Wall of Wonder
Exploring Access to Care for Agricultural Workers

2015 East Coast Migrant Stream Forum

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Introduction

With the goal of increasing access to care for agricultural workers, the National Center for Farmworker Health, Inc. (NCFH), in collaboration with the North Carolina Community Health Center Association (NCCHCA), conducted an interactive round-table session with approximately 150 of the 2015 East Coast Migrant Stream Forum. During the session, participants explored and provided answers to the following key questions. 1) “What changes have you seen in your local farmworker community?”; 2) “How have these changes impacted the utilization of services at your health center?”; and 3) “What ideas/suggestions do you have that could results in an increase in the number of farmworkers served at your health center.” Participants’ answers are provided under each of those questions. Number in ( ) indicates the number of times the issues were identified by participants.
Question #1: What changes have you seen in your local farmworker community?

Changes in Demographic
- Increase number of young healthy males agricultural workers
- Increase presence of female workforce in agriculture
- Increase number of seasonal agricultural worker families - husbands work in the fields and wives work at the farm
- Increase in agricultural workers from Haiti, Guatemala, Jamaica and Puerto Rico (3)
- Increase diversification of language spoken by non-English speakers agricultural workers (4)

Changes in Agriculture
- Decrease need for agricultural workers due to mechanization (6)
- Increase on mechanization of tobacco & sweet potato crops (1)
- Changes in weather is negatively impacting agriculture and displacing its workforce (3)
- Changes in farming practices are decreasing the number jobs and shorting the period of employment for agricultural workers (3)
- Decrease on farmland due to urbanization (2)
- Global warming is shorting agricultural season requiring more intense effort but for shorter period of time (3)
- Decrease need for agricultural workers due to farms and ranches closed or moving to other states (5)

Changes in Migration Patterns
- Increase the number of H-2A workers (4)
- Increase the number of agricultural workers leaving the area early due to job scarcity (3)
- Decrease on the number of agricultural worker families with children (2)
- Increase mobility of crews shorting the time agricultural workers are in the area (3)
- Increase in the number of farmworker moving to landscaping (construction) (3)
- More agricultural workers moving from rural to urban areas (1)
- More year-round agricultural workers families with seasonal employment in agriculture (3)

Changes in the Political Climate
- Increase monitoring activities (i.e. seizures, deportations, and round-ups at clinics) from the Immigration and Customs Enforcement (ICE) agency has significantly prevent agricultural workers from seeking care
- Increase ICE presence at front and back of health center discourage patients from coming to the center
ACA

- There is a lack of education among agricultural workers-especially among those with H-2A visa, so they are not enrolling in ACA
- Farmworkers are not aware of ACA enrollment, tax benefit and penalties

**Question # 2: How have these changes impacted the utilization of your health center services?**

**Utilization of Services**

- Decline in patient population (2)
- Increase fear among ag workers is preventing them from accessing care (5)
- Decrease of health center visit since fewer families are migrating to the area (3)
- Young healthy males don’t utilize services offered by health center (1)
- Time when agricultural workers can access health care services is influence by the availability or lack off work (2)
- Increase the need for pediatric services due to the presence of more seasonal families in some communities (3)
- Increase on the overall agricultural worker population at some health center (3)
- Increase of female Ag workers with different health care needs (1)
- Increase utilization of services due to an increase of whole family units coming to the area

**Communication**

- Increase health centers demands for implementing strategies to overcome language and cultural barriers to care for farmworkers from differences backgrounds (3)
- Increase need for interpretation services and use of language line since 60% of the health center population are monolingual agricultural workers (2)
- Increase need for Creole interpreters

**Insurance**

- There is confusion about ACA and no much information about the penalty
- Most of the farmworkers, including H-2A are uninsured

**Environmental factors**

- ICE presence at front and back of health center discourages people from accessing care at health centers, resulting in loss of productivity

**Data capturing**

- Staff turnover make it difficult to capture farmworker status
- Less farmworkers being served because it is harder to identified them
Staffing

- There is difficulty recruiting bilingual health care staff—resulting in a lack of staffing for evening and weekends, making more difficult for farmworkers to access care (2)
- Changes in workforce demographics in affecting existing service delivery model that is not geared toward new populations (2)
- Increase dispersion of agricultural workers requires more outreach efforts negatively impacting health centers outreach budgets (3)
- Presence of new populations required more staff time to establish trust and overcome cultural barriers (1)
- More staff is needed to increase education leading to preventive care and self-sufficiency (2)
- Lack of staff prevents health centers from offering extended hours of operation to facilitate farmworker access to the local health centers (2)

Question #3: What ideas/suggestions do you have that could result in an increase in the number of farmworkers served at your health center?

Marketing

- Advertise services in Hispanic stores and churches to spread the word
- Increase the presence of urban health centers funded to serve farmworkers in rural areas
- Offer free screening to the community using health fears
- Look for farmworkers in other agricultural sectors such as aquaculture and animal farming

Outreach

- Increase the number of outreach workers (5)
- Recruit new and energetic staff to help reach more workers
- Talk to growers and ask their permission to reach their workers
- Establish promotora de salud programs
- Visit farmworkers in their own environment
- Increase outreach effort during peak seasons
- Inform workers that their confidential information will not be share with other agencies i.e. government
- Build trust with the population enough for them to understand that they can seek care at the health center rather that at emergency rooms
- Ask workers what their barriers are
- Educate CEO and board of directors on what outreach is how outreach workers can help health center to achieve its mission
- Become familiar with crops and time that agricultural workers will be on the area; this information will be useful to adjust outreach plans
Community Education
- Educate employers on the benefit of a healthy workforce
- Educate farmworkers during waiting times
- Establish more dynamic health education programs
- Develop or find educational materials for the new population demographics – creole, women health and pediatric health—with the focus on attracting/inviting people to the clinic
- Educate farmworkers on preventive care

Collaborations
- Partnering more with community organizations and educate them about the importance of reaching this population and collaboration (5)
- Ask community partners to help identify farmworker families i.e. where do they live, work and play (2)
- Seek collaboration with volunteer organizations/students and colleges (1)
- Partner with local libraries and public schools to increase access to technology and the internet for agricultural workers (1)
- Collaborate with Head Start centers (1)
- Seek collaboration with medical, dental, behavioral, pharmacy schools to increase awareness of migrant health among future health care providers (2)
- Collaborate with Latino community organizations and organized a fiesta (2)
- Establish better relationship with the land lords (1)
- Look for opportunities to connect and collaborate with cooperative extension, commodity associations and growers (1)
- Explore possibility for federal and state organization to establish relationship with growers (1)
- Increase collaboration with growers and educate farmers about farmworker health programs (7)
- Invite farmers to board meetings (1)
- Offer farmers on-site services such as flu vaccines and blood pressure screening at their convenience (1)
- Ask growers to let the clinic know when workers arrived so they can be reached (3)
- Increase outreach workers involvement in areas with lower penetration and reach the workers during hours convenient to the farmworkers not to clinic administrators (1)

Data
- Conduct site specific strategic analysis

I.D. Farmworkers at CHCs
- Screen all new and established patients for agricultural worker status (7)
- Screen everyone that comes to the health department for farmworker status (1)
- Ask more probing/specific questions to ensure that patients seeking services at the health center has been properly screened to determine farmworker status (5)
- In self-identification as agricultural workers we must address patients differences and identify
their needs as they worker in other areas e.g. construction, factories, etc.

- Train and re-educate staff on the clear definition of agricultural workers to increase numbers (7)

**Service Delivery**

- Need more providers that are bilingual and bicultural (3)
- New agricultural worker population increases the need for additional interpretation services (4)
- Educate staff in cultural competency to encourage and create a welcoming environment (3)
- Better educate clinic staff on the general concepts/culture/fears/languages of the farmworkers, so that they could better serve the farmworkers (5)
- Establish or increase extended days/hours of services; for example offer evening or weekend clinics (6)
- Easier access to clinics by providing transportation (4)
- Offer behavioral health services (2)
- Hire more staff and train them in migrant health
- Take doctors, nurses, etc. on outreach so they can understand barriers to care and provide follow-up in the camps (5)
- Provide education related to age groups
- Make providers to see patients faster
- Create a good strategy for students to see patients
- Increase bilingual Ingles/creole staff and use technology to increase access to interpretation services
- More support from administration for the migrant health program
- Change the hours to be accessible to the farmworker community or use mobile units to increase access to care (5)
- Decrease communication barriers especially for indigenous and other non-English speaking farmworkers by hiring more bilingual staff
- Provide transportation services (5)
- Use mobile units (3)

**Workforce**

- Change staff mind-set toward agricultural worker patients
- Improve training for bilingual patent service representatives
- Educate senior management to became migrant health campions –create migrant priority
- Cultural competency for all staff to create a better sense of welcoming to our center
- Hire employee who understand and belief in our mission
- Re-educate current employees to the health center mission
- Educate staff in cultural competency-specially health belief and health care seeking behaviors
- Provide better training for staff (3)
- Educate health center staff how important farmworkers are for them
- Train from desk staff about then new definition of farmworkers
• Cross train staff
• Build relationship and develop trust with special populations

**Governance and Mission**

• Change CHC policy to address economic barriers (i.e. the use of self-attestation as an alternate documentation of income and family size; establishing a set co-pay to facilitate farmworkers understanding of their out of pocket expenses when seeking health care at a health center)
• Invite farm owners to serve on health center boards

**Policy**

• Make a requirement that all health centers ask questions to determine agricultural workers status

**Funding**

• Lower cost of services for agricultural workers and other needy families
• Increase funding for enabling services i.e. interpretation, transportation, outreach, and health promotion
• Increase funding to educate farmworker on ACA and the enrollment process
• Provide funding for technical assistance to adjust model with lower patients per full time employee by site