



# **Migrant Health Network**

**Virginia Rural Health  
Association Annual  
Conference**

**November 8, 2007**

**Staunton, Virginia**

**Southwest Virginia  
Community Health  
Systems, Inc.**



# SVCHS HISTORY

Formed in 1977 as Saltville Health Center Commission

- Saltville Medical Center opened July, 1979
- Migrant Health Network started 1997
- Corporate Structure and Name Change in July, 2002 (as Southwest Virginia Community Health Systems, Inc.)
- Mt. Rogers Medication Assistance Program (MAP) started in September 2002 (VHCF Grant)



# SVCHS HISTORY (Cont.)

- Troutdale Medical Center Practice assumed in October, 2002 (EMC Grant Award August, 2003 to serve MSFWs)
- Twin City Medical Center opened in July, 2003 (BPHC Grant)
- Mt. Rogers Counseling Service (BPHC Expanded Services Grant in 2004)
- Tazewell Community Health opened in June 2006 (BPHC Grant)
- Whitetop Community Health opened in August 2006 (VHCF Grant)
- Meadowview Health Clinic opened in August 2007 (VHCF grant)



# UDS DATA COMPARISONS

## 1997UDS REPORT

- Total Users 3,654
- Medical Users 3,654
- Total Encounters 10,019
- Medical Encounters 10,019
- Uninsured 52%
- Medicaid 14%
- Medicare 11%
- Private Insurance 23%
- Migrant/Seasonal 1%
- Need Interpretation 1%

## 2006 UDS REPORT

- Total Users 12,580
- Medical Users 11,857
- Total Encounters 49,243
- Medical Encounters 41,333
- Uninsured 40%
- Medicaid 11%
- Medicare 15%
- Private Insurance 34%
- Migrant/Seasonal 11%
- Need Interpretation 9%





# Migrant Health Network

The Migrant Health Network is a program of the **Southwest Virginia Community Health Systems, Inc.**

- Health Assessments
  - Health Education
  - Case Management
  - Interpretation
  - Transportation
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# MHN Staff

- **Program Coordinator: Evelyn Carter**
- **Outreach Workers:**
  - > **Lee, Scott and Russell County:**  
**Mary Manzanani**
  - > **Smyth, Tazewell and Washington Counties:**  
**Beth Frye**
  - > **City of Galax and Grayson Counties:**  
**Clauida Ospina**
  - > **Carroll and Patrick Counties:**  
**Delmy Sexton**



# FUNDING

- **Volunteer Staffing 1996**
- **1997 \$20,000 Planning Grant from BPHC**
- **Expanded to three additional CHC partners in 1998**
- **Current Level of Federal Funding is \$160,000 for Outreach Activity by MHN (only 21 Voucher Grants Nationwide)**
- **\$20,000 Whole Foods Grant**
- **TMC Expanded Medical Capacity Grant (8/1/03)  
\$401,371 per year with focus on serving MSFWs**



# MHN Advisory Board

- They oversee the activities of MHN and provide input on need.
- The MHN Advisory Board consist of farm workers, Community Leaders, Health Care Providers, and Growers of several counties.



# Migrant and Seasonal Farmworkers

- **The MHN Program has a screening tool that is use to screen all the farm workers; seasonal or migrant in Southwest VA.**
- **Seasonal Farm Worker:**  
**Are individuals who are employed in agricultural work or farm but do not move from their permanent residence to seek work and may also have other sources of employment.**



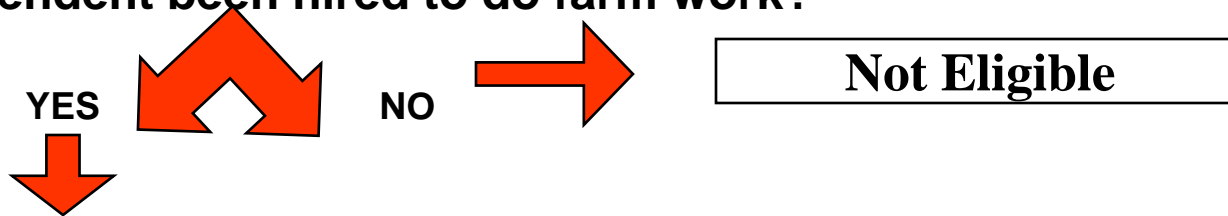
# Migrant and Seasonal Farmworkers

- **Migrant Farm Worker:** individuals who are required to be absent from a permanent place of residence for the purpose of seeking employment in agricultural work. Most farm workers earn annual incomes below the poverty level and half earn below \$7,500 per year.

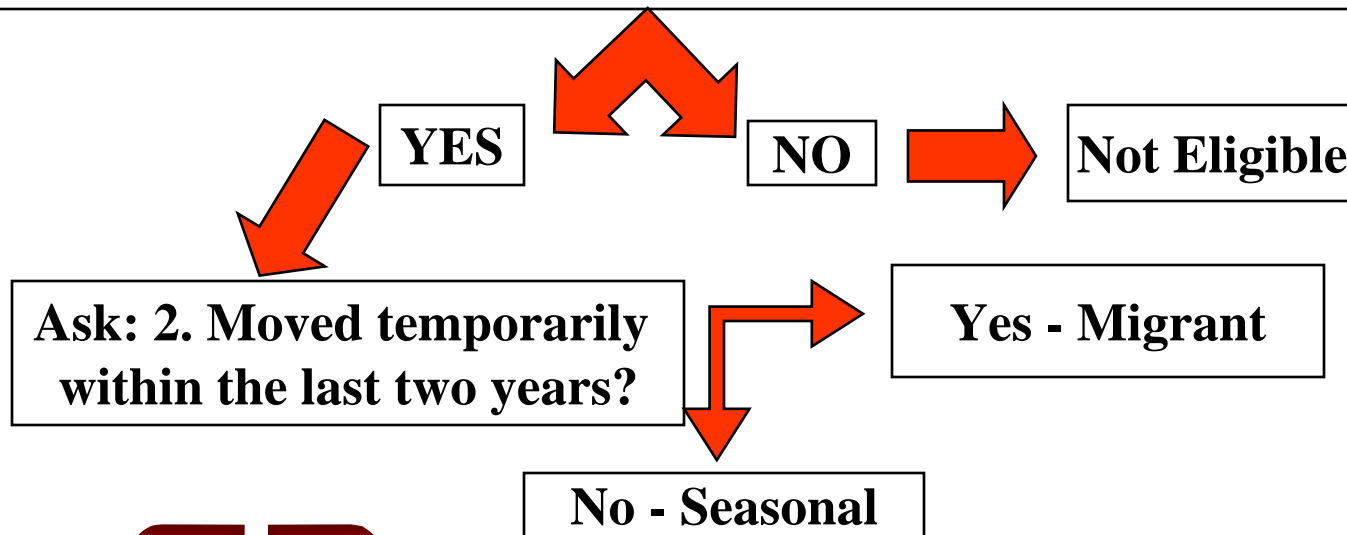


# Eligibility – Migrant/Seasonal Farmworker

Ask: Over the past 24 months have you or a family member upon who you are dependent been hired to do farm work?



Ask: 1. Do you earn the greatest portion of your work-related income from farm work?



# Migration Pattern or Stream

- Many Migrant Farm workers use what is called a pattern or stream of migration, which are divided into three: Western, Midwestern and Eastern.
- There are also other types of patterns:  
Restricted: Farm workers that travel through a season within a relatively small geographic area, are more often an older and experienced group with capital and sophisticated social network.

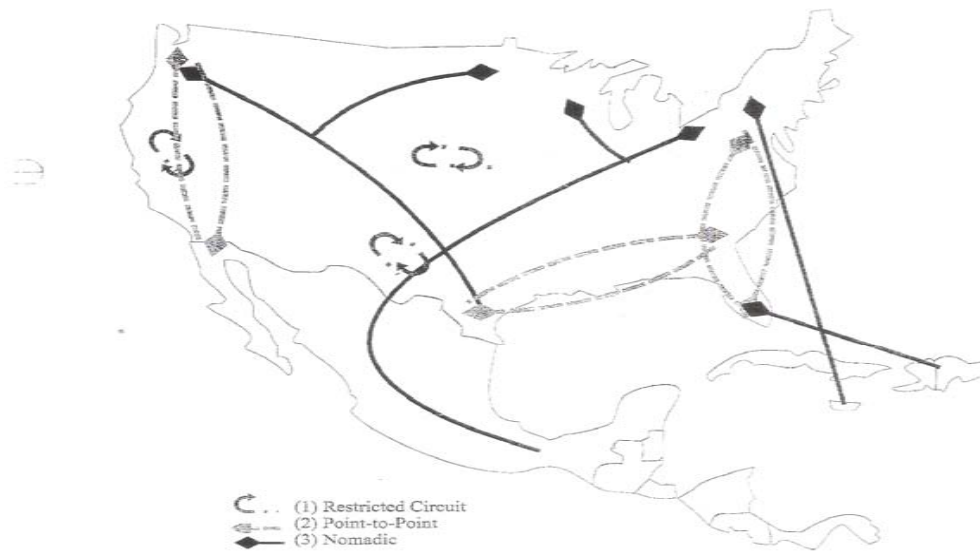


# Migration Pattern or Stream

- **Point to Point:** Group of people that travels to the same place or series of places along a route during the course of a season. They usually have low capital and often travel with others. They tend to have less agricultural experience.
- **Nomadic:** Group of people that travels from home for a period of years working from farm-to-farm or crop-to-crop. They are likely to be young with little to no experience in agriculture. They are at higher risk because they know little about health care or available resources.



# Migrant Stream Chart



# Demographics

The Migrant Health Network serves the following population:

- **100% migrant or seasonal farmworker**
- **96% Hispanic**
- **81% male**
- **55% between ages of 25 and 44**
- **94% from Mexico**
- **3,000 in our area, 14,000 in Virginia, (5,750 MSFWs in the TMC Service Area that includes 2 North Carolina Counties)**
- **4 million in the U.S**



# Demographics (continued)

- **99% of the MSFWs served by MHN live below the Federal Poverty Level (61% U.S. Comparison NAWS)**
- **2% have Insurance Coverage (6% NAWS Comparison)**
- **Appalachian University Study notes 76% of farmworkers work in Christmas Trees 9 to 11 months of the year**
- **Average Weekly Earnings \$180**
- **Most MSFWs served by MHN are undocumented**
- **More Women and Families are served now 78% Male/22%Female (Compared to all Single Males in 1997)**
- **Currently Serving 10 Pregnant Women in MSFW Families**



# Migrant Farmworker Facts

- Migrant farmworkers earn below \$7,500 a year – of which they usually send half to their families in Mexico
- 70% of U.S. fruits and vegetables are handled by migrant farmworkers
- In Virginia Migrant farmworkers are not eligible for welfare, food stamps, Medicaid



# Migrant Farmworker Facts



- 78% of farmworkers endure parasitic infections compared to 2-3% in the general population.
- Fewer than 33% of farmworker women receive prenatal care during their first trimester of pregnancy.
- The infant mortality rate among farmworker children is more than **twice the national average.**



# HEALTH ISSUES

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- In fields- pesticides
- Cold/damp interiors
- Toilet in sleeping area- GI, anorexia, gastritis
- Single bed usage – distress
- Lack of laundry – bath and laundry in kitchen sink expose food surfaces to pesticides and fertilizers
- Pediatric concerns: infectious diseases, poor nutrition, parasites, dental disease
- Prenatal care: often delayed and interrupted, high frequency of pregnancy, domestic violence
- Adult: Higher risk of diabetes, sexually transmitted diseases, TB



# HEALTH ISSUES (continued)

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Agriculture 2<sup>nd</sup> most dangerous occupation

**Occupational: contact dermatitis, green tobacco sickness, musculoskeletal problems, heat stress, insect/snake bites, machinery injury**



# BARRIERS

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- **Lack of transportation**
- **Hours of operation of clinics**
- **Knowledge of where to go**
- **Language barriers – Title 6 Civil Rights Act**
- **Finances**
- **Fear of Authorities**

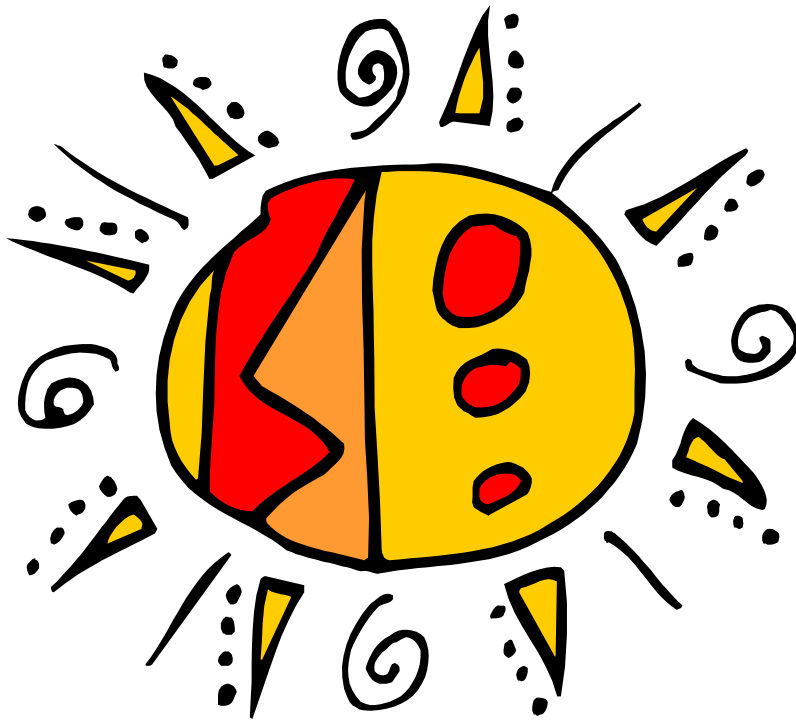


# Migrant Health Network Partner CHCs

- Southwest Virginia Community Health Systems, Inc.
- Tri-Area Health Center
- Stone Mountain Health Services
- Clinch River Health Clinic



# Counties Served



- Lee
- Scott
- Russell
- Smyth
- Washington
- Carroll
- Grayson
- Patrick



# COLLABORATION

## SPECIALTY CARE

### UVA Telemedicine Program

- 24 Separate Specialties available to our patients
- They accept our Sliding Fee Scale
- Digital Retina Camera for Eye Exams
- Also used for Patient Education (8 week Diabetes Education Program)
- Provider and Staff CME



# COLLABORATION (Continued)

## **ETSU FREE Health Fairs**

- **Conducted in October at SMC/TMC**
- **300 Complete Physicals at SMC/103 Complete Physicals at TMC**
- **Evening Hours Devoted to MSFWs**

## **COLLEGE of HEALTH SCIENCES (PA Program)**

- **HRSA GRANT for Chronic Disease Management with a Focus on Hispanic Patients**
- **Assist in the Development of Self Management Plans and Education Programs for Patients**
- **Completed Needs Assessment for MSFWs in the Grayson County Area (TMC EMC Grant for serving MSFWs)**



# COLLABORATION (Continued)

## Local Health Departments

- Immunization and Preventative Assessments (2 Positive TB cases found in 2001)
- Local Health Departments complete MSFW Housing Inspections
- Local Contracts with area Providers for Specialty Care and Services ( many donate their services)
- Surgery donated by Dr. Calvin Miller restored the sight of a migrant worker that was legally blind
- Contracted with Washington County Free Dental Clinic to stay open one night per week to serve MSFWs
- Farmworker Health Program in Ashe and Alleghany Counties of North Carolina refer patients to TMC



# MEDICATION

## **Mt. Rogers Medication Assistance Program (MAP)**

- **Provides Free Medications through The Pharmacy Connection Program of the Virginia Health Care Foundation.**
- **\$258,000 State Grant to employ Patient Advocates to complete the application for assistance through the 100 indigent drug programs**
- **In 2007 we served almost 3,600 patients with 32,772 free prescriptions and valued at almost \$9.8 million**
- **340B Program at TMC and other local pharmacies**
- **Contracted Medications at reduced rates in areas not served by CHCs**



# Contact Us:

## Migrant Health Network

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### Migrant Health Network

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