



The University of Vermont

Migrant Health Programs including Bridges to Health/Puentes a la Salud and Huertas, is a program of UVM Extension that supports increased access to health and health related services and activities for migrant workers regardless of documentation status. Our Community Health Workers help coordinate appointments which may include setting up the appointment, arranging for transportation, ensuring access to an interpreter, and support with paperwork. The program also collaborates with health care service providers to ensure access to affordable, accessible, and linguistically and culturally appropriate care. Migrant Health Programs serve all counties in Vermont though the Open Door Clinic (ODC) in Addison County coordinates all health care related needs for migrant adults in the county.

Migrant workers work long hours supporting Vermont's many different farm types and are increasingly filling a labor shortage in the hospitality and service industries as well. Many times they are working upwards of 60 to 80 hours a week. On the farms, they face occupational hazards due to the arduous physical labor and work with animals and machinery. In hospitality and service industries they put in long hours on their feet with minimal breaks. Whether they are sick, injured or seek preventative health care, migrant workers tend to face numerous barriers accessing health care including a lack of transportation. While some employers and their families are willing and able to provide transportation for their employees, others may not have time, resources, or desire to do so. Workers are sometimes hesitant to ask their employer for transportation, concerned they might be seen as a burden. As a result, we depend on the good will and kindness of community volunteers who believe that all living in Vermont should be able to access health care, especially when sick or injured. Our biggest needs when it comes to volunteering are either as a Health Access Transportation Volunteer or a Food and Essential Needs Volunteer. Here are a few examples of how transportation has been a barrier for migrant workers in your community:

Lila* was five months pregnant and had not been seen by an OBGYN. She did not have transportation and did not want to “bother” her employer by asking him to transport. A Health Access Transportation Volunteer decided to lend a hand and Lila made it to all of the prenatal appointments from that point on. She now has a healthy, active 2 year old. The health access volunteer says she has enjoyed constantly improving her Spanish.

Pedro* had painful urination for over a month before he decided to seek out care. He was embarrassed thinking that if he asked his employer for a ride, his employer would judge him. A Health Access Transportation Volunteer brought him to the appointment while another picked him up. He was put on antibiotics and felt much better as a result.

Daniel* woke up with a throbbing toothache. He took some over the counter pain medication, but it didn't seem to work. He was hoping the pain would pass but was also worried because he had heard that people can get really sick or sometimes die from an untreated tooth infection. He suffered for a week waiting for his day off to go into the clinic. A Health Access Transportation Volunteer brought him in, helped him get his prescription for a tooth infection, and brought him back to get the tooth pulled a week later.

Edna* ran out of the antibiotic her doctor had prescribed for a breast infection. She didn't have transportation to be seen or pick up a prescription. The doctor called it in to a local pharmacy and a Food and Essential Needs Volunteer picked it up and brought it to her.

Laura and her household sometimes has limited access to food, particularly fresh produce that is culturally familiar. Laura signed up for a CSA and food staples project with the help of a Community Health Worker. A Food and Essential Needs Volunteer delivers the CSA and food staples to Laura's household every two weeks as part of a route in which the volunteer delivers to 5 households.

Our health access and essential needs volunteers have helped hundreds of individuals access health and health related services. Their tremendous support has helped reduce the amount of time a worker or their family member waits to go to the doctor and at times helps prevent serious complications as a result of not being seen by a health care provider. That said, we tend to call upon our volunteers 1-4 times a month, depending on need as well as the volunteers schedule and preferences.

If you are interested in learning more about volunteering with Bridges to Health, please contact Claire.

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