

reach to farmworkers

FHSI's COCHEcito is Underway!

by Antoinette Tomasek, Director of Education and Training

Farmworker Health Services, Inc. is completing the development and pilot phase of COCHEcito, the nation's first comprehensive outreach services model and health education curriculum designed for community-based health care agencies to reach farmworker children zero to five years old. COCHEcito aims to increase access to and improve the quality of health care for migrant farmworker children and their families.

In Spanish, "coche" means "vehicle" – in this

case, a vehicle for implementing health education with farmworkers. The health curriculum for chil-



Bluegrass Farmworker Health Center Outreach Coordinator Ruth Brown with school children in Tzintzuntzan, Michoacan. Photo by Gabriel Brown.

dren of farmworkers is named "COCHE-cito," Spanish for "little vehicle." The outreach model and health education curriculum will be an adaptation of FHSI's innovative COCHE™ training utilized by community health centers across the country. COCHEcito seeks to empower farmworker children and families to become active partners in their health care and to access health care services more knowledgeably and efficiently, thus creating a lasting impact throughout communities where farmwork-

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The Effects of Natural Disasters on Farmworkers

by Erin Sologaitoa, Southeast Migrant Health Coordinator, Florida Association of Community Health Centers

On October 24th, 2005 Hurricane Wilma slammed into the west coast of Florida making its way across one of the state's most important agricultural regions. Unlike the four hurricanes that hit during August and September, Wilma hit at the beginning of the harvest season. The storm destroyed crops already in the ground as well greenhouses protecting second harvest seedlings. Citrus, tomato, vegetable and sugarcane crops were all badly damaged, creating work shortages for up to 71,350 farmworkers. Many had just returned to Florida and planned to remain until the end of the growing season in April. Wilma, Katrina, Rita, Bonnie, Dennis,

Charlie, Francis and Ivan have made us all too aware of the damage that natural disasters can inflict upon our lives.

Farmworkers and other immigrants are particularly vulnerable when disaster strikes. Many live in isolated rural areas with little access to transportation. Recent state laws prohibiting undocumented immigrants from obtaining a driver's license make it more difficult for them to evacuate. An increased dependence on others for transportation makes them vulnerable to a host of abuses including desertion during a natural disaster. Farmworkers are more likely to live in trailers or other substandard housing that is the first to be devastated during a major storm. Language

and cultural barriers make it difficult to understand the gravity of the situation when warnings and other important information are delivered only in English. Financial barriers and a mobile lifestyle make it difficult for many farmworkers to stockpile food, water and other recommended items in preparation for a possible disaster.

It's difficult for most farmworkers and immigrants to qualify for government assistance for victims of natural disasters. Undocumented residents and non-citizens are ineligible for FEMA housing, cash or unemployment assistance though they can receive non-cash emergency

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Migrant Health Nurse Vera Wisniewski of Hudson River HealthCare, Inc. doing clinical outreach.

ers work and live. Through COCHE™, training participants have learned about:

- Health education and behavior change
- Health education in an outreach context
- Health education modules on such topics as: oral health, diabetes, eye care, hypertension, and nutrition.

The COCHEcito project was developed in conjunction with community partners and piloted with three community groups: 1) community health centers serving farmworkers; 2) Migrant Head Start programs; and 3) farmworker families in two communities in Ventura County, California and Hillsborough County, Florida. Throughout all stages of the program, COCHEcito was guided by a National Advisory Panel made up of ten members from stakeholder groups in these farmworker health communities. Panel members included farmworker parents, providers, educators, and other staff members.

The COCHEcito National Advisory Panel assisted in, among other things, determining what health conditions and disparities will be addressed through COCHEcito.

In addition to increasing access

to and improving the quality of health care for migrant farmworker children and their families, COCHEcito aims to:

- Facilitate the provision of comprehensive health care services, including services that encompass prevention strategies and directly increase access to care.
- Increase preventive care, thus improving the cost-effectiveness of migrant and community health centers, Migrant Head Starts, and other health providers.
- Transmit new skills and information to health delivery system and Migrant Head Start employees that will be applicable to outreach services and health education for farmworkers and other populations.

After COCHEcito has been piloted and finalized, the COCHEcito curriculum will be made available to all migrant and community health centers and Migrant Head Start programs. Organizations interested in receiving COCHEcito training should contact Antoinette B. Tomasek, Director of Education and Training, at (202) 347-7377 for more information.



Migrant Health Outreach Worker Olga Bracero of Hudson River HealthCare, Inc., doing health education with workers at an onion farm labor camp in Orange County, New York.

Upcoming Activities & Events

March 15-16: FHSI will deliver a COCHE™ Training, Cordele, GA

March 20-23: MAFO National Farmworker Conference - A Bountiful Harvest of Collaboration, Atlanta, GA

March 24-29: NACHC's Annual Policy and Issues Forum, Washington, DC

March 28-30: FHSI will conduct an outreach program assessment in Othello, WA

March 31: Cesar Chavez Day - Visit www.cesarchavezfoundation.org to learn about ways to celebrate this leader in the farmworker rights movement

April 4-5: Migrant and Immigrant Health in Rural Pennsylvania: Blending Cultures for a Healthy Community, Mendenhall, PA

April 4-6: FHSI will conduct an outreach program assessment and needs assessment consultation in Des Moines, IA

April 12-13: FHSI will deliver a COCHE™ Training, Cordele, GA

April 28-29: Reach Out and Read National Conference - Pediatrics and Early Literacy, San Francisco, CA

May 4-5: Institute for Healthcare Advancement's Annual Health Literacy Conference - Beyond the Written Word: Alternative Solutions to Low Level Literacy, Irvine, CA

May 20-24: NACHC's National Farmworker Health Conference, San Antonio, TX

FHSI Staff

Mae Denman
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Oscar Gomez
Kristie McComb
Adam Sharma
Kristen Stoimenoff
Antoinette Tomasek

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assistance such as food and water, legal services and counseling and they can apply for housing, cash and unemployment assistance on behalf of their U.S.-born children. Even those who may be eligible for assistance have difficulty maneuvering the complicated paperwork required, especially when those sent to help do not speak their language. The issues arising from language and cultural barriers, which are problematic even in the best of times, come under a glaring spotlight in times of disaster. Barriers to housing and other assistance put this population at increased risk for homelessness. In Florida, there was an increase of nearly 15,000 homeless persons in the three counties effected by Hurricane Ivan and an increase of 2,800 homeless people in the county where Hurricane Charlie hit.

Outreach programs can play a critical role in ensuring that farmworkers are not overlooked as communities plan for natural disasters. Preparation should begin long before a catastrophe strikes. Planning should involve helping key agencies and leaders understand the unique barriers faced by this population, and educating farmworkers about the potential risks and how to be prepared. Involving farmworkers in disaster preparedness activities can help to build trust between them and the agencies in their community. Employers and crew leaders should also be included. If there is a clear plan in place in advance and everyone knows their role, community members are more likely to pitch in during a disaster to ensure that everyone is informed and has a way to safety.

Language and cultural issues need to be included in disaster planning efforts. In the same way that policies intended to make

health centers more accessible to farmworkers ultimately benefit all patients, good language access plans benefit communities not only in times of disaster but throughout the year. Outreach programs can highlight the need for more bilingual staff at key community agencies, language classes in English and Spanish or other predominant languages, and interpreter training programs to meet the need for language services. Outreach programs might want to work with the community on developing a cadre of bilingual disaster relief volunteers who can be quickly mobilized immediately before and after the event. Disaster preparedness materials should be widely distributed in the community's predominant foreign languages, long before disaster strikes. Warnings should be delivered in the predominant languages through radio, television, churches, informal networks and whatever other means are most likely to reach the population.

Outreach teams can help farmworkers prepare for disaster by ensuring they're aware of potential threats in their neighborhood, the location of flood-prone areas for example, and how these threats could affect their families. In the case of hurricanes, it would be important to inform them of the need to put away or tie down objects outside the house like bikes and furniture that could cause significant damage to their home in high winds. Homeowners should make sure they have adequate insurance coverage, including flood insurance, if this is a threat in the area. Families should have a first aid kit and basic supplies like water and food and ready access to important documents to take if they evacuate. They should know where designated shelters are and what to bring - at the very least a

change of clothing and some blankets. The Red Cross and other organizations have disaster preparedness guides that can be downloaded from the web to help develop disaster preparedness programs for farmworkers.

Funding opportunities for outreach also exist. Over the next several years more than \$300 million in federal funding will be invested to minimize damage from future disasters. Counties and cities throughout Florida will create mitigation projects based on local priorities. Similarly, Volunteer Florida, part of the Corporation for National and Community Service, in conjunction with the Florida Division of Emergency Management, recently released a request for funding designed to support local efforts that ensure equal access to preparedness and warning information or mitigation activities for Floridians with limited English language skills. These resources encourage communities to plan and prepare for potential disasters and it's important for farmworkers, immigrants and other vulnerable populations to be represented in these efforts. Farmworkers, immigrants, and their advocates need to be involved in disaster planning efforts to ensure that their unique circumstances are adequately considered.



Outreach Specialists Maria Elena Ketter and Tony Reyes of Bluegrass Family Health Center prepare for a health fair. Photo by Ruth Brown.

Have an article or an idea that you would like to publish in FHSI's Outreach Newsletter? FHSI invites you to send your idea to mail@farmworkerhealth.org

Doing a Community Needs Assessment

by Kristen Stoimenoff, Director of Program Consulting and Information Services

When was the last time your organization conducted a farmworker health needs assessment? Many organizations only conduct needs assessments when required to do so by a funder or other stakeholder. Resources may be scarce, particularly money and staff availability, and a needs assessment may not seem like a high priority when faced with so many other demands.

Although as farmworker advocates we may feel that we have a strong understanding of their barriers to health care, needs can vary based on a host of factors. New farmworker population groups are emerging, presenting additional cultural and linguistic challenges to the organizations that serve them. In many communities, more and more farmworkers are settling out, working in non-agricultural industries during the off-season. Changes in living and working patterns can present new challenges and new opportunities.

A needs assessment is a tool to help you determine the true needs of the community that you serve, which are identified by the community members themselves. Finding out the specific needs of the farmworkers in your own community – not just patients but also farmworkers who do not seek services at your center – can help to maximize the results of your efforts.

Many organizations conduct needs assessments because they are required to do so by their funders as part of a grant application or renewal. However, there are many other reasons for doing a farmworker health needs assessment. Needs assessment results can help to establish program priorities and development. Given that most organizations face limited resources, a needs assessment can help prioritize which education and outreach services to

conduct with farmworkers. By addressing the needs that farmworkers identify for themselves, an organization can improve its quality of care for farmworkers. You can also help improve other community service providers' understanding of farmworker needs, thus helping to improve overall community awareness of and services for farmworkers. Finally, your organization can use a needs assessment as a tool for finding additional funding for your program.

In planning for a needs assessment, you must determine from the outset how you plan to apply the information you collect. It is important to know exactly what your purpose is in conducting the needs assessment. This will help you develop your specific goals and stay focused on what you want to achieve.

Define the parameters of your needs assessment effort during the planning stage. Be sure to determine exactly whom you want to assess. For example, do you want to focus on migrant farmworkers? Seasonal farmworkers? Farmworker children? A specific ethnic or language group? Also be specific about the geographic area you intend to cover and the topics you want to address. It is important to consider farmworker language(s) and/or dialects and the best time to assess – both

during the year and time of day.

Available resources, both internal and external, will play a large part in the type of needs assessment you conduct. Before collecting any information yourself, determine what in-



A Bluegrass Farmworker Health Center community partner signs the t-shirts of middle school students on their last day of school in this Morelia colonia. Photo by Ruth Brown.

formation already exists about the farmworkers you plan to assess. Agencies such as the U.S. Census Bureau, U.S. Department of Labor, state or local health departments, Migrant Head Start, Migrant Education, and local school districts and health centers can be invaluable sources of information.

Within your own organization, determine how many staff members and how much staff time can be devoted to the effort. You may be able to recruit assistance for certain parts of the needs assessment from organizations such as local churches, soccer leagues, hospitals, social service agencies, university students, or community service organizations.

There are a host of information gathering techniques to choose from. Surveys (mail, telephone, in-person), focus groups, key informant interviews, and secondary data sources are some possibilities. What you choose will depend on the expertise available among staff, volunteers, or collaborators as well as the extent to which each method is appropriate for farmworkers in your area. For example, if few farmworkers in your community have a telephone, a telephone survey would not be a useful

way to gather information.

A successful farmworker needs assessment will encompass several key components. Cultural competency is critical. If the individuals who are collecting information from farmworkers do not have an adequate understanding of, or respect for, the respondents' cultural characteristics, there will be little chance of developing enough trust to get meaningful information. Successful farmworker needs assessments also often make use of an existing tool. If an appropriate survey already exists, don't "reinvent the wheel."

Partnering with local agencies or institutions can also be a key to success. You may benefit from expertise that doesn't exist among your own staff – data analysis, for example. In addition, sharing information among local agencies, and even at the regional, state, and national levels, can be very useful for a number of stakeholders. Finally, consider establishing an advisory group for your needs assessment. The advisory group should

be made up of a representative sample of people from the community you are assessing. These community advisors can guide you in your assessment effort. Moreover, inviting community member participation can help to build capacity in that community.

Once you have conducted a needs assessment, you must use the data you have collected. Share the results with other stakeholders in the farmworker community including, most importantly, farmworkers themselves. Then develop a plan of action to address the gaps in services and needs you have identified.

Farmworker Health Services, Inc., conducts a national needs assessment of farmworker-serving health care organizations every two years. An internal planning committee determines the parameters of the needs assessment. The committee then makes a plan for data collection. Members of the farmworker-serving health

care community pilot our survey instruments. These instruments are then revised based on pilot feedback. Mail surveys are sent to all migrant and community health centers and other organizations that FHSI wishes to assess. Focus groups and telephone interviews generally complete the data collection efforts. FHSI staff analyze the data and report the results to all surveyed organizations as well as to other farmworker advocates. Needs assessment data are incorporated into our program planning and strategic planning. The results of the needs assessment are used to refine our services to better meet the needs of our client health care organizations.

FHSI provides needs assessment training and consultation services to farmworker-serving organizations nationwide. Please contact Kristen Stoimenoff, Director of Program Consulting and Information Services, or Antoinette Tomasek, Director of Education and Training, at (202) 347-7377 for more information.

Coming This Month!

FHSI's National Needs Assessment Survey For Farmworker Health Care Organizations

Farmworker Health Services, Inc., invites you to participate in our bi-annual National Needs Assessment of Farmworker Health Care Organizations. The purpose of this survey is to assess activities and organizational needs, as well as farmworker and farmworker family needs, at farmworker-serving health care organizations nationwide.

We will mail you the needs assessment survey this month. **Your answers are vital to the success of this needs assessment and will help to serve your organization and others like it.** FHSI will distribute a report of the findings from this needs assessment in November 2006. We will use this information to strengthen the services we provide. In addition, the report will inform your organization about trends in the work and needs of farmworker health care organizations. It will also be a resource for:

- Acting as a national reference when conducting community assessments;
- Informing strategic planning and program planning;
- Raising staff and community awareness; and
- Assisting grant writing and funding efforts.

Thank you in advance for completing this survey. If you have any questions, please feel free to contact Heather Gardner at (202) 347-7377, ext. 19, or heather@farmworkerhealth.org.

Stories From the Field - Sheila's Story

Christopher J. King, MHS, CHES, Director of Program Management, Greater Baden Medical Services, Inc.



Sheila Amaya. Photo by Melissa Dorsey.

Sheila Amaya is a 5-year-old girl whose family is from Mexico. While in Mexico, Sheila began to develop unexplained bruises on her skin as well as other physical illnesses. She was eventually diagnosed with Idiopathic Thrombocytopenic Purpura (ITP). ITP is caused by a low platelet count. The condition can be fatal if not medically managed by a hematologist.

Her parents took her to several doctors in Mexico; however, Sheila's illness did not improve and the doctors ran out of options. Frustrated and concerned about his daughter's health, Sheila's father, a landscaper, moved his family to the United States in hopes of better health care.

The Amaya family relocated to Southern Maryland. Because of

Greater Baden Medical Services, Inc.'s innovative outreach practices, Mr. Amaya brought his daughter there when they arrived in the U.S. in November 2005. During the visit, Dr. Ana Ibanez, a bilingual Greater Baden pediatrician, worked closely with Sheila's father to explore the family's options and identify sources of specialty care.

Sheila was eventually referred to Children's National Medical Center in Washington, DC. She is currently doing much better under the medical care of a hematologist, who works closely with Dr. Ibanez.

Mr. Amaya and his family have expressed gratitude to Greater Baden for the successful outcome

of his daughter's condition. If not medically managed, persons with ITP may suffer from severe hemorrhaging. Furthermore, intestinal, retinal and/or intracranial bleeding can lead to fatal consequences. Greater Baden resources allowed Sheila to receive rapid health care that was culturally sensitive and comprehensive.

The family gives special thanks to Dr. Ibanez for her willingness to go above and beyond to help them navigate a complex health care system. They have also expressed appreciation to Greater Baden for possessing a culturally and linguistically welcoming environment that helped ease a very difficult time in the family's life.



Sheila and her mother. Photo by Melissa Dorsey.

About Greater Baden Medical Services, Inc.

Greater Baden Medical Services, Inc., located in southern Maryland, is a Joint Commission accredited Federally Qualified Health Center. The system is committed to providing the highest quality of comprehensive care to all patients, regardless of ability to pay.

Through the system's creative outreach practices, Greater Baden has been able to attract a growing uninsured Spanish-speaking migrant and seasonal farmworker population. With funding from the United Way, the system has established a relationship with a prominent Mexican community grocery store. The owner, who is highly regarded in southern Maryland's Latino community, has provided Greater Baden with space in his store to disseminate linguistically appropriate health education literature. In addition, periodic health screenings, outreach services, and case management focused on increasing access to care are conducted at the store.

For the Latino community, this outreach initiative has helped instill trust and comfort in accessing health care at Greater Baden. For more information on Greater Baden Medical Services, Inc., please visit www.gbms.org or call (301) 599-0460.

FHSI Honors Recipients of the 2005-2006 Sister Cecilia B. Abhold Award for Excellence in Farmworker Health Outreach

East Coast Migrant Stream Forum



Hudson River HealthCare, Inc., in Peekskill, New York is a co-recipient of the 2005 Sister Cecilia B. Abhold Award in the Eastern stream. Hudson River has implemented a pioneering binational two-way exchange trip that allowed health professionals from both Mexico and the U.S. to observe and experience the health systems that serve their specific farmworker populations. In addition, after

discovering a large Oaxacan population in its service area, staff members made a trip to Oaxaca and signed an agreement with the state Secretary of Health for the purpose of effectively reaching out to this population. Other highlights of its outreach program include a commitment to cultural competency through the hiring of bilingual and bicultural staff and the creation of customized culturally responsive health education materials.

Bluegrass Farmworker Health Center (BFHC) in Lexington, Kentucky is a co-recipient of the 2005 Sister Cecilia B. Abhold Award in the Eastern stream. This rapidly growing outreach program is

dedicated to the provision of high quality language services. All outreach specialists receive interpreter training and provide interpretation during all appointments, including appointments with specialists as needed. The program has successfully used a local Spanish language radio station to promote good health as well as the services available to farmworkers. BFHC also integrates advanced nursing students at a local College of Nursing into many aspects of its clinical and outreach programming. This has resulted in positively sensitizing and preparing the area's future health providers to address the specific needs of farmworkers.



Midwest Stream Farmworker Health Forum



Intercare Community Health Network in Bangor, Michigan is the recipient of the 2005 Sister Cecilia B. Abhold Award in the Midwestern stream. Highlights of Intercare's outreach program include a con-

scientious effort to integrate outreach efforts with clinical services. Outreach nurses are recruited seasonally to perform essential clinical and outreach services. Due to a shortage of available bilingual nurses, Intercare developed a skilled bilingual Community Health Promoter network that provides the bulk of education to farmworkers on available services. With their farmworker backgrounds, the health promoters have bridged many cultural gaps for farmworkers in accessing health care. Intercare has also used Camp Health Aides – farmworkers who are trained in vital signs, first aid and CPR – to round out the provision of services by expediting camp clinic visits.

Western Migrant Stream Forum

Quincy Community Health Center in Quincy, Washington, a satellite site of the **Moses Lake Community Health Center**, is the recipient of the 2006 Sister Cecilia B.

Abhold Award in the Western Stream. Its outreach program has a farmworker-driven approach which uses the popular education model to put the needs of farmworkers at the center of outreach efforts. The program consistently goes out to where farmworkers live and work and holds community feedback meetings twice a year. Clinicians and health promoters collaborate yearly to deliver health education at a farmworker parent leadership conference organized by the local school district. The program also engages crew chiefs in the process of educating farmworkers. Crew chiefs provide space for health education on-site and sometimes pay farmworkers to attend health education sessions.



Visit us on the Web at
www.farmworkerhealth.org

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***Farmworker Health
Services, Inc.***

1221 Massachusetts
Avenue NW, Suite 5
Washington DC, 20005
Tel: 202 347 7377
Fax: 202 347 6385
mail@farmworkerhealth.org

OutReach