SALES OF THE SALES

K'ZOOHEALTH

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BANGOR - They come to Michigan every spring, some 30,000 to 35,000 of them.

Many end their long journey from Texas or Florida in Keeler or Eau Claire or Bangor, southwest Michigan communities where they settle in small, wooden houses that lack flush toilets and, frequently, hot water for showers.

They bring with them few clothes, little money and the desire to make a decent wage toiling in the fields and orchards.

They also bring with them the same kind of needs for medical care that plague us all. But with these migrant workers there is not just a problem of paying for that medical care. There is also the problem of language.

Three of every four workers know little or no English.

Enter MARCHA — for Migrant and Rural Community Health Association — a not-for-profit organization with headquarters in Bangor and medical clinics in Bangor, Eau Claire, Holland and Benton Harbor.

While MARCHA will provide medical service to anyone who wants it, nearly two-thirds of its clients are migrant workers. Many MARCHA employees speak Spanish as well as English and many are of Hispanic background.

And like the Spanish word for which it is named, MARCHA is marching forward to meet a growing demand, says E. Roberta (Bobbie) Rider, executive director. Four years ago, its annual budget was about \$600,000, Today it is \$2 million.

Funds to operate the program, which grows from about 30 employees in the winter to 80 in the summer harvest season, "come from anywhere we can get them," Mrs. Rider said.

Just over \$1 million comes from the federal Health and Human Services' Bureau of Community Health Delivery and Assistance program to provide medical services for migrant workers. Remaining funds come from other federal and state programs, including the WIC (Women, Infant a \$3 charge for each visit.

If patients need to be referred to other physicians, MARCHA can pay a portion of specialists' fees, she said. Funds, however, are not available for surgical procedures. "But we try to plug them into other" organizations, including charities, which help pay for emergency medical needs, she said.

Some migrant workers are not American citizens and do not qualify for Medicaid.

A report prepared by the Michigan Department of Public Health notes that migrant workers have a variety of special health needs. They include not just language problems, but a higher incidence of infant mortality, primarily a result of a lack of prenatal care; a higher susceptibility to communicable disease resulting from a lack of immunization among children and adults as well as poor environmental and sanitary living conditions; difficulty managing diabetes and high blood pressure; and a need for dental care.

MARCHA is one of seven programs in the state that operate 16 clinics that provide health care to migrants. While MARCHA provides services in much of southwest Michigan, Pullman Health Systems covers Allegan County and Dowagiac Health Systems much of Cass County.

MARCHA and the Northwest Michigan Health Services Inc. of Manistee each have an estimated migrant population of 15,000 in their regions — the state's largest. But MARCHA, which had 11,171 visits by migrants in 1983, served more than twice as many of the workers as any other program.

MARCHA's WIC program, headed by Velma Dimas, served about 5,000 migrants and other area residents last year and is the fifth largest WIC program in the state.

Mrs. Rider said MARCHA provides medical services in a fivecounty region from the Indiana border to Ottawa County.

Medical education, prevention and treatment are provided for a fee based on the patient's ability to pay. Mrs. Rider said a sliding scale keyed to family income and Mrs. Rider said MARCHA's roots go back to the early 1970s when officials at the health departments in Van Buren, Berrien and Cass counties joined forces to help care for migrant workers. But to meet requirements of the 1969 Congressional Health Act, organizers had to form a non-profit, private medical project.

The Comstock Center in Dowagiac was the result. Mrs. Rider said the project proved successful and in 1972 satellite clinics were established at Berrien General Hospital in Berrien Center and in the back of a packing shed in Keeler, site of some of the highest concentrations of migrant workers.

In 1973 the name was changed to B.C.V. Health Services (for Berrien, Cass and Van Buren counties). Services spread to Allegan and Ottawa counties later. In 1981 it was renamed MARCHA.