

Appendix D: Migrant + Seasonal Farmworker Supports in Response to COVID-19

Introduction

“We recognize that this pandemic has been especially cruel in the disproportionate impact among front line workers, and in the Black, Hispanic, Native American, Pacific Islander, and seasonal worker population.” - LPHA, Equity Plan

Farmers and farmworkers are essential to maintaining the food supply, and were deemed as essential workers during Oregon’s public health response to the COVID-19 pandemic.¹ In March of 2023, there were an estimated 174,000 migrant and seasonal farmworkers (MSFWs) and their families in Oregon.² Farmworkers experienced numerous inequities throughout the pandemic response, and have been found to have a four times higher incidence of COVID-19 infection than non-farmworkers.^{3,4} Health disparities among farmworkers are related to social determinants of health, including housing that is often crowded, long hours and a lack of paid time off, limited access to health care and some public benefits, and other challenges related to immigration status and mistrust in the government.^{2,5}

¹ On March 23rd, 2020, Governor Kate Brown issued [Executive Order 20-12](#), which directed the closure of non-essential businesses, and included a non-exhaustive list of businesses to remain open. On July 8th, 2020, the Department of Consumer and Business Services issued a memo providing guidance on identifying “essential” businesses and employees to remain in operation during the pandemic response, including a list of essential services created by the U.S. Cybersecurity and Infrastructure Agency. “Farmers, farm and ranch workers, and agribusiness support services” are listed as essential on page 8 of this list (page 11 of the document). The memo can be accessed here:

<https://www.oregon.gov/dcbs/mlac/Documents/2020/070920/070920-memo-essential-workers-businesses.pdf>

² Much of the information in this introduction was included in the Protecting Oregon Farmworkers Program Report dated March 2023 and provided to Rede by OHA in draft form to provide additional context about the program and support this analysis.

³ Boggess, B. et al. 2023. CDC-Supported National Network of Farmworker-Serving Organizations to Mitigate COVID-19. *Am J Public Health*. 113(2): 166-169. doi.org/10.2105/AJPH.2022.307159.

⁴ Mora AM, Lewnard JA, Kogut K, et al. Risk Factors Associated With SARS-CoV-2 Infection Among Farmworkers in Monterey County, California. *JAMA Netw Open*. 2021;4(9):e2124116. [doi:10.1001/jamanetworkopen.2021.24116](https://doi.org/10.1001/jamanetworkopen.2021.24116)

⁵ Boggess, B. et al. 2023. CDC-Supported National Network of Farmworker-Serving Organizations to Mitigate COVID-19. *Am J Public Health*. 113(2): 166-169. doi.org/10.2105/AJPH.2022.307159.

Many state and local organizations in Oregon came together to protect the health of migrant and seasonal farmworkers (MSFWs) during the COVID-19 pandemic. Through Oregon Health Authority (OHA), local public health authorities (LPHAs) and community-based organizations (CBOs) used multiple funding sources to support their work with MSFWs. Over 170 CBOs received health equity funding to reduce health disparities among numerous populations in Oregon, including MSFWs. In June 2020, OHA's Community Partner Outreach Program (CPOP) worked with community and state agency partners to create the Protecting Oregon Farmworkers (POF) grant program. The POF grant program was made up of 22 Community Partner (CP) organizations, including nonprofits, Federally Qualified Health Centers, and one LPHA. Funding for the POF grant program initially came from Cares Act dollars to fund the Food Security and Farmworker Safety program, established by Governor Kate Brown to protect Oregon's food supply during the public health emergency and Oregon's agricultural and food processing workers. In June of 2021, CPOP requested and was awarded an additional 10 million in FEMA funding. In total, POF grantees have been awarded approximately 13 million in emergency funds through CPOP. The POF program officially ended on June 30, 2023, but many organizations continue to serve this population. Throughout the pandemic response, LPHAs coordinated with CBOs who received equity funding and POF grant dollars, and they also developed and submitted county-wide COVID-19 equity plans detailing their efforts to equitably support all residents in their communities, especially those most vulnerable to COVID-19.

Throughout Oregon's public health response to the COVID-19 pandemic, OHA, CBOs, LPHAs, and other organizations worked together to provide health education, personal protective equipment (PPE) and other supplies, testing, vaccines, wraparound supports, and other supports to MSFWs. The findings below summarize the types of support provided by some of these organizations as described in interviews and reports, but is by no means an exhaustive account of all support provided to MSFWs over the course of the public health pandemic response.

Methods

To better understand and describe the supports for MSFWs provided by local health departments and CBOs in partnership with OHA, Rede:

1. Conducted interviews with five POF grantees, asking about the supports they provided to MSFWs, the challenges they faced, and other aspects of their role in the pandemic response as it related to MSFWs.
2. Reviewed six quarterly activity reports from CBOs receiving health equity funding, with a focus on their efforts with MSFWs.
3. Reviewed 30 COVID-19 equity plans from LPHAs, with a focus on their efforts with MSFWs.

Interviews with POF grantees

Rede received a list of 22 Protecting Oregon Farmworker (POF) grantees from OHA and sorted them into geographic Regions 1-5 based on their service area, and then conducted a random sample to select one grantee from each region to interview. The contact from Region 5 was unresponsive, and there was not another to select. One contact from Region 1 was initially unresponsive, so another was selected and responded. During data collection, the initial contact for Region 1 also responded, so they were included in the data set. The final data set included two grantees from Region 1, one from Region 2, one from Region 3, one from Region 4, and none from Region 5.⁶ Interviews were transcribed and uploaded to Dedoose qualitative analysis software for thematic coding and analysis. Key themes related to services and supports provided to MSFWs, greatest challenges, greatest contributions, and lessons learned are summarized in the findings below.

⁶ For this study, counties were divided into five regions. Oregon's Emergency Management regions were modified to include at least five counties in each region to support the confidentiality of study informants. See Report 2 for more information about how these regions were used in the study. The regions from Oregon Emergency Management adapted for this study can be viewed here: <https://www.oregon.gov/oha/PH/PREPAREDNESS/PARTNERS/Documents/AllState.pdf>

CBO activity reports

CBOs receiving health equity funding were required to submit quarterly activity reports describing their efforts to improve health equity in their pandemic response activities. Rede received a total of six reports from OHA dated from Quarter 3 of 2020 to Quarter 2 of 2022. Two reports were sent with the complete, raw data. Four reports were sent only with OHA's analyses in the form of slide decks or spreadsheets with limited questions included. Each report was reviewed for potential relevance to MSFWs, and all responses specifically mentioning migrant seasonal farmworkers or farmworkers in general were included in analysis. Because some of the later reports came with limited data, and the questions and response options seemed to change slightly in later reports, analysis of some questions was not possible for the full reporting period. From these reports, it appears that around 174 CBOs were receiving this funding, and from late 2020 to mid-2022, an average of 74 CBOs were using these funds to serve MSFWs at any time (range 39 - 93).

LPHA COVID-19 equity plans

In 2021, LPHAs were required to submit COVID-19 equity plans to OHA, detailing their efforts to reduce health disparities in their response to the COVID-19 pandemic in their counties. OHA provided plans from 30 LPHAs to Rede for analysis, with dates ranging from May to November of 2021. Plans were reviewed and analyzed for any mention of providing education, services, supplies, or other supports to agricultural workers. Rede reviewed specifically for support provided to MSFWs, but included excerpts speaking generally about agricultural workers, assuming that MSFWs would also be included in this group. Plans were uploaded to Dedoose for thematic coding and analysis, and key findings are summarized below.

Synthesis

Findings and recommendations below are synthesized across data collection sources (interviews and reports).

Findings

Reaching migrant and seasonal farmworkers

In their equity plans, most LPHAs referenced surveys they created and distributed to employers, emphasizing places that were most known for hiring migrant and seasonal workers (MSFWs), to inform them of events and resources available to support COVID-19 precautions, testing, and vaccination at work sites. Some LPHAs also described that they had already been working to support MSFWs, and were able to utilize existing relationships and networks to support them during COVID, especially to provide vaccines and information in languages other than English (primarily Spanish).

“We had developed our own survey and assessment targeted to employers, business partners, and specifically workplaces such as fisheries, fish plants, and agricultural employers. We are using the data we collected to outreach to these places and ensure we offer specific events as well as provide information about the events that are available to their staff and employees to attend.” - LPHA, Equity Plan

“In [our region] there has historically been significant cooperation and coordination of efforts around Migrant and Seasonal Farm Workers and health equity issues, and this continues regarding vaccine outreach.” - LPHA, Equity Plan

However, a few LPHAs reported little to no success reaching migrant and seasonal farmworkers. To identify ways to improve their outreach to MSWFs, some LPHAs reported convening planning groups with their CBO partners to strategize and boost access to supplies and services like testing and vaccination among this population, which was reflected in the CBO activity reports as well.

“We have tried reaching out to migrant and seasonal farmworkers via their associations and employers without success.” - LPHA, Equity Plan

“In preparation for the summer and fall harvests, in May 2021, [our county] convened a Migrant Seasonal Farmworker/Agricultural planning group that meets weekly to identify gaps in outreach efforts and steps moving forward to close the gaps.” - LPHA, Equity Plan

"We were part of a task force that focused on migrant and seasonal farm workers coming into [our] county to program vaccine opportunities and also testing." - CBO Activity Report

According to the CBO activity reports and the POF interviewees, CBOs also experienced challenges trying to reach and build relationships with the MSFW population, at least initially. In activity reports, CBOs said there was a learning curve in making engagement accessible (especially in virtual settings), making connections across cultural and linguistic differences, and building trust among a population that may have negative perceptions or lived experiences with government and other unfamiliar organizations. Similarly, although many POF interviewees reported that they were trusted by migrant and seasonal farmworkers in their area, some reported that they had some initial difficulty convincing them that vaccines and other public health services were safe to use. They also had some difficulty gaining trust and/or cooperation from some of the farm employers, with negative reactions ranging from slight hesitance or skepticism, to noncompliance with COVID-19 public health mandates and farmworker protections.

"Starting in spring, one of our community health workers took the lead to start developing connections with a large farm that employs many Spanish and Mam-speaking individuals. The process of establishing a connection was difficult... [however,] our community health worker was able to identify and understand the barriers that were making it difficult to establish a relationship with the farm. Step by step, she established trust with the employers and was able to schedule a visit to the farm and that visit will lead to a health fair we are having in [Region 2], in partnership with [the local] health department. The lesson learned from this experience is that

when working with the Latino immigrant community, there are sometimes institutional barriers (in this case, the farm company administrators) that make it difficult to reach out to people. However, through dedication and establishing trust, those barriers can be overcome. We are confident that because of the efforts of this community health worker, and her capacity to establish partnerships, our organization will now start playing a more active role working with the farmworker population in this area, something that is very much needed." - CBO Activity Report

"We began with outreach at the farms, going into farms. Getting that permission to enter a farm was really difficult just because as a farm owner, you're... Skeptical? In letting an organization join or come into your workplace. It's like, 'Oh my God, what are they going to tell my workers?' That was a big challenge we faced, getting permission to enter the farms, to be able to talk directly to the farm workers... But then with time, also, one of our board members, a previous board member, helped us a lot with... He knows a lot of the farmers so he spread the word and that is how we got permission to enter the workplaces." - POF Interviewee

"Persuading them to get vaccinated? That's been hard... So, it's been challenging to convince people to come get these services, and it's free. And we're not immigration. We're not law enforcement. We're not going to charge you. This vaccine works and it's safe for you. I mean, we've had to explain or try to demystify these myths that... Who knows where they originated from, but just persuading the community has been really challenging." - POF Interviewee

Despite some challenges gaining access to and establishing trust among MSFWs, most POF interviewees believed that their separation from the local and state government accelerated relationship-building with farmworkers and allowed them to provide services to many more people than they would have been able to otherwise.

"...Our monthly PPE events, vaccine events we have been doing in our office have been a tremendous change. Like [another interviewee] mentioned, there's state and county-wide, having events weekly or biweekly and they

don't get the same results we get in a month. That just shows the trust the farm workers and the community have with [Latinx serving CBO]. So that's something I think is big” - POF interviewee

“I feel like in this situation of the Pandemic we saw the importance of the work that non-profit organizations do in the community. The [NW Oregon City] community members have trust in the organizations. I feel like they trust us and what we are saying because they know what we say is not going to hurt them. Many of them do not believe in the assistance from the government because of the consequences around illegal immigration that they could have in the future. Sometimes when you request a service certain rules are not specified so many of them questioned if the financial assistance would harm them. The majority of the questions were about immigration status, so removing the barriers and making everything transparent and communicating that in the work we do is very important.” - POF Interviewee

Supports provided to MSFWs

LPHAs, POF Interviewees, and Equity-funded CBOs supported all aspects of the public health response to COVID-19. The key activities highlighted in the reports and interviews analyzed by Rede include the dissemination of COVID-19 health communications; testing; hosting and supporting vaccination events; providing wraparound supports like food boxes; and connecting MSFWs to other resources in the community.

Early COVID-19 communications and health information

During Stage 1 (Mar. - Nov. of 2020),⁷ POF interviewees primarily focused on training their staff and getting information about the COVID-19 virus out to farmworkers. They attended webinars, tried new engagement methods

⁷ In an effort to acknowledge the transformation of the COVID-19 pandemic, and thus Oregon’s public health system response to the pandemic, the study team developed a framework separating the pandemic into four distinct stages that are referenced throughout these findings. See page 22 of this appendix for more information and a graphic depicting the stages.

like radio ads, and developed multilingual information sessions to deliver to farmworkers at their worksites and other community hubs, like local markets. Some interviewees also began to offer testing. In CBO activity reports, respondents reported that they conducted outreach at worksites as well, specifically "in the orchards and packing houses."

"At the very beginning, the role was to understand COVID and amplify crucial information from Oregon Health Authority as well as the CDC in Spanish and in relevant platforms, beginning with radio all the way to one-on-one conversations with the community so that people could begin to understand what COVID was, begin to understand that there was opportunity to protect themselves with masking and sanitizer and testing. That was stage one." - POF Interviewee

"So, we would just learn as much as we could from the OHA webinars and Zoom meetings. Then we would take that information and we developed workshops, essentially, verbal workshops. So, our staff put together quick presentations that they would then take with them, go visit workers at their places of employment." - POF Interviewee

"We are equipping trusted community members with accurate information so they can serve as vaccine ambassadors." - LPHA, Equity Plan

"Community health workers have been conducting onsite presentations for agricultural workers centered on vaccine information and COVID-19 safety" - LPHA, Equity Plan

On-site vaccinations

LPHA equity plans, POF interviewees, and CBO activity reports all highlighted the importance of "meeting people where they're at" to build trust and confidence in supplies, testing, and vaccines among MSFWs. This strategy was

especially important for distributing vaccines, as MSFWs face many barriers to accessing off-site vaccine clinics (away from work and housing sites), including language barriers, long working hours, and fear or mistrust in the government or the health care system. Many LPHAs, POF interviewees, and CBOs formed partnerships to leverage organizations that were already seen as trusted messengers among MSFWs to boost vaccine confidence, giving information sessions at the work sites and other community hubs. POF interviewees also noted that the one-dose Johnson and Johnson vaccine worked best for MSFWs, who are often not in one area long enough to complete the multi-dose series.

“In partnership with [a health center] and [a CBO], we coordinated on-site vaccination events at all of the largest agricultural employers in [our county], as well as more targeted events for smaller agricultural employers...By offering vaccinations in the field and on job sites, we and our partners have been able to vaccinate individuals who otherwise would not have had the opportunity given the financial impact of missing work.” - LPHA, Equity Plan

“The [county mobile clinic] has been an unbelievably valuable resource. CBOs, community leaders, and farm sites reach out to register, and/or host small and mobile vaccination events for highest risk and underserved populations.” - LPHA, Equity Plan

“Stage two [Dec. 2020 - Aug. 2021], we started carrying the Johnson & Johnson vaccine because we felt that that was the best at the time with the information we had for the one and done vaccine status, especially since most of the clients coming into the area were not going to be here for more than three or four weeks, so trying to get them a double dose was going to be too difficult.” - POF Interviewee

"[We have] held many drive through clinics; and gone to farms where migrant workers are, to administer vaccines." - CBO activity report

Information dissemination

Across Stages 2 and 3 (Dec. 2020 - Feb. 2022), POF interviewees reported bolstering their communications and outreach efforts, turning to social media, storytelling, and continuing to use radio and direct conversations with farmworkers to educate them on COVID-19 safety practices, testing, and vaccines. Many LPHAs partnered with CBOs in their county to disseminate information in other languages, primarily in Spanish and Mam. Throughout the study period, combating COVID-19 misinformation was a large part of POF interviewees' role, especially around the safety of the vaccine. One POF interviewee described a learning curve to building rapport and disseminating information among diverse groups of MSFWs.

“Another challenge was understanding that the farm worker community is a very diverse community. We have people who have lived here for a long time. You have people who have grown up here. You have people who are fairly new. You have people who speak, at this point, we're working across eight languages. And so a very diverse community as we have many Mesoamerican indigenous language speakers here as well. And so then, how do we work with folks often without a written language, that means oral communication. And so, how do we find those leaders within the community who speak certain languages, working with them, build leadership with them so that they can be sharing in the right ways with communities. And we had a couple different approaches on that.”
- POF Interviewee

“Promotional outreach included promotion on the radio show, promotion through social media. And increasingly had more and more outreach as we did video promotions and video promotions in multiple languages... We'd gather community stories on video in multiple languages from community members and then be sharing that out.” - POF Interviewee

“We also did Facebook Lives. So, we worked with our local health care providers. We asked public health, and even an OHA provider actually, we asked them, give us people that speak Spanish, and we would do live

interviews with them on Facebook. So, that gave them the opportunity to provide information in Spanish about the safety and effectiveness, and it gave the community the opportunity to ask their questions in real time. So, our team would have somebody doing the interview, and somebody checking the comments on the Facebook page, because we would tell people, "What are your questions? What are your concerns?" And as people sent those over, we would be answering them live through the Facebook Live." - POF Interviewee

"So that was a big role we played in letting the seasonal farm workers know the importance of the vaccines, why they need to get vaccinated, and clarifying the myths. Because around that time, there were a lot of myths, a lot of miscommunication. That was a role that we played, is just educating them on the vaccines and that they're safe." - POF Interviewee

Connecting MSFWs to resources and ongoing services

Stage 3 (Sept. 2021 - Feb. 2022) activities were largely a continuation of Stage 2; with most POF interviewees reporting that they provided testing services, helped people find and access vaccine clinics, and connected them to other resources in the community including emergency financial assistance and food boxes. In their equity plans, a few LPHAs reported distributing PPE and supplies to the farm work sites, or reaching out to farmworkers and their employers to let them know where and how to acquire PPE.

"We also added resource fairs to these vaccination events. And so that was a way for our community to have better access to the social services that they needed. Because throughout this process, we learned that our people don't know that there's financial assistance programs, legal assistance programs, housing assistance programs, et cetera, all the social determinants of health. We have barriers to access them. And so when farmworkers would come to our events, we would introduce them to organizations that have programs dedicated to supporting them. And so all of that supports their overall wellness." - POF Interviewee

“We conducted the migrant outreach to the camps, and there, we offered both testing and vaccines... For another migrant camp area, we went and we did all the testing during migrant camps for them. We were also on call during both years by other smaller migrant camps to just go out and do testing for anyone that was symptomatic and whatnot.” - POF Interviewee

“The mobile vaccination unit... sets up every Sunday at [a local market], a social hub for the local Latino/a/x community. ... CBOs work alongside the mobile unit to provide outreach services and resources including food boxes and gift cards as incentives to bring people in. Seasonal workers have been bussed in to mobile events to close equity gaps. ODHS [Oregon Department of Human Services] has attended events and provides information about health services.” - LPHA, Equity Plan

“At one point PPE for the agriculture community was distributed through the OSU Extension Service. The PPE supply for [our county] ended up in [a neighboring county] with the rest of the regional supply. [Our county] worked with the Extension Service and those in the agriculture community to get the PPE where it was needed so they could pick up supplies locally and not have to travel (a barrier) to obtain these needed supplies. We reached out to both the employers (through the Extension Service) and the workers (through the interpreters) to make sure they knew there was PPE supplies available to them. If they were not able to come into [the county] to pick up the supplies the Extension Service field staff would deliver it to them.” - LPHA, Equity Plan

POF interviewees reported that by Stage 4 (Mar. - Jul. 2022) they had solidified their processes for providing testing, vaccinations, and connections to additional resources. Toward the end of the study period, POF interviewees reported continuing to offer vaccinations, supporting MSFWs to acquire home testing kits, and distributing PPE.

“Oh, I forgot to mention, at this point now, also when the home test kits became available, that was another big priority for us. We received testing kits in large quantities, both from OHA and through our public health department. And so we've been distributing them. We'll just call churches and say, "Hey, we have home test kits.

You want some?" And we'll just leave them with a bunch, so that as their congregation needs, they can just grab one on their way home after church service. We'll leave some at the meat markets and the bakeries so that their checkout stands have free test kits. Apartment complexes, we'll do the same thing. When we go out and talk to workers, we always put together resource kits. So, they're just reusable bags. And we'll put testing kits, face masks, hand sanitizer, small PPE items, and then flyers for different resources that we think would be helpful to them. And so that's another way that we make sure people have information that they need." - POF Interviewee

"So stage four, we are still out there trying to reach workers, distributing PPE. We still do monthly community vaccination clinics. During all of this time, our organization has been the only one doing these community vaccine events. Even though people can now go to their doctor, the pharmacy to get vaccinated, we are the lowest barrier access point because we don't require vaccine appointments, we don't require insurance ID numbers or whatever, and we do them at convenient times... Because especially during the busy season, they're leaving work six, seven at night. And so to take some time off to go to the clinic, that impacts their pocket. And so that's why our work, we really try to organize our events around the worker's schedule, make it easier for them." - POF Interviewee

Challenges in providing supports

POF interviewees described some of the challenges they overcame while supporting MSFWS, including keeping their staff safe while providing in-person services which proved most effective to reach this population. Other interviewees highlighted that COVID-19 wasn't always the most visible or pressing emergency, as many farmworkers and their families were displaced by wildfires, and/or dealing with challenges related to their immigration status like navigating worker violations or staying connected to family members who are not in the United States.

“It was certainly a challenge to have staff out in the midst of the pandemic exposed. And so how do we keep ourselves and our staff safe as they are doing activities within the community where the virus is?” - POF Interviewee

“It wasn't just COVID-19 that we were fighting. It was the fires and the drought. There were other pieces on top of the complexity of COVID.” - POF Interviewee

“I think for me in stage 3 and 4, it really was trying to get into farms. I think there was so much cold calling and farm owners that were interested in having us come by. But also, once we're inside, it's really hard trying to talk to somebody about COVID-19 when there's so many other things that they worry about. And so we're just like, here's a face mask. It's like, cool. But I also have this other worry about my family who's not here in this country or this worker violation that I'm trying to work through all that other stuff.” - POF interviewee

“Seeing” MSFWs

A few POF interviewees described their greatest contribution as supporting state and local public health in finally “seeing” MSFWs; meaning that they felt they finally had the resources to support this population that they described as having been long overlooked and/or underserved.

“But I think our greatest contribution was letting workers know you're not alone, and there's an organization here to support you. Because beyond this COVID outreach work, we are essentially the hub of where you can go to get resource support in our county. And so people are now coming to us. We offer citizenship classes. We help people to enroll in the Oregon Health Plan. This month, in January, excuse me, we started to provide workforce training for youth. So, us being able to do this supportive outreach work to farm workers allows us to introduce our other programming that we offer. So, it's a way for us to address other issues that workers are facing.” - POF Interviewee

“This is the first time that the government, the state of Oregon, and the federal government really considered farmworkers as essential workers in the midst of the pandemic. Yes, we need folks to continue to be in the fields, growing food, processing food for the country. The fact that we're recognizing that folks, their work, and their families as essential to the community needs to be continued in some way, some form. And within the Oregon Health Authority and the state overall, I think that particular community needs to be continued to be lifted up because they're often without resources, even though they are essential within our community, just as people, as well as workers.” - POF Interviewee

Looking ahead

“Well, as I've learned more about how state funding is available, I would really love to see, if there were more partnerships, that [could] be organized more as a contract. There are all kinds of contracts that the state makes, but they're for multi-year contracts. They're not tied to the biennial funding of the state budget. And so I would really love to see [a] partnership be developed that is equitable to what we bring to the table. If you're going to contract with a company to build a new bridge, that takes years to do. Why can't you provide funding for more than two years to organizations like us to do work that takes longer than two years to do? Because it's not equitable. We're doing work that benefits the well-being of Oregonians, but we have to jump through many more hoops than construction companies do to get access to state funding. So, that feels inequitable to me. And I know there's some state legislation that is being done to improve the relationship with nonprofits in the state when it comes to funding, but I would really like to see multi-year funding contracts and less of these bureaucratic requirements when it comes to reporting and accountability.” - POF Interviewee

Most POF interviewees reported that their collaboration with local and state public health organizations was among their greatest contributions during the pandemic response. LPHAs also highlighted their partnerships with CBOs in

their county as a key strategy to reach and support MSFWs during the pandemic response. In their activity reports, CBOs noted that the increased funding allowed them to increase their capacity and reach many historically marginalized populations, including MSFWs, to improve health equity during the COVID-19 pandemic response. However, POF interviewees also suggested improvements to the administration of funding and contracts to facilitate future collaboration between OHA, LPHAs, and CBOs. A few POF interviewees reported that the frequency of the reporting took up a lot of the organization's capacity, and that longer-term contracts would be preferable, as many organizations also wished to prolong their collaborative relationships with OHA and LPHAs that were created or strengthened during the pandemic response.

"I think the accomplishment was really making sure that the farm workers had resources, had PPE, knew where to go to get vaccinations, knew where to go to get care because Public Health really responded very quickly with making sure that they had access to their clinics." - POF Interviewee

"The state has certain expertise and community-based organizations have certain expertise. Let's make sure we're using our different kinds of expertise effectively and collaboratively." - POF Interviewee

"There's new infrastructure, there are new working relationships, relationships between the state and public health departments as well as with community-based organizations. And I think we need to continue that. And a big part of continuing that is continuing resources." - POF Interviewee

"Well, I hope that this experience has shown the state that community-based organizations are a strong partner in public health work. Because we tend to hire our staff that are from the community, that fosters a sense of trust and a really strong relationship. We invest a lot of our energy in developing relationships with the community. That is the backbone of our work. And as community members, people are more willing to engage with us. Oftentimes, we had to be very clear that we are not the state, we are not there to enforce anything or get people in trouble. We had to say this message both to the workers and to their employers. And so the fact

that we're like a neutral organization allowed us to do this work faster, I think, than what the state could have done on its own." - POF Interviewee

"We are so grateful for this funding . It has made a real difference in the lives of many farmworker and immigrant families in [our] county. Our vaccine clinic has now given out over 4000 shots to a population that otherwise would have struggled to access the other vaccine clinics due to their hours of operation. Thank you muchoo!!!"
- CBO Activity Report

Key findings + recommendations

Key findings

1. Through funding provided by OHA, CBOs and LPHAs supported MSFW communities by providing information/combating misinformation, testing services, vaccinations, emergency financial assistance, food boxes, and connections to other resources in the community.
2. CBOs were critical in supporting MSFWs in the COVID-19 response. Most CBOs believed that their separation from the local and state government accelerated relationship-building with MSFWs and allowed them to provide services to many more people than would have received services if they were not involved in the COVID-19 response.
3. One of the biggest barriers to providing COVID-19 supports to MSFWs was reaching them at times and locations that were tenable with their long working hours and limited time off and transportation. This was overcome by bringing the supports to MSFWs in the form of PPE deliveries, mobile testing and vaccination units, and information sessions at worksites.

Recommendations

Improve support to MSFWs by:

1. Continuing to nurture relationships between OHA, LPHAs, CBOs, farmers, and MSFWs to improve coordination in future public health emergencies and support health equity among MSFWs more broadly.
2. Embracing population-specific engagement methods, including radio, on-site information and services, and the use of trusted messengers such as CBOs with established relationships to MSFW communities.
3. Restructuring contracts and reporting requirements for CBOs to facilitate sustained relationships between OHA, LPHAs, and CBOs, and minimize administrative burden.

Stages of the COVID-19 pandemic

These findings reference stages of the COVID-19 pandemic developed by the study team at Rede at the beginning of this project (see page 20 of Report 1). As the study team gathered data from key informants and analyzed a wide array of documents, distinct stages of the pandemic began to emerge. In an effort to acknowledge the transformation of the COVID-19 pandemic, and thus Oregon’s public health system response to the pandemic, the study team, after consultation with OHA, developed a framework separating the pandemic into four distinct stages. Although delineations between stages are imperfect, these stages provided a framework for analyzing public health system capacity, mobilization, and response alongside COVID-19 health outcomes. Figure 1 was used to describe the pandemic stages for qualitative research used in this study.

Figure 1. Stages of public health response to COVID-19 in Oregon

