Migrant Health Encyclopedia Article

Migrant Health

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Migrant Health

There are estimated to be as many as 4 million migratory, seasonal farmworkers in the United States, comprised of a variety of races and cultures. Often the migrant family is besieged and weakened by sporadic unemployment and loss of extended family support systems. Because income may be irregular and often falls below the national poverty level, a considerable amount of insecurity exists regarding food, clothing, shelter, transportation, health care and other essentials. Some have difficulty proving claims for Social Security benefits. Children may be forced or encouraged to contribute to the financial needs of the family, and may not remain in school beyond the minimum legal age.

Race and level of income and education contribute to differences in health care service utilization. Minority populations and those with lower levels of income and education utilize thehealth care system less frequently. Nonwhite populations spend fewer days in the hospital, see a physician less often, and are more often treated in outpatient or emergency departments. Exposure to pesticides and infectious diseases, and life in crowded, substandard housing place the migrant population at high risk for a multitude of complex health problems.

In an effort to address this problem, the Migrant Health Act of 1962 provided federally funded health care services in medically underserved areas throughout the United States and its territories. Grants were given to over 120 community based and state organizations to facilitate comprehensive medical care services with a culturally sensitive focus on migrant and seasonal farmworkers and their families.This program not only to serves this special needs population, but also protects farm community residents from prevalent communicable diseases and assists the often overburdened rural health care systems.