

2021 Virtual Migrant and Community Health Forum

March 22, 2021

Presenters:

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Digital and Health Access for Agricultural Workers and Their Families

Disclaimer: Views are solely those of the presenters. The results presented here are based on preliminary data.

Overview

- Discuss the development of and findings from two new supplements to the National Agricultural Workers Survey (NAWS)
- Digital Access
 Supplement
- HRSA-sponsored Preventive Health Supplement





National Agricultural Workers Survey (NAWS)

- National survey of <u>crop workers</u>, started in Federal Fiscal Year 1989
- Annual random sample survey of 1,500–3,000 workers
- Establishment survey find workers at work
- Reliable source of information on crop worker demographics
- Limited regional coverage and no local numbers
- H-2A workers excluded

NAWS Sampling Universe

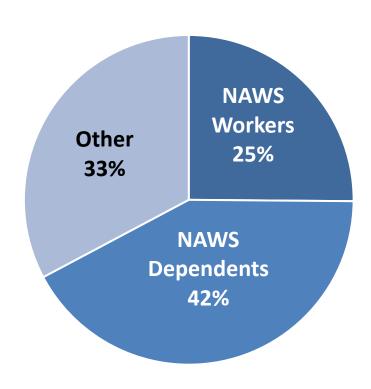
Includes:

- Currently employed in last 12 months
- Domestic currently in the US
- Crop workers NAICS 111, 1151
- Family members of the above groups

Does not include:

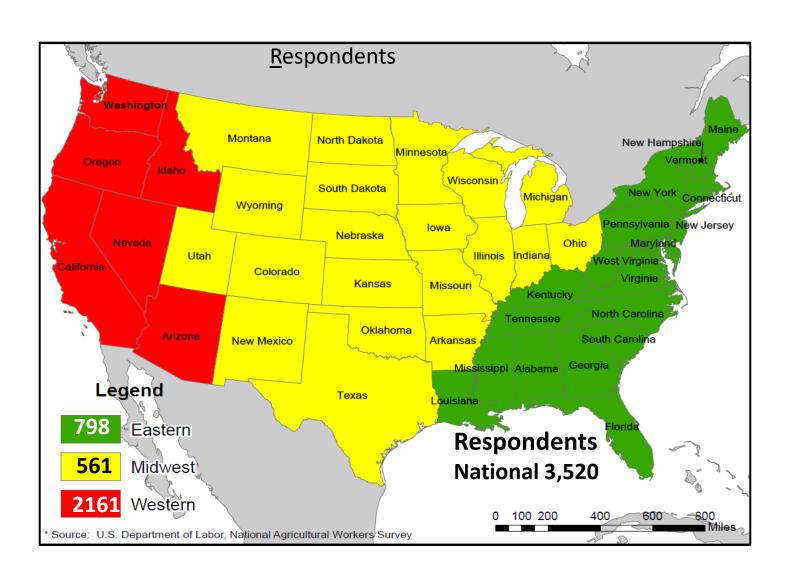
- Formerly employed ag workers
- H-2A workers
- Livestock workers NAICS 112, 1152
- Aged or disabled workers who are no longer in the crop labor force
- Family members of the above groups

Percent of 330g Migratory and Seasonal Agricultural Worker Population NAWS 2018–2020



Calculations based on LSC and DOL/ETA population estimates

NAWS Migratory Streams



Reporting Policies

- National numbers are for the continental US and do not include Alaska, Hawaii, or U.S. territories and protectorates
- Estimates marked with a superscript 'a' should be interpreted with caution as they have large variances defined as a relative standard error between 31 and 50 percent
- Some of the estimates identified with a superscript 'b' are suppressed because they are based on fewer than four observations or they have relative standard errors greater than 50 percent



Digital Access Supplement

Developing the Digital Access Supplement

Purpose

 Provide key information about broadband access and digital literacy in the United States for MSFWs and their families

Content areas

- Access to digital information
- Types of devices for farm worker, spouse, and children
- Farm workers' use of devices for information about services

How the data will be used

 Support the development of technology-based products and services that can reach and assist MSFWs and their families in the areas of safety, education and training, health care, housing, and employment

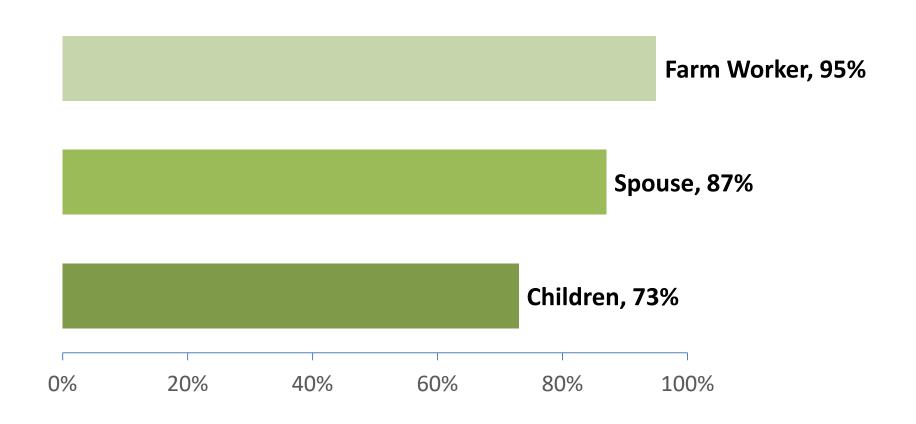
Synergies with other data

 The NAWS digital access questions will complement, and in some cases, parallel questions that are used in other national and international surveys, such as the Program for International Assessment of Adult Competencies, which likely under-represent MSFWs



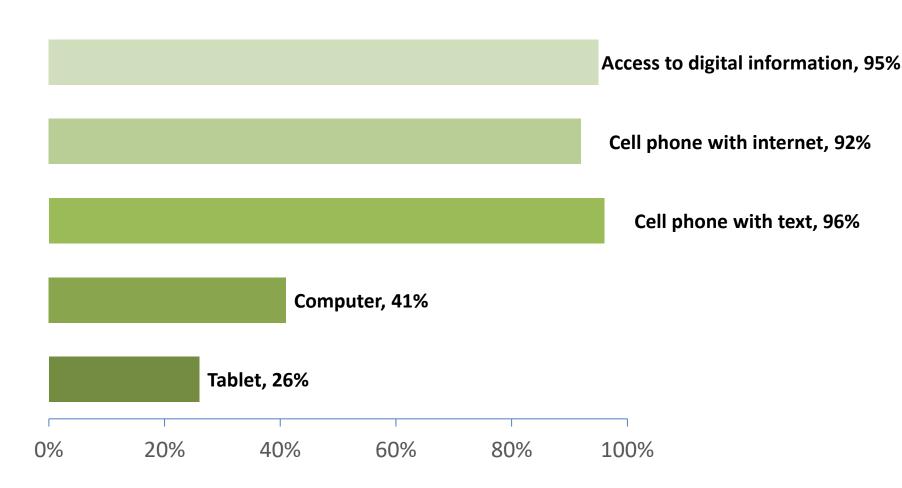
Setting the scene: Prior findings on agricultural workers' digital access?

- Lack of national studies on digital access. Prior studies on agricultural workers' digital access provided critical information and at the same time were generally, small, geographically-limited, sometimes qualitative and done at different times. Garcia (2011), (Price 2013), Jimenez (2017), Grieshop (2003), and Sandberg (2016)
- PEW Hispanic Research Center regularly conducts national surveys and have found that:
 - "...Hispanics are more likely than whites to rely on their smartphones for a number of activities, such as seeking health information or looking for work, according to a Pew Research Center survey from late 2014 " (Perrin 2019).
 - ".....Hispanics express pronounced interest in getting training that would help improve their digital skills. Some 46% of blacks and 48% of Hispanics say training to help them be more confident in using computers, smartphones and the internet would help "a lot" in terms of making important decisions, compared with 20% of whites" (Perrin 2019).
 - From 2013-2019: Ownership of desktop/laptop computers declined among Hispanics from 72% to 57% while ownership of Smartphones increased from 49% to 79%



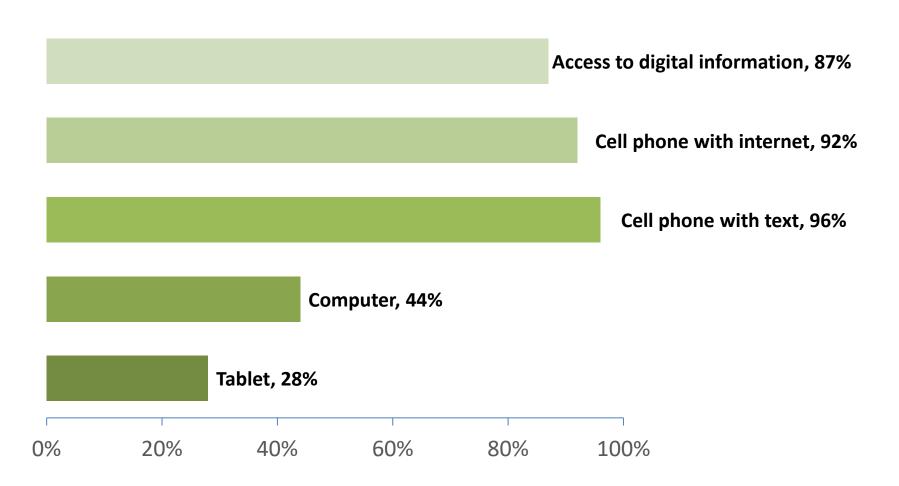
Farm Worker: What devices?

(DA1, DA2-DA5)



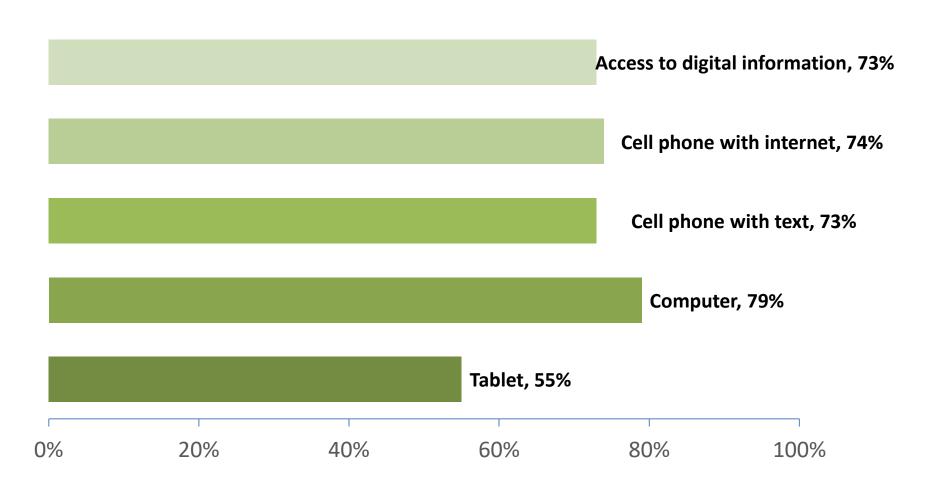
Spouse: What devices?

(DA1, DA2-DA5)

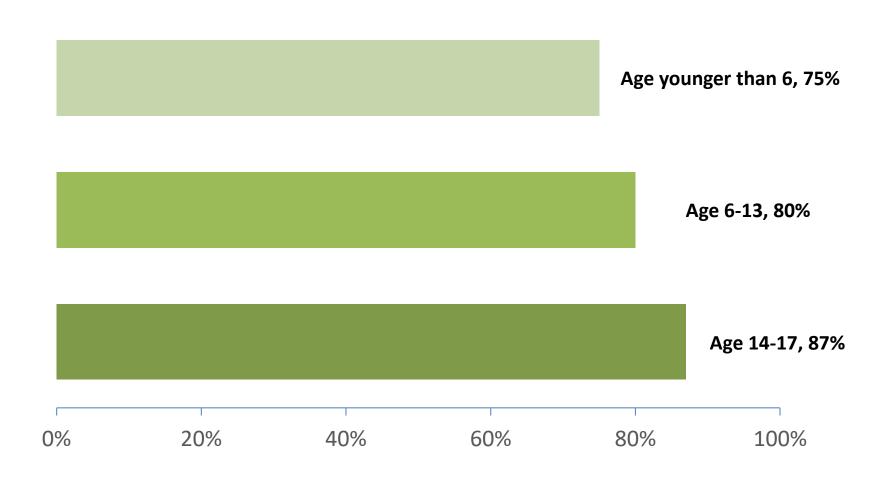


Children: What devices?

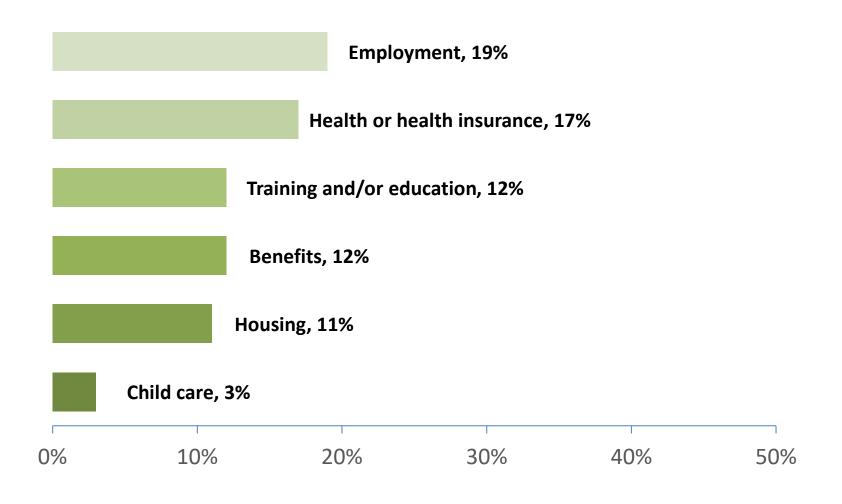
(DA1, DA2-DA5)



Children: Computer Access by Age (DA2)



Have you used, received help to use a digital device to seek or obtain information on (DA7):



Who helped obtain information on (DA9):

Торіс	By themselves	From spouse	From children
seeking employment	96%	6%	4% ^a
health or health insurance	96%	20%	7%
training and/or education	94%	9%	5%
benefits	92%	19%	11% ^a
housing	97%	12%	4% ^a
child care	97%	25%	<1%

Totals may exceed 100% as respondents could select all applicable responses.

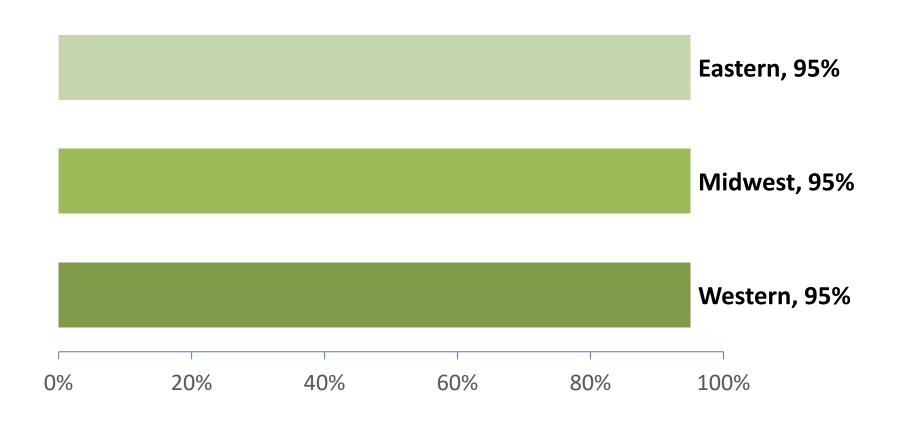
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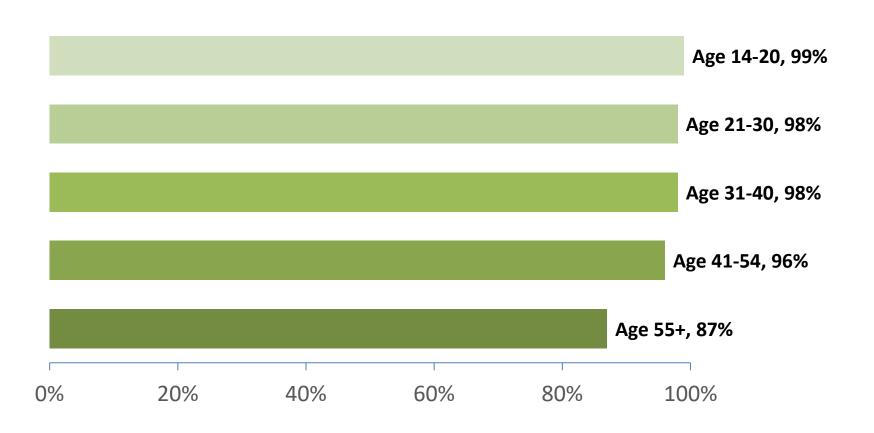


Differential digital access within the agricultural worker population

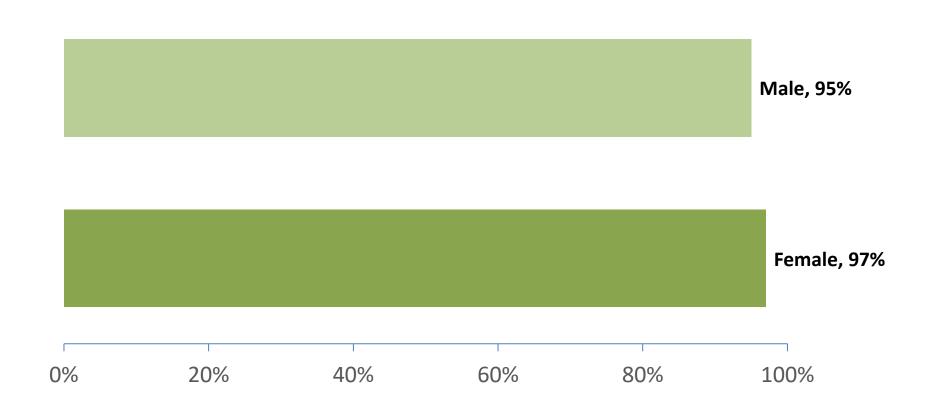
Differences in Digital Access by Stream



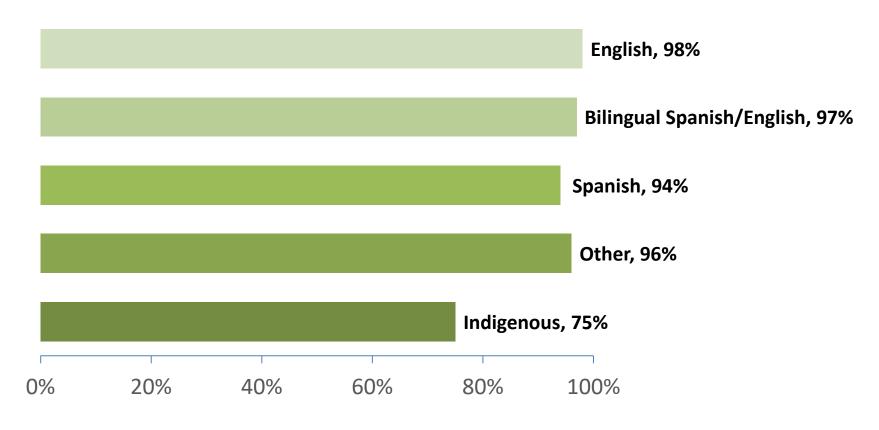
Differences in Digital Access by Age



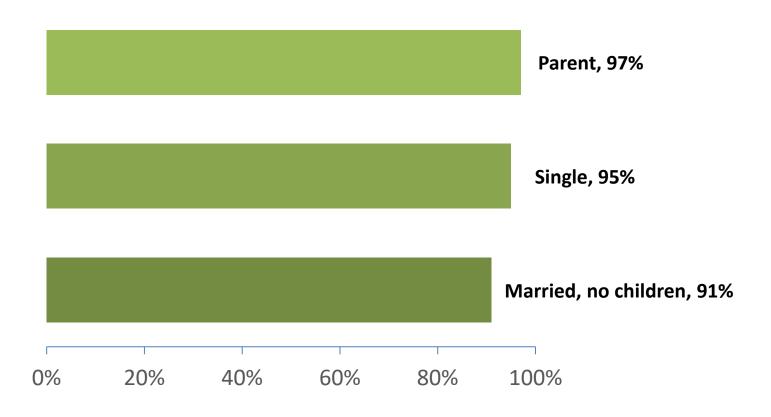
Differences in Digital Access by Gender



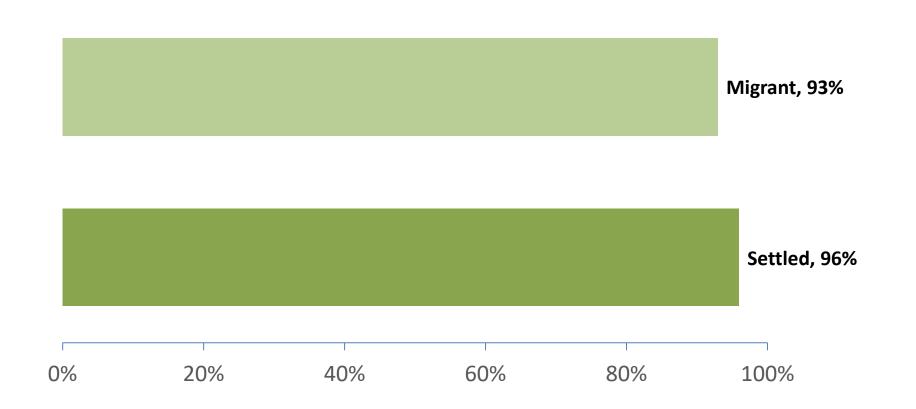
Differences in Digital Access by Primary Language



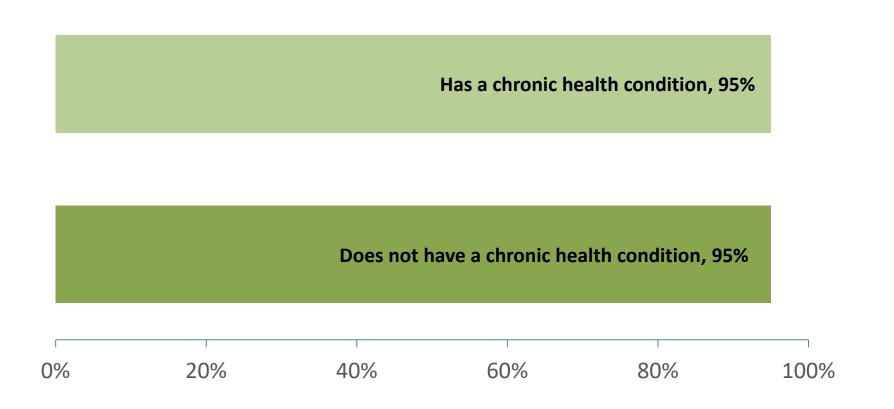
Differences in Digital Access by Family Composition



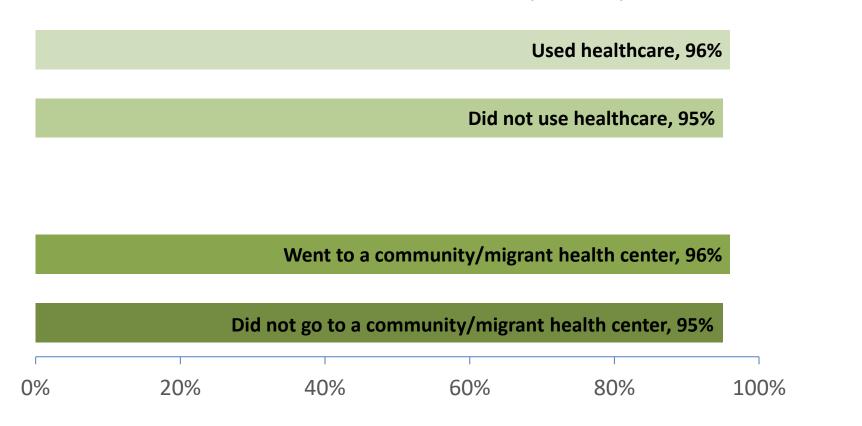
Differences in Digital Access by Migrant Status Do you or anyone in your household have access to digital information sources? (DA01)



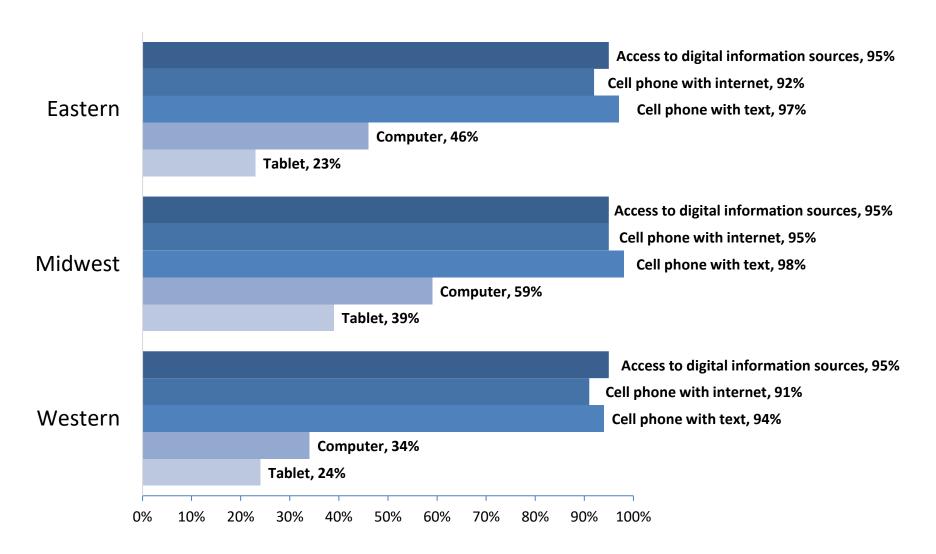
Differences in Digital Access by Chronic Health Condition



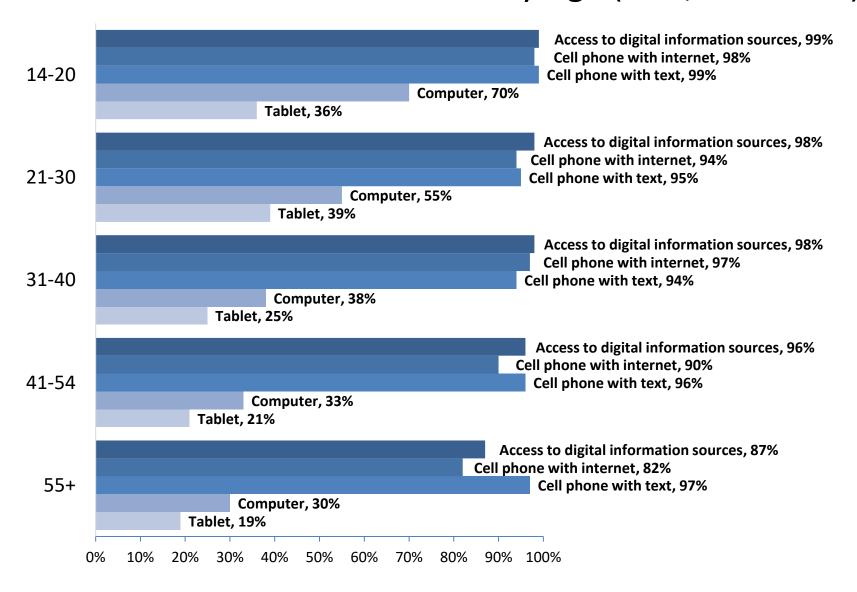
Differences in Digital Access by Healthcare and Health Center



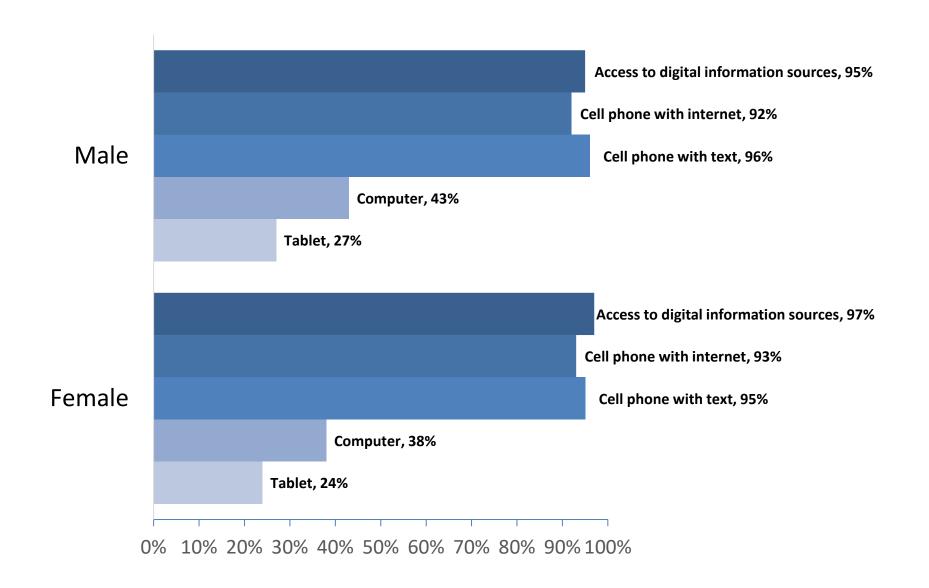
Farm Worker: What Devices by Streams (DA1, DA2-DA5)



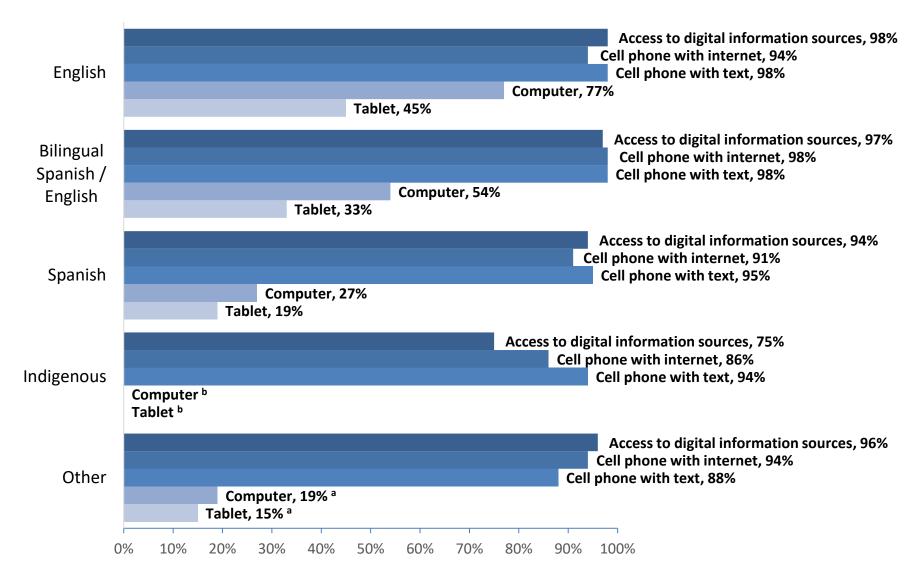
Farm Worker: What Devices by Age (DA1, DA2-DA5)



Farm Worker: What Devices by Gender (DA1, DA2-DA5)



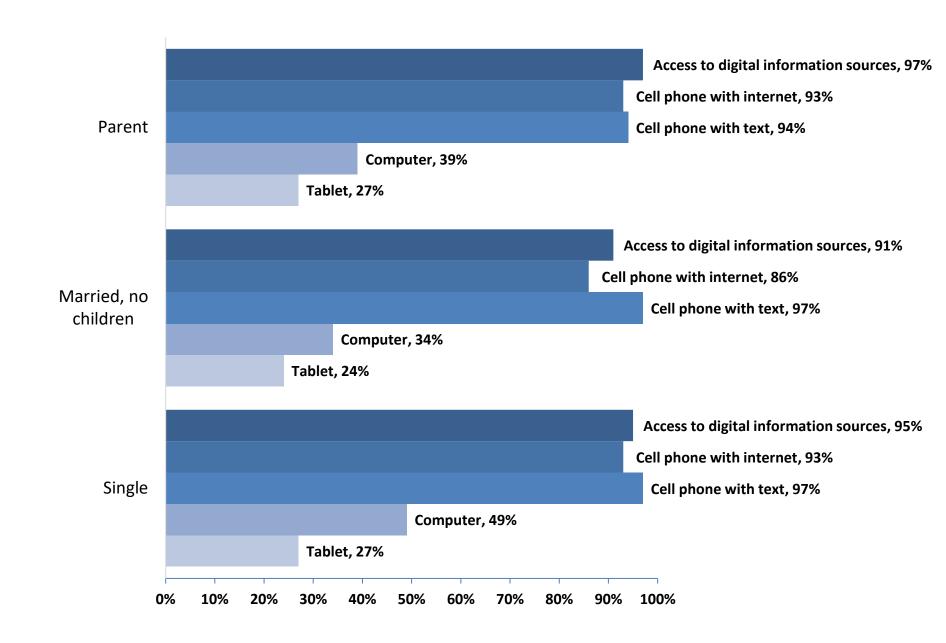
Farm Worker: What Devices by Primary Language (DA1, DA2-DA5)



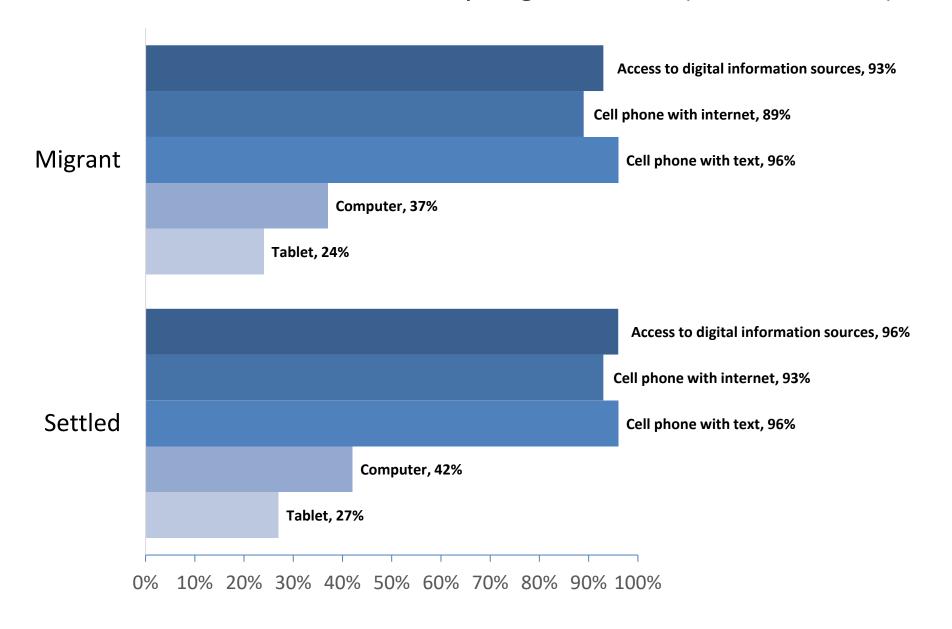
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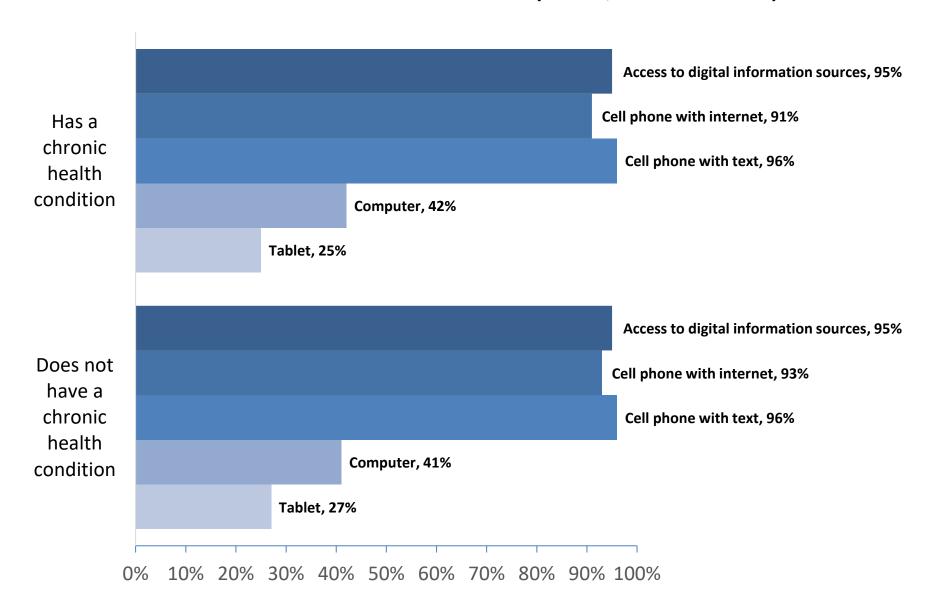
Farm Worker: What Devices by Family Composition (DA1, DA2-DA5)



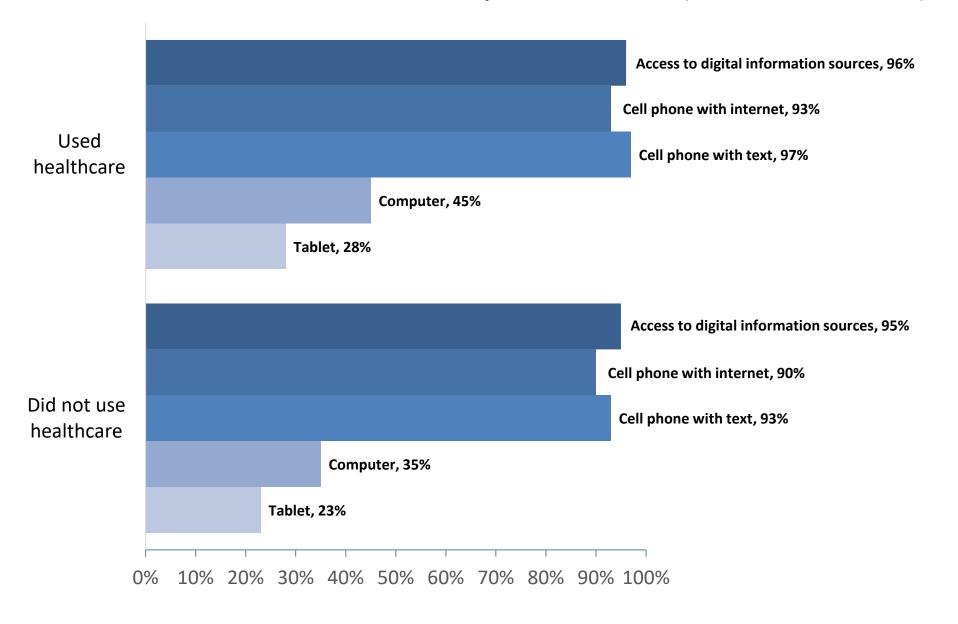
Farm Worker: What Devices by Migrant Status (DA1, DA2-DA5)



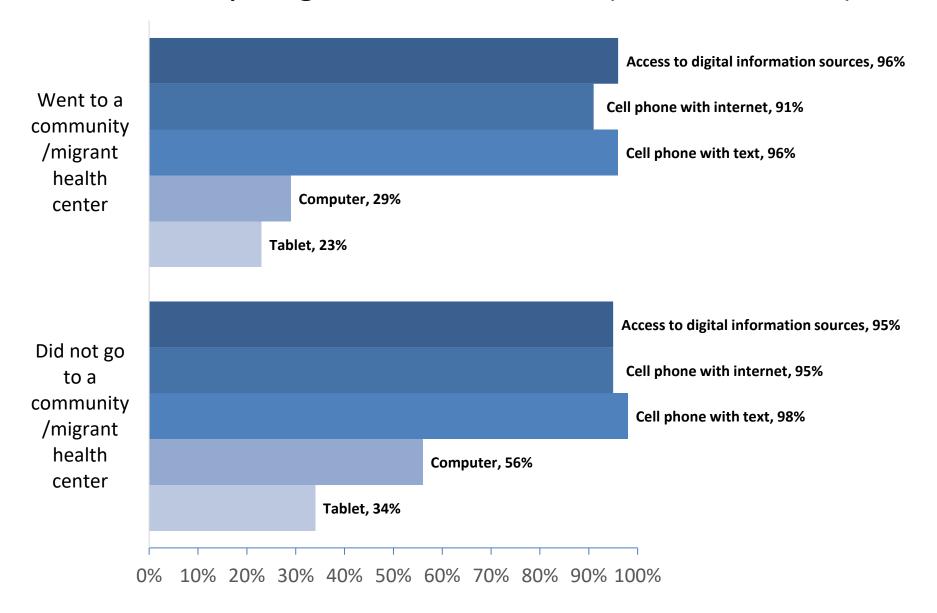
Farm Worker: What Devices by Chronic Health Condition (DA1, DA2-DA5)



Farm Worker: What Devices by Healthcare (DA1, DA2-DA5)



Farm Worker: What Devices by Community/Migrant Health Center (DA1, DA2-DA5)



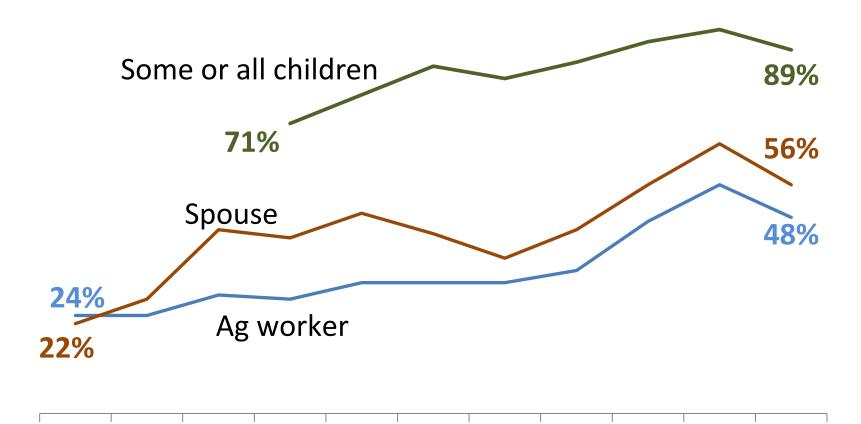


HRSA Health Supplement



First, a Quick Look at Health Insurance

Reported Having Health Insurance



2000 2002 2004 2006 2008 2010 2012 2014 2016 2018 2020

Source of Health Insurance

(National – For those with health insurance)

Insurance Source	Farm Worker	Spouse	Children
Government Program	38%	43%	83%
Employer Provided	26%	14%	3%
Farm Worker	12%	9%	3% ^a
Spouse's Employer	7%	27%	9%
Spouse	0.5% a	3% a	b
Parent	12%		
Other	7%	7%	2%

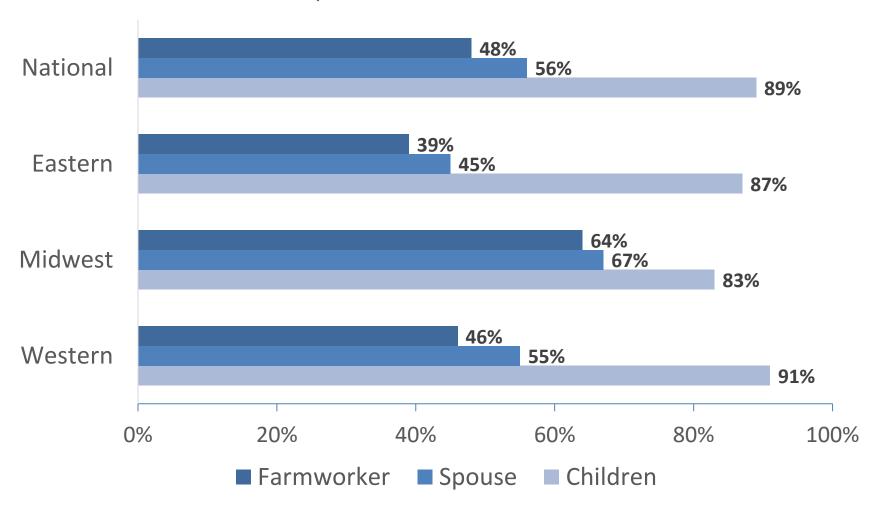
Totals may exceed 100% as respondents could select all applicable responses.

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Health Insurance

Farm Worker, Spouse, or Children with Heath Insurance



Health Insurance Source: Farm Worker (Streams)

(For those with insurance)

Insurance Source	National	Spouse	Children
Government Program	38%	43%	34%
Employer Provided	26%	14%	25%
Farm Worker	12%	9%	15% ^a
Spouse's Employer	7%	27%	11%
Spouse	<1% a	3% ^a	<1%
Parent	12%		
Other	7%	7%	10 %ª

Totals may exceed 100% as respondents could select all applicable responses.

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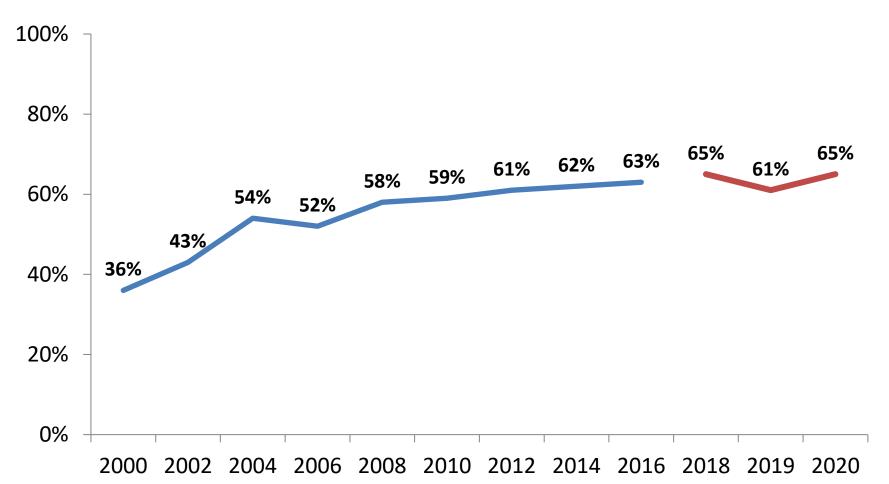


How the health supplement expands what we know about agricultural workers' health

Source: NAWS 1999-2020

Comparing the old and new questions: Trend in share of farm workers visiting a healthcare provider

*For Injury, Routine, Illness, or Preventive Care



2000 to 2016 "in the last two years" shows data for two fiscal years combined (e.g., "2016" is 2015–2016 combined). 2018 to 2020 " in the last 12 months" shows data for one fiscal year at a time.

Only partial data were available for fiscal year 2017 and were excluded from the chart.

Healthcare Visits for Routine or Preventive Care (Farm Worker, Spouse, and Children)

Routine visit	Farm Worker	Spouse	Children
Routine visit	57%	61%	76%
Of those, had insurance	68%	70%	78%
Top 3 providers			
Private clinic or doctor's office	53%	51%	54%
Community/migrant health center	44%	46%	42%
Hospital	3%	3%	3%
Top 3 reasons for no visit			
No need to go / Doesn't get sick	82%	90%	92%
No insurance	13%	4%	1% a
Too expensive	11%	7%	4% ^a

^a Estimates have relative standard errors between 31% and 50% and should be interpreted with caution.

Preventive Care: Farm Worker (Part 2)

Routine visit: Farm worker	Farm Worker		
Routine visit	57%		
Of those, had insurance	68%		
Top Payers for Visit			
Medicare/Medicaid	21%		
Out of "my own pocket"	18%		
Employer provided health plan	17%		
Public clinic did not charge	15%		
Satisfaction	Very Satisfied	Somewhat Satisfied	Not Satisfied At All
Farm worker	93%	6%	1% ^a

^a Estimates have relative standard errors between 31% and 50% and should be interpreted with caution.

Healthcare Visits for Illness (Farm Worker, Spouse, and Children)

Illness visit	Farm Worker	Spouse	Children
Illness visit	16%	20%	16%
Of those, had insurance	17%	22%	17%
Top 3 providers			
Private clinic or doctor's office	39%	42%	48%
Community/migrant health center	32%	36%	32%
Hospital	18%	15%	9%
Top 3 reasons for no visit			
No need to go / Doesn't get sick	96%	94%	95%
No insurance	4%	1%	b
Too expensive	2%	5% a	4% a

^a Estimates have relative standard errors between 31% and 50% and should be interpreted with caution.

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Illness: Farm Worker (Part 2)

Illness visit: Farm worker	Farm Worker		
Illness visit	16%		
Of those, had insurance	17%		
Top Payers for Visit			
Medicare/Medicaid	25%		
Out of "my own pocket"	16%		
Employer provided health plan	16%		
Self or family bought individual			
health plan	13%		
Satisfaction	Very Satisfied	Somewhat Satisfied	Not Satisfied At All
Farm worker	85%	13%	2 % ^a

^a Estimates have relative standard errors between 31% and 50% and should be interpreted with caution.

Source: NAWS 2018-2020: HA1, HA2, HA7, HA15, HA16, and HA18

Healthcare Visits for Injury (Farm Worker, Spouse, and Children)

Injury visit	Farm Worker	Spouse	Children
Injury visit	6%	4%	2%
Of those, had insurance	6%	4%	3%
Top 3 providers			
Private clinic or doctor's office	45%	37%	37%
Community/migrant health center	21 % ^a	15%	11%
Hospital	17%	33%	31%
Top 3 reasons for no visit			
No need to go / Doesn't get sick	97%	96%	96%
No insurance	3%	<1%	b
Too expensive	2%	4% a	3 % ^a

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Injury: Farm Worker (Part 2)

Injury care visit: Farm worker	Farm Worker		
Injury care visit	6%		
Of those, had insurance	6%		
Top Payers for Visit			
Worker's compensation	29%		
Employer provided health plan	23%		
Self or family bought individual health plan	16%		
Out of "my own pocket"	10%		
Satisfaction	Very Satisfied	Somewhat Satisfied	Not Satisfied At All
Farm worker	87%	8%	5% a

^a Estimates have relative standard errors between 31% and 50% and should be interpreted with caution.

Source: NAWS 2018-2020: HA1, HA2, HA7, HA15, HA16, and HA18

Dental Care (Farm Worker, Spouse and Children)

Dental care visit	Farm Worker	Spouse	Children
Dental care visit	34%	41%	67%
Of those, had insurance	44%	44%	69%
Top 3 providers			
Dentist	73%	76%	75%
Private clinic or doctor's office	17%	13%	14%
Community/migrant health center	8%	10% a	10%
Top 3 reasons for no visit			
No need to go / Doesn't get sick	76%	96%	96%
Too expensive	21%	4% a	3% b
No insurance	16%	<1%	b

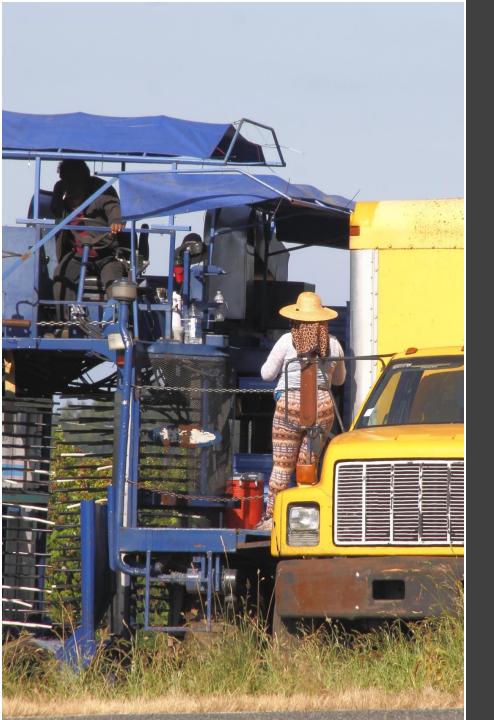
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Dental Care: Farm Worker (Part 2)

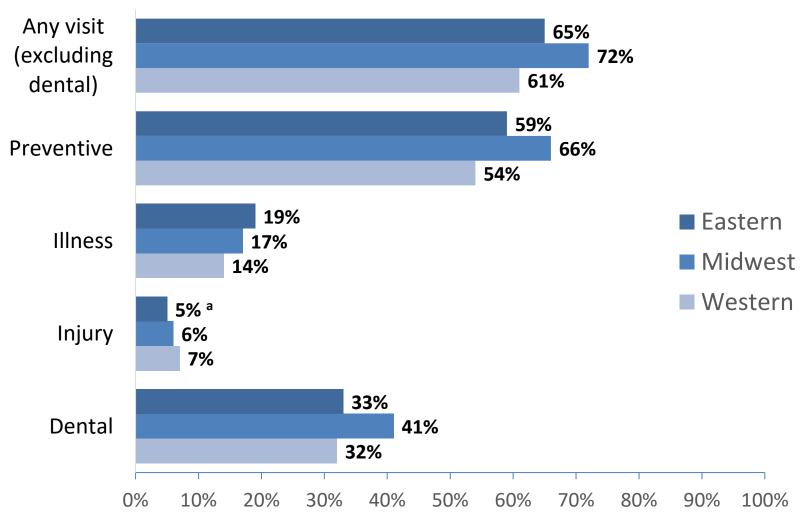
Dental care: Farm worker	Farm Worker		
Dental care visit	34%		
Of those, had insurance	44%		
Top Payers for Visit			
Out of "my own pocket"	36%		
Self or family bought individual			
health plan	18%		
Medicare/Medicaid	15%		
Employer provided health plan	14%		
Satisfaction	Very Satisfied	Somewhat Satisfied	Not Satisfied At All
Farm worker	91%	6%	3 % ^a

^a Estimates have relative standard errors between 31% and 50% and should be interpreted with caution.



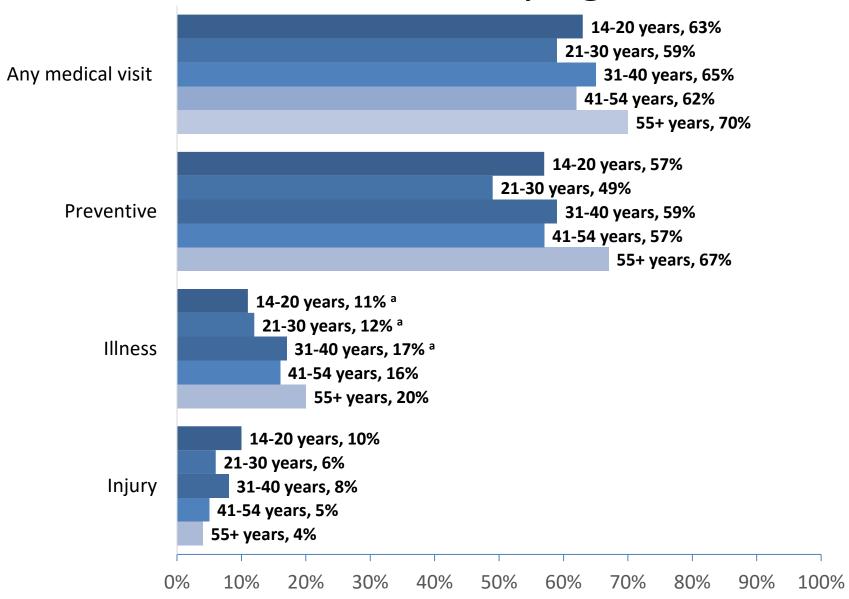
Differential health access within the agricultural worker population

Differences Across Streams



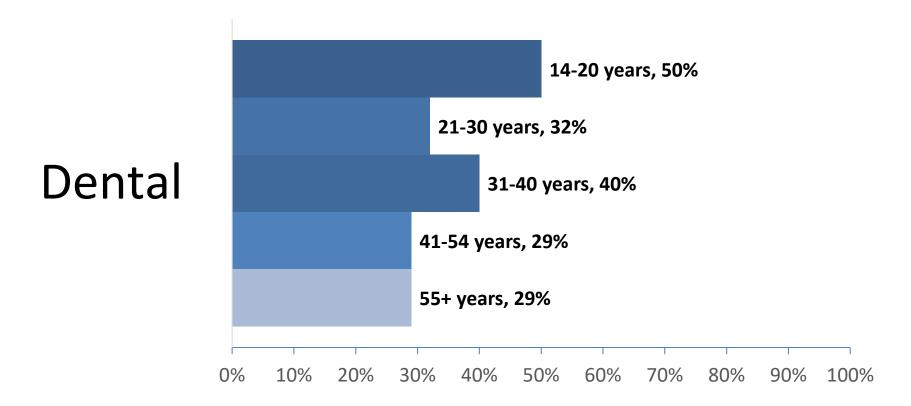
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Differences by Age



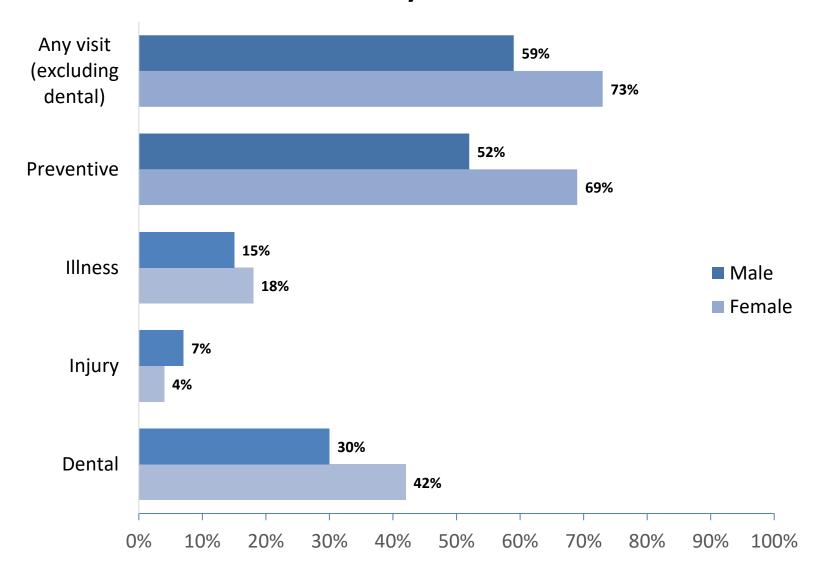
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Differences by Age



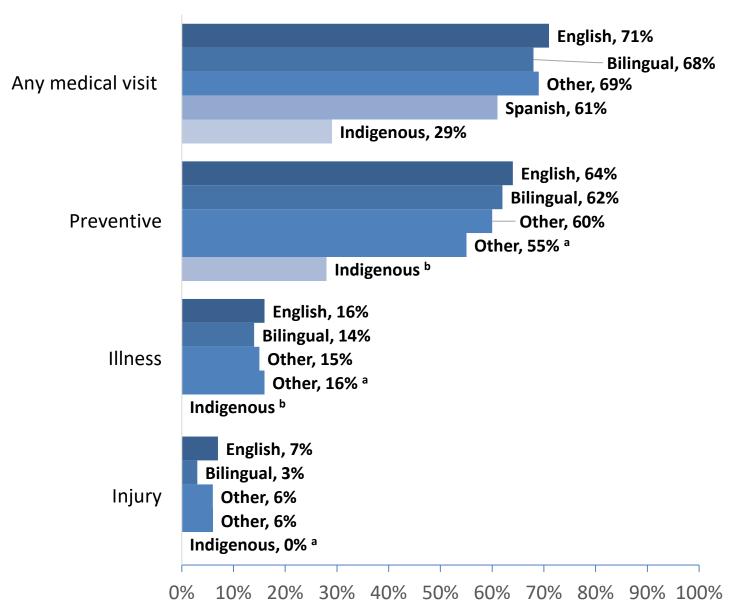
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Differences by Gender



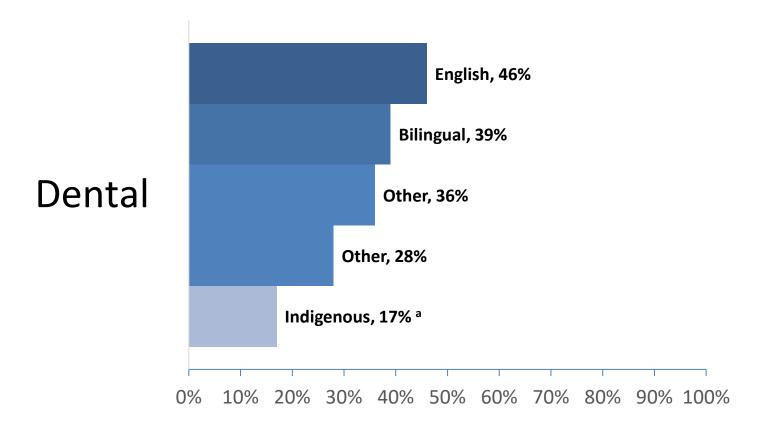
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Differences by Primary Language



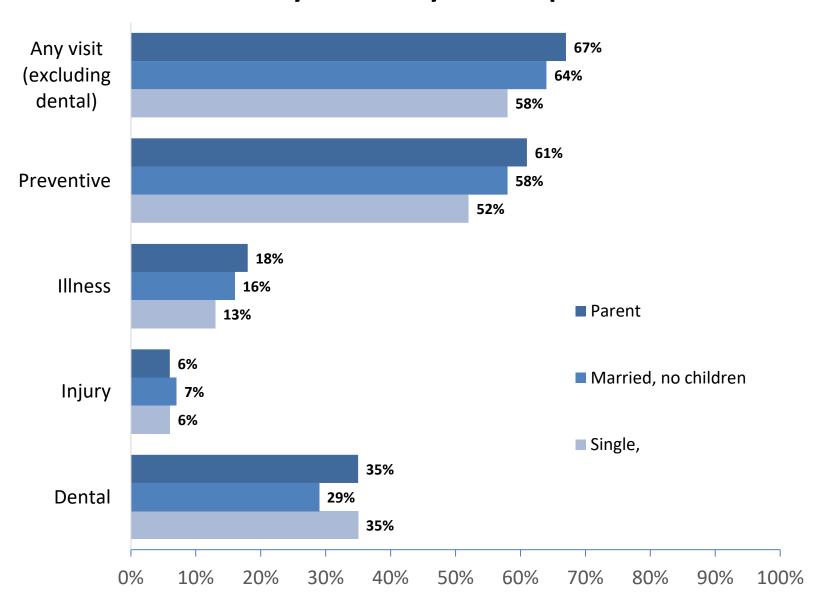
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Differences by Primary Language

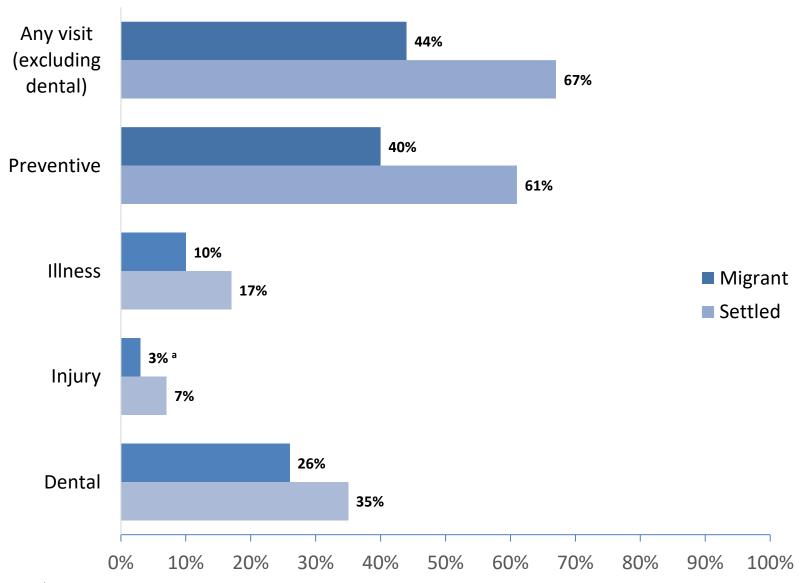


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Differences by Family Composition

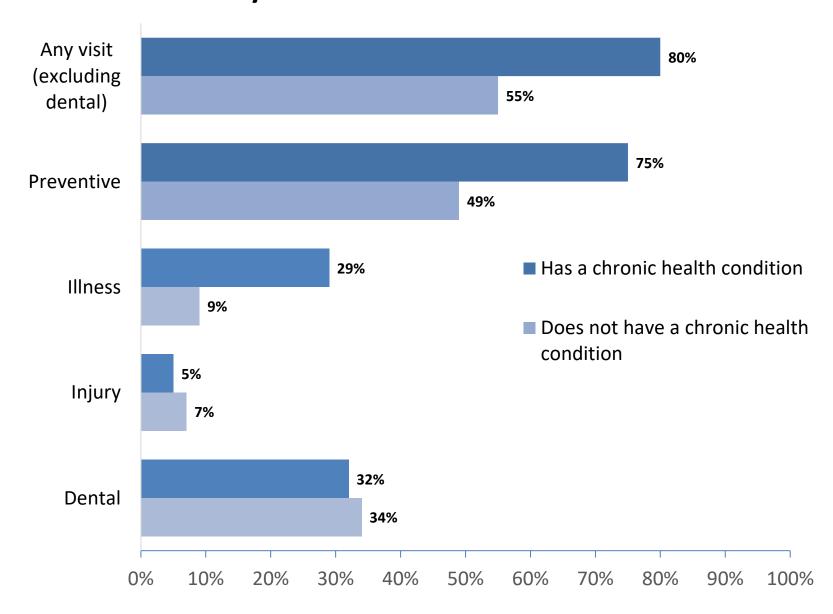


Differences by Migrant Status



^b Estimates are suppressed because number of responses is less than 4 or relative standard errors for the estimates are greater than 50%.

Differences by Chronic Health Condition



Summary: New Supplements

- Beginning in Federal FY 2018, new supplements were added to the NAWS.
- The digital access supplement provides the first nationallevel information on agricultural workers' digital access.
 The supplement asked about access to digital information, devices used, assistance needs, and type of information sought.
- A HRSA-sponsored supplement expanded the NAWS health questions on chronic disease and healthcare utilization. Additionally, the supplements asked detailed questions about health provider visits for injury, illness, dental and preventive care. Farm workers were also asked similar questions about healthcare utilization for their spouse and children under age 22.

Summary: Digital Access Findings

- The NAWS Digital Access Supplement provides the first national look at farm workers' access to digital information. Previous studies did not provide a coherent view of agricultural worker digital access as they were generally, small, local, often qualitative and done at different times.
- Most farm workers (95%) have access to digital information. Farm workers' access is primarily through cell phones with text (96%) or cell phones with internet (92%), with computer ownership being much lower (41%). A minority of farm worker did not have digital access (5%). Those without digital access tend to speak an indigenous language (primary language; 25%), age 55 or older (13%), or married but have no children (9%).
- Children's access to computers was high (79%), with 76
 percent of households with children ages 6–13 and 14–17
 having computers.

Summary: Health Supplement Findings

- The annual share of farm workers visiting a health care provider was 65 percent. The most common type of visit was for routine or preventive care (57%), followed by dental care (34%), and illness (16%).
- Farm workers were less likely to visit a health care provider if they were an indigenous language speaker (29%), were a migrant (44%), did not have a chronic health condition (55%), were single or a youth living with their parents (58%), and/or male (59%).
- For routine or preventive care, farm workers most often sought care at private clinics (53%) and community/migrant health centers (44%), with Medicare/Medicaid (21%), out of their own pockets (18%), and employer provided health plans (17%) being the main sources of payment. About 15% went to a clinic that did not charge them.
- Spouses (61%) and children (76%) were more likely to go for routine or preventive care than farm workers (57%).
- Dental visits were less common than medical visits (i.e., routine or preventive care, illness, or injury; 65%) with 34% of farm workers and 41% of spouses visiting a dentist in the prior year. Dental visits were more common for children (67%). For dental care, farm workers most often sought care at dental offices (73%) and private clinics (17%), with "out of pocket" (36%), self or family bought individual health plan (18%), Medicare/Medicaid (15%), and employer provided health plan (14%) being the main sources of payment.
- Farm workers whose primary language was an indigenous language (17%), were a migrant (26%), and/or male (30%) were less likely to have dental visits.



The End

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For more information on the NAWS:

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