

Strategies for Providing Culturally Responsive Care to Farmworkers and their Families

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- Define culture and identify cultural factors that impact health for MSAWs and their families.
- Explore the different meanings of cultural competence and cultural humility and what these skill sets mean for individuals who provide health care service delivery.
- Access the National CLAS Standards and explore strategies to ensure culturally competent care for MSAWs.

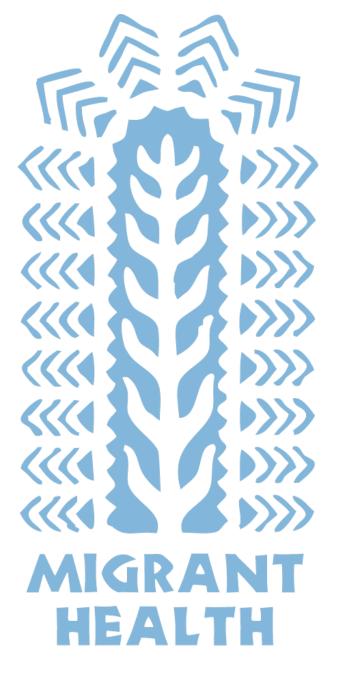




North Carolina Farmworker Health Program



https://www.ncdhhs.gov/divisions/office-rural-health/office-rural-health-programs/north-carolina-farmworker-health-program



The "Culture of Farmwork"

Farmworker Pride

 Responsible for bringing food to American families; have pride despite hardships experienced; bring unique benefits of cultural diversity and immigrant entrepreneurship to U.S.

Work Hours

6 to 7 days/week; 10 to 12 hours per day

Working Conditions

- Physically exhausting; high occupational hazards; pesticides; repetitive motions; injuries; smoke inhalation, sunstroke, infectious diseases
- Often dependent on employer for mobility and housing; employers may control access to farmworkers; many growers work with health centers to keep their workforce healthy
- Vulnerable to abuse by crew chiefs, contractors (verbal or physical abuse, threats, fraud)



The "Culture of Farmwork"

Substandard and Crowded Housing

 Lack of housing leads to shared housing, or living in substandard housing with health hazards such as mold, lead, exposure to infections disease and poor sanitation

Families and Childcare

 Many require childcare; may not attend clinics, health education fairs if they cannot bring their children

Mental Health Exposures

• Stress, social isolation/away from home, exposure to discrimination and abuse; depression and anxiety

Resources

NCFH Agricultural Worker Fact Sheets and Reports

- Fact sheets: Indigenous Agricultural Workers
- Facts About Agricultural Workers
- H-2A Guest Workers
- Child Labor
- Animal Production Workers
- Disease Specific Fact Sheets
- General Health Fact Sheets
- Research Report: Uniform Data System Analysis 2021
- A Profile of Migrant Health 2020
- Link to U.S. National Pulse on Infectious Diseases among Farmworkers





Cultural Competence

Cultural and linguistic competence is a set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations.

'Culture' refers to integrated patterns of human behavior that include the language, thoughts, communications, actions, customs, beliefs, values, and institutions of racial, ethnic, religious, or social groups.

'Competence' implies having the capacity to function effectively as an individual and an organization within the context of the cultural beliefs, behaviors, and needs presented by consumers and their communities. (Adapted from Cross, 1989).($\frac{1}{2}$)

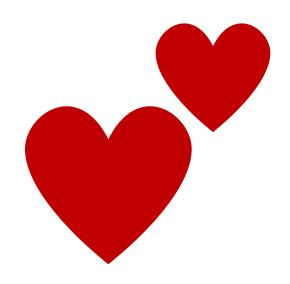


3 Principles of Cultural Humility

- 1. Making a commitment to lifelong learning and critical self reflection
- 2. Addressing power differentials in your patient interactions and creating respectful partnerships
- 3. Making our institutions accountable for culturally responsive care

Cultural Humility in Practice

- Having a humble and respectful relationship with patients and team members.
 - Listening, asking, confirming information, sharing stories, sense of partnership
- Developing a stance of 'not knowing' and learning from the client/patient.
 - Asking the patient about their experience, goals and attitudes
- Developing the ability to challenge your own assumptions.
 - Questioning one's own or the team's understandings and assumptions
- Developing skills for exploring the existence and importance of difference in basic assumptions, expectations and goals they and their clients bring to any interaction.
 - What you learn from your patients that improves your care for others as well





Cultural Competency and Cultural Humility

- Developing the skillset of cultural competency is ongoing for both individuals and organizations.
- Agricultural workers and other patients come from different cultures, so you can't anticipate or know everything about this patient population nor predict the behaviors of an individual based on their culture.
- Cultural humility paired with cultural competency can help providers and staff to navigate through and succeed with cross cultural communication.



Strategies for Culturally Responsive Care

- Collaboration with Community Partners
- Culturally and Linguistically Appropriate Services (CLAS)
- Workforce Development
 - Shame-free experiences
 - Building a culture of inclusivity
 - Assessing communication needs
 - Cross Cultural Communication Skills, Cultural Competency and Customer Service and Health Literacy Training



Collaborating with Community Partners

By working with these and other partners, health centers can effectively identify and connect with migratory and seasonal farmworkers, ensuring that they have access to the healthcare services they need.



Ag Worker Serving Organizations (NCFH)

Farmworker Outreach Resources at NCFH

Farmworker Outreach Promising Practices at Health Outreach Partners



NCFH Additional Resources



Una Voz Para La Salud Call for Health

1 (800) 377-9968 1 (737) 414-5121 WhatsApp http://www.ncfh.org/callforhealth.html Helpline for Farmworkers and their families

- Connects Farmworkers to healthcare and social services
- Assists with limited financial resources for health services



National Culturally and Linguistically Appropriate Services

Theme: Communication

- Offer language assistance to individuals who have limited English proficiency and/or other communication needs, at no cost to them, to facilitate timely access to all health care and services.
- Inform all individuals of the availability of language assistance services clearly and in their preferred language, verbally and in writing.
- 7. Ensure the competence of individuals providing language assistance, recognizing that the use of untrained individuals and/or minors as interpreters should be avoided.
- 8. Provide easy-to-understand print and multimedia materials and signage in the languages commonly used by the populations in the service area.

Think Cultural Health CLAS Standards

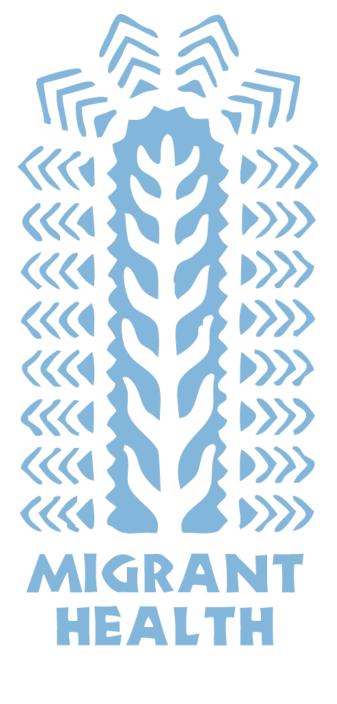
Assessing, Planning and Implementing CLAS at your Health Center





Create a shame-free experience

- Convey an attitude of helpfulness, caring and respect—by all staff
- Assist patients with forms
- Identify need for interpretation
- Ask questions to help patients open up
- Listen
- Encourage patients to ask questions
- SMILE ©
- Provide assistance confidentially



Being Inclusive

All employees demonstrate:

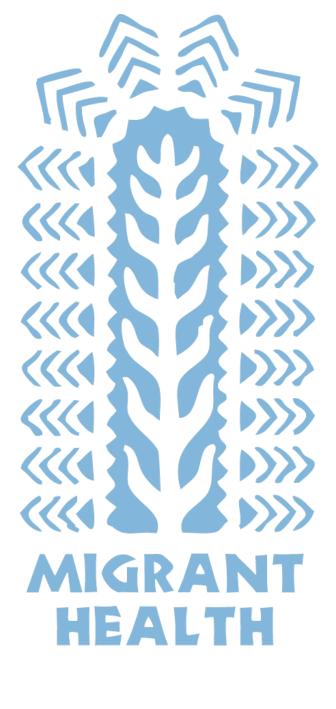
- Respect and being valued
- Communication and support
- Focusing on needs of individuals
- Being empathetic and compassionate



Assess Communication Needs

- Frequently missed appointments
- Incomplete registration forms
- Non-compliance with medication
- Unable to name medications or explain purpose or dosing
- Unable to give a coherent, sequential history
- Asks fewer questions
- Lack of follow-through on tests or referrals.

https://www.ahrq.gov/health-literacy/improve/precautions/toolkit.html



NCFH Diabetes Resource Hub

Health Education Resources (NCFH)

NCFH Mental Health Resources for Ag Workers and Mental Health

AHRQ Patient Engagement and Education Resources



The RESPECT Model

R - Rapport:

- Connect on a social level
 - Friendly greeting and smile
 - Use cross cultural communication and listening skills
 - Clear simple language, avoid jargon
 - Active listening, open ended questions
 - Explain your role in their care
- Consciously attempt to suspend judgement
- Recognize and avoid making assumptions

E - **Empathy**

- Remember the patient has come to you for help
- Seek out and understand the patient's reasons for their actions or health issue
- Verbally acknowledge and legitimize the patient's feelings

The Respect Model



The RESPECT Model

S - Support

- Ask about and understand the barriers to care and compliance.
- Help the patient overcome barriers; involve family members if appropriate
 - Assist with forms.
- Reassure the patient that you are and will be available to help

P - Partnership

- Be flexible
- Negotiate roles when necessary
 - Who should we reach out to? Who helps you most?
- Stress that you will be working together to address medical or financial issues



The RESPECT Model

E - **Explanations**

- Check often for understanding
- Use verbal clarification techniques teach back method

C - Cultural Competency

- Respect the patient's cultural beliefs
- Understand that the patient's view of you may be identified by ethnic or cultural stereotypes
- Be aware of your own cultural biases and preconceptions.
- Know your limitations in addressing health issues across cultures
- Understand your personal style and recognize when it may not be working with a given patient



Engaging MSAW Patients in Health Care

The RESPECT Model

T - Trust

- Self-disclosure may be an issue for Ag Worker patients
- Continuously work to establish trust



Questions and Comments?



Contact information:

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National Center for Farmworker Health

Population Specific



<u>Population</u> <u>Estimation</u>



Fact Sheets & Research



Health Education/Patient Education Resources



<u>Diabetes</u>
<u>Mental Health</u>
<u>SDOH</u>



Digital Stories



Patient
Education
Materials

Governance/ Workforce Training



Health
Center
ToolBox



Archived Webinars



Governance Tools

Board Tools,
Resources &
Templates

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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.















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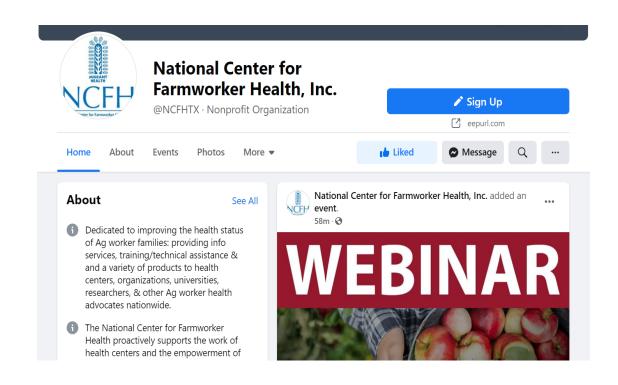


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