

Cosecha: A Statewide *Promotor de Salud* Network to Attain Equity in Accessing COVID-19 Services in Florida's Farmworker Corridor

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COVID-19 elucidated the urgency for health justice advocacy for Latinx farmworkers in Florida. While deemed essential, farmworkers' value was not reflected in policy responses to ensure their protection. The deficiency of culturally and linguistically relevant guidance from government agencies and state restrictions requiring identification for COVID-19 services were impediments to farmworkers accessing care. Equitable access was increased through a statewide *promotor de salud* network delivering health information and mobilizing vaccine partners to serve farmworkers at high risk of COVID-19 infection. (*Am J Public Health*. 2024;114(S1):S74–S77. <https://doi.org/10.2105/AJPH.2023.307454>)

Latinx farmworkers are a highly vulnerable population in the United States, facing poverty, language barriers, and lower literacy.¹ These communities are particularly vulnerable to COVID-19 because of myriad disparities, limited access to health care, and workplace exposure.^{2,3}

INTERVENTION AND IMPLEMENTATION

In response to the inequities confronting Latinx farmworker communities in Florida, the Cosecha (Harvest) network was created with Alianza Americas, a national network of migrant-led organizations, and four community-based organizations across Florida: Rural Women's Health Project (RWHP), Redlands Christian Migrant Association, WeCount!, and Women Working Together. Alianza Americas oversaw administrative and data coordination

while the RWHP developed materials and trained *promotores de salud* (*promotores*).

To address the inequities and lack of information in Spanish and indigenous Mayan languages,⁴ the four-member Cosecha network hired 73 Latinx, multilingual individuals as *promotores*. They received monthly, two-hour trainings via Zoom facilitated by the RWHP on COVID-19 and related health and justice issues, including an in-depth review of materials for the campaign of the month, aimed at reducing COVID-19 transmission and increasing access to the vaccine in their respective counties (Figure A, available as a supplement to the online version of this article at <https://ajph.org>). For example, in conjunction with COVID-19, emotional health, rights to health services, and nutrition were selected via input from *promotor* teams as campaign topics. *Promotores* offered feedback and insights on messaging topics and reported how messaging

was received to guide material style development.

Each campaign's unique materials were adapted from Centers for Disease Control and Prevention's (CDC's) and other health entities' guidance. To account for varying literacy levels and diversity of languages spoken, materials were developed utilizing popular education techniques and testimonial tools, such as *fotonovelas*.⁵ Formats also varied, so each educational tool was unique in size, style, and presentation. This approach was intended to increase engagement with community members who had multiple interactions with a *promotor*. Each monthly campaign included printed and audiovisual pieces in Spanish and indigenous Mayan languages including Mixteco Alto, Q'anjob'al, Kiche, Ixil, and Mam. As part of education outreach, community members were informed of their rights in accessing health services, including interpretation. *Promotores*, as trusted

messengers, provided orientations in Spanish and, when possible, in indigenous Mayan languages. When combined with rights education, these were fundamental keys to intervention success.

To document interactions with community members, *promotores* entered survey data into Typeform, which was coordinated by Alianza Americas. Data included outreach activities, COVID-19 initial series recipients, and COVID-19 booster recipients. Each of these surveys gathered demographics and information regarding COVID-19 vaccination status.

PLACE, TIME, AND PERSONS

The Cosecha project served Latinx immigrant farmworker communities and trained *promotores* in rural areas across 21 counties in Florida between November 2021 and July 2022. Within the rural areas served, there are an estimated 94 193 farmworkers.⁶ During program planning, we analyzed CDC/Agency for Toxic Substances and Disease Registry's Social Vulnerability Index (SVI)⁷ and vaccine hesitancy estimates⁸ in June 2021. In the counties planned to be served, SVI ranged from 0.33 to 0.99, with more than half of the counties considered to be areas of high vulnerability. The vaccine hesitancy estimates for those who were "hesitant or unsure" ranged from 16% to 27%, with more than half showing greater than 20% rates of hesitancy. Based on the review of data, the counties with increased vaccine hesitancy had lower vaccination rates.

PURPOSE

The statewide network was established with three objectives: (1) reduce COVID-19 transmission among farmworker communities through educational

campaigns, (2) facilitate access to COVID-19 testing and vaccinations, and (3) construct a unified network of *promotores de salud* across 21 counties in Florida.

EVALUATION AND ADVERSE EFFECTS

After each training, *promotores* provided outreach through diverse activities. A total of 6680 activities were documented that included outreach at churches, worksites, vaccination events, health fairs, and home visits. Through these efforts, *promotores* reached 25 276 farmworkers and their families, of which 19% (4787 individuals) became vaccinated (Table 1). Those vaccinated were surveyed on factors involved in delaying vaccination; 34% reported hesitancy-related issues (i.e., not feeling at high risk for COVID-19 infection, fear of vaccines), while 24% were challenged because of transportation, inability to take off work, or inadequate childcare. Forty-five percent of those getting the vaccine stated it was a result of a health worker providing information to them.

At the conclusion of the Cosecha project, *promotores* were surveyed on their interest to proceed in the role; 69% were interested in continuing either full-time or part-time, while 25% could not continue because of other employment.

SUSTAINABILITY

Funding for personnel has been the greatest barrier to sustaining Cosecha's unified network; however, the work has continued throughout the partner organizations to differing levels. The RWHP has continued outreach at the same levels as during the Cosecha project and continues to offer COVID-19-related materials to the original partners.

Two organizations became more firmly committed to this model of work.

WeCount! hired a health justice coordinator who continues working on infectious diseases along with other topics of concern to their membership. Women Working Together learned the value of building a team of *promotores* and has achieved other funding, of varying amount and duration, for their team of paid and volunteer *promotores*. Alianza Americas conducts monthly health education sessions to its national membership, in which the four partner organizations in Florida participate. Efforts continue to maintain Cosecha as a statewide network serving farmworker communities, but this project has engaged each of the partners in the value of health as part of the services they provide. Health systems recruited by the Cosecha network have valued lay health workers as critical messengers and lean into those new bridges to serve Latinx farmworker communities.

PUBLIC HEALTH SIGNIFICANCE

Building a unified state network permitted the Cosecha project to address challenges unique to Florida. Conflicting federal and state COVID-19 guidance and the lack of continuity in delivery of services from county to county hindered farmworker communities from accessing COVID-19 services.⁹ As disparities in access persisted, combining COVID-19 with other health and justice education generated a meaningful dialogue between *promotores* and farmworker communities. Utilizing testimonial media provided a platform to contextualize public health COVID-19 prevention steps as well as other key health messaging. This provided opportunities to address the challenges of

TABLE 1— Participants, Activities, and Outcomes of Cosecha Project Impact: Florida, November 2021–July 2022

	No.
Cosecha network member organizations ^a	5
Counties served in Florida’s farmworker corridor	21
<i>Promotores de salud</i>	73
<i>Promotores de salud per outreach organization^b</i>	
Redlands Christian Migrant Association (RCMA)	50
Rural Women’s Health Project (RWHP)	7
WeCount!	9
Women Working Together	7
Monthly trainings provided to <i>promotores de salud</i>	9
Materials developed by RWHP ^c	28
<i>Outreach activities conducted by promotores de salud, by organization</i>	
RCMA	412
RWHP	2243
WeCount!	3770
Women Working Together	255
<i>Individuals reached through activities, by organization</i>	
RCMA	12 101
RWHP	3809
WeCount!	6411
Women Working Together	2955
<i>COVID-19 initial series vaccination recipients, by organization</i>	
RCMA	1457
RWHP	116
WeCount!	641
Women Working Together	695
<i>COVID-19 booster recipients, by organization</i>	
RCMA	965
RWHP	299
WeCount!	217
Women Working Together	393

^aAlianza Americas, RCMA, RWHP, WeCount!, and Women Working Together.

^bAlianza Americas’ role did not include *promotores de salud*.

^cMaterials were developed in six languages: Spanish, Mixteco Alto, Mam, Q’anjob’al, Kiche, and Ixil.

COVID-19 preventive measures that are not feasible for farmworkers—for example, social distancing while living in close quarters or mask use in oppressive outdoor labor that is often characterized by extreme heat and weather conditions. Strategies used by the Cosecha project provided realistic options to the reality farmworker communities faced.

The Cosecha network built crucial partnerships with vaccine-administering entities; local clinics, health departments, pharmacies, and universities were mobilized to provide vaccinations in farm community settings. Sensitizing them to the cultural and linguistic needs of farmworker communities was critical as they are best positioned to serve as medical homes for farmworkers

and their families. Obtaining support for events outside of traditional workday schedules and locations, eliminating identification requirements, and engaging linguistically capable staffing increased vaccinations of farmworkers and their families. Without the steadfast collaboration of the network, we would not have been able to fill the gaps of vaccine delivery. The Cosecha project decreased COVID-19 vaccine hesitancy, bridged community members to trusted services, and modeled community engagement mobilization strategies—all vital pathways to equalizing public health services for Latinx farmworker communities. **AJPH**

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CONTRIBUTORS

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CONFLICTS OF INTEREST

The authors have no conflicts of interest to disclose.

HUMAN PARTICIPANT PROTECTION

This study is exempt from institutional review board review as it was funded by a federal institution, per Common Rule 46.104 Exemption 5 under the Code of Federal Regulations.

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