

## Hazardous Conditions in the Lives of Migrant Farmworkers

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*Alice Gonzalez shares with us in this article some of her memories of her childhood as a migrant farmworker. Her recollections are in sharp contrast to the seriousness of the statistics and the presentation of these people as a group who have suffered the indignities of poverty. Economic poverty they have suffered, but not a poverty of spirit. Their spirit comes from their heritage—Mexicano.*

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I would like to credit the National Migrant Referral Program for the excellent source of statistics and data provided through that office. Although quite a bit of the material and statistics cited in this article came from the National Migrant Referral Program's articles, reports and recommendations, the original sources of information are cited in the reference section.

As I read the manuscripts written on the subject of migrant health, it was evident to me that the migrant farmworker had no visible identity in the general public. I had a pile of statistics that depicted a miserable life for a group of human beings with whom I had little experience or knowledge. I never thought about migrant farmworkers or their health. They are not a part of my experience or the experience of most of the general population.

Just passing through the rows of numbers, and charts and tables of statistics can be like traveling through the poorest sections of town, never stopping to take a look. If you do look, a person might respond, "What a shame." In the following pages, I hope you will stop and take a look, a look I hope will bring you closer to understanding the lives that make up the statistics presented in the previous articles.

I researched the history of the migrant worker and their living conditions, past and present. Reading the history of the Mexicano experience was embarrassing to me, a gringo. One book especially painful is "Viva La Raza, The Struggle of the Mexican-American People." Reading these books made me, too, ask, "Why isn't this information in history books as part of the experience of the citizens of the United States?"

### The Overall Picture

The migrant farmworker's lifestyle is one of the intrinsic reasons that this country's population is one of the best fed nutritionally in the world. The labor of these people feeds much of the world. History tells us that many of the biggest industries

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in the United States grew because of the skills and labor of the migrant worker. Mining, construction, irrigation and farming are only a few. They are a group of people who move silently through the country sides in rural areas traveling thousands of miles into unknown and unpredictable circumstance for the chance to earn a meager living for the families they love. Their presence in this United States is mostly unaccounted for as they are a proud people who live and work in seclusion. How can the needs such a vast group of people so important to our country, numbering from three to five million, be living on the margin of a society as great as the United States? If we can give them anything, we should make sure they are tied into the benefits of living in this society, a society that enjoys the fruits of the labor of the migrant farmworker.

### A Community of People

This is a community of people who live and work in similar circumstance. "Texas is home base state for an many as 85% of the estimated 3 to 5 million migrant and seasonal farmworkers and their families" stated Karen Mountain, Deputy Director National Migrant Health Resource Program. Sixty percent are of Hispanic origin (Zuroweste, 1991). Livelihood is that of working in the farming industry performing necessary skills that are in demand on a seasonal basis. They earn a median hourly wage of \$4.88 and work in the farming industry only about 34 weeks per year (NACMH, 1992). Because of the low wages and short working season, entire families work together to produce income for the entire year. This communal work force within the family does not earn enough income to lift them above the poverty line. Just like other families, they have needs for food, housing, education, medical and dental care. Migrant farmworkers do not fit into welfare programs designed by federal and state governments because those programs require resident status which is contrary to the migrating status of these families. These are not people asking for handouts; they are people who work in one of the nation's most hazardous industries. We as consumers are

dependent on this labor. It is provided at the expense of families who sacrifice happier and easier lifestyles to perform an honorable trade long known to their ancestors—a trade that is indispensable to the cycle that gets produce and food to the world, the trade of the migrant farmworker.

They are proud. They are, perhaps, too used to a lifestyle reflective of their economic conditions.

### A Heritage 300 Years Old

Where did migrant farmworkers come from and why do they stay in a life-style that is so far removed from the benefits of living in the United States? The majority are of Latino (Mexican) origin. They are a group of people who are still deeply rooted in a folk culture that is used to the rigors of farmwork and survival by being self-sufficient. The influence of the Mexican migrant farmworker starts with a long heritage (300 hundred years or more) in farming beginning with irrigation. His knowledge is responsible for the old systems of water necessary for the rich farming industries in Texas and New Mexico. As early as the 1890s, Mexican migrant farmworkers were following the cotton harvest on foot. In the 1900s, 71,000 Mexican immigrants came to Texas to work in the industries of railroads, cotton, sugar beets, and truck or produce farming. The cotton industry of Texas was based on the work of the Mexican migrant farmworker. In the 1940s, 400,000 Mexican migrant workers were traveling thousands of miles following the cotton harvest. This and other agriculturally based industries have flourished and depended on a low cost labor source. It was the Mexican migrant family that made possible the harvests of citrus fruit, red beets, turnips, carrots, cabbage, broccoli, endive, peppers, beans, tomatoes, new potatoes, peas, peanuts, anise, cauliflower, spinach and squash. (McWilliams, 1968) (Martinez and Vasquez, 1974)

### History of Colonias

In the 1900s, colonias were established along railroad routes using migrant Mexican workers to

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build tracks along the Southern Pacific. Wherever a labor camp was built, a Mexican colonia was established (McWilliams, 1968). During the 1920-40s, the Mexican migrant farm labor force numbered in the 400,000 thousands. Returning home, many ran out of money and established small households that attracted others with similar plights. These households were the beginnings of colonias—unincorporated towns lacking government, plans, sanitation and conventional housing. When large farms were planned with irrigation systems, Mexicans founded colonias along the water ways much like their ancestors did a hundred years earlier establishing a communal way of life. Other colonia settlements sprang-up during the harvesting of the sugar-beet crops of the neighboring states of Texas in 1936. It was not unusual for a Mexican family to be forced to stay in the area because they lacked the financial resource and transportation to return to their homes. This outcome was purposely planned by the sugar beet farm owners by withholding final paychecks, or giving bonuses for staying for the next crop. (McWilliams, 1961)

### Following in the Crops

The migrant farmworker is the indispensable factor providing the quick harvesting of perishable fruits. The work seasons are short and as unpredictable as the weather. Labor is forced to move from crop to crop and state to state in order to continue employment. After the crops are in, there is no work. Sometimes workers do not have money to return to homebase particularly when an accident or sickness (a common occurrence) has caused a costly disability or when weather has destroyed a crop creating an economic disaster.

### Working Hard, Dying Young

The migrant farmworker population is impoverished and composed primarily of minority

*Being a family of four children, (ages 10-5), my father was the bread winner of the household working at minimum wage. Forty hours a week was only enough to put bread on the table and pay the monthly expenses. After discussing with mother the possibility of going up north to work in the fields during the summer when the children were out of school when they would be able to work, we decided to go up north. During the three months, we all worked very hard, long hours, everyday except on Sundays. I remember standing at the beginning of the field and looking down the endless acres of sugar beets. That summer, we came back with enough money to build an addition to our home and still have extra money to go visit relatives in Mexico.*

Alice Gonzalez at age 8

populations (Executive Summary, 1978). The U.S. Department of Labor reported in 1991 that seasonal agricultural workers received a median hourly wage of \$4.85. However, they only worked about 34 weeks per year; fewer than half were covered by unemployment insurance, and fewer than one fourth had health insurance (U.S. Dept. Labor, 1991). For a farmworker, years of living in substandard conditions, lack of nutrition, and physically demanding work produce a life expectancy of 49 years compared to the U.S. National Average of 73 (NACHC...1991).

### Climbing Up the Economic Ladder

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the bottom of the economics picture of the United States do want to better their lives. A study done by the Department of Health and Human Services found that, "Essentially, they seek and value the same things as other Americans ....Increased sophistication of research on lower income and deprived groups is correcting a long-held impression that the poor place no value on occupational and educational achievement. While the poor do have a more modest absolute standard of achievement than do those who are better off, they want relatively more improvement in their condition. They value the same material comforts and luxuries. Psychologically, they seek the securities that appeal to other Americans. They hold, with little

qualification, to the same proprieties of social conduct (DHEW, 1971)."

### Why Do Only 15 Percent Use the Services of the Migrant Health Clinics?

The Department of Health and Human Services has established the National Migrant Resources Program and Migrant Health Clinics to address the health needs of this population. Efforts are being made, but only fifteen percent are using its services because of transportation problems, lack of child care, inability to speak English and the location of the clinics. Although federally-subsidized migrant health clinics are located in cluster areas where migrant farmworkers gather during

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Our Gang (From the Eastern Migrant Stream)  
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A group of children play in a migrant housing project. Their parents are in the area temporarily to pick oranges, bell peppers and cucumbers.



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peak agricultural work seasons, this proximity does not facilitate reaching the majority of this population (MHP, 1990).

Other reasons responsible for the fifteen percent figure are varied. One stems from the fatalist attitude of most poverty stricken people. What will be, will be. As long as they can work, they consider themselves

okay (DDHS, 1971). Health care while working can be expensive because of wages lost while waiting to be seen at a clinic. Seeing a doctor on the migrant trail or at home base is considered a luxury. Perception of need, being accustomed to ever-present disease and sickness causes many to wait until the health conditions become acute requiring emergency measures or more costly intervention. Illness, hard work, and malnutrition are a way of life. Educational experience has a direct influence on the use of preventive health services (Luft, et al., 1974). Education is also closely correlated to the use of information about nutrition, hygiene, immunization, prenatal care and other forms of preventive care (Stephan, 1976). Very often, migrants have their own cultural approach to health. People who have lived in isolated populations and the poverty cycle for generations tend to shy away from health care professionals (those who have had formal academic training) because it is perceived as being impersonal and out-of-reach. This feeling is contrasted with the trust felt for folk methods. Cuanderismo (health care provided in the old Mexican tradition) uses herbal medicines along with an intimate history of the patient. Patients are received in the cuandero's home. Illness is diagnosed and explained in terms of ideas and knowledge that the patient can understand. Each step of the treatment is made clear. The difference between this treatment and the cool impersonality of hospitals and professional offices often keeps Mexican-Americans from approaching physicians. The Black segment of the migrant worker population often uses home remedies, faith healers and local root doctors

*I also recall that aside from working hard out in the sun all day, there were good times, too. Different church groups would sponsor church activities, picnics and even bus tours of different cities in the vicinity of our work camp for all migrant workers during each season. We were pleased to know that people who really did not know us showed respect and sensitivity to our cause.*

Alice Gonzalez

(Madisen, 1961, 1973). Quoting Nelly Joseph Stephan, "The folk healer, acting as a folk psychologist, understands the migrant's sociocultural conflicts and manifests a personal, not just professional interest, in the welfare of the patient (Kiev, 1968)." The Migrant Health Program has responded to these problems by establishing outreach programs that, "...recognize the demographic and cultural diversity that is encountered within the migrant farmworker population and the flexibility that is required to connect the workers with the services." (NACMH, 1992).

### The Children

Since many women are malnourished, so are the infants they bear. The infant mortality rate among migrant farmworkers is 25 percent higher than the general population (Interstate Migrant Education Project, 1979). These babies come into the world suffering the effects of malnutrition. Many times children must work during the early stages of development when they need energy for growth. Sixty-three percent of the migrant farmworker population is estimated to consist of children 16 years of age or younger (Cotera, M.,

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### Work that Kills

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undated). (MHRP, 1992) It is not an ancestral trait that these children become adults with small frames, it is the result of malnutrition, disease and lack of the normal requirements that permit healthy growth during childhood (Stephan, 1976) (Colorado Migrant Council, 1969).

The fact that children work in the fields with their parents and relatives is not because families abuse their children or use them as slaves. It is the result of an existence and life-style that requires that everyone work together. It is much the same as it is on the family farm where everyone has chores. The difference lies in the lack of permanent residence and ability to prosper because of hard work.

### The Women

If being a child born into these circumstances is demanding, for a woman it's worse. Seventy percent of the women work in the fields with their husbands. After laboring all day in the fields, they have the sole responsibility of all the traditional duties expected of a wife in the home and with the children—babies and all. There is a high incidence of miscarriage, infant mortality, and complications of pregnancy, including vaginal and urinary tract infections, anemia, and sexually transmitted diseases along with malnutrition, parasitic infection, effects of working in hazardous conditions and the diseases that characterize all migrant farmworkers' living conditions. (Cotera, M., undated) (MHRP, 1992) (Colorado Migrant Health Program, 1985)

### Work that Kills

"Agriculture has the highest annual work-related death rate of all industries, 52 per 100,000 workers. This rate of accidental deaths is five times the average for all manufacturing industries" stated Marc Schneker, M.D. (Schneker, 1992). Why is this form of work documented as being the most hazardous in the United States? Pesticides are poisons; they are chemicals that kill. Migrant farmworkers are in direct contact with and are constantly exposed to pesticides every day and every hour for months. They perform stoop labor

*We traveled up north, in a cargo truck with a canvas over the roof along with five other families. We would stop in large cities to gas up, check the engine and pick up food to make sandwiches. The best thing about the trip was the excitement of seeing different cities and states.*

Alice Gonzalez

producing disabling back conditions. They work in fields that reach temperatures of 115 degrees, suffer, even die from heat stress and dehydration (NMRP, 89) They work during the times of the day that exposure to the cancer causing effects of the sun are the strongest. Bladder infections are common. Only 22 - 45 percent of all employers provide even minimal toilet facilities in the field; four percent of North Carolina farmworkers have access to basic sanitation as required by law (NMRP, 1988). This dangerous occupation carries with it a living and lifestyle that is among the lowest in the country.

### Home at Home and Home on the Road

Being poor naturally means insufficient housing. Many migrant farmworkers live in colonias. Living at the bottom of society means that it takes the wages of many persons in the family to afford housing forcing a communal way of life—all existing with the help of each other. This occurs at the home base and in labor camps. Therefore, many people live in the same quarters. This crowding carries with it greater chances of spreading disease between members of a family because of stale air, shared facilities and close quarters facilitating rapid

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transmission of contagious diseases including tuberculosis. Death rates from influenza are 20 percent higher and pneumonia 200 percent higher than the national average (NMRP, 1988). Many of these houses do not have plumbing, and the sewage accumulations in outhouses with shallow depositories harbor disease-causing germs. Gastroenteritis, an inflammation of the stomach and intestines, is the greatest killer of children. The migrant farmworker suffers twenty times the rate of diarrhea among the urban poor and twenty times the parasitic infections of the general population—most are water-related (NMRP, 1988). Intestinal parasites including round worms, hook worms and pin worms are common and spread easily between members in the family. Running water or even water at all is sometimes non-existent: Even if water is available, its quality is often questionable. The *Fact Sheet: Basic Health* produced by the National Migrant Resource Program (NMRP) states that, "A 1987 report described environmental conditions as poor. The report cites as common to the farmworker experience non-existent or dilapidated housing, insect and rodent infestations, water supplies poor in quality and low in quantity, inadequate wastewater disposal facilities, lack of solid waste disposal, unsafe use of pesticides, lack of handwashing and toilet facilities in the fields, and hazards contributing to work accidents.

But this criticism of inadequate housing and the governmental solutions of enforcement is a two-edge sword. Farmers are finding compliance with rules regulating housing standards economically unfeasible especially when hit with fines for

each violation. So they burn them down (Sakata, 1991). The crops still need to be harvested; the migrant farmworkers still need the work. Without housing (no matter how dilapidated and inadequate) they are forced to camp in cars, live out in the open, throw up makeshift housing out of cardboard, junk pieces, and plastic coverings. County health departments have been requested to bulldoze these temporary shelters because citizens believe them to be an eyesore and health hazards (McDonnel, 1990). Renting, along with the deposits required, is too costly and the season too short for normal rental contracts (NACMH, 1992). The solution here seems to be special funding for migrant farmworker housing or federal loan programs that give farmers low interest loans to build housing. If we want to keep eating perishables picked by the hands of the migrant farmworker, this housing situation has to be resolved.

### 90 Million for 5 Million People

If the labor of the migrant farmworker is an economic necessity, we have to make special plans for this special society of hard working people. The 1992 recommendations from the National Advisory Council on Migrant Health to the DHHS include evaluations of performance—the purpose of which is to identify the problems, address the failures of the system, build on the successes of the program, and recommend new alternatives. The request for funding is 90 million for year 1993: That's eighteen dollars for every migrant farmworker—the highest estimation of 5 million in number. Today there are over one hundred migrant

*The living conditions barely provided for the basic necessities of life. In order to have warm water for a nice shower, we would have to heat the water on the stove. Since we were all ready to shower after a long hot day of work, we would take turns of who was first. Bunk beds and floor mats were provided by the owner of the ranch.*

Alice Gonzalez

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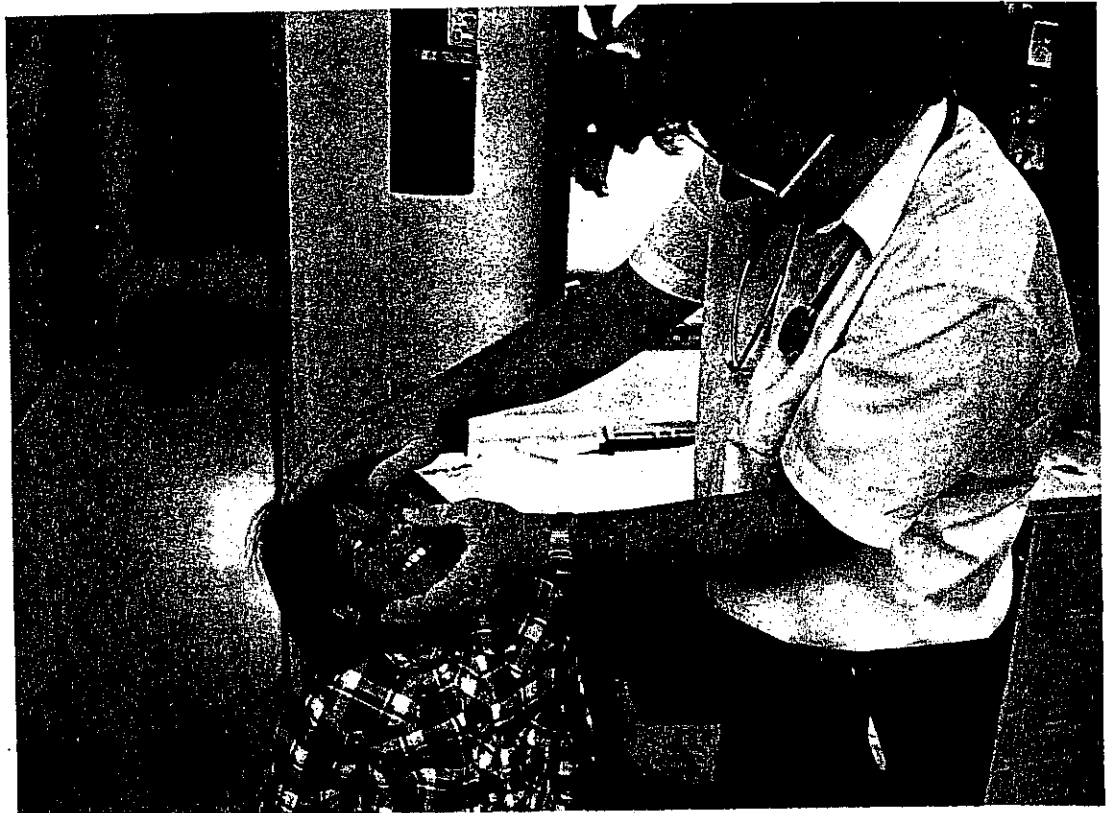
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health projects whose 539 clinic sites have provided services to over 500,000 migrant and seasonal farmworkers and their families in 33 states and Puerto Rico stated Jack Egan, acting director of the Bureau of Health Care Delivery and Assistance (Egan, 1992). It seems we are on the deficit side of the balance sheet of right and wrong when it comes

to the migrant worker even though we have tried to effect a cure. We are trying as a nation to give this population their rightful share of the benefits of this society through the National Migrant Farmworker Resources Program and the Migrant Clinicians Network.

At the Clinic  
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At the Clinic (from the Midwestern Migrant Stream) Migrant and seasonal farmworkers and their families live and work under harsh conditions, including poverty, rural isolation, poor dietary patterns, and lack of sanitary facilities. Due to the lack of other child care options, children often accompany their parents to the work site and are thus exposed to many of the same risks as adults.





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