evaluation of each program and problem; officers of Committee meet frequently with voluntary groups.

## Wisconsin (Ref. 33)

Recent report of director of Governor's Commission on Human Rights indicated that 41 Wisconsin canners had arrangements with local doctors to guarantee payment for services to workers and their families, ten camps provided company nurses, and 28 offered free chest X-rays.

#### Door County (Ref. 34)

Report made by State Department of Public Welfare at request of Council of Church Women in county shows cost of medical care for migrants amounted to \$8,000 in 1950; expresses need for screening workers in regard to health in order to protect health of local community and to avoid medical expense on part of county.

Recommends improvement in camp sanitation to protect water supplies from pollution. Also recommends that a Subcommittee on Health Planning take responsibility for working out ways for health screening of workers as they move from area to area; for cooperation in making an annual inspection of quarters and sanitary facilities; for protecting the water supply; for working on details of a health service plan; and for working with growers in developing health programs.

### Waupun project (Ref. 35)

As part of the work sponsored by the Community Council on Human Relations, mobile unit visited local campa

doctors and dentists. Health education through movies, discussions and health kit prepared for children.

1952 report of project comments that "none of . . . camps were registered early enough to get inspection, and as a result some health conditions were unimproved."

#### Other States (Ref. 20; Ref. 36)

Among other States in which health activities on behalf of migrants are underway or planned, either on a Statewide basis or in local areas, are Conn., Del., Ind., Idaho, La., Md., Mont., Nebr., Nev., N. Mex., N. H., N. Ca., Pa., Utah, and Virginia. In Ohio a meeting to discuss problems of migrants was held in the summer of 1953.

#### Summary of arrangements under which medical care is provided

Free medical care to needy regardless of residence status provided by only about one-sixth of State and local agencies and one-third of private agencies a decade ago; no evidence of significant improvement.

Some employers pay medical bills for workers unable to pay, in some cases making deductions from worker's wages later and in others considering it part of the costs of production.

Some migrant workers reported to have individual insurance contracts; single group of domestic workers reported by President's Commission to work under contract with 75 cents per week deducted from pay for group medical insurance; scattered instances of local experiments with group coverage of migrant workers for the period of their employment in an area with the cost prorated according to the length of that period—experiments developed cooperatively by one or more employers, local physicians, and insurance plans.

Some employers and employers associations have established and maintain clinics for their workers.

Clinics serving one or more labor camps have been set up in Fresno County, Calif., through cooperation of growers, Camp Health Committees, the local physicians and hospital, and State and local health departments. Medical social worker reviews nationals record card

## Some current studies (cont.)

Monresident tuberculosis study - Joint study of Public Health Service and National Tuberculosis Association directed toward problem of nonresident tuberculosis; related to migrants to extent that they represent a segment of this general problem.

4-State Study - National Council on Agricultural Life and Labor currently conducting study in Fla., Va., Texas, and Ill. to improve educational opportunities of migrant children.

Bibliography on migratory agricultural labor - Released in 1953 by Bureau of Agricultural Economics. An annotated bibliography listing 458 items including a number health, medical care, and housing.

Minnesota - Study of retardation and attendance of children of migrant workers and school program in Hollandale, Minn.

New York - 1953 Statewide study of conditions of employment, health and education by Cornell University in cooperation with Bureau of Agricultural Economics.

Earlier study of housing made by Cornell University in cooperation with other groups.

Survey of child labor on farms in 7 areas of State under auspices of State Department of Labor.

Pennsylvania - Lafayette College commissioned by Governor in 1952 to make Statewide study.

Texas - Study of child labor and school attendance in selected Texas cities and rural areas; particularly concerned with Latin-American children. Under auspices of National Child Labor Committee.

Atlantic Coast - Bureau of Agricultural Economics currently conducting study focussed on Atlantic Coast migration with purpose of providing basis for systematizing migration to improve efficiency of use of labor.

Study of use of Puerto Rican labor in agriculture in the eastern seaboard States; primarily concerned with employment patterns; will include data on housing. Study conducted by Eureau of Employment Security.

Study of relationship of migrants to community along Atlantic Coast migration route; doctor's thesis at American University in 1953.

GROUPS WITH SPECIAL CONCERN FOR MIGRANTS (Ref. 39)
(Following list is not exhaustive)

#### National groups

Federal responsibility shared by following Departments and agencies:
Department of Agriculture (Bureau of Agricultural Economics;
Extension Service)

Department' of Health, Education and Welfare (Children's Bureau, Office of Education, Public Health Service, and other constituent units)

Department of Interior (Bureau of Indian Affairs concerned with placement of Indians in employment off reservations)

Department of Justice (Immigration and Naturalization Service administers program to control wetbacks and is responsible for issuing rules and prescribing conditions under which legal aliens may come into country temporarily; these are subject to approval of Attorney General)

Department of Labor (Bureau of Labor Standards, Farm Placement Service

Interdepartmental Committee on Children and Youth through a Special Committee on Migrants and their Families maintains continuing interest in ways to improve working and living conditions of migrants and extend community services to them.

National Council on Agricultural Life and Labor.

National Child Labor Committee

National Council of Churches through its Division of Home Missions.

National Consumers League, National Association for Advancement of Colored People, and many other groups.

#### State and local groups

California - Governor's Committee to Survey the Agricultural Labor Resources of the San Joaquin Valley (published report in 1951)

Rural Health and Education Committee, Fresno County

Colorado - Governor's Committee on Migrant Labor

Illinois - Hoopeston Migrant Council
Migrant Committee, Northwest Suburban Branch, AAUW, Des Plaines

Michigan - Governor's Study Commission on Migratory Labor

New Jersey - Migrant Labor Board

New York - Interdepartmental Committee for Farm and Food Processing Labor

Pennsylvania - Reported to have two Statewide committees; one appointed by the Governor and the other a citizens! committee

Texas - Texas Good Neighbor Commission Neighborhood Council of San Antonio

Wisconsin - Governor's Commission on Human Rights
Racine County Migrant Workers' Committee
Mayor's Committee on Human Rights, Door County, Sturgeon Bay
Community Council on Human Relations, Waupun

Other States - State Commissions on Children and Youth in New Mexico and elsewhere are among other groups with a special concern for migrants.

Housing and migrant labor camps --

13 States have laws or regulations which apply to all labor camps or to migrant camps specifically: Calif., Ia., Minn., Mo., Mont., N. J., N. Y., Ore., Pa., Utah, Wash., Wisc. and Wyo.

Regulatory authority is in State department of labor in Calif., N. J., and Pa.

Elsewhere, program is administered by State health authorities (in New York, Department of Labor is authorized to enter and inspect camps although regulation of camps is in health department).

Advisory rather than mandatory standards in Conn.

Standards applicable to highway construction camps in Nevada are considered advisory for other types of labor camps.

Transportation of farm workers --- Safety standards set by law or regulations in Conn., N. Y., and Ore.

Workmen's compensation --

Fart workers treated same as others under compulsory law in Ohio and at the election of the employer in Vt. and Conn.

Special provisions for farm workers in Calif. and N.J. Elective coverage for farmers with annual payroll of \$500 or more in Calif.; elective in N. J.

Agricultural workers engaged in certain mechanized or power occupations covered by laws of 8 other States: Ariz., Ky., La., Minn., N. Y., Okla., S.D., and Wyo.

Child Labor ---

Minimum age of 12 or 14 for work outside school hours in 6 States: Calif., Conn., N.J., N. Y., N.C., and Utah.

Minimum age of 14, 15, or 16 for work during school hours in 13 States: Calif., Conn., Fla., Ill., Md., Mass., N.J., N.Y., N.C., Ohio, Pa., Utah and Va.

### Federal laws and proposals

Child labor -- (Ref. 43)

Federal Fair Labor Standards Act establishes 16-year minimum age for agricultural employment during school hours.

Sugar Act establishes age limit of l4 years for work in production, cultivation, or harvesting of sugar cane and beets.

#### Mexican workers --

Law to facilitate use of Mexican Labor for agricultural work extended in 1953 through December 31, 1954 (Title V, Sec. 509, Agricultural Act of 1949—P.L. 78)

Foreign workers brought in under contract have guarantees of limited medical care, transportation, employment conditions and housing meeting minimum standards, and other guarantees.

Proposal to establish Federal committee on migratory labor, recommended by President's Commission on Migratory Labor in 1951, introduced as S. 3300 on June 6, 1952, and introduced in identical form in the House on March 25, 1953 (H.R. 4212) and in the Senate on April 2, 1953 (S. 1567); hearings held during 1952 but no action taken.

Duties of proposed Committee:

To assist the affected departments and agencies in developing and coordinating policies relating to migratory labor, particularly with respect to more effective procedures for bringing employers and workers together.

To study and recommend measures by which unnecessary migratory movements of agricultural workers may be reduced.

To consult and cooperate with such State and area committees on migratory labor as may be established and with other State and local units of government with a view to coordinating Federal, State, and local efforts on the migratory problem.

(The following indicate some of the major recommendations relating to health situation and services)

#### Federal Interagency Committee on Migrant Labor, 1947 (Ref. 44)

Recommended that all appropriate State and Federal agencies, as well as local community and Nation-wide groups, plan and carry through practical measures which will insure adequate housing, health, nutrition, welfare, and related services for migrants by:

Stimulating, through educational programs, the interest of the public, employers, and public and private agencies in actively supporting plans for improving the health, nutrition, housing, and general living conditions of migrants.

Placing responsibility upon the State department of labor by law, for licensing and regulating labor camps and giving authority to the labor commissioner, working in close cooperation with the State health department, to issue and enforce standards for labor camps.

Securing application of existing housing and health standards to migrant housing.

Stimulating public interest and the cooperation of the appropriate public health agencies in continuing and strengthening any existing programs of health services, including medical care, for migrants and extending these services to workers not now eligible for or receiving them.

President's Commission on Migratory Labor, 1950 (report published in 1951) (Ref. 5, pp. 182-184)

#### Housing--

Certification of housing as complying with minimum standards set by State; standards to govern site, shelter, space, lighting, sanitation, cooking equipment, and other facilities relating to maintenance of health and decency.

States to be encouraged to enact State housing codes applicable to unincorporated areas.

Educational program for growers concerning housing, and grants—in—aid to States for labor camps in areas of large and sustained seasonal demand to be furnished by Department of Agriculture.

Health and welfare-

Amend Social Security Act to provide matching grants to States for general assistance with provision made to include medical care on a matching-grant basis for recipients provided that no person be denied care on basis of nonresident status.

Amend Public Health Service Act to include grants to States to conduct health programs to deal particularly with such diseases as tuberculosis, venereal disease, diarrhea, enteritis and dysentery, and to conduct health clinics for migratory farm workers.

United States Employment Service to make no interstate referrals of migratory farm workers unless representatives of State requesting labor give evidence that workers will not be denied medical care on basis of nonresidence and that they will be admitted to local hospitals on essentially same basis as residents of local community.

Seminar on Services for Children of Migratory Agricultural Workers, 1952 (Ref. 45, pp. 34-40)

Promotion of adequate health and welfare services and removal of residency requirements; extension of preventive health services such as immunization and maternal and infant care.

Continuity of health and welfare services developed by cooperation among local agencies and States all along migrant stream with possible use of mobile health trailers.

Southwest Regional Conference on Migrants, Albuquerque, 1953 (Ref. 46, pp. 23-24)

Official health agencies at all levels in cooperation with all other groups and agencies concerned give immediate consideration to development of adequate standards for environmental sanitation; State and Federal health agencies jointly develop uniform standards applicable at least on a regional basis.

Greater decentralization of health facilities through mobile clinics and establishment of local clinics in outlying communities to enable local health departments to bring their specialized services to migrants in more remote rural areas: concentration or maternal Organized local nutrition programs.

Federal funds to aid local health agencies to meet basic needs of migrants on the basis of established financial need with proviso that services meet recognized standards.

System of medical care planned and organized for State-wide coverage with services provided to migrants on same basis as qualified permanent residents.

Inclusion of agricultural workers in all legislation designed to protect health, safety, and welfare of workers.

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