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Farmworkers and HIV

# Crossing Borders: HIV/AIDS and Migrant Communities

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## Farmworkers and HIV

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*Editor's note: As no recording or written text of this presentation was available, we have included excerpts from the National Council of La Raza fact sheet, "Farmworkers and HIV" produced by the NCLR Center for Health Promotion and "HIV/STD/TB/IMM in the Hispanic Farmworker Community: A Call for Action." Report and Recommendations from an NCLR Center for Health Promotion National "Think Tank" Symposium presented at the NCLR 1995 Annual Conference held in Detroit, Michigan, July of 1993. Mr. Beadle's presentation included much of this information*

The Hispanic farmworker population is an extremely disadvantaged part of the nation's lower socioeconomic strata. Common problems are substandard housing, contaminated water supplies and lack of access to health care. Malnutrition, HIV, STDs, and substance abuse are other major problems. Farmwork is one of the most dangerous occupations in the nation: farmworkers face daily exposure to pesticides and other toxic chemicals as well as other employment related injuries.

Farmworkers as a group are chronically underemployed; they are part of America's working poor. Roughly half of farmworkers have incomes below the poverty level as defined by the U.S. government, despite a high prevalence of families with multiple wage earners. Fewer than one-fifth are recipients of needs-based social services.

Farmworkers tend to have very limited education; only 47% have completed eight or more years of formal education. Most farmworkers are limited-English-proficient. Many Hispanic farmworkers are functionally illiterate in English as well as Spanish.

Farmworkers are in poorer health than any other identified population group. Multiple and complex health problems are found in 40% of all farmworkers who visit migrant clinics, according to a recent survey. As a group, migrant farmworkers experience a life span approximately 30% shorter than the U.S. average -- 49 years compared to 73 years. Infant mortality rate is 25% higher than the national average. Migrant farmworkers are subject to more accidents, dental disease, mental health and substance abuse problems and suffer a higher incidence of malnutrition than any other group in the country.

Due to the nature of their work, farmworkers have few financial resources and little time to spare for medical treatment, much less health prevention measures. Migrant farmworkers face greater difficulties in accessing affordable health care facilities than other population groups. A clinic's location, financial constraints, language and cultural barriers, and operating hours all contribute to this restricted access. Most farmworkers do not have medical insurance, lack workers' compensation, and have few resources to spend

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on expensive medical examinations, treatments and prescriptions. Many simply do not seek medical care as a result of these barriers.

Farmworkers are casualties of a deficient health care system. There are not enough primary health care and migrant health care clinics to serve the needs of farmworkers. In 1990, approximately 12% were reached.

### **Hispanic Farmworkers and HIV**

Hispanic farmworkers are at increased risk for contracting HIV and other STDs. Inadequate health knowledge, poor accessibility to health care, a mobile lifestyle, limited case finding and follow-up, lack of and discomfort with the use of condoms, language barriers, and myths of health and illness all contribute to this risk.

The majority of farmworkers seek care for acute problems rather than preventive services, such as periodic physical exams, that focus on health education and patient risk status. Symptoms such as weight loss, fatigue, swollen glands, recurrent skin rashes, and fungus infections may be attributed to pesticides or toxic chemicals instead of HIV/AIDS. Such misdiagnoses can hasten death from AIDS-related illnesses. Farmworkers as well as their health care providers need to be specifically educated as to the risk of HIV/AIDS and other STDs.

Well-designed national, state and local HIV transmission studies are badly needed for farmworker populations -- including all ethnic groups. National HIV/STD surveillance as well as sexual attitudes and behavior studies among Hispanics and Hispanic farmworkers would greatly facilitate the creation of appropriate farmworker HIV/STD education and prevention programs.

National statistics on AIDS rates among migrant and seasonal farmworkers do not exist since surveillance of HIV/STD in the farmworker community is nearly nonexistent. CDC data indicate that Hispanic Americans -- men, women and children -- suffer disproportionately from HIV/STDs. Hispanics comprise about 10% of the population, as of 1993 they accounted for 16.5% of all AIDS cases, 24.2% of all pediatric AIDS cases, 20.4% of all adult and adolescent female AIDS cases, and 15.9% of male cases.

Hispanics were overrepresented, given their proportion of the population, in every type of AIDS transmission groups except those suffering from hemophilia. 39.4% of Hispanic AIDS cases engaged in homosexual or bisexual contacts; 39.2% were injecting drug users, 5.5% fell into both categories. 7.9% of Hispanic AIDS cases appear to have been infected through heterosexual contact -- this is the only category that increased last year. 40% of AIDS cases among Hispanic women occurred through heterosexual contact, most often with an injecting drug user.

Increasingly, HIV and other sexually transmitted diseases are being recognized as urgent health issues for farmworkers. Seroprevalence rates have been as high as 13% in farmworker surveys. One nationwide survey conducted in 1989 found a 0.5% seroprevalence level among farmworkers who attended health clinics -- a figure that most likely is not representative, given farmworkers lack of access to health clinics, and the fact that people who are more likely to be HIV positive are also more likely to decline testing.

The large incidence of homosexual/bisexual transmission among Hispanic males is an area of particular concern for the farmworker population. Strong cultural norms against homosexual behavior are likely to keep homosexual and bisexual Hispanic men "in the closet." They are more likely to have sex with both

men and women. Certain farmworker demographic and lifestyle characteristics may place them at high risk for HIV/STD transmission. Many are married but a high proportion live away from their families.

Constant mobility and changing support systems play a significant role in farmworker HIV/STD transmission. The high rate of unaccompanied males plays a significant role in high rates of STDs -- because they are unaccompanied by their spouses, they may engage in high-risk sexual behavior, such as frequenting of prostitutes and multiple sexual partners.