



Short communication

Engaging outreach workers in the development of a farmworker health research agenda

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ABSTRACT

Farmworker health outreach workers have not traditionally been involved in the prioritization and design of research studies. This report from the field shares the results of a survey administered to outreach workers providing health services to farmworkers in North Carolina. Priority areas of research and best practices for engaged research are presented from the perspective of the outreach worker community. The purposeful involvement of outreach workers can make farmworker health research more meaningful and solution-oriented.

1. Introduction

As defined by the American Public Health Association, a *community health worker* is a “frontline public health worker who is a *trusted* member of and/or has an *unusually close understanding* of the community served. This trusting relationship enables the worker to serve as a *liaison/link/intermediary* between health/social services and the community” (American Public Health Association, 2017, italics added for emphasis). As community members, the workers share “...ethnicity, language, socio-economic status, and life experiences” with the people they serve, including those who are vulnerable (U.S. Department of Health and Human Services, 2007). Under the umbrella term of *community health worker* falls a number of other titles, including *lay health advisor*, *peer health educator*, *community health coach*, and *patient navigator*, which all identify individuals who serve as a bridge between their community and outside entities (to include health care providers and researchers). In the area of farmworker health, community health workers are often referred to as *health outreach workers* or *promotoras de salud*. In an effort to formalize the roles, skills, and qualities of community health workers, the Community Health Worker Core Consensus (C3) has recommended 10 core roles, including participation in evaluation and research, as well as the more conventional roles of providing culturally competent health education and care coordination (C3 Project, 2016).

While the identification of priority issues and research questions and the development of research design and methods are recommended sub-roles for community health workers participating in research,

recent studies suggest that community health workers do not typically engage in high-level prioritization and study design. Instead, they often participate in various aspects of implementation of the intervention, for example recruitment, delivery, tool development, data collection, and reporting (Farquhar et al., 2008; Hohl et al., 2016).

While outreach workers have extensive interactions with farmworkers around health-related issues, outreach workers do not have a mechanism to communicate those concerns to a research community who might be able to systematically study contributing factors and possible solutions. With few exceptions (e.g., Crowe et al., 2008), those in the academic community are frequently basing research questions on gaps in the literature without community prioritization of needs. The goal of this research is to bridge the gap between outreach workers and researchers.

2. Methods

2.1. Focus group

A focus group was conducted with eight North Carolina (NC) farmworker health outreach workers in April 2016 in conjunction with an annual farmworker services meeting. During the two-hour discussion, participants identified priority areas for research and best practices for involving outreach workers and farmworkers in research projects. The focus group was audio-recorded, transcribed, and analyzed for common themes using ATLAS.ti software (Saldaña, 2009). Results informed the development of items and response alternatives for a

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follow-up survey to be administered to outreach workers throughout NC.

2.2. Surveys

A 12-item survey was then developed in English and translated into Spanish and included demographic information (6 items) and the following items: *If you could prioritize topics for farmworker researchers to study, what would they be? What data collection methods do you think are best for farmworkers participating in research about health? What is the best incentive for researchers to provide farmworkers for participating in research? What is the best incentive for researchers to provide outreach workers for participating in research? What do researchers need to know about involving farmworkers in research? What do researchers need to know about involving outreach workers in research?* The two items related to what researchers should know about engaging farmworkers and outreach workers in research were the only constructed-response items. Among the selected-response items, multiple responses were sought to some questions while single responses (e.g., choose the best option) were requested for others, and for each selected-response item, an “other” option was provided with the request to specify. The survey was first administered in a pen-and-paper version at the annual East Coast Migrant Stream Forum in fall 2016, with a follow-up survey administered online in spring 2017 for those who did not attend the forum.

3. Results

3.1. Participants

Forty-one individuals responded to the first survey administered to attendees at the East Coast Migrant Stream Forum. Despite instructions to respond only if one were an outreach worker, four sets of responses were removed from the dataset as they did not come from outreach workers. The study team also removed responses from outreach workers from states other than NC ($n = 14$), which resulted in responses from a total of 23 participants. An additional four respondents completed the online survey. The results that follow are from 27 outreach workers in the state of NC. See [Table 1](#) for participant personal characteristics. The study was reviewed by the authors' university institutional review boards and found to be exempt (IRB no. 7846 at North Carolina State University and IRB no. 16-0860 at University of North Carolina at Chapel Hill).

Table 1
Survey participant personal characteristics.

Personal characteristics	Mean	Frequency (%)
<i>Demographics</i>		
<i>Gender</i>		
Male		11 (41%)
Female		16 (59%)
<i>Ethnicity</i>		
Non-Latino White		8 (30%)
Latino		19 (70%)
<i>Highest Level of Education Completed</i>		
High school diploma		4 (15%)
Some college		11 (41%)
Bachelor's degree		10 (37%)
Graduate/professional degree		2 (7%)
<i>Outreach Experience (in years)</i>	6.5	

3.2. Priority areas for research

The survey item related to priority areas asked respondents to select five topical areas. During analysis, responses for each topical area were tallied. [Fig. 1](#) illustrates the topical areas with the highest frequency of responses. In a follow-up item, those respondents who selected “best

practices in providing outreach to farmworkers” as a priority topical area were asked to list up to three additional priority topics related to providing outreach. The most frequent responses were Zika virus (care, management, long-term effects) ($n = 4$), agricultural chemical exposure ($n = 3$), and behavioral and mental health ($n = 3$).

3.3. Best practices for involving outreach workers and farmworkers in research

Respondents were asked to select the three most appropriate methods of data collection in research studies with farmworkers, and again, the tally method was used for analysis. The most frequent responses were a one-on-one interview ($n = 20$), small group discussion ($n = 20$), and survey questions asked aloud ($n = 12$).

Respondents selected the single most appropriate incentive for both farmworker and outreach worker participants in research studies. For farmworker incentives, the most frequent responses were cash ($n = 11$) and gift cards ($n = 10$). For outreach worker incentives, respondents selected gift cards ($n = 11$) and cash ($n = 7$) most often, although these responses were closely followed by education/training ($n = 6$) in frequency.

In two constructed-response items, respondents identified 1) what researchers should know about engaging farmworkers in research and 2) what researchers should know about engaging outreach workers in research. The most prevalent codes for responses to each item, with exemplary quotations, are presented in [Table 2](#). Considerable overlap existed in the two most prevalent codes for respondents' perceptions of what researchers need to know about working with farmworkers and with outreach workers. Respondents described farmworkers' time ($n = 11$) and outreach workers' time ($n = 6$) as being limited, valuable, and important for researchers to consider in research studies. The outreach workers also emphasized the link that outreach workers serve between farmworker and researcher communities ($n = 5$) and the trust that farmworkers have for outreach workers ($n = 4$).

4. Discussion

In prioritizing areas for farmworker health researchers to study, outreach workers identified topics that could be categorized as either the delivery of health services to the farmworker population or health outcomes related to farm work. Our findings related to the delivery of health services resonate with prior research with farmworkers, social service providers, and health care providers reporting that specialty care services, language barriers, cultural barriers, and transportation needs are factors that affect the health of farmworkers ([Doyle et al., 2006](#)). Occupational health experts in the agriculture, forestry, and fishing sector also identified the need for more research focused on healthcare infrastructure, including access and cost, and preparation and availability of culturally competent providers ([Arcury et al., 2013](#)). However, most research that has been conducted on the delivery of health services to farmworkers has focused on characterizing problems with access rather than identifying solutions (e.g., [Farmworker Justice and the National Center for Farmworker Health, 2015](#)). With regard to the health outcomes related to farm work that our participants prioritized, extensive research already exists on chronic disease, nicotine exposure, and pesticide measurement (e.g., [Salvatore et al., 2008](#)). However, the predominance of the research on chronic disease has been conducted with farmers rather than farmworkers (e.g., [Agricultural Health Study \(Alavanja et al., 1996\)](#)), and acute nicotine effects have been emphasized over chronic ([Arcury and Quandt, 2006](#)). Nonetheless, outreach workers who participated in our study prioritized the topical areas, suggesting that there is a gap in the translation and dissemination of research findings to farmworker health outreach workers. This disconnect between existing research and outreach worker understanding could serve as a focus for outreach worker training.

As previously reported, farmworker health outreach workers in NC are predominantly Latino and female, with some college or a high

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