



MIGRANT EDUCATION HEALTH PROGRAM



Office of Superintendent of Public Instruction Migrant Education

PURPOSE/BACKGROUND

The goal of the Migrant Education Health Program provides advocacy and outreach activities to help eligible migrant students and their families gain access to comprehensive health, nutrition, and social services through health care providers and partnership organizations free of charge per Part C of Title I of the Elementary and Secondary Education Act of 1965, as amended (ESEA).

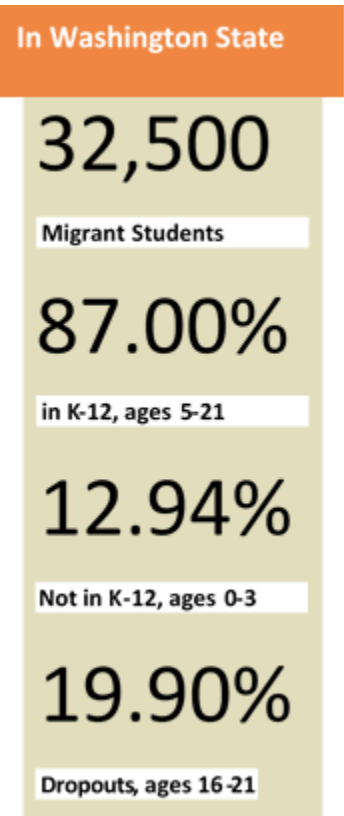
The need for support services is considered a part of the special educational needs of migrant children. Non-Regulatory Guidance for the [Title I, Part C Education of Migratory Children, Washington, D.C., 2017. Chapter VIII – “Program Evaluation.”](#)

“fulfilling a vision of public education where educators focus on education, students focus on learning, and auxiliary supports enable teaching and learning to occur unimpeded.” [HB 1541- Sec. 801\(1\)\(b\)](#)

NEED FOR SERVICE

Washington has the 3rd highest number of migrant students after the California and Texas. OSPI reports that in 2016, the migrant student graduation rate averaged 66.9% in a 4-year cohort, which was 13% lower rate than non-migrant students¹. In addition, approximately 19.9% of Washington State migrant students, ages 16-21, drop out of school every year in comparison to 12.3% of all students². Migrant student dropouts are the fastest growing population within the Migrant Education Program. In an effort to successfully implement and meet the goals of Every Student Succeeds Act (ESSA)³ to improve graduation rates, improve school engagement, and address the needs of at-risk populations, this program was developed with the understanding that the health of migrant children and the need for supplemental services plays a pivotal role in diminishing the opportunity gap.

Migrant children and eligible out-of-school youth face many barriers that impede their academic success including access to adequate housing, food, security, transportation, language, culture, geographic isolation, and health care. The continuity of health care is a primary concern. Migrant students typically lack continuity of health care due to the migrant life-style- **resulting in numerous**



¹ <http://www.k12.wa.us/DataAdmin/PerformanceIndicators/GraduationRates.aspx>

² <http://www.k12.wa.us/LegisGov/2015documents/GradandDropoutStats2015.pdf>

³ <http://www.k12.wa.us/esea/essa/default.aspx>

chronic and acute health problems that go untreated and unresolved. Ongoing and unresolved health problems such as medical, dental, vision, health education, substance abuse, and sexually transmitted diseases are a real threat that evidently inhibit their ability to engage and succeed in school.

Prevalence in Migrant Health

By Ranking Order

1. **Dental Disease/Gums-Cavities**
2. **Hearing Loss Unspecified**
3. **Visual Problems**
4. **Anemia**
5. **Obesity**
6. **Asthma**
7. **Skin Problems**

Figure 1: MIGRANT HEALTH PROBLEMS BY CATEGORY WASHINGTON STATE DATA

medical attention each year.

The health of migrant children reflects the nature of a mobile, rural lifestyle where most medical problems are related to deficiencies in diet, oral health, and hygiene. Data gathered annually since 1978 has revealed the urgent and ongoing need to provide physical examinations, follow-up medicine, dental and optical care for conditions diagnosed during the examination. Given the current migrant student enrollment, it is anticipated that over 10,000 identifiable students have an ongoing or unresolved health problem without proper or continuous

The most prevalent health problems are ranked in order from highest to lowest as seen in figure 1- with the most urgent dental caries. The presence of dental caries is usually a reflection of poor dental hygiene and/or inadequate diet. Dietary inadequacies are also reflected in the statistics in anemia and obesity. Early detection of such conditions and referral to a health care practitioner is the focal point of the Migrant Education Examinations.

Who are Migrant and Out-of-School Youth?

Migrant⁴

An individual that is not older than 21 years of age, who:

- Is entitled to a free public education (through grade 12) under State law, or the child is not yet at a grade level at which the LEA provides a free public education⁵.
- Made a qualifying move in the preceding 36 months as a migratory agricultural worker or a migratory fisher, or did so with, or to join a parent/guardian or spouse who is a migratory agricultural worker or a migratory fisher; and
- Moved due to economic necessity from one residence to another residence, and from one school district to another; or from one administrative area to another within such district; or resides in a school district of more than 15,000 square miles and migrates a distance of 20 miles or more to a temporary residence.

⁴ Title I, Part C Education of Migratory Children, Washington, D.C., 2017. Chapter VIII – “Program Evaluation

⁵ <https://www.aclu-wa.org/file/97507/download?token=u7yueLrp>

Out-of-School Youth⁶

Out-of-school youth, also known as OSY, refers to 16-21-year-year-old migrant eligible youth who are not currently enrolled in a K-12 education, have not yet graduated from high school, or have not received a high school equivalency diploma. This may include:

- Students who have dropped out of school and have not received a GED.
- An individual who has never enrolled in a K-12 educational system.
- Youth who are working on a GED outside of a K-12 school system.

This population includes students who fit the profile of "Here-to-Work," meaning they have no intention to enroll in the U.S. educational system. However, it is important to recognize that many individuals in this population are underage and are entitled to a free public education (through grade 12) under State law, or the at a grade level at which the Local Educational Agencies (LEAs) provides a free public education⁴.

Service Delivery

Collaboration

With the support of collaborating ESDs in Yakima, Pasco, Anacortes, and Wenatchee the Migrant Education Health Program has launched the OSY/Health Coordinators initiative to help support districts connect eligible migrant and out-of-school youth throughout the state to supplemental support services- including health, post-secondary education, and social services. **This includes supporting eligible migrant students in migrant funded school districts and non-migrant funded school districts.**

What type of services does the program provide?

Direct Preventative Services

The Migrant Education Health Program can help migrant families gain access to community resources or provide migrant students **direct preventative services** or treatment on an **emergency or one-time basis***, such as:

- Physical Examinations- (including sports physicals)
- Dental Exams
- Vision & Hearing
- Immunizations
- Reproductive Health
- Health Education
- Homelessness Support
- Food Security
- Socioemotional Support / Mental Health Services
- Other Medical Referrals

⁶ <http://www.osymigrant.org/>

What is an Emergency One-Time Treatment?*

An emergency or one-time treatment includes, but is not limited to:

- Infections
- Fractures
- Open wounds
- Tooth extractions/repairs
- Eye glasses
- Behavioral intervention needs. (e.g. threats of abuse, neglect, suicide, etc.).

Given the level of costs sometimes associated with health services, the limited availability of Migrant Education Program funds in the Migrant Education Program statute, state and local educational agencies should explore all other sources to defray service costs before using Migrant Education Program funds.

What types of services does the program not provide?

The Migrant Education Health Program does not cover or provide ongoing or long-term health services, unlike a conventional ongoing health care plan. The design of the program is intended to provide preventive services given the limitation of Migrant Education Program funding and federal limitations. Some of these services may include:

- Non-emergency surgeries
- Treatment of chronic illness or diseases
- Orthodontia (e.g. Braces)
- Other long-term health services regardless of whether these services are also preventive.

Technical Assistance

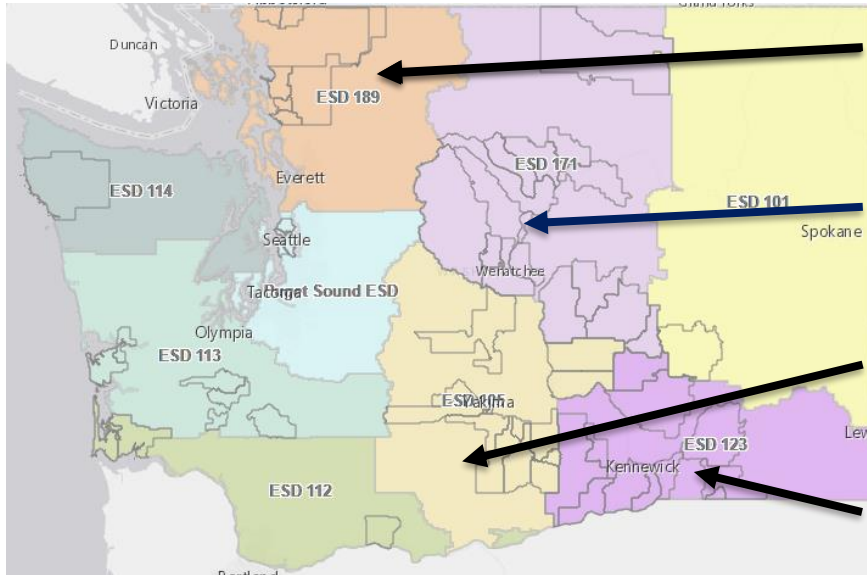
In line with district plans to provide student support, the OSY/ Health Coordinators will provide additional community outreach, follow-up and technical assistance to districts and parents -- ensuring services have been successfully delivered and any ongoing or unresolved problem has been addressed.

OSY/ Health Model

Each coordinator will serve as the regional migrant health and out-of-school point of contact at their perspective ESD and will work collaboratively with school districts and community organizations who currently service or conduct OSY recovery efforts. If a student is within the boundaries of a migrant-funded district, they will be referred to their perspective district for support services or local community organization.

How to access services

Speak with your school district's Migrant Education Program or contact a regional OSY/Health Coordinator to determine a student's eligibility. Once eligibility is determined, a certificate of eligibility is granted to begin receiving services. The Migrant Education Health Program serves as a referral service as it collaborates with community resource agencies in providing information and/or services to migrant families.



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