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Migrant Farm Workers Flu Clinic

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MIGRANT FARM WORKERS FLU CLINIC

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Family Medicine 2020

Benjamin Clements M.D. and Naomi Wolcott-MacCausland

PROBLEM IDENTIFICATION AND NEED

- ~1,000 – 2,000 migrants employed by dairy farms in Vermont are undocumented
 - Ineligible for healthcare insurance
- Minority of migrants are on H2A Visas
- Migrant farm worker population: Jamaican and Latino
- Latino migrants on dairy farms in Northern Vermont near Canadian border identified by Bridges to Health with most significant healthcare accessibility barriers
 - All earnings sent home to support family in home countries
 - Seek healthcare only when necessary – little preventative care
- Greatest barriers to care (*Baker et al.*):
 - Fear of immigration law enforcement
 - Language barrier
 - Lack of transportation
 - Cost of care
- Large need for preventative care



COST CONSIDERATIONS



- The Open-Door Clinic - free clinic serving migrant Latino farm workers without health insurance reported a total budget of \$390,062 in 2019
- Vermont's migrant farm workers support a \$2.2 billion per year dairy economy
- Majority are Latino workers who if deported would cause significant loss to Vermont's economy

COMMUNITY PERSPECTIVE AND SUPPORT

- Naomi Wolcott-MacCausland, M.S
 - Migrant Health Coordinator for UVM Extensions Bridges to Health
 - Development for Open Door Clinic stemmed from high volume of Spanish-speaking migrants in Addison County
 - These farmworkers are geographically scattered in all other areas of Vermont
 - Latino migrant farm workers mostly undocumented -> ineligible for health insurance in US -> reliance on Open Health Clinic's services
 - Do not use preventative services and mostly seek healthcare only for major medical issues
 - Naomi developed a model for migrant medical care access in the past decade through Bridges to Health's collaboration with the Open-Door Clinic
 - Clinic has served an increasing number of workers >300 in 2019
 - Aiming to prioritize 100 dairy farms in Northern Vermont with 300-350 total workers currently
 - Naomi's role is to collaborate with Outreach RN who is a native Spanish speaker and communicate with farm owners to coordinate flu clinics



COMMUNITY PERSPECTIVE AND SUPPORT CONT.

- Benjamin Clements, M.D.
 - Family Medicine Physician at UVMHC Colchester Family Practice
 - Goal: sustainable flu clinic for Latino migrant farm workers in Northern Vermont
 - Issue: no consistent faculty member to lead
 - Secured Vermont Medical Society grant
 - Served as medical coordinator for Latino migrant farm workers flu clinic this season
 - Logistics of satellite flu clinic initial roadblock – Vermont State Registry, informational sheets for flu vaccine in Spanish and English, navigate COVID precautions, supplies needed, emergency plan, protocol to transport vaccines



INTERVENTION AND METHODOLOGY

- Latino Migrant Farmers Flu Clinic team: Dr. Clements, Naomi Wolcott-MacCausland, 2 medical students, and Nelly (a native Spanish-speaking RN serving as Outreach Coordinator for Open Door Clinic)
- Naomi served to coordinate visits
- Medical students served to ensure proper forms printed, filled, and given to farm workers
- Medical students and Nelly vaccinated supervised by Dr. Clements
- All clinic supplies provided for and transported by the Colchester Family Medicine team and Open Door Clinic using protocol provided by Vermont Department of Health
- Team traveled farm and farm (4 farms per clinic day)
- Set-up flu clinic just outside farms and inside homes of workers

RESULTS

1

Number of farms in Northern Vermont visited: 12

2

Number of Latino Migrant Dairy Farmers vaccinated: 48

3

Number of flu vaccines initially: 60

4

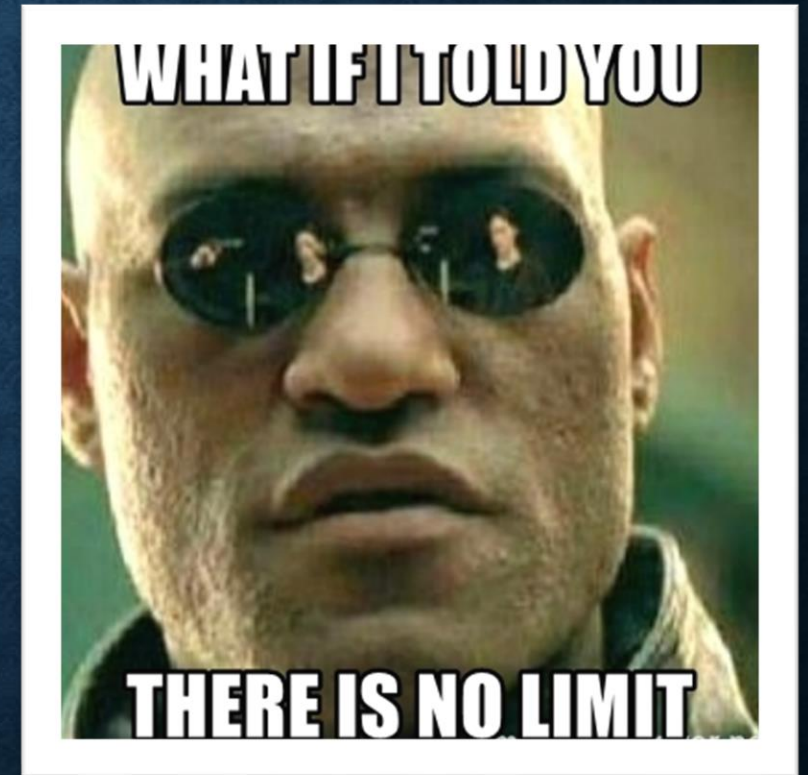
Number of flu vaccines left: 112
(12 left from initial with 100 more ordered later)

5

Number of days of satellite flu clinic: 4

EFFECTIVENESS AND LIMITATIONS

- Access effectiveness by comparison of number of flu vaccines provided overall in 2020-2021 flu season to 5-year average flu vaccinations prior to establishment of flu clinic
 - How many more vaccinations with flu clinic?
 - Is the difference clinically significant?
- Limitations
 - Resources (personnel and supplies) to provide other preventative services such as diabetes and hypertension screenings
 - Unable to provide follow-up care
 - Severe weather limited ability to set up satellite clinic outside
 - Difficult as weather becomes colder with COVID restrictions
 - 100% reliance on grant funding and volunteers – potentially variability year-to-year



RECOMMENDATIONS FOR FUTURE



- Recruit medical students rotating in Family Medicine clerkship through Colchester Family Practice for flu clinic as part of public health project requirement for sustainable personnel/volunteers
- Aim to assemble a team with all members proficient in Spanish
- Secure vehicle dedicated to migrant farm workers flu clinic to store supplies and transport personnel
- Recruit more RNs, LPNs, MAs, other medical personnel to expand primary care services of satellite clinics
- Partner with UVMHC for resources and supplies, UVM Nursing Department for volunteers, and Schweitzer Fellowship for volunteers

RESOURCES

- Baker, Daniel, and David Chappelle. "Health Status and Needs of Latino Dairy Farmworkers in Vermont." *Journal of Agromedicine*, vol. 17, no. 3, 2012, pp. 277–287., doi:10.1080/1059924x.2012.686384.
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- Sarah Asch Oct 13 2019October 14, 2019, et al. "Open Door Clinic Helps Meet Health Care Needs of Migrant Farmworkers." *VTDigger*, 14 Oct. 2019, vtdigger.org/2019/10/13/open-door-clinic-helps-meet-health-care-needs-of-migrant-farmworkers/.
- Terry J. Allen Apr 9 2017April 10, 2017, et al. "Undocumented on the Farm: Inside the Life of a Vermont Migrant Dairy Worker." *VTDigger*, 10 Apr. 2017, vtdigger.org/2017/04/09/undocumented-on-the-farm-inside-the-life-of-a-vermont-migrant-dairy-worker/.