

MICROCOPY RESOLUTION TEST CHART
NATIONAL BUREAU OF STANDARDS-1963-A

DOCUMENT RESUME

ED 060 994

RC 006 037

TITLE Helping Migrant and Seasonal Farm Worker Families. Annual Report 1971 [Migrant Action Program, Mason City, Iowa].

INSTITUTION Migrant Action Program, Mason City, Iowa.

SPONS AGENCY Office of Economic Opportunity, Washington, D.C.

PUB DATE 71

NOTE 73p.

EDRS PRICE MF-\$0.65 HC-\$3.29

DESCRIPTORS Agricultural Laborers; *Annual Reports; Demography; Farm Labor; Financial Policy; Housing; Instructional Staff; Maps; *Mexican Americans; *Migrant Education; *Migrant Health Services; *Migrant Workers; Migrant Youth; Program Evaluation; Tables (Data)

IDENTIFIERS Iowa

ABSTRACT

The objective of the Migrant Action Program (MAP) in Iowa is to assist the migrant and seasonal farm workers and their families. This 1971 annual report contains a description of the program goals and activities, including the Manpower Project, children's programs, day care, vehicle purchase and use, the health program, and emergency food assistance. As an aid to identifying the migrant, some migrant characteristics are listed: mobility, poverty, and low level of educational attainment. Also included in this publication are a staff training report, a financial report, and a staff evaluation of the MAP. Lists of directors and staff are appended. (PS)

ED 060994

MIGRANT ACTION PROGRAM ANNUAL PROGRESS REPORT

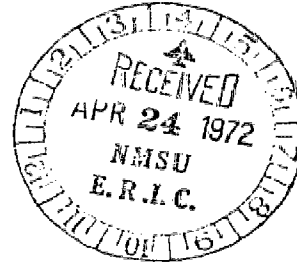
1971



U.S. DEPARTMENT OF HEALTH,
EDUCATION & WELFARE
OFFICE OF EDUCATION
THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL OFFICE OF EDUCATION POSITION OR POLICY.



ANNUAL REPORT
1971



helping

MIGRANT AND SEASONAL FARM WORKER FAMILIES

Migrant Action Program
1414 North Federal
P. O. Box 778
Mason City, Iowa 50428

DISCRIMINATION PROHIBITED--Title VI of the Civil Rights Act of 1964 states: "No person in the United States shall, on the grounds of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subject to discrimination under any program or activity receiving Federal financial assistance." Therefore Migrant Action Program, a private nonprofit organization, incorporated under the law of the State of Iowa, like every program or activity receiving financial assistance from the Office of Economic Opportunity, Title III-B, Washington, D.C., from the Department of Health, Education, and Welfare, from the State of Iowa, and others, must be operated and is operated in compliance with this law.

MAP as grantee meets all program and fiscal requirements of the Office of Economic Opportunity's regulation under Title VI of the Civil Rights Act of 1964 (P.L.88-352) and title (45 C.F.R. Part 1010).

"AN EQUAL OPPORTUNITY EMPLOYER"

REPORT FROM THE DIRECTOR

The Migrant Action Program, Inc., of Mason City, Iowa, now in its seventh year of operation, is an organization serving the migrant and seasonal farm workers in the State of Iowa. MAP is a private non-profit organization funded from Federal, State, and private sources, which formulates, implements, and operates projects for migrant and seasonal farm workers and their families. These target families are predominantly Mexican-Americans. Due to the migratory status of this unique target population, special techniques and approaches are necessary; recognition of socio-cultural differences and the ability to work with such differences are important.

This minority group of Spanish-speaking people in the United States has not fully joined the Anglo-American society. The individual, living in a culture which no longer exists, results in a tragedy. This cultural phenomenon Horacio Ullibarri calls the "Culture of Poverty."

The focus of the Program is geared toward the migrant families--providing needed assistance through information, instruction, education, health services, emergency food assistance and training. An effort is made to encourage them to improve their living conditions and help them to develop skills necessary for a productive and self-sufficient life in an increasingly complex and technological society.

MAP strives to secure community interest and local financial support for the project. MAP also seeks the support of and coordinates with the programs of other existing public and private agencies, community organizations, churches, and other concerned groups on behalf of the migrant and seasonal farm workers.

This is to acknowledge the various funding sources such as the Office of Economic Opportunity, Migrant and Seasonal Farm Workers Division; Department of Health, Education, and Welfare; Iowa State Department of Health; Iowa Department of Social Services; Iowa Department of Public Instruction; United Migrants for Opportunity, Inc.; and the many churches, organizations, and individuals who contribute to the success of MAP.

The MAP staff and Executive Director are governed by an area Board of Directors in accomplishing their goals to assist the migrant and seasonal farm workers when they enter the State of Iowa. As Executive Director of MAP, I wish to take this opportunity to congratulate the staff and volunteers for their concerted effort in making this 1971 Annual Report possible.



Jaime Duran
Executive Director

TABLE OF CONTENTS

	Page
DISCRIMINATION PROHIBITED	ii
REPORT FROM THE DIRECTOR	iii
CHAPTER	
I INTRODUCTION	1
Key Role of MAP	1
Work Plan	1
II THE MIGRANT AND SEASONAL FARM WORKER	5
Migrant Identity	5
Migrant Characteristics	6
III PROGRAM GOALS AND ACTIVITIES	8
Manpower Project	8
Children's Programs	12
Day Care	18
HEW-Vehicle Purchase and Use	19
Health Program	21
Emergency Food Assistance	53
Other Activities	55
IV STAFF TRAINING	57
V FINANCIAL REPORT	59
VI STAFF EVALUATION OF THE MIGRANT ACTION PROGRAM, 1971	62
APPENDIX A - Board of Directors	67
APPENDIX B - STAFF	68

CHAPTER I

INTRODUCTION

Key Role of MAP

A key role of MAP, in a broad sense, is to assist the migrant and seasonal farm workers and their families. In order to do this, we must:

1. Know who the migrants are (the individual)
2. Where they are
3. Consider a new approach to the economics, social, and physical order (different cultural background)
4. Find out their needs
5. Make the community more receptive to migrants

Upon examining this role, and in order to take migrant and seasonal farm worker families out of the stream and make them successful members of the community, we must consider, among several, the following two aspects, each intended to achieve different but related purposes:

1. To promote social justice for migrant and seasonal farm worker families
2. To promote self-determination among migrant and seasonal farm workers

Work Plan

In order to achieve such fundamental and ambitious purposes, MAP must operate, maintain, and coordinate a program for their benefit in the State of Iowa. In a broader sense, MAP must use the participating democracy in this country, all resources in the community, and organize, among the migrant families, advisory councils or committees, and specifically offer them:

1. Counseling and community participation (explain their role in the community)
2. Develop better understanding among growers, industries, businessmen, migrant and seasonal farm worker families, and the total MAP program

3. Comprehensive housing development and settlement
4. Job opportunities
5. Health and sanitation
6. Medical services
7. Emergency food services
8. Head Start
9. Day Care
10. Adult education and vocational training in the community

MAP gets
OEO grant

3

Summer school program
for children of migrants

Migrants Find
'Niche' in Iowa

Spanish-English
program planned

MAP starts new seek voice
approach

MAP Yule
party held

Migrants find new
lives in Hampton

Challenge from children ⁴

Migrant tot centers are open
Columbus schools begin special migrant classes
Will Attempt To Settle Migrants
Drug-abuse study grant is approved

Problems of poverty discussed

'It's the Best Deal We've Ever Had'

Clinics help migrants
MAP adds employe for eastern Iowa

CHAPTER II

THE MIGRANT AND SEASONAL FARM WORKER

Migrant Identity

Each year approximately 2,000 migrant workers enter the State of Iowa to work in the fields or farm-related industries. Migrant workers are either recruited and contracted by growers or seek specific types of agricultural work individually throughout Iowa. The first to come are the asparagus and nursery workers, followed by those who thin and weed the sugar beet crop. Near the end of summer the tomato and potato harvest begins, and many migrant workers remain until early winter to work in food processing plants and vegetable packing warehouses.

Almost 100 percent of the migrant workers in Iowa are Mexican-Americans who enter the migrant stream because of the poor job opportunities for unskilled laborers in Texas. The average adult laborer has attained a third-grade education.

Agricultural wages and annual earnings for migrant families remain low in the migratory stream. In 1971, most migrant employees in agriculture earned less than the minimum federal wage. For most migrant families the scant wages earned in Iowa and adjoining states must last through the winter in Texas.

Workmen's compensation is voluntary in Iowa for agricultural workers. Most employers of migrant labor do not elect to be covered by such insurance. Low wages in agriculture are not explained simply by the low profit margin of the employer. Lack of legislation governing wages and working conditions and the prevalence of discriminatory practices further diminish wages and the chance for a fair standard of living. Migrant workers are not covered

by unemployment compensation, workmen's compensation, Fair Labor Standards Act and so forth. As a result, few benefit from health insurance, fringe benefits, and pension plans.

Migrant Characteristics

Mobility

The most basic and fundamental life-style of the migrant worker is mobility. He is a seasonal worker and a follower of the crops, ranging from work in the cotton or vegetable fields to work in barns sorting and bagging potatoes. He does have a home-base or a place he calls home in some other state, but, technically, he lacks a permanent home, address, or place of residence. During the course of one year, he may have worked in five different states for varying periods of time, often no more than three months in one place. His life-styles and pattern of living centers on his vehicle and on his ability to move to another place to find work. The Migrant Action Program finds itself in a unique position in terms of motivating migrant families to establish themselves permanently in communities in Iowa.

Poverty

Another obvious yet fundamental characteristic of the migrant worker is his economic destitution. Immediately upon being contracted by a migrant recruiter or grower, the migrant worker often incurs a debt by means of an advance check meant to enable him and his family to drive to the place of work which is usually quite distant, i.e., Texas to Iowa. Once he arrives at the place of work, he must ask for another advance to cover the expense of housing, rent, and food costs. Often, the employer will have the policy of making payroll checks only once a month. After

deductions for food, medical assistance, work equipment, housing and so forth, the migrant, in many cases, is still in debt to the employer.

The foregoing vicious cycle of poverty, experienced by migrant families year after year and generation after generation, has great significance. They are enslaved by a highly brutal and vicious pattern of life, not by choice but by necessity.

Education

Mobility and poverty contribute little toward the self-motivation so necessary for learning. "We're too tired to go to classes," is a phrase resounded many times throughout the summer months and rightly so. When enough food to feed the family becomes a major daily crisis, little thought is given to education. When forced to move every three to five months, continuing, academic education becomes impossible. Learning, however, does not. Skill-training is recognized by the migrant as the most immediate means of escaping field work. Skill-training, when combined with practical solutions to daily problems, is even more relevant. How to obtain a driver's license--where to apply for unemployment compensation--where to obtain food stamps--are important and much more immediate than learning to solve a mathematical equation.

The average adult migrant has attained a third-grade education. Hope for academic improvement is lost in all but few. The "better life" depends on our children's education is a common thought. However, children's education depends on the parent's stability within a community. Thus, settlement and permanent jobs are prerequisites to the "better life."

Mobility, poverty, and lack of education, each dependent upon the other, perpetuate a vicious cycle which MAP attempts to break.

CHAPTER III
PROGRAM GOALS AND ACTIVITIES

Manpower Project

Goal Identification

The major goal of the Migrant Action Program from April 1, 1971, to March 31, 1972, was to find permanent employment and housing for at least 100 families. The goal was to settle these families out of the migratory stream and make these households independent and contributing members of Iowa communities.

The goal of settling 100 families in Iowa in twelve months was set for the Migrant Action Program by the Migrant Division of the Office of Economic Opportunity (OEO) in Washington. By May, 1971, it became obvious to the MAP Manpower staff that the number of potential participants had been overestimated. The Manpower staff, however, made every effort to reach, as nearly as possible, the original goal.

MAP staff agreed early in the year that migrant families would have to meet three criteria before they would be considered actually settled. The three criteria are:

1. The head-of-household must declare his intention to settle permanently in Iowa.
2. The head-of-household must be placed in a permanent job, or he must be referred to a community agency for necessary assistance (i.e., vocational rehabilitation, training school).
3. The family is placed in a suitable home outside the field housing.

Sixty-two families were settled through this project. The goal of 100 families was not met largely due to the considerable rise in unemployment throughout the state.

Benefits to the Migrants

Housing--Finding suitable housing for settling migrants proved to be a very difficult task. Scarcity of housing, high rental costs, discrimination with prejudice of landlords, and lack of funds to pay the first month's rent and utility deposits caused innumerable problems for the settling migrants and the MAP staff. However, the Manpower staff reported that all participants in the program were placed in housing which was better than housing they had while working in the fields.

Education--The school-age children of the settled migrants are enrolled now on a full-time basis in Iowa schools. Many of the parents are enrolled in adult education classes and in classes to get their high school equivalency education, or to learn better English.

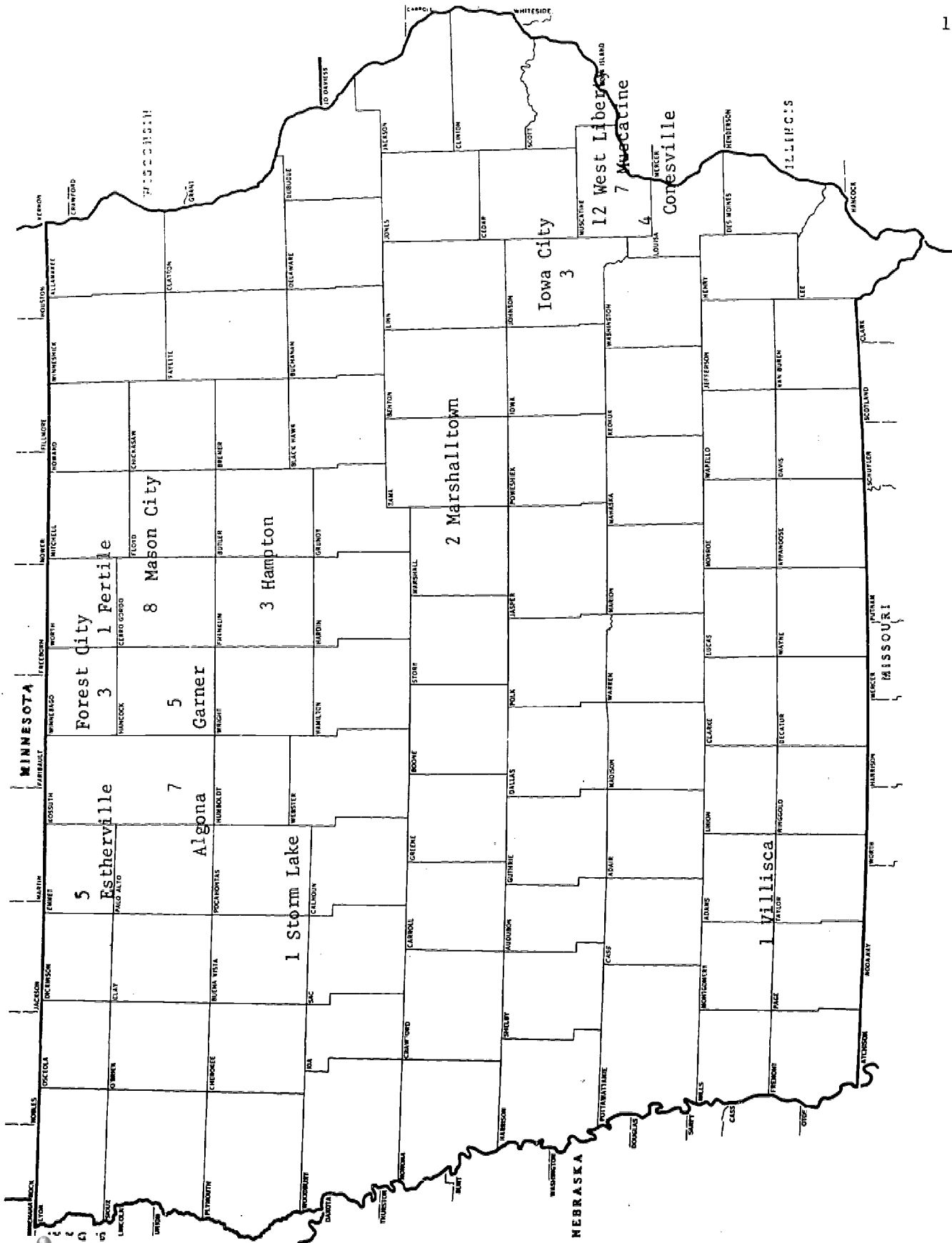
Jobs and Money--The Manpower staff estimates that of these 62 families at least 30 of these settled wage earners will remain on permanent jobs for at least two additional years. It is assumed that their incomes will improve an average of 11 percent during that time. So in two additional years, 30 families will earn \$201,900.

Evaluation

An overall evaluation of the Manpower project must not be measured in numbers of settled families, but rather in the permanency of those settled. Time will be the determining factor as to whether long-range objectives of the project will be met.

A major accomplishment of the project was a thorough collection of potential migrant employers throughout the State--an entire project in itself. Succeeding programs will find this information invaluable when placing migrants in permanent job slots.

GEOGRAPHIC LOCATION OF SETTLING MIGRANT FAMILIES--1971



Map shows number of head-of-households found jobs/housing in these communities.

Children's Programs

Head Start Funding Status

On May 12, 1971, Mr. Kenton Williams, Assistant Regional Director, Office of Child Development, wrote a letter stating that the program's application for refunding had been approved. The new Head Start grant allocated \$36,800 as the funding level for 1971. An additional \$10,000 was awarded as a one-time award for transportation.

Reinbeck Center

Implementation Process

During the first week of May, 1971, migrant families began arriving in Reinbeck. By May 7, 1971, eight families or 54 individuals, ranging in age from 75 years to 1 week, had taken up quarters in the Reinbeck labor camp. The families had very little money, not being able to find steady employment the previous winter in Texas.

Recruitment and certification of migrants for participation in the program began immediately by the Outreach Worker, Project Nurse, and County Social Worker. It was discovered that the families were in desperate need of emergency food vouchers which were issued by MAP.

In the Center, supplies and equipment were in readiness for the children. On the morning of May 10, 1971, formal Head Start and Day Care sessions began.

Evaluation

On July 2, 1971, the Reinbeck Center terminated operations. The migrant workers completed their work in the asparagus fields and moved to the Muscatine, Iowa, area for work in the tomato fields.

The most outstanding feature of the Reinbeck operation was the co-operation of the local community, particularly the coordinator of the local Council of Churches. The local physician also provided invaluable assistance.

The total enrollment in the Reinbeck Center averaged 15 children. Staffing patterns and space in the facility would have accommodated more children; however, the limited enrollment allowed for extensive interaction between staff and children.

Mason City Center

Planning Process

During the months of March, April, and May, 1971, migrant families slowly began entering the Mason City area and surrounding counties. The Program had selected as a facility, Newman High School, to serve as the Center for Head Start and Day Care operations. The Board of Directors for Newman had agreed to allow the program use of four classrooms, kitchen and dining space, and playground area.

Periodic and intense pre-service training was afforded members of the Center-staff during the months of April and May, 1971, by members of the central office and outside consultants. The majority of the Center-staff were not only bilingual but also came from the migrant group.

Two innovations, in particular, were introduced: first, for the first time in the Program's history a male, bilingual, Mexican-American Head Start teacher and Center supervisor was selected; and secondly, two Mexican-American and migrant cooks were selected for the Center. The benefits derived from these selections of staff would prove beneficial: migrant children would find a great source of security in a male Head Start teacher, and Mexican-American food styles were more palatable to the children.

Implementation Process

On June 14, 1971, the Mason City Center began operation. The children were assigned to their respective home-rooms: nursery, toddler-room, and Head Start room. During the first week of operations, there was an entire

14/15

weekly enrollment of 36 children which was considerably more than initially anticipated.

The Parent Coordinator had formed Head Start Parent Council meetings with the parents throughout the summer. These meetings served to organize migrant parents and incorporate their ideas into program activities as well as facilitating their participation in Center operations. The migrants and staff planned and held a picnic mid-way through the summer session. Also, on days when the migrants did not work in the fields, they visited the Center and saw first-hand the types of activities in the Center.

Evaluation

The Mason City Center functioned satisfactorily this summer. More children were furnished the advantages of Head Start and Day Care programs than expected and for a much longer period of time.

Buffalo Center

In mid-April, 1971, migrant families entered the vicinities of Forest City, Thompson, and Lakota. The Program decided to place the Head Start Center in an area that would be centrally located to the migrant residences. The town of Buffalo Center appeared to be centrally located.

Implementation Process

The group averaged 15 children, and the Center easily could have accommodated minimally 35 children. The small group, however, provided excellent opportunity for the staff to individualize activities, and develop very personal relationships with the children. The Head Start teacher was able to identify behavioral characteristics of the children, and then orientate the children to types of play-activities which promoted individual skill-needs.

Evaluation

Enrollment was limited; however, the staff found themselves in an extraordinary position of being able to establish one-to-one relationships with the children and parents. The atmosphere of the Center indicated the spirit of cooperation existent between staff and migrant families.

West Liberty Center

Implementation Process

On July 19, 1971, the West Liberty Center commenced operations. A period of three weeks was required for the children in West Liberty to fully adjust and begin taking progressive and developmental steps toward fulfillment. Some of the children displayed behavior which indicated emotional problems often stemming from their home-life. In one instance, a four-year old boy would manifest extreme aggressiveness and hostility toward the other children. Visits with the family indicated that the boy's father suffered from alcoholism and that he frequently mistreated members of the family. The boy apparently reacted to the situation in the form of hostile behavior.

The cooperation of the parents with the staff was good. Their concern for their children became evident throughout the period of Center-operations. On two occasions fiestas were held in the West Liberty Center.

Evaluation

On September 10, 1971, formal Head Start classes in West Liberty were terminated. Enrollment in the Center began diminishing, warranting termination. Definite changes had occurred in the behavior of the children. While some of the problems were not resolved, especially those problems stemming from the home situation or parental and marital problems, nevertheless the project was able to remedy health and nutrition problems as

17/18

well as begin the process of stabilizing outside the home. The exposure of the children to new experiences contributed to their enrichment. Also, their experience of relating to other children and persons was significant inasmuch as their social relationships were no longer limited only to parents.

Cooperation with Muscatine Area

The Community Action Agency, Iowa East Central-TRAIN, Davenport, Iowa, received a HEW-OCD grant for Head Start projects including Muscatine County. In July, 1971, no provision had been made for the establishment of a Head Start Center for migrant children in Muscatine County. MAP cooperated in establishing this Center in Muscatine.

Involvement with the Muscatine Migrant Council also was established. The role of the Muscatine Migrant Council was significant, inasmuch as their Public Health component was used in administering medical and dental examinations as well as follow-up services in the West Liberty Center.

Day Care

The Day Care Program operated concomitantly with Head Start and in the same Centers (see Head Start map). Day Care is distinguished from Head Start by age and maturity of the participant. Usually children from 0 - 4 years of age are considered Day Care age rather than Head Start.

The total cost of the project which was reimbursed to MAP through the Iowa Department of Social Services was \$8,079.06. The number of children served was 34.

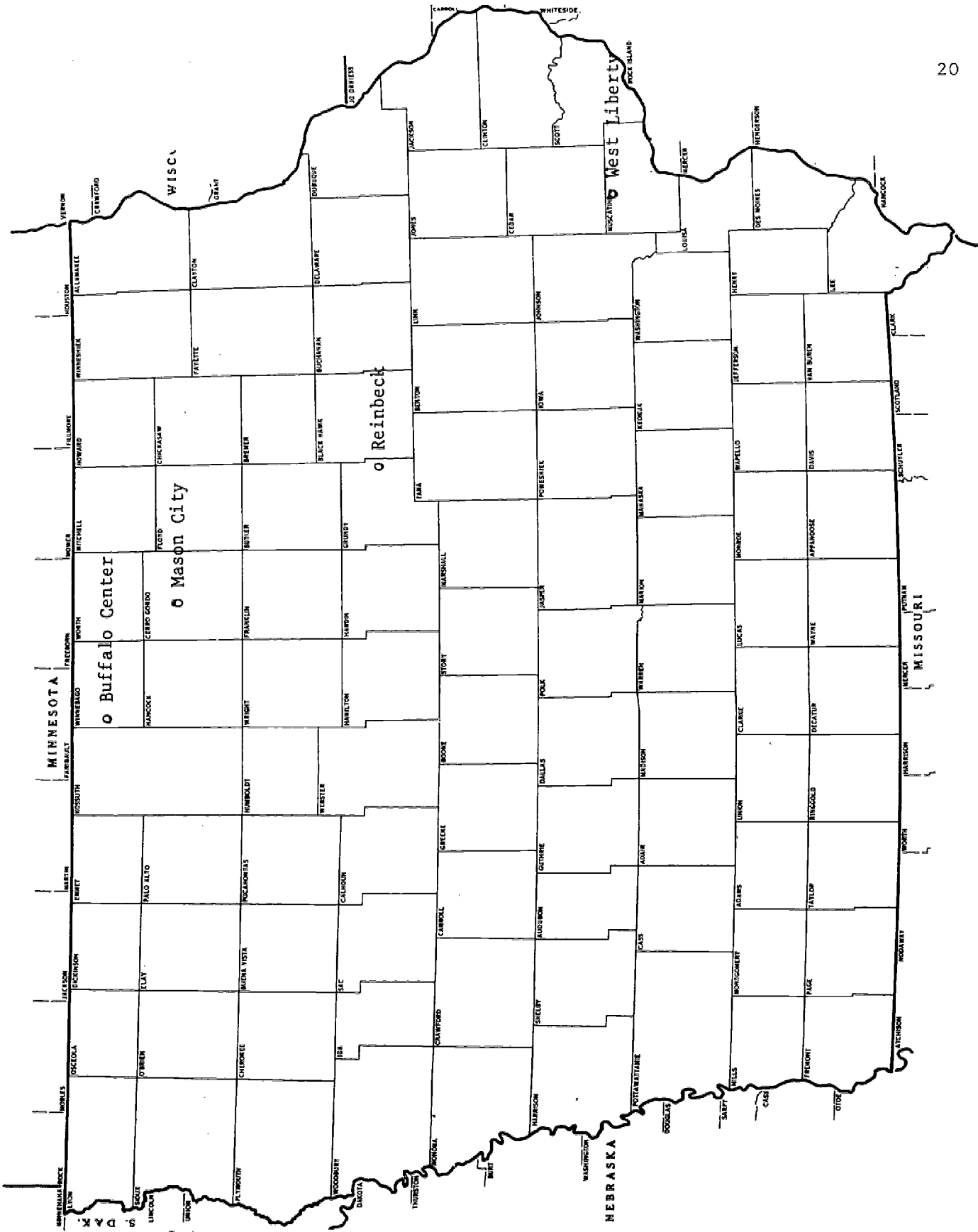
The role of the Day Care Centers is to provide an environment conducive to the physical, mental, and social development of each child enrolled in the program. MAP Health Component also contributed much to provide total health service to Day Care participants.

The same innovative attempts in Head Start were applied to Day Care Centers as well. Day Care proved to be as successful this year as in previous years. It is expected that this project will again operate in 1972.

HEW-Vehicle Purchase and Use

Additional funds of \$10,000 were awarded MAP by the Department of Health, Education, and Welfare, Office of Child Development. It was decided that the funds would be used in a more valuable manner if vans were purchased for use in Head Start.

As anticipated, use of the vans drastically cut-down on transportation costs. During the previous fiscal year, the Program contracted busing companies to transport the children at the cost of 40 to 60 cents per mile; hence, the savings were great during the past year.



MAP HEAD START, DAY CARE, AND NURSERY CENTERS

Health Program

MAP strives to assist the migrant in improving his health and the health of his family by providing such things as public health nursing, family clinics, emergency care, an immunization program, necessary hospitalization, a program of health education, dental screening and follow-up for the children plus emergency dental care for adults. All children are given physical exams with necessary follow-up services. General health supervision and counseling of all family members, during their stay in Iowa, with referral sent on to other states when the families leave our area.

To accomplish the work of the health component the following staff members are hired by the program. A health coordinator who supervises the operation of the component, and one registered nurse who works full-time on the project. During the peak season, registered nurses are employed part-time to work in the areas of northern Iowa where there are large numbers of migrant families. This past summer we had three registered nurses working part-time and one student nurse who worked with the program full-time during the peak months.

In addition to the paid staff, two physicians donated their services to the families in their areas, one bilingual R.N. and a group of student LPN's volunteered their services at all family health clinics.

In Mason City, where there is the greatest number of migrant families, seven family clinics were held serving a total of 83 patients. In other areas of the state doctors saw patients when need for medical care arose, as there were not large enough groups in any given area to make clinics feasible.

Dental clinics were held at three of the Head Start Centers and at the Mason City Title I migrant school. A total of 100 persons were examined with a total of 323 decayed, missing or filled teeth being found. All but 9 patients had all work completed before they left the area.

A total of 370 patients were seen by physicians with a total of 907 visits. Forty-three persons were helped with family planning care. Three babies were born in our area during the summer. A total of 529 immunizations and boosters were provided.

The hospitals have furnished excellent cooperation to our project, and we now have contracts with hospitals in all areas where we have large groups of migrant workers. During the project year, a total of 19 patients were hospitalized for a total of 93 days.

Our strength, as always, is in our nursing staff who do such a tremendous job. The nurses worked in three different areas of north central Iowa where we had large concentrations of migrant families. One R.N. worked in the Reinbeck area. She assumed the duties of Day Care Supervisor and school nurse as well as looking after the medical needs of the families in her area.

On May 4, 1971, The Reinbeck Canning Company manager called our area nurse to inform her that the first families had arrived and were in need of emergency food. The nurse, a representative of the Grundy County Department of Social Services, and a MAP outreach worker worked together certifying eligibility of the families and obtaining food stamps for them. All of the Reinbeck families lived in one camp owned by the canning company. The housing was good, and the grower was very cooperative. There was excellent support from the community.

Dr. Verduyn kindly donated his services to the families for the entire time they were in the community. The Council of Churches set up a thrift store so that the people were able to obtain inexpensive clothing. A community picnic was held which the migrant families were invited to attend so that they might become better acquainted with the people of the community. Many volunteers from the community of Reinbeck worked in the Day Care and Head Start program.

The asparagus crop harvest was completed by July 1, 1971, and the migrant workers moved out of the area. Many moved on to Muscatine to work in the tomato fields and a few went on to Ohio.

One R.N. worked in the three county area of Kossuth, Winnebago, and half of Hancock County. She supervised the Buffalo Center Day Care facility and acted as school nurse for the Day Care, Head Start, and Title I migrant children during the summer.

The migrant families began arriving in that area on April 20, 1971. Most of the families worked in potatoes with some working in sugar beets and beans. The first families stopped at the central office as they went through Mason City making it possible for us to take family histories and find out the immediate health needs of the people.

The nurse visited each family in her area at least once every ten days. The greatest concentration of families was in the vicinity of Thompson with other families scattered through the area at Ledyard, Swea City, Forest City, and Lakota.

Our full-time Project Nurse covered the area surrounding Mason City. This includes the counties of Cerro Gordo, Franklin, Worth, and half of Hancock. There was a grand total of 117 families including 543 individuals in her area. Due to the heavy workload in this area, we had another part-time R.N. and a student nurse working with the project nurse.

The families started arriving in Hampton at the end of March. Many of these families have traveled this same stream for 14 or 15 years and are well acquainted with Migrant Action Program. Most of them came directly to the office to obtain health assistance, to request emergency food monies, and to simply visit with us about the past winter in Texas, to show us the new babies, and tell us of the happenings since they had last seen us.

As soon as the families were settled into the camps, the nurse made her first visit to bring their medical histories up-to-date and to discover any pressing needs the families might have.

After several camp visits, an attempt was made to evaluate the total family situation in relation to the general health and welfare as a means of determining how the families could best be served by MAP. Doctor's appointments were arranged immediately for those who were known diabetics. Many had run out of medication in Texas and had no funds for purchasing more.

We began making arrangements for the summer clinics early in the Spring. The project nurse made arrangements for a facility in the out-patient section of a local hospital, and a meeting was arranged with the Cerro Gordo Medical Association to discuss physician's scheduling of clinic dates. Clinics were held every other week during the summer months--eight in all.

The Cerro Gordo Medical Society worked with us closely and its members were sincerely interested in assisting the migrant families. Local physicians seemed even more cooperative this year in working our migrant patients into their busy schedules on short notice. Several medical students, who were on preceptorships from the State University of Iowa, assisted at three clinics.

We found most of the mothers anxious to learn more about child care and good general health practices. Many of them made amazing progress through the summer months due to the health education program pursued by our nurses and were so proud of things they had learned and practiced.

MAP nurses have worked with dedication to those entrusted to their care. Our nurses have an emotional concern for the migrants--a kind of caring that is visible. We were very pleased with the comments made by Warren Weinberg, M.D., FAAP, of St. Louis Children's Hospital, St. Louis, Missouri, in his evaluation of our Head Start and Health components. He said, "The MAP nurses are excellent and committed to their work and the migrant's problems. I attended a health service educational program conducted by the nurses and parents for the staff and parents. It was well attended and excellent in concept and instruction."

A trip was made to Shenandoah and Hamburg, and contracts were negotiated with local hospitals to provide care for migrant workers in the area, and agreements were signed by local drugstores to provide prescription drugs for the migrants. Our visit did much to make the people of that area more aware of our agency and our efforts in behalf of the migratory seasonal farm workers in the State of Iowa.

The Iowa State Department of Health, Maternal and Child Health Division allowed us a grant of an extra \$5,000 to be used in the field of maternal and child care. It is most important to programs such as ours to have the interest and support of the State Health Department, and we appreciate the fact that our Iowa State Department of Health continues to take a definite part in our program.

A great deal has been accomplished by the members of the health staff this year. We are now looking forward to the coming year and are studying ways of doing an even better job in the coming season.

Case Histories

E. D. was examined at dental clinic and found to have multiple caries which were having a very serious effect on her health. Since a three-year old child is unable to cooperate well enough to have the necessary work done in a dental office, she was taken to a special children's dentist in Waterloo. He recommended restoration under anesthesia. She was admitted to the hospital overnight, and all necessary dental work was done. There was marked improvement immediately in her physical condition.

V. V., who has a known heart condition was examined by a local specialist. He felt that she should go to University Hospital in Iowa City for a possible cardiac catheterization. Through county officials the nurse was able to have the child admitted to Iowa University Hospital for a cardiac examination. She was found to have a slight narrowing of the main artery but does not need surgery at the present time.

J. G. was admitted to the hospital within a few days of arrival from Texas, an acutely and critically ill child. He was admitted to the emergency room in grave condition. He responded poorly to examination with respirations and pulse weak, eyes staring ahead, marked loss of turgor of the skin, fontanel soft, mouth and throat dry, and diarrhea.

Impression: Severe dehydration and gastro-enteritis. Oxygen was administered, child was isolated in pediatrics ward and intravenous solutions were started. It was "touch and go" for a time. Finally, J. G. began to respond to treatment. The nurse made frequent visits to the hospital during his stay.

It took three weeks hospitalization to get his little body adjusted and back to normal. By five months of age, J. G. was strong again, pulling himself up straight on his legs.

O. D., 25 year old rheumatoid arthritic has been coming up to Iowa for 15 years. She was first seen by the MAP nurse in June, 1965. She was referred to Iowa Crippled Children's Clinic in August, 1965. She was examined and medication was prescribed. The physical therapist suggested return to Iowa City in the fall, which she did.

In 1968, O. D. was walking very stiffly--both knees badly swollen, the right much worse than the left. She had been under physician's continuous care--on medication--using hot packs and heat for painful joints. MAP obtained a walker for her in 1968, making it a great deal easier and safer for her to get around.

In October, 1969, she had a baby girl--normal delivery. In 1970, she was using crutches to get around. Treatment continued and in March, 1971, O. D. returned from Texas badly crippled, with her right knee bent and very painful. She was on crutches continually.

She saw an orthopedist in May, 1971. He diagnosed severe rheumatoid arthritis, right knee unable to move joint. Left knee bends up to last 20 percent. Arthritis also in left and right wrist, right worse. Both knees and both wrists X-rayed.

In the hands the carpal bones are all fused, the right wrist is almost solidly fused, only slight motion at the site of ankylosis. There is a little bit more of a wrist joint apparent on the left but all the other carpal bones are ankylosed solidly.

Her range of motion on the left knee was 55 degrees. It obviously has effusion. Its joint space is completely destroyed. She would be unable to walk at all if sinuvectoromy were done on left knee as her right knee would not carry her. A right knee fusion was recommended and surgery done. O. D. was operated on May 26, and hospitalized for two weeks. Dismissed with a full leg cast--pinned through the knee.

Her recovery was slow but unevenful, progressing from wheel chair to crutches to again walking alone. Fortunately for her, her parents still live in the same camp, and could care for her and her lively little toddler. She got all the "tender loving care" so important to a good recovery from such an ordeal. She looks much better and says it is the best she has felt and the best she has walked for several years.

Consultive and Supportive Services from Other Organizations

1. Private physicians and dentists, specialists, opticians, regarding medical problems.
2. Iowa Department of Social Services: Consultation with their representatives concerning the areas of ADC, welfare assistance, day care licensing procedures, etc.
3. County Offices of the Department of Social Services: Assisting in the certification of migrant families for food stamps.
4. Iowa Division of the American Cancer Society: Pamphlets for distribution concerning danger signals for cancer, both Spanish and English translation.
5. Iowa Heart Association: Information bulletins for distribution among migrant families.
6. Iowa State Department of Health: Pamphlets pertaining to many health problems written in Spanish as well as English.

Free biologicals and immunization material obtained from the Division of Preventative Medicine. There were a total of 536 immunizations given by the nurses of MAP during this past year.

Consultation and assistance from the Field Representative, Mr. Paul Ogilvie in the matter of migrant health in the State of Iowa.

Consultation with Mrs. Bernice Wilkins, PHN, Reg. Director #2-B-- Iowa State Public Health Nursing Association, and assistance in specific health problems of the migrants.

Chest X-rays for workers in the Estherville area.

7. Iowa Regional Medical Program: Consultative services.
8. Iowa University School of Medicine: Services of the audiology team during our summer school.
9. Winnebago County Relief: Inclusion of one migrant child in their quota and allowing her to be taken to Iowa City to go through the Heart Clinic.

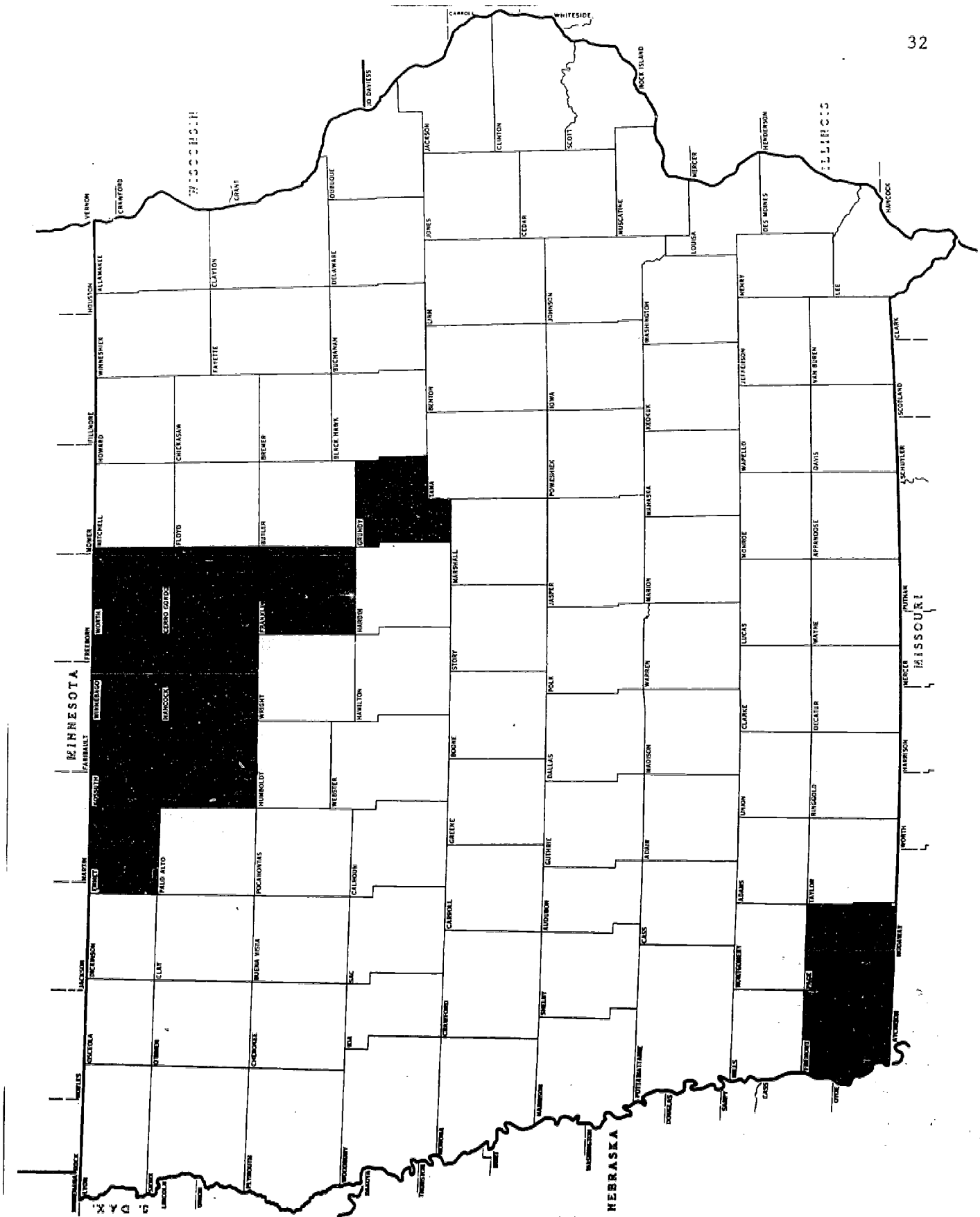
10. Iowa's State Services for Crippled Children: Inclusion of several migrant children among those seen at the Audio clinic set up in Clear Lake this Fall.
11. Community Action Program workers who have assisted us in obtaining information pertaining to migrant families in outlying areas who we felt might be in need of health services.
12. Iowa Family Planning Services: Nineteen young mothers were placed on family planning.
13. Texas State Department of Health: Referrals for follow-up and continuity of care.

In-Kind Contributions and Volunteer Services

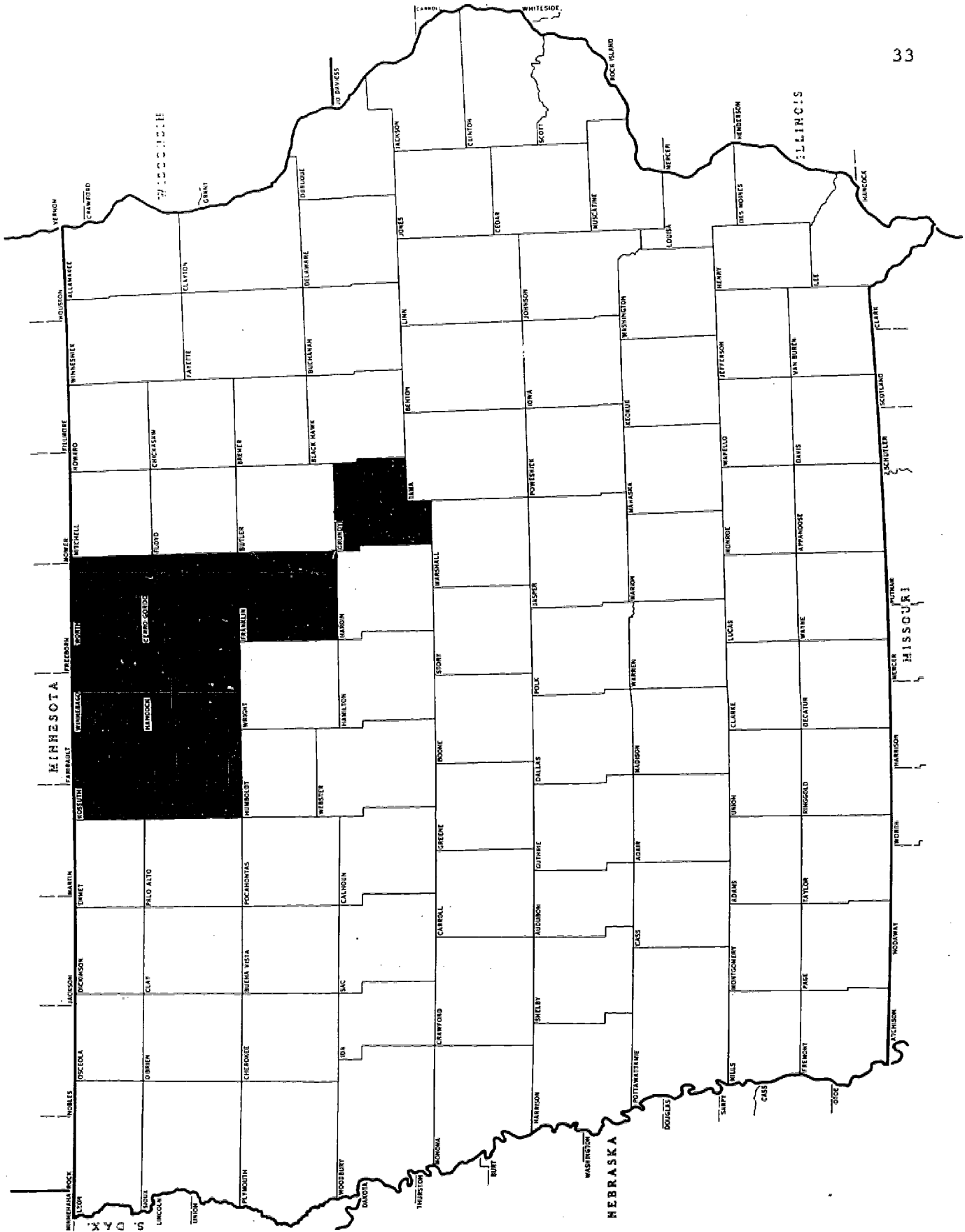
As in past years, this year we again had the generous assistance of many people who give of themselves to help others, and to whom we owe a constant debt of gratitude.

1. Cerro Gordo Medical Association, and their president, Dr. George West, who worked with us in arranging the clinics for the migrant workers and their families.
2. St. Joseph Mercy Hospital whose administrator, Sr. Mary Sharon, allowed us to use a section of the out-patient department for our clinic, and shared a sincere interest for our families.
3. Staff Members of St. Joseph Mercy Hospital who assisted during the evening clinics.
4. W. H. Verduyn, M.D., of Reinbeck, Iowa, who donated his services to the migrant workers and their families while they were in the Reinbeck area.
5. Madeline Donnelly Healy, M.D., who gave physical examinations to 70 children during the Mason City migrant summer school program.
6. Mrs. Ann MacGregor, R.N., (bilingual), who worked at evening clinics again this year.
7. R. C. Swale, D.D.S., for continued care of all school children.
8. Dorothy Heuermann, M.D., for continued support to the program.
9. John K. MacGregor, M.D., for his continuing concern of migrant problems.
10. NIACC School of Practical Nursing and the student nurses who assisted at the clinics as well as working in the Day Care Center.
11. Public Health Nurses in surrounding areas for their close cooperation and assistance.

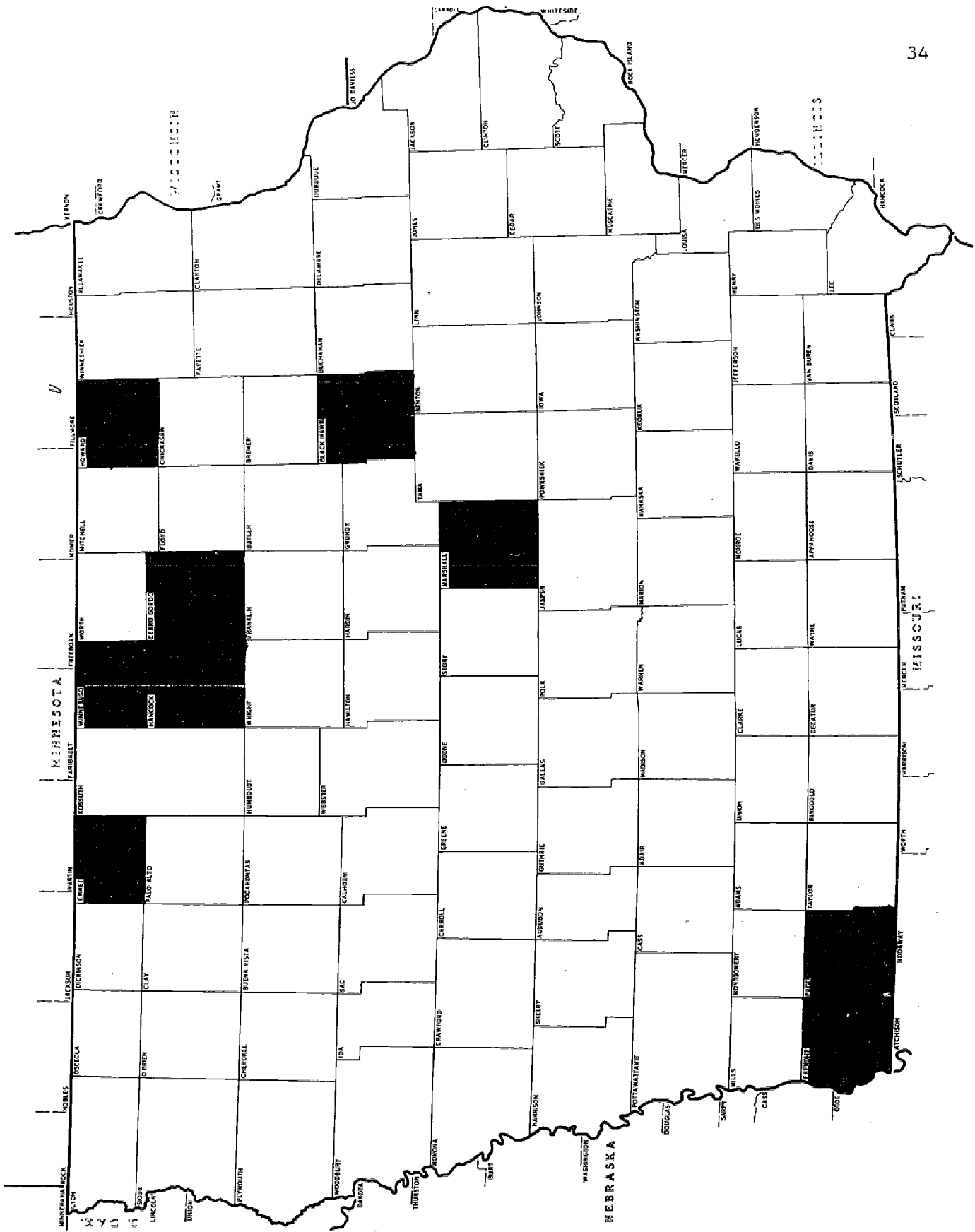
12. Pfizer Drug Company a donation of 2,000 vitamin tablets to be given to migrant workers when prescribed by their physicians.
13. The Hampton Service Club that provided funds for two pair of glasses for individuals in the Hampton area.
14. Farmer's Optical Company for close cooperation and assistance to the migrant workers.
15. The many groups that provided health kits to be given to the children at the beginning of the summer school program.

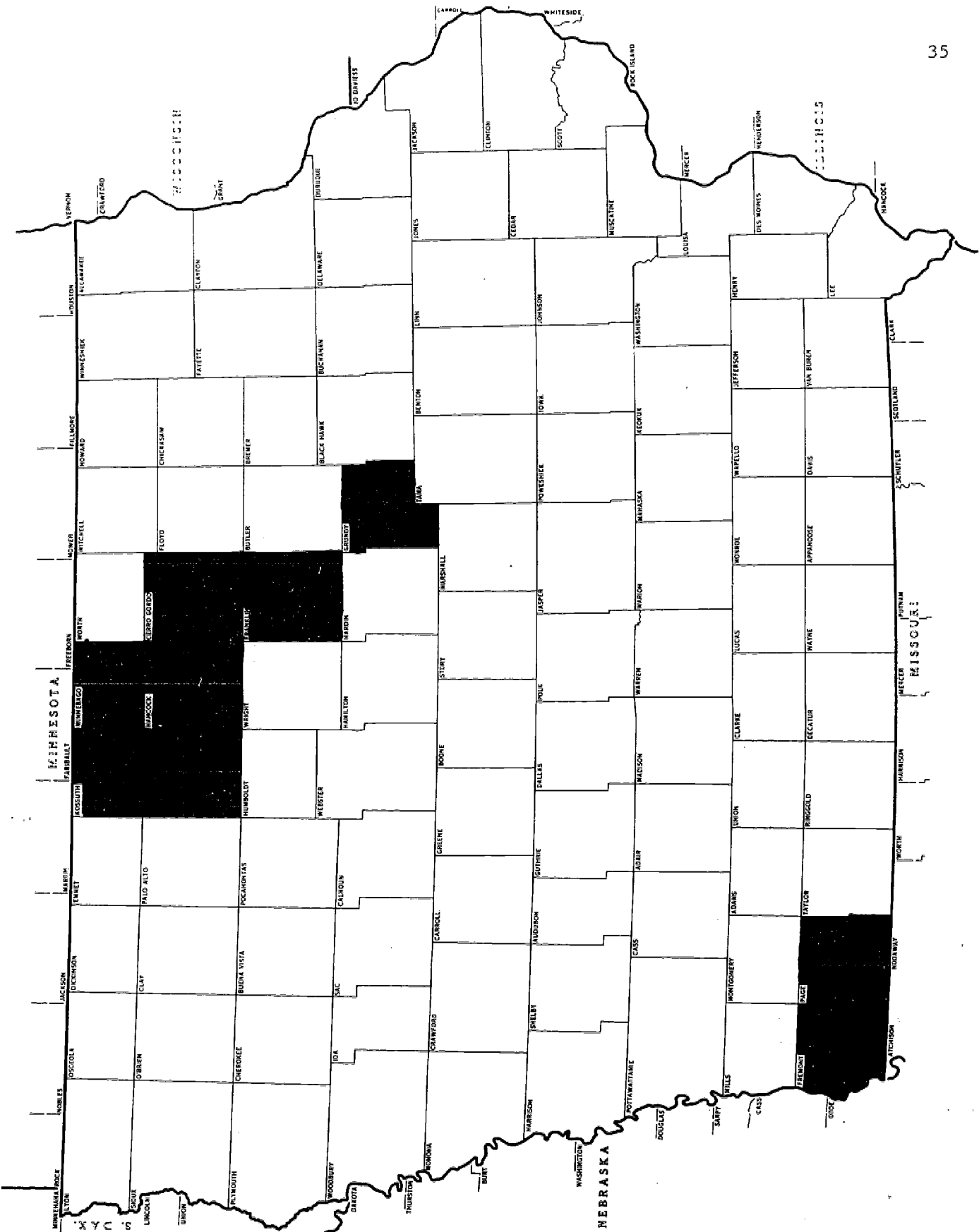


ERIC
 Full Text Provided by ERIC
 COUNTIES IN WHICH ASSISTANCE HAS BEEN GIVEN BY MIGRANT HEALTH COMPONENT OF MAP



COUNTIES SERVED BY MIGRANT ACTION PROGRAM NURSING STAFF





COUNTIES IN WHICH THERE ARE DRUG STORES THAT HAVE CONTRACTS WITH MAP

DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
HEALTH SERVICES AND MENTAL HEALTH ADMINISTRATION

ANNUAL PROGRESS REPORT - MIGRANT HEALTH PROJECT

DATE SUBMITTED

PERIOD COVERED BY THIS REPORT

FROM

THROUGH

10/1/70

9/30/71

PART I - GENERAL PROJECT INFORMATION

1. PROJECT TITLE

2. GRANT NUMBER (Use number shown on the last Grant Award Notice)

Health Services For Migrant Families In Iowa

07-H-000035-06-0

3. GRANTEE ORGANIZATION (Name & address)

4. PROJECT DIRECTOR

Migrant Action Program
Box 778
Mason City, Iowa 50401

Jaime Duran

SUMMARY OF POPULATION AND HOUSING DATA FOR TOTAL PROJECT AREA

5. POPULATION DATA - MIGRANTS (Workers and dependents)

a. NUMBER OF MIGRANTS BY MONTH

MONTH	TOTAL	IN-MIGRANTS	OUT-MIGRANTS
JAN.	97	97	
FEB.	98	98	
MAR.	123	123	
APRIL	181	181	
MAY	292	292	
JUNE	384	384	
JULY	397	397	
AUG.	285	285	
SEPT.	213	213	
OCT.	193	193	
NOV.	166	166	
DEC.	137	137	
TOTALS			

b. NUMBER OF MIGRANTS DURING PEAK MONTH

	TOTAL	MALE	FEMALE
(1) OUT-MIGRANTS:			
TOTAL			
UNDER 1 YEAR			
1 - 4 YEARS			
5 - 14 YEARS			
15 - 44 YEARS			
45 - 64 YEARS			
65 AND OLDER			
(2) IN-MIGRANTS:			
TOTAL	896	630	266
UNDER 1 YEAR	16	7	9
1 - 4 YEARS	58	29	29
5 - 14 YEARS	116	57	59
15 - 44 YEARS	484	350	134
45 - 64 YEARS	208	175	33
65 AND OLDER	14	12	2

c. AVERAGE STAY OF MIGRANTS IN PROJECT AREA

	NO. OF WEEKS		
	FROM (MO.)	THROUGH (MO.)	
OUT-MIGRANTS			
IN-MIGRANTS	23	May	Oct.

d. (1) INDICATE SOURCES OF INFORMATION AND/OR BASIS OF ESTIMATES FOR 5a.

Family histories

(2) DESCRIBE BRIEFLY HOW PROPORTIONS FOR SEX AND AGE FOR 5b WERE DERIVED.

Family histories and nurses records

6. HOUSING ACCOMMODATIONS

a. CAMPS

MAXIMUM CAPACITY	NUMBER	OCCUPANCY (PEAK)
LESS THAN 10 PERSONS	33	149
10 - 25 PERSONS	9	116
26 - 50 PERSONS	1	11
51 - 100 PERSONS		
MORE THAN 100 PERSONS		
housing information NA	361	
TOTAL*	43	637

b. OTHER HOUSING ACCOMMODATIONS

LOCATION (Specify):	NUMBER	OCCUPANCY (PEAK)
Hancock	1	7
Cerro Gordo	18	97
Winnebago	7	30
Kossuth	7	49
Emmett	NA	76
TOTAL*	33	259

*NOTE: The combined occupancy totals for "a" and "b" should equal approximately the total peak migrant population for the year.

OF PROJECT AREA - Append map showing location of camps, roads, clinics, and other places important to project.

POPULATION AND HOUSING DATA
FOR Cerro Gordo COUNTY.

GRANT NUMBER

07-H-000035-06-0(CS-H20-C-0)

INSTRUCTIONS: Projects involving more than one county will complete a continuation sheet (page 1 ___) for each county and summarize all the county data for total project area on page 1. Projects covering only one county will report population and housing on page 1.

5. POPULATION DATA - MIGRANTS (Workers and dependents)

a. NUMBER OF MIGRANTS BY MONTH

MONTH	TOTAL	IN-MIGRANTS	OUT-MIGRANTS
JAN.	87	87	
FEB.	88	88	
MAR.	88	88	
APRIL	88	88	
MAY	94	94	
JUNE	147	147	
JULY	152	152	
AUG.	125	125	
SEPT.	125	125	
OCT.	120	120	
NOV.	110	110	
DEC.	99	99	
TOTALS			

b. NUMBER OF MIGRANTS DURING PEAK MONTH

	TOTAL	MALE	FEMALE
(1) OUT-MIGRANTS:			
TOTAL			
UNDER 1 YEAR			
1 - 4 YEARS			
5 - 14 YEARS			
15 - 44 YEARS			
45 - 64 YEARS			
65 AND OLDER			
(2) IN-MIGRANTS:			
TOTAL	152	73	79
UNDER 1 YEAR	4	2	2
1 - 4 YEARS	28	12	16
5 - 14 YEARS	38	18	20
15 - 44 YEARS	67	34	33
45 - 64 YEARS	13	6	7
65 AND OLDER	2	1	1

c. AVERAGE STAY OF MIGRANTS IN COUNTY

	NO. OF WEEKS		
	FROM (MO.)	THROUGH (MO.)	
OUT-MIGRANTS			
IN-MIGRANTS	30	May	Dec.

6. HOUSING ACCOMMODATIONS

a. CAMPS

MAXIMUM CAPACITY	NUMBER	OCCUPANCY (Peak)
LESS THAN 10 PERSONS	7	31
10 - 25 PERSONS	2	13
26 - 50 PERSONS	1	11
51 - 100 PERSONS		
MORE THAN 100 PERSONS		
TOTAL*	10	55

b. OTHER HOUSING ACCOMMODATIONS

LOCATION (Specify)	NUMBER	OCCUPANCY (Peak)
Low income housing in Mason City	13	63
2 good homes	2	9
1 fairly good home	1	11
2 poor, low-income downtown apts.	2	14
TOTAL*	18	97

*NOTE: The combined occupancy totals for "a" and "b" should equal approximately the total peak migrant population for the year.

REMARKS

Mason City -- Individual low income housing--poor condition.
Sugar Beet Camp - 2 room house, privy, no heat edge of town.
Two apt. over downtown lower business district.
Quonset type unit with toilet - no drinking water indoors. (Well).
One good home & one fairly good home.

Clear Lake -- Eight motel type cement block units - very adequate. Hot water, heat, toilets, etc.

POPULATION AND HOUSING DATA
FOR Emmett COUNTY.

GRANT NUMBER

07-H-000035-06-0(CS-H20-C-0)

INSTRUCTIONS: Projects involving more than one county will complete a continuation sheet (page 1 ___) for each county and summarize all the county data for total project area on page 1. Projects covering only one county will report population and housing on page 1.

5. POPULATION DATA - MIGRANTS (Workers and dependents)

a. NUMBER OF MIGRANTS BY MONTH

b. NUMBER OF MIGRANTS DURING PEAK MONTH

MONTH	TOTAL	IN-MIGRANTS	OUT-MIGRANTS	(1) OUT-MIGRANTS: TOTAL UNDER 1 YEAR 1 - 4 YEARS 5 - 14 YEARS 15 - 44 YEARS 45 - 64 YEARS 65 AND OLDER	TOTAL	MALE	FEMALE
JAN.	Information not available						
FEB.							
MAR.							
APRIL							
MAY							
JUNE							
JULY							
AUG.							
SEPT.							
OCT.							
NOV.							
DEC.							
TOTALS							
c. AVERAGE STAY OF MIGRANTS IN COUNTY				(2) IN-MIGRANTS: TOTAL UNDER 1 YEAR 1 - 4 YEARS 5 - 14 YEARS 15 - 44 YEARS 45 - 64 YEARS 65 AND OLDER			
	NO. OF WEEKS	FROM (MO.)	THROUGH (MO.)				
OUT-MIGRANTS					76	42	34
IN-MIGRANTS					3	2	1
					4	3	1
					7	2	5
					50	27	23
					12	8	4
					0	0	0

6. HOUSING ACCOMMODATIONS

a. CAMPS

b. OTHER HOUSING ACCOMMODATIONS

MAXIMUM CAPACITY	NUMBER	OCCUPANCY (Peak)	LOCATION (Specify)	NUMBER	OCCUPANCY (Peak)
LESS THAN 10 PERSONS			Low-income housing	Information N/A	76
10 - 25 PERSONS			in town		
26 - 50 PERSONS					
51 - 100 PERSONS					
MORE THAN 100 PERSONS					
TOTAL*			TOTAL*		

*NOTE: The combined occupancy totals for "a" and "b" should equal approximately the total peak migrant population for the year.

REMARKS

While the largest group arrives in July this is a year-round industry and actually has no peak season. It is in area where migrant workers are attempting to settle out of the stream and obtain jobs in industry.

POPULATION AND HOUSING DATA
FOR Franklin COUNTY.

GRANT NUMBER

07-H-000035-06-0(CS-H20-0-0)

INSTRUCTIONS: Projects involving more than one county will complete a continuation sheet (page 1 ___) for each county and summarize all the county data for total project area on page 1. Projects covering only one county will report population and housing on page 1.

5. POPULATION DATA - MIGRANTS (Workers and dependents)

a. NUMBER OF MIGRANTS BY MONTH				b. NUMBER OF MIGRANTS DURING PEAK MONTH			
MONTH	TOTAL	IN-MIGRANTS	OUT-MIGRANTS	(1) OUT-MIGRANTS:	TOTAL	MALE	FEMALE
JAN.	4	4			TOTAL		
FEB.	4	4		UNDER 1 YEAR			
MAR.	12	12		1 - 4 YEARS			
APRIL	70	70		5 - 14 YEARS			
MAY	106	106		15 - 44 YEARS			
JUNE	39	39		45 - 64 YEARS			
JULY	48	48		65 AND OLDER			
AUG.	28	28		(2) IN-MIGRANTS:			
SEPT.	28	28		TOTAL	106	56	50
OCT.	13	13		UNDER 1 YEAR	6	3	3
NOV.	13	13		1 - 4 YEARS	14	9	5
DEC.	4	4		5 - 14 YEARS	16	8	8
TOTALS				15 - 44 YEARS	54	28	26
c. AVERAGE STAY OF MIGRANTS IN COUNTY				45 - 64 YEARS	15	7	8
	NO. OF WEEKS	FROM (MO.)	THROUGH (MO.)	65 AND OLDER	1	1	0
OUT-MIGRANTS							
IN-MIGRANTS	36	Mar.	Nov.				

6. HOUSING ACCOMMODATIONS

a. CAMPS			b. OTHER HOUSING ACCOMMODATIONS		
MAXIMUM CAPACITY	NUMBER	OCCUPANCY (Peak)	LOCATION (Specify)	NUMBER	OCCUPANCY (Peak)
LESS THAN 10 PERSONS	13	62			
10 - 25 PERSONS	2	44			
26 - 50 PERSONS					
51 - 100 PERSONS					
MORE THAN 100 PERSONS					
TOTAL*	15	106	TOTAL*		

*NOTE: The combined occupancy totals for "a" and "b" should equal approximately the total peak migrant population for the year.

REMARKS

Hampton -- Ferris migrant camp in field behind nursery. Privy and no running water. Eleven units.

Large old farmhouse, poor condition, 3 beet workers families living together. Twenty-two individuals, all inter-related.

Sheffield -- One converted garage with water & indoor plumbing.
One house fair condition.
One family living in basement.

POPULATION AND HOUSING DATA
FOR Freemont COUNTY.

GRANT NUMBER
07-H-000035-06-0 (CS-H20-C-0)

INSTRUCTIONS: Projects involving more than one county will complete a continuation sheet (page 1 ___) for each county and summarize all the county data for total project area on page 1. Projects covering only one county will report population and housing on page 1.

5. POPULATION DATA - MIGRANTS (Workers and dependents)

a. NUMBER OF MIGRANTS BY MONTH				b. NUMBER OF MIGRANTS DURING PEAK MONTH			
MONTH	TOTAL	IN-MIGRANTS	OUT-MIGRANTS		TOTAL	MALE	FEMALE
JAN.				(1) OUT-MIGRANTS:			
FEB.				TOTAL			
MAR.	17	17		UNDER 1 YEAR			
APRIL	17	17		1 - 4 YEARS			
MAY	17	17		5 - 14 YEARS			
JUNE	17	17		15 - 44 YEARS			
JULY	17	17		45 - 64 YEARS			
AUG.	17	17		65 AND OLDER			
SEPT.	17	17		(2) IN-MIGRANTS:			
OCT.	17	17		TOTAL	17	10	7
NOV.	17	17		UNDER 1 YEAR	0	0	0
DEC.	17	17		1 - 4 YEARS	0	0	0
TOTALS				5 - 14 YEARS	1	1	0
c. AVERAGE STAY OF MIGRANTS IN COUNTY				15 - 44 YEARS	12	6	6
	NO. OF WEEKS	FROM (MO.)	THROUGH (MO.)	45 - 64 YEARS	4	3	1
OUT-MIGRANTS				65 AND OLDER	0	0	0
IN-MIGRANTS	30	March	Oct.				

6. HOUSING ACCOMMODATIONS

a. CAMPS			b. OTHER HOUSING ACCOMMODATIONS		
MAXIMUM CAPACITY	NUMBER	OCCUPANCY (Peak)	LOCATION (Specify)	NUMBER	OCCUPANCY (Peak)
LESS THAN 10 PERSONS	3	17			
10 - 25 PERSONS					
26 - 50 PERSONS					
51 - 100 PERSONS					
MORE THAN 100 PERSONS					
TOTAL*	3	17	TOTAL*		

*NOTE: The combined occupancy totals for "a" and "b" should equal approximately the total peak migrant population for the year.

REMARKS

No peak--came as a group for season

POPULATION AND HOUSING DATA
FOR Grundy COUNTY.

GRANT NUMBER

07-H-000035-06-0(CS-H20-C-0)

INSTRUCTIONS: Projects involving more than one county will complete a continuation sheet (page 1 ___) for each county and summarize all the county data for total project area on page 1. Projects covering only one county will report population and housing on page 1.

5. POPULATION DATA - MIGRANTS (*Workers and dependents*)

a. NUMBER OF MIGRANTS BY MONTH

MONTH	TOTAL	IN-MIGRANTS	OUT-MIGRANTS
JAN.			
FEB.			
MAR.			
APRIL			
MAY	69	69	
JUNE	69	69	
JULY	68	68	
AUG.			
SEPT.			
OCT.			
NOV.			
DEC.			
TOTALS			

b. NUMBER OF MIGRANTS DURING PEAK MONTH

	TOTAL	MALE	FEMALE
(1) OUT-MIGRANTS:			
TOTAL			
UNDER 1 YEAR			
1 - 4 YEARS			
5 - 14 YEARS			
15 - 44 YEARS			
45 - 64 YEARS			
65 AND OLDER			
(2) IN-MIGRANTS:			
TOTAL	69	31	38
UNDER 1 YEAR	2		2
1 - 4 YEARS	7	4	3
5 - 14 YEARS	18	8	10
15 - 44 YEARS	29	12	17
45 - 64 YEARS	10	5	5
65 AND OLDER	3	2	1

c. AVERAGE STAY OF MIGRANTS IN COUNTY

	NO. OF WEEKS	FROM (MO.)	THROUGH (MO.)
	OUT-MIGRANTS		
IN-MIGRANTS	12	May	July

6. HOUSING ACCOMMODATIONS

a. CAMPS

MAXIMUM CAPACITY	NUMBER	OCCUPANCY (Peak)
LESS THAN 10 PERSONS	7	25
10 - 25 PERSONS	4	44
26 - 50 PERSONS		
51 - 100 PERSONS		
MORE THAN 100 PERSONS		
TOTAL*	11	69

b. OTHER HOUSING ACCOMMODATIONS

LOCATION (Specify)	NUMBER	OCCUPANCY (Peak)
TOTAL*		

*NOTE: The combined occupancy totals for "a" and "b" should equal approximately the total peak migrant population for the year.

REMARKS

POPULATION AND HOUSING DATA
FOR Hancock COUNTY.

GRANT NUMBER

07-H-000035-06-0(CS-H20-C-0)

INSTRUCTIONS: Projects involving more than one county will complete a continuation sheet (page 1 ___) for each county and summarize all the county data for total project area on page 1. Projects covering only one county will report population and housing on page 1.

5. POPULATION DATA - MIGRANTS (*Workers and dependents*)

a. NUMBER OF MIGRANTS BY MONTH				b. NUMBER OF MIGRANTS DURING PEAK MONTH				
MONTH	TOTAL	IN-MIGRANTS	OUT-MIGRANTS	(1) OUT-MIGRANTS: TOTAL UNDER 1 YEAR 1 - 4 YEARS 5 - 14 YEARS 15 - 44 YEARS 45 - 64 YEARS 65 AND OLDER	TOTAL	MALE	FEMALE	
JAN.					(2) IN-MIGRANTS: TOTAL UNDER 1 YEAR 1 - 4 YEARS 5 - 14 YEARS 15 - 44 YEARS 45 - 64 YEARS 65 AND OLDER			
FEB.								
MAR.								
APRIL								
MAY								
JUNE	7	7				7	4	3
JULY	7	7				0	0	0
AUG.	7	7				0	0	0
SEPT.						0	0	0
OCT.						1	0	1
NOV.						4	3	1
DEC.						2	1	1
TOTALS					0	0	0	
c. AVERAGE STAY OF MIGRANTS IN COUNTY								
	NO. OF WEEKS	FROM (MO.)	THROUGH (MO.)					
OUT-MIGRANTS								
IN-MIGRANTS	11	June	Aug.					

6. HOUSING ACCOMMODATIONS

a. CAMPS			b. OTHER HOUSING ACCOMMODATIONS		
MAXIMUM CAPACITY	NUMBER	OCCUPANCY (<i>Peak</i>)	LOCATION (<i>Specify</i>)	NUMBER	OCCUPANCY (<i>Peak</i>)
LESS THAN 10 PERSONS			Garner	1	7
10 - 25 PERSONS					
26 - 50 PERSONS					
51 - 100 PERSONS					
MORE THAN 100 PERSONS					
TOTAL*			TOTAL*	1	7

*NOTE: The combined occupancy totals for "a" and "b" should equal approximately the total peak migrant population for the year.

REMARKS

Garner -- Very poor low-income house in town--upstairs apt.
Family of six and grown son.

POPULATION AND HOUSING DATA
FOR Kossuth COUNTY.

GRANT NUMBER
07-H000035-06-0(CS-H20-C-1)

INSTRUCTIONS: Projects involving more than one county will complete a continuation sheet (page 1 ___) for each county and summarize all the county data for total project area on page 1. Projects covering only one county will report population and housing on page 1.

5. POPULATION DATA - MIGRANTS (Workers and dependents)
a. NUMBER OF MIGRANTS BY MONTH

MONTH	TOTAL	IN-MIGRANTS	OUT-MIGRANTS
JAN.			
FEB.			
MAR.			
APRIL			
MAY			
JUNE	49	49	
JULY	49	49	
AUG.	49	49	
SEPT.	9	9	
OCT.	9	9	
NOV.	9	9	
DEC.			
TOTALS			

b. NUMBER OF MIGRANTS DURING PEAK MONTH

	TOTAL	MALE	FEMALE
(1) OUT-MIGRANTS:			
TOTAL			
UNDER 1 YEAR			
1 - 4 YEARS			
5 - 14 YEARS			
15 - 44 YEARS			
45 - 64 YEARS			
65 AND OLDER			
(2) IN-MIGRANTS:			
TOTAL	49	25	24
UNDER 1 YEAR			
1 - 4 YEARS	1		1
5 - 14 YEARS	14	9	5
15 - 44 YEARS	25	11	14
45 - 64 YEARS	9	5	4
65 AND OLDER			

c. AVERAGE STAY OF MIGRANTS IN COUNTY

	NO. OF WEEKS		
	NO. OF WEEKS	FROM (MO.)	THROUGH (MO.)
OUT-MIGRANTS			
IN-MIGRANTS	12	June	August

6. HOUSING ACCOMMODATIONS

a. CAMPS

MAXIMUM CAPACITY	NUMBER	OCCUPANCY (Peak)
LESS THAN 10 PERSONS		
10 - 25 PERSONS		
26 - 50 PERSONS		
51 - 100 PERSONS		
MORE THAN 100 PERSONS		
TOTAL*		

b. OTHER HOUSING ACCOMMODATIONS

LOCATION (Specify)	NUMBER	OCCUPANCY (Peak)
<u>Lakota</u>	2	18
<u>Ledyard</u>	1	7
<u>Swea City</u>	4	24
TOTAL*	7	49

*NOTE: The combined occupancy totals for "a" and "b" should equal approximately the total peak migrant population for the year.

REMARKS



POPULATION AND HOUSING DATA FOR <u>Page</u> COUNTY.	GRANT NUMBER 07-H-000035-06-0(CS-H20-C-0)
--	--

INSTRUCTIONS: Projects involving more than one county will complete a continuation sheet (page 1 ___) for each county and summarize all the county data for total project area on page 1. Projects covering only one county will report population and housing on page 1.

5. POPULATION DATA - MIGRANTS (Workers and dependents)

a. NUMBER OF MIGRANTS BY MONTH				b. NUMBER OF MIGRANTS DURING PEAK MONTH						
MONTH	TOTAL	IN-MIGRANTS	OUT-MIGRANTS		TOTAL	MALE	FEMALE			
JAN.	Information not available			(1) OUT-MIGRANTS:						
FEB.				TOTAL						
MAR.				UNDER 1 YEAR						
APRIL				1 - 4 YEARS						
MAY				5 - 14 YEARS						
JUNE				15 - 44 YEARS						
JULY				45 - 64 YEARS						
AUG.				65 AND OLDER						
SEPT.				(2) IN-MIGRANTS:						
OCT.				TOTAL				361	361	0
NOV.				UNDER 1 YEAR				0	0	0
DEC.				1 - 4 YEARS				0	0	0
TOTALS				5 - 14 YEARS	2	2	0			
				15 - 44 YEARS	219	219	0			
				45 - 64 YEARS	134	134	0			
				65 AND OLDER	6	6	0			

c. AVERAGE STAY OF MIGRANTS IN COUNTY

	NO. OF WEEKS	FROM (MO.)	THROUGH (MO.)
OUT-MIGRANTS			
IN-MIGRANTS	38	March	December

6. HOUSING ACCOMMODATIONS

a. CAMPS			b. OTHER HOUSING ACCOMMODATIONS		
MAXIMUM CAPACITY	NUMBER	OCCUPANCY (Peak)	LOCATION (Specify)	NUMBER	OCCUPANCY (Peak)
LESS THAN 10 PERSONS	Not available				
10 - 25 PERSONS					
26 - 50 PERSONS					
51 - 100 PERSONS					
MORE THAN 100 PERSONS					
TOTAL*			TOTAL*		

*NOTE: The combined occupancy totals for "a" and "b" should equal approximately the total peak migrant population for the year.

REMARKS
 Live in company barracks with running water, TV, own cook who prepares Mexican food for them.

POPULATION AND HOUSING DATA
FOR Winnebago COUNTY.

GRANT NUMBER
07-H-000035-06-0(CS-H20-C-0)

INSTRUCTIONS: Projects involving more than one county will complete a continuation sheet (page 1 ___) for each county and summarize all the county data for total project area on page 1. Projects covering only one county will report population and housing on page 1.

5. POPULATION DATA - MIGRANTS (Workers and dependents)				b. NUMBER OF MIGRANTS DURING PEAK MONTH				
a. NUMBER OF MIGRANTS BY MONTH								
MONTH	TOTAL	IN-MIGRANTS	OUT-MIGRANTS	(1) OUT-MIGRANTS:		TOTAL	MALE	FEMALE
JAN.				TOTAL				
FEB.				UNDER 1 YEAR				
MAR.				1 - 4 YEARS				
APRIL				5 - 14 YEARS				
MAY				15 - 44 YEARS				
JUNE	27	27		45 - 64 YEARS				
JULY	27	27		65 AND OLDER				
AUG.	30	30						
SEPT.	28	28						
OCT.	28	28		(2) IN-MIGRANTS:				
NOV.	28	28		TOTAL		30	14	16
DEC.	28	28		UNDER 1 YEAR		1	0	1
TOTALS				1 - 4 YEARS		3	1	2
c. AVERAGE STAY OF MIGRANTS IN COUNTY				5 - 14 YEARS		6	1	5
	NO. OF WEEKS	FROM (MO.)	THROUGH (MO.)	15 - 44 YEARS		11	5	6
OUT-MIGRANTS				45 - 64 YEARS		8	6	2
IN-MIGRANTS	24	June	Dec.	65 AND OLDER		1	1	

6. HOUSING ACCOMMODATIONS			b. OTHER HOUSING ACCOMMODATIONS		
a. CAMPS					
MAXIMUM CAPACITY	NUMBER	OCCUPANCY (Peak)	LOCATION (Specify)	NUMBER	OCCUPANCY (Peak)
LESS THAN 10 PERSONS			Thompson	6	27
10 - 25 PERSONS			Forest City	1	3
26 - 50 PERSONS					
51 - 100 PERSONS					
MORE THAN 100 PERSONS					
TOTAL*			TOTAL*	7	30

*NOTE: The combined occupancy totals for "a" and "b" should equal approximately the total peak migrant population for the year.

REMARKS

Thompson -- The families in this area will be staying until December 1st or until potato harvest is finished. The total will be 25.

Forest City -- The Rene Salinas are settling here. They live in a trailer court now.

POPULATION AND HOUSING DATA
FOR Worth COUNTY.

GRANT NUMBER

07-H-000035-06-0(CS-H20-C-0)

INSTRUCTIONS: Projects involving more than one county will complete a continuation sheet (page 1 ___) for each county and summarize all the county data for total project area on page 1. Projects covering only one county will report population and housing on page 1.

5. POPULATION DATA - MIGRANTS (Workers and dependents)

a. NUMBER OF MIGRANTS BY MONTH

MONTH	TOTAL	IN-MIGRANTS	OUT-MIGRANTS
JAN.	6	6	
FEB.	6	6	
MAR.	6	6	
APRIL	6	6	
MAY	6	6	
JUNE	29	29	
JULY	29	29	
AUG.	29	29	
SEPT.	6	6	
OCT.	6	6	
NOV.	6	6	
DEC.	6	6	
TOTALS			

b. NUMBER OF MIGRANTS DURING PEAK MONTH

	TOTAL	MALE	FEMALE
(1) OUT-MIGRANTS:			
TOTAL			
UNDER 1 YEAR			
1 - 4 YEARS			
5 - 14 YEARS			
15 - 44 YEARS			
45 - 64 YEARS			
65 AND OLDER			
(2) IN-MIGRANTS:			
TOTAL	29	14	15
UNDER 1 YEAR	0	0	0
1 - 4 YEARS	1		1
5 - 14 YEARS	13	8	5
15 - 44 YEARS	13	5	8
45 - 64 YEARS	1	0	1
65 AND OLDER	1	1	0

c. AVERAGE STAY OF MIGRANTS IN COUNTY

	NO. OF WEEKS	FROM (MO.)	THROUGH (MO.)
OUT-MIGRANTS			
IN-MIGRANTS	9	June	August

6. HOUSING ACCOMMODATIONS

a. CAMPS

MAXIMUM CAPACITY	NUMBER	OCCUPANCY (Peak)
LESS THAN 10 PERSONS	3	14
10 - 25 PERSONS	1	15
26 - 50 PERSONS		
51 - 100 PERSONS		
MORE THAN 100 PERSONS		
TOTAL*	4	29

b. OTHER HOUSING ACCOMMODATIONS

LOCATION (Specify)	NUMBER	OCCUPANCY (Peak)
TOTAL*		

*NOTE: The combined occupancy totals for "a" and "b" should equal approximately the total peak migrant population for the year.

REMARKS

Northwood -- Fairly adequate house - 3 families, inter-related.

Fertile -- Two very small housing units. 6 & 5 individuals in families, and one small house, poor condition, family of four.

GRANT NUMBER
07-H-000035-06-0(CS-H20-C-0)

DATE SUBMITTED

PART II - MEDICAL, DENTAL, AND HOSPITAL SERVICES

1. MIGRANTS RECEIVING MEDICAL SERVICES

a. TOTAL MIGRANTS RECEIVING MEDICAL SERVICES AT FAMILY HEALTH CLINICS, PHYSICIANS OFFICES, HOSPITAL EMERGENCY ROOMS, ETC.

AGE	NUMBER OF PATIENTS			NUMBER OF VISITS
	TOTAL	MALE	FEMALE	
TOTAL	370	133	237	907
UNDER 1 YEAR	24	8	16	74
1 - 4 YEARS	43	20	23	126
5 - 14 YEARS	69	30	39	149
15 - 44 YEARS	169	50	119	404
45 - 64 YEARS	60	21	39	144
65 AND OLDER	5	4	1	10

b. OF TOTAL MIGRANTS RECEIVING MEDICAL SERVICES, HOW MANY WERE:

(1) SERVED IN FAMILY HEALTH SERVICE CLINIC	83
(2) SERVED IN PHYSICIANS' OFFICE, ON FEE-FOR-SERVICE ARRANGEMENT (INCLUDE REFERRALS)	287

3. MIGRANT PATIENTS HOSPITALIZED (Regardless of arrangements for payment):

No. of Patients (exclude newborn)	19
No. of Hospital Days	93

2. MIGRANTS RECEIVING DENTAL SERVICES

ITEM	TOTAL	UNDER 15	15 AND OLDER
a. NO. MIGRANTS EXAMINED-TOTAL	100	74	26
(1) NO. DECAYED, MISSING, FILLED TEETH <u>323</u>		273	50
(2) AVERAGE DMF PER PERSON		10	6
b. INDIVIDUALS REQUIRING SERVICES-TOTAL	94	68	26
(1) CASES COMPLETED <u>85</u>		61	24
(2) CASES PARTIALLY COMPLETED <u>6</u>		4	2
(3) CASES NOT STARTED <u>3</u>		3	
c. SERVICES PROVIDED - TOTAL	141	92	49
(1) PREVENTIVE <u>63</u>		55	8
(2) CORRECTIVE-TOTAL <u>121</u>			
(a) Extraction <u>42</u>		20	22
(b) Other <u>79</u>		60	19
d. PATIENT VISITS - TOTAL	128	89	39

4. IMMUNIZATIONS PROVIDED

TYPE	COMPLETED IMMUNIZATIONS, BY AGE					IN-COMplete SERIES	BOOSTERS, REVACCINATIONS
	TOTAL	UNDER 1 YEAR	1 - 4	5 - 14	15 AND OLDER		
TOTAL-- ALL TYPES	389	64	183	100	42	43	140
SMALLPOX	26	1	10	10	5	0	4
DIPHTHERIA	90	17	36	25	12	12	38
PERTUSSIS	61	17	36	8	0	12	26
TETANUS	89	17	36	24	12	12	38
POLIO	75	12	33	20	10	7	34
TYPHOID	0	0	0	0	0	0	0
MEASLES	24	0	15	6	3	0	0
OTHER (Specify) Rubella	24		17	7			

REMARKS

PART II (Continued) - 5. MEDICAL CONDITIONS TREATED BY PHYSICIANS IN FAMILY CLINICS, HOSPITAL OUTPATIENT DEPARTMENTS, AND PHYSICIANS' OFFICES.

GRANT NUMBER

07-H-000035-06-0(CS-H20-CO)

ICD CLASS	MH CODE	DIAGNOSIS OR CONDITION	TOTAL VISITS	FIRST VISITS	REVISITS
I - XVII.		TOTAL ALL CONDITIONS _____	907	370	537
I.	01-	INFECTIVE AND PARASITIC DISEASES: TOTAL _____	93	38	55
	010	TUBERCULOSIS _____			
	011	SYPHILIS _____			
	012	GONORRHEA AND OTHER VENEREAL DISEASES _____			
	013	INTESTINAL PARASITES _____	14	4	10
		DIARRHEAL DISEASE (infectious or unknown origins):			
	014	Children under 1 year of age _____	11	2	9
	015	All other _____	14	5	9
	016	"CHILDHOOD DISEASES" - mumps, measles, chickenpox _____	36	18	18
	017	FUNGUS INFECTIONS OF SKIN (Dermatophytoses) _____	6	4	2
	019	OTHER INFECTIVE DISEASES (Give examples):			
		<u>Pinworms</u>	6	3	3
		<u>Pelvic inflammatory diseases</u>	6	2	4

II.	02-	NEOPLASMS: TOTAL _____	6	3	3
	020	MALIGNANT NEOPLASMS (give examples):			
		<u>Papiloma</u>	2	1	1

	025	BENIGN NEOPLASMS _____	4	2	2
	029	NEOPLASMS of uncertain nature _____			
III.	03-	ENDOCRINE, NUTRITIONAL, AND METABOLIC DISEASES: TOTAL _____	87	25	62
	030	DISEASES OF THYROID GLAND _____			
	031	DIABETES MELLITUS _____	40	8	32
	032	DISEASES of Other Endocrine Glands _____			
	033	NUTRITIONAL DEFICIENCY _____	9	3	6
	034	OBESITY _____	38	14	24
	039	OTHER CONDITIONS _____			
IV.	04-	DISEASES OF BLOOD AND BLOOD FORMING ORGANS: TOTAL _____	7	2	5
	040	IRON DEFICIENCY ANEMIA _____			
	049	OTHER CONDITIONS <u>vaginal hemorrhage</u>	7	2	5
V.	05-	MENTAL DISORDERS: TOTAL _____	22	6	14
	050	PSYCHOSES _____			
	051	NEUROSES and Personality Disorders _____	9	3	6
	052	ALCOHOLISM _____	3	1	2
	053	MENTAL RETARDATION _____			
	059	OTHER CONDITIONS <u>anxiety reaction, depression (nerves)</u>	10	4	6
VI.	06-	DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS: TOTAL _____	100	42	58
	060	PERIPHERAL NEURITIS <u>pterygium</u>	10	5	5
	061	EPILEPSY <u>surgical removal of pterygium</u>	7	2	5
	062	CONJUNCTIVITIS and other Eye Infections _____	34	13	21
	063	REFRACTIVE ERRORS of Vision _____	16	12	4
	064	OTITIS MEDIA _____	29	9	20
	69	OTHER CONDITIONS <u>trachoma</u>	4	1	3

GRANT NUMBER
07-H-000035-06-0(CS-H20-C0)

PART II - 5. (Continued)

ICD CLASS	MH CODE	DIAGNOSIS OR CONDITION	TOTAL VISITS	FIRST VISITS	REVISITS
VII.	07-	<u>DISEASES OF THE CIRCULATORY SYSTEM: TOTAL</u>	86	26	60
	070	RHEUMATIC FEVER			
	071	ARTERIOSCLEROTIC and Degenerative Heart Disease	10	4	6
	072	CEREBROVASCULAR DISEASE (Stroke)			
	073	OTHER DISEASES of the Heart	1	1	
	074	HYPERTENSION	61	17	44
	075	VARICOSE VEINS	14	4	10
	079	OTHER CONDITIONS			
VIII.	08-	<u>DISEASES OF THE RESPIRATORY SYSTEM: TOTAL</u>	103	53	50
	080	ACUTE NASOPHARYNGITIS (Common Cold)	29	17	12
	081	ACUTE PHARYNGITIS	11	7	4
	082	TONSILLITIS	14	8	6
	083	BRONCHITIS	1	1	
	084	TRACHEITIS/LARYNGITIS	14	7	7
	085	INFLUENZA	4	2	2
	086	PNEUMONIA			
	087	ASTHMA, HAY FEVER	9	3	6
	088	CHRONIC LUNG DISEASE (Emphysema) somatic chest pain	10	4	6
	089	OTHER CONDITIONS coryza	11	4	7
IX.	09-	<u>DISEASES OF THE DIGESTIVE SYSTEM: TOTAL</u>	137	60	77
	090	CARIES and Other Dental Problems	77	38	39
	091	PEPTIC ULCER	16	6	10
	092	APPENDICITIS	8	2	6
	093	HERNIA	6	3	3
	094	CHOLECYSTIC DISEASE	2	1	1
	099	OTHER CONDITIONS gastroenteritis; 1-abdominal pain	28	10	18
X.	10-	<u>DISEASES OF THE GENITOURINARY SYSTEM: TOTAL</u>	30	15	15
	100	URINARY TRACT INFECTION (Pyelonephritis, Cystitis)	11	5	6
	101	DISEASES OF PROSTATE GLAND (excluding Carcinoma)			
	102	OTHER DISEASES of Male Genital Organs			
	103	DISORDERS of Menstruation	5	3	2
	104	MENOPAUSAL SYMPTOMS	4	2	2
	105	OTHER DISEASES of Female Genital Organs	6	4	2
	109	OTHER CONDITIONS	4	1	3
XI.	11-	<u>COMPLICATIONS OF PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM:</u>			
		TOTAL	9	5	4
	110	INFECTIONS of Genitourinary Tract during Pregnancy	2	2	
	111	TOXEMIAS of Pregnancy			
	112	SPONTANEOUS ABORTION			
	113	REFERRED FOR DELIVERY	6	2	4
	114	COMPLICATIONS of the Puerperium			
	119	OTHER CONDITIONS "rhogram" - RH baby	1	1	
XII.	12-	<u>DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE: TOTAL</u>	110	51	59
	120	SOFT TISSUE ABSCESS OR CELLULITIS	10	4	6
	121	IMPETIGO OR OTHER PYODERMA	31	16	15
	122	SEBORRHEIC DERMATITIS	2	1	1
	123	ECZEMA, CONTACT DERMATITIS, OR NEURODERMATITIS	9	4	5
	124	ACNE	5	3	2
	129	OTHER CONDITIONS pediculosis, psoriasis, urticaria	52	23	30

PART II - 5. (Continued)			GRANT NUMBER 07-H-000035-06-0(CS-H20-C-0)		
ICD CLASS	MH CODE	DIAGNOSIS OR CONDITION	TOTAL VISITS	FIRST VISITS	REVISITS
XIII.	13-	<u>DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE: TOTAL</u>	36	11	25
	130	RHEUMATOID ARTHRITIS	6	1	5
	131	OSTEOARTHRITIS	5	2	3
	132	ARTHRITIS, Unspecified <u>knee strain</u>	9	4	5
	139	OTHER CONDITIONS <u>rheumatism, bursitis, rheumatoid arthritis (knee fusion) (surg.)</u>	10	2	8
XIV.	14-	<u>CONGENITAL ANOMALIES: TOTAL</u>	1	1	0
	140	CONGENITAL ANOMALIES of Circulatory System	1	1	0
	149	OTHER CONDITIONS			
XV.	15-	<u>CERTAIN CAUSES OF PERINATAL MORBIDITY AND MORTALITY: TOTAL</u>	0	0	0
	150	BIRTH INJURY			
	151	IMMATURITY			
	159	OTHER CONDITIONS			
XVI.	16-	<u>SYMPTOMS AND ILL-DEFINED CONDITIONS: TOTAL</u>	18	10	8
	160	SYMPTOMS OF SENILITY			
	161	BACKACHE	4	4	
	162	OTHER SYMPTOMS REFERRABLE TO LIMBS AND JOINTS	13	5	8
	163	HEADACHE			
	169	OTHER CONDITIONS <u>intestinal flu</u>	1	1	
XVII.	17-	<u>ACCIDENTS, POISONINGS, AND VIOLENCE: TOTAL</u>	62	20	42
	170	LACERATIONS, ABRASIONS, and Other Soft Tissue Injuries	21	9	12
	171	BURNS	12	3	9
	172	FRACTURES	10	2	8
	173	SPRAINS, STRAINS, DISLOCATIONS	12	5	7
	174	POISON INGESTION <u>aspirin overdose (F-25)</u>	7	1	6
	179	OTHER CONDITIONS due to Accidents, Poisoning, or Violence			

			NUMBER OF INDIVIDUALS		
6.	2--	<u>SPECIAL CONDITIONS AND EXAMINATIONS WITHOUT SICKNESS: TOTAL</u>	758		
	200	FAMILY PLANNING SERVICES	43		
	201	WELL CHILD CARE	29		
	202	PRENATAL CARE	28		
	203	POSTPARTUM CARE	7		
	204	TUBERCULOSIS: Follow-up of inactive case	39		
	205	MEDICAL AND SURGICAL AFTERCARE			
	206	GENERAL PHYSICAL EXAMINATION	81		
	207	PAPANICOLAOU SMEARS	16		
	208	TUBERCULIN TESTING	1		
	209	SEROLOGY SCREENING	12		
	210	VISION SCREENING	54		
	211	AUDITORY SCREENING	66		
	212	SCREENING CHEST X-RAYS	4		
	213	GENERAL HEALTH COUNSELLING	378		
	219	OTHER SERVICES:			
		(Specify)			

PART III - NURSING SERVICE

GRANT NO.
07-H-000035-06-0(CS-H20 C-0)

TYPE OF SERVICE	NUMBER
1. NURSING CLINICS:	
a. NUMBER OF CLINICS _____	15
b. NUMBER OF INDIVIDUALS SERVED - TOTAL _____	165
2. FIELD NURSING:	
a. VISITS TO HOUSEHOLDS _____	788
b. TOTAL HOUSEHOLDS SERVED _____	92
c. TOTAL INDIVIDUALS SERVED IN HOUSEHOLDS _____	451
d. VISITS TO SCHOOLS, DAY CARE CENTERS _____	149
e. TOTAL INDIVIDUALS SERVED IN SCHOOLS AND DAY CARE CENTERS _____	109
3. CONTINUITY OF CARE:	
a. REFERRALS MADE FOR MEDICAL CARE: TOTAL _____	25
(1) Within Area _____	4
(Total Completed _____)	4
(2) Out of Area _____	21
(Total Completed _____)	9
b. REFERRALS MADE FOR DENTAL CARE: TOTAL _____	66
(Total Completed _____)	61
c. REFERRALS RECEIVED FOR MEDICAL OR DENTAL CARE FROM OUT OF AREA: TOTAL _____	0
(Total Completed _____)	0
d. FOLLOW-UP SERVICES FOR MIGRANTS, not originally referred by project, WHO WERE TREATED IN PHYSICIANS' OFFICES (Fee-for-Service) _____	2
e. MIGRANTS PROVIDED PRE-DISCHARGE PLANNING AND POST-HOSPITAL SERVICES _____	17
f. MIGRANTS ASKED TO PRESENT HEALTH RECORD Form PMS-3652 or Similar Form) IN FIELD OR CLINIC: TOTAL _____	153
(1) Number presenting health record. _____	41
(2) Number given health record. _____	138
4. OTHER ACTIVITIES (Specify):	

REMARKS

PART IV - SANITATION SERVICES

GRANT NUMBER
07-H-000035-06-0(CS-H20-C-0)

TABLE A. SURVEY OF HOUSING ACCOMMODATIONS

HOUSING ACCOMMODATIONS	TOTAL		COVERED BY PERMITS	
	NUMBER	MAXIMUM CAPACITY	NUMBER	MAXIMUM CAPACITY
CAMPS _____ OTHER LOCATIONS _____	21	518	21	518
HOUSING UNITS - Family: IN CAMPS _____ IN OTHER LOCATIONS _____	47	387	47	387
HOUSING UNITS - Single IN CAMPS _____ IN OTHER LOCATIONS _____	10	131	10	131

TABLE B. INSPECTION OF LIVING AND WORKING ENVIRONMENT OF MIGRANTS

ITEM	NUMBER OF LOCATIONS INSPECTED*		TOTAL NUMBER OF INSPECTIONS		NUMBER OF DEFECTS FOUND		NUMBER OF CORRECTIONS MADE	
	CAMPS	OTHER	CAMPS	OTHER	CAMPS	OTHER	CAMPS	OTHER
LIVING ENVIRONMENT:								
a. WATER _____	21	125			1	4	1	4
b. SEWAGE _____								
c. GARBAGE AND REFUSE _____								
d. HOUSING _____								
e. SAFETY _____								
f. FOOD HANDLING _____								
g. INSECTS AND RODENTS _____								
h. RECREATIONAL FACILITIES _____								
WORKING ENVIRONMENT:								
a. WATER _____	XXXX		XXXX		XXXX		XXXX	
b. TOILET FACILITIES _____	XXXX		XXXX		XXXX		XXXX	
c. OTHER _____	XXXX		XXXX		XXXX		XXXX	

* Locations - camps or other locations where migrants work or are housed.

PART V - HEALTH EDUCATION SERVICES (By type of service, personnel involved, and number of sessions.)

TYPE OF HEALTH EDUCATION SERVICE	NUMBER OF SESSIONS					
	HEALTH EDUCATION STAFF	PHYSICIANS	NURSES	SANITARIANS	AIDES (other than Health Ed.)	OTHER (Specify)
A. SERVICES TO MIGRANTS.						
(1) Individual counselling _____	15		850		10	
(2) Group counselling _____	5		8		5	
B. SERVICES TO OTHER PROJECT STAFF.						
(1) Consultation _____	40		33			
(2) Direct services _____						
C. SERVICES TO GROWERS:						
(1) Individual counselling _____			1			
(2) Group counselling _____						
D. SERVICES TO OTHER AGENCIES OR ORGANIZATIONS:						
(1) Consultation with individuals _____	20		12			
(2) Consultation with groups _____						
(3) Direct services _____						
E. HEALTH EDUCATION MEETINGS						
_____	5		3			

Emergency Food Assistance

Migrant Action Program was granted a subcontract from United Migrant's for Opportunity of Mt. Pleasant, Michigan, for emergency food funds for migrant farm workers throughout the State of Iowa.

This past June an agreement was signed by the Executive Directors of MAP and Muscatine Migrant Committee whereby we would supply them with a fund of \$6,000 to serve migrant farm workers in the Muscatine area.

The emergency food program has been of great assistance to migrant farm workers coming into the State of Iowa this year. There was very little work for them in Texas this past winter due to a very serious drought in the Rio Grande Valley. They arrived here with practically no funds, and many were suffering from nutritional deficiencies due to very poor diets during the winter months.

Because of the cutback in demand for migrant labor this year, many people had come to Iowa as "freewheelers." That is, they had not secured a contract before coming, but had come entirely on their own responsibility. In many cases, there were no jobs for them, and they moved on into Minnesota or Illinois.

Those who had a job waiting for them still had at least one week and sometimes longer to wait before they would have a paycheck. The purchase of food stamps with emergency food funds was a great help in getting these people on their feet financially.

The emergency food program has also been of assistance in our OEO program of settling families out of the migratory stream. When the families know we will be able to assist them with the purchase of food stamps for the first month, they are more secure in attempting to obtain employment, rent a home, and leave the migratory existence.

The statistical breakdown for the year 1971 is as follows:

1. Total number of families served	420
2. Total number of individuals served	2,068
3. Total expenditure for retail food	\$ 8,575.12
4. Total expenditure for food stamps	\$ 3,870.50
(Expenditure of \$3,870.50 + Bonus \$14,461.50 = \$18,332.00)	
5. Total program expenditure	\$12,445.62

Other Activities

NILE - Program for the Disadvantaged

The North Iowa Library Extension received a grant of \$15,328 to be utilized by three agencies: Migrant Action Program, North Iowa Community Action Organization, and Alcoholic Coordinating Center.

The basic object of this project is (1) to provide a vehicle to close the communication gap between the community goals and the target population and (2) to create an interaction to recreation, education, and communication through books, films, and other media in education. In this way, we will assist the migrant and seasonal farm worker and his family to participate in the established society goals.

Due to the uniqueness of the Spanish-speaking people, this project will try to establish a new concept, a new approach and a new strategy to assist the migrant educationally by combining his creative background and artistic potentiality values with the values in the community in order to adapt the migrant into his new environment. On the other hand, the North Iowa Library Extension will receive information and data concerning the Spanish-speaking people.

The current goal is to settle out of the migratory stream those who aspire for a more permanent way of living. Through this project, it is hoped to motivate the migrant, to remove the feeling of loneliness, and to stabilize the family unit.

Drug Abuse Mini-Grant

On November 30, 1971, MAP submitted an application for "Help Communities Help Themselves" grant under the Drug Abuse Education Act of 1970. Final approval was awarded on March 3, 1972.

A two-week training seminar will be conducted by the National Drug Center, U.S. Office of Education. MAP would hope to serve a three-fold purpose in dealing with the drug abuse problem among migratory workers in the State of Iowa: (1) accomplish an assessment/study of actual drug use among Mexican-American migrants in this State conducted by trained bilingual personnel, (2) introduce an "enlightenment program" through existing programs such as adult education, health services project, outreach workers, etc., and (3) refer those migrants who can be identified as having drug problems to existing agencies. These agencies direct themselves to drug problems; however, they do not have bilingual staff to interpret and relate those social problems peculiar to migrant workers.

Legal Assistance

Although no monies were allocated for a legal aid program, much effort was put forth by MAP to refer migrants to other programs, lawyers, and counselors for legal assistance. Problem areas ranged from minor traffic incidents to civil rights complaints. Legal assistance has been defined by MAP staff as a very definite need, and plans are underway to pursue this matter further.

Special Food Service

The U.S. Department of Agriculture's Special Food Service Program for children, which is authorized by a 1968 amendment to the National School Lunch Act provided food for the Children's Programs. Total amount of reimbursed expenditures was \$1,426.00.

This project contributed much toward improving the quality of the Children's Programs.

CHAPTER IV
STAFF TRAINING

During the course of this program year, MAP Director arranged for extensive training sessions. They proved very helpful in assisting all concerned to better understand concepts of funding sources, group efforts toward accomplishing objectives, identifying migrant needs, etc. Some of these include:

February 7-19, 1971--John Red Owl, Education Coordinator, attended a conference on child development at the University of Kansas in Lawrence.

April 5-6-7-, 1971--Educational Systems Corporation of Washington, D.C. assisted MAP to determine our needs in the areas of training and technical assistance.

May, 1971--Eleanor Rickman, Health Coordinator, attended 18-hours of course work given by the American Red Cross under the instruction of Bernice M. Street, R.N. of the Red Cross. A certificate as Home Nursing Instructor was issued at the completion of the course.

May 3-4, 1971--Dr. Warren Weinberg, M.D., Assistant Professor, Department of Pediatrics at Washington University, St. Louis, Missouri, conducted a two-day seminar. Dr. Weinberg provided training and orientation to teachers and aides who serve in Migrant Child Development Centers in Head Start, Group Day Care and Nursery projects.

May 21-22, 1971--John Red Owl attended the special training in Des Moines, Iowa on OCD Child Development, which was sponsored by HEW Regional Training Office of Kansas City for MAP staff.

May 25-26-27, 1971--Consultants from Educational Systems Corporation conducted training for MAP staff. The training session was held at the First United Methodist Church in Mason City. This was a special training for Manpower staff comprising of techniques, working with Unions, introduction, and job orientation. Mr. Richard Vollinger of Iowa State Employment Commission in Mason City was the speaker for one session and stated their office would cooperate with MAP Manpower staff.

June 7-19, 1971--Jaime Duran, Executive Director, attended a training session for CAA Directors in Harper's Ferry, Virginia. The training was conducted by the Leadership Institute for Community Development. A certificate of completion was awarded at the end of the training.

June 15, 1971--Mr. R. A. Joanis, EFMS Coordinator with United Migrants for Opportunity, Inc. of Mt. Pleasant, Michigan, met with MAP staff to discuss a new contract for Emergency Food and Food Stamps. A subcontract was discussed and agreed upon with the Muscatine Department of Social Services in Muscatine, Iowa, for serving the migrants in that area.

November 3-5, 1971--Jaime Duran attended a management training seminar in Hill City, Minnesota.

November 15-16-17, 1971--Joe Salomon, Consultant for Educational Systems Corporation conducted a training seminar with all staff on Human Relations. It was agreed that we would have an extension at a later date.

January 10-11-17-18, 1971--A seminar on Introduction to Social Security was held in MAP office and attended by all staff. The sessions were conducted by William Kelly and W. Lewis from Mason City Social Security Administration. A visit to the Social Security office was attended by the staff at the conclusion of the seminar.

February 14-15-16, 1972--Joe Salomon, Consultant for Educational Systems Corporation conducted a follow-up seminar on Human Relations for all MAP staff.

CHAPTER V
FINANCIAL REPORT

The following events were significant to the Bookkeeping Department this year:

The Bookkeeping Department was visited by a representative of Grants Management of Public Health Service in Kansas City, Missouri. At that time, assistance was provided in preparing the PHS Annual Expenditure Report.

A management review was performed at the request of the Executive Director by the OEO Regional Audit Division of Kansas City, Missouri. This process took approximately three weeks and was very helpful and informative. Their recommendations were forwarded to the Migrant Division of OEO in Washington, D.C. MAP has complied with the recommendations.

A team of evaluators from OEO Migrant Division, Washington, D.C. visited the MAP office. The Bookkeeping Department was found to be in order with a few suggestions which have been implemented.

MAP's yearly CPA financial audit was performed during August. This was found to be internally helpful to the Bookkeeping staff as well as informative to others.

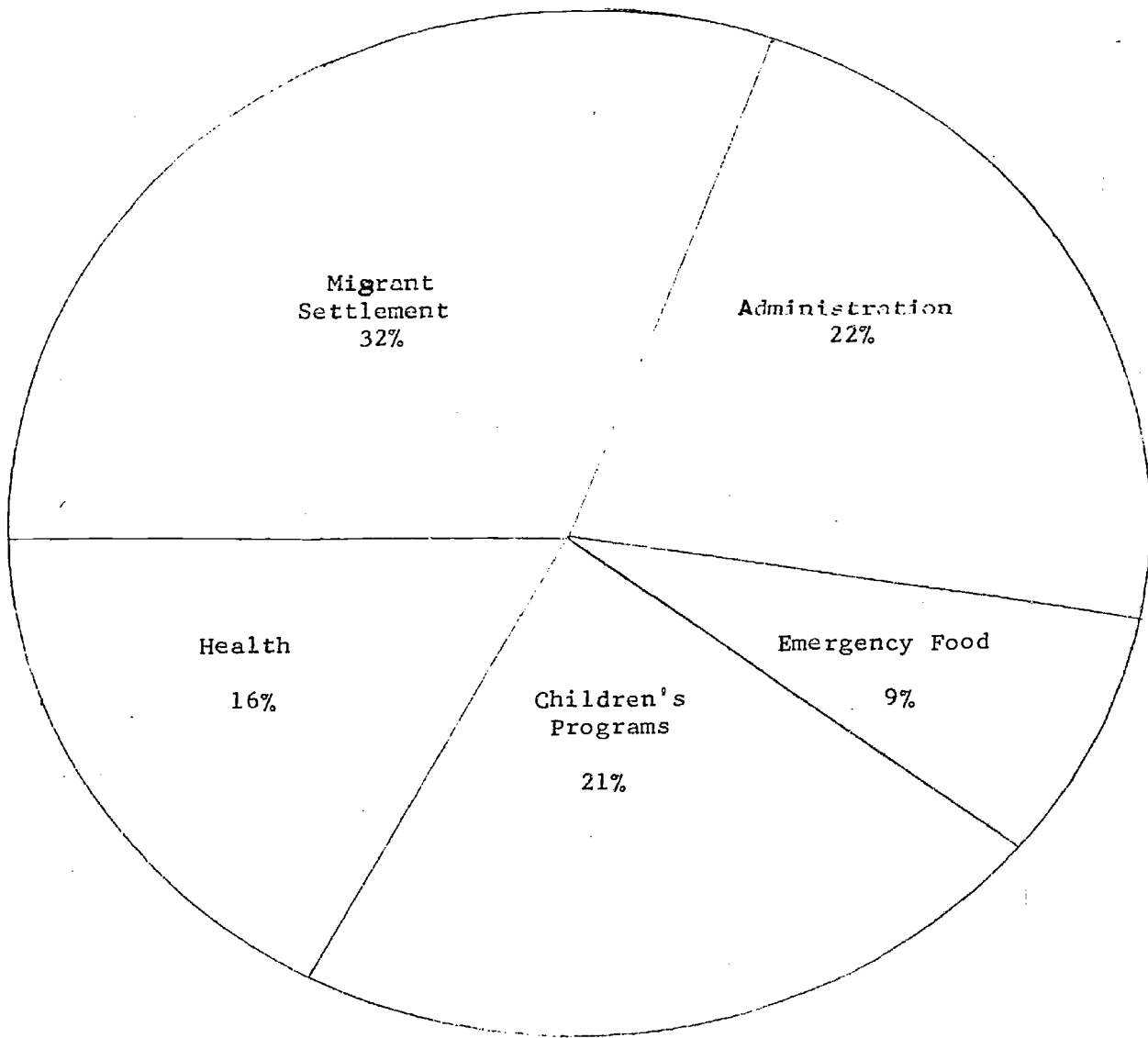
MAP receives funds from various governmental sources as well as private donations. Private donations are used for migrant assistance (emergency lodging, legal services, etc.) or other specific purposes as designated by the donors.

FINANCIAL REPORT

PURPOSE	FUNDING SOURCE	AMOUNT AWARDED
Program Administration and Migrant Settlement	OEO-Title III-B	\$147,765
Health Services	HEW-Public Health Service	36,397
Summer Head Start Education	HEW-Office of Child Development	46,800
Emergency Food	* UMOI	24,667
Nursing Service and Maternal and Child Health	* Iowa State Department of Health	8,439
Day Care	* Iowa State Department of Social Services	8,079
Food for Head Start Children	* Iowa State Department of Public Instruction	<u>1,426</u>
PROGRAM TOTAL		\$273,573

* Reimbursible Basis

FINANCIAL GRAPH OF FUNDS AWARDED



CHAPTER VI

STAFF EVALUATION OF THE MIGRANT ACTION PROGRAM, 1971

Midway during the course of its sixth year of operation, MAP chose a new direction in its approach to migrant problems. In summary, efforts were changed to emphasize self-determination and dignity of the settled migrant family rather than meeting the goal of settling 100 families which to the staff seemed unrealistic, if not inhumane.

Jobs were secured by the Manpower staff and 62 of these were filled by migrant heads of households. Job placement, however, afforded little time for follow-up activities once the family was settled. As a result, many families could not adjust themselves to the entirely new life style in which they were placed. It was realized by the staff that in order to effectively, permanently settle a family, major emphasis should be geared to the acclimation process. Thus, more follow-up activities resulted. Fewer families were settled, but those who stayed are secure and satisfied in their new communities and will most likely remain.

The next program year has taken into account emphasis on permanency of settlement and will concentrate on fewer families with much more follow-up activity. It is expected that the permanently settled families will themselves encourage further settlement and assume the role of instilling a spirit of self-determination among other migrant families wishing to settle.

The 1971 Manpower Project was highly successful in obtaining job opportunities for migrants. Many new employers have opened their doors to migrant laborers. Future job securement should be easier as a result of this year's project.

MAP, in 1971, was able to obtain more new sources of assistance for migrant workers than in any other year. Also, MAP received in-kind contributions from many persons who had previously not known about the program.

The Health component, Head Start, Day Care and Nurseries were highly successful as evidenced by this report. Head Start and Day Care realized problems in setting up a parent policy advisory council. This was largely due to the parent's hesitancy to interfere in a school-type situation. MAP staff learned that the parents must first be invited to participate in arriving at minor decisions whereby they might become more aware of their responsibility in the actual policy-making decisions. The initial introduction of parents to Head Start took place in 1971; it is expected that parents will be very instrumental in the implementation of Head Start during the coming year. Overall the Children's programs received an excellent rating from all outside evaluators of the project.

The MAP Health component was perhaps the most successful project during 1971. More health services were obtained for migrants than ever before. Additional monies were awarded to MAP as a result of this component. As evidenced by the context of this annual report excellent evaluations were received.

The Emergency Food money, although funded late, accomplished much good. A problem resulted in that this grant entailed too much work for the health coordinator to efficiently handle. This project should have a part-time coordinator.

Much training, both for staff and board members, was required during the course of this year. It is the feeling of the staff that all-in-all a better working atmosphere resulted from everyone striving to reach the same goals. MAP staff discussed objectives of the program for ten years hence. They are as follows:

Long-Range Goals and Objectives

1. Settlement of 300 migrant families in the State of Iowa.
2. Corporation (MAP) will be independent of government funds by at least 51 percent.
3. MAP will be controlled by ex-migrants by virtue of majority on staff and board.
4. MAP will become an accredited educational institution in the areas of children and adult education.
5. MAP will become a multi-purpose agency designed to deliver services to the community.
6. MAP will be established as a recognized research and evaluation agency.
7. As a centrally located program, MAP will establish an information and referral system for all concerned agencies.

Mid-Range Goals and Objectives

1. MAP will have an employee retirement program.
2. MAP will develop a comprehensive housing program which will satisfy the needs of 50 families.
3. MAP will become a licensed food stamp distributor for the State of Iowa.
4. MAP will settle 100 migrants.
5. MAP will establish a Mobile Health Clinic which will serve the needs of migrant families throughout the State.
6. MAP will develop for distribution relevant remedial and ABE curriculum materials.
7. MAP will establish two permanent year-round child development centers.
8. MAP will become prime sponsors for Family Planning Services in the State of Iowa for migrants.

Short-Range Goals and Objectives

1. Settle 30 families.
2. Adequately prepare through training a nucleus migrant group to become self-sufficient after one year.

3. Create a situation whereby migrant groups will be implanted into small communities in order to avoid ghetto environment.
4. Prepare the nucleus groups to become contributing citizens in a relatively short time.
5. Prepare the community to accept the major responsibility of migrant settlement.
6. Spark a multiplier effect whereby other families will settle themselves comfortably around the nucleus groups.
7. Provide skill training/basic educational opportunities for migrants outside the nucleus groups.
8. Provide a responsible communication system between the Migrant Action Program and the migrants.
9. Provide a catalog of job training opportunities for unskilled persons through local employment offices.
10. Construct a project that will ensure accomplishment of long-range objectives in and of itself with or without the Migrant Action Program.
11. Provide child day care services to migrants in Southern Minnesota by delegate agency arrangement with Tri-Valley CAA.
12. A comprehensive career development program for staff members.
13. Provide services to migrants working in industries related to agriculture by submitting proposal to proper funding agency.

Although the objectives listed may change, all staff agree that for the first time a unity and conformity of plans have been made which will prevent misunderstandings in the coming year and thereafter as far as the Migrant Action Program is concerned.

APPENDIX

MIGRANT ACTION PROGRAM
Board of Directors
 1971

NAME	AGENCY OR GROUP REPRESENTED
Lyle Bancroft, Chairman	National Association for the Advancement of Colored People
Peter Hart, First-Vice Chairman	Upper Des Moines Opportunities, Inc.
Robert Tyson, Second Vice Chairman	Governor of Iowa
Mary Hagen, Secretary	North Iowa Community Action Organization
Herb Jacobs, Treasurer	Mayor of Mason City
Nick Aguilera	Migrant Representative
Miguel Alcaarez	Migrant Representative
Charlie Andrews	Mason City Catholic Parishes
Father Elliot Blackburn	Mason City Ministerial Association
Robert Brower	State Department of Social Services
Robert Chesher	Iowa Bureau of Labor
William Eno	Sugar Beet Growers Association
Max Escobedo	Iowa Employment Security Commission
Paul Espinosa, Jr.	Migrant Representative
Nora Guerrero	Migrant
Rev. Paul King	Iowa Council of Churches
Richard Ramirez	Migrant Representative
Alex Ramon	Migrant Representative
Lola Rhem	Head Start Policy Council
Gloria Thompson	Migrant Representative
James P. McGuire	Legal Consultant (No longer with Program)

MIGRANT ACTION PROGRAM
Staff
1971

OEO
 Year-Round Employees

NAME	POSITION	LOCATION
Jaime Duran	Executive Director	Mason City
Irvin Van Gerpen	Deputy Director	Mason City
Mara Lea Hetherington	Executive Secretary	Mason City
Larry D. Cline	Accountant	Mason City
Jose Guzman	Job Developer	Mason City
Lyla Edison	Secretary	Mason City
Jennie Garcia	Receptionist Typist	Mason City
Arturo Garza	Job Developer	West Liberty
Eustolia Partida	Outreach Worker	West Liberty
Jose Garcia	Outreach Worker	Estherville
Tom Vega	Custodian (Part-time)	Mason City
* Sheryl Burmaster	Executive Secretary	Mason City
* Virginia Alvarez	Receptionist Typist	Mason
* Margaret Flores	Receptionist Typist (Part-time)	Mason City
* Carlos Cansino	Manpower Specialist	West Liberty
* Sanjuanita Dominguez	Secretary	West Liberty
* Janice Hernandez	Secretary	West Liberty
* James Collison	Manpower Coordinator	Mason City
* Rosa Villarreal	Outreach Worker	West Liberty
Gerald Needham	Job Developer	Emmetsburg

* No longer with Program

NAME	POSITION	LOCATION
* Max Escobedo	Outreach Worker	Mason City
* Roy Abrego	Outreach Worker	Mason City
* Angelita Espinosa	Custodian (Part-time)	Mason City
* Joe Diaz	Custodian (Part-time)	Mason City
* James Kraus	Custodian (Part-time)	Mason City

HEW - MIGRANT HEALTH SERVICE
Year-Round Employees

NAME	POSITION	LOCATION
Eleanor Rickman	Health Coordinator	Mason City
Eleanor Seeberger	Project Nurse	Mason City
Josephine Muck	Bookkeeper	Mason City
	Summer Employees	
Helen Curtis	Public Health Nurse	Mason City
Claire Christopherson	Student Nurse	Mason City
Jane Pattison	Public Health Nurse	Mason City

* No longer with Program

HEW - HEAD START/DAY CARE PROGRAM
Year-Round Employees

NAME	POSITION	LOCATION
* John Red Owl	Education Coordinator	Mason City
Terrence Ambrose	Education Coordinator	Mason City
Josephine Muck	Bookkeeper	Mason City
Summer Employees		
Gary Siguenza	Parent Coordinator	Mason City
Janet Schildroth	Teacher	Reinbeck
Connie Miller	Public Health Nurse	Reinbeck
Patricia Peters	Aide	Reinbeck
Gloria DeLao	Aide	Reinbeck
Jeanine Frier	Aide	Reinbeck
Raymond Vega	Supervisor	Mason City
Janice Gaarder	Teacher	Mason City
Mary Ann Vickers	Teacher	Mason City
Juanita Gonzales	Cook	Mason City
Delphina Martinez	Cook	Mason City
Dolores Rabago	Aide	Mason City
Alice Riojas	Aide	Mason City
Maria Rivera	Aide	Mason City
Sheila Gray	Aide	Mason City
Rose Mary Garza	Aide	Mason City
Beatrice Esquivel	Aide	Mason City
Richard O'Banion	Aide	Mason City

* No longer with Program

NAME	POSITION	LOCATION
Gwendaly Mayberry	Supervisor	Buffalo Center
Cheryl Beenken	Teacher	Buffalo Center
Dolores Martinez	Cook	Buffalo Center
Amelia Villela	Cook	Buffalo Center
Isabel Villela	Aide	Buffalo Center
Zoila Sifuentes	Aide	Buffalo Center
Rochelle Weinkauff	Aide	Buffalo Center
Shirley Miller	Public Health Nurse	Buffalo Center
Joy Robinson	Public Health Nurse	Buffalo Center
Anne Garza	Teacher	West Liberty
Carmen Garza	Aide	West Liberty
Elena Martinez	Cook	West Liberty
Velia Munoz	Cook	West Liberty
Alva Olivo	Aide	West Liberty