HISTORIC PANDEMIC WORSENS VULNERABILITY OF ESSENTIAL WORKERS WHO FEED US ALL

The COVID-19 Farmworker Study (COFS) provides strong evidence that the current pandemic amplifies existing injustices that have long been endured by California farmworkers. Farmworkers and organizations that work with them have powerful and productive suggestions for improving the safety of workplaces and communities. Preliminary findings from data collected through surveys of farmworkers during the pandemic reveals the following:

1. Farmworkers experience dramatic loss of work and income during the COVID-19 pandemic.
2. Farmworkers lack healthcare access and experience fear using medical services.
3. Farmworkers are vigilant about COVID-19 prevention practices outside of the workplace.
4. Farmworkers report low numbers of employers providing masks and face coverings.
5. Farmworkers have valuable suggestions to improve workplace COVID-19 prevention efforts.
6. Farmworkers are systematically excluded from important safety-net programs, which heightens their vulnerabilities and those of their family members.

Recommendations by the COFS Team for swift policy action based on this critical data can be found at the end of this brief.
Introduction

During the current COVID-19 pandemic, all essential workers put themselves at risk when they show up for work in grocery stores, hospitals, packing houses, and agricultural fields. Farmworkers face additional risks because they lack critical social safety net support afforded to other members of society, despite working in one of the most dangerous industries in the country. The COVID-19 pandemic has exacerbated existing vulnerabilities farmworker communities endure in their living, working, and health conditions, as we describe here.

California employs an estimated 800,000 farmworkers. Most work at seasonal jobs—rarely holding full-time, year-round work—and earn an average annual income of less than $18,000. An estimated 90% of California farmworkers were born in Mexico and approximately 60% are unauthorized to work in the United States. According to the U.S. Department of Labor’s National Agricultural Worker Survey (NAWS), less than one-third of California crop workers have health insurance. Although there is a striking lack of data about farmworkers who identify as indigenous and who speak indigenous languages from Mexico, there is a large population of these workers in California.

Identifying disparities in risk is important for allocating resources to prevent, identify, and treat COVID-19–related illness for already vulnerable subgroups. The COVID-19 Farmworker Study (COFS) identifies risks for California’s vulnerable farmworker communities. COFS is a collaboration between community organizations and researchers across California, Washington, and Oregon facilitated by the California Institute for Rural Studies. The goal of COFS is to collect critical information about how the COVID-19 pandemic is affecting farmworkers.

Survey Methods

Over 900 phone surveys were conducted with farmworkers throughout California between May 19 and July 20, 2020 by a team of 60 surveyors managed by six community-based organizations with connections to farmworker communities: Alianza Ecologista, Central California Environmental Justice Network, Centro Binacional para el Desarrollo Indígena Oaxaqueña, Comité Cívico del Valle, Lideres Campesinas, and the Farmworker Care Coalition/Vista Community Clinic. Regional survey targets were established based on historic labor demand during the months of May and June. Survey topics included COVID-19 prevention at the workplace, transportation to/from work, housing conditions, access to medical care, and economic difficulties. We report here on both quantitative and qualitative data.

4 Agricultural Employment in California
collected in the survey. Community-based organizations contacted individuals in 21 counties to invite them to participate if they worked in agriculture during the pandemic (defined by COFS as starting in California on March 15, 2020). Interviews were conducted in the language preferred by the respondent. Findings are reported using a partial data set cleaned and analyzed as of July 21, 2020; subsequent briefs will be based on the complete dataset.

Through close partnership between community-based organizations and academic and non-academic researchers, this rapid-response farmworker study was designed and launched, with over 900 surveys conducted, and initial data cleaning and analysis completed in three months. Meaningful collaboration between these partners was critical to connect with and give voice to those most affected and will be relevant for translation of findings into action at the local and regional level.

**Participant Characteristics**

Of the 745 surveyed farmworkers represented by the partial data set used for this data brief, 49% were men and 51% were women. The average median age was 38; 69% are married or in a marriage-like relationship; 65% have children 12 years old or younger. Over 50% of the farmworkers surveyed work in the San Joaquin Valley (Figure 1), which accounts for about 50% of agricultural production in California and is the region with the largest number of farmworkers statewide. Throughout the state, nearly 60% of farmworkers reported working for a farm labor contractor (Figure 2). Eighteen percent of farmworkers completed the survey in a language indigenous to Mexico (e.g. Zapoteco, Mixteco, Triqui); almost all the remaining surveys (81%) were conducted in Spanish. Although we did not ask survey participants to identify themselves as indigenous, we know that many who responded to the survey in Spanish (particularly the 300 people surveyed by Centro Binacional para el Desarrollo Indígena Oaxaqueña) are likely to identify as indigenous.

![Figure 1. Respondents by Region](https://www.labormarketinfo.edd.ca.gov/file/agric/ca-ag-employ-map-2019.pdf)
Key Findings

1. Farmworkers experience dramatic loss of work and income during the COVID-19 pandemic.

Low-income households have been associated with higher cases of COVID-19. Factors such as pre-existing health conditions, crowded living conditions, and exposure to air pollution, have been identified as risk factors that disproportionately affect low-income, disadvantaged populations. COVID-19 has led to unprecedented job losses and has not spared farmworkers in an essential industry. Nearly half of the survey respondents (46%) reported decreased farm work time and subsequent income losses during the pandemic. Of those reporting a decrease or loss of work, 63% provided additional information on the cause. Reported reasons for lost work time included employer-based decisions (e.g. decreased market demand, COVID-19 workplace disinfecting and employee testing) and worker concerns (e.g. lack of childcare and fear of contracting the virus).

Workers who resumed work, even after initial losses of work and income, reported that they continued to experience inconsistencies or reductions in work time and income.

I don’t know [why we lost work time], those were foreman decisions. They didn’t explain why, but sometimes it was because they didn’t need the fruit in the packing house.

---

Tulare County citrus worker

We were told by our employers we would have to wait to work because there are too many workers in one area. This was at the beginning of March through April, but now we are starting to work a few more hours.

Fresno County vineyard worker

Despite fears around contracting COVID-19, some farmworkers reported having no choice but to continue working.

I stopped working at the beginning of the pandemic for my daughters. They didn’t have anyone to take care of them and they didn’t have school. I decided to stay home until things calmed down a little. It scared me to go to work because I didn’t want my daughters to become infected. I’m returning to work out of necessity.

Tulare County field and packinghouse worker

2. Farmworkers lack healthcare access and experience fear using medical services.

Healthcare access is a critical starting point for responding to COVID-19. Yet, farmworkers report that their access to healthcare continues to be limited due to costs (e.g. loss of work, cost of care, no insurance) and fear of the government and medical systems. Slightly more than half (54%) of respondents reported costs, lack of insurance, and/or lack of sick leave as significant barriers that would prevent them from accessing healthcare, even if they were ill. Almost one quarter (24%) of respondents mentioned fear as an impediment to seeking care, a problem which preceded and has been exacerbated by the pandemic. A small group of these respondents reported that their fear was related to possible COVID-19 exposure in a healthcare setting, but three times as many respondents attributed their fear to distrust of government agencies and mistrust of the healthcare system (Figure 3).
Figure 3. Fear was a barrier for nearly one-quarter of all respondents

Farmworkers are unlikely to have employer-sponsored insurance, but lack of insurance isn’t the only barrier to receiving medical care. A range of federal, state, and healthcare system policies also make access to care unwelcoming and confusing. These barriers are heightened for those who are undocumented and may be more reluctant to seek health care for fear of being discovered and deported. Respondents shared details about how long-standing, structural barriers and systemic failures prevent them from achieving equitable access to healthcare.

I don’t have insurance and it’s very expensive to get treatment or be hospitalized. I don’t have a large amount of income and in case of death by coronavirus the costs would be larger. This is a scary situation.

Coachella Valley farmworker

I would be afraid to go to the hospital with my daughters because I could be blamed for neglect if I didn’t take them soon enough. Then, they would separate us and deport us.

Kern County orchard worker

3. Farmworkers are vigilant about COVID-19 prevention practices outside of the workplace.

Nearly all workers (90%) reported that COVID-19 had prompted them to change the ways they protect their families when they arrive home from work (e.g. washing hands, changing clothes, showering).

When I get out of work, I wash my hands. I go pick up my son and I wash my hands (again) and his hands before we get into the car. Once we arrive at home, my son and I remove our shirts, shoes, and socks outside. I put them inside a plastic bag and I wash them separately. Then we take a shower.

Kern County orchard worker

The survey data strongly show that workers are taking additional steps, including physical distancing and isolation practices, to reduce the spread of the virus among their families and community.

Everything changed, we can’t go out anywhere, not even family gatherings.

Riverside County farmworker
My son stopped going to school and he’s at home all day. I can’t visit my family. I can’t have a lot of contact with them. For my social life, I can’t be out on the streets, at the stores, only the basic necessities. Many places are closed.

Monterey County farmworker

The pandemic impacted this year because none of the children can go to school and the children that graduated weren’t able to celebrate. My children can’t go outside, go to the park, outside to play because they can’t gather together in groups of more than 10 people. This affects their health.

Santa Maria indigenous-language speaking farmworker

4. Farmworkers report low numbers of employers providing masks and face coverings.

While some agricultural employers are making efforts to protect workers, farmworkers reported that only slightly more than half (54%) of worksites provided face-coverings. A significant number (43%) of worksites did not provide face-coverings at all and a smaller number (4%) of worksites provided face coverings on a short-term basis or the masks provided did not meet the needs of the entire workforce (Figure 4). For example, numerous workers reported receiving masks once over several weeks or only once at the beginning of the pandemic, but additional ones had not been provided. This preliminary data brief may not reflect more recent efforts to provide face-coverings to farmworkers. However, this data points out inconsistencies in face-covering provision by employer type and low rates of distribution that deserve focused attention.

They gave masks out, but not enough for 80 people. They were only enough for 10 people.

Madera County Orchard worker

At the beginning they gave us a mask, but as of about a month ago, we haven’t received any more.

Ventura County farmworker

Our survey also documented that 95% of farmworkers report wearing face coverings in the workplace, which indicates that workers purchase their own masks and provide their own face coverings.

Where I work, masks are not given out. They tell us that everyone has to take their own. They tell us that if we want to work, we have to have one or else there is no work. Out of necessity to work, we buy them. Sometimes they are not inexpensive or it’s hard to find them.

Santa Maria indigenous-speaking farmworker
Of the three types of employers, farm labor contractors were the least likely to provide these resources (Figure 5).
5. Farmworkers have valuable suggestions to improve workplace COVID-19 prevention efforts.

Farmworkers suggested many ways that employers could improve workplace conditions for COVID-19 prevention, including improving cleaning and hygiene practices (13%), enforcing compliance of COVID-19 guidelines (18%), improving the workflow to maximize physical distancing at work (24%), and providing PPE and COVID-19 information (25%) (Figure 6). The survey also found that farmworkers recognize that workplace safety requires collective effort to implement COVID-19 precautions that they can support with self-monitoring and peer pressure. While the large majority of suggestions were targeted at employer changes, it is clear that farmworkers understand that they also have a role to play in workplace safety. Thirty percent of respondents noted that their co-workers could improve their adherence to COVID-19 precautions. One third of respondents reported that their employers were taking all necessary precautions to prevent COVID-19 spread at work, or chose not to share recommendations.

Figure 6. Farmworker workplace safety recommendations

Farmworkers shared experiences from worksites that were implementing promising safety practices which could be replicated at other sites.

7 Several open-ended questions asked workers about COVID-19 precautions for the worksite. These questions included: “What changes can take place at work to ensure physical distancing?” “What safety measures can be made at your worksite?” “What other comments would you like to share about your worksite?” The data from these three questions were combined and coded to create this chart. Of the 745 workers, 499 of them provided a total of 831 recommendations.
When we empty the blueberry bins, someone is putting disinfectant on our hands. There is also a white streak that they put [on the ground] and we have to wait before we empty the bins since we can’t crowd around like before. Another thing they do is that before going to work they take our temperature and if it is 2 or 3 degrees higher they no longer allow the person to enter work. As a precaution to other workers. The contractor tells us that if we feel bad that we better stay home because if we get to the job site they will take our temperature and they will not let us into work. There is a lot of caution now at work.

Kern County farmworker

At work every day they talk with us about taking precautions against coronavirus. They remind us that if we feel sick or we have a fever we should stay home for a week. We have two shade shelters to prevent crowding, we work in separate rows so we can keep our distance. We have to wash our hands every time we exit and enter from a break, we take 4 breaks, we also have to wash our hands when we enter and exit the bathroom.

Tulare County farmworker

6. Farmworkers are systematically excluded from important safety-net programs, which heightens their vulnerabilities and those of their family members.

Farmworkers reported a range of challenges in their ability to meet basic needs including the lack of childcare, food insecurity, and exclusion from financial assistance programs.

The pandemic has made big impacts because our children aren’t going to school and they are missing a lot. We have to buy more food and we don’t receive any programs because we are undocumented and we don’t qualify. Even with the State help, not all of us qualify... I’m undocumented, I don’t qualify for any help, and I have a family that does need help, that worries me.

Santa Maria indigenous-speaking farmworker

We were out of work for two months and we were evicted and had to find another place to live. We visit churches to also receive food from some organizations. It’s worrisome to have children studying at home because they can get behind and the cost of childcare has increased too.

San Joaquin County orchard worker
Recent analyses have documented that the farm workforce is aging. While financial hardship is pervasive among Latino seniors, elder farmworkers are more likely to have limited English and have double the risk of chronic conditions. Moreover, undocumented seniors are ineligible for Social Security benefits which doubles their likelihood to live in poverty or make them reliant on day-to-day earnings. The pandemic increased this vulnerability for these elder workers.

I want them to create a program that helps people over 60 since they do not receive any economic support in situations like this. Many people my age don’t have the requirements to receive support from the federal government even in retirement. This pandemic has hurt my life a lot because I’m in debt with necessary expenses when I lost work time for 40 days.

Madera County grape & nut farmworker

Conclusion and Recommendations for Action

COFS data reveals that farmworkers are experiencing significant negative impacts from COVID-19 and that these impacts exacerbate long-standing vulnerabilities of this essential workforce. Farmworkers deserve support as they weather the challenges of the COVID-19 pandemic, including reduced employment hours, job loss, difficulty self-quarantining, bearing the burden of providing their own face-coverings, and the hardship of caring for family members who are ill or out of school. These supports should include direct payments, unemployment insurance, food assistance, housing support for COVID-19 isolation, counseling and other social services. Additionally, COFS proves the importance of engaging community-based organizations in farmworker-oriented research, study design, outreach, data collection and dissemination of findings, which is especially important during this historic pandemic.

The social and economic costs of doing nothing, making unfunded and unenforced recommendations, or issuing voluntary guidelines include adding significant burdens to an already vulnerable population and jeopardizing the foundation of our food system. We must make considerable investments and take rapid, proactive measures to protect farmworkers at their places of employment, en route to their jobs, and in their home communities. This action is necessary to ensure the viability of the food system all Californians depend on, the economic prosperity of the food and agricultural industry in California, as well as our ability to fight the pandemic by slowing community spread of COVID-19.

---


As the farmworker respondents to the COFS survey told us, meeting this challenge will take an unprecedented collaboration by all of us. We urge state, county and agricultural industry leaders, producers, and employers to carefully consider these preliminary COFS findings and implement the following recommendations drawn from them, in close consultation with farmworkers and community-based organizations.

1. Provide expanded income and safety net support for farmworkers, regardless of documentation status.

2. Expand health care access and coverage for farmworkers and other undocumented workers, including prioritized access to free COVID-19 testing.

3. Strengthen Cal/OSHA enforcement and worksite auditing activities, including random inspections.

4. Ease the barriers for farmworkers to report COVID-19 related complaints and simplify access to support services.

5. Involve workers in the development and implementation of workplace safety plans related to COVID-19.

6. Mandate reporting and timely public release of data on COVID-19 cases by occupation and industry by both employers and county public health officials.

7. Provide extensive, culturally-relevant training and education to agricultural employers, supervisors, farmworkers (provided in indigenous languages), and trusted community-based organizations on workplace safety practices during COVID-19.

8. Involve trusted community-based organizations in the design and implementation of expanded safety-net programs for farmworkers, indigenous, and immigrant populations.

Next Steps for COFS
Topic-specific data briefs will be released in the next two months and will be focused on workplace conditions, transportation to/from work, housing conditions, access to medical care, and other basic needs. Farmworker surveys in Washington and Oregon will begin shortly and will enhance our understanding of the experience of farmworkers in the west during the COVID-19 pandemic. A second phase of the study is underway in California and will further explore the social and economic effects of COVID-19 on farmworkers, their families, and communities.

Contact: Ildi Carlisle-Cummins (icarlisle-cummins@cirinc.org)
Website: http://covid19farmworkerstudy.org/
About the COVID-19 Farmworker Study (COFS)
COFS is an extremely collaborative research project with participation from a wide group of community-based organizations, researchers and policy advocates. A full list of project partners and supporters is available at www.covid19farmworkerstudy.org. The study has been generously supported by the UC Davis Western Center for Agricultural Health and Safety, The California Endowment, The California Wellness Foundation, The 11th Hour Project of the Schmidt Family Foundation, and the San Joaquin Valley Health Fund and The Center at Sierra Health Foundation.