Hardware, Software, Aware:
The Process of Using Technology to Advance Migrant Health & Healthcare Access
Hardware
Great Lakes Bay Health Centers (GLBHC) Agricultural Health Program

- Company founded in 1968 with grant for farmworker health in Saginaw County
- Expanded in the 1970s with additional seasonal migrant clinics
- Mobile medical program for migrants began in 1988
GLBHC Migrant Services in Transition

- Numbers of migrant and seasonal agricultural workers served dropped significantly
- Many of the founding leaders retired
- Program was becoming irrelevant and in danger of extinction

- New leadership hired
  - Passion and vision
  - Identify barriers and trends - Why isn’t this working?
  - Unconventional approach to solving - How can we change?
Revitalization – Bringing New Life

“Part of the problem is that the core properties of life—growth, change, reproduction, active resistance to external perturbation, and evolution—involves transformation or the capacity for transformation. Living processes are thus antithetical to a desire for tidy classification or final definition”, (emphasis added)

- (Encyclopedia Britannica Online)

Criteria for keeping services alive and healthy

https://www.britannica.com/science/life
Role of Technology

● Fundamental to normative system functioning
  ○ Mandatory transition to EHR
  ○ Communication with other players (farmers, DHHS, etc.)

● Ubiquitous in daily life cell phones – voice, text, and video
  ○ GPS, internet
  ○ Social media

● Decision to use evolving technology as part of providing care
  ○ Familiarity with tech in daily life (or desire to learn)
  ○ Improved quality and ease of communication
  ○ Incorporated healthcare with daily living
Tech Wins for GLBHC Migrant Services

- Texting
  - GLBHC cell phones for employees
  - Worked well but required a U.S. number and data
- Facebook
  - Familiar technology
  - Needs data but not a U.S. phone number
  - Immediately popular
- Monitoring what is being used
  - Devices
  - Apps/programs
- Knowing what would not fit well
- Learning from mistakes/losses (allowance is critical in the framework)
“Then COVID Happened...”

- Additional barriers to healthcare
  - Physical health (limited face-to-face consults)
  - Emotional/mental health (isolation)
- Need to creatively promote health in this population
- Technology seemed an obvious tool to help
Tech Opportunities During COVID

- Grant to provide migrant healthcare during COVID-19 pandemic
- Proposal to purchase 200 iPads and cellular data
- Dual purpose
  - To provide access to telehealth during the pandemic
  - To provide social connection and emotional support while promoting physical distancing
- Sharing the vision
  - Required board approval
  - Required working closely with IT dept
Implementing Ingenuity

● IT Dept
  ○ Deciding on appropriate devices and accessories
    ■ OtterBox case,
    ■ Cheap earbuds
    ■ ZipLoc bag
  ○ Appropriate links on the home screen

● Distribution
  ○ Sharing the device among those in a single housing unit
  ○ Contracts

● Responsibility
  ○ One person assigned to distribution and tracking
  ○ One person in IT helped with activating/deactivating cell service
Response

- Overcoming initial reticence
  - Concern about signing the contract
  - “What’s the catch?”

- Wildly popular
  - Gave away as many as we brought along
  - Requests from people who missed us
  - Requests to purchase the tablets

- Relational
  - Connected with family and friends
  - Connected to GLBHC with any questions – healthcare, technology, etc.
  - Farmers-workers-GLBHC

- Confianza
What We Did Not Anticipate

- Unfamiliarity with tablets
- Unwillingness to share devices
- Resistance to telemedicine
- Time-intensive nature of program
Learned in After Hours Clean-Up

- Clearly well-used (dirt, some cosmetic scratches)
- Otterbox cases worth the expense (only 1 cracked screen)
- Every iPad returned
  - Not all Apple chargers
  - Some even had the original 2 gallon ZipLoc bag
Motivated

We can all learn.
We can all connect.
Software
Choosing Platforms for Communication

- Text
- Call
- Facebook Messenger
- WhatsApp
- Knowing what *not* to use (Snapchat)
The Power of Social Media

- **Facebook**
  - Became a primary method of communication with patients
  - They were very familiar with and using it already
  - Convenient

- **WhatsApp also played a big part in communication**
  - Many patients have Mexico numbers - no cell service to text
  - WhatsApp allowed texting, calls, video on WiFi
Use of Software in the iPad Project

- Communication
  - Facebook
  - Telehealth video app
- Internet access
  - COVID-19 information in Spanish
  - GLBHC website
- Our business cards in each bag with contact information
  - Facebook and cell phone numbers
  - Eventually added QR codes
Collaboration with IT Specialists

- Changed default language to Spanish
- Decided which apps and links to push to the homescreens
  - Initially did not include Facebook Messenger or YouTube apps (log-ins)
  - Multiple requests for these and they were added later by IT
- Restrictions on content access
  - Explicit content restrictions?
  - Disabled the camera to avoid inappropriate use
Challenges & Misuse

● “Word of Honor”
  ○ Patients signed contract but it was non-binding
  ○ $400 charge for lost/misplaced device had no legal “teeth”
  ○ Outlined our expectations for appropriate use

● Logging out of Facebook accounts
  ○ Some had multiple accounts logged in
  ○ Factory reset did not log accounts out
  ○ Working with IT to find solution to this

● Explicit Content and Etiquette
  ○ Expectations were defined in the contract (no pornography or bullying)
  ○ We did not have sanctions for this occurrence
Overall we are pleased with the outcomes despite the challenges and our patients definitely agreed.
Aware
Building a Sense of Community

- Establishing connection with families
  - Introducing facebook to the iPads, Facebook Messenger
- Communication with each other during the pandemic
- Mental health
- Confianza / building Rapport with our medical team (GLBHC)
Staying in Touch with Culture

- Migrant workers could frequently be found:
  - Listening to music at the end of the workday
  - Watching futbol / novelas / other TV shows / movies
An Informal Poll

Tiktok

Snapchat

Netflix

Facebook

WhatsApp
Duolingo: A Learning Opportunity

- We were receiving requests for an opportunity to learn English
- Free resource
- Easy-to-use interface
- Major success
  - English, Portuguese, Japanese and other languages
  - Could continue to use their free account and keep their progress after we collected the iPads
Looking to the Future

- Program was approved to run this upcoming agriculture / migrant season (2022)
  - Looking to distribute a greater number of iPads
- Expanding apps based on patient input
- Resolve the glitches
- Telehealth education
- Continue to incorporate new technology
New Platforms: Instagram & YouTube

- A new Education YouTube channel in the works
  - Public Health education
    - Diabetes, cholesterol, COVID-19
  - Improved access to other resources
    - Department of Human Services
- Instagram
  - A snapshot into migrant work
Incorporating New Technology Near You - Considerations for Introducing a Pilot Program

- Establish a need in the community
  - Telehealth?
  - Communication

- Know your workers
  - What is the best way to communicate with them?
  - What apps do they use?
“Perfection is the enemy of progress.”

- Winston Churchill
Questions?