

**The Personal Responsibility and Work
Opportunity Reconciliation Act of 1996:
Implications for Hispanic
Migrant Farmworkers**

*by Marvi S. Lacar
Kalamazoo College*

Working Paper No. 53
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Marvi Lacar graduated with a Health Sciences degree in Kalamazoo, Mich., where she completed her undergraduate thesis on “The Personal Responsibility and Work Opportunity Reconciliation Act of 1996: Implications for Hispanic Migrant Farmworkers’ Access to Federal and State Benefits.” While her undergraduate project was mainly quantitative research, it also included photographs of the migrant camps’ conditions. She has taken up graduate studies in photojournalism. Lacar is currently in the Philippines finishing her master’s thesis on Muslim Mindanao for the University of Texas, Austin.

All photographs used in this publications were taken by the author, Marvi Lacar. They have been used with permission.

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The Personal Responsibility and Work Opportunity Reconciliation Act of 1996: Implications for Hispanic Migrant Farmworkers

Preface

My interest in the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) grew out of my summer volunteer work with Kip Adrian at the Bangor Intercare Clinic. In line with my Health Science major and Spanish minor, I intended my Senior Individualized Project (SIP) to be a study of the problems of access to health care services among Hispanic migrant farmworkers. However, by helping Kip in conducting Early and Periodic Screening, Diagnosis and Treatments (EPSDT's) at the migrant daycare centers in Southwest Michigan, I became more interested in the issue of welfare reforms and the concerns of the migrant workers with regard to the curtailment of their federal benefits.

My interest in photography arose from opportunities opened by foreign study and internship programs, which allowed me to capture other "worlds" beyond the confines of the academe. The photographs accompanying this report portray various aspects of the migrants' living conditions during their transient stay here in Michigan. I share them with the readers in hopes that they will raise the public's awareness of the migrants' concerns. Given, however, the apprehensions of some respondents in this study, I was limited to certain boundaries and subjects for these photographs. While a few images do portray some of the ill conditions at the camps, most are of Lalo (6), Nono (8), Sha-Sha (2), Janie (15) and Debbie (14) – children who willingly showed me around the camp and farm. Migrant workers still remain a disenfranchised group in the American political system, but ironically, political rhetoric is not yet a concern to these children.

A crew leader once commented that regardless of the grade that I would get on this paper... "*ella va pa'riba, mientras nosotros seguimos así*" (she will be on her way up while we remain this way). This paper may never change the welfare system nor enlighten lawmakers. Several studies have already been conducted by various government agencies, migrant advocates, and other political actors regarding the implications of the PRWORA. Lawmakers, therefore, are not in the dark on this issue. Nevertheless, it is my goal to relate the Act's harsh provisions with faces, names, and stories of people who are adversely affected by the law. While I may never know how far their stories will go, I hope readers will comprehend the consequences of the 1996 Act. Although we may remain aware of our individual limits, I hope we

also acknowledge the potential strengths that may be gained from combined efforts to mobilize for change.

Introduction

America's agribusiness employs 1.6 million migrant and seasonal farmworkers who toil for low wages under high risk conditions. Migrant and seasonal farmworkers face high health risks due to labor, geographic, economic, as well as cultural, and sociological factors. For these reasons, many migrant workers rely on federal, state, and community agencies not only for medical and health related assistance but also for benefits necessary for their maintenance in daily affairs. However, recent welfare reforms (passed by the 104th Congress and signed into law by President Bill Clinton on Aug. 22, 1996) placed new restrictions on the types of benefits available to both legal and undocumented immigrants. Since a significant percentage of migrant workers are not United States citizens, many are affected by the new law.

Parts I and II of this paper include an overview of the Title IV provisions in the Personal Responsibility and Work Opportunity Act of 1996 and its implications on immigrants' access to federal and state benefits; more specifically health care access among migrant farmworkers. Part III includes empirical data, testimony, and observations which illustrate the socio-economic background of farmworkers in five Southwest Michigan camps and an assessment of the Act's impact on them.

Part I

Access to Government Benefits

America's Farmworkers

The United States agricultural economy (fruit, vegetable, and horticulture) is dependent on the estimated 1.6 million migrant and seasonal farmworkers.¹ Generally of Hispanic descent,² most farmworkers are either U.S. citizens, legal permanent residents (LPR), or H-2A visa holders.³ While sources have pointed out the influx of undocumented farmworkers in recent years, this group remains a minority among the migrant and seasonal farmworker population.

Over the last decade, 85% of U.S. produce has been hand-harvested and cultivated by farmworkers.⁴ For their labor, farmworkers earn annual wages of less than \$7,500,⁵ a figure below the 1996 U.S. Census Bureau estimated poverty threshold of \$7,992.⁶ While the latter amount was estimated for an individual, it must be pointed out that farmworkers' wages often support themselves and their families. Even combined salaries of working members may not suffice to support the entire household. Furthermore, since farm labor directly depends on the weather, harsh weather during the season translates into a lower annual income. For example, a farmworker's wife, María Diaz, commented that after paying Texas property taxes, and utility and rent bills, they hardly had enough left to support their four children. The recent curtailment of her Food Stamp benefits made this year especially tough for their family.⁷

Bruce Goldstein and Shelly Davis, of the Farmworker Justice Fund stress that government programs, such as Food Stamps, Medicaid, and Unemployment Compensation, are the government aid programs most extensively used by farmworkers.⁸ With approximately 60% of farmworkers living below the poverty line,⁹ a polemic issue concerning migrant and seasonal farmworkers' access to federal benefits arises from the implications of the PRWORA of 1996. A result of President Clinton's promise to "end welfare as we know it," the Act "was intended to save dollars (economic) and reduce dependency¹⁰ (ideology)."¹¹ However, the estimated savings from the welfare cuts are disproportionately against immigrants who are currently paying \$25 billion more each year in taxes than the benefits they receive¹² and will constitute \$23.7 billion of projected savings over the next six years. This translates to 44% of the projected \$53.4 billion federal expenditures over 1997-2002.¹³ Advocates stress the inequity of the welfare cuts by stressing that "only about 5% of immigrants receive welfare – in a country where non-citizens make up approximately 9% of the population."¹⁴

The PRWORA of 1996

Under Title IV, the PRWORA categorizes immigrants as either "qualified" and "unqualified" for federal public benefits.¹⁵ Furthermore, qualified immigrants who entered the country on or after Aug. 22, 1996¹⁶ are subject to additional restrictions such as a 5-year bar on "federal means-tested benefits" unless they fall under the "exempt" category, pass the "deeming" process or qualify under the "40 quarters or 10 years work status" in the

United States. The PRWORA placed major public benefit programs of the federal government under the States' jurisdiction. Aid to Families with Dependent Children (AFDC), which constituted the basic principle of welfare for the past 60 years, has been terminated. In lieu of AFDC, Temporary Assistance for Needy Families (TANF), or a block grant program, has been allocated to the states. The finite allocation of funds may prompt states to change their existing eligibility criteria to a more restrictive one. Moreover, states and localities are prohibited from providing state and locally funded programs to all "qualified aliens" and non-immigrants¹⁷ unless the state enacts a law after Aug. 22, 1996 stating otherwise. They may also deem new immigrants (with certain exemptions) with enforceable affidavits of support effective since March of 1997. The welfare of unqualified immigrants is left to the States' discretion. As of Jan. 1, 1997, states were given the authority to limit or deny Medicaid, TANF, Social Security Block Grants (such as child care and services for the elderly), and "state public benefits" to immigrants. While states may opt to aid legal immigrants under these state-funded programs, and may choose to appropriate state or local funds for those who lost federal benefits because of new eligibility rules, the question of the availability of funds arises once again.

Definition of Terms

To obtain a better understanding of the implications of the Act for immigrants, it is necessary to define the terms and provisions under Title IV.

*Qualified immigrants*¹⁸

Qualified immigrants include:

- Legal Permanent Residents;
- Refugees¹⁹;
- Asylees - Persons already in the U.S. illegally, yet who petition for asylum status. They must show a legitimate "fear of persecution." This status is seldom granted by the Immigration and Naturalization Service (INS);
- Persons with deportation being withheld - A status seldom granted by the INS. A person (who is not defined as a refugee nor an asylee) must provide clear proof of persecution in the country of origin;
- Persons paroled for at least one year (but only for the first year of parole) - Temporary stay for persons who enter the U.S. for reasons of public interest (e.g. very sick relative or crisis in native country);

- Persons granted conditional entrant status - generally granted to persons from Middle Eastern countries;
- Domestic violence victims who have applied to petition under the Violence Against Women Act. The victim may no longer be living in the same household as the batterer and there must be a “substantial connection” between the domestic violence and the need for benefits;
- Cuban entrants.

Unqualified immigrants

All lawful immigrants who do not fall under the above category and all undocumented aliens are considered “unqualified.” Present Under Color of Law (PRUCOL) aliens, who did not previously belong under this category, are now classified as unqualified aliens. PRUCOL is a term defined by regulation and court decisions and used by some benefit programs to define aliens previously eligible for public benefits even though not lawfully present in the country.²⁰ While not an exhaustive list, PRUCOL aliens may be: aliens granted indefinite departure; aliens residing in the U.S. under orders of supervision; aliens who have lived in the U.S. continuously since Jan. 1, 1972; aliens granted stays or suspension of deportation; and other aliens whose departure INS does not contemplate enforcing.²¹

Federal Public Benefits

Federal Public Benefits include:

- any grant, contract, loan, professional license, or commercial license provided by a U.S. agency or by appropriated U.S. funds; and
- any retirement, welfare, health, disability, public or assisted housing, post-secondary education, food assistance, unemployment benefits, or any other similar benefit for which payments or assistance are provided to an individual, household, or family eligibility unit by an agency of the United States or by appropriated funds of the United States.²²

To date, federal agencies have not issued regulations defining which specific programs are “federal public benefits.”

Federal Means-Tested Benefits²³

- Supplemental Security Income (SSI) - cash benefit program for low-income, aged and disabled²⁴;
- Food Stamps - funded by the United States Department of Agriculture. Food Stamps allows recipients to purchase food with coupons as opposed to cash.²⁵ Another controversial issue deals with the provisions under section 824 of the Act which disqualifies “able-bodied adults (18-50 years) with no dependent children and who have received benefit while unemployed and not in a work program for three or more months during a 36-month period.”²⁶ This requirement would be a particular disadvantage to migrant workers who work on the average of 29 weeks per year. It will eventually penalize low-wage workers who only resort to Food Stamps during periods of unemployment²⁷;
- Temporary Assistance for Needy Families (TANF) A block grant program which provides assistance and work opportunities to needy families and replaces AFDC and Job Opportunity and Basic Skills Training (JOBS) programs²⁸;
- Medicaid (Title XIX) - Funded by federal and state government. Medicaid provides inpatient/ outpatient hospital care, physician services, laboratory and x-ray services for needy people.²⁹

Immigrants “Exempt” from the 5 year bar³⁰

- Refugees, asylees, and those granted withholding of deportation (but exempt only during the first 5 years in the U.S.);
- Veterans and aliens on active duty, their spouses, and unmarried children under age 21;
- Cuban-Haitian entrants who are qualified (i.e. paroled into the U.S. for at least one year; and
- Certain Amerasians - children fathered by U.S. citizens during the years of U.S. conflict in Southeast Asia (i.e. Vietnam War and years preceding).

Programs exempt from the 5-year bar³¹

- Emergency Medicaid;
- Public health assistance (not funded by Medicaid) for immunizations and testing/ treatment of symptoms of diseases;
- Short-term non-cash emergency/disaster relief;
- School Lunch Act programs, WIC³² and other Child Nutrition Act programs;
- Foster Care and Adoption Assistance payments (foster and adoptive must be qualified alien);

- Higher education loans and grants;
- Means-tested program under Elementary and Secondary Education Act programs;
- Head Start;
- Job Training Partnership Act programs;
- All refugee program activities for Cuban and Haitian entrants;
- Programs that fall under the specified provisions issued by the Attorney General for necessary protection of life or safety.³³

“Deeming” Process

The new rules expand the length of deeming provisions for future immigrants as well as apply stricter types of assistance covered by sponsor deeming.³⁴ Under deeming, an immigrant qualifies for a program if the combined income and resources of the immigrant, the sponsor (person who signed an affidavit of support), and the sponsor’s spouse is below the program’s resource and income requirement. Unlike past statutes, the law also deems without making allowance for the needs of sponsors and spouses.³⁵ Consequently, most newly arrived, sponsored immigrants will not be qualified for any federal means-tested benefits even after their five year stay in the United States. Most will have to wait until they will have obtained proof of 10 years, or 40 quarters, of work in the country.

Programs exempt from state and local deeming option³⁶

- Emergency medical assistance;
- Emergency disaster relief;
- National school lunch benefits;
- Child nutrition act benefits;
- Immunizations for and testing and treatment of communicable diseases (not funded by Medicaid);
- Foster care and adoption assistance;
- Programs determined by the state Attorney General for safety.

40 Quarters Exemption

Immigrants who can prove that they have been working in the United States for at least 10 years, or 40 quarters, are exempt from the 5-year ban. Farmworkers may include the number of years worked by their spouse, and dependent children can use those of their parents. Since the Social Security Act’s earning threshold for a qualifying quarter is low, it is assumed that many migrant and seasonal farmworkers will qualify for this provision.³⁷ However, during the interviews with migrant

workers in Michigan, Camp Health Aides, and migrant advocates during the Midwest Farmworker Stream Forum,³⁸ they repeatedly stressed the complications with the “40 quarters” provision.

According to Elvira Montero, Case Manager of the Indiana Health Centers, she encounters cases wherein farmworkers have lost their papers during the move through the migrant stream. On other occasions, migrants who have been working in the U.S. for more than 10 years may not have the necessary papers since their employers never reported their employment to the Social Security Administration – a practice prevalent in agribusiness. Farmers often report less than 10 employees (including crew leaders³⁹) in order to qualify as a “small business.” In turn, crew leaders hire the farmworkers who will eventually be considered “self-employed” and are not eligible for unemployment benefits. While this practice benefits the farmers, who are no longer burdened with unemployment benefit payments, farmworkers are left without records with the Social Security, the Internal Revenue Service, and Unemployment Insurance to prove their work history. One farmworker, who has been working and residing in the U.S. for the past 20 years, fell victim to this practice and the new welfare reforms. With a wife, four children, and property taxes in his home state of Texas, he recently became ineligible for Food Stamps and Medicaid.⁴⁰

To date, the full impact of the welfare reforms on immigrants is unknown. There have been disturbing incidences such as that of Ignacio Muñoz’s death on March 17, 1997. Muñoz, a 75-year-old disabled farmworker, committed suicide after he received notice of the government’s intention to terminate his SSI benefits. Ironically, Muñoz claimed to have worked in agriculture for 40 years, but his employment was never documented by the Social Security Administration.⁴¹

State Plans

The Act has given states substantial rights in determining eligibility for immigrants for TANF, non-emergency Medicaid, and Social Services Block Grants (SSBG). SSBG, designed to meet the needs of families and individuals within the States’ jurisdiction, is allotted to the States which are in turn fully responsible for determining the use of the funds. The new law reduced SSBG by 15% to meet deficit reduction targets.⁴² Consequently programs, such as child care, home-based services, child protective services, special services for disabled, social support services, adoption services, adult

protective services, foster care services for children, and prevention and intervention services,⁴³ are affected. After Jan. 1, 1997 states may choose to provide, limit, deny, or deem these programs for current immigrant residents. Since new immigrants are subject to a 5-year bar, states may later have the option to bar until citizenship is acquired.⁴⁴ The states, however, cannot “place greater restrictions on alien eligibility than comparable federal programs.”⁴⁵ Louisiana and Wyoming have already passed laws denying qualified aliens Medicaid benefits — a legally binding decree, according to the Act. The latest report by the Immigration Policy Project at the National Association of State Legislatures indicates that:

...most states seem to be ...providing assistance to those here prior to enactment; denying benefits to new arrivals; and grappling with providing services for populations considered the most vulnerable.⁴⁶

Since the release of that July 15, 1997 report, out of the 50 states, the District of Columbia, the territories of Guam and Virgin Islands, and the Commonwealth of Puerto Rico, only Alabama has chosen to deny TANF to all immigrants.

Denying state and locally-funded benefits to immigrants, however, is a decision that may be challenged for its constitutional violation. In 1971, the U.S. Supreme Court ruled, in *Graham v. Richardson*, that “state welfare benefits cannot be denied to immigrants under the Fourteenth Amendment.”⁴⁷ The Court held that states may not classify persons for public benefits on the grounds of “suspect classification” such as alienage, race, or ethnicity, unless they can prove “compelling government interest.”⁴⁸ Reducing welfare spending, however, was not considered as one. The 1976 case of *Matthew v. Diaz* established the federal government’s plenary powers over immigration law. The Court ruled that the federal government, and not the states (which hold no legal rights to unequally treat citizens and legal immigrants), can make distinctions between citizens and aliens. Congress claims it has the right to prevent states from offering public benefits (unless states pass a new law after Aug. 22, 1996). This may be a violation of the Tenth Amendment, which “prohibits Congress from usurping powers...” reserved to the states.⁴⁹ At the state level, the Michigan Supreme court ruled, in *El Souri v. Department of Social Services*, that the state cannot deem immigrants since this was considered suspect classification.⁵⁰ Taking into account constitutional

provisions and state obligations, Michigan and 18 other states submitted general plans in October 1996 in order to get the block grant money started.⁵¹

Michigan Welfare Reforms

The Act permits the state of Michigan to continue its welfare reforms, *To Strengthen Michigan Families*, initiated in 1992. Gov. John Engler lauds (in an open letter) that state reforms have “proven [its] success by helping families in need to become self-sufficient, by saving taxpayers dollars, and by giving opportunity and hope to children growing up in poverty.”⁵² However, reform critics point out the over-optimistic and superficial assumptions of its guiding principles. According to Dr. Fayyaz Hussain, in “Social Welfare Reforms in Michigan: Intent and Implications for the Poor,”:

The first guiding principle assumes that there is work available for everyone in Michigan and that there are people, able bodies, on welfare who simply do not work. Such people need encouragement to change their behavior. In other words, it is a behavioral problem rather than an economic one. The second... assumes that the traditional family structure with two married people and children is an answer to the problem of poverty. The third... assumes that people on welfare are irresponsible and they should be taught responsibility through social contracts and family planning.⁵³

Dr. Hussain adds that achievements, according to progress reports released by the Michigan Family Independence Agency (MFIA), are too small and insignificant. Furthermore, critical factors, such as the decrease in unemployment rates in Michigan during these past years, were not discussed. Critics, like Dr. Hussain, stress the adverse implications of the welfare reform for disenfranchised and needy groups such as poor children, poor women, and minorities.

For the purposes of this study, I focused on welfare reform provisions that will affect immigrants, specifically migrant workers.

According to Manuel Gonzalez, Migrant Services Director at the MFIA, the state of Michigan has decided to follow the federal government’s suggestions with regard to immigrant eligibility. The three previously discussed court cases, however, pose as a precedent for

Michigan's state plans. Michigan cannot discriminate against legal immigrants for both state and locally funded programs, a decision in compliance with the Fourteenth amendment. In addition, the State may not deem new immigrants (entering the country on or after Aug. 22, 1996) for state and locally funded benefits.

In terms of state-funded cash benefits, states seem to be either expanding their general assistance program, their SSI-supplement or disability program, or creating a new program.⁵⁴ The 1995 Michigan reforms have eliminated the General Assistance program and replaced it with State Family Assistance (SFA) and State Disability Assistance (SDA) which, according to MFIA fact sheets, are allotted \$44.6 million for FY96.⁵⁵ This figure translates to less than 1% of the \$7.6 billion appropriations for that year.

PART II

Farmworker Health and Medical Benefits

Farmworker Health

Farmworkers are generally exposed to hazardous work, harsh living conditions, and economic, social, and cultural factors which place them at a lower health status compared to the general population.⁵⁶ The U.S. Department of Agriculture ranks farm labor as one of the most accident-prone industries in the U.S., second only to mining.⁵⁷ According to the Environmental Protection Agency, about 300,000 farmworkers suffer from acute pesticide poisoning, which may cause eye problems, skin irritation respiratory ailments, and even death annually.⁵⁸ Prolonged exposure to the sun can also lead to heat stress, cataracts and other eye problems, and skin malignancies.⁵⁹

Lack of basic amenities in the fields also aggravate the occupational health risk of farmwork. Certain regulations within the law, which were created to protect small businesses, are often a disadvantage for farmworkers. OSHA⁶⁰ regulations, for example, only require employers of 11 or more employees to provide drinking water, handwashing facilities, and toilets, while farms with less than 10 workers are exempt. Employers bound to such regulations still often do not comply, as discovered by the 1990 OSHA field inspections. Sixty-nine percent were found to be in violation of field sanitation.⁶¹ Other times, it is the relationship between the crew leaders and the farmers that poses problems. Crew leaders sometimes do not allow farmworkers to get off work to seek medical help. "It is an assembly line," comments one health aide supervisor. "If one worker makes less that day, so will the crew leader."⁶²



As his mother does the laundry, this baby plays with the drain water.

Unsanitary conditions within the migrant camps and the absence of amenities create a morbid environment prone to communicable diseases such as hepatitis A.⁶³ According to Tim Bishop, Clinical nurse manager at a Community Rehabilitation Center. "It is evident that the substandard living conditions contribute to, and perpetuate the poor hygiene... access to soap and warm water was found to be limited at best."⁶⁴ Referring to one of the camps studied (Camp A, with approximately 100 individuals including infants and children), he said:

There were no sinks in the housing units until this year (1997)... they had a smaller heater and only cold running water. Community bath houses for men and women were located in the center of the camp with a total of 12 showers. There are 11 self-contained toilet units in the camp that are cleaned out once or twice a week.⁶⁵



The women's showers in Camp A.

At that same camp, water from the laundry drained into an open area where many children often play. This is a particular health and sanitation concern since pools of stagnant water are often breeding grounds for microbes that would cause diarrhea and other infectious diseases.



The laundry area in Camp A.

While some farmworkers have decent shelter, most live under dire conditions.⁶⁶ The law itself is not very compelling in its requirements for farmers to provide decent living amenities for their employees as stated by the Department of Public Health Bureau of Environmental and Occupational Health Agriculture:

“Habitable space” means a room or enclosed floor space that is used or intended to be used at camp for living, sleeping, cooking, or eating purposes, but does NOT⁶⁷ mean any of the following: a bathroom; toilet compartment; laundry; pantry; foyer; connecting corridor; closet; or storage space.⁶⁸

Consequently, some farmers are able to obtain agricultural camp license with minimal, and sometimes insufficient, facilities. Moreover, some farmers are often unwilling or financially unable to maintain proper housing for a place that will be only occupied for a few months. As a result, most farmworkers live in unsanitary and crowded houses which often lack safe drinking water and bathing or laundry facilities.⁶⁹

Transient and poor, some farmworkers at times cannot afford to seek health care, or miss work; low literacy and language barriers are added factors limiting access to health care services. Most adult workers, according to the MFIA, have obtained a sixth grade education while the youth have improved by only two levels higher.⁷⁰ Evidence of the disturbing consequences of low level education is apparent in a 1988 study of farmworkers in Georgia. Among the surveyed populations, one-third to one-half believed that AIDS can be transmitted by sharing a drinking glass or swimming in a public pool. In Virginia, 52% of the farmworker-respondents thought that AIDS could not be transmitted from women to men.⁷¹



Janie and her mother dress up for a friend's wedding.



Janie, 15, visits with neighbors before going to a wedding.

Social and cultural factors may also aggravate the problem. Sometimes husbands do not give their wives permission to leave work for economic or personal reasons.⁷² A hepatitis breakout in one camp convinced one mother not to admit her son to the hospital for fear of being ostracized by other families who might blame her family as the source of the epidemic.⁷³ Religious beliefs may also play a strong role in spreading certain communicable diseases. The Georgia survey conducted showed that 78.3% of the farmworker-respondents had never used condoms. Not only was this issue influenced by Catholic religious restrictions regarding family planning, but also by the tacit and negative association between condoms and extramarital sex or prostitution.⁷⁴



While their parents prepare to migrate, Nano (8) snacks on an ice cream bar while Sha-Sha (2) takes her afternoon nap.

In general, migrant and seasonal farmworkers depend on Community/Migrant Health Centers (C/MHC) for medical services. However, due to the lack of funding for migrant clinics and the remoteness of most camps, the migrant and seasonal farmworker population receives inadequate access to primary and preventive care. As a result, 13.8% of the “medically underserved” are migrant and seasonal farmworkers.⁷⁵ In Michigan only 11% of the 1,414,775 medically underserved population are reached by C/MHCs. Among this group, migrant workers are third, ranking only behind “unemployed persons” (first) and the “frail elderly” (second).⁷⁶

PRWORA and Access to Health Care Benefits

With only 24% of farmworkers reported to receive employer-provided private medical insurance,⁷⁷ and an annual family income substantially lower than the national poverty threshold, how does the Personal Responsibility Act affect migrant workers’ access to health care? Richard Brown, President of the American Public Health Association articulates that:

The Act will reduce access to cost-effective primary care and prevention and force immigrants to use expensive emergency and hospital services at increased cost to tax payers and poorer health outcomes for immigrants and the larger community.⁷⁸

While there have been no changes in the basic structure of the Medicaid program, changes in the eligibility rules created by the PRWORA will affect Medicaid recipients. Besides the creation of

“unqualified” and “qualified” alien categories, and the imminent problems with the “40 quarters” and “deeming” provisions, critics and migrant advocates are also concerned about the termination of the link between SSI and Medicaid for current and new qualified aliens. The Balanced Budget Act of 1997 states that immigrants receiving SSI as of Aug. 22, 1996 may retain their SSI and Medicaid benefits. Those who entered the country before the date of enactment may be able to receive SSI benefits in the future. SSI and Medicaid eligibility was extended from five to seven years for refugees, asylees, and those granted withholding of deportation. Cuban and Haitian Immigrants are considered “qualified” aliens, granting them 5-year eligibility for food stamps, TANF, and SSBG (another source for child care funds) and 7-year eligibility for SSI and Medicaid.⁷⁹ The Balanced Budget Act is seen by advocates as an improvement from the restrictions created by the PRWORA that would have harmed more poor women, children, and medically needy persons. However, it does not change previous restrictions -- such as the prohibiting the use of Medicaid funds for public health immunizations and public health services for testing and treatment of communicable diseases for non-qualified aliens or otherwise qualified aliens arriving in the U.S. on or after the date of enactment -- until after a 5-year bar subject to deeming.⁸⁰

PART III

A Study of Five Michigan Labor Camps

Michigan Agribusiness

To fully comprehend the significance of the PRWORA on Michigan’s migrant workers, it is necessary to examine the importance of this group to the state’s economy. The Michigan Department of Agriculture statistics for 1995 indicated that agriculture profits reached \$37 billion, making agribusiness Michigan’s second most profitable industry, trailing only automotive.⁸¹ The migrant labor force in the state is estimated to be 45,000 during the peak months of May to October, ranking Michigan as the fourth largest state in the number of migrant workers employed for agriculture.⁸² According to the MFIA, 97% of this population are “Mexican American.”⁸³ An average annual income for a family of four is estimated to be \$7,200 – well below the poverty threshold for even one person.

The changes in the welfare law have been partly blamed for the shortage of farmworkers in Southwest Michigan this year. Attorney Tom Thornburg of the Farmworker Legal Services commented that previous benefits which have “helped documented legal immigrants cut costs and get by on lower wages are no longer available to them.”⁸⁴ Nonetheless, this law is fairly recent and its total impact has not yet been fully understood nor documented.

PRWORA Implications in Michigan

This section explores qualitative measures of the migrants’ socio-economic background through interviews and testimonies of farmworkers and other individuals who work closely with them. Furthermore, as an empirical study of the implications of the PRWORA in a specific geographical area, I conducted a survey in five Southwest Michigan camps. This study, however, should not be taken as representative of the entire migrant worker population in Southwestern Michigan.

Methodology

Research Method and Instrument

The objectives of the survey were to (a) obtain standard demographics of migrant workers within the camps such as age, sex, race, education and annual income; (b) obtain information about their health and their access to health care services; and, finally, (c) to assess their eligibility for government and state benefits in accordance with the PRWORA.

In order to formulate a workable survey instrument (written in both Spanish and English), I consulted Sister Rosemary Tierney, a Hispanic Roman Catholic Pastoral Minister who has worked with the migrants for the past 18 years and is familiar with the colloquial words used in the Tejano dialect. We took into account the comprehensibility, length, and sensitivity of the questions, keeping in mind that some workers may be reluctant to answer inquiries regarding their immigration status. The respondents were requested *not* to place their names on the questionnaire and were given the choice to leave questions unanswered.

Scope and Limitations

Aware of my limitations as an outsider to the camps, I sought the help of Camp Health Aides whom I previously met during volunteer work for the InterCare Clinic. Camp Health Aides, or Promotoras de Salud, are camp residents who work with outreach nurses and clinics in the area. They use “peer education” as a means to promote better health within their community.⁸⁵ Camp Health Aides willingly assisted me with the surveys. We discussed the significance of each survey question and, afterwards, they conducted and distributed the surveys themselves, explaining the purpose of the study. This method limited me to the camps with Camp Health Aide programs. Furthermore, I was unable to avoid other psychological obstacles such as doubt and suspicion on the part of the workers. In one camp I was suspected by the crew leader of being a hired, undercover INS agent. She eventually confiscated the surveys from most of the camp residents before I could retrieve them. Although she told me that I could distribute the surveys to those who were willing to answer, some workers told me that she did not want them to reply to any of my questions. The Camp Health Aide later expressed her disappointment with the circumstances and added that many of the workers wanted to fill out the survey. One worker at the camp told me that she hoped that I “get good results to help [their] situation.”⁸⁶

Nevertheless, I find the crew leader’s actions understandable. In light of the enactment of the PRWORA and the Immigration Reform Act of 1996, INS activities have risen in areas frequented by migrant workers, such as community health centers.⁸⁷ My association with the InterCare Clinic in Bangor and my “unlikely and seemingly innocent” appearance did not allay the crew leader’s suspicions. Apparently, I came across as an INS officer masquerading as a college student practicing photography.

Description of Data Collected

Variables and Methods of Analysis and Interpretation

Data on 26 variable pertaining to the respondents’ demographic characteristics, immigration status, health, work and economic status were obtained. Each was classified into the type of variable considered for purposes of analysis.

<i>Camp</i>	<i>Population of Workers</i>	<i>Number of Respondents</i>	<i>% of Respondents</i>
	(N)	(n)	(n/N)
	Total=216	Total=76	
A	73	15	21%
B	~23	14	61%
C	~35	13	37%
D	15	15	100%
E	~70	19	27%

Research Population and Sample

For the five camps that were studied, Camp D was a census which means that all workers responded to the surveys (Table 1). The population for camps B, C, and E are approximations (~) since the crew leaders did not keep an exact tally of the number of workers.

Camp A was where I encountered much suspicion from the crew leader who confiscated most of the surveys before I could collect them. Camps C and E had a turnover of workers the week I distributed the surveys. The ones whom I was supposed to survey were busy preparing to move back South, which explains the fewer number of respondents. I would like to reiterate that I make no claim that the conclusions drawn from this research may be representative of the entire migrant population in Southwest Michigan. Based on my observation, the findings seem to be typical of the camps from which the samples were taken; however, being an exploratory study, I would refrain from definitive generalizations. One of the reasons for my apprehensions about generalizing the findings to the population is that sampling may not fully qualify as random procedure since the survey was only conducted on available and willing participants.

Data Presentation, Analysis, and Interpretation

The data is presented by camps for purposes of detecting commonalities and differences. Where applicable (such as age and number of days worked per

<i>Type of work</i>	<i>Camp A</i>	<i>Camp B</i>	<i>Camp C</i>	<i>Camp D</i>	<i>Camp E</i>	<i>Total</i>
	n=15	n=14	n=13	n=15	n=19	n=76
Picking	100%	100%	-	73.3%	36.7%	61.8%
Packaging	-	-	100%	-	-	17.1%
Grading	-	-	-	-	52.6%	13.2%
Tractor driver	-	-	-	-	10.5%	2.6%
No answer	-	-	-	26.7%	-	5.3%

week), both percentage distributions and averages were calculated. For most variables however, only percentage distributions are presented.

Socio-economic Background

Type of farmwork. The type of agricultural work respondents do in four out of the five camps was found to be homogeneous, while the respondents in Camp E had different assignments, varying from tractor driving to picking and grading fruits and vegetables (see Table 2).

<i>Permanent Residence</i>	<i>Camp A</i>	<i>Camp B</i>	<i>Camp C</i>	<i>Camp D</i>	<i>Camp E</i>	<i>Total</i>
	n=15	n=14	n=13	n=15	n=19	n=76
Florida	-	35.7%	-	6.7%	73.7%	46.1%
Texas	80%	7.1%	7.7%	6.7%	23.6%	25.0%
Mexico	20%	25.6%	92.3%	20.0%	-	14.5%
No answer	-	28.6%	-	66.7%	-	14.5%

Permanent Residence. Of the 76 respondents from all 5 camps almost half of them have their permanent residence in Florida while a quarter are from Texas. A small percentage of the farmers refer to Mexico as their home country. (Table 3).

Destination after Michigan Harvest Season. After the harvest season in Michigan, the migrants do not necessarily go back to their state or country of residence. In Table 4, we see that a number of workers from Mexico will either remain in Texas or Florida, while a few will head to Georgia and Oklahoma. Texas was found to be the state of destination for most workers, receiving 52.6% of the group.

<i>Destination</i>	<i>Camp A</i>	<i>Camp B</i>	<i>Camp C</i>	<i>Camp D</i>	<i>Camp E</i>	<i>Total</i>
	n=15	n=14	n=13	n=15	n=19	n=76
Florida	-	21.4%	-	20.0%	73.7%	26.3%
Georgia	-	21.4%	-	-	-	3.9%
Oklahoma	-	-	-	6.7%	26.3%	1.3%
Texas	100.0%	42.9%	100.0%	6.7%	-	52.6%
Don't know	-	7.1%	-	-	-	1.3%
No answer	-	7.1%	-	66.7%	-	14.5%

Race. Virtually all respondents are of Hispanic descent (Table 5). Only one respondent is Caucasian. The rarity of encountering migrant workers in Michigan who are not of Hispanic descent, arouses questions of citizenship from the local residents.

Race	Camp A n=15	Camp B n=14	Camp C n=13	Camp D n=15	Camp E n=19	Total n=76
White	-	-	-	6.7%	-	1.3%
Hispanic	100.0%	100.0%	100.0%	93.3%	100.0%	98.7%
Black	-	-	-	-	-	-
Asian/Pacific	-	-	-	-	-	-
Islander	-	-	-	-	-	-
Am. Indian/ Alaskan Ntv.	-	-	-	-	-	-
Other	-	-	-	-	-	-

Bred from ignorance, stereotypes, and prejudice toward migrant worker children have become a stigma that plague some of the local schools in the district. As one teenage farmworker told me:

*In school, this kid told me to go back to Mexico and called me names, thinking that I didn't understand English... They say things like 'go back to where you're from spick... even though I was born here and lived here all my life. We got into a fist fight, and the principal ended up suspending me... he said it was because I threw the first punch.'*⁸⁸

Citizenship and Immigration Status. As stressed in Part I, most U.S. farmworkers are either U.S. citizens or are here legally with an LPR or working status. The same trend was seen in the aggregate evaluation of all five camps, where more than 70% were either citizens or green card holders (Table 6). Camps A and C were the only camps that reportedly didn't have undocumented aliens. Nevertheless, this data may be inaccurate for the reasons stated earlier.

Immigration Status	Camp A n=15	Camp B n=14	Camp C n=13	Camp D n=15	Camp E n=19	Total n=76
U.S. citizen	73.3%	7.1%	38.5%	26.7%	21.1%	32.8%
Legal Perm. Resident	26.7%	35.7%	61.5%	40.0%	52.6%	43.4%
Imm. papers in progress	-	7.1%	-	6.7%	5.3%	3.9%
None of above	-	14.3%	-	6.7%	21.1%	9.2%
No answer	-	35.7%	-	20.0%	-	10.5%

Respondents' Age. On average, migrant workers within the camps surveyed are between the ages of 25 to 33 (Table 7). By looking at the percentage values, a small proportion of the respondents begin working at 14 years of age within the sample group of camps C, D, and E. Although the table shows that Camp A employs a significant number of teenagers, the figures are not very conclusive since the percentage of respondents at this camp was less than a quarter of the population and the

method of sampling could not be confidently considered as a probability random sampling. One aspect that makes Camp A unique from the others is that the children there start working by the age of 13 and not 14.*

Age	Camp A n=15 25 yrs	Camp B n=14 29 yrs	Camp C n=13 32.5 yrs	Camp D n=15 30 yrs	Camp E n=19 30 yrs	Total n=76 30 yrs
14-17	*26.7%	-	7.7%	13.3%	5.3%	10.5%
18-21	6.7%	28.6%	-	6.7%	21.1%	13.5%
22-25	26.7%	14.3%	7.7%	-	21.1%	14.5%
26-30	20.0%	7.1%	-	13.3%	10.5%	10.5%
31-35	6.7%	14.3%	61.5	6.7%	15.8%	19.7%
36-40	6.7%	7.1%	15.4%	13.3%	-	7.9%
41-45	6.7%	7.1%	7.7%	13.3%	15.8%	10.5%
46-50	-	-	-	13.3%	10.5%	5.3%
51-55	-	14.3%	-	6.7%	-	3.9%
56-60	-	-	-	-	-	-
>60	-	7.1% ⁴²	-	-	-	1.3%
No Ans.	-	-	-	13.3%	-	2.6%

Even though 16 is the minimum age for employment under general provisions of child labor laws, there is a distinction between agriculture and the nonagricultural requisites. Minors, 16 years and over, may be employed in any farmwork at any time without any limitations. Fourteen and 15 year old minors may be employed in non-hazardous agricultural work outside of school hours (with no limitations on their hours). The latter requirements apply to 12 and 13-year-olds in addition to having a written parental consent or else they have to work on the same farm as their parents. Children under 11 years may also work on farms not subject to the Fair Labor Standards Act minimum wage statute.⁸⁹

The five camps constitute a fairly significant number of teenagers who contribute to the family income. Whether working for only two months in the summer or for six months (during the school year, but working only on weekends), these teenagers generally earn individual incomes below \$2,500 (Table 8).

Income (%)	<2500	2500-3000	3001-3500	3501-4000	5501-6000	6001-6500
AGE						
13/14-18	13.0%			4.3%		
19-21	17.4%		4.3%	4.3%	4.3%	
22-25	4.3%			4.3%		
26-30	4.3%	4.3%		13.0%		
31-35						
36-40						
41-45	4.3%					4.3%
46-50						
51-55			4.3%			
56-60						
>60			4.3%			

For these minors, their transient residency and their need and desire to help their parents jeopardize their education. On the day that I went and took photographs at the farm, Debbie, a 14-year-old in eighth grade, dropped out of school to start working on the farm again. She accompanied me to the farm where she would later earn \$10 to fill one big wooden crate filled with apples. Her sister was confident in saying that “it [was] no big deal, she’ll just go back to school when [they] get back to Texas.”⁹¹ Nevertheless, the negative consequences are already apparent in their brother’s educational progress. Nineteen-year-old Juan still remains in ninth grade.

Drop out rates are high among migrant workers. As one U.S. farmworker stated during her testimony to the Commission on Security and Cooperation in Europe:

*I started school when I was 9 years old. I was 9 years old in the first grade... and then the children leave school early... What 16-year-old wants to sit in a fifth grade class? Because that’s the level they have to learn at when leaving early and starting late?... I wouldn’t do it. I wouldn’t want to do it at all.*⁹²

Respondents’ Education. On the average, respondents at Camps B-E obtained either a fourth, fifth, or sixth grade education as seen in Table 9. The percentages were a more precise way to describe educational achievements since the numbers were more scattered for four of the camps. Residents of Camp B, for example, only average a fifth grade level education, however one did manage to finish three years in vocational school. Camps D and E average within the elementary level but a significant percentage have entered high school (grades 9-12) and finished the 12th grade.

Level of Edu.	Camp A n=15 Avg.=G9	Camp B n=14 Avg.=G5	Camp C n=13 Avg.=G6	Camp D n=15 Avg.=G6	Camp E n=19 Avg.=G4	Total n=76 Avg.=G6
0	-	7.1%	-	20.0%	52.6%	18.9%
Grade 1	-	-	-	-	-	-
2	-	21.4%	-	-	-	-
3	-	7.1%	-	6.7%	-	5.3%
4	-	14.3%	-	6.7%	-	2.6%
5	-	28.6%	-	6.7%	5.3%	5.3%
6	6.7%	-	76.9%	6.7%	-	21.1%
7	6.7%	14.3%	-	-	-	1.3%
8	26.7%	-	7.7%	13.3%	-	11.8%
9	20.7%	-	-	13.3%	15.8%	10.5%
10	26.7%	-	7.7%	6.7%	5.3%	9.2%
11	-	-	-	-	5.3%	1.3%
12	13.0%	-	7.7%	20.0%	15.8%	11.8%
Voc Ed 1	-	-	-	-	-	-
2	-	-	-	-	-	-
3	-	7.1%	-	-	-	1.3%
College	-	-	-	-	-	-

Nevertheless, as revealed by these respondents, a twelfth grade or higher education does not necessarily free them from migratory farmwork; the vicious cycle often continues. As a consequence of poverty, children leave school to contribute to the family income. Later, for lack of education, many continue in the same occupation and are bound to the same economic status.

Gender. In terms of gender, Table 10 shows that there are almost equal ratios of males to females in four camps. These figures seem to be associated with whether farmworkers work individually or as a family. For example, farmworkers in camps A, C, D, and E predominantly constitute family groups, and gender ratios are almost equal. However, in Camp B where there are more males than females, the workers are mostly working individually. This observation was confirmed by the crew leader’s statement that the residents of Camp B are “predominantly single males.”⁹³

Gender	Camp A n=15	Camp B n=14	Camp C n=13	Camp D n=15	Camp E n=19	Total n=76
Male	40%	71.4%	53.8%	53.3%	52.6%	53.9%
Female	60%	28.6%	46.2%	46.7%	47.4%	46.1%

The question of machismo⁹⁴ in the Hispanic culture, and particularly within these camps, did not escape me. When I brought it up during a Camp Health Aide meeting, I received a unanimous “yes, it does exist” from the all-female group. During my visits to the camps, I observed the distinct “roles” between the men and the women. Despite the fact that both men and women work in the fields all day, the women face a double day as they continue with household chores upon arrival at the camps. Along these lines, Tim Bishop relates:

*The men then commence with either playing volleyball and/or drinking... The women on the other hand, prepare the evening meal (few eat at noon to avoid discomfort in the field), care for the children, laundry, house work, and be ready to give their husbands sex when they come home that evening... A pregnant worker who was working in the fields came to her time to deliver and was admitted to the hospital for her delivery that occurred in the [morning]. By 8 that evening, she was back in camp fixing the evening meal for her husband and family. After the meal, she cleaned up the house while her husband celebrated the birth of his son by getting drunk. He then proceeded to tell his wife that he wanted to have sex with her. She tried to tell him she was a little tired from all she had done that day but he wouldn’t listen. He roughed her up a bit and had sex with her anyway.*⁹⁵

According to the provisions in the PRWORA, immigrants who are domestic violence victims and have applied to petition under the Violence Against Women Act may qualify for federal and state benefits. However, in order to be considered as a “qualified alien,” the victim may no longer be living in the same household as the batterer. Moreover, there must be a “substantial connection” between the domestic violence and the need for benefits. Nonetheless, the women may not be aware of their rights under the Act nor of this PRWORA provision. If they *are* aware, they may not feel economically secure to emancipate themselves from their husbands especially when children are involved.

Yearly Income. The figures in Table 11 show a significant number of respondents whose income falls under \$3,500 per annum. Yet, upon referring back to the surveys I gathered, those with yearly earnings below \$2,500 were generally teenagers who work only during the summer months or on weekends during the school year and have reported the amount as “individual” rather than “family” income (Table 8). Nonetheless, there were some who reported the family income below \$2,500 while working for six months per year, 40 hours a week. After discussing this with Manuel Gonzalez of the MFIA, he assured me that such low earnings are very plausible. The workers may only put in a total of two or three months within the six months in agricultural work because of harsh weather conditions.⁹⁶ Due to the cold spring, harvest season in Michigan came very late this year, and while some workers arrived as early as May, many did not start working until late June.

<i>Income (\$)</i>	<i>Camp A</i> n=15	<i>Camp B</i> n=14	<i>Camp C</i> n=13	<i>Camp D</i> n=15	<i>Camp E</i> n=19	<i>Total</i> n=76
<2,500	60%	28.6%	-	13.3%	-	19.7%
2500-3000	6.7%	14.3%	7.7%	-	5.3%	5.3%
3001-3500	6.7%	21.5%	7.7%	-	10.5%	7.9%
3501-4000	13.3%	7.1%	-	26.6%	-	11.9%
4001-4500	-	-	-	6.7%	10.5%	1.3%
4501-5000	-	-	-	13.3%	15.8%	5.3%
5001-5500	-	-	-	6.7%	26.3%	5.3%
5501-6000	-	-	-	-	10.5%	6.6%
6001-6500	-	14.3%	-	6.7%	10.5%	6.6%
6501-7000	-	7.1%	76.9%	-	-	17.1%
7001-7500	-	-	7.7%	6.7%	-	2.6%
7501-8000	-	-	-	-	-	-
8001-8500	-	-	-	-	-	-
8501-9000	-	-	-	-	-	-
>9000	13.3%	7.1%	-	13.3%	-	9.2%
No answer	-	-	-	6.7%	10.5%	1.3%

It is to my knowledge that crew leaders distributed questionnaires to *all* the working members in a family; therefore, it should be stressed that some of the responses to this variable could be duplicated especially if the respondent considers the income as a “family income” as opposed to an “individual” one (Table 12).

<i>Type of Income</i>	<i>Camp A</i> n=15	<i>Camp B</i> n=14	<i>Camp C</i> n=13	<i>Camp D</i> n=15	<i>Camp E</i> n=19	<i>Total</i> n=76
<i>Individual</i>	53.3%	50.0%	-	20.0%	21.1%	30.1%
<i>Family</i>	46.7%	50.0%	100.0%	73.3%	79.0%	68.4%
<i>No answer</i>	-	-	-	6.7%	-	1.3%

Number Contributing Toward Reported Income. As stated earlier, almost every family begins contributing to the household income when they become teenagers. Table 13 shows the number of persons who contribute to the family income (besides the respondent) by working on the same farm. Furthermore, as seen in Table 14, the income reported may support more than the number of contributing individuals.⁹⁷

<i>Number of Persons</i>	<i>Camp A</i> n=15	<i>Camp B</i> n=14	<i>Camp C</i> n=13	<i>Camp D</i> n=15	<i>Camp E</i> n=19	<i>Total</i> n=76
0	53.3%	50.0%	23.1%	-	21.1%	28.9%
1	40.0%	7.1%	46.2%	-	5.3%	10.5%
2	6.7%	35.7%	23.1%	33.3%	47.4%	36.8%
3	-	-	7.7%	6.7%	-	3.9%
4	-	-	-	-	15.8%	3.9%
5	-	7.1%	-	26.7%	10.5%	9.2%
6	-	-	-	-	-	-
No answer	-	-	-	33.3%	-	6.6%

These figures also show that respondents who reported family incomes do not necessarily work on the farms. There are cases when men individually follow the stream north and send their earnings to families who remain down south or in Mexico.

<i>Number of Persons</i>	<i>Camp A</i> n=15	<i>Camp B</i> n=14	<i>Camp C</i> n=13	<i>Camp D</i> n=15	<i>Camp E</i> n=19	<i>Total</i> n=76
1	46.7%	21.4%	7.7%	6.7%	15.8%	19.7%
2	40.0%	7.1%	46.2%	6.7%	10.5%	21.1%
3	13.3%	14.3%	15.4%	-	15.8%	9.2%
4	-	7.1%	30.7%	6.7%	26.3%	14.5%
5	-	21.4%	-	13.3%	15.8%	10.5%
6	-	7.1%	-	33.3%	5.3%	11.8%
7	-	7.1%	-	13.3%	10.5%	6.6%
8	-	7.1%	-	13.3%	-	3.9%
9	-	-	-	-	-	-
10	-	7.1%	-	-	-	1.3%
No answer	-	-	-	6.7%	-	1.3%

Time Spent Working in Agriculture. The amount of time devoted to farmwork varies from two to 12 months, as seen in Table 15. During that time, the workers generally put in an average of five days a week. Nevertheless, Table 16 shows that more than 40% work during Saturdays and Sundays as well.

# months work in frm	Camp A n=15	Camp B n=14	Camp C n=13	Camp D n=15	Camp E n=19	Total n=76
1	-	-	-	-	-	-
2	20.0%	-	-	-	52.6%	17.1%
3	-	7.1%	-	13.3%	42.1%	14.5%
4	-	7.1%	-	6.7%	-	2.6%
5	-	14.3%	-	6.7%	-	3.9%
6	66.7%	7.1%	15.4%	20.0%	5.3%	22.5%
7	6.7%	14.3%	84.6%	13.3%	-	21.1%
8	-	7.1%	-	-	-	1.3%
9	-	7.1%	-	6.7%	-	2.6%
10	-	14.3%	-	6.7%	-	3.9%
11	-	7.1%	-	-	-	1.3%
12	6.7%	14.3%	-	20.0%	-	7.9%
No answer	-	-	-	6.7%	-	1.3%

# days work/week	Camp A n=15 Avg=6D	Camp B n=14 Avg=4D	Camp C n=13 Avg=5D	Camp D n=15 Avg=5D	Camp E n=19 Avg=7D	Total n=76 Avg=5D
1	-	-	-	-	-	-
2	-	-	-	6.7%	-	1.3%
3	6.7%	-	-	-	-	1.3%
4	-	21.4%	-	6.7%	-	5.3%
5	33.3%	78.6%	69.2%	26.7%	-	38.2%
6	-	-	15.4%	46.7%	-	11.8%
7	60.0%	-	15.4%	-	100.0%	39.5%
No answer	-	-	-	13.3%	-	2.6%

The reported income is generally linked to the number of months the migrants work. Despite this, 89% still earn salaries below the 1997 HHS poverty guidelines of \$7,890 for an individual and \$2,720 for each additional individual in a family.⁹⁸ Since these incomes are generally household incomes that support families ranging from two (including the respondent) to eight (refer back to Table 14), the majority live in great privation.

Type of Contract. Receiving low incomes and averaging only six months of work, more than half of the respondents were still considered self-employed and not receiving unemployment benefits. An employee is eligible for unemployment benefits if they earn at least \$100.50 in 20 weeks.⁹⁹ In Camp C, all of the respondents qualified for unemployment if they satisfied these requirements (Table 17). Yet in the other four camps, only a minority receive such benefits. This occurs when 50%

of the farmer's employees are seasonal workers since the new law exempts the employees from paying for unemployment benefits to MESA.¹⁰⁰

Type of Contract	Camp A n=15	Camp B n=14	Camp C n=13	Camp D n=15	Camp E n=19	Total n=76
Receive unemployment benefits	33.3%	42.9%	100.0%	13.3%	5.3%	35.6%
Self-employed	66.7%	50.0%	-	66.7%	94.7%	59.2%
No answer	-	7.1%	-	20.0%	-	5.3%

Another type of incidence is when the workers are undocumented aliens and, therefore, do not have valid papers to claim unemployment. With this information, I raised the question of whether employers are aware of their workers' immigration status. According to Gonzalez, every employee is required to complete an I-9 form which documents each worker's immigration status. Fake papers are often presented. Nevertheless, some employers "strongly feel that they should not be asked to enforce" immigration policies. If they are pressured to do so, they may start the practice of hiring crew leaders instead.¹⁰¹ As stated in Part I, there are incidences when farmers hire less than 10 persons including the crew leader, who in turn hires the farmworkers, consequently categorizing them as "self employed." Although I did not clarify the method of hiring for the other camps besides Camp C, Gonzalez stressed that the practice of hiring only crew leaders is illegal and risky for farmworkers, who will face a fine from the IRS or a possible termination of their license by the USDOL (U.S. Department of Labor).

Health Status and Health Care Access

Health Status for the Past Six Months. Only nine out of the 76 respondents fell ill during the 1997 harvest season in Michigan (Table 18). Nevertheless, because of the limitations that I encountered as stated earlier, I cannot confidently conclude that their general health status was excellent.

Health Status	Camp A n=15	Camp B n=14	Camp C n=13	Camp D n=15	Camp E n=19	Total n=76
Was ill	20.0%	21.4%	7.7%	13.3%	-	11.9%
Was not ill	53.3%	78.6%	92.3%	86.7%	100.0%	82.9%
No answer	26.7%	-	-	-	-	5.3%

Reasons for Illness and Type of Illness. The respondents reported their illnesses to be caused by work, living, and climate conditions (Table 19). Many different symptoms were reported (Table 20).

<i>Reason for Illness</i>	<i>Camp A</i> n=15	<i>Camp B</i> n=14	<i>Camp C</i> n=13	<i>Camp D</i> n=15	<i>Camp E</i> n=19	<i>Total</i> n=76
<i>Working conditions</i>	-	7.1%	-	-	-	1.3%
<i>Living conditions</i>	-	7.1%	-	-	-	1.3%
<i>Climate</i>	6.7%	7.1%	7.7%	13.3%	-	6.6%
<i>Other</i>	6.7%	-	-	-	-	1.3%
<i>Not applicable</i>	66.7%	78.6%	92.3%	80.0%	100.0%	68.4%
<i>No answer</i>	20.0%	7.1%	-	6.7%	-	22.4%

<i>Type of Illness</i>	<i>Camp A</i> n=15	<i>Camp B</i> n=14	<i>Camp C</i> n=13	<i>Camp D</i> n=15	<i>Camp E</i> n=19	<i>Total</i> n=76
<i>Asthma</i>	6.7%	7.1%	-	-	-	2.6%
<i>Body ache</i>	-	7.1%	-	-	-	1.3%
<i>Cough/cold</i>	-	7.1%	7.7%	13.3%	-	3.9%
<i>Diabetes</i>	6.7%	-	-	-	-	1.3%
<i>Headache</i>	-	-	-	-	-	1.3%
<i>Rashes</i>	6.7%	-	-	-	-	1.3%
<i>Not applic.</i>	80.0%	78.6%	92.3%	80.0%	100.0%	86.8%
<i>No answer</i>	-	7.1%	-	6.7%	-	2.6%

Seeking Medical Services. Of the nine that were ill, a third did not to seek medical help because they believed that their illness was benign and/or they could not afford to pay for the medical expenses (Tables 21 and 22).

<i>Sought Medical Services</i>	<i>Camp A</i> n=15	<i>Camp B</i> n=14	<i>Camp C</i> n=13	<i>Camp D</i> n=15	<i>Camp E</i> n=19	<i>Total</i> n=76
<i>Yes</i>	13.3%	14.3%	-	6.7%	-	6.6%
<i>No</i>	6.7%	-	7.7%	6.7%	-	3.9%
<i>Not applic.</i>	80.0%	78.6%	92.3%	86.7%	100.0%	88.2%
<i>No answer</i>	-	7.1%	-	-	-	1.3%

<i>Reasons</i>	<i>Camp A</i> n=15	<i>Camp B</i> n=14	<i>Camp C</i> n=13	<i>Camp D</i> n=15	<i>Camp E</i> n=19	<i>Total</i> n=76
<i>Minor illness</i>	-	-	-	6.7%*	-	1.3%
<i>No insurance/ cannot afford</i>	6.7%	-	7.7%	6.7%*	-	3.9%
<i>Not applic.</i>	83.3%	92.9%	92.3%	80.0%	100.0%	92.1%
<i>No answer</i>	-	7.1%	-	13.3%	-	3.9%

Party Who Paid for Medical Expenses. All those who sought medical care paid for the expenses without Medicaid or other form of insurance (Table 23). During my conversations with some of the farmworkers, I found out many do not receive Medicaid while working in Michigan because their salaries do not qualify them for such benefits. Many complained they earn a great percentage of their annual income during their stay in Michigan. They need to save their earnings for the

upcoming months since many do not receive unemployment benefits. If unexpected additional expenses do arise during those months in Michigan, they are faced with the decision of either draining their savings or enduring the illness without seeking help. According to one outreach nurse, this becomes a problem when the individual immediately relegates his illness as something benign because he is influenced by economic reasons.¹⁰⁵

<i>Source of Payment</i>	<i>Camp A</i> n=15	<i>Camp B</i> n=14	<i>Camp C</i> n=13	<i>Camp D</i> n=15	<i>Camp E</i> n=19	<i>Total</i> n=76
<i>Private insurance</i>	-	-	-	-	-	-
<i>Medicare</i>	-	-	-	-	-	-
<i>Medicaid</i>	-	-	-	-	-	-
<i>Self</i>	13.3%	14.2%	-	6.7%	-	6.6%
<i>Not applic.</i>	86.7%	85.7%	100.0%	93.3%	100.0%	93.4%

Distance from Labor Camps to Health Clinic and Health Provider. The camps range 10-25 miles away from the closest Community/Migrant health clinic:

CAMP A = 25 miles CAMP B = 10 miles
 CAMP C = 22 miles CAMP D = 20 miles
 CAMP E = 20 miles

Since I conducted the surveys at camps serviced by Camp Health Aides and were accessible by InterCare outreach nurses, most of the respondents sought medical care at either the Bangor or Eau Claire InterCare clinics. Nevertheless, two respondents from Camp A were admitted to the Dowagiac Lee Hospital (5 miles away) during emergency cases (Table 24).

<i>Institution</i>	<i>Camp A</i> n=15	<i>Camp B</i> n=14	<i>Camp C</i> n=13	<i>Camp D</i> n=15	<i>Camp E</i> n=19	<i>Total</i> n=76
<i>Dowagiac Lee Hospital</i>	13.3%*	-	-	-	-	2.6%
<i>Eau Claire InterCare</i>	6.7%	-	-	-	-	1.3%
<i>Bangor Inter Care Clinic</i>	13.3%*	7.1%	-	-	-	3.9%
<i>Don't Remember</i>	-	7.1%	-	6.7%	-	2.6%
<i>No Answer</i>	-	7.1%	-	6.7%	-	2.6%
<i>Not applic.</i>	80.0%	-	100.0%	6.7%	100.0%	89.5%

Services provided by Community/Migrant Health Centers like InterCare are not considered “federal public benefits” because the grant funds they receive from the federal government are not provided directly to “individuals” but rather to “health centers.” At present, C/MHC continue to provide health care services to the same group of immigrants that they have in the past.

Access to Federal and State Benefits

As seen in Table 6, more than 70% of the migrant workers are legally eligible for federal and state benefits. Among the 33 legal permanent residents however, only 15 worked in the U.S. for more than 40 quarters, or 10 years. Of the 33, 9.1% (3) do not have valid papers to prove their 40 quarters of work and are therefore subject to the 5-year bar if they cannot find any means to obtain such papers. Thirty-three percent have only been working in the U.S. for less than 10 years. These individuals will be subject to the 5-year bar with deeming. The remaining 21% did not provide information regarding their eligibility for the 40 quarters provision, so while they may be categorized as qualified aliens, some may still be subject to the 5-year bar with deeming.

Observations and Comments About the Data Collected

As stated earlier, the data collected may not be taken as representative of the migrant population in Southwest Michigan. To a reasonable extent, however, the findings support prior studies particularly those pertaining to economic, education, and immigration status.

As the reader may have already noted, on many of the variables the data collected from Camp C are suspiciously homogeneous while the ones from the other four camps are comparatively spread out. I can neither prove nor invalidate the credibility of the responses since I was not present during the distribution of the surveys at Camp C. The procedure and results do not, however, render the survey insignificant. I believe that the survey data and testimonies tell stories of individuals whose lives are very similar to that of their own family members, friends, and co-workers. Even if the data cannot prove a trend or typical situations in Michigan, the findings reflect the concerns of individuals within these five camps and especially within each household.

Conclusion

Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 created new categories of immigrants who can and cannot receive federal, state, and local benefits. It has also restructured the process of qualification for these benefits by implementing the deeming process and the 40-quarter eligibility rule. These provisions subsequently disqualify a significant number of immigrants from receiving government benefits despite the legality of their stay in the United States.

A significant number of migrant farmworkers will be adversely affected by this law, too. With work environments, and social and cultural factors that imperil their health and, subsequently, their lives, they need government benefits to supplement an income which generally falls below the poverty threshold.

The responses and testimonies of the residents in the selected five Southwest Michigan labor camps echoed the harsh and prevailing issues of migratory farmwork. Some camp residents will face the negative consequences that were foreseen by migrant advocates and dissidents of the PRWORA.

The PRWORA has transferred the issue of welfare from the public to the private sector. Non-profit charitable organizations, such as Community/Migrant Health Centers, will serve as the recipient for many unqualified aliens seeking medical services. Fortunately, the law does not require these centers to prove the legality of their patients' immigration status and they can continue to serve indiscriminately in that respect. Nevertheless, since most migrant workers live in rural areas, many will find C/MHC inaccessible or vice-versa by outreach workers.

Since writing this report, there have been constant changes and amendments to the PRWORA. In order to remain updated with the changes, readers should refer to the Federal Register website ([Http://www.access.gpo.gov/su_docs/aces/aces140.html](http://www.access.gpo.gov/su_docs/aces/aces140.html)) or call the Michigan Family Independence Agency, for policy information.

Appendix A

Title IV, Sec. 400 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996

Title IV - Restricting Welfare and Public Benefits for Aliens

Sec. 400. Statements of National Policy Concerning Welfare and Immigration.

The Congress makes the following statements concerning national policy with respect to welfare and immigration:

1. Self-sufficiency has been a basic principle of United States immigration law since this country's earliest immigration statutes.
2. It continues to be the immigration policy of the United States that--
 - (A) aliens within the Nation's borders not depend on public resources to meet their needs, but rather rely on their own capabilities and the resources of their families, their sponsors, and private organizations, and
 - (B) the availability of public benefits not constitute an incentive for immigration to the United States.
3. Despite the principle of self-sufficiency, aliens have been applying for and receiving public benefits from Federal, State, and local governments at increasing rates.
4. Current eligibility rules for public assistance and unenforceable financial support agreements have proved wholly incapable of assuring that individual aliens not burden the public benefits system.
5. It is a compelling government interest to enact new rules for eligibility and sponsorship agreements in order to assure that aliens be self-reliant in accordance with national immigration policy.
6. It is a compelling government interest to remove the incentive for illegal immigration provided by the availability of public benefits.
7. With respect to the State authority to make determinations concerning the eligibility of qualified aliens for public benefits in this title, a State that chooses to follow the Federal classification in determining the eligibility of such aliens for public assistance shall be considered to have chosen the least restrictive means available for achieving the compelling governmental interest of assuring that aliens be self-reliant in accordance with national immigration policy.

Appendix B

Exempted Programs Endorsed by the Attorney General

Therefore by virtue of the authority vested in me as Attorney General by law, including Title IV of the Personal Responsibility and Work Opportunity Act of 1996, I hereby specify that:

1. I do not construe the Act to preclude aliens from receiving police, fire, ambulance, transportation (including paratransit), sanitation, and other regular, widely available services and, for that reason, I am not making specifications of such programs, services or assistance. It is not the purpose of the Order, however, to define more specifically the scope of the public benefits that Congress intended to deny certain aliens either altogether or absent my specification and nothing herein should be so construed.
2. The government-funded programs, services or assistance specified in this Order are those that: deliver in-kind (non-cash) services at the community level, including through public or private non-profit agencies or organizations; serve purposes of the type described in paragraph 3, below, for the protection of life and safety; and not condition the assistance according to the individual recipient's income or resources, as discussed in paragraph 4, below.
3. Included within the specified programs, services or assistance determined to be necessary for the protection of life and safety are:
 - (a) Crisis counseling and intervention programs, services and assistance relating to child protection, adult protective services, violence and abuse prevention, victims of domestic violence or other criminal activity , or treatment of mental illness or substance abuse;*
 - (b) Short-term shelter or housing assistance for the homeless, for victims of domestic violence, or for runaway, abused or abandoned children;
 - (c) Programs, services or assistance to help individuals during periods of heat, cold, or other adverse weather conditions;
 - (d) Soup kitchens, community food banks, senior nutrition programs such as meals on wheels, and other such community nutritional services for persons requiring special assistance;
 - (e) Medical and public health services (including treatment and prevention of diseases and injuries) and mental health, disability or substance abuse assistance necessary to protect life or safety;
 - (f) Activities designed to protect the life and safety of workers, children and youth, or community residents; and
 - (g) Any other programs, services, or assistance necessary for the protection of life or safety.
4. The community-based programs, services or assistance specified in paragraphs 2 and 3 of this Order are limited to those that provide in-kind (non-cash) benefits and are open to individuals needing or desiring to participate without regard to income or resources. Programs, services or assistance delivered at the community level, even if they serve purposes of the type described in paragraph 3 above, are not within this specification if they condition
 - (a) the provision of assistance;
 - (b) the amount of assistance provided, or
 - (c) the cost of the assistance provided on the individual recipient's income resource.

Dated: August 23, 1996. Janet Reno, Attorney General

Appendix C. Michigan Crops on which Migrants Work - 1995

Commodity	National Rank	Michigan Production (in 1,000's)	Units	Value of Production (in 1,000's)
<i>Beans, Black</i>	1	1,700	CWT	29,393
<i>Beans, Cranberry</i>	1	470	CWT	11,280
<i>Beans, Navy</i>	1	3,950	CWT	75,919
<i>Blueberries</i>	1	67,000	Lbs	33,450
<i>Cherries, Tart</i>	1	310,000	Lbs	13,448
<i>Cucumbers, Pickles</i>	1	130	Tons	19,370
<i>Geraniums, Pots</i>	1	24,470	Pots	23,050
<i>Hanging Flowers</i>	1	2,522	Baskets	14,496
<i>Lillies, Easter, Pots</i>	1	1,353	Pots	4,641
<i>Beans, Dry, All</i>	2	6,930	CWT	128,898
<i>Bedding Plants</i>	2	11,762	Flats	74,013
<i>Celery</i>	2	1,050	CWT	14,255
<i>Apples</i>	2	1,220,000	Lbs	119,860i
<i>Prunes & Plums</i>	2	8	Tons	1,866
<i>Beans, Dark Red Kidney</i>	2	210	CWT	5,386
<i>Carrots, Fresh</i>	2	1,938	CWT	31,783
<i>Lillies, Other</i>	3	174	Pots	678
<i>Asparagus</i>	3	323	CWT	21,331
<i>Cherries, Sweet</i>	3	54	Tons	15,700
<i>Floriculture</i>	3	184,632	\$	184,632
<i>Beans, Snap, Processing</i>	4	61	Tons	9,961
<i>Cucumbers, Fresh</i>	4	855	CWT	15,390
<i>Tomatoes, Process</i>	4	125	Tons	8,216
<i>Grapes, All</i>	4	70	Tons	15,196
<i>Mushrooms</i>	5	14,877	Lbs	13,958
<i>Peppers, Bell, Fresh</i>	5	450	CWT	10,215
<i>Sugarbeets¹</i>	5	2,970	Tons	113,890
<i>Cauliflower</i>	5	98	CWT	3,452
<i>Strawberries</i>	5	108	CWT	7,248
<i>Pears</i>	6	6	Tons	1,400
<i>Corn, Sweet, Fresh</i>	6	1,063	CWT	16,689
<i>Peaches</i>	6	60,000	Lbs	12,594
<i>Hay, Alfalfa</i>	8	4,305	Tons	279,825
<i>Beans, Snap, Fresh</i>	9	116	CWT	3,144
<i>Potatoes, Fall¹</i>	9	16,500	CWT	113,850
<i>Cantaloupes, Fresh</i>	9	150	CWT	2,445
<i>Cabbage, Fresh</i>	9	475	CWT	5,700
<i>Soybeans</i>	NR ²	59,600	Bushels	393,360
<i>Onions</i>	NR ²	1,856	CWT	13,736
<i>Potatoes, All</i>	NR ²	16,500	CWT	116,325
40 CROPS				\$1,980,043

1 Value of Production is from 1994 which is the latest information that is available for this product.

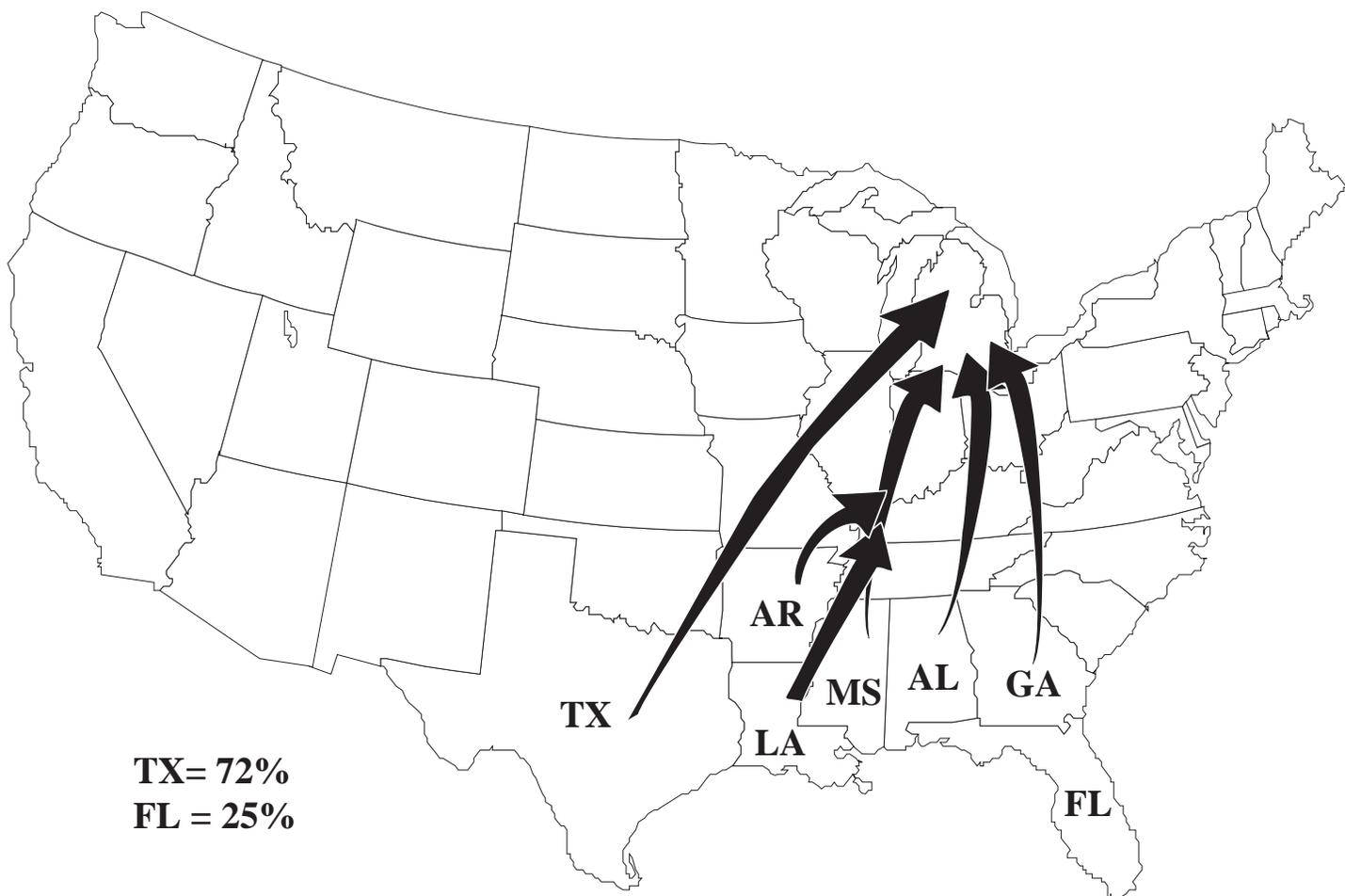
2 Not Ranked

Reference: 1995-1996 Michigan Agricultural Statistics, September 1996, MSD/MFIA

Appendix D. Estimated Migrant Farmworker Population



Appendix E. Migrant Farmworker Stream



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Endnotes

1. The term “farmworkers” is different from “farmers” who are the owners/operators of the farms. The Michigan Department of Social Services defines a migrant worker as “a person who works or seeks work in agriculture or a related seasonal industry and moves away from his usual home to a temporary residence as a condition of employment or because the distance from his home is greater than 50 miles.” A seasonal worker is a person who “works in agriculture or related seasonal industry and is not required to be absent overnight from his permanent place of residence.” Michigan Department of Social Services. “Migrants/Seasonal Farmworkers” Program Eligibility Manual. Lansing, Mich.
2. An estimated 85% of migrant workers are minority including African-American, Jamaican, Haitian, Laotian, Thais, and other racial ethnic minorities. “Hispanic” includes Mexican-American, Mexican, Puerto-Rican, Cuban, Central and South American. National Center for Farmworker Health. “Who are America’s Farmworkers?” [Http://www.ncfh.org/ htm](http://www.ncfh.org/htm). Sept. 22, 1997.
3. An H-2A temporary agricultural worker is a person who is “to perform agricultural labor or services as defined by the Secretary of Labor... of a temporary or seasonal nature.” [Act 101(a) (15)(H)(ii)]. As cited in NAFSA Manual of Federal Regulations Affecting Foreign Students and Scholars. 1995.

Recent U.S. Department of Labor data show that 32% of the nation’s 1.6 million migrant and seasonal farmworkers are citizens, 25% are legal permanent resident aliens, 37% are undocumented and the remainder hold temporary or unknown status. *Farmworker Justice News*. “Farmworkers’ Access to Public Benefits in the Era of Welfare Reform.” Volume 9, No. 1 Summer 1997.
4. National Council of La Raza. “HIV/AIDS Fact Sheet: Farmworkers and HIV.” Washington, D.C.: NCLR AIDS (in Midwest Migrant Health Information Office, “Migrant and Seasonal Farmworkers in the United States”).
5. National Center for Farmworker Health. “Who’s Who Among America’s Farmworkers.”
6. U.S. Census Bureau. “Preliminary Estimate of Poverty Threshold in 1996.” [Http://www. census.gov/hhes/ poverty/threshld/prelim96.html](http://www.census.gov/hhes/poverty/threshld/prelim96.html). (Oct. 22, 1997).
7. Conversation with María Diaz. Dowagiac, Mich. Sept. 22, 1997.
8. Bruce Goldstein and Shelly Davis. A draft submitted for journal publication: “Farmworkers and Public Benefits in the Era of Welfare.” May 15, 1997. p. 9.
9. National Center for Farmworker Health. “Who are America’s Farmworkers.”
10. See Appendix A which states the Congress’ purpose in barring immigrants from federal and state benefits.
11. “Minutes of the National Council on Migrant Health.” Washington, D.C., March 20-23.
12. Midwest Migrant Health Information Office. Newsletter: “Immigration Reform: A Concern for Migrant Farmworkers.” Monroe, Mich.
13. Charles Wheeler and Josh Bernstein. “Welfare Bill Impacts Immigrant the Hardest.” Memo for the Nation Immigration Law Center. Los Angeles, Calif. p. 1.
14. Id., p. 2.
15. With exemptions specified by the Attorney General. Please see Appendix B.
16. On this date when President Clinton signed the bill into law.
17. Non-immigrants are persons who enter the United States for a temporary stay (i.e. H or work, F or student, and tourist visa holders).
18. Cynthia Snyder. Lecture on “The Impact of Welfare and Immigration Reform Legislation on Farmworkers’ Access to Health Care.” Midwest Farmworker Stream Forum. Indianapolis, Ind. Sept. 14, 1997.
19. The law has recently changed to include Haitian entrants under this category.
20. U.S. Immigration and Naturalization Service. “Question and Answers on Welfare Reform Alien Eligibility for and Access to Public Benefits” [Http://www.ins.usdoj.gov/ hqopp/qsandas.htm](http://www.ins.usdoj.gov/hqopp/qsandas.htm). Oct. 22, 1997.
21. National Conference of State Legislatures. “The Personal Responsibility and Work Opportunity Act of 1996: Medicaid-Related Provisions.” Washington D.C. Vol 1, No. 2; Sept. 16, 1996. p. 6.
22. Act. Sec 401 (c). This definition also pertains to “state or local benefits.”
23. The Department of Health and Human Services interprets federal means-tested benefits to include only Medicaid and TANF. This interpretation pertains only to the HHS and its benefit programs. Other agencies whose programs are subject to PRWORA are independent of this definition. Department of Health and Human Services. “Personal Responsibility and Work Reconciliation Act of 1996 (PRWORA); Interpretation of ‘Federal Means-Tested Public Benefit.’” Federal Register Online via GPO Access [wais.access.gpo.gov]. Aug. 26, 1997.

24. Dismal concerns arose with regard to the automatic link between SSI and Medicaid eligibility. However, the Balanced Budget Act of 1997 has recently included provisions that will allow elderly and disabled immigrants receiving SSI (and Medicaid) before Aug. 22, 1996 to keep their Medicaid coverage; also immigrants in the U.S. since last year will qualify for SSI and Medicaid if they become disabled in the future. Furthermore it will allow children who lose SSI, due to a change in disability law, to continue to receive Medicaid. John Ruiz. Testimony for the National Advisory Council Farmworker Advocate Hearing. Midwest Farmworker Stream Forum. Indianapolis, Ind. Sept. 12, 1997.
25. Fayyaz Hussain. "Social Welfare Reforms in Michigan: Intent and Implications for the Poor." <http://www.jsri.msu.edu/RandS/research/irr/rr17.html>. Aug. 6, 1997.
26. B. Goldstein and S. Davis. p, 37.
27. Id., 37-38.
28. Department of Health and Human Services. "The AFC Programs." <http://www.acf.dhhs.gov/programs/1997>.
29. F. Hussain.
30. C. Snyder.
31. National Conference of State Legislatures. Attachment A of "Summary of Changes in Immigrants' Access to Benefits." <http://www.ncsl.org/statefed/immsnew.htm#summary>. 1997.
32. Women, Infant and Children. A food/nutrition program for mothers, babies and children.
33. See Appendix B.
34. National Health Law Program, the National Center for Youth Law and the National Senior Citizen Law Center. "The Welfare Law and Its Effects on Medicaid Recipients." *Clearing House Review*. Jan-Feb 1997, 1024.
35. Id.
36. National Conference of State Legislatures. "Summary of Changes in Immigrants' Access to Benefits," Attachment A. <http://www.ncsl.org/statefed/immsnew.htm#summary>. 1997.
37. In 1996, one had to have earned at least \$640 for a quarter or \$2,560 for four quarters/one year. The credit earned for one quarter need not be earned during the three month period. Any farmworker earning more than \$2,560/year will earn four quarters of work. B. Goldstein and S. Davis. p. 27.
38. Sept. 12-14, 1997. Indianapolis, Ind.
39. Crew leaders supervise labor and camp activities. According to Bruce Goldstein and Shelly Davis of the Farmworker Justice Fund, Inc., "...crewleaders are known for failing to keep accurate records and to pay into funds established for the benefit of workers such as Social Security and Unemployment Compensation." p. 30
40. Conversation with María Diaz regarding her husband's situation, Dowagiac, Mich. Sept. 22, 1997.
41. B. Goldstein and S. Davis. p. 22
42. National Conference of State Legislatures. "Things to Know About Welfare Reform," *Immigration Policy News: The State-Local Report*. <http://www.ncsl.org/statefed/immsnew.htm>. Oct. 6, 1997.
43. Department of Health and Human Service. "Fact Sheet: Administration for Children and Families." <http://www.acf.dhhs.gov/programs/opa/facts/ssbg.htm>. Oct. 22, 1997.
44. Immigrant Policy Project of the State and Local Coalition on Immigration. "Immigrant Policy News: State Option re AFDC, Medicaid and SSBG." <http://www.ncsl.org/statefed/ib70707.htm>. Oct. 6, 1997.
45. Telephone conversation with Cathy Tobin, federal liaison for the Michigan Family Independence Agency. Oct. 8, 1997.
46. Immigrant Policy Project at NCSL. "Welfare Reforms and Immigrants: State Trends." <http://www.ncsl.org/statefed/trends2.htm>. (Oct. 6, 1997).
47. The 14th Amendment prohibits the state from denying equal protection to any person within its jurisdiction. National Conference of State Legislatures. "Q&A: Welfare Reforms and Immigrants." <http://www.ncsl.org/statefed/q&a.htm>. 1997.
48. Id.
49. B. Goldstein, p.18.
50. National Conference of State Legislatures. "Q&A: Welfare Reforms & Immigrants." There are other legal challenges such as the states' obligation to the poor. According to the American Public Welfare Association, some 22 states may have constitutional provisions and statutes that require public assistance to needy families with regards to poverty, education, housing, shelter and nutrition. Ann Morse. "Welfare Reform is Law — Now What?" <http://www.ncsl.org/statefed/immsnew.htm#summary>. (Oct. 6, 1997).
51. Id.

52. John Engler. An open letter to Michigan residents. [Http://www.mfia.state.mi.us/letterje.htm](http://www.mfia.state.mi.us/letterje.htm). Oct. 7, 1997.
53. F. Hussain.
54. National Conference of State Legislatures. "Welfare Reform and Immigrants: State Trends." [Http://www.ncsl.org/statefed/trends2.htm](http://www.ncsl.org/statefed/trends2.htm). Oct. 6, 1997.
55. SFA is a "cash assistance for families who do not meet AFDC criteria." SDA is defined as a "cash assistance program for disabled people without dependent children. Michigan Family Independence Agency. "Review of Our Services and Programs." [Http://www.mfia.state.mi.us/1996fact.htm](http://www.mfia.state.mi.us/1996fact.htm). (October 7, 1997).
56. National Advisory Council on Migrant Health. *Losing Ground: The Condition of Farmworkers in America*. Bethesda, Md. 1995, p 7.
57. National Center for Farmworker Health. "Who are America's Farmworkers." [Http://www.ncfh.org/htm](http://www.ncfh.org/htm). (Oct. 22, 1997).
58. Id.
59. Peter J. Guarnaccia. "The Impacts of Farm Work on Health: Analyses of the Hispanic Health and Nutrition Examination Survey." *International Migration Review*. Volume xxvi, No. 1. page 113.
60. U.S. Department of Labor Occupational Health and Safety Administration.
61. National Center for Farmworker Health. "Who are America's Farmworkers?"
62. Conversation with Camp Health Aides. July 1997.
63. Conversation with Jackie Wheeler-Stroud, outreach nurse, InterCare Community Health Network. July 1997.
64. Timothy Bishop. "Hispanic Migrant Workers in Michigan: An Aggregate Assessment." Oct. 8, 1997, p. 6.
65. Id., p3.
66. National Center for Farmworker Health. "Who are America's Farmworkers." [Http://www.ncfh.org/htm](http://www.ncfh.org/htm). (Oct. 22, 1997).
67. Emphasis mine.
68. Department of Public Health Bureau for Environmental and Occupational Health. Info. packet: "Agricultural Labor Camp Rules." Dec. 14, 1989. p. 1.
69. National Center for Farmworker Health. "Who are America's Farmworkers?"
70. Michigan Family Independence Agency. "Profiles of Michigan's Migrant Agriculture Labor Force. Lansing, Mich. July 1997.
71. National Center for Farmworker Health. Fact Sheet: "HIV/AIDS." Austin, Texas.
72. Conversation with Camp Health Aides. Sister Lakes, Mich. July 1997.
73. Conversation with Nancy Boyer, Comm. Health Center. Nurse for Van Buren County. Dowagiac, Mich. July 1997.
74. National Center for Farmworker Health. Fact Sheet: "HIV/AIDS."
75. National Association of Community Health Centers. *Access to Community Health Care*. Washington, D.C. 1992. p. 8.
76. Id. Under "Michigan" data.
77. Bruce Goldstein and Shelly Davis. Draft submitted for journal publication: "Farmworkers and Public Benefits in the Era of Welfare Reform." May 15, 1997. p. 9.
78. Midwest Migrant Health Information Office. Open letter: "Immigration Reform: A concern for Migrant Farmworkers." Monroe, Mich.
79. Immigrant Policy Project of the State and Local Coalition on Immigration. "Immigrant Policy News." [Http://www.ncsl.org/statefed/ib970707.htm](http://www.ncsl.org/statefed/ib970707.htm). 1997.
80. Immigrant Policy Project at NCSL. "Welfare Reforms and Immigrants: Medicaid Provisions." Sept. 30, 1996. p. 1.
81. See Appendix C. Michigan Department of Agriculture. "Michigan Department of Agriculture Annual Report, 1995." [Http://www.mda.state.mi.us/mass/stats96/as9611.html#accomp](http://www.mda.state.mi.us/mass/stats96/as9611.html#accomp). (Oct. 14, 1997).
82. See appendices D and E.
83. Emphasis mine. MFIA uses the word "Mexican-American," but after clarifying this with Manuel Gonzalez, director of migrant services of the MFIA, he informed me that the term means "of Mexican descent" and that the 45,000 includes all migrant farmworkers regardless of their immigration status. E-mail correspondence with Manuel Gonzalez. Oct. 9, 1997.
84. Rosemary Parker. "Farmworkers in Short Supply." Kalamazoo Gazette Oct. 20, 1997 article. [Http://kz.mlive.com/news/workshort.htm](http://kz.mlive.com/news/workshort.htm). (Oct. 23, 1997).
85. Midwest Migrant Health Information Office. Program Pamphlet: "The Camp Health Aide Program." Monroe, Mich.

- 86.** Conversation with farmworker. Sept. 6, 1997.
- 87.** Gina Lombardi. "Immigration and Welfare Reform Basics." Migrant Health Newline. Aug. 1997, p 6.
- 88.** Conversation with farmworker. Dowagiac, Mich. 1997.
- 89.** Under the general provisions for child labor, 16- and 17-year-old minors may only work in occupations determined as non-hazardous by the Secretary of Labor. There are hour limitations for minors under 15 years of age. The exemptions apply for minors employed by their parents. Migrant Farmworkers in the United States: Briefings of the Commission on Security and Cooperation in Europe. Washington, D.C. May, 1993. p. 88.
- 90.** n=23 for the five camps. The percentages were based on the total number of respondents who referred to their reported earnings as individual incomes as opposed to family income.
- 91.** Conversation with farmworker. Dowagiac, Mich. 1997.
- 92.** Migrant Farmworkers in the United States: Briefings of the Commission on Security and Cooperation in Europe. Washington, D.C. May, 1993. p. 91.
- 93.** Emphasis mine. Conversation with crew leader, Cass County, Mich. Sept. 1997. "Single" in this context would not necessarily mean not married. Although this was the term used by the crew leader, I ask that the term be taken as "living without a family" since there are cases where men leave their permanent residence (and also their families) temporarily in order to look for work.
- 94.** Male chauvinism.
- 95.** T. Bishop. p.5.
- 96.** Telephone Conversation with Manuel Gonzalez. Dec. 11, 1997.
- 97.** The respondent was also included in calculating the number of individuals supported by the reported income.
- 98.** The poverty threshold differs from the poverty guideline. The poverty thresholds are mainly used for statistical purposes while poverty guidelines are used for administrative purposes such as in determining financial eligibility for certain federal programs. The HHS Poverty Guideline. <http://aspe.os.dhhs.gov/poverty/97poverty.htm>.
- 99.** Telephone conversation with Manuel Gonzalez. 1997.
- 100.** Michigan Employment Security Agency, Id.
- 101.** Id.
- 102.** Where n>100%, the respondent gave multiple answers.
- 103.** Id.
- 104.** Where n>100%, the respondent gave multiple answers.
- 105.** Conversation with Jackie Wheeler-Stroud. 1997.