

SEXUALLY TRANSMITTED INFECTIONS AMONG AGRICULTURAL WORKERS

Introduction

This fact sheet addresses the need for accessible and current research regarding Migratory and Seasonal Agricultural Workers (MSAWs) and seeks to inform the health centers who serve them with current or recent data on sexually transmitted infections (STIs) among the population.

STI Background Information

A STI is a virus, bacteria, fungus, or parasite that is spread from one person to another through vaginal, oral, or oral sex, intimate physical contact, or sharing of intimate clothing, bedding, or bath towels. STIs sometimes show through symptoms but the Centers for Disease Control and Prevention (CDC) recommends STI testing as the correct way to be diagnosed.¹ A sexually transmitted disease (STD) is developed because of an STI, usually referring to a symptom or collection of symptoms of an infection. However, sometimes these terms are used interchangeably. STDs include but are not limited to diseases such as syphilis, gonorrhea, chlamydia, HIV-AIDS, Zika, Ebola, and mpox.¹

The CDC reports from 2021 show an increase in STIs within the previous five years, including an increase in gonorrhea (with 710,151 cases), chlamydia (with 1.6 million cases), and syphilis (with 176,713 cases) nationally.² The CDC also reports that the populations who are more at risk are young people aged 15-24, gay and bisexual men, pregnant people, and racial and ethnic minority groups.² If left untreated, STDs can cause increased risk of infecting sexual partners, long term abdominal pain, and inability to get pregnant or pregnancy complications, among other health effects. Prevention practices include the three Ts: talk, test, treat. ²

STIs among Agricultural Workers

The Uniform Data System (UDS) from Health Resources & Services Administration (HRSA) is an integrated reporting system that utilizes forms with core sets of performance data related to patient demographics, visits, health outcomes and disparities, staffing and utilization, quality of care indicators, financial costs, technology capabilities, and other health center workforce information.³ The UDS is administered annually, and responses are collected from health centers nationwide. In 2022, 175 Migrant Health Centers who served 843,071 agricultural worker patients and their dependents¹ responded to the UDS questionnaire.⁴ Out of these patient responses, most reported to be of heterosexual orientation (98.7%) in the known sexual orientation question of the UDS report.⁴ The table below displays STI diagnosis numbers and STD numbers reported by disease diagnoses.

STI Diagnosis	Number of MSAW patients diagnosed	Percent of total MSAW patients
STIs, excluding HIV	4,847	0.6%
HIV	1,106	0.1%
Hepatitis B	206	0.02%

Table 1: Number of MSAW patients with STI diagnoses⁴

¹ Note: 1% (8,727) of the 843,071 patients were not classified as agricultural workers or household members of agricultural workers. Their data are aggregated with those of agricultural workers in the UDS and cannot be disaggregated.

Table 2: Number of MSAW patients tested for STIs⁴

Test	Number of MSAW patients tested	Percent of total MSAW patients
HIV test	66,188	8%
Pap test	49,658	6%
Hepatitis B test	20,333	2%

- 362 MSAW patients received Pre-Exposure Prophylaxis (PrEP) to prevent HIV from Migrant Health Centers
- 51,549 MSAW patients received contraceptive management from Migrant Health Centers
- UDS 2021 data reported a concentration of STIs among MSAW patients in the Central Valley of California.⁵
- A study to estimate STI prevalence among 637 agricultural workers in California found that there was low STD prevalence (3 males with chlamydia trachomatis, 4 males and 1 female with syphilis) but sexual risk factors were considered high.⁶
- Two out of 100 agricultural workers in North Carolina in 2008 tested positive for syphilis.⁷

Knowledge, Attitudes, and Beliefs

- Knowledge of HIV and STD transmission and prevention was low in a study of agricultural workers in North Carolina in 2008.⁷
- In October 2022, NCFH conducted a survey with 55 respondents from Migrant Health Centers and other agricultural worker-serving organizations about the topic of STIs in agricultural worker communities.
 - o Respondents identified the top concerns agricultural workers have about STIs as: ⁸
 - Fear that others will find out they have an STI
 - Feeling stressed if they get an STI
 - Losing work and receiving less wages if they get an STI
 - Respondents in this survey reported that cultural taboos pose the greatest barrier to STI prevention among agricultural workers. Cultural taboos reported include religious views on contraception and being LGBTQ+.⁸ A poll respondent mentioned that "most workers don't like talking about sexual education, especially to a woman."⁸
 - $\circ~$ Other barriers include limited information/awareness and limited access to prevention and treatment services. 8

Risk Factors and Behaviors

- Risk factors for STIs among Latinx agricultural workers or migratory workers include alcohol consumption,⁹ unprotected sex,¹⁰⁻¹³ living a migratory lifestyle,^{11,14} living in remote and rural areas,⁸ with limited access to health care,⁸ sexual violence,⁴ and social stigma.⁸
- UDS 2022 data showed that 6,783 MSAW patients were diagnosed with an alcohol related disorder and 89 patients were seen regarding intimate partner violence.⁴
- The study of agricultural workers in North Carolina in 2008 reported that 39% of 100 male agricultural workers paid for sex and 31% reported using condoms. This study determined the small sample size might not appropriately give insight to condom usage among all agricultural workers.⁶ Interview data among 40 agricultural workers in Central Texas reported low condom usage.¹³
- Survey data from 55 respondents to NCFH National Pulse in October 2022 showed that sexual coercion or unwanted sex may be risk factors for STIs among the agricultural worker population in some communities.⁸
- A literature review published in The Journal of Immigrant and Minority Health in 2006 claimed poverty, limited education, multi-partnering, and physical/social/cultural isolation increase risk for STI transmission among Mexican migratory laborers and recommended prevention efforts such as condom and HIV education as well as testing, along with reducing social isolation with cultural awareness.¹⁴

For additional information about HIV/AIDS among agricultural workers, see our <u>HIV fact sheet</u> that was updated in February 2023.

This publication is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$1,742,242.00 with 0 percentage financed with nongovernmental sources. The contents are those of the author and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS or the U.S. Government.

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