Agricultural Worker Health 101

Presented by Farmworker Health Network

Midwest Stream Forum 2023
Farmworker Health Network

The Farmworker Health Network works cooperatively with HRSA to provide training and technical assistance to over a thousand Community & Migrant Health Centers throughout the U.S.
Workshop Components

• Setting the Foundation: What is Agricultural Worker Health?
  • Agricultural Workers – Population
  • Agricultural Workers – Health Needs, Risks, Challenges and Resilience
  • Resources for Technical Assistance and Training
Timeline of Legislative Action

Migrant Health Act
Aid to agencies that provide community health services to agricultural workers and their families

1962

1975

Public Health Service Act
Health Center Program authorized under Section 330 of the Public Health Service Act.

1987

Field Sanitation Standard
Requires agricultural employers to provide potable water, toilets and handwashing facilities in the fields

1992

Worker Protection Standard
Sets minimum standards for protecting farmworkers from pesticide exposure

1996

Health Centers Consolidation Act
Consolidates MHC, HCH, public housing and CHCs under Section 330 Authority

2010

ACA Enacted
Includes a major expansion of health centers, dedicating $9.5 billion to serve 20 million new patients by 2015 and $1.5 billion for capital needs for new health centers.

2017

WPS Revisions

Migrant and Seasonal Agricultural Worker Protection Act
Basic labor protections under labor contractors

1983

1996

1992
Farmworker Exceptionalism

• Fair Labor Standards Act left out farmworkers
  – Child labor protections
  – Overtime
• Workers' compensation & minimum wage
• Few OSHA standards to protect farmworkers
  – Field Sanitation Standard, 1987
  – Only applies to farms with 11 workers or housing
What is a 330 Program?

Section 330 of the Public Health Service Act created and authorized the health center program and permits the Health Resources and Services Administration (HRSA) to make grants to health centers.
Public Health Section 330 Delivery Sites

• In 2021, BPHC supported over 1,500 health care grantees including homeless, school based, public housing and migrant health (including look-alikes)

• In 2021, 175 of those were funded to provide services to the migratory and seasonal agricultural worker population

• 1,015,162 agricultural workers were reported as served by all Health Center Program Grantees in 2021.

Definitions of Agricultural Workers in Section 330g of the Public Health Service Act

Migratory Agricultural Worker
   – Principal employment is in agriculture
   – Has been so employed within the last 24 months
   – Establishes a temporary home for the purpose of such employment

Seasonal Agricultural Worker
   – Principal employment is in agriculture on a seasonal basis
   – Does not migrate

Aged & Disabled Agricultural Worker
   – Individual who has previously been migratory agricultural worker but who no longer meets the requirements
     ... because of age or disability
NAICS Codes

Agriculture means farming in all its branches as defined by the Office of Management (OMB)-developed North America Industrial Classification System (NAICS), and includes migratory and seasonal agricultural workers employed in the agricultural sector within the following NAICS codes and all sub-codes.

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<tr>
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<td>Vegetable and Melon Farming</td>
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<td>1113</td>
<td>Fruit and Tree Nut Farming</td>
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<td>1114</td>
<td>Greenhouse, nursery, and floriculture production</td>
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<tr>
<td>1119</td>
<td>Other crop farming, tobacco, cotton, sugarcane, hay, peanuts, sugar beets</td>
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<td>112</td>
<td>Animal Production and Aquaculture</td>
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<td>Cattle Ranching and Farming</td>
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<td>Hog and Pig Farming</td>
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<td>Support Activities for Crop Production</td>
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<td>1152</td>
<td>Support Activities for Animal Production</td>
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Source: 2022 NAICS. [https://www.census.gov/naics/?input=agriculture&year=2022](https://www.census.gov/naics/?input=agriculture&year=2022)
Workers employed in the following industries are **not** eligible for the Agricultural Health Program:
Migrant Health Program Grantees + Satellite Sites*

Source: www.ncfh.org
Required Services for 330 Programs

- Primary care services
- Preventive services
- Emergency services
- Pharmacy services
- Outreach and enabling services
- Sliding fee scale
- Patient-majority governing board
Health Center budgets range between $500,000 and $25 million.

The Bureau provides approximately 28% of the health centers’ total budget. For every dollar provided by the Bureau, the health center must raise three additional dollars.
Workshop Components

- Setting the Foundation: What is Agricultural Worker Health?
- **Agricultural Workers – Population**
  - Agricultural Workers – Health Needs, Risks, Challenges and Resilience
- Resources for Technical Assistance and Training
How many agricultural workers do you think there are in the United States?
Agricultural Worker Demographics ¹,²,³

2.5 million
estimated population²³

66% male
34% female

25% are under the age of 30

Agricultural Worker Demographics

62% Spanish

44% without work authorization

70% foreign born

63% Mexico

5% Central America

Indigenous Agricultural Workers

- Indigenous Mexicans and Central Americans are the fastest growing farmworker population in the United States.
- The most common indigenous language groups in the United States – Mixteco, Triqui, and Zapotec – are from communities in southern Mexico.
- These distinct languages and cultural beliefs create barriers to healthcare that are more complex than the barriers experienced by non-indigenous Mexicans.
Agricultural Worker Demographics

- Foreign born workers, on average, have an 9th grade education
- Mean and median individual income range from $20,000 to $24,999
- 20% of agricultural worker families had total family incomes below 100% of the Federal Poverty Level
- 52% reported not having health insurance
- 29% had not visited a U.S. healthcare provider in last 2 years
The H-2A program allows U.S. employers or U.S. agents who meet specific regulatory requirements to bring foreign nationals to the United States to fill temporary agricultural jobs.

371,619 H-2A positions were certified by Department of Labor in 2022.
Patterns of Mobility

- Restricted Circuit
- Point to Point
- Nomadic
Workshop Components

• Setting the Foundation: What is Agricultural Worker Health?
• Agricultural Workers – Population

• Agricultural Workers – Health Needs, Risks, and Challenges

• Resources for Technical Assistance and Training
What Impacts Agricultural Worker Health?

Structural Issues
- Discrimination
- Immigration Status
- Language
- Continuity of Care
- Regulatory Issues

Work
Living Conditions
Agricultural Worker
Physical Health
Mental Health
Case Study
Work-Related Health Risks

- Musculoskeletal injuries
- Heat stress
- Farm equipment
- Transportation to and from work
- Lacerations from sharp equipment and hand tools
- Slips, trips, and falls
- Eye injuries
- Insect/rodent/snake bites
Number and Rate of Fatal Work Injuries by Industry Sector, 2021

- Construction: 986 (9.4)
- Transportation and warehousing: 976 (14.5)
- Agriculture, forestry, fishing, and hunting: 453 (19.5)
- Manufacturing: 383 (2.6)
- Retail trade: 263 (1.9)
- Leisure and hospitality: 243 (2.4)
- Other services (exc. Public admin.): 242 (3.8)
- Wholesale trade: 177 (5.1)
- Educational and health services: 167 (0.7)
- Financial activities: 97 (0.9)

(Number of fatal work injuries & Fatal work rate injury (Per 100,000 full time equivalent workers))
In 2021, 453 agricultural workers died of work-related injuries

Bureau of Labor Statistics, Census of Fatal Occupational Injuries, [Number and rate of fatal work injuries, by private industry sector](https://www.bls.gov)
Pesticide exposure in the fields and at home
Physical Health

The health issues that face migrant and other mobile underserved populations are similar to those faced by the general population but are often magnified or compounded by their migratory lifestyle, living conditions, and occupation.
Management of Health Concerns

• Diabetes
• Hypertension
• Cancer
• HIV/AIDS
• Tuberculosis
• Asthma
COVID-19 and Farmworkers

Farmwork is considered “essential”

Lack of information about COVID-19 in farmworker communities

Difficult to follow CDC recommendations of social distancing and handwashing
- Access to handwashing stations in the fields
- Access to clean water and soap in the homes
- Overcrowding with many people in small spaces
- Transportation to and from the fields and into town (esp. for H-2A workers)

Challenges related to working and living conditions
- Fear of accessing health care/taking sick leave due to employer retaliation
- Access to testing and treatment (esp. since many lack health insurance)
- Ability to isolate if exposed to or infected by COVID-19

Access to testing and vaccines
Mental Health

- Anxiety
- Depression
- Stress
- Substance abuse
- Family violence
Contributing Factors to Mental Health Challenges

- Separation from families
- Isolation
- Discrimination
- Fear due to immigration status
- COVID-19
Illnesses Related to Substandard Housing

- Gastrointestinal diseases
- Infectious diseases
- Intestinal parasites
- Conjunctivitis
- Lead poisoning
Case Study
What are the barriers to care and healthy lifestyles for agricultural workers?
Barriers to consider:

- Language
- Lack of social support
- Food insecurity
- Poverty
- Limited job security

- Mobility
- Immigration status
- Discrimination
- Confusion about U.S. health systems
Service Delivery Challenges

Continuity of Care

• Agricultural workers may seek care only when necessary
• Agricultural workers may move during treatment
• Communication between MHCs and other providers is difficult

Culture and Language

• Provision of multi-lingual services (reception, health education, prescriptions, bilingual staff/translators, etc.)
• Relevant training and continuing education for staff
Service Delivery Challenges

Operations

• Integration of walk-in patients into appointment system
• Health Center hours of operation
• Demand/Capacity
• Provision of transportation in rural areas

Costs

• MHCs must remain competitive despite the escalating costs in the healthcare industry
• Lack of insurance coverage of the population
• Outreach and enabling services are often not reimbursable
Exploring Effective Adaptations for Mobility and Culture
Cultural adaptations
- Culturally sensitive education
- Appropriate language and literacy levels
- Address cultural health beliefs & values

Mobility adaptations
- Portable medical records & Bridge Case Management
- EHR transmission to other C/MHCs

Appropriate service delivery models
- Case Management
- Lay health promoters (Promotores/as)
- Outreach & enabling services
- Coordination with schools and worksites
- Mobile Units
Easy Access to Care

✔ Orient all patients to the scheduling protocols, recognizing that patients may be unfamiliar with scheduling practices or U.S. healthcare systems.

✔ Document the numbers of agricultural workers in your area by month, typical work hours and transportation options.

✔ Open Access scheduling permits an influx of mobile agricultural worker patients to be seen during seasonal variance.

✔ Accommodate the work hours, transportation and geographic barriers experienced by mobile workers.
Voucher Program Model

- Used where a traditional model may not be the best option.
  - ✔ Short growing seasons
  - ✔ Lower numbers or density of Agricultural Workers
- Provide services to Ag Workers through either one or some combination of a service coordinator model, nurse staffed model, or mid level practitioner staffed model
- An organized outreach program is critical to increase access to services
“Mobile-Friendly” Care Management AND Referral Tracking and Follow-up

Health Network
Workshop Components

- Historical Perspectives and Legislation
- Agricultural Workers – Population
- Agricultural Workers – Health Needs, Risks, Challenges and Resilience
- Resources for Technical Assistance and Training
Resources for
Training and Technical Assistance

Farmworker Justice
www.farmworkerjustice.org

Health Outreach Partners
www.outreach-partners.org

MHP Salud
www.mhpsalud.org

MCN
www.migrantclinician.org

National Association of Community Health Centers
www.nachc.com

National Center for Farmworker Health
www.ncfh.org
Our mission is to create practical solutions at the intersection of vulnerability, migration, and health.

We envision a world based on health justice and equity, where migration is never an impediment to well-being.
Access our latest resources

Get updates from the field

Attend our virtual trainings

and a lot more at

www.migrantclinician.org
**MHP Salud** builds on community strengths to improve health in farmworker and border communities. We train community leaders to be *Promotores* and *Promotoras de Salud*.

*Promotores(as)* belong to the same culture and speak the same language as the people they serve. They...
- Provide culturally appropriate health education
- Make referrals to health and social services
- Encourage people to seek care
- Empower community members
- Bring health to farmworkers where they live

We can help you...
- Design an effective *Promotora* program
- Find funding opportunities and draft budgets
- Create an evaluation plan
- Train Program Supervisors and *Promotores(as)
- Locate and develop health education materials

956.968.3600
info@mhpsalud.org
www.mhpsalud.org
Welcome to the COVID-19 Directory for Community Health Workers (CHWs)

In this directory, you can access educational resources focused on Community Health Worker (CHW) COVID-19 interventions for Latinos and Farmworker Communities. You can also find resources for family caregivers of Latino Older Adults.

GET STARTED

→ MHP Salud COVID-19 Resources
→ COVID-19 Infographics/Visual Aide
→ Educational Tools
→ Blogs and Publications
→ Resource Directories
→ Media
Serving America’s Latino communities with Community Health Worker programs for over 35 years.
**Farmworker Justice** is a nonprofit organization that seeks to empower farmworkers and their families to improve their living and working conditions, immigration status, health, occupational safety, and access to justice.

Using a multi-faceted approach, Farmworker Justice engages in litigation, administrative and legislative advocacy, training and technical assistance, coalition-building, public education, and support for union organizing.

Washington, DC
202-293-5420
www.farmworkerjustice.org
FJ Resources

- Issue Briefs and Fact Sheets
- Training-of-trainer curricula
- Educational materials for agricultural workers in English, Spanish, Haitian Creole, and indigenous languages

Topics include - health centers, health insurance, medical-legal partnerships, climate change, heat stress, pesticides, workers’ compensation, diabetes, skin cancer, etc.

https://www.farmworkerjustice.org/resource/
FJ’s COVID-19 Resources

- **Issue Briefs - Long COVID**
- **Fotonovelas - COVID-19 vaccines**
- **PSAs**
- **Voices from the Field/Lessons from the Fields** - Documentary and report summarizing experiences of farmworker communities and farmworker-serving organizations
- **Children’s vaccine song & video** (Spanish/English Subtitles)

Full list of resources: https://www.farmworkerjustice.org/resource-categories/covid-19/
WE SUPPORT HEALTH OUTREACH PROGRAMS by providing training, consultation, and timely resources.

OUR MISSION IS TO BUILD STRONG, EFFECTIVE, AND SUSTAINABLE HEALTH OUTREACH MODELS by partnering with local community-based organizations across the country in order to improve the quality of life of low-income, vulnerable and underserved populations.

WE SERVE Community Health Centers, Primary Care Associations, and Safety-net Health Organization
Outreach is at the center of your care. Your success is at the center of ours.
The **National Center for Farmworker Health** is a private, not-for-profit organization located in Buda, Texas, whose mission is “To improve the health of farmworker families”.

- Population specific data resources and technical assistance
- Workforce development and training
- Health education resources and program development
- Board Governance training
- Program Management
NCFH COVID-19 Resources

- Resources for Agricultural Workers
- Resources for Agricultural Employers
- Resources for Health Centers and Farmworker Serving Organizations
- Call for Health Program

Facebook and Twitter: @NCFHTX
Instagram: @Farmworkerhealth
YouTube: National Center for Farmworker Health
Linkedin: company/national-center-for-farmworker-health-ncfh-
National Association of Community Health Centers, Inc. (NACHC) represents the nation’s network of approximately 1,400 Federally Qualified Health Centers (FQHCs) which serve almost 30 million people through 14,500 sites located in all of the 50 states, Puerto Rico, the District of Columbia, the U.S. Virgin Islands and Guam.
THE NACHC MISSION

America’s Voice for Community Health Care
The National Association of Community Health Centers (NACHC) was founded in 1971 to promote efficient, high quality, comprehensive health care that is accessible, culturally and linguistically competent, community directed, and patient centered for all.
Agricultural Worker Forums & National Conference

National Conference on Agricultural Worker Health
National Association of Community Health Centers

East Coast Migrant Stream Forum
• North Carolina Community Health Center Association

Midwest Stream Forum for Agricultural Worker Health
• National Center for Farmworker Health

Western Forum for Migrant and Community Health
• Northwest Regional Primary Care Association

© National Center for Farmworker Health
Additional BPHC-Funded NTTAPs – Special and Vulnerable Populations

• Association of Asian Pacific Community Health Organizations
  – http://www.aapcho.org
• Corporation for Supportive Housing
  – http://www.csh.org
• Equitable Care for Elders – Harvard University School of Dental Medicine
  – https://ece.hsdm.harvard.edu
• National Center for Health in Public Housing
  – https://nchph.org
• National Health Care for the Homeless Council
  – http://www.nhchc.org
• National LGBT Health Education Center
  – http://www.lgbthealtheducation.org
• National Nurse-Led Care Consortium
  – http://www.nurseledcare.org
• School-Based Health Alliance
  – http://www.sbh4all.org
• Futures Without Violence
  – https://www.futureswithoutviolence.org/
Additional BPHC-Funded NTTAPs – Capacity Development

• Association of Clinicians of the Underserved
  – http://www.clinicians.org
• Capital Link
  – http://www.caplink.org
• Community Health Center, Inc.
  – http://www.weitzmaninstitute.org
• Health Information Technology Training and Technical Assistance Center (HITEQ)
  – http://www.hiteqcenter.org
• National Center for Medical-Legal Partnership
  – http://www.medical-legalpartnership.org
• National Network for Oral Health Access
  – http://www.nnoha.org
Health Center Resource Clearinghouse

www.healthcenterinfo.org
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