

# Migrant Workers Being Educated on HIV

By THE ASSOCIATED PRESS

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FALLBROOK, Calif. (AP) -- Alicia Vera rises bleary-eyed before dawn, downs a cup of coffee and heads for nearby fields and churches to help stop the spread of AIDS.

She is among a small group of health educators working against language, cultural and economic barriers to reach an estimated 1.3 million migrant farm laborers living in California.

Previous studies of the state's migrant population have indicated a "fairly high amount of risk behavior but not a lot of HIV," said George Lemp, director of the University wide Aids Research Program at the University of California.

"The concern is whether with that much risk behavior, the HIV epidemic is on the threshold of a rapid increase," he said.

To keep that from happening, the program is working with state agencies, clinics and the Mexican government to test and educate migrants.

In northern San Diego County, Vera's team from the Vista Community Clinic scribbles medical histories, takes blood samples and answers questions from workers.

Among them is Jose Hernandez, 35, who has lived six years in a makeshift room near the fields where he picks strawberries and avocados.

Researchers said migrants who spend long stretches of time away from their families can be exposed to HIV through sex with other workers and prostitutes.

"A person has needs," Hernandez said. "You are here, very alone."

Many migrants forego condoms and sometimes share needles to inject vitamins to stave off illness and exhaustion, Lemp said. Hernandez knows condoms are important but admits he doesn't always use them.

The number of migrant workers with HIV in California is difficult to calculate because the population is so mobile. Many are in the country illegally and fear contact with health workers could lead to deportation.

Still, researchers have spotted some alarming trends, including identifying five cases of HIV among the 781 people in their ongoing study of immigrants.

"Ten years ago, you weren't finding any incidence of HIV among migrants in California, so this is significant," said Maria Hernandez, a researcher with the Universitywide Aids Research Program.

Pregnant women in labor at a hospital in Tijuana -- a stopover point for many migrants -- had an HIV rate four times higher than similar groups in this country and Mexico, according to a recent study by the University of California, San Diego.

With no hard data on the number of migrants with HIV, money for prevention has been limited.

Money is not the only problem. Outreach workers face cultural barriers in migrant communities, where issues of sex and the body are not readily discussed.

Armando Lunes Gomez, 17, has been in this country a year and lives with his older brothers. He says they have not discussed the use of condoms with him.

"I know about prevention a little, but we don't really talk about that," he said.

Sanudo said growers have been supportive of the research. But much of the testing and education takes place outside fields so work isn't interrupted.

Elisa Noble, health and safety director for the California Farm Bureau Federation, said growers are working with lawmakers, clinics and insurance groups to come up with an affordable health coverage system.

"Obviously there's still a lot of hoops to jump through and a lot of things that need to be done so that it's a feasible program," Noble said.

Clinic workers are also worried about public backlash against migrant workers, many of whom are undocumented. Efforts in Arizona to block social services for undocumented immigrants and recent volunteer border patrols have heightened that concern.

But Lemp insists California can't afford to ignore its migrant population.

"We could face a marked increase in HIV transmission, and we will all pay for it later," he said.