Farmworker Outreach Promising Practices: Lessons from the Field
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Acknowledgments

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Profile Contributors:
Margaret Anderson, Project Manager (HOP)
Pablo Cuadros, MPH, Project Manager (HOP)
Yvette Salinas, MA, Manager of National Outreach Services (NCFH)
Lupita Dominguez, Program Coordinator (NCFH)

Editorial Contributors:
Sonia Lee, MPH, Program Director (HOP)
Yvette Salinas, MA, Manager of National Outreach Services (NCFH)
Erin Birney, Outreach Coordinator (NCFH)
Bethany Alcauter, PhD, Director of Evaluation & National Agricultural Worker Health Program (NCFH)
Lisbeth Gall, MA, Health Education Coordinator (NCFH)
Sylvia Partida, MA, Chief Executive Officer (NCFH)

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Executive Summary

Farmworker Outreach Promising Practices: Lessons from the Field is a compilation of ten (10) profiles which highlight the ways that outreach is essential in meeting the needs of farmworker communities across the country. The purpose of these profiles is to elevate the work of farmworker-serving individuals and organizations across the country who have designed and implemented promising outreach practices that build trusting relationships, facilitate access to care and other social services, and support farmworker communities throughout the U.S. Therefore, the profiles are a resource for organizations serving farmworker communities by sharing effective outreach strategies that have been tried and tested throughout the years or most recently in response to the COVID-19 pandemic.

Methodology:

Health Outreach Partners (HOP), in collaboration with the National Center for Farmworker Health (NCFH), developed a detailed selection process for the outreach practices highlighted in this report. A “promising outreach practice” was defined as a strategy that has been implemented by farmworker serving individuals or organizations showing effectiveness and a potential for replication by other organizations. A set of primary and supplementary criteria was developed to qualify a promising outreach practice.

The primary criteria of the outreach practices included: need, replicability, scalability, cost efficiency, appropriateness, and feasibility. Of the primary criteria, practices were required to meet at least three in order to be featured as part of the report. The supplementary criteria included: impact, sustainability, reliability, measurability, innovation, equity, and professional utility. Of the supplementary criteria, participants were required to meet at least two in order to be featured as part of the report.

Individuals and organizations profiled were recruited through HOP’s and NCFH’s networks of farmworker-serving non-profit organizations and federally qualified health centers. Interviews were conducted over Zoom, either in English or in Spanish, and lasted about 1 hour. Interviews were recorded and transcribed to assist in the development of a profile highlighting the organization’s outreach practice.
Once a draft of the profile was developed, HOP shared the draft with NCFH for review. The iterative process of the profile development resulted in several rounds of reviews by HOP and NCFH. As a final step, the profiles were sent to the featured organizations for their review. This gave the organization the opportunity to provide input and make changes or additions. Once the final draft was approved by the organization, the profile was finalized and prepared for publication.

**Outreach Promising Practices:**
Recognizing that there is no one-size fits all approach to outreach, this collection of profiles can be used to guide organizations in developing outreach practices that can be adapted to the needs of the communities served. Each profile consists of the following: 1) Description of the practice, 2) Organization Description, 3) Unmet Need Being Addressed, 4) Effective Strategies, 5) Challenges and efforts to address them, 6) Costs, 7) Additional Resources, and 8) Pro-tips.

The organizations and their unique outreach programs featured in this report are as follows:

**Mixteco/Indígena Community Organizing Project (MICOP) - Community Testimonials: Using Trusted Sources to Share COVID-19 Vaccine Information with Indigenous Farmworker Communities**
Indigenous migrants in California are often unable to access many of the resources geared toward the region’s greater Latino or Spanish-speaking communities. To encourage COVID-19 vaccine uptake among Indigenous farmworkers, MICOP gathered and shared testimonials of Indigenous community members who received the COVID-19 vaccine. They shared up-to-date information with the Indigenous farmworker community through in-person and online meetings and a local, Indigenous language radio station to amplify their message. These strategies helped combat misinformation about COVID-19 and promote vaccine uptake in the community.

**Family Health La Clinica (FHLC) - Leveraging a Regional Coalition to Create a Coordinated COVID-19 Response for Farmworkers**
FHLC, alongside the Wisconsin Farmworkers Coalition (WFC), leads and chairs a COVID-19 Response Steering Committee, a formalized collaboration amongst farmworker-serving organizations, created to effectively mitigate the risk of COVID-19 among Wisconsin's farmworker population. Its purpose is to reduce the duplication of efforts and maximize limited resources. The Steering Committee is part of the Wisconsin Farmworkers Coalition (WFC), which was established to formalize collaborative networks. These efforts expanded information and resource access to all farmworkers in the state, including those working in dairy and livestock.
Vecinos, Inc. - Integrating Outreach in the Continuum of Care
Vecinos, Inc. is a free clinic serving rural North Carolina. Most of Vecinos’ patients are Spanish speaking farmworkers, and live at or below 150% of the poverty line. The lack of culturally and linguistically appropriate services in the region creates a barrier to care and further isolates this vulnerable group. As a response, Vecinos’ outreach services play a central role in the continuum of care for farmworkers by supporting every aspect of health care delivery including interpretation, transportation, care coordination and follow up. Additionally, Vecinos employs bilingual outreach workers and medical staff, most of whom have lived experiences as farmworkers and/or Latinx community members, to deliver care to farms and deliver health education.

Community Health Centers of the Central Coast (CHCCC) – Tableros Educativos: Developing a Community-Tailored Health Education Response to the COVID-19 Pandemic
During the start of the COVID-19 pandemic, CHCCC employed comprehensive surveying methods to scope out the needs of the community and developed portable tableros educativos (educational boards). The tableros educativos were delivered by Community Health Workers (CHWs), also known as promotores, to provide timely and culturally appropriate health education for farmworker communities during regular, outdoor food distribution events. This service helped CHCCC combat misinformation while providing necessary resources to communities in need.

Virginia Garcia Memorial Health Center (VGMHC) – Summer Migrant & Seasonal Farmworker Outreach Program: Creating Access to Comprehensive Care and Social Services at Onsite Housing Facilities
Due to the limited number of medical providers with appropriate language and cultural proficiency available for farmworkers in Washington and Yamhill counties in Oregon, VGMHC developed the “Summer Migrant Camp Outreach Program” a program which provides comprehensive care to farmworkers and plant nursery workers who live at migrant camps in VGMHC’s service area. During outreach, the care team utilizes a mobile clinic to provide onsite services consisting of physicals, group and individual health education classes, vision screenings, dental hygiene services, medication prescriptions from pharmacists, resources, transportation, COVID-19 screenings, vaccines, and other related education and resources. Additionally, VGMHC created multiple pathways for staff and community partners to provide feedback about their services to the outreach team so they can continuously improve their program.
Vista Community Clinics (VCC) - The Evolution of Outreach to Meet the Needs of Farmworkers Along the U.S./Mexico Border
In the San Diego, CA region, many farmworkers live throughout various neighborhoods, rather than in job site housing. To strategize how to best reach the farmworker community, VCC employed an asset mapping method to identify the available resources and existing gaps in services in the community. As a result, VCC provides regular outreach visits to community and job sites to deliver health education through “Mini Health Fairs” and platicas (informal chats) during lunch hours. The outreach team builds rapport with growers, farmworkers, and community members through their consistent presence and saturation of resources throughout the area. This practice also enabled them to adapt to the needs of farmworkers at the onset of the COVID-19 pandemic.

Campesinos Sin Fronteras (CSF) - Late Night/Early Morning Outreach to Connect with the Farmworker Community Along the Yuma, Arizona/Mexico Border
Farmworkers along the Arizona/Mexico border often travel to work late at night or early in the morning. Due to their work schedule, most farmworkers are not able to access services offered during the standard 8 am-5 pm working hours. CSF conducts outreach between the hours of 10 pm - 6 am to reach farmworkers who otherwise would not have access to services and resources. In order to organize their outreach program, CSF coordinates with other community-based organizations to include a wider range of services as part of their outreach. Additionally, CSF holds an annual celebration, El Dia del Campesino which includes many partner organizations, provides onsite services, food and live music to farmworkers.

Fernando Molina - Vive Hoy: A Popular Education Curriculum to Foster Emotional Health among Farmworker Communities
Farmworkers are a vulnerable population that face many daily challenges and often lack the space, resources, and opportunities to address their emotional health. Vive Hoy is a popular education curriculum that seeks to foster physical, emotional, and social well-being for farmworker communities by using interactive communication and reflection learning techniques to encourage conversations and meaningful exchanges around emotional health in a community space. The curriculum can also be used as a capacity-building opportunity for facilitators and advocates in leadership positions to create meaningful communication between community-based organizations and the farmworker communities they serve.
National Center for Farmworker Health (NCFH) - Consideration for Incorporating Safety Measures in Farmworker Outreach Protocols

NCFH lists the common components of outreach protocols that help ensure safe, efficient outreach to farmworkers. Outreach staff visit farms, community sites, and housing sites to deliver up-to-date, accurate, and reliable resources and services to farmworkers. However, reaching immigrant workers in rural areas can be difficult and sometimes dangerous. Outreach workers may encounter hostile employers or business owners, inclement weather, washed-out roadways, snakes, aggressive dogs, pesticide exposure, and other hazards. This compilation of outreach safety protocols is based on learnings from several farmworker-serving organizations and NCFH’s own experience conducting outreach with farmworkers.

Guatemalan-Maya Center (GMC) - Innovative Text Messaging Strategies to Reach Indigenous Communities

GMC sends messages in various languages through a mass texting platform to share emergency information, invitations to community events, and cultivates awareness amongst their predominantly Indigenous community members. At the beginning of the COVID-19 pandemic, GMC started to use SimpleTexting, a mass texting program typically used for marketing campaigns to quickly and efficiently educate and connect with their community. To make their SimpleTexting messaging accessible for individuals who do not speak or read English or Spanish, links to audio messages uploaded to YouTube are included in the texts. The audio messages are recorded in English, Spanish, Q'anjob'al, Mam, Popti’, Haitian Creole, Portuguese, and Urdu by GMC staff members. SimpleTexting has been used to deliver messages on specialty care, weather emergencies, and COVID-19 rapid response.
Introduction

Health Outreach Partners (HOP) is pleased to present the report, Farmworker Outreach Promising Practices: Lessons from the Field. The report recognizes and showcases the importance and impact of outreach on building trusting relationships and facilitating access to care and other social services for farmworker communities. Starting in January 2022, HOP and NCFH worked together to document the work of ten (10) farmworker-serving individuals and organizations and highlight the ways in which outreach has been designed and implemented to connect and support farmworker communities throughout the U.S.

Outreach is essential in connecting farmworker communities with necessary health and social services. However, establishing and maintaining effective outreach programs can be difficult due to structural limitations, lack of funds, language barriers, and other challenges. Therefore, this report is a resource for organizations serving farmworker communities by sharing effective outreach strategies that have been tried and tested throughout the years or most recently in response to the COVID-19 pandemic.

Recognizing that there is no one-size fits all approach to outreach, this collection of practices can be used to guide organizations in developing outreach practices that can be adapted to the needs of the communities served. This resource offers examples of ten outreach practices that have been successfully implemented and provide the following: 1) Description of the practice, 2) Organization Description, 3) Unmet Need Being Addressed, 4) Effective Strategies, 5) Challenges and efforts to address them, 6) Costs, 7) Additional Resources, and 8) Pro-tips.

This report contains organizational profiles highlighting the unique strategies used to maximize their outreach to migrant farmworkers. The organizations and their unique outreach programs featured in this report are as follows:

1. Mixteco/Indígena Community Organizing Project (MICOP) - Community Testimonials: Using Trusted Sources to Share COVID-19 Vaccine Information with Indigenous Farmworker Communities

2. Family Health La Clinica (FHLC) - Leveraging a Regional Coalition to Create a Coordinated COVID-19 Response for Farmworkers
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3. Vecinos, Inc. - Integrating Outreach in the Continuum of Care

4. Community Health Centers of the Central Coast (CHCCC) - Tableros Educativos: Developing a Community-Tailored Health Education Response to the COVID-19 Pandemic

5. Virginia Garcia Memorial Health Center (VGMHC) - Summer Migrant & Seasonal Farmworker Outreach Program: Creating Access to Comprehensive Care and Social Services at Onsite Housing Facilities

6 VISTA Community Clinics (VCC) - The Evolution of Outreach to Meet the Needs of Farmworkers Along the U.S./Mexico Border

7. Campesinos Sin Fronteras - Late Night/Early Morning Outreach to Connect with the Farmworker Community Along the Yuma, Arizona/Mexico Border

8. Fernando Molina - Vive Hoy: A Popular Education Curriculum to Foster Emotional Health among Farmworker Communities

9. National Center for Farmworker Health – Consideration for Incorporating Safety Measures in Farmworker Outreach Protocols

10. Guatemalan–Maya Center – Innovative Text Messaging Strategies to Reach Indigenous Communities

As the profiles demonstrate, farmworker-serving individuals and organizations are finding creative ways to conduct outreach, such as: on-site visits to housing and worksites using mobile clinics, developing impactful community meetings and leveraging external partnerships to expand services provided to farmworker communities.
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The profiles are intended to serve as a resource for those interested in applying proven strategies to their own outreach efforts. Additionally, for readers that may have questions, each profile includes the key contact information for the outreach practice. HOP hopes that this collection of profiles can be used to guide organizations in developing outreach services that are adapted to the needs of the communities served.

Methodology

Criteria

Health Outreach Partners (HOP), in collaboration with the National Center for Farmworker Health (NCFH), developed a detailed selection process for outreach practices that would be highlighted in the report. First, a “promising outreach practice” was defined as a strategy that has been implemented by organizations serving the agricultural worker community showing a proven effectiveness and a potential for effectiveness and replication by other organizations. Next, a set of primary and supplementary criteria was developed to qualify a promising outreach practice.

The primary criteria required that the outreach practice meet at least three of the following criteria:

- **Need**: Designed to address an identified need or gap in communication, education, and/or outreach to farmworkers and their families
- **Replicability**: Can be replicated among farmworker-serving organizations implementing small- or large-scale interventions
- **Scalability**: Shows evidence of effectiveness with potential to generate actionable data that could assist with taking the practice to scale and generate the results to diverse populations in diverse settings
- **Cost Efficiency**: Shows evidence of financial feasibility for organizations of all sizes
- **Appropriateness**: Culturally-responsive and acceptable to local farmworker populations
- **Feasibility**: Successfully completed or near completion
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Additionally, the supplementary criteria required at least two of the areas outlined below:

- **Impact:** Reached a large quantity of the desired target population, as appropriate for the activity
- **Sustainability:** Has the potential to be implemented and sustained over time
- **Reliability:** Has documented challenges, barriers, and limitations
- **Measurability:** Collected evaluation data, in the form of formative or outcome data
- **Innovation:** Uses a creative or non-traditional (“out-of-the-box”) approach to reach the target population
- **Equity:** Reached vulnerable sub-populations of agricultural workers, such as Indigenous workers, adolescent workers, or H-2A guest workers
- **Professional Utility:** Shows potential benefit for community health workers and/or other outreach staff to develop professionally (e.g., receive continuing education, sharpen soft and hard job skills, etc.) while serving the agricultural worker community

**Recruitment**

Marketing materials were created and distributed via email to both HOP’s and NCFH’s networks of farmworker-serving outreach teams, clinics, and other organizations. A survey link was included for organizations to submit information about their practice. The survey contained eight questions, and the purpose was to gather preliminary information about the practice. An example of questions featured in the survey are listed below:

- “What identified need(s) did this outreach practice meet?”
- “Could this practice be replicated by other organizations conducting outreach to farmworker communities?”

Using the criteria, HOP identified which aspects of their outreach program could be highlighted as a promising practice. Then, HOP reached out to the organizations to schedule interviews. Interviews were conducted over Zoom, either in English or in Spanish, and lasted about 1 hour. Interviews were recorded and transcribed.
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Review Process
After the completion of an interview, HOP developed the first draft of the profile highlighting the organization and their promising outreach practice. Each profile included information that would be important for other farmworker-serving organizations looking to implement similar programming, such as need being addressed, key strategies, challenges, and costs. Once an internal review of the profile was completed, HOP shared the draft with NCFH for review. The iterative process of the profile development resulted in several rounds of reviews by HOP and NCFH.

Once the draft had been thoroughly reviewed by both HOP and NCFH teams, the profiles were sent to the organization for their review. This gave the organization the opportunity to provide input and make changes or additions. Once the final draft was approved by the organization, the profile was finalized and ready for distribution.

Limitations
- **Criteria:** Identifying practices that met all the defined criteria of a “promising practice” was not feasible. Therefore, the practices that met at least half of the required criteria and at least two of the supplemental criteria was determined to be a promising practice.
- **Fluid nature of outreach:** There is no singular way to conduct outreach that will meet every need of a population or community. Many aspects of outreach are designed based on the needs of a group and the specific area or region in which they live.
- **Evaluation:** A foundational piece of outreach is building relationships and trust between an organization and the community being served. Therefore, some aspects of outreach cannot be quantified, or it may be difficult to collect data on aspects of the practice. Further, outreach is typically not a source of income or funding for organizations, so many organizations may not implement rigorous data collection on outreach. As a result, outreach data was not always available.
Community Testimonials: Using Trusted Sources to Share COVID-19 Vaccine Information with Indigenous Farmworker Communities

Outreach Promising Practice
Mixteco/Indigenous Community Organizing Project (MICOP) gathered and shared testimonials from members of Indigenous communities who received the COVID-19 vaccine as a means to share important health information and encourage the adoption of the COVID-19 vaccine among Indigenous farmworkers.

Organization:
Mixteco/Indigenous Community Organizing Project (MICOP)
Location: Oxnard, CA

About:
MICOP is a 501(c)(3) nonprofit organization that has been a pillar of the Indigenous farmworker community in Central California since 2001. MICOP is a self-governing Indigenous empowerment group. For more than two decades, this team has built a foundation of support and trust for the Indigenous immigrant worker communities it serves in Central California through culturally and linguistically informed programs and outreach. In addition to outreach, MICOP operates a wide range of programs to promote the health and well-being of migrant workers, including community organizing and policy advocacy, immigration services, and research and evaluation. Annually, MICOP's programming serves approximately 15,000 people.

MICOP keeps its community safe and informed by providing information in Mixtec, Zapotec, Purépecha, and Spanish.
Unmet Need Addressed:
California is home to some 170,000 Indigenous immigrants from the southern states of Mexico, including Mixtecs, Zapotecs, Purépechas, among other peoples. These communities speak their own Indigenous languages and have deep-rooted cultural beliefs and practices. Because many programs and resources fail to account for this cultural and linguistic diversity among immigrants, many Indigenous immigrants cannot access health resources and information. MICOP’s outreach programming has ensured equitable language access to accurate information about the COVID-19 vaccine to combat misinformation and increase confidence in the vaccine in Indigenous farmworker communities through radio, social media, and face-to-face conversations.

Description of the Practice:
MICOP has collected testimonials from members of Indigenous communities in their respective languages who have received the COVID-19 vaccine. Testimonials are captured verbally and then shared widely during meetings, social media, and through one-on-one interactions between advocates and community members. Some testimonials are recorded during community meetings, where people share their experiences and reasons for getting the vaccine in their languages. Testimonials are then edited for clarity and shared via social media and broadcast on indigenous and Spanish-language radio.

Radio Indigena 94.1 staff in the radio’s production space.
Key Strategies:

Formal Recorded Testimonials
The idea to focus on community testimonials came from MICOP’s Indigenous language radio program, Radio Indígena 94.1 FM. Radio Indígena 94.1 FM offers programming on a wide range of topic areas ranging from farmworkers’ rights and community organizing to domestic violence and mental health, and the station began providing educational information on COVID-19 during the pandemic. Members of the MICOP outreach team began to hear from community members who called the radio station about their experiences with the COVID-19 vaccine.

Building upon the personal stories being shared on the radio, MICOP started to collect testimonials and information from farm workers and community members regarding their experiences with the COVID-19 vaccine during meetings and one-on-one interactions. These testimonials were shared with other members of the community through outreach events, Radio Indígena 94.1 FM, and online platforms such as Facebook. It was the decision of the radio producer and the community outreach team to choose which testimonials to highlight. The testimonials were accompanied by data from the county public health department. An example of a testimonial shared on Facebook can be found here.

The sharing of testimonies helped the MICOP outreach team address concerns in larger community settings as well as one-on-one.

Informal Testimonials
Outreach meetings were an opportunity for farmworkers and their families to share information and receive resources on public benefits and health resources, such as CalFresh (SNAP). These monthly informational meetings, coupled with MICOP’s foundation of support and trust with the community, have provided outreach workers with a platform to encourage open communication between MICOP, public health agencies, and Indigenous farmworker communities. This open discussion style was born out of a need to dispel widespread misinformation about COVID-19 and increase community members’ confidence in the vaccine.

Providing a safe forum for community members to discuss their experiences with vaccines stimulated community dialogue about the benefits of vaccines and helped answer questions quickly while correcting any misinformation. Community members could hear from their peers why they chose to be vaccinated, allowing for dissemination of these informal testimonials about the COVID vaccines.
“Giving space for community members to share their experiences allowed information to come not only from MICOP health promoters, but also created an avenue for dialogue from the community to the community.”
- Griselda Reyes Basurto
Manager of the COVID-19 Rapid Response Team

Language Access
Recognizing that language is one of the significant barriers for the Indigenous farmworker population, MICOP prioritized the translation of all English and Spanish materials into Indigenous languages, including Mixtec and Zapotec. During meetings, MICOP provided live interpretation into Mesoamerican languages for all who needed it. Additionally, MICOP’s efforts to promote COVID-19 vaccinations and dispel misinformation depended on communication that was consistent, transparent, and culturally and linguistically appropriate.

Results:
For 16 months (November 2020 to February 2022), a total of 73,000 people attended the face-to-face and online meetings. Participants may have attended more than one meeting and may be counted in this estimate more than once.

Between November 2020 and February 2022, Radio Indígena 94.1 FM made more than 7,300,000 “impressions”. “Impressions” refers to the number of times the audience listened to the radio. This does not refer to unique listeners.
Key Challenges and How to Address Them:

A key challenge for MICOP during the COVID-19 pandemic was combating misinformation that spread among the farmworker community. Like many communities, the misinformation circulating included misunderstandings that the COVID-19 vaccines were unsafe or untrustworthy.

While many materials were made available by other organizations to combat misinformation, very few were translated into Indigenous languages or made available in offline formats. MICOP was able to address misconceptions about the COVID-19 vaccine by sharing testimonials with members of the community, which provided information on how to stay protected against COVID-19 and the benefits of getting vaccinated. Furthermore, collecting these testimonials from the community and sharing them allowed MICOP an additional avenue to keep a pulse on community attitudes about the COVID-19 pandemic and vaccines.

Resources Needed and Expenses:

The largest expense was staff time. The number of staff dedicated to this project included two staff members working on gathering testimonials, two staff working on social media management, their radio producer, and their community outreach worker. MICOP also purchased small gifts such as insulated water bottles and face masks to distribute to participants at the monthly meetings.
Partnerships:
The following organizations supported MICOP by providing information related to the COVID-19 pandemic, training for supervisors and community health promoters, and resource sharing:
  • The Center at Sierra Health Foundation, provided funding to MICOP
  • California Department of Social Services
  • Together Toward Health
  • The Labor and Workforce Development Agency
  • Local public health agencies of San Luis Obispo, Santa Barbara, and Ventura Counties collaborated on vaccination clinics and COVID-19 prevention.

Learn More:
  • MICOP’s website
  • Radio Indigena 94.1 FM
  • Radio Indigena 94.1 FM Horario del programa
  • Immigration Resources
  • Interpretation Services
  • Artículo: “A Day of Pandemic-Style Work at Radio Indigena”

Contact: Griselda Reyes Basurto, COVID-19 Rapid Response Manager, griselda.reyes@mixteco.org

Pro Tip:
Be creative about ways to deliver messages about vaccines and other health issues (i.e. use of social media/digital platforms). While there may be challenges with this approach due to low digital literacy in the community, this can also be an educational opportunity and increase access to digital resources, as well as provide additional avenues to stay connected to the community.

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Leveraging a Regional Coalition to Create a Coordinated COVID-19 Response for Farmworkers

Outreach Promising Practice
The COVID-19 Response Steering Committee formed by Family Health La Clinica (FHLC) and the Wisconsin Farmworker Coalition created a coordinated approach to mitigate COVID-19 transmission risk, bolster vaccination efforts, and expand the reach of services to the farmworker population.

Organizations:
- Family Health La Clinica (FHLC)
- Wisconsin Farmworker Coalition (WFC): an advocacy organization for the migrant and seasonal farmworkers and other agricultural workers in Wisconsin
- Location: Wautoma, Wisconsin

About:
Established in 1973, Family Health La Clinica (FHLC) is a Federally Qualified Health Center (FQHC) and is the only federally-designated Migrant Health Center serving Migrant and Seasonal Agricultural Workers (MSAW) in Wisconsin. FHLC provides primary medical care to farmworker patients at its clinic locations and throughout the state via a Mobile Health Center. Services are delivered directly to workers at migrant housing camps, worksites, and other sites easily accessed by farmworkers.

FHLC has a long history of serving this population throughout the state and has fostered partnerships in agriculture through participation in the Wisconsin Farmworkers Coalition (WFC), which has been incorporated as a statewide, issue-oriented coalition since 1998. FHLC was uniquely positioned to respond to the needs of Wisconsin’s farm workers during the COVID-19 pandemic, as the need for food assistance, transportation, mental health resources, and computer literacy grew in the farmworker community.
Unmet Need Addressed:
Given the sudden onset of the COVID-19 pandemic, the Wisconsin Farmworker Coalition and other key stakeholders urgently needed to effectively mitigate the risk of COVID-19 among the farmworker population without duplicating efforts and using limited resources efficiently. As a result, the Coalition’s COVID-19 Response Steering Committee was created, and FHLC led and chaired the Steering Committee.

The Coalition’s COVID-19 Response Steering Committee formalized partnerships between like-minded organizations and government agencies by meeting regularly to keep communications open, sharing timely information, and collecting and disseminating partner resources to the farmworker population. By formalizing these relationships, the Steering Committee created a network that effectively coordinated efforts and could quickly address an ever-changing emergency like the COVID-19 pandemic.

Description of the Practice:
The development of the COVID-19 Response Steering Committee formalized partnerships among community-based organizations and enabled a swift response to the ongoing COVID-19 pandemic that protected Wisconsin farmworkers and their families. FHLC established a charter with other community-based organizations, which enabled families to access COVID-19 care and other community-based resources.

Key Strategies:
FHLC’s outreach program was multifaceted before the COVID-19 pandemic, consisting of outreach to employers, a mobile clinic to provide healthcare access to farmworkers, and resource sharing within the Wisconsin Farmworker Coalition, all the while functioning as the only Migrant Health Center in the State of Wisconsin. When the COVID-19 pandemic began, FHLC and the WFC built upon existing efforts and relationships to create formal partnerships by drafting a charter for their collaborative efforts. The goal of this charter was to expand access to services for farmworker communities and allow organizations to respond quickly and cohesively to COVID-19 response efforts.
Development of Formal Charter
The charter established by FHLC and WFC for the COVID-19 Response Steering Committee formalized collaborative networks and uplifted the voices of farmworkers through consistent advocacy for education, information sharing, and optimal working conditions. The priorities of this group included:

- **Education**
  - Supporting advocacy and education efforts on issues impacting Wisconsin’s farmworker community

- **Information Sharing**
  - Disseminating information amongst members
  - Seeking resources to support its collaborative programs
  - Coordinating and referring services amongst partner organizations

- **Improving Access to Services**
  - Identifying and addressing gaps in social and health services
  - Developing collaborative outreach strategies
  - Identifying and prioritizing the healthcare needs of Wisconsin’s farmworkers and developing healthcare access strategies
  - Developing and implementing joint program efforts and more effective utilization of existing healthcare resources
  - Engaging in ongoing assessment and planning to ensure members are addressing the needs of workers and their families

Meeting Facilitation
FHLC coordinated the Steering Committee meetings and was responsible for disseminating the meeting minutes and agenda to all members. Meetings accommodated video conference/phone attendance, with the intent of offering in-person attendance as public health guidance allowed. The WFC Committee Chair facilitated the meetings. Accountability was kept through regular management and follow-up of agenda items.

Creating a committee and a charter between partner organizations made it possible to establish regularly scheduled, formal meetings and streamline information sharing through email and Microsoft Teams. The newly formed committee also created formal information sharing between organizations and farmworker communities, by including folders of information from partners distributed by FHLC. These folders included flyers and brochures of services offered by committee members with content that was clear and concise, at appropriate reading levels, and culturally sensitive.
Expanded Services
Because the committee included organizations serving the broader farmworker population, FHLC and WFC expanded and offered services to a broader range of agricultural workers, including H-2A workers and year-round agricultural workers such as meat and dairy workers. FHLC and WFC also expanded services to farmworkers of different ethnicities such as Hmong, Haitian, Mixtec and Khmer farmworkers. FHLC and the Coalition needed to establish communication between farmworkers and service organizations to extend resources to this wider range of farmworkers.

In response to this need, FHLC hired a Community Health Coordinator and purchased HubSpot CRM, a customer relations management software that allowed FHLC to keep track of communication between growers and the outreach team. FHLC hired a small, seasonal team of bilingual outreach staff. These new staff members enhanced outreach efforts by collecting information regarding vaccine hesitancy and documenting the needs of farmworkers while also serving as health educators and building trust among service organizations and the community.

“Through coordinated efforts with the Wisconsin Farmworkers Coalition and the COVID-19 Response Steering Committee, Family Health La Clinica expanded service delivery from 400 farmworkers to over 3,000 farmworkers throughout the state of Wisconsin during the COVID-19 pandemic.”
— Netzali Pacheco Rojas
Practice Manager, Mobile Services

The committee saw a substantial increase in farmworkers served over the course of the COVID-19 pandemic. The increase was partly due to the implementation of Emergency Rule 2014, an order of the Wisconsin Department Workforce Development, which stated that employers must be accountable to provide safe working conditions and practice COVID-19 mitigation strategies to protect their workers. This ruling encouraged a symbiotic relationship between FHLC and employers to offer COVID-19 risk mitigation practices. Many employers embraced the work of FHLC to keep their staff healthy and protected. The expansion of services was made possible by combining the committee’s diligent work and the emergency funding that allowed the scale-up of services.
Key Challenges and How to Address Them:

Partner Management and Meeting Facilitation
Scaling operations at such a fast pace required incredible coordination between partners. FHLC found that management and facilitation of meetings with partners became challenging as participation expanded and information about the COVID-19 pandemic changed and was updated rapidly.

To address this, FHLC recommends hiring a Project Manager to facilitate and coordinate coalition meetings. Due to funding, FHLC was not able to hire for this role. Instead, the Wisconsin Farmworker Coalition established specific committees to which they leveled responsibilities among organizations. Specific subcommittee topics included:
- Dairy Workers and Vulnerable Populations
- Communication Strategy
- Education Resources
- Isolation/Housing Planning
- Outreach
- Safe Service Access

Dedicated Funding for Personnel
Reaching a large, statewide population also created a need for additional outreach workers. While FHLC was able to procure a seasonal outreach team and received grant funding to hire a Community Health Coordinator, this funding was temporary. Dedicated funding for outreach continues to be a key challenge for FHLC.

Pictured: representatives from the COVID-19 Response Steering Committee, including WIC, Madison College and the Wisconsin Department of Instruction’s Migrant Education Program
Resources Needed and Expenses:

Emergency COVID-19 grant funding was key to FHLC and WFC’s response and expansion. In April 2020, the Medical College of Wisconsin (MCW) Advancing a Healthier Wisconsin (AHW) Endowment awarded $322,420 to FHLC for a nine-month project period (April 2020 through January 2021). The project’s main focus was to develop a cohesive response to prevent and minimize the transmission risk of COVID-19 amongst MSAWs and their employers throughout Wisconsin. FHLC also received emergency funding from the State of Wisconsin to provide mass testing to MSAWs.

With these two distinct funding streams, FHLC built and implemented its comprehensive COVID-19 Risk Mitigation project to address worksite and housing assessments, education, COVID-19 screening, and testing for SARS-CoV-2.

To support the work of the coalition and the demand for services due to the COVID-19 pandemic, FHLC hired a Community Health Coordinator and a small, seasonal team of bilingual outreach staff. Additionally, FHLC purchased the HubSpot CRM software to keep track of communication between growers and the outreach team.

A Wisconsin farmworker receives a COVID-19 vaccination.
Partnerships:

Partnerships with FHLC and the COVID-19 Response Steering Committee included representatives from:

- United Migrant Opportunity Services (UMOS)
- Department of Workforce Development (DWD)
- Department of Public Instruction (DPI)
- Legal Action of Wisconsin
- Midwest Food Products Association
- Seven (7) Public Health Entities:
  - Portage County Public Health Department
  - City of Markesan
  - Green Lake County Health Department
  - Fond du Lac County Health Department
  - Adams County Health Department
  - St. Croix Public Health Department
  - Washington Ozaukee Public Health Department
  - Waushara County Health Department
- State Emergency Operations Center (SEOC)
- Wisconsin Primary Health Care Association (WPHCA)
- Southwestern Wisconsin Community Action Program (SWCAP)
- Occupational Safety & Health Administration (OSHA)

Results:

FHLC’s coordinated efforts, with WFC and the COVID-19 Response Steering Committee, to expand partnerships and the reach of services for farmworkers saw an increase in service delivery from 400 to over 3,000 farmworkers between 2019 and 2020.

Additionally, FHLC and WFC were able to expand services to include dairy workers and provide health services, COVID-19 tests, and vaccinations at workplaces. Recently, their efforts have shown successful outcomes in the low COVID-19 case rate among the farmworker population. The 2021 season was a huge success for FHLC and WFC: after conducting 2,600 COVID-19 tests, only 18 tests were positive (<1% positivity rate).

Looking forward, the work of the COVID-19 Response Steering Committee will continue in regular, twice-a-month meetings during the growing season and monthly off-season meetings. This ongoing collaboration will continue with information sharing and implementation of best practices with the possibility of the development of a Memorandum of Understanding (MOU) to solidify the work of the Committee.
Learn More:

- Wisconsin Farmworkers Coalition website: https://wisconsinfwcoalition.org/
- Family Health La Clinica website: https://www.famhealth.org/

Contact:

- Aida Bise, Director of Migrant and Seasonal Agricultural Worker Services
  - aida.bise@famhealth.org

Tools and Resources:

HubSpot CRM: This software is utilized primarily to keep track of correspondence between growers/employers and the FHLC outreach team. Additionally, the software is used to track and organize events. In these instances, HubSpot CRM is used to organize groups that may be arriving at an event (i.e., vaccine clinic, educational opportunity, etc.) at varied intervals. FHLC uses this software to collect organizational contact information, schedule posts for social media, and employer management. The software records instances of communication between the organization and employers. This allows FHLC’s team to track communication and follow-up activities.

Pro tip:

Connect with like-minded organizations in your region. Partnering with other organizations serving farmworkers bolsters information sharing and resource development and increases the reach of services. Establishing formal coalitions builds regional preparedness and strengthens the ability of organizations to respond to emergencies.

This publication was supported by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling $4,000,000 with 100 percent funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government.
Integrating Outreach in the Continuum of Care

Outreach Promising Practice
Vecinos, Inc. delivers outreach-based care to farmworkers and the uninsured, low-income community across eight counties of rural western North Carolina. As a rural health clinic, the outreach services of Vecinos, Inc. play a central role in the continuum of care for farmworkers by supporting every aspect of health care delivery, including interpretation, transportation, care coordination, and follow-up.

Organization:
Organization name: Vecinos, Inc.
Location: Cullowhee, North Carolina

About:
Vecinos, Inc. is a free clinic serving 100% uninsured and underinsured patients with free primary and behavioral health care between their four program areas: integrated care in their clinical setting, the Farmworker Health Program, the Community Health Outreach Program, and the Community Engagement Program.

Established in 2001, Vecinos, Inc. was created to provide primary care to low-income, uninsured farmworkers in rural Western North Carolina, with services offered in Jackson, Macon, Swain, Graham, Clay, Cherokee, Haywood, and Transylvania Counties. All of Vecinos’ patients identify as Hispanic or Latinx, and almost all fall at or below 150% below the poverty level. Furthermore, this population needs services in Spanish and is often without translated healthcare resources. Vecinos was created to meet the need for culturally and linguistically appropriate services, including Spanish language interpretation. Vecinos now offers integrated primary and mental healthcare services to any uninsured, low-income adult in their community.

Vecinos’ Farmworker Health Program was created to provide outreach, mobile clinic services, and other resources to 13 farms in eight counties. In 2021, Vecinos’ Farmworker Health Program served 732 migrant and seasonal farmworker patients.
Unmet Need Addressed
Farmworkers in rural western North Carolina need health care services and resources in Spanish, but these are not widely available in the area. The lack of culturally and linguistically appropriate services creates a barrier to care and isolates an already vulnerable group. To address this service gap, Vecinos provides outreach-based care that consists of attentive interpretation, communication, and advocacy in all services, including education, transportation, appointment coordination, prescriptions, and follow-up visits. Furthermore, Vecinos employs bilingual outreach workers and medical staff to deliver care and health education to farmworkers directly at their work sites. Most of the outreach team have lived experiences as farmworkers and/or are Latinx community members.

Description of the Practice
Employing an outreach-focused approach to primary and mental healthcare, Vecinos fosters an environment of trust between the Care team and patients. As part of the care team, outreach workers communicate consistently with patients, are well informed about their needs, and advocate for their patients to ensure a high-quality continuum of care.

Key Strategies

Trusted Care Coordination
Providing healthcare to migrant farmworkers in rural North Carolina hinges on the outreach team’s ability to connect with the community and build trust-based relationships. Building trust often includes maintaining a consistent and visible presence in the community, reliable follow through, community partnerships, resource referrals, and staff representing and listening to the community.

To coordinate care, Vecinos also works to build service-delivery cohesion between their outreach team, other internal departments, and collaborative partners. This collective effort starts with the shared goal between Vecinos’ staff, internal and external providers, and patients of achieving high-quality care for patients. The same strategies used to build trust with community members can be used by staff and partners.
As part of the care team, Vecinos’ outreach team participates in every aspect of the care of patients, including:

- Job site and neighborhood visits
- Scheduling appointments
- Liaising with clinicians
- Providing interpretation services at appointments
- Service delivery at mobile outreach
- Follow up care
- Connections to supportive services

Medical Advocacy

All Vecinos’ staff receive training in cultural competency, which is conducted by El Futuro, a nonprofit located in Durham, NC. Culturally competent care is a key aspect of Vecinos’ services and extends into the Outreach team’s work as Interpreters and Case Managers for patients. When Vecinos cannot provide care, for example, in the case of specialist appointments, an outreach team member will transport the patient to their appointment and provide interpretation and case management services. Most clinics and hospitals in the area cannot provide reliable interpretation services for non-English speakers.

Because the outreach team wears many hats (i.e., interpreter, transportation to and from appointments, and case manager), patient advocacy plays a central role in their services. Advocacy for patients may include coordinating payment for specialist appointments, assistance with scheduling, and making sure the patient is aware of any medical follow-up needed.

Often, the Outreach team will follow up with patients over the phone or via WhatsApp. This level of communication and trust allows the Outreach workers to advocate effectively for patients at clinic appointments and during follow-up.

The Vecinos Outreach Team providing services to farmworkers.
Results
From October 2021–March 2022, the Outreach team reached a total of 1,442 farmworkers and family members, including 657 H2-A workers. Their programming also provided Personal Protective Equipment (PPE) and COVID-19 vaccines throughout the pandemic. Furthermore, Vecinos provided over 8,500 COVID health education encounters for patients and community members and administered over 4,000 COVID vaccine doses.

Key Challenges and How to Address Them
Geographic Isolation of the Region
The rural, mountainous region is approximately 3,500 square miles and can take up to 2.5 hours to traverse. There are no metropolitan centers in the region, posing challenges across the region in accessing specialists, bilingual providers, transportation, and reliable internet connection.

The poor internet connectivity experienced by rural areas is a barrier to patients accessing telehealth resources. These services were in high demand throughout the COVID-19 pandemic but were often inaccessible if internet connection was unavailable.

Vecinos installed hotspots in 10 migrant camps to combat these issues so farmworkers could attend telehealth appointments. This was funded through the NC Office of Rural Health/NC Farmworker Health Program. While some appointments moved to virtual attendance, Vecinos' Farmworker Health Program’s outreach team continued to visit farms to provide PPE, health education, and referrals to other resources. Providing multiple avenues for care and information sharing has bolstered Vecinos’ programming and preserves the continuum of care for patients.
Establishing Relationships with Employers
Relationships between employers and Vecinos have evolved and have not always been cohesive. As many farmworker-serving organizations have experienced, employers may be reluctant to allow access to the job sites or may be suspicious of farmworker-serving organizations.

Vecinos has made concerted efforts to build relationships with farmworker employers. These efforts include regularly reaching out to growers and scheduling meetings to discuss planned visits to farms. However, due to various factors, including farm size, location considerations, onsite housing, or stigma around illness, Vecinos still faces barriers to connecting with employers.

The outreach team continues to cultivate relationships with employers, while still conducting informal outreach such as delivering PPE supplies and other materials to farms. This informal outreach to farms allows individual farmworkers to speak with Vecinos’ team members even if formal relationships with an employer still need to be developed.

Limited FTE and Seasonal Outreach Workers
Vecinos’ Farmworker Health Program employs three full-time outreach workers and three additional part- or full-time, seasonal outreach workers from May to November. Much of the communication between farmworkers and outreach staff is done individually, with patients reaching out directly to outreach staff via WhatsApp or a phone call to ask for help. They have found that farmworkers feel comfortable communicating with outreach staff and rely on them for first-time connections to other community resources, including housing, food pantries, and clothing. To meet the additional needs of farmworkers, Vecinos collaborates with local food pantries to deliver groceries, PPE, and medication to housing sites. Partners include the local health departments, other area nonprofits, and churches.
Resources Needed and Expenses

The major costs of Vecinos’ Farmworker Health Outreach Program include transportation, mobile medical equipment, and staff time. Vecinos also has limited funds to assist patients with medical specialist costs. The organization receives grant funding from the National Center for Farmworker Health (NCFH) and other organizations to provide outreach and education and patient medical coverage. As a free clinic, Vecinos relies on medical providers who generously volunteer their time to provide care for free. Since expanding their scope of services to the broader low-income, uninsured community in 2021, Vecinos has received additional funding to support their programming.

Partnerships

- **Blue Ridge Free Dental Clinic**: The dental clinic provides free dental care to uninsured patients, while Vecinos provides transportation and medical interpretation.

- **Blue Ridge Health**: Blue Ridge is a Federally Qualified Health Center (FQHC) that supports Vecinos with patients’ urgent primary care needs and as a community thought-partner.

- **Jackson County Department of Public Health (JCDPH)**: JCDPH provides services in partnership with Vecinos, including OB/GYN, nutrition counseling, diagnostic laboratory services, diabetes programs, immunizations, and treatments. Vecinos was originally established as an outreach program of JCDPH, and JCDPH administrators and staff continue to serve on the Board and participate in collaborative efforts over the past 15 years.

- **North Carolina Farmworker Health Program (NCFHP), NC Office of Rural Health**: Since 2004, NCFHP has provided funding, training, technical support, and guidance.
• Thirtieth Judicial District Domestic Violence–Sexual Assault Alliance, Inc.:
The Alliance is a partner that provides support, advocacy, and understanding for survivors of
abuse and works to create safer communities while empowering victims.

• Western Carolina University (WCU):
WCU provides office and clinical space to Vecinos while Vecinos provides lectures and
internship, volunteer, and community engagement opportunities for faculty, staff, and students.

Learn More
Website: www.vecinos.org
For more information or question, contact:
Valeria Barrera Vizcarra, Farmworker Health Program Manager, vbarrera@vecinosinc.org

Tools and Resources
• The Role of Outreach in Care Coordination, Outreach Reference Manual, 2016.
  Health Outreach Partners

**Pro Tip:**
Consider integrating Outreach team members into care
appointments, as farmworkers and other patients may feel
more comfortable with a trusted interpreter and advocate
as part of their Care team. This may be especially helpful
for rural or geographically isolated regions, where bilingual
or culturally competent services are less common.

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Tableros Educativos: Developing a Community-Tailored Health Education Response to the COVID-19 Pandemic

Outreach Promising Practice
Community Health Centers of the Central Coast, Inc (CHCCC) developed portable tableros educativos (educational boards) that are delivered by Community Health Workers (CHWs), also known as promotores. The tableros educativos provide timely and culturally appropriate health education for farmworker communities during regular outdoor food distribution events.

Organization:
- Name: Community Health Centers of the Central Coast, Inc. (CHCCC)
- Location: San Luis Obispo and northern Santa Barbara counties, California

About:
Established in 1978, Community Health Centers of the Central Coast (CHCCC) is a 501(c)(3) non-profit network of community health centers that provide medical, dental, and chiropractic care as well as health education and specialty care to the most vulnerable in San Luis Obispo and Santa Barbara counties. CHCCC uses an integrated approach to care, with outreach workers and behavioral specialists included as part of the clinic's care team. CHCCC's outreach relies on the knowledge and dedication of their Indigenous, trilingual staff members who speak English, Spanish, and Mixtec. 90% of whom come from the farmworker communities served.

Because of CHCCC's generational connections with farmworker communities, their team steered county efforts towards effectively reaching these populations. Through collaboration with food pantries, local government agencies, and a trusted partnership with community members, CHCCC continues to protect and elevate the needs of its community.
Unmet Need Addressed
For many farmworker communities, the onset of the COVID-19 pandemic fragmented many services due to the digital divide experienced by farmworkers. In the initial weeks of the COVID-19 lockdowns in California, CHCCC fielded hundreds of calls from farmworkers with questions and various needs. The team quickly realized that remote efforts would not be the most effective way to reach farmworker families nor adequately protect the community. At the same time, CHCCC expanded its weekly food shares in collaboration with a local food bank to continue addressing the food insecurities experienced by the community. CHCCC combined the two efforts to most effectively reach the farmworker community. This advocacy ensured that food distribution events were accessible to community members and proved to be effective in addressing needs while providing targeted outreach and education geared at reducing the infection rates and lowering the stress impact caused by the pandemic.

In addition to food insecurities, the COVID-19 pandemic highlighted a need for timely health education materials that would be accessible to the farmworker community. Therefore, CHCCC’s behavioral health outreach team and promotores came together to develop and implement a health education program for the community. The program leveraged CHCCC’s culturally appropriate food assistance while utilizing COVID-19 safety measures, such as social distancing and being outdoors, to deliver information. CHCCC developed the tableros educativos during this time and it has become a well-known and trusted resource in the community.

“The richness of these efforts — to combine infographics with attentive, appropriate dialogue — is in the trusted promotora’s ability to clarify questions, provide interpretation, and build community connection, all while ensuring the safety of the outreach workers and community members by practicing social distancing.”
— Magdalena Sunshine Serrano
Director of Behavioral Health and Psychiatry Services
Description of the Practice

The tableros educativos are 5–8-minute discussions led by CHCCC’s promotores using graphics on 36”x36” posters accompanied by verbal explanations in Spanish. Discussions happen over the tableros educativos in small groups while community members wait in line outdoors during 1–2-hour weekly food distribution events in their neighborhoods and workplaces.

Key Strategies

Accessible Health Education

The topics covered on the tableros educativos include COVID-19 prevention strategies, vaccine myths versus facts, nutrition, mental wellness education, and dental health. This strategy ensures that all community members receive health education with the opportunity to ask questions and converse with trusted messengers while being outside and maintaining a safe distance as part of COVID-19 mitigation efforts.

CHCCC’s tableros educativos are easily adaptable for various topics and audiences and rely heavily on images and graphics to depict COVID-19 mitigation strategies and other health education lessons. Printed handouts of the tableros educativos are also available to community members. This in-person strategy allows outreach workers to remain socially distanced while creating a comfortable, small group environment where community members can engage with the material and ask questions.

Collaboration

A key strategy for implementing the tableros educativos is collaborating with the Promotoras Network of Santa Barbara County. CHCCC trained the promotores to use the tableros in conjunction with the Nursing Director to address any questions and concerns that may be present in the community setting. Promotores, in conjunction with the outreach team, provided community education using the tableros educativos to bring awareness and education about COVID-19, while implementing prevention strategies in person to allow for questions and discussion from community members. This critical approach created more awareness and delivered direct information to farmworkers at a time and place convenient and accessible to the community and population.
In addition to the tableros educativos, CHCCC also distributed COVID-19 prevention kits that included face masks, sanitizers, and other Personal Protective Equipment (PPE). CHCCC also provided contact information for relevant social services, COVID-19 prevention strategies, home isolation information, health and clinic locations, immigration resources, financial resources, and behavioral health crisis tips and helplines.

Tableros Educativos (Educational Boards)
Below are examples of the tableros educativos used by CHCCC. All posters were designed using software from the Adobe Creative Suite, specifically Adobe Illustrator which enabled CHCCC to adjust design settings to be printed clearly in a large or a regular format without distorting the images.

Tablero educativo: How to Use Masks
Promotores and community members engaging with the tableros educativos

Food share box

COVID-19 Prevention Kit
Results

The ability to build close relationships and meet with the community in safe spaces like their neighborhoods allowed CHCCC’s efforts to grow and reach more farmworker families in need. CHCCC maintains a list of families served and updates the list as new migrant families arrive in the area. CHCCC utilizes the Microsoft Access database management system to track contacts. This software has enabled the CHCCC team to quickly find and enroll participants, track key demographics, and report data based on zip codes.

By keeping a registration list, CHCCC measured its reach in the community. In 2020, when CHCCC's tableros educativos initiative began, outreach workers connected with 5,044 families and 17,031 individuals. In 2021, CHCCC connected with 3,456 families and 13,831 individuals served. As of January 2022, CHCCC has already served 1,193 families and over 5,278 individuals during 2022.

CHCCC leadership and outreach team remained closely engaged with county public health departments. The Santa Barbara County Public Health Department created the Latinx & Indigenous Migrant COVID-19 Response Task Force, in conjunction with the University of California Santa Barbara (UCSB), which met weekly during the peak of the pandemic to keep organizations and community leaders informed. This collaborative workspace enabled agencies to engage in dialogue with the Public Health Director and bring forth population-specific concerns. This working relationship allowed CHCCC the opportunity to update county officials on heavily impacted neighborhoods while also receiving updated COVID-19 case counts every ten days. Moreover, the group was able to collectively address systemic issues that posed barriers to care for isolated community members.

This created county-wide accountability across organizations and promoted equity in the distribution of state and local resources. As education and outreach continued, county public health officials reported a downward trend in COVID-19 case numbers.
Key Challenges and How to Address Them

Due to this practice being low-cost, community-specific, and easily replicable, CHCCC did not encounter many challenges with disseminating information and resources with the tableros educativos.

However, CHCCC did encounter vaccine hesitancy as many patients obtained information from social media or community conversations that did not seem to be centered on evidence-based research or facts. In response, CHCCC approached the issue at two levels: on an individual level, CHCCC bridged established patients to their primary care provider for personalized clinical information regarding the vaccine based on their unique health status. This connection was important, as the provider was viewed as a trusted messenger. At the community level, myths and facts surrounding the COVID-19 vaccine were addressed utilizing the tableros educativos as a means to mitigate misinformation and facilitate positive, productive, and culturally respectful conversations. In general, CHCCC was able to counter misinformation through pointed education addressing the myths and facts surrounding the vaccine.

Resources Needed and Expenses

The collaboration between CHCCC, the Promotoras Network of Santa Barbara County, and local government agencies helped alleviate some of the burden of resources spent on planning, designing, implementing, and scaling up the reach of the practice to be used by other community-serving entities.

Costs included training staff, staff time at events, and printing costs. CHCCC was able to secure grant funding to cover much of these expenses. Overall, the costs associated with the tableros educativos were very low, especially as the staff was already well acquainted with the subject material and the community.
Partnerships

- **Latinx & Indigenous Migrant COVID-19 Response Task Force:** A collaboration between the Santa Barbara County Public Health Department, University of California, Santa Barbara (UCSB), and community-based organizations working with Latinx and Indigenous migrant communities in Santa Barbara County by providing advocacy and resources for agencies working collectively at the grassroots level.

- **Iniciativa de Intérpretes Indígenas:** A collective of Indigenous Interpreters who advocated for the use of interpreters, inclusive spaces, and adequate information to be given in the language of Indigenous communities.

- **Health Linkages:** Promotoras Network of Santa Barbara County: The Santa Barbara County Promotoras Network partnered closely with CHCCC to expand its reach to a larger sector of the community as trusted messengers. The promotoras provided verbal and visual information in the language that the community understood by utilizing the tableros educativos.

- **Foodbank of Santa Barbara County:** Throughout the pandemic, the food bank team provided culturally accessible food paired with nutrition education utilizing the same model as utilized for general COVID-19 education. This partnership enabled CHCCC the ability to provide healthy food access, nutrition education, and COVID-19 prevention and education in one centralized setting.
Learn More

CHCCC Website: https://www.communityhealthcenters.org/

Contacts:
- Magdalena Sunshine Serrano MSW, LCSW, Behavioral Health Director
  - Email: mserrano@chccc.org
  - Phone: (805) 361-8074
- Noemi Velasquez, Behavioral Health Outreach Coordinator
  - Email: noemiv@chccc.org
  - Phone: (805) 458-4247
- Marcela Santiago-Cruz, Community Health Worker
  - Email: ms cruz@chccc.org
  - Phone: (820) 300-8121

Tools and Resources

- Microsoft Access database management system from Microsoft combines the relational Access Database with a graphical user interface and software-development tools. This software has enabled CHCCC to quickly find and enroll participants, track key demographics as well as report data based on equity zip codes.
- Adobe Creative Suite software, specifically Adobe Illustrator. This enabled CHCCC to adjust design settings to be printed clearly in a large or regular format without the images being distorted.

Pro tip:

Consistency is a crucial aspect of effective outreach. CHCCC built a system of weekly health education and healthy food access, while also giving community members opportunities to ask questions, build relationships with outreach workers, and seek out additional resources as needed. In addition to consistency, consider providing additional resources as part of outreach. The tableros educativos initiative brought health outreach and food assistance directly into the neighborhoods and communities most in need of support.

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Summer Migrant & Seasonal Farmworker Outreach Program:
Creating Access to Comprehensive Care and Social Services at Onsite Housing Facilities

Outreach Promising Practice
Virginia Garcia Memorial Health Center (Virginia Garcia) developed a summer migrant & seasonal farmworker outreach program to provide a comprehensive set of services to migrant farmworkers living in migrant housing facilities. During outreach, the team, consisting of medical and outreach workers, utilizes a mobile clinic to provide onsite care, as well as partnering with local Community-Based Organizations (CBOs) to include a scope of social services. Furthermore, Virginia Garcia regularly evaluates and adapts the program to the needs of the farmworkers served by soliciting input from staff and local partners.

Organization:
Virginia Garcia Memorial Health Center
Outreach location: Cornelius, Oregon

About:
In 1975, six-year-old Virginia Garcia and her farmworker parents traveled from their home in Mission, Texas, to California and Oregon to work in the fields. Along the way, Virginia cut her foot, and by the time they reached Oregon, it had become infected. Due to economic, language, and cultural barriers to health care, Virginia died from what should have been an easily treatable wound. Moved to action by Virginia’s unnecessary death, the community quickly rallied together to open the first Virginia Garcia Memorial Health Center in a three-car garage, determined to prevent similar tragedies from occurring.

The mission of Virginia Garcia remains the same today, born from this tragic event they remain dedicated to providing high quality, culturally appropriate health care to those who need it most, with an emphasis on migrant and seasonal farmworkers.
Forty seven years later, they have 18 clinics across two counties and have created a strong relationship with their community, which includes about 900 farmworkers, by emphasizing a patient-centered and equitable approach to health care delivery. Through collaboration with external partners and dedicated outreach staff, Virginia Garcia addresses the unique health needs of their farmworker patient population.

47 Years Meeting Needs
When migrant and seasonal farmworkers arrive in Oregon, they face many barriers to receiving the care they need. In addition to transportation barriers, there are a limited number of medical providers with appropriate language and cultural proficiency available. In response, Virginia Garcia takes comprehensive care to farmworkers and plant nursery workers right where they live and work. The outreach team, consisting of medical and outreach workers, uses a mobile clinic to go directly to farmworkers, overcoming barriers in accessing healthcare as well as building a lasting relationship with the providers at Virginia Garcia.

The farmworker community also has limited access to specialty medical care, health education, and social services. In response, Virginia Garcia partners with local Community-Based Organizations (CBOs) to expand the scope of services and resources they provide to farmworkers at each camp location. During outreach, the team organizes group and individual health education classes, mental health services, vision screenings, medication prescriptions from pharmacists, transportation, COVID-19 testing, vaccines, and other related education and resources.

Description of the Practice:
Every year from the end of May to August, the outreach team travels to three migrant camps and seven plant nurseries between the two counties to connect migrant workers to the available services offered through the program. Services include primary care physicals, group and individual health education classes, vision screenings, dental hygiene services, medication prescriptions from pharmacists, transportation, COVID-19 screenings, vaccines, and other related education and resources. Depending on the size of the camp, Virginia Garcia will make one or two visits to each site throughout the summer. Virginia Garcia utilizes a mobile clinic to bring the required medical equipment and educational materials to each location. Services are provided in Spanish to strengthen their outreach efforts. Programs are regularly evaluated and adapted to the needs of the farmworkers served by soliciting input from staff and local partners.
Key Strategies:

Formalizing Employer Collaboration
A key strategy of the outreach program at migrant camps and plant nurseries is establishing a trusted partnership with employers. To establish these partnerships, Virginia Garcia’s outreach coordinator schedules 1:1 meetings with farm and plant nursery owners hosting migrant workers to explain the program and develop a relationship. During these meetings, the outreach coordinator explains the purpose and intention of the summer outreach program, outlines the services they provide, and identifies the organizations that will be involved in the on-site visits.

After meeting with an employer, the outreach coordinator creates a preliminary calendar of planned visits based on the location, needs of migrant workers, and the size of each camp. The calendar is then sent out to migrant camp owners for them to provide any suggested updates to the schedule based on the needs of the migrant farmworkers they host. These close partnerships ensure that onsite visits to farmworkers run smoothly.

Regular communication with employers also encourages transparency and buy-in, which helps to foster stronger relationships and continued support for the outreach program. Typically, these partnerships are not contracted agreements but built from a history of trust and reliability between entities. During the COVID-19 pandemic, Virginia Garcia developed a formalized Memorandum of Understanding (MOU), or formal agreement, that outlined action plans between Virginia Garcia and the owners of the farms and plant nurseries to deliver vaccinations to migrant workers.

Coordinating with a Network of Farmworker-Serving Organizations
Once site visits have been scheduled, the team will share the itinerary of onsite visits with external organizations to explore opportunities to offer additional services to the workers. Services include vision screening, legal aid, food distribution, high school equivalent education programs, and a connection to social services available in the county. Virginia Garcia then creates flyers that are disseminated by the outreach team to alert them of the services offered during the onsite visit. The distribution of flyers also allows the outreach team to have conversations with farmworkers about the services they need. The flyers are also posted on the on-site housing units at the migrant camp and are shared via email to plant nurseries that participate in the program so that employers can spread information to the workers at their location. The outreach team is currently exploring ways of utilizing WhatsApp to send digital flyers to migrant workers as well.
Conducting a Collaborative Evaluation
Another key strategy to the success of this program is the inclusion of staff in regular program evaluation & quality improvement efforts. Virginia Garcia established a system of consistent communication and feedback between program staff and external partners to improve the operation of the outreach program. After their site visits, Virginia Garcia distributes surveys to their outreach workers and participating external partners to provide feedback. Before the pandemic, paper surveys were distributed to participating staff members and external partners. During the pandemic, Virginia Garcia utilized Google Forms to receive feedback. Staff and partners can voice their ideas and provide input on the quality of the services provided during outreach and any potential changes needed based on their experience onsite. Virginia Garcia created a committee that includes medical staff, camp coordinators, the information technology team, volunteers from the Virginia Garcia Memorial Foundation, pharmacists, and the outreach manager. They met weekly to address any issues while reviewing feedback from surveys.

Ultimately, the regular collection and consideration of feedback has enhanced workflows, helped define roles within the outreach teams, and improved the utilization of resources. Active input from staff and partners has also helped Virginia Garcia establish a stronger workforce and better collaboration between partners.
Results:

Over the summers of 2020, 2021, and 2022 Virginia Garcia made 59 visits to migrant housing and plant nurseries. During these visits, they contacted 3,655 agricultural workers (or family members) through virtual, telephonic, or in-person visits. During this time, they distributed 2,344 prevention and vaccination flyers at the worksites and vaccinated more than 900 farmworkers against COVID-19.

Moving forward, Virginia Garcia is looking to expand the outreach program to provide more services during the summer camp period and to continue their engagement with the community throughout the year. They will add a new mobile unit in 2023 to deploy during their summer outreach visits. They also plan to use the new unit to provide basic medical care, screening services, and health education at community events throughout the year. This expansion comes from an identified need to bring the comprehensive medical services provided during the summer program to the larger community.

Key Challenges and How to Address Them:

Continuity of Care

Before COVID-19, farmworkers who received medical services through the migrant camp outreach program would typically continue their care at one of Virginia Garcia’s clinic locations. However, the pandemic caused many to delay care and, most recently, staffing challenges in health care have disrupted the continuity of care for many patients.

To address this, the outreach team is planning to increase the frequency of visits and expand the roles of community health workers to provide follow-up care on site, rather than transporting every patient to the clinic. Migrant farmworker communities often have fewer resources and access to public transportation because they are working and living in rural areas, making it more difficult for them to travel to see providers in the area. More frequent visits address structural barriers, ensuring follow-up care and reducing the strain on resources for Virginia Garcia’s clinic sites.
Resources Needed and Expenses:

Staff time is a critical resource for this outreach program. Costs are largely related to staff time, as the outreach coordinator and others on the outreach team develop the program services, create materials, coordinate resources, and collaborate with employers and partners. Other costs for this program include the mobile clinics and materials to effectively provide medical services on-site, such as tent rentals.

The outreach team spends eight hours per visit to prepare all items (medications, education, supplies, etc.) and to support setting up and taking down the camp. Other support staff, like front-desk staff, providers and volunteers, spend around six hours at the camp per visit, and they also assist in setting up and taking down the camp. The clinic at each migrant camp or plant nursery location generally lasts around four hours per day.

The team that visits the migrant camps is composed of an array of medical staff, community health workers, medical students and volunteers. Staff, students, and volunteers rotate over the camp season.

Virginia Garcia outreach program staff includes the following:

- One full-time outreach coordinator
- Three (3) community health workers
- Part-time Outreach Nurse
- Part-time nurse practitioner
- Part-time physician’s assistant
- One full-time medical provider
- Full-time medical assistant
- Fourteen (14) medical students
- Fifteen (15) volunteers
Partnerships:

Virginia Garcia partners with several external agencies and organizations to provide services outside of the scope of their general practice.

Key partnerships for this outreach program include:

- **Pacific University School of Optometry & School of Dental Hygiene:** These departments offer vision and dental services to patients of the mobile clinic.

- **The Mexican Consulate in Portland, OR:** Supports migrant workers with immigration services and documentation resources.

- **Portland Community College HEP (High School Equivalent) Program:** Provides education for migrant and seasonal farmworkers through recruitment, high school equivalency (HSE) instruction, academic advising, and post-HSE attainment placement services.

- **Oregon Food Bank:** Provides food assistance to seasonal migrant agricultural workers at the mobile clinic.

- **University of Western State:** Provides chiropractic services to seasonal migrant agricultural workers at mobile clinics.

- **Oregon Law Center and Legal Aid:** Provides free legal aid and support regarding workers rights issues for seasonal migrant farmworkers.
Learn More:

Website: Virginia Garcia Outreach Programs

For more information or question, contact:
Alicia Stoll | Migrant Seasonal Farmworker Outreach Representative
Oregon Employment Department
Office: 971.673.0344
alicia.stoll@employ.oregon.gov

Tools and Resources:

- National Center for Farmworker Health (NCFH) Pop-Up Vaccine Clinic Checklist:
  This checklist is designed to provide health centers and other community-based organizations with the information they need to know “Before, During, and After” hosting a vaccination clinic. This tool is also helpful for organizations collaborating with agricultural employers and public health authorities serving farmworkers and their families in various settings.
  - The English copy is linked here
  - Spanish copy is linked here
- Research: Delivery of Mobile Clinic Services to Migrant and Seasonal Farmworkers: A Review of Practice Models for Community-Academic Partnerships
- Article: Migrant Clinician – Best Practices in Mobile Team Outreach

Pro Tip:
Consistency can help create a strong connection and presence in a community as well as with partners and employers. Becoming a trusted organization in the community requires showing up consistently and delivering on your stated mission.
The Evolution of Outreach to Meet the Needs of Farmworkers Along the U.S./Mexico Border

Outreach Promising Practice

Vista Community Clinic (VCC) designed adaptable outreach efforts to meet the needs and challenges faced by San Diego’s farmworker community through relationship building, asset mapping, and community engagement. VCC provides regular outreach visits to community and job sites to deliver health education (“Mini-Health Fairs”) and resource information (“pláticas”). The outreach team has built rapport with growers, farmworkers, and community members, which enabled them to adapt to the needs of farmworkers at the onset of the COVID-19 pandemic.

Organization:

- Name: Vista Community Clinic (VCC)
- Location: Southern California

About:

Since originally opening its doors in 1972, VCC has been operating for 50 years in the North San Diego area, more recently expanding to Riverside and Orange Counties. As a Federally Qualified Health Center, VCC provides medical, dental, behavioral health and specialty care services to approximately 70,000 patients annually. Through the Community Health Department, a wide range of programs and services are provided to the community including direct population outreach, youth development, HIV support, tobacco, alcohol, and drug prevention, mobile clinic services, migrant health education, and local food distribution. A primary mission of the clinic is serving communities that have been disproportionately impacted by social determinants of health. Given the clinic’s location near the United States border with Mexico, their migrant population experiences unique challenges compared to migrant communities in other regions. VCC’s migrant worker health programming provides access to culturally appropriate education and healthcare for farmworkers.
Unmet Need Addressed
For VCC and other farmworker-serving organizations, there are few centralized locations to reach the farmworker population, as they live scattered throughout various areas in the region. Farmworkers in the San Diego region are generally not as transient compared to other migrant populations, with over 60% of workers being permanent residents, and there is limited employer-provided housing for farmworkers in the area. Therefore, VCC had to initially identify ways to reach farmworkers that did not rely on a centralized location such as housing sites or labor camps.

VCC’s outreach utilized an assets mapping strategy to understand their community’s available resources and existing gaps. This asset mapping strategy has been informed by VCC’s team members that have over 20 years of experience in the community. Based on their asset mapping, VCC concentrated their outreach efforts on sites where jornaleros (seasonal farmworkers looking for work) gathered, and shared VCC resources and services. At these sites, farmworkers invited the VCC outreach team to contact site managers or employers. After this introduction, employers invited the VCC outreach team to host platicas (informal chats) over the farmworkers’ break or lunchtime.

From this process, the outreach team identified other locations. VCC’s approach to outreach has evolved further and is focused on saturating the community and workplace with resources, health education through pláticas and Mini Health Fairs, and services, such as care management, appointment booking navigation, free transportation, and food and diaper distribution.

Description of the Practice
VCC’s outreach efforts were designed to actively adapt and evolve to the needs and challenges faced by San Diego’s farmworker community. To actively meet these needs, VCC maintains a wide range of practices which include:

- Welcoming promotores/community leaders to the table
- Asset mapping
- Informational listening sessions
- Distributing health education flyers and other promotional materials at a variety of community sites
- Conducting door-to-door visits in neighborhoods
- Providing outreach services at job sites, such as platicas and Mini Health Fairs.
The goal of VCC’s outreach efforts is to constantly maintain a visible presence in the farmworker community by building relationships and partnerships, identifying needs through asset mapping, and strengthening outreach based on evaluation efforts and input from community leaders known as Poder Popular. Their outreach team focuses on topics that are relevant and beneficial to farmworkers’ health, which helped to garner buy-in from employers. VCC’s investment into outreach proved beneficial at the onset of the COVID-19 pandemic when VCC was able to leverage the relationships it built with employers to identify farmworker needs and provide personal protective equipment (PPE), COVID-19 testing, and vaccination clinics in their mobile unit. Furthermore, VCC’s longtime presence in the farmworker community set them up as trusted messengers, which helped with providing COVID-19 information and combating misinformation.

**Key Strategies**

**Asset Mapping**

Asset mapping was a critical, ongoing component of the development of integrated outreach services provided by VCC. Outlining the available resources and gathering input from long-standing community leaders helped to create a better understanding of existing gaps in services. This approach has also fostered partnerships with other community-based organizations. These partnerships align to meet the hierarchy of needs experienced by community members such as housing, employment, immigration, healthcare, and education. Ultimately, asset mapping has informed the evolution of VCC’s outreach efforts in neighborhoods and work sites and has enabled the development of much-needed resources and services.

**Pláticas**

After making connections with employers or site managers, VCC will often visit worksites during the lunch hour or break period to host pláticas or informal chats with farmworkers to inform them of available services and community-wide resources. This type of communication helps to cultivate relationships, encourages farmworker engagement, and ensures employers see the benefits provided by VCC.
The pláticas are an important step in VCC's ability to adapt services, as they encourage connection and transparency to gain buy-in from farmworkers, employers, and community members. Furthermore, the pláticas served as an introduction to VCC's services. As follow-up, and after relationships were established with employers, the outreach team was allowed to host larger events, such as “Mini Health Fairs.”

The popularity of the pláticas later evolved into “Mini Health Fairs,” which are focused health initiatives centering on topics such as skin cancer prevention and blood pressure and blood sugar screenings. These sessions are conducted at worksites and last roughly four hours. Both efforts of the pláticas and the “Mini Health Fairs” synthesize information into smaller, more digestible pieces, and focus on topics that are relevant and beneficial to farmworkers' health, which helped to garner buy-in from employers.

**Mini Health Fairs**

VCC's Mini Health Fairs began in 2017 after receiving funding for skin cancer prevention. As part of the initial effort, VCC partnered with dermatologists and conducted outreach at agricultural worksites. The term “Mini Health Fair” was coined by VCC, and is a focused health initiative conducted at worksites.

Worksites in the area are not the typical site for health fair events or outreach, and employers often resist hosting programs during the workday for a variety of reasons, including a reduction in work time. VCC understands that visiting a worksite may not be the preferable choice for farm managers. Thus, they build trust and a rapport with farmworkers through introductions and pláticas over break periods so they do not interrupt the work day. Additionally, each Mini Health Fair covers one specific topic and is developed to provide information clearly and concisely. This approach helps to cut down on time taken away from the workday.

VCC's Migrant Health team partners with University of California San Diego Border Health and Kaiser Permanente to host approximately five annual health fairs on agricultural sites. Leveraging relationship-building efforts from the pláticas, VCC is seen as a trusted messenger, sharing relevant and reliable information. As a result, farmworkers and many employers in the region are open to engaging with the Mini Health Fairs.
Results

VCC has seen positive outcomes from the evolution of their outreach services. Asset mapping has allowed for effective collaboration with other community-based organizations, and has ensured their services are provided appropriately to meet farmworkers’ needs. The pláticas and Mini Health Fairs allow their organization to effectively reach farmworkers and community members that are otherwise largely dispersed throughout the county.

Farmworkers in San Diego are primarily employed in avocado groves, strawberry fields, nurseries, and livestock production. The flexible, mobile format of the pláticas and Mini Health Fairs allows visits to these and other sites. Additionally, the scale of their outreach can range from 15 to 300 farmworkers present at each event. VCC’s recent acquisition of a mobile health unit has allowed their programming to expand access to services at community locations and job sites.

Key Challenges and How to Address Them

Promotion and Messaging

As part of their COVID-19 pandemic response, VCC regularly updated and distributed educational materials communicating that COVID-19 resources were to be provided at “no cost.” Early in vaccine distribution, VCC staff learned that some farmworkers and many employers were concerned when vaccination teams asked for insurance information. This was a learning opportunity for the VCC team regarding ways to communicate using messaging that were clear and consistent, and to assess beforehand when messaging can be confusing or seemingly contradictory. Now the outreach team is diligent in preparing and providing information and answering questions during outreach.
The VCC outreach team also regularly promotes available resources and services to the farmworker community. VCC found that assuming that people will access an existing service or available resource is not necessarily true. For example, community members may not be accustomed to receiving medical care in tents or mobile units. To encourage the use of these important services, outreach workers needed to dedicate time to explain and give space for the community to understand the setting and the benefits surrounding this new form of care delivery.

**Resources Needed and Expenses**

**Centralizing Coordination Efforts**

Collaboration can be an effective strategy to maximize resources. Although mutually beneficial, collaboration between different groups and organizations can present challenges due to different priorities, resources, and communication styles. Therefore, VCC also serves as the backbone organization of the Farmworker Care Coalition (FWCC), an organization representing the combined efforts of several local community-based organizations and institutions. As the backbone organization, VCC is responsible for planning, managing, and supporting the activities of the FWCC, and provides leadership, structure, and keeps the momentum going.

Approximately 20 staff members support the work of community events and the Mini Health Fairs. VCC may be present for onsite service delivery from 4 to 8 hours during these events.

VCC employs two, full-time migrant health educators. These health educators have been in the community for decades, and serve key roles in connecting with farmworkers in the area. At this time, the greatest expense is staff time and transportation to each site for Mini Health Fairs, platicas, and asset mapping.
Partnerships

The following partners help to promote VCC’s services as well as coordinate outreach and care delivery:

- Community leaders (lideres and promotores), referred to as Poder Popular
- University of California San Diego Border Health Project
- Kaiser Permanente
- Head Start program
- Farmworker Care Coalition
- National Council of Skin Cancer Prevention

Learn More

- Website: [https://www.vistacommunityclinic.org/](https://www.vistacommunityclinic.org/)
- Contact: Deysi Merino, Migrant Health Program Supervisor, Deysi.Merino@vcc.org

Tools and Resources

- Community Health Needs Assessment Toolkit

Pro tip:

Consider incorporating programming that is flexible and can be adapted to the needs of your community. This requires soliciting input from the communities served through efforts such as listening sessions and needs assessments. Additionally, providing available resources related to housing and citizenship concerns through community partners also helps to expand programming to the community. This flexibility and partnerships bring greater name recognition and trust to an organization.

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Late Night/Early Morning Outreach to Connect with the Farmworker Community Along the Yuma, Arizona U.S.-Mexico Border

Outreach Promising Practice
Campesinos Sin Fronteras (CSF), Inc. is a community-based organization that conducts outreach to farmworkers between the hours of 10 pm-6 am. This late-night/early-morning outreach approach recognizes that connecting to farmworkers is most effective when designed around their availability and schedules. This outreach practice has successfully engaged and informed farmworkers about health and social services and is now a standard CSF outreach practice to serve farmworkers in their Arizona/Mexico border community.

Organization:
- Campesinos Sin Fronteras (CSF)
- Location: Yuma County, AZ

About:
Established in 1999, Campesinos Sin Fronteras (CSF) is a 501(c)(3) nonprofit organization serving the binational farmworker community for more than 23 years between Yuma County, Arizona, and Mexico. CSF is dedicated to providing free educational services to migrant workers and their families as part of an effort to prevent illness while reducing health and social disparities in the community. They offer fifteen health education programs in English and Spanish, including Women’s Health and Wellness, Diabetes Education, Management and Control, Behavioral Health, Environmental Health, and Youth and Family Programs. Their programming serves approximately 40,000 individuals in the community each year. CSF outreach teams have worked with over 35 agricultural companies during the pandemic to provide their workforce with personal protective equipment (PPE) and educational resources regarding COVID-19 vaccines and other prevention strategies.
Unmet Need Addressed

Yuma County, Arizona, sits along the United States border with Mexico. In this region of the United States, thousands of farm workers from Mexico cross the border into the United States to work every day, often crossing between midnight and 1 am before the workday begins. Farmworkers often work seven days a week, with their workdays starting around dawn and lasting almost all day. Because of their work schedule, most farmworkers cannot access services offered during the standard 8 am-5 pm working hours. Learn more in this article about Arizona’s migrant worker population.

Since its inception, CSF found that meeting with and offering services to farmworkers after work was not an effective practice. Farmworkers are typically tired and prefer to rest after a long day rather than attend meetings or events. For this reason, CSF began hosting events and educational programming in the early morning, before the start of the work day.

Description of the Practice

The Outreach Promotores de Salud/Community Health Workers (CHWs) team at CSF is staffed by former farmworker men and women who know first-hand the schedules and conditions of farmworkers. Because of this personal knowledge, the outreach Promotores/CHWs are sensitive to the needs of the farmworker community. The Outreach Promotores/CHWs coordinate weekly late night/early morning outreach to effectively reach, educate and offer health services to farmworkers during Arizona’s peak agricultural season (October - March). In accordance with the “meet them where they are” concept. CSF outreach events are held throughout the community, in locations such as parks, local grocery stores, farmworkers’ pick-up sites, US/MEX border port of entry, well-traveled neighborhoods, and most transited sites by the farmworkers in the community.

CSF hires and trains farmworker men and women to become Promotores/CHWs committed to serving their community. Early or late schedules do not present a problem for the outreach Promotores/CHWs, as they have expressed their enthusiasm and desire for the opportunity to help and provide resources to former coworkers and peers. Many Promotores have been working with CSF since 1999 and have become Outreach Program Coordinators and Trainers for the new group of Promotores/CHWs. They supervise and coordinate working schedules for new employees.
At outreach events, a wide range of services and resources are made available to farmworkers, including:

- Blood sugar and blood pressure tests
- Vision screenings and services
- COVID-19 vaccines and testing
- Housing rehabilitation for individuals 50 years and older
- Immigration services
- Workers’ rights information
- Programs for youth and families

**Key Strategies**

**Planning and Preparing for Late Night/Early Morning Outreach**
Planning for the year’s events starts in August, well before the start of the season in October. Once the season begins in October, outreach events are hosted weekly until March. Planning outreach events involves close collaboration with multiple partners, including the Yuma County Farmworker Services Coalition (YCFSC), which includes: Representatives from the Yuma County Health Department, the City of San Luis, various CBOs, and agricultural employers, to provide a full range of education and services that were identified by the Promotores/CHWs as priority needs. CSF’s outreach Promotores/CHWs ensure all collaborators know the outreach schedule and what to expect at events.

All participating organizations are told to arrive 30 minutes before the start of the event to set up. Any giveaway items must be prepared in advance and may include face masks, hand sanitizer, informational pamphlets, or other materials. To overcome literacy challenges, CSF utilizes in-person communication outside the ongoing event to help ensure everyone is informed about the available resources. All services are offered in both English and Spanish.

**Organizing An Annual Community Health Fair: “El Dia del Campesino”**
Since 1995, “El Dia del Campesino” or “The Day of the Farmworker,” has been an annual Health and Information Fair implemented on the first Saturday of December. This free community event welcomes and recognizes farmworker families’ contributions to border communities. The event is coordinated in collaboration with the Yuma County Farmworkers Service Coalition (YCFSC), facilitated by CSF.
Similar to the regular outreach conducted by CSF, “El Dia del Campesino” is hosted during the late evening and early morning, before the farmworkers’ work day begins, and when temperatures are cooler. CSF staff and other community, state, and national organizations join efforts to educate, promote, and provide health education, health screenings, flu shots, social service resources, food, and entertainment to approximately 5,000 farmworkers.

CSF collaborates with the City of San Luis, Arizona, to host “El Dia del Campesino” on Main Street, a highly transited street by farmworkers entering through the US/Mexico Port of Entry in the early morning or living in San Luis, AZ. The street is closed for this annual event, with shop owners on the street notified in advance. Shop owners have previously opened their doors for the event and provided free coffee to the farmworkers in attendance.

Planning for “El Dia del Campesino” begins each year in January at the post-event evaluation meeting held by organizers. Starting in July, planning and organizing for the yearly event begins by outlining specific details and responsibilities for all partners and allows CSF five to six months to organize and form committees for the upcoming event. Therefore, the project planning starts in July and ends in early December. Between 40 to 60 organizations participate and help plan the annual event, including church groups, youth, and student volunteer groups. Approximately 200 volunteers are present during the late-night “El Dia del Campesino” event and spend time thanking and giving back to the farmworker community.

This annual event has been going strong in the community for over 27 years and is an essential tradition for the region's farmworker community. The annual event allows farmworkers to safely connect with organizations that may otherwise not offer services in the early mornings, and it provides community organizations an opportunity to get to know the farmworkers in their area.

*Information booths and giveaways at the “Dia del Campesinos” event*
Results

The late evening/early morning outreach and “El Dia del Campesino” have proven successful for CSF, as shown by their long history in the community and the roughly 3,000 – 5,000 attendees present at their larger outreach events. CSF’s outreach approach to farmworkers has resulted in reliable collaboration between many partners throughout the community. For partner organizations, late-night/early-morning events hosted by CSF have become opportunities to connect effectively to farmworkers and provide resources. It has been a trusted source of information and resources for farmworkers in the area. Many farmworkers approach the Promotores and or volunteers to thank them for organizing the event. Others report that the health services they receive at the Dia Del Campesino are the only source of health care they receive in the year.

After many years of collaboration among partners, CSF has been able to effectively distribute materials promoting the events and encouraging attendance. This has resulted in more members of the farmworker community being reached and served by CSF and partner organizations alike.

At the end of “El Dia del Campesinos,” CSF conducts an evaluation and planning meeting with committee members who provide input and feedback to improve the next year’s event. This evaluation allows CSF to improve programming each year. CSF staff time is needed to collect and interpret evaluation data and to facilitate planning meetings.

Key Challenges and How to Address Them

Confirm Participation

CSF has not encountered many challenges with hosting late evening/early morning events due to the longstanding history of these outreach efforts and the organization’s strong relationship with farmworkers. However, being that this annual event does not have a budget or grant to support it, it depends on the coalescing of collaborators who can sponsor the event. Besides the annual fundraising, other considerations include: Staff need to effectively facilitate and manage well-planned coordination among partners, find building space to gather clothing and other donations distributed during the event, organize all media activities, and register and confirm participation in advance so that all organizations can be featured on outreach and promotional materials. Reaching out to local farmers/growers to request funding support and/or to ensure that they can allow enough time for their workers to participate in the event and receive the health screenings or vaccinations that will be offered is also an essential part of planning.
Safety Measures
Safety is also key when hosting late evening/early morning outreach. As for “El Dia Del Campesino,” CSF and the logistics organizing committee work very closely with the City of San Luis, Parks and Recreation, and the City of San Luis Police Department, who ensure that volunteers are posted at the entrance of the events to ensure order by overseeing activities outside the event area and looking out for any potential safety concerns. While for the late evening/early morning outreach, CSF Lead Promotores/CHWs are in charge of organizing and preparing the outreach Promotores/CHWs on safety tips to reduce safety incidents while being in the community. During the COVID-19 vaccine initiatives, CSF coordinated with the local fire department, and EMT services in case attendees experienced an adverse reaction to the vaccine. Coordinating with volunteers and medical and emergency services helps CSF address any safety concerns that may arise during the late evening/early morning outreach events.

Resources Needed and Expenses
Much of the resources needed to coordinate and plan the late evening/early morning events are related to promotion and collaborations consisting of:

- Shared funding/resources
- Distributing lists of the services offered at each event
- COVID-19 vaccination events promotion
- Promoting the late evening/early morning events on CSF’s Radio Sin Fronteras and social media outlets, such as Facebook
- Briefing other organizations on the upcoming event(s)
- Volunteer recruitment
- Coordinating volunteers
- Soliciting donations within their organization and or community

The outreach Promotores/CHWs at CSF coordinate and plan with partner organizations major outreach events during the Arizona agricultural season. Most expenses are related to staff time spent planning, coordinating, and holding events, as all staff at CSF participate in the planning and collaboration of the late evening/early morning outreach. Staff involved in the success of these actions include CSF’s Executive Director (who is the FWSC Chair), Outreach Promotores/CHWs, Program Managers, and administrators.
Partnerships

The Yuma County Farmworkers Services Coalition consists of the following organizations. Together, the Coalition members collectively assist with “El Dia del Campesino” and CSF’s outreach efforts:

- The City of San Luis
- Arizona Western College Assistance Migrant Program
- City of San Luis Police Department
- City of San Luis Fire Department
- Arizona Interagency Farmworker Coalition, which also participates in the planning of “El Dia del Campesino” under the Yuma County Farmworkers Service Coalition
- Consulado de México in Yuma
- Arizona Complete Health
- Yuma County Public Health Services District (Yuma County Health Department)
- ARIZONA@WORK
- National Farmworker Jobs Program (NFJP)
- Migrant Education Program
- Sunset Community Health Center
- Community Legal Services
- Vocational Rehabilitation Services/DES
- Yuma Main Library
- CrossRoads Mission Catholic Community Services
- The City of San Luis Parks and Recreation
- University of Arizona
- Department of Economic Security
Learn More

- Visit the Campesinos Sin Fronteras website.
- For questions and more information, contact: Emma Torres, CSF Executive Director etorres@campesinossinfronteras.org

Tools and Resources

- Journal of the Medical Library Association - Creating information resources and trainings for farmworker-serving community health workers
- Health Outreach Partners: Outreach Reference Manual (Chapter 1: Understanding Farmworkers)
- East Carolina University - Education Materials for Farmworker Health: A Resource List

Pro tip:

Providing large-scale late evening/early morning outreach requires a high level of planning months in advance. If your organization is looking to implement outreach involving many partners, it is important to start collaborating with partner organizations and disseminating information to farmworkers ahead of the first outreach event. Keep in mind that local government entities may also be able to assist with the coordination and logistics of hosting outreach events in well-traveled areas.
Vive Hoy: A Popular Education Curriculum to Foster Emotional Health among Farmworker Communities

Outreach Promising Practice
Vive Hoy is a Spanish-language popular education curriculum that seeks to foster farmworker communities’ physical, emotional, and social well-being. Developed by a farmworker advocate and educator, the Vive Hoy curriculum uses interactive communication and reflection learning techniques to encourage conversations and meaningful exchanges around emotional health in a community space. The purpose of Vive Hoy is to empower farmworkers by recognizing the strengths within their community, and draws on these strengths to develop supportive programs that best serve the needs of the community.

Organization:
Name: Fernando Molina
Location: Chicago, Illinois

About:
Fernando Molina is the creator and facilitator of the Vive Hoy curriculum, an Emotional Health program using popular education to support vulnerable populations. Fernando was born and raised in Matehuala, San Luis Potosi, Mexico. He earned a degree in Social Work from the Marist University of San Luis Potosi between 1995 to 2000 and immigrated to the United States in 2000. He volunteered for youth groups, where he learned the methodology of popular education, a method that he still uses in his personal and community empowerment workshops.

In 2020, Fernando earned a Bachelor’s degree in Psychology from St Augustine College in Chicago. He currently works as an Outreach Supervisor at Community Health Partnership of Illinois, a Federally Qualified Health Center. The Vive Hoy program has been implemented for more than 5 years at the University of Illinois at Chicago with Latino parent leaders and other vulnerable or underserved groups such as survivors of domestic violence and farmworker communities.
Unmet Need Addressed

Farmworkers are a vulnerable population that face many daily challenges which take a toll on their physical and mental well-being. Yet, they often lack the space, resources, and opportunities to address their emotional health. Furthermore, there is rarely little time and space to reflect and create meaningful connections with other community members to discuss different aspects of their lives and find emotional support. As a result, this could limit their ability to recognize and accept the challenges they are facing and address these persistent issues.

The Vive Hoy curriculum creates a safe and comfortable space for farmworkers to come together to share experiences and create solutions that serve the needs of the group as a whole. Based on popular education, the exercises in the curriculum facilitate open discussion amongst the community members so that together they build empathy, encourage collective problem solving, and inspire change. By creating an informal atmosphere based on listening and sharing, groups can dive deeper and engage in more meaningful conversations about their challenges and experiences. Therefore, the learning space is centered around the participants. This participant-centered method helps build confidence amongst and between the individuals and encourages deeper engagement.

Description of the Practice

As outlined in the book “Pedagogy of the Oppressed” by Brazilian educator Paulo Freire, popular education is a technique for vulnerable or oppressed communities to approach education as an environment of respect and mutual learning opportunities for students and instructors alike. This approach humanizes the student and builds their power to change and influence their circumstances.

The Vive Hoy curriculum developed by Fernando Molina employs popular education methodologies and is adaptable to a variety of settings and groups. Vive Hoy means “live today,” and the curriculum promotes mindfulness toward one's emotions, body, and mind. Additionally, the curriculum encourages open and honest communication amongst participants.

The Vive Hoy curriculum and popular education methodologies are important tools for farmworker communities and outreach workers alike. Promoting mental and emotional well-being is critical for both those who receive and deliver care. Creating a space for farmworkers to voice challenges or emotions can bolster outreach workers’ connection to the community they are serving.
Additionally, popular education methodologies can be applied to many public health education initiatives and can engage learners through interactive or participatory activities. Some examples include round table discussions and role-playing exercises.

Vive Hoy meetings are centered around the participants, who are viewed as the “experts” of their own life experiences and their ideas are as valuable as the instructors. Participant input can be utilized to find community-based solutions to the challenges they are facing. This curriculum can also be used as a capacity-building opportunity for instructors and advocates in leadership positions to create meaningful communication between community-based organizations and the farmworker communities they serve.

**Key Strategies**

**Informal Meeting Structure**
The Vive Hoy curriculum emphasizes the importance of subverting traditional teacher/student relationships by creating an informal meeting structure that allows flexibility for participants to guide the direction of the discussion and highlight insights from unique perspectives. A popular education methodology is a participant-guided approach to education that requires a high level of input from all group members. In this structure, the flow of information stems from group members sharing their experiences with everyone getting a chance to learn and teach as part of the process. To create an atmosphere that encourages individuals to participate honestly and meaningfully, the structure and dynamic of the group must build confidence within individuals to open up about their experiences and share their perspectives.

The first step to building a safe and trusted learning environment is to begin sessions by simply asking individuals how they are doing at that moment, what is on their minds, or how they feel about the space they have created. Making participants feel comfortable and respected is essential to creating meaningful community dialogue.
The Vive Hoy curriculum is structured for a variety of settings, such as church groups, community spaces, classrooms, and worksites. An informal meeting structure is important for reaching farmworker communities. Sessions may be held in the field during breaks or lunchtime, at housing sites, or anywhere farm workers gather. Additionally, the curriculum applies to all communities. Some examples of groups that have utilized the Vive Hoy curriculum include survivors of domestic violence, farmworker communities, immigrant and refugee support groups, and Latino parent support networks.

Flexible Topics
Because every community faces unique and complex challenges based on specific historical contexts that define their experience, the Vive Hoy curriculum contains 10 general topics. These topics allow for flexibility so each session can be adjusted based on the learned experiences of the farmworkers present. The curriculum also allows for group activities to be based on relevant aspects of their daily lives that would allow them to formulate solutions that are pertinent to the issues they face in the real world.

The topics in the Vive Hoy Curriculum are as follows:

- Introduction: Creating a safe space
- Giving respect to be respected through dialogue
- Freely expressing my emotions and feelings
- Freeing myself from the past and enjoying the present through forgiveness
- Strengthening my body and my mind with good health habits
- Valuing gender equality and sexuality
- Acknowledging my strengths and areas for improvement
- Analyzing the resources of my community as protective factors and support network
- Creating my goals for good living: Vision exercise to develop a project of life
- Celebrating life: Graduation party
Engaging Group Activities

The Vive Hoy curriculum emphasizes the importance of creating an engaging atmosphere by organizing fun activities related to each session’s topic, encouraging teamwork, and facilitating communication among the participants. The curriculum includes role-playing scenarios, developing short speeches, or participating in team-building games. Each exercise requires active participation from the group members and leaves the opportunity for everyone to reflect on the topics that may arise during the exercise. This is key for farmworker communities, especially those who often work long hours and may not otherwise have the opportunity to engage in a traditional classroom environment. Incorporating games and active participation exercises encourages learning and reflection for all participants. Furthermore, engaging activities create the opportunity for group members to develop stronger connections and learn more from each other in a relaxed, pressure-free environment.

Results

Vive Hoy has received positive feedback from its participants. Feedback and reflection are built into every aspect of the curriculum, and are collected in the form of testimonials and participant reflections. An example of a testimonial received from a participant in the “Vive Hoy” curriculum is listed below:

“One of the main benefits of this particular program is the diversity in topics as well as the dynamic instruction through which group activities and games are implemented. It is a very interactive program based on the needs of its participants with an emphasis on sharing our personal ideas and thoughts. The theory behind the structure of Vive HOY, is one in which participants dive into their own experiences to better enrich their future. Self-reflection and self-acceptance are at the core of this program and these concepts allow participants to achieve a beautiful relationship of trust and friendship with each other.”

- David Quiroz, Parent Educator, Todd Early Childhood Center, West Aurora SD129

Pictured: an activity and group picture of Vive Hoy participants.
As part of the curriculum, a Self-Care Inventory is shared with participants to complete once at the start and again upon completion of the program. The Inventory is based on the topics covered in the curriculum and prompts participants to reflect on their physical, psychological, emotional, spiritual, and workplace or professional self-care. The Inventory is used to measure the impact of Vive Hoy on the self-care practices of the participants since the start of the program. An example of the “Self-Care Inventory” is featured below:

Rate the following areas in frequency:
5 = frequently
4 = occasionally
3 = rarely
2 = never
1 = it never occurred to me

<table>
<thead>
<tr>
<th>Emotional Self-Care</th>
<th>5</th>
<th>4</th>
<th>3</th>
<th>2</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allow for quality time with others whose company you enjoy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maintain contact with valued others</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Give self-affirmations and praise</td>
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<td></td>
</tr>
<tr>
<td>Love yourself</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reread favorite book or review favorite movies</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identify and engage in comforting activities, objects, people, relationships and places</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Allow for feeling expressions (laugh, cry, etc....)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
Key Challenges and How to Address Them

Training for Popular Education Facilitation
A significant challenge in facilitating the learning space is balancing a structured lesson plan and the flexibility required in popular education. Individuals trained in this methodology must have the patience to allow participants to dictate the flow of the session while adhering to the general topic chosen for that session.

Because encouragement may be needed to promote active participation at the beginning of sessions, facilitators need to be properly trained to create trusting and open learning environments. Active questioning is a critical component of facilitating popular education programs, including Vive Hoy. Facilitators must be prepared to ask participants open-ended questions that will get them talking about their experience (e.g., asking participants how they feel about a certain topic or interaction, and to explain why) and then find the right time within the discussion to ask follow-up questions that bring the discussion back to the topic planned for the session. This creates a comfortable environment for the participant to feel that their experiences are valid and deepens the discussion by providing the group an opportunity to see how their experience can be applied to specific topics or to any aspect of social change they are looking to make in their community.

Representative Leadership
Another challenge that comes with implementing the Vive Hoy curriculum is the lack of representation in leadership from vulnerable communities being supported through the program. Some organizations that support vulnerable communities, including farmworkers, may experience difficulty hiring staff with the same background or histories as the populations with whom they work. It can be difficult to establish meaningful dialogue if community members do not feel that external entities truly understand the conditions they face.
However, many social movements for vulnerable populations have been supported by leaders who were not originally part of those communities. To address this challenge, leaders must listen, practice and project empathy to the group by structuring the dialogue around the experiences of the communities they serve. Developing trust and respect is critical to facilitating meaningful communication within groups and encourages community members to be more open to the support systems offered through these sessions.

**Resources Needed and Expenses**

The Vive Hoy curriculum requires time on both the part of the facilitator and the participants, as well as space to be actively engaged in and present for all learning sessions. This space could be in a variety of settings to fit the needs of the group. The standard curriculum requires a total of 20 hours to complete, with 2-hour sessions held each week. Delivery cost of the Vive Hoy curriculum is $2,000. However, aside from the time commitment and cost of delivery, there are very few resources that would be required to implement the Vive Hoy curriculum.

Fernando Molina also provides “train the trainer” courses that focus on three aspects of Popular Education delivery: (1) how to structure popular education lessons, (2) how to implement popular education lessons, and (3) examples of popular education activities. This training includes all materials associated with the Vive Hoy curriculum and is priced at $4,000.
Partnerships

The Vive Hoy Curriculum has been used extensively with Latino parent groups, and provides communities with tools to best support their children and families. An example of the curriculum in action can be found at Academia de Padres, The Hispanic Center of Excellence.

Fernando Molina has also worked with and learned from international organizations implementing Popular Education as part of their programming. These include:

- **Educación Popular en Salud (EPES)**, an organization based in Santiago, Chile, that services vulnerable communities using participatory education strategies focused on health, economic mobility, gender, legal rights, and a respect for diversity and the environment.

- **Instituto Mexicano para el Desarrollo Comunitario (IMDEC)**, an organization based in Guadalajara, Jalisco, Mexico that promotes human rights and democracy through a popular education framework.

- **Latin American Association for the Training and Teaching of Psychology (ALFEPSI)**, an organization based in Mexico, whose mission promotes culturally and historically sensitive psychology practices with an eye towards Latin America. The goal of the organization is to advance psychology that improves the well-being, freedoms and development of individuals, families, communities, and institutions across Latin America.

- **Cátedra Libre Ignacio Martín-Baró**, a non-profit organization based in Colombia, focused on psychological support for victims of violence, mistreatment or abuse. The mission of the organization is to strengthen psychological and social resources in Colombia and in Latin America.
Tools and Resources

- Paulo Freire - Pedagogy of the Oppressed
- Teaching Democracy - Popular Education Tools
- Journal of Geography - Mapping as a Means of Farmworker Education and Empowerment

Pro tip:
When conducting meetings with farmworker communities, consider implementing a popular education approach. Interactive meetings that center the voices and experiences of a community can support the mental and emotional health of meeting attendees. This approach also amplifies the voices of the community served and builds strong relationships between farmworker-serving organizations and their communities.
Outreach Promising Practice
National Center for Farmworker Health (NCFH) lists the common components of outreach protocols that help ensure safe, efficient outreach to farmworkers. This compilation of outreach safety protocols is based on learnings from several farmworker-serving organizations and NCFH’s own experience conducting outreach with farmworkers.

Organizational Information:
Several organizations provided their own protocols for NCFH to evaluate and create shared outreach safety tips for this promising practice, including:

Pineros y Campesinos Unidos del Noroeste (PCUN)
Location: Woodburn, Oregon
Pineros y Campesinos Unidos del Noroeste (PCUN) is an Oregon-based union and empowerment group for farmworkers. Their mission is to support farmworkers and working Latinx families in Oregon by building community, increasing Latinx representation in elections, and policy advocacy on both the national and state levels.

Texas RioGrande Legal Aid (TRLA)
Location: Texas, Kentucky, Alabama, Mississippi, Louisiana, Arkansas, and Tennessee
Texas RioGrande Legal Aid (TRLA) is the nation’s second-largest legal aid provider and the largest in Texas. TRLA provides free civil legal services to residents in 68 Southwest Texas counties and represents Migrant and Seasonal farmworkers throughout the state and in six other southern states – Kentucky, Alabama, Mississippi, Louisiana, Arkansas, and Tennessee.
Community Health Partnership of Illinois (CHP)
Location: Aurora, Illinois

Community Health Partnership of Illinois (CHP) is a Federally Qualified Health Center (FQHC) providing high-quality, patient-centered, comprehensive primary care in a setting that is welcoming and responsive to the cultural, language, and health needs of the communities they serve. CHP empowers the uninsured, underserved, and Migrant and Seasonal Agricultural Workers (MSAW) to attain their best health.

National Center for Farmworker Health (NCFH)
Location: Buda, Texas

National Center for Farmworker Health (NCFH) is a private not-for-profit corporation dedicated to improving the health status of farmworker families. NCFH provides information services, training and technical assistance, and a variety of products to community and migrant health centers nationwide, as well as organizations, universities, researchers, and individuals involved with farmworker health.

Collectively, PCUN TRLA, CHP and NCFH engaged a total of 58,892 farmworkers throughout 2022-2023.

Description of Practice

Outreach staff all across the country visit farms, community sites, and housing sites to deliver up-to-date, accurate, and reliable resources and services to farmworkers. Providing these services is crucial to closing the gap in health disparities. However, reaching immigrant workers in rural areas can be difficult and sometimes dangerous. Outreach workers may encounter hostile employers or business owners, inclement weather, washed-out roadways, snakes, aggressive dogs, pesticide exposure, and other hazards. This profile highlights outreach safety strategies for farmworker-serving outreach staff, including some key challenges and how to address them. The strategies outlined below are written to be included directly in outreach manuals or shared among field staff.
Key Strategies

General Safety Guidelines

- The key rule for outreach is: If you are uncomfortable, leave.
  - Always trust your instincts. If you are in doubt or feel unsafe about a location or an individual, discuss these apprehensions with your outreach group or supervisor.

- Conduct outreach in pairs or groups.
  - Never go to a housing site or worksite alone. Designate one person not on the outreach trip to be the home-base staff whose role is to be on-call to support field staff. If you feel comfortable enough to visit a community site alone and cannot go with an outreach partner, share your live location via WhatsApp with your outreach team and the designated home-base staff when entering rural areas alone. Keep in mind that cell service may be spotty in rural areas. Make sure the names and addresses of the sites you visit are shared with your outreach team before heading out in case you do not have service while conducting outreach.

- Bring appropriate clothing and gear if visiting work or housing sites.
  Dress appropriately for outreach. It’s important to be both comfortable and approachable.
  - Always wear close-toed shoes on all site visits. It is important to have sturdy shoes for both mobility and protection from any potential hazards.
  - Pants and long-sleeved shirts are recommended for farm visits. Long clothing is important to protect the skin from potential hazards onsite and maintain professionalism. Dresses and shorts are acceptable if the climate is hot.
  - Hats are recommended, especially if the climate is sunny or hot.
  - Bring plenty of drinking water for your outreach group and extra to give to workers.
  - Pack a first aid kit for emergencies.
Housing Site Safety
Arriving at workers' homes can be intimidating if you do not have previous experience with conducting outreach. Common housing site hazards include getting lost, aggressive dogs, hostile employers or housing owners, and hazards that could cause you to slip or fall. Below are some tips for safe outreach at housing sites:

- Scope sites before your visits. Drive by the site to make sure it looks like the right location. Make sure that you can quickly enter and exit the site safely, and look for any apparent issues (i.e., gated and locked entrance, no trespassing signs, etc.).

- Do NOT drive down long easements (very long rural driveways) unless you or your partner know the location well, have visited recently, and know that it is safe.

- Do NOT enter workers' homes. Some exceptions can be made if the outreach team is comfortable doing so and you can do so in pairs. Make sure that no one in the home has COVID-19. Always wear a mask indoors.

- Other housing site safety tips:
  - Always stay within the eyesight of at least one outreach partner.
  - Do not enter sites where “No Trespassing” signs are posted.
  - You do not need the employer's permission to be at a housing site, but if the workers are uncomfortable with you being there, you should leave.
  - Park so you can leave quickly.
  - Reverse park, meaning to back into a parking space so that the front of your car is facing forward, or park facing the exit.
  - The driver should keep their keys handy in case you have to leave very quickly (i.e., on their belt loop).
  - Familiarize yourself and your team with local and state laws regarding outreach and visiting worker housing sites.
Worksite Safety
All housing site guidelines also apply to worksites, but some extra precautions are needed for worksites.

- Be aware of pesticide labels and signs.
- Do NOT enter a site if you see a sign saying that the field has been recently sprayed or if you see planes flying low overhead in the area.
- Be always aware of natural hazards, such as snakes, scorpions, poison ivy, etc.
- Do not enter the worksite if you have to open a gate.

“No Trespassing sign” outside of a melon farm in Mission, TX

Encountering Employers, Business Owners, or Crew Leaders
In many cases, farmworker-serving organizations have great relationships with employers where both parties actively work together to serve workers. Unfortunately, not all employers are as welcoming to visitors for different reasons. Outreach teams should respect private property and not enter if “no trespassing” signs are visible to avoid potentially difficult situations. If you encounter a hostile employer, do not tell them the workers invited you onto the property as this could cause the employer to retaliate against the workers.
In scenarios where outreach vehicles are blocked by employers or employers call the police for property trespassing, consider the following to de-escalate the situation and keep yourself and your team safe:

- Leave immediately if the individual is threatening or enacting verbal or physical violence. Call 911 if needed. Notify your supervisor as soon as it is safe to do so.

- If the individual is not threatening physical violence, stay calm and explain your purpose for being on the worksite. Emphasize that outreach is for health education, and you are not there to sell anything.

- Use your best judgment – if the employer is calming down, you can try to build a bridge and discuss resources for employers that your organization can offer. If the employer is still very upset, you can: 1) offer for them to contact your program supervisor or 2) offer to leave immediately.

- Be mindful of workers who may not wish to be interrupted while working.

- Our presence on the farm should never compromise the safety or work of the workers. DO NOT tell the employer that workers gave you permission to be there, even if they did. Farmworkers may be observing the interaction and may have a real fear of retaliation. Remember that the goal of the visit is to build trust-based relationships. It is important that outreach staff act with discretion and always in solidarity with the worker.

- It is very important to know the history between the organization and employers. Document outstanding incidents at both housing sites and work sites so other staff members in your organization are aware of prior incidents in case individuals plan to visit the same sites again. Consider making a list of these places and always share them with your team.

“When we come across an employer [who do not want outreach organizations on site], we never debate with them. We let them know that if they change their mind in allowing us to talk to workers, we are there to assist workers with their healthcare needs. It’s better to leave the doors open.”

-Fernando Molina, Outreach Coordinator, Community Health Outreach Partnership of Illinois
Outreach staff engage farmworkers outside a money transfer establishment in Immokalee, Florida.

- Do not enter sites that appear unsafe (e.g., apparent drug deals, physical fights, etc.). Consider parking your car facing a direction where you can leave quickly. Reverse park, meaning to back into a parking space so that the front of your car is facing forward, or park facing the exit.

- If you are in front of a small business, go inside, explain to staff what you are doing, and ask for permission to be there.

- If you and your team are conducting outreach at night, stay in a well-lit area and always within eyesight of each other.
Sexual Harassment

While assuming good intentions, gender dynamics and the power relationships that define them should not be ignored. Sexual harassment may not be a common occurrence during outreach; however, the outreach team must have a plan and discuss it with their staff in case a sexual harassment situation arises among community members towards outreach staff. Prioritize doing outreach in pairs and always keep tabs on your partner.

Everyone has their own comfort level, and all are legitimate. Teams and individuals should adapt the following recommendations to meet their personal and team needs.

• Verbal advances: If verbal advances occur, you have the right to calmly and firmly state to the community member that you wish for the conversations to remain professional and that you will not tolerate advances. You can ask your outreach partner to join you, or you can leave the situation.

• Physical advances: Physical touching should not be tolerated. Do not tolerate unwanted actions if a community member touches you inappropriately or tries to get you into a car or their house. Tell them their actions/behavior will not be accepted, leave the situation immediately, and stick close to your outreach partner or group. If they continue to make advances, all outreach members should leave the site immediately.

• Remote advances: If sexual harassment occurs over the phone (calls, texts, etc.), explain to the community member that these advances are not wanted but that you can communicate about professional topics. If the worker continues their advances discuss the situation with your supervisor. If the problem persists, you can block the community member from contacting you. If you do not feel comfortable sharing your personal number with community members and do not have a work number, set up a Google Voice number. This way, you can easily screen the calls you provide community members during outreach, if necessary, and they will not have access to your personal phone number.

• Any time you are uncomfortable, please discuss the situation with your supervisor.
Other Outreach Challenges

Outreach staff have identified and reported the following challenges:

- Outbreaks of infectious diseases, including COVID-19 and other diseases like chickenpox, occur in communities. With a growing and aging population of farmworkers, outreach staff must be extra conscientious about exposing workers to different types of infectious diseases. Outreach staff can share vaccine information and encourage workers to vaccinate themselves for additional protection. Frequent hand-washing and use of hand sanitizer can also help mitigate the risk of infection. Similarly, outreach staff should protect themselves by staying up-to-date with their vaccines before embarking on outreach.

- Inclement weather during outreach can result in plans changing. Being flexible if plans change is key. If housing locations are hard to reach due to muddy roads, wait to travel through county roads that may leave you stranded until conditions have improved. Instead, visit community sites or more accessible sites. If outreach advocates have phone numbers of workers, this may be a good time to call or text those who may be grocery shopping or doing laundry on a rainy day.

- Spotty or unreliable cell phone signal can be an issue in rural areas. Print out maps and directions to the housing location address to have a hard copy of where you are going. Locals can help direct the way if your GPS is no longer reliable.
Resources Needed and Expenses

Most of these tips can be implemented without cost, but some additional resources for consideration are described below:

- **COVID-19:** Make COVID-19 rapid tests available for staff. Encourage staff to take a rapid test periodically and when they are exposed to COVID-19.

- **Hotels for overnight stays:** If an outreach trip consists of multiple days away from home, it may be worth packing a bag and staying overnight, especially if you would have to return home on rural roads late at night. Choose a hotel based on location and proximity to outreach sites to save time. Depending on the location, a 4-5 star rated hotel can cost anywhere between $80-150 per night.

- **Rental car or reliable vehicle:** A rental car is recommended but unnecessary if advocates are willing and have reliable vehicles for mileage compensation. However, it may be in the organization’s best interest to rent a vehicle for staff, as outreach trips sometimes consist of traveling long distances. The average cost of an economical rental car is $98 per day.

- **Technology:** Technology is needed to do effective outreach. Advocates must have cell phones or iPads with Google maps or a GPS device to navigate from place to place. Research which carriers have the best coverage in your outreach service area. Outreach staff may use their personal cell phones with compensation. Download free messaging apps such as WhatsApp on your phone to share your location with coworkers and keep in touch with workers who travel internationally.
Partnerships
If you have the opportunity, contact other local groups who have relationships with farm workers. Consider innovative partnerships including food vendors selling food to workers, laundromats, or cash transfer business attendants. They may have information about best times to find and connect with farmworkers on any given day.

Faith-based leaders are great partners and trusted members of the community. Faith-based leaders may open their doors for your organization to leave flyers or speak to their congregation, which may include farmworkers.

Depending on the type of outreach and the type of services provided by your organization, engaging employers as part of the outreach strategy can facilitate access to farms and help establish future collaborations for health fairs and other on-farm events.

Learn More
Website: National Center for Farmworker Health

For more information or question, contact:
Yvette Salinas, Manager of National Outreach Services
National Center for Farmworker Health
ysalians@ncfh.org

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Pro Tip:
Charge cell phones and gas up! Keep your cell phone charged and enough gas in your vehicle, especially when traveling to unknown rural areas. Have a phone that is easy to access. Share your location with your outreach partner or home base during the outreach trip.

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Innovative Text Messaging Strategies to Reach Indigenous Communities

Outreach Promising Practice
The Guatemalan-Maya Center (GMC) sends messages in various languages through a mass texting platform to share emergency information, invitations to community events, and cultivates awareness amongst their predominantly Indigenous community members.

Organization name:
The Guatemalan-Maya Center (GMC)
Location and Service Area: Lake Worth Beach, FL and surrounding areas of Palm Beach County

About:
After fleeing the genocide and atrocities of the Guatemalan Civil War, many refugees settled in southern Florida and encountered discrimination in a community unprepared to meet their needs. Father Frank O’Loughlin founded GMC in 1992 in response to the lack of accessible health care for Indigenous Mayan women who faced linguistic and structural barriers in receiving pre- and postnatal care. Today, GMC serves individuals from 28 different countries and is an uplifting and empowering community space for many in Palm Beach County, Florida. The GMC not only provides essential services such as food distribution, legal services, health education, and youth programs to the refugee, migrant, Indigenous, and farmworker communities in their service area, but it is also a space where the community gathers for celebrations and holidays. During the pandemic, GMC relentlessly advocated for equitable vaccine access, hosted COVID-19 testing sites alongside the Palm Beach County Health Department, and educated their community members about COVID-19 and the vaccines.
Unmet Need Addressed

Due to the language and cultural barriers present for immigrants and refugees in the United States, it can be difficult to obtain up-to-date information during emergencies. Lake Worth, Florida has a rich linguistic diversity due to the refugee communities that have made it home. Considering 22 Mayan languages are spoken in Guatemala, and each language may have various language variants that are not mutually intelligible, there is a great need for developing new ways of communicating. When individuals have access to information in languages they can understand, they are able to make autonomous decisions about their health and safety. GMC’s mass texting program ensures the community-wide dissemination of events and emergency alerts in various languages to individuals who may speak very little to no English and/or Spanish.

Description of the Practice

The GMC is a first responder to the needs of the migrant and refugee communities in Lake Worth, Florida, and the surrounding area. The GMC collects contact information upon client intake. The intake process happens during a community member’s first time visiting the center to receive any form of assistance, such as food donations or legal assistance. To make the most efficient use of the contact information they gather, the GMC incorporated the use of SimpleTexting at the beginning of the COVID-19 pandemic to disperse critical information to the community.

Key Strategies

SimpleTexting Platform

SimpleTexting is a mass texting program typically used for marketing campaigns. For GMC, it is a tool to quickly and efficiently educate and connect with their community. Before the pandemic, GMC staff relied on messaging community members via WhatsApp groups. However, this method proved to be less efficient; SimpleTexting is more direct and private since the communication is 1 to 1. Unlike WhatsApp or other messaging platforms, message recipients are not required to download an application to receive messages sent through SimpleTexting.
Charity Tracker Database

GMC uses a database called Charity Tracker to store their member’s demographic and contact information and document their interactions with individual community members in a systemized manner. Individual contact information can be extracted from Charity Tracker for specific initiatives or programming that the organization is hosting. For example, if someone indicated during their intake that they were a parent or caretaker of a child between the ages of 2-4 years, the GMC can extract a group of contacts who are caretakers and use SimpleText to invite them to their literacy and early education programming. In GMC’s efforts to vaccinate community members, they were also able to track who had participated in vaccination and testing events.

Google Voice

Each message sent also includes staff members’ Google Voice phone numbers which community members can contact directly. If community members have follow-up questions or concerns, they can contact GMC staff with the certainty of a familiar voice responding in their language. The use of a Google Voice number permits staff members to establish a professional boundary by not sharing their personal cell phone numbers nor needing to have an additional cell phone for work purposes. Complimenting the use of SimpleText with GoogleVoice calls can also reduce the cost by decreasing the number of 1:1 text messages sent through SimpleText.

Linking Audio Messages to YouTube

To make their SimpleTexting messaging accessible for individuals who do not speak or read English or Spanish, links to audio messages uploaded to YouTube are included in the texts that GMC sends through SimpleTexting. The audio messages are recorded in English, Spanish, Q’anjob’al, Mam, Popti’, Haitian Creole, Portuguese, and Urdu by GMC staff members. Because certain ideas or words in English and Spanish do not exist in many Mesoamerican Indigenous languages, the interpreters relay the original messages in a way that can be understood by community members, even if that means describing words or concepts in a different way.
Different cases in which SimpleTexting has been used:

**Specialty Care**
GMC partnered with the University of Miami to host a dermatology clinic to conduct skin screenings for people who work outdoors. Within two hours of GMC inviting community members to the clinic through SimpleTexting, the 40 appointment slots were filled. Since many members of the GMC community do not have health insurance and much less access to specialty care, the announcement of the clinic allowed people to quickly and easily gain access to needed medical care.

Pictured: Dermatologist from the University of Miami conducting a skin screening.

**Weather Emergencies**
Because newscasts and weather reports are primarily in English or Spanish, GMC has emergency weather event outreach protocols to deliver information to community members. During hurricane season and weather emergencies, GMC SimpleText messages include emergency preparedness information about resources and how to protect their homes during inclement weather in multiple languages.
COVID-19 Rapid Response

Messages were sent out to the GMC community to announce COVID-19 testing clinics. The Florida Health Department allotted 500 vaccination slots for GMC to vaccinate its members after a community event. Community members were invited to the event through the Simply text platform. They were encouraged to wear traditional Mayan clothes (trajes and cortes) to demonstrate that Indigenous community members were willing to be vaccinated.
Key Challenges and How to Address

Gaining Trust
Over the years, GMC has garnered the trust of their community and they have developed their reputation as a reliable resource hub. While other organizations and service providers have faced challenges in having people attend their community events, the GMC has found ways to effectively reach their members. A crucial element to ensuring that community members attend events is trust; the messaging or information regarding events or emergency situations needs to come from people who are trusted and have demonstrated care and support for the community. In GMC's case, staff members who have conducted the intakes or assisted individuals in a myriad of ways are the trusted responders.

Interpretation Services
For many individuals whose first languages are not English or Spanish, language barriers are an obstacle for receiving and obtaining community information or understanding health education materials. Event invitations and information shared with community members must be shared in a language in which people feel the most comfortable expressing themselves. GMC is aware of the most prevalent Mesoamerican languages in their area and have interpreters and translators for their messages. The following organizations also provide interpretation into different Indigenous languages from Mexico and Guatemala and can offer guidance on how to address language barriers:

- **CIELO's Center for Indigenous Languages and Power (CiLP).**
  - To request a Mesoamerican language interpreter, contact Luis López Reséndiz (luisr@mycielo.org) and Aurora Pedro (aurorap@mycielo.org).
- **MICOP Interpreter Services**
  - Request a Mesoamerican Language Interpreter [here](#).
- **Red de Pueblos Transnacionales - Colibrí Interpreters Collective**
  - Interpreters offered for Mixteco, Nahuatl, Me’phaa- Tlapanec, Totonaco, Triqui, Mixe, Garifuna, Kichwa, and K’iche.
- **International Mayan League**
  - A Mayan Language Interpreter can be requested [here](#).
- **Language Access Florida.**
  - To request a Mesoamerican Language Interpreter, contact Dr. Laura Gonzales at [languageaccessflorida@gmail.com](mailto:languageaccessflorida@gmail.com)
Resources Needed and Expenses

While the use of SimpleTexting is an incredibly efficient way of reaching a large number of people, it is an expensive platform for a small organization like GMC. Currently, it costs around $10,000 annually, but the annual price varies depending on the frequency of use. Sending a SimpleText to all of the subscribed members currently costs $100 per message sent. If a community member responds directly to a SimpleText, the organization has to pay a small fee for each text they receive. Another thing to consider is that as the number of subscribers grows, the cost also increases. To offset costs, it is important to consider complimenting the use of SimpleTexting with the use of a program like GoogleVoice. Additionally, collaborating with other organizations who are interested in sending messages to the same community may offset some of the expenses of the program through cost sharing.

It is important to have a designated team to coordinate messaging, entering new contact information into contact databases, and SimpleText platform management and payment. Team members must also coordinate with interpreters or translators to interpret messages into the community’s most prevalent languages.

Partnerships

- **City of Lake Worth Beach** officials are very involved with the GMC in order to provide accessible services for the community and bridge gaps of services in the city. GMC advocates for the local government to vote out policies or ordinances that negatively affect the Lake Worth community and we are in constant communication to help them understand why an ordinance might not be effective in the community.

- **Palm Beach County Food Bank** is GMC’s main source of food for their Food Pantry and provides tons of food weekly.

- **Palm Beach County Fire Department** is instrumental in assisting GMC with notifying the community if they need to evacuate during a natural disaster.
• **Palm Beach School District** facilitates communication between GMC and students and their families to ensure that Indigenous community members are included in the District’s decision making process. GMC serves on multiple school district committees that vote on decisions that directly affect the GMC community.

• **Florida Health Department of Palm Beach** Dr. Alina Alonso was instrumental in helping GMC be the first site in the area to have a vaccination event for undocumented people and other individuals who were unable to provide two proofs of address prior to that rule being lifted. The Palm Beach Health Department helped GMC become an evening vaccination site and provided the vaccines and nurses.

• **University of Miami’s** medical students work yearly with GMC to provide health education to the community and host free clinics for farmworkers and day laborers.

• **General Consulate of Guatemala in Miami and the Guatemalan Consulate in Lake Worth:** The General Consulate in Miami was instrumental in establishing a Guatemalan Consulate in Lake Worth Beach in 2017 after GMC advocated that there was a great need for a consular office in the community. GMC works with the Consulate to better assist people in obtaining their documents as well as hosting consular ID events to ensure community members have a valid ID.

• **General Consulate of Mexico in Miami** uses GMC resources to assist Indigenous community members and they prioritize referrals made by the GMC to help accommodate day laborers to avoid losing a day of work traveling to Miami.
Results

GMC has made a myriad of new partnerships because of the variety of COVID-19 relief efforts that have been coordinated since the beginning of the pandemic. Joint outreach efforts complimented with the use of SimpleTexting has led to higher turnouts for events. The organization’s use of the SimpleTexting program has encouraged the participation and engagement of community members in meetings and events. Through the GMC’s outreach efforts, 5,000 community members are subscribed to the organization’s SimpleTexting program.

Learn More

- Guatemalan-Maya Center’s website
- Contact: Mariana Blanco mblanco@guatemalanmaya.org, Assistant Executive Director, Guatemalan Maya Center
- SimpleTexting

Pro Tip:

Consider building an accessible app or online program into your organization’s outreach efforts. While some forms of technology may be harder to use or access, other programs like WhatsApp or SimpleTexting are widely used and accessible for many different communities.

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