Farm to Exam Table: Promoting Migrant and Seasonal Farmworker Access to Quality Healthcare

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DEFINING THE POPULATION

What is a migrant?
- A person who moves or travels from one State or Country to another.

What is an immigrant?
- A foreigner who entered a Country with the intention of staying long term.
GREAT LAKES BAY HEALTH CENTERS

THEN: Great Lakes Bay Health Centers began as a MIGRANT health clinic in 1968 with a Saginaw County Health Department grant to provide health care to migrant farm workers in the Tri-city area.
Great Lakes Bay Health Centers

NOW: We are the largest of 42 FQHC’s in Michigan. We provide a wide array of services including primary care, dental, behavioral health, optical, radiology, women’s care, pharmacy, and physical therapy.
DEFINING OF TERM
AGRICULTURE

NCFH Agricultural worker identification: Farming in all its branches, including

- Cultivation and tillage of soil.
- Production, growing, and harvesting of any commodity grown on, in, or as an adjunct to or part of a commodity grown in or on, the land.
- Any practice performed by a farmer or on a farm incident to or in conjunction with an activity described in clause.
- Dairy, poultry, livestock, and aquaculture.
Classification of Agricultural

Difference between migrant & seasonal farmworker?

- **Migratory farmworker** –
  Principal employment is agriculture.
  Employed within the last twenty-four months.
  Establish a temporary home for the purposes of working in agriculture.

- **Seasonal farmworker** -
  Principal employment is agriculture on a seasonal basis.
  Employed within the last twenty-four months.
  Has NOT established a temporary home to work in agriculture.

- **Aged/Disabled** -
  Former migratory agricultural workers unable to work in agriculture due to age or disability.
DEFINING THE POPULATION

- The most recent National Agricultural Workers Survey (2019-2020) report:
  (https://www.ruralhealthinfo.org/topics/migrant-health)
  - 66% of agricultural farmworkers are male.
  - The average age of a farmworker is 41 years old.
  - 36% of farmworkers are U.S. citizens.
  - 44% of all farmworkers in the U.S. are unauthorized workers.

- Limited education and literacy
  - Average 8th grade (https://nfwm.org/farm-workers/farm-worker-issues/education/)
  - 10% finish high school

- A growing minority do not speak Spanish or English (https://www.farmworkerjustice.org/blog-post/indigenous-farmworkers-face-unique-barriers-to-healthcare/)
GLBHC Migrant Program

- Mobile migrant program/team
  - May through October (Michigan agricultural season) and adjusting to mother nature
  - Service 20 counties
  - Travel over 20,000 miles serving ag-workers
- Staff is primarily bilingual and seasonal
- Program Home base office and storage facility is in Bay City, MI.
- GLBHC corporate is Saginaw, MI.
Registration
Intake
Mobile Unit (Intake Area and Bathroom)
Mobile Unit (Provider Office)
Day of Service

- Arrive 4:30pm (unless weather or schedule permits earlier)
- Patient registration for desired services
- Incentives for registering
- Services
  - Medical screenings
    - Vital signs, weight
    - Select point of care tests such as glucose and total cholesterol checks.
  - Doctor visit
    - Cost $10
    - Include acute and chronic care concerns and are required for any prescriptions
    - Commonly prescribed medications are available for $4 per script or ordered through desired pharmacy
  - Dental services cost $40 and include cleanings (referral to dentist if needed)
- Service operations continue until the last patient is seen which is often 11pm-midnight.
Migrant Outreach
Best Practice to a Successful Program

- **Building Relationships**
  - Crew leaders, farmers, growers
  - Informing them of services and program operation
  - Staying informed of workers arrival in service area
  - Post anticipated service dates on social media
Create a Communication Structure

Communication is key
- Communicating with workers via Social media (Messenger, WhatsApp), patient assistance line or texting

Meeting workers work schedule
- Wednesdays/Thursdays
- Evening hours
- Occasional weekends (events)
Why our care is unique?

- **Conexión** (Connection)
- **Comunicación** (communication)
- **Confianza** (Trust)
- **Colaboración** (Collaboration)
Understanding Barriers to Healthcare Unique to Migrant and Seasonal Farmworkers
Understanding Unique Healthcare Barriers

- Owning OUR barriers to providing quality care
  - Language
  - Hours of operation
  - Affordability
  - Overemphasis on Quantity and Efficiency
  - Requiring extensive intake information
    - Quantity of questions
    - Quality of questions (complicated and personal - even asking home address can be complicated)
Understanding Unique Healthcare Barriers

- Owning OUR barriers to providing quality care
  - Biases, Beliefs, and Attitudes
  - Lack of Knowledge/Unawareness
    - Types of care needed
    - Alternative health practices (sobador, use of topical alcohol)
    - Cultural medical problems (e.g., se entra aire, empacho, diabetes de susto, corage)
  - Assumptions
    - Uneducated and unintelligent
    - No access to resources or quality medical care in country of origin
Understanding Healthcare Barriers Unique to MSFW Population

- Barriers related to culture/national differences
  - Language
  - Feeling unwelcome
  - Not wanting to be a nuisance
  - Fear of hostility
    - Physical or psychological aggression
    - Cultural avoidance of hostility or conflict
Understanding Healthcare

Barriers Unique to MSFW Population

- Barriers related to culture/national differences
- Completely different healthcare system
  - Insurance
  - What different kinds of care are available/appropriate?
    - Urgent care vs Emergent care
    - Primary care vs Specialist care
  - Where to find services
  - How to access services (walk-in vs scheduling appts)
  - How to get medications (OTC vs Rx)
Understanding Healthcare Barriers Unique to MSFW Population

- **Barriers related to rural and farming communities**
  - Extended work hours (limited time to cook/exercise/relax)
  - Transportation
  - Cell phone/internet service (isolation, poor access to information)
  - Inability to take time off (for appointment or recovery)
    - Related to nature of farm work
    - Related to visa status
  - Access to food (diet related), OTC medications, OTC braces/splints at pharmacies or stores
Providing Healthcare to MSFW in a Traditional Primary Care Office
Front Desk & Call Centers

- Initial encounter
- Barriers
  - Language
  - Attitude
  - Helpfulness

“You never get a second chance to make a first impression”
Office Culture

- Schedule flexibility
- Walk ins
- Facilitate care for benefit of patient
- Filling out registration and financial paperwork
- Attitude
Clinical Staff

- Explaining measurements
  - Lbs vs kg
  - Celsius vs Fahrenheit
- Explain workflow
  - Ex. Step on scale and face wall
- Wording medical history
  - May come out as a story and not a list
- Chronic diagnosis are sometimes considered acute (ex. HTN, DM)
- Medication list is current, not what they are supposed to be taking
Providers

- HPI as a story with irrelevant details
- Respect what patient thinks is wrong even if you think it is unusual
- Sensitivity to wording
  - May react to being labeled “depressed” - use anxious, tired
- Recognize differences in measurement parameters
  - PHQ9 may not work as well - rephrase questions and ask about sleep
- Give the patient something to take home
  - Ex. Vitamins, Tylenol, ibuprofen, omeprazole
- Take complaints seriously
- Get familiar with agriculture/farming diagnosis
  - Ex. Parsley rash, lettuce rash, chemical rash
- Be aware of health beliefs/practices from other countries
  - Parasite cleanse
GLBHC

- Transportation
- Extended clinic hours
- Having resources for uninsured
  - Lab
  - Vision
  - Dental
  - X-rays
  - Slide Fee Scale
  - Medications
How to take the first steps

- Address bias and attitudes
  - Systemically (Staff meetings, company meetings, board meetings)
  - Individually (Confront concerns for prejudice)
- Have a policy in place for MSFW
  - Interpretation
  - Sliding fee scale
  - Consider walk in appointments
  - Transportation
- Consider hours of operation (Seasonal changes)
- Find a couple of champions – including in admin
How to take the first steps

- Find the farms and connect with the farmers
- Visit the workers (leave contact information)
- Consider grant funding
Questions?