



BJHCHS, INC.
Migrant /Seasonal Agricultural Worker Health Program
National Award Winning(NACH)Program
2018 Migrant Health Center



2019 East Coast Migrant Stream Forum
October 11, 2019

Strategies to Educate Agricultural Workers about Diabetes and Promote Healthy Lifestyles



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Health Services Program

&

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Farmworker Justice



OUR OBJECTIVES ARE:

The participants will be able to:

- ▶ Understand (identify) the barriers to diabetes testing, treatment, and management for agricultural worker families.
- ▶ Use linguistically and culturally appropriate educational materials to improve health outcomes for both diabetic and non- diabetic agricultural worker populations.
- ▶ Identify partnership opportunities with Migrant Head Start and other community organizations.

Agenda

- ▶ Introductions
- ▶ Overview of services available at BJHCHS, Inc.
- ▶ Diabetes in agricultural worker communities
 - ▶ Barriers and Strategies
- ▶ Partnerships
 - ▶ FJ-BJHCHS-ECMHSP Learning Collaborative to promote diabetes education and testing among agricultural worker families
 - ▶ FJ-NMSHSCO Juntos Nos Movemos
- ▶ Resources
- ▶ Conclusion

Farmworker Justice

Farmworker Justice is a national nonprofit organization that seeks to empower farmworkers and their families to improve their living and working conditions, immigration status, occupational safety, health, and access to justice.



USE OF CELL
PHONES
PROHIBITED IN
THIS BUILDING

VISION

NOTICE TO PATIENTS

NOTICE TO PATIENTS

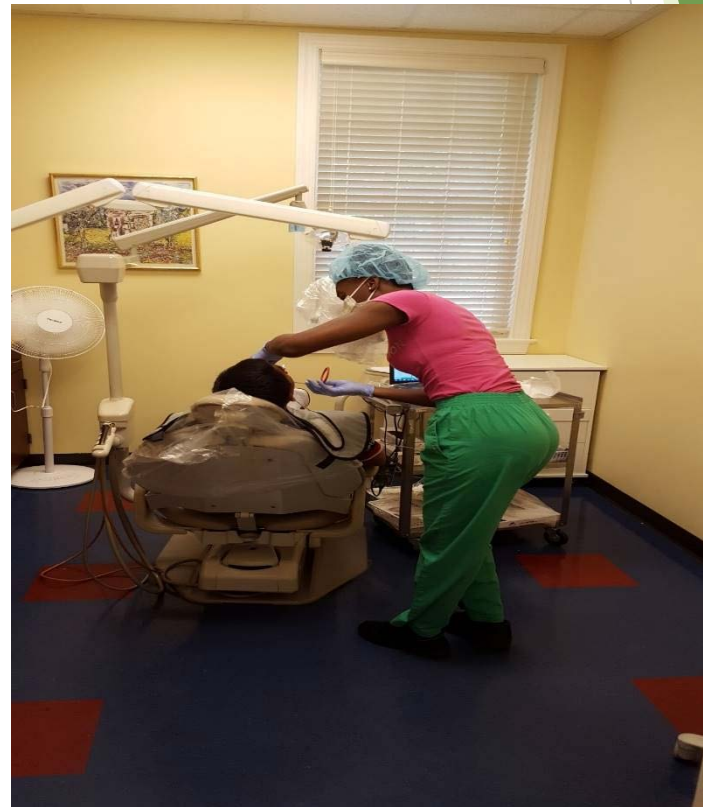


BEAUFORT JASPER **HAMPTON**
COMPREHENSIVE HEALTH SERVICES, INC.
MIGRANT SERVICES

FOOD
DRIVE



OVERVIEW OF OUR PROGRAM AND SERVICES





Beaufort Jasper Hampton

Comprehensive Health Services,INC.

MISSION STATEMENT

Our mission is to provide quality, affordable, accessible and comprehensive health care services to the South Carolina Low country Community.

■ **Leroy E. Brown Medical Center, St. Helena Island, SC**





BJHCHS, INC.

Migrant Seasonal Agricultural Worker Health Program

(We are federally funded by HRSA(303g))

Program Objectives



- ▶ To provide culturally , sensitively and linguistically competent information and health education to agriculture workers.
- ▶ To assess needs , evaluate data and refer farmworkers patients to the clinic or to other care.
- ▶ To collaborate and coordinate with the community and other agencies that work with agriculture workers, such as, ECMHS, MIGRANT EDUCATION PROG./YMCA , MCN , PASOS, etc.
- ▶ To improve the quality of life of our farmworkers.





Without Agriculture Worker Health Centers many of our workers would experience health problems that go unchecked and untreated.



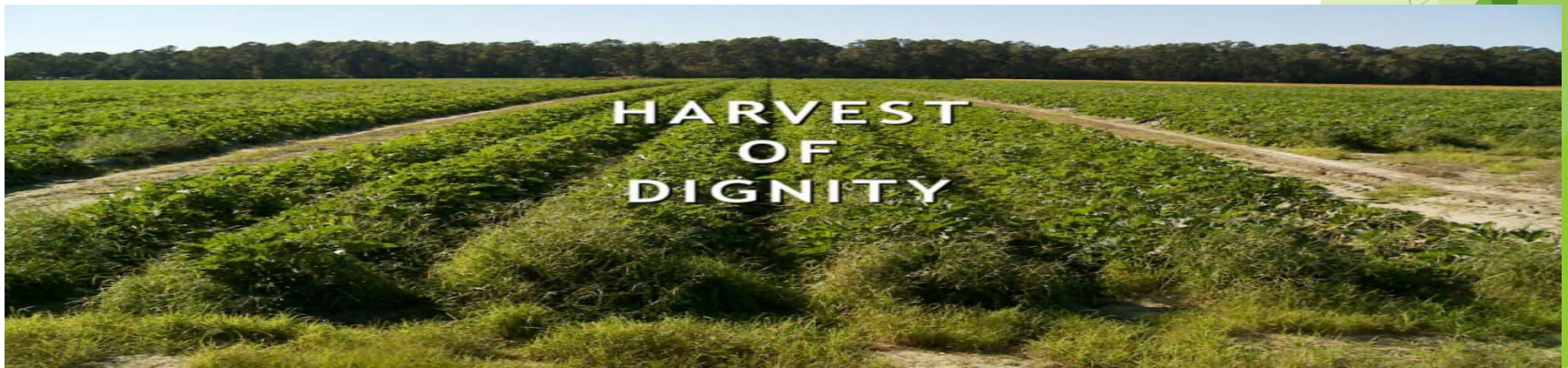
FACT

It's official! Health Centers served **996,232** Agricultural workers & their families in 2018, an increase of **22,981**! Let's continue to work together to keep this momentum going and ensure #AgWorkerAccess to quality health care!



Prevalence, strategies and challenges

- Do the “ **public relations**”. The team locates and explains to agriculture workers our services. We give out information: brochures, gather all the possible contact information they may have, such as , their crew leader’s name, exchange of telephone numbers, etc.
- Establish communication and exchange of cultural characteristics.
- We work hard earning their trust !



We assess their needs: medical, dental and social services.



Night Clinics Program

Our program offers night clinics from June 1st until July 15th. This night clinics are held during the tomato and watermelon picking season. The clinic opens at 6:00PM, Monday through Thursday, and on Saturday mornings. The scope of services is based on individual and farmer assessments carried out by our staff of qualified and culturally sensitive professionals.

Medical services-OB Gyn , PEDS , adult medicine

Dental services-Dr. Washington, Dental Director and the services of the RMCM, Ms. K. Washington and Glasscho CM, Ms. Fallon Gordon

Nutrition/Diabetic Education

Pharmacy

WIC

Lab and X-ray services; HIV testing

Coordination with other agencies. ECRHS, Migrant Clinician Network (MCN)

Enrollment ; summer school programs, etc.



Program Services- cont.

- ▶ Access to specialty providers
- ▶ Interpreters
- ▶ Transportation



The outreach team coordinates health education and visits to the labor camps.

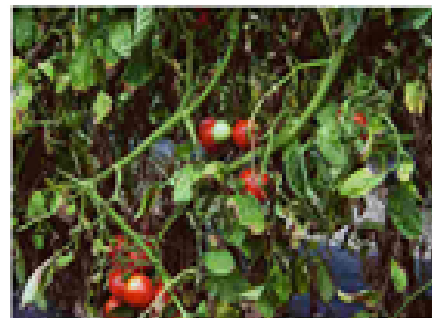
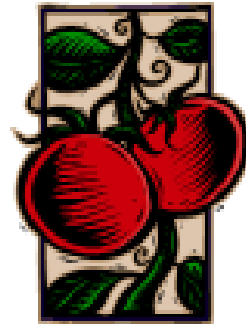


OUTREACH STRATEGY # 2: we assess their needs: medical, dental and/ or social services.

Life Styles:

DIET: is rich in flour and fried food(use lard/fat), making diabetes/ hypertension of high incidence among farm worker patients

- 1.Usually,the women cook their traditional foods(home made tortillas, tamales, mole, soups and stews). Use lard, lots of salt and hot peppers. (spicy hot)
- 2.The food is spicy: for example, jalapeño peppers, hot "pimientos"(peppers) , etc.

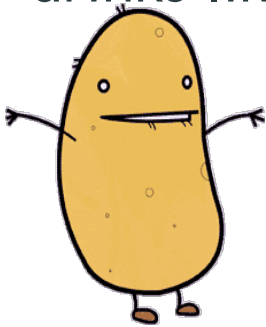


Life Style: diet habits



Flavored drinks("jugos"=water with artificial fruit flavor, energy drinks like Bull and Monster and beer.

We take them WATER,H2O !



The diet is rich in carbohydrate.
(examples: tortillas, rice, potatoes
and fried food.(the use of lard)



Health education and prevention classes are offered at the camps and clinics, with the expertise of a fantastic, knowledgeable and professional team of Registered /Licensed Dietitians and Certified Diabetes Educators.



Other barriers:

Living and working conditions aggravate the problem of being a pre-diabetic /diabetic:

- Workers may not be able to take medications at work.
- Can appropriately store their medication.
- Are not able to prepare adequate meals.
- Lower incomes affect the family' access to healthy food.
- Are not able to afford medications and do not know how to use the glucometer to check their sugars.
- Feel "overwhelmed" and stop their treatment.
- Do not have sick leave. They do not go to work , do not get paid. They are threatened by the fear of losing their job, if they miss work more than 3 days.
- The mobility from place to place makes it difficult for the continuity of care. (MCN-Migrant Clinicians Network to the rescue!!!)

Nutrition/Diabetes Education

Ms. Susan Mills Tucker, RD, LD, CDE

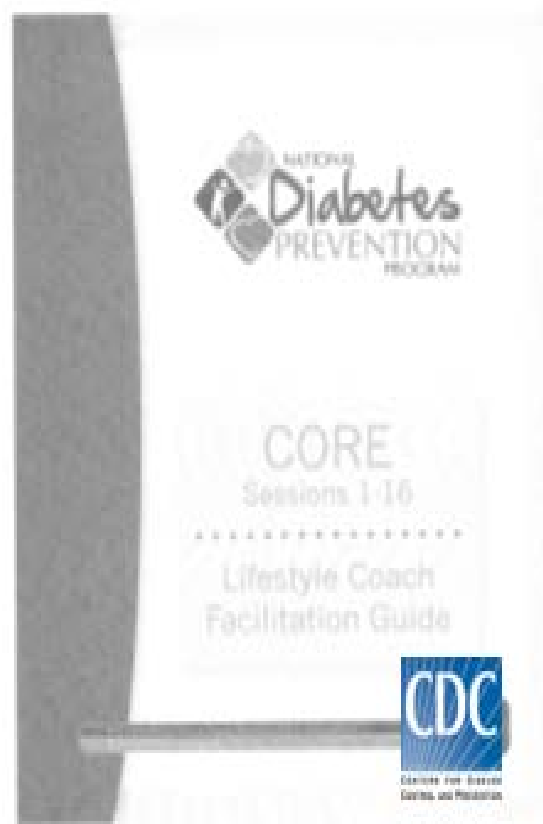
Certification- Diabetes Prevention Program



Medical Nutrition Therapy

- ▶ The providers refer our patients to see a registered dietitian for any nutrition related issue:(after labs results returned to their EMR board)
 - ▶ diabetes
 - ▶ pre-diabetes
 - ▶ problems with hypertension, cholesterol, triglycerides, etc.
 - ▶ Adult/childhood obesity
 - ▶ Ms. Mills Tucker coordinates classes for pre-diabetics. She has been certified by the National Diabetes Prevention Program.

NATIONAL DIABETES PREVENTION PROGRAM
National Center for Chronic Disease Prevention and Health
Promotion
Division of Diabetes Translation



Medical Nutrition Therapy

- ▶ Involves individual assessment of
 - ▶ Lifestyle & willingness to change
 - ▶ Eating habits
 - ▶ Food availability
 - ▶ Ability to cook, store foods
 - ▶ With patient , create a plan
- (dietary implementation of therapeutic plan)

Nutrition/Diabetes Education

Ms. Susan Mills Tucker, RD,LD CDE

Statements and quotes

Ms. Mills Tucker said and I quote:

" I am so glad the night clinic program takes care of all the services because I do see the improvements of the patients when they come back every year."

"After working our agriculture worker night clinic program for the last 4 years, I have found out and learned a lot of good and culturally appropriate information about the dietary styles of the Hispanics and Haitians workers."

"I have learned about some of the Haitians foods: blu(spiced fish/vegetables), tassot (spiced,dried and fried meat),stews(in a tomato-based creole sauce.)HOT LOUISIANA HOT SAUCE!

" We take a lot of things for granted, for example:

- . what does the word carbohydrates mean ?
- . how to count carbohydrates ?
- . foods high in carbohydrates ?
- . Portions size?; dietary labels?

More testimonials from the patients referred to the Diabetes Educator

- ▶ Patients are so grateful and appreciative to receive diabetes education. Some patients have said to Ms. Mills: “ I have been a diabetic for 4-5 years and I have never received this kind of orientation.”
- ▶ Understand the importance of the glucometer and checking /keeping a journal of their am/pm sugars.
- ▶ Having this appointment has made a difference to me and my family.
- ▶ Patients did not understand the concept of the medications prescribed, and to refill them if they have to when finished. They stop taking their meds!

Diabetes Healthy Self-Care Behaviors

PLEASE REVIEW THE FOLLOWING HEALTHY CHOICES FOR MANAGING YOUR DIABETES BETTER. PLEASE CHECK "YES" OR "NO" FOR ALL THESE HEALTHY CHOICES.

TAKING MEDICATION		Yes	No
1	<u>INCREASE TAKING MEDICATIONS ON TIME</u> <u>TAKE MEDICATIONS AS PRESCRIBED</u> <u>MISS FEWER MEDICATIONS</u>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
HEALTHY COPING		Yes	No
2	<u>ADAPT WITH LIFESTYLE CHANGES</u> <u>COPE WITH DIAGNOSIS OF DISEASE</u> <u>GET SUPPORT FROM FAMILY AND FRIENDS</u>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
REDUCING RISKS		Yes	No
3	<u>DON'T SMOKE</u> <u>GET HEALTH CHECKUPS</u> <u>PERFORM DAILY SELF-CARE ACTIVITIES (ORAL AND FOOT)</u>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
MONITORING		Yes	No
4	<u>FOLLOW MONITORING SCHEDULE AND KEEP LOG</u> <u>MONITOR MORE OFTEN AS NEEDED</u> <u>MONITOR HEALTH STATUS WITH SCHEDULED LABS</u>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
PROBLEM SOLVING		Yes	No
5	<u>PROPERLY PREVENT AND TREAT HYPO AND HYPERGLYCEMIA</u> <u>PLAN PROBLEM SITUATION TREATMENT (SICK DAY PLAN AND TRAVEL PLAN)</u> <u>IDENTIFY PROBLEM SITUATIONS</u>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
BEING ACTIVE		Yes	No
6	<u>EXERCISE LONGER</u> <u>EXERCISE MORE OFTEN</u> <u>FOLLOW EXERCISE PLAN</u>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
HEALTHY EATING		Yes	No
7	<u>MAKE BETTER FOOD CHOICES</u> <u>REDUCE PORTION SIZE</u> <u>FOLLOW MEAL PLAN</u>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Date Assessed: _____ Signature: _____

CONGRATULATIONS on the Healthy Habits that you are currently doing. Now, as you have learned more about diabetes self-management, you need to decide on healthy habits from this list that you are willing to work on. You and your Diabetes Educator will work on making these goals happen!

Date: _____ Goal #: _____

Date: _____ Goal #: _____

Date: _____ Goal #: _____

I, _____, agree to work on making these changes. If I start to struggle with these changes, I will call my diabetes educator, _____ to re-evaluate my plan.

Date: _____ Signature: _____

SC DHEC Form _____ 04/2012

SC DHEC Don't Guess- Get Answers DSME program

CLIENT'S ID NUMBER _____
 CLIENT'S NAME _____
 CLIENT'S DATE OF _____

FJ-BJHCHS-ECMHSP Learning Collaborative

- ▶ Goal - To develop an intervention diabetes education and testing among agricultural worker families through collaboration between health centers and Migrant and Seasonal Head Start
- ▶ Focus = migratory agricultural worker families
- ▶ Two phase project
 - ▶ Phase 1: 5-minute educational trainings (Intuitive Eating and Label Literacy)
 - ▶ Phase 2: Encourage testing and management (for those diagnosed with high A1c)
- ▶ Participants: Beaufort-Jasper Hampton Comprehensive Health Services, Eastern Shore Rural Health (VA), East Coast Migrant Head Start Project
 - ▶ Additional participation from SC Primary Health Care Association and VA Community Health Care Association

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Let's learn about intuitive
eating!

Diabetes Training OPTION A: Intuitive Eating

Objective: Encourage audiences to think of nutrition as necessary preventative medicine; provoke a conversation on nutrition between patients and their providers or promotoras; provide basic information about eating habits so that patients can evaluate how and when they're hungry, leading to more mindful eating and better health outcomes.

Outline:

I. Introduction

- a. Person leading the training introduces her/himself and her/his organization
- b. Introduction: Everyone knows that nutrition, the foods you eat, are the foundation of good health, but what does that really mean? This training will introduce simple ways to have control of your health and talk about how to know what to eat!

OPTION A: Intuitive Eating Cont.

II. Content

- a. Thinking about nutrition for your family doesn't have to be complicated! It can be as easy as using your senses.
- b. Turn to your neighbor and give them a high five! Now, hold up your hand and let's name the five senses (let participants volunteer "taste, touch, sound, sight, smell")
- c. Right! Let these be your guide in knowing what you should eat! At your next few meals, start with taking half the amount you normally would eat, and then as you eat give yourself a high five and think about your experience of that food through the five senses: What does the food taste like? What type of texture does it have as you chew it? Does it make a sound when you bite it, like a crunch, or does it sizzle? What colors does it have? What does it smell like?
- d. Thinking about your food, slowing down as you eat it and checking in with how it tastes and how your body feels during and after meals will help you understand how much you should eat, when you should eat, and what you should eat. You already have the answers, if you listen to your body! If something makes you feel bad, don't eat it again.
- e. Think about your favorite vegetable dish; maybe it's a soup, or maybe it's the way your mom used to cook Calabaza, or maybe you really love a fresh tomato in the summer.
- f. Now close your eyes and think about the moments right before you take your first bite. Imagine the heavy fork or spoon in your hand. You feel the steam of the hot dish on your nose, or if it's a cold dish, the cool air rolling off it. You can see the colors of the dish, and a breeze from an open window brings the smell of the food to you.
- g. Now, remember brining that first spoonful to your lips and what the first bite tastes like. Think of the texture of the food.
- h. Now think of how your body feels after you've eaten enough - just enough, not too much, enough to where it's delicious but you don't feel hungry anymore
- i. You can open your eyes! These are the principles that should guide you when you think about the foods you want to cook and eat with your family: taste, how it feels after your eat it, and nutrients.
- j. We all had a meal where we have eaten too much by mistake, or where we have had "treat food" like fried chicken or a hamburger, and then felt unwell in our bodies afterwards. It's important to be aware of those feelings and listen to what your body tells you! Your body tells you how much you should eat and what type of foods you should be eating as long as you pay attention to the experience of eating. And paying attention will help you enjoy the meal and tastes even more!

OPTION A: Intuitive Eating Cont.

III. Conclusion

- a. Pass out FJ diabetes material, mi plato, or other nutrition/diabetes-oriented material along with health center brochure
- b. This is a starting point for a conversation about nutrition and how you can use nutrition to have a positive impact on your health and prevent diabetes. You can ask your provider for more information and ideas during your next visit! You can contact them using this information (insert information here)
- c. Evaluation: Count number of participants. Invite participants to volunteer comments, publicly or privately after the meeting, about whether the training was helpful.



ECRMHS/ BJHCHS, INC. Health Fair



Diabetes Training OPTION B: Label Literacy

Objective: Encourage audiences to think of nutrition as necessary preventative medicine; provoke a conversation on nutrition between patients and their providers or promotoras; provide basic information about reading nutritional labels

Outline:

I. Introduction

- a. Person leading the training introduces her/himself and her/his organization
- b. Introduction: Everyone knows it's important to consider the combination of nutrients when you're eating in order to control your weight and health. One way you can do this is by reading the labels on the food you buy. This training will introduce a simple way to have control over your nutrition: by reading labels!

II. Content

- a. Does anyone know what a nutritional label is? Does anyone know what it does?
- b. Nutritional labels provide information and are on the back of all packaged foods. It's best to eat fresh or frozen foods when you can. Frozen foods will also provide this information.
- c. The most important part of the label is the serving size, which tells you HOW MANY servings are in the package. The rest of the label gives descriptions about how the nutrients in the serving size work together. Remember: you need fat, carbs, and calories to live! These things work together to make our minds and bodies function.
- d. The thing to be concerned about is the amount of sugar in food. Everyone should pay attention to the amount of sugar they consume, not just diabetics.

OPTION B : Label Literacy

Cont.

III. Exercise

- a. Show two blown up pictures of nutritional labels side by side; one for frozen corn, one for canned corn (if possible, also have examples of the food in question to hold while you describe the relevant labels)
- b. Talk through label information. Calories, fat, sugar content, carbs, fiber amount, mention of vitamins
- c. Do the same for the second label. Then compare. What is the serving size for each? How many servings are in the each package? Which has more sugar? Which would your rather eat and why?

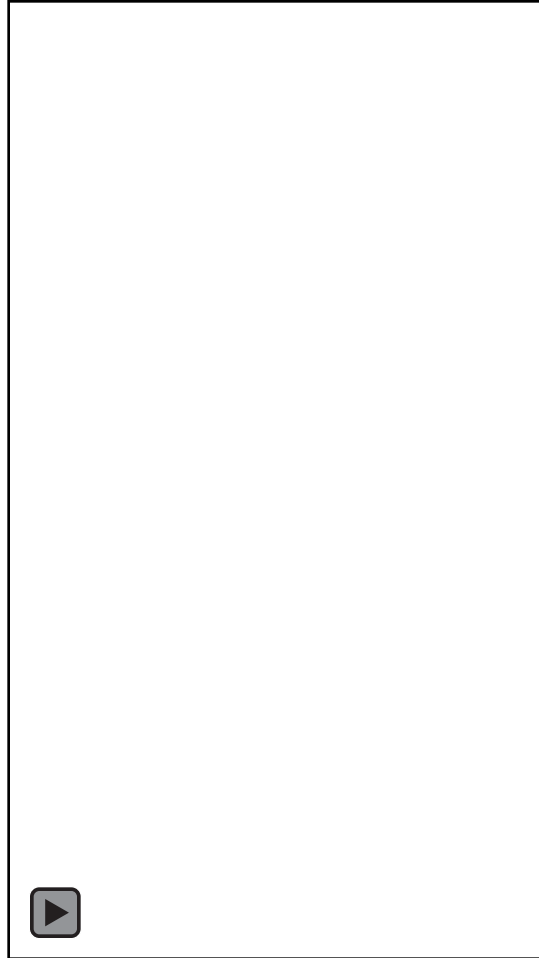
IV. Conclusion

- a. Pass out FJ diabetes material, mi plato, or other nutrition/diabetes-oriented materials along with health center brochure
- b. This is a starting point for a conversation about nutrition and how you can use nutrition to have a positive impact on your health and prevent diabetes. You can ask your provider for more information and ideas during your next visit! You can contact them using this information (insert information here)
- c. Evaluation: Count number of participants. Invite participants to volunteer comments, publicly or privately, about whether the training was helpful.

OPTION B: Label Literacy



Sue's Video



The beginning of a partnership..ACTIVITY

Integrating Clinical and Non-Clinical Strategies for Diabetes Management with Vulnerable Populations

How would your organization benefit from partnering with Migrant Head Start or other community organizations?

What are some best practices or challenges you've overcome that you may be able to share through a partnership?

What are some of the biggest challenges for your organization to better manage patients' diabetes outcomes that a partnership may be able to address?

CONCLUSIONS

The collaborations and partnerships with other agencies have:

- ▶ opened doors and expanded the horizon to our farm workers and their families
- ▶ helped achieved our BJHCHS, INC./Farmworker Health Program's objectives and goals
- ▶ established a working relationship that goes beyond and above limitations to continue the care and treatment of our farmworkers
- ▶ TEAM WORK !



Conclusion:

For outreach to provide preventive care and health education (for example: nutrition/prevention education, health and dental screenings, coordinating and participating in health fairs, festivals, churches and using the resources of the community agencies)

For providers and staff to understand how farm workers make decisions about their health and how to incorporate culturally sensitive practices.

Case management and follow up on referrals. Establish a system in which appointments are logged in and checked off when completed. *Migrant Clinicians Network (MCN)* is an extremely important partner on the tracking of our patients when they leave

Coordinating efforts with medical and legal professionals, social workers, educators, community agencies to help the farm workers and their families.



Juntos Nos Movemos – Promoting Active Lifestyles

- ▶ Partnership between FJ and National and Migrant Seasonal Head Start Collaboration Office
 - ▶ Locally between health center and migrant head start
- ▶ Training of trainers
- ▶ Provide farmworker parents the skills to incorporate physical activity into their family's schedules in a way that is manageable, consistent, fun, and culturally appropriate.
- ▶ Provide trainees with the skills to identify barriers, opportunities, and resources surrounding physical activity for farmworker families in their community.

Why Juntos Nos Movemos?

- ▶ Increases the frequency and variety of physical activity that farmworker parents can engage in with their children in the evenings.
- ▶ Helps farmworker parents make the most of limited free time with their children by giving parents the skills to identify several 5 to 20-minute blocks of time in which to engage in a variety of fun and culturally appropriate physical activities with their children

Let's Move!

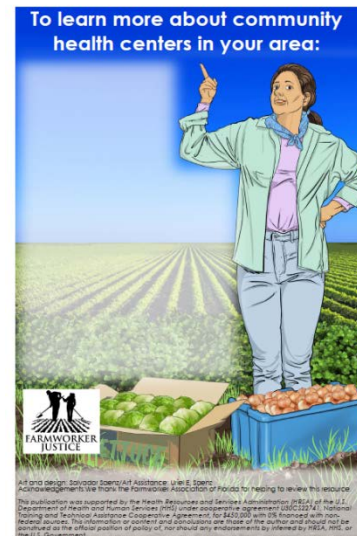


Farmworker Justice Resources

- ▶ Life of the Party: Making Healthy Choices with Diabetes
 - ▶ Available in Haitian Creole, Spanish, and English
- ▶ Issue Brief: Perceptions of Diabetes in Agricultural Worker Communities
- ▶ Good Health is for You, Too! (health center brochure)
 - ▶ Available in Haitian Creole, Spanish, and English

Resources available at:

<https://www.farmworkerjustice.org/resources>



REFERENCES

- 1.American Academy of Pediatrics.(1989).Health care for children of migrant families.
- 2.ERIC Digest .(1993).Health Problems among Migrant Farm workers” Children in the US.(Huang, Gary)
- 3.The Commonwealth Fund.(2003).Briefing Note:Hispanics Patients’ Double Burden: Lack of Health Insurance and Limited English(Doty, Michelle)
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5. NATIONAL DIABETES PREVENTION PROGRAM(CDC);
- 6.The Institute for Family Health(www.institute.org)
- 7.SC DHEC : Don’t Guess-Get Answers DSME Program.

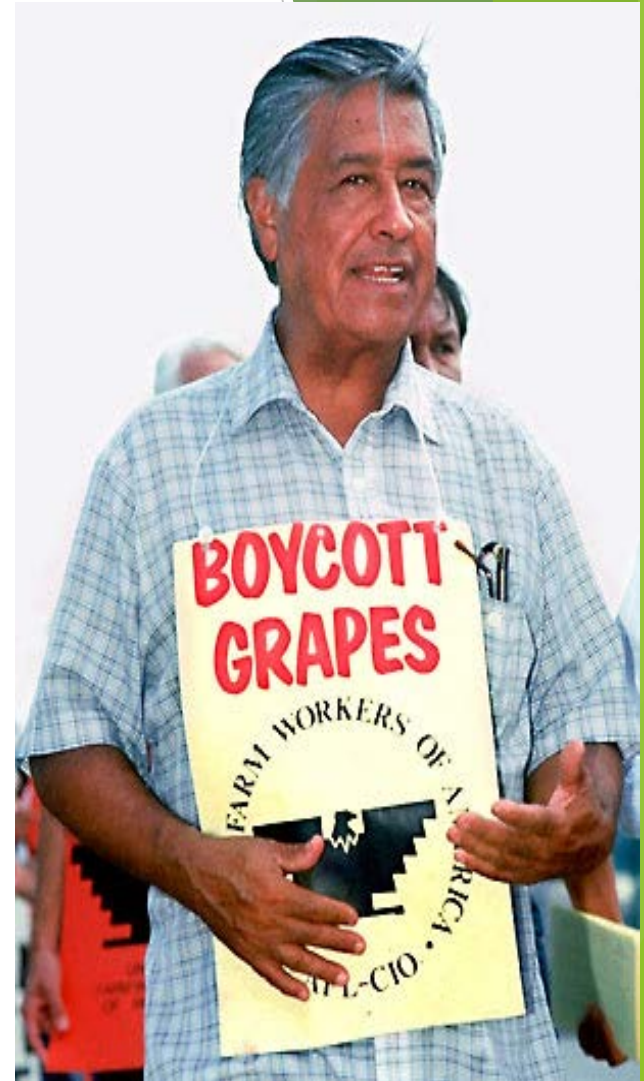
My gratitude and appreciation for Ms. Susan Mills Tucker!





“We cannot seek achievement for ourselves and forget about progress and prosperity for our community... Our ambitions must be broad enough to include the aspirations and needs of others, for their sakes and for our own.” (*by César Chavez*)

BE KIND! It is FREE!





“Do the
best you
can until
you know
better.
Then when
you know
better, do
better.”

- *Maya Angelou*

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ANY AHA!
MOMENTS??

THANK YOU FOR YOUR PARTICIPATION

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