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MANAGING THE DISTRESS OF MIGRANT FARMWORKERS: LESSONS LEARNED FROM THE MIDWESTERN UNITED STATES

Duška Knežević Hočvar,¹ Sanja Cukut Krilić¹¹

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ABSTRACT

Managing the Distress of Migrant Farmworkers: Lessons Learned From the Midwestern United States

In a labor-intensive sector such as agriculture, safety and health-related risks are high. They are particularly pronounced for migrant farmworkers, and various health-related programs tailored to their particular needs have been developed. Twenty semi-structured interviews with health and safety professionals and researchers working on these issues in four US federal states show that the most important issues affecting this group are insecure or undocumented legal status, poor working and living conditions, and inadequate access to support services. The importance of building “communities of migrant farmworkers” and direct engagement with this group was emphasized.

KEYWORDS: migrant farmworkers, agriculture, distress, mental health, support programs

IZVLEČEK

Obvladovanje stisk delavcev migrantov v kmetijstvu: Spoznanja s srednjega zahoda ZDA

V delovno intenzivnem sektorju, kot je kmetijstvo, so varnostna in zdravstvena tveganja visoka. Posebej izrazita so za delavce migrante v kmetijstvu, zaradi česar so bili razviti različni programi, povezani z njihovimi specifičnimi potrebami. Avtorici v prispevku z dvajsetimi polstrukturiranimi intervjuji s strokovnjaki na področju zdravja in varnosti ter raziskovalci, ki se ukvarjajo s temi temami v štirih zveznih državah ZDA, pokažeta, da na migrante v kmetijstvu negativno vplivajo zlasti negotov ali nedokumentiran pravni status, slabi delovni in življenjski pogoji ter neustrezen dostop do podpornih storitev. Izpostavljen je bil pomen vzpostavitve skupnosti delavcev migrantov v kmetijstvu ter neposrednega dela s to skupino.

KLJUČNE BESEDE: delavci migranti v kmetijstvu, kmetijstvo, stiske, duševno zdravje, programi podpore

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INTRODUCTION

In the last two decades, an increasing number of researchers of various academic backgrounds have focused their studies on migrants working in agriculture and the “need for migrant labor” in this sector, particularly in Canada, the United States, and Europe. This may be due to the shift, particularly after World War II, toward increasingly intensive industrialized agriculture, characterized by the growing replacement of human labor with capital-intensive tools dependent on fossil fuels, the consolidation of farmland, and the increasingly centralized control over the distribution of food resources (Thu and Durrenberger, 1998 as quoted in Thu, 1998). The increasing corporatization of agriculture cannot be overlooked. It puts even landowners in a vulnerable position in the context of the agricultural treadmill—the trap of demanding constant and increasing investment to remain competitive (Thu, 1998; Holmes, 2013a; Holmes, 2013b; King et al., 2021; Cukut Krilić & Knežević Hočevar, 2022; Younker & Radunovich, 2022). At the same time, agriculture is inextricably linked to the physical space, the quality of the land, the season, and the climate. The nature of agricultural work largely determines the need for short-term, temporary, and, as a consequence, precarious employment arrangements for farmworkers (Sargeant, 2009; King et al., 2021). In this context, migrant farmworkers are a specific group because they “encounter stressors typically associated with the immigration experience in addition to those specific to a migrant workers’ lifestyle” (Hovey & Magaña, 2002, p. 276). Breaking the bonds to family and friends, various types of discrimination, language difficulties, substandard housing, poor working and living conditions, insufficient access to health and other forms of care, and the lack of social and economic resources are among the most common risks that migrant farmworkers experience (Hovey & Magaña, 2002; Dueueke et al., 2015; Ramos, 2018).

Furthermore, in labor-intensive sectors, such as agriculture, the risks of work-related accidents and the development of health-related conditions and diseases are especially high (ILO, 2022). When attempting to explain such risks, researchers often focus on the question of how specific policies and institutional processes generate and shape individual health experiences and patterns of disease (Parker et al., 2000; Bronfman et al., 2002; Carruth et al., 2021). In this respect, the term vulnerabilities may not be appropriate to describe the heterogeneous experiences of migrant farmworkers, as their vulnerabilities may be contextual and often reversible (Molenaar & Van Praag, 2022). Acknowledging such differences between migrant farmworkers, existing research has also pointed to the need for psychosocial, community, and other health-related interventions and programs tailored to the particular needs of migrant farmworkers, focusing on prevention, assessment, and treatment of mental health difficulties (Hovey & Magaña, 2002).

This article discusses the safety and health-related issues and risks of migrant farmworkers in the United States and the ways various psychosocial and community programs and initiatives are used to manage these risks. First, the authors examine

the conditions of recruitment and legal status of migrant farmworkers that influence their experiences as migrants to examine the main migration-related risks for experiencing distress. Then, we focus on the importance of working and employment conditions in contemporary US agriculture and point to some characteristics of health and safety-related services and interventions available to migrant farmworkers to show how such services might be helpful to migrant farmworkers. Our focus revolves around the question of under what circumstances support programs and initiatives that address health and safety in agriculture might be recognized as beneficial for migrant farmworkers. The empirical section offers the reflections and observations by the interviewed health and safety professionals and researchers on the observed vulnerabilities of migrant farmworkers and their experience of designing and implementing the programs to manage their distress in the US federal states of Iowa, Minnesota, Nebraska, and Wisconsin. In the conclusions, the reader will learn about the main dilemmas of such programs that might not necessarily be geared toward improving the structural vulnerabilities of these workers but could improve particularly migrant farmworkers' sense of community and direct engagement of this group in the implementation of such programs and thus indirectly contribute to their health and well-being.

MIGRANT FARMWORKERS: INSECURE RECRUITMENT, STATUS, WORKING AND LIVING CONDITIONS, AND WAYS TO MANAGE THEM

Especially when policymakers and employers perceive workers as “low-skilled,” they often allow them to enter a particular country only temporarily to cover specific labor shortages, thus avoiding the social and economic “cost” of migrant integration (Triandafyllidou, 2022). The conditions of migrant recruitment worldwide increasingly feature enforced transience and temporariness of status, which contributes to limited mobility and the precarious status of migrant workers (Horvath, 2014; Yeoh, 2020).

Historically, in the United States, the *Bracero* program was the established way of recruiting migrants to work in agriculture. Since World War II, it has brought workers from Mexico and Puerto Rico to this country and enabled Mexicans to enter the United States temporarily—for up to six months—to aid farmers. In contrast to previous forms of Mexican migration to the United States to work in agriculture, the designers of the program no longer viewed migration as a private matter and business but as regulated by official recruitment programs of a bilateral nature that also tried to regulate minimal standards of working and living conditions of migrant farmworkers (Durand, 2007). At present, the recruitment system in agriculture is based on the H-2A visa program, which again points to the deficiencies of temporary recruitment schemes that already became apparent during the operation of the *Bracero* program. For instance, when the employer concludes an employment

contract with the worker, he has almost total control over the worker, who must follow his instructions and accept the offered level of remuneration for the work. The H2-A scheme ties the worker to one employer, who can send the worker back to his country of origin if he does not meet his expectations or if he complains. At the same time, workers' access to legal aid is generally difficult or insufficient (Carrasquillo, 2011; Southern Poverty Law Center, 2013). In addition to temporary recruitment schemes, agriculture in the United States is also heavily reliant on undocumented migrant labor. The National Agriculture Workers Survey 2019–2020 has found that approximately 44% of farmworkers are undocumented immigrants who lack legal work authorization and permits. Accounting for the fact that these numbers may be even higher due to fear of self-reporting undocumented status, even according to these modest estimates, around one million migrant farmworkers in the United States are undocumented (Farmworker Justice, 2022). Promoting only temporary and insecure forms of employment for migrant farmworkers also means increasing their structural vulnerabilities, which we can also observe in the creation of hierarchies of working conditions and types of work between different groups of agricultural workers (Holmes, 2013a; Holmes, 2013b).

Such recruitment policies and insecure legal status also affect the working and living conditions of migrant farmworkers and their safety and health at the workplace. A recent review of the literature on the health of migrant agricultural workers (Urrego-Parra et al., 2022) from 1998 to 2021 has focused on European countries. The researchers have found that the most common agricultural accidents—such as falls, cutting, and machinery injuries, which are also commonly associated with animal and pesticide handling—can go unreported due to a fear of deportation, employer retaliation, and unemployment. Migrants have limited ability to access support and services and assert their rights. They generally face poor housing and living conditions, and they often report feelings of non-belonging and alienation from the countries of reception.

In the United States, research findings about barriers to accessing care and support have been quite similar to those mentioned above (Hovey & Magaña, 2002; Holmes, 2013a; Holmes, 2013b). Faced with challenges particular to migrants, service providers and researchers developed different interventions and programs that could improve service delivery in the areas of health, safety, and well-being.¹ Bloss et al. (2022) assessed the US literature on migrant and seasonal farmworkers' health, focusing on health promotion interventions, special populations within these interventions, and the use of community health workers. They found that only 8.2% of the 1,083 studies described or evaluated a health promotion effort to intervene in the well-being of this group. Even a smaller number of studies (4.2%)

1 Prior to 1988, when a significant change occurred as a result of the public policy conference convened by the National Coalition of Agricultural Safety and Health (N-CASH), after which numerous policy recommendations and reports were published, health issues of farmers and farmworkers received little policy attention (Thu, 1998).

examined populations such as Indigenous farmworkers or sexual minority farmworkers. They also identified outreach and community health workers for non-profit organizations and community health centers among the crucial service providers to migrant farmworkers.

In their research of farmworkers from Mexico to the United States, Hovey & Magaña (2002) emphasize the need for programs that target various facets of health to be available at times and places that are convenient to migrant farmworkers. This could mean, for instance, that they are available at labor camps on evenings and weekends or that outreach efforts could be performed during the off-season in agriculture. The migrants from Mexico whom they encountered in their research also expressed interest in the establishment of support groups and informational workshops where they could discuss their experiences and different ways of coping with distress. The migrants also mentioned the importance of *promotoras*—current or former migrant farmworkers—that act as liaisons between community health agencies and migrant farmworkers. They could provide health information and support to the migrant farmworker community. Similarly, in the study of migrant agricultural workers in southern Italy living in informal settlements (INTERSOS in Tagliacozzo et al., 2020), interlocutors often spoke of the need to target existing health services to their needs, such as developing “proximity services” that are provided where the target population lives and works. Mobile clinics or mobile services, such as a health care service bus that takes professionals to workers, could be useful (Hovey & Magaña, 2002; Pysklywec et al., 2011; Tagliacozzo et al., 2020) since the areas where migrant agricultural workers are located are often remote and inaccessible by public transport. According to some studies (Hovey & Magaña, 2002; Donlan & Lee, 2010), local churches could also be considered as potential sites of health prevention and outreach programs and can promote social networking and dissemination of information to migrant farmworkers. Cohen & Caxaj (2022) report on the results of an intervention in Canada, which their research team developed with community partners to meet the various health, social, and health needs of migrant agricultural workers. Both migrants and service providers highlighted the complex and multi-layered nature of the support needs of this population. In addition, migrant workers emphasized the importance of trust and rapport with service providers and discussed the value of face-to-face visits. Nevertheless, the topics of precariousness and risks associated with asserting certain rights and poor living and working conditions emerged consistently during interviews with migrant farmworkers.

Migrant farmworkers are vulnerable, especially due to recruitment policies that condition their insecure and often undocumented status. Different layers of discrimination, language barriers, inadequate access to support services, and generally poor living and working conditions contribute to their distress. Various programs targeting this particular group have been aimed at improving access to various services in the communities where they live and at directly involving them in the implementation of such programs in order to build trust and rapport. In order to examine the

views of health and safety professionals and researchers on support programs for migrant farmworkers, the first author conducted field visits at the Centers for Agricultural Safety and Health in the US federal states of Iowa, Minnesota, Nebraska, and Wisconsin.

IN THE FIELD: US MIDWEST SAFETY AND HEALTH PROFESSIONALS AND RESEARCHERS ON MIGRANT FARMWORKERS' SUPPORT PROGRAMS

Field visits at the centers for agricultural safety and health

As part of a bilateral research collaboration between Slovenia and the United States in 2022, the first author spent three months at the Center for Agricultural Safety and Health (I-CASH) in Iowa City. It was expected that the bilateral visits would help to reflect together on the benefits and pitfalls of transferring “best practices”—following the example of I-CASH to address the apparently universal farming stress phenomenon. On the one hand, in the United States, there is a long tradition of agricultural medicine and several programs to support and advise farmers in distress, such as those offered by I-CASH. On the other hand, while Slovenia has an efficient public health system, there is a lack of agricultural medicine or appropriate assistance for the well-being of farmers and farmworkers. This bilateral cooperation aimed to reflect jointly on the effectiveness of culture-specific responses to the seemingly universal farming stress phenomenon.

The first author's host, a director of I-CASH and lecturer in the College of Public Health at Iowa University, prepared a detailed schedule of her activities at I-CASH. She also arranged for her to make brief visits to three other NIOSH² Centers for Agricultural Safety and Health in the Midwest region to learn more about their approaches to reducing the plight of farmers and farmworkers. These were the Central States Center for Agricultural Safety and Health (CS-CASH) in Omaha, Nebraska, the National Farm Medicine Center (NFMC) in Marshfield, Wisconsin, and the Upper Midwest Center for Agricultural Safety and Health (UMASH) in Minneapolis, Minnesota.

During these visits and in Iowa City, the first author conducted semi-structured (in person or online) interviews with approximately twenty health and safety professionals and researchers about managing farmer and farmworker distress, and about half of them focused on the programs or interventions specifically designed for immigrant farmworkers (see Table 1: Research Participants). First, the research participants were informed about the objectives of the bilateral collaboration and gave informed consent. Then, they answered the interview questions about their

2 NIOSH is the abbreviation for the National Institute for Occupational Safety and Health.

observations and understanding of distress in an unpredictable agricultural context and how to deal with it effectively, how they believe farmers and immigrant farmworkers understand their dangers, risks, and uncertainties, and what they do when they are under pressure or in distress, what psychological support (programs) is available to them, and whether it meets their needs. All interviews were recorded and transcribed verbatim. The collected material was processed according to the principles of thematic analysis (Krippendorff, 2004).

Interviews conducted in Iowa:
Director of I-CASH and lecturer at the College of Public Health, University of Iowa (in person, December 2022)
Member of the staff of I-CASH (in person, November 2022)
Member 1 of the Advisory Board at I-CASH and professor at the College of Public Health, University of Iowa (online, November 2022)
Member 2 of the Advisory Board of I-CASH and professor at the College of Public Health, University of Iowa (in person, December 2022)
Member of Ag Health & Alliance (in person, October 2022)
Professor at Grinnell College, Iowa (online, November 2022)
Assistant professor of Health Management, University of Iowa, and member of the Iowa Rural Health Association (online, November 2022)
The Ohio State College Behavioral Health Specialist (online, November 2022)
Interviews conducted in Nebraska:
Associate professor in the College of Public Health, an ergonomic engineering specialist at the University of Nebraska Medical Center (in person, October 2022)
Professor of Water, Climate and Health in the College of Public Health, University of Nebraska Medical Center (in person, October 2022)
Community outreach specialist, Central States Center for Agricultural Safety and Health (CS-CASH), College of Public Health, University of Nebraska Medical Center (in person, October 2022)
Associate professor and researcher, Center for Reducing Health Disparities, College of Public Health, University of Nebraska Medical Center (online, December 2022)
Member of the AgriSafe network in Omaha (online, October 2022)
Interviews conducted in Wisconsin:
Associate scientist at the National Farm Medicine Center (NFMC) of the Marshfield Clinic Research Institute (in person, October 2022)
Member of Wisconsin Farmers Union, Disparity to Parity and Farmer Angel Network (in person, October 2022)
Farmer from a dairy farm (in person, October 2022)
Farmer wellness program coordinator, Department of Agriculture, Trade and Consumer Protection, Wisconsin Farm Center (in person, October 2022)

Interviews conducted in Minnesota:
Project outreach coordinator in the Department of Agriculture at the University of Minnesota (in person, October 2022)
Project coordinator and instructor for Promoting the Safety and Health of Immigrant Dairy Workers Program Upper Midwest Agricultural Safety and Health Center (UMASH) (in person, October 2022)
Associate professor, College of Allied Health and Nursing, Minnesota State University Mankato (online, November 2022)
Rural mental health specialist and consultant (online, October 2022)

Table 1: Research Participants

The following themes that emerged from the analysis show why immigrant farmworkers are a reality in industrial agriculture and whether or not they benefit from occupational safety and health programs.

Immigrant farmworkers: reality, visibility, and the fear of speaking up about working conditions

The first observation concerns the direct, indirect, or absent focus of the interviewees on migrant farmworkers. Interlocutors from the Iowa region, working in agricultural health and safety or studying the issue as part of their research projects, do not focus their activities such as mental health resources and literacy, education about hazards and health and safety in agriculture, training programs, suicide prevention, farm stress, etc. on migrant farmworkers, but on rural health, farm operators, farm owners, their family members, people that work with farmers (e.g., pharmacists, physicians, nurses, veterinarians, public health people, safety managers) or farming communities. However, they were all aware of the research and statistics that show immigrant farmworkers at a very high risk of suicide—not a surprising fact, as one behavioral health specialist explains: “What I know is that they have very physically demanding, very stressful jobs. Sometimes, they don’t even speak English, which makes it even harder, and they do not get paid much.”

Indeed, in the agricultural Midwest region, and particularly in Iowa State, industrial agriculture is by far the dominant form of agriculture; only one percent of the land in Iowa is farmed in alternative ways. Characteristics of industrial agriculture include not only the increasing use of heavy mechanization, chemical inputs, and ever-larger acreages or livestock but also the shortage of labor. “Migrant farmworkers are, therefore, a reality in Iowa as well,” observes an assistant professor of health management. Her research focuses on rural health and access to healthcare services. She was not familiar with all aspects of the intersection of race, ethnicity, and agriculture. However, she believed many programs should be open to all, “including workers from Mexico or the Congo or other countries who come to work either as immigrants or temporary migrants.” She mentioned programs at community health

centers that offer services specifically for migrant workers. Like other Iowa interviewees, she pointed to a particular group, Proteus, which works with agricultural workers and has some of the community health centers that provide services to migrant workers. Indeed, Proteus's website assures that the group provides affordable health care, educational assistance, and job training to farmworkers and their families (Proteus, 2023), but this seems only an online promise.

Similarly, a collocator from the Ag Health & Alliance regretted that their international non-profit organization does not focus on migrant farmworkers but on safety culture, including mental health training, for the "next generation of agriculture"—18-to-25-year-olds. They work mainly in college settings where they do not see migrant farmworkers unless, hypothetically, they are the second generation of parents who could afford to send their children to college. They did not see many migrant farmworkers because, she assumed, none of them reached that level of education. She also expected that a Hispanic person who chose to go to college and had parents who were farmworkers would be interested in management and higher positions because they wanted to climb the career ladder. However, she was aware that there are migrant workers in the state of Iowa as well, particularly Mexicans working in hog barns, where farmers are said to have very good relationships with their migrant workers and really value them.

The last interviewee from Iowa who indirectly referred to immigrant farmworkers was the professor at the College of Public Health and the current director of the Great Plains Center for Agricultural Health. In one of her international research, she investigated not only pesticide exposure among Syrian refugees working in agriculture in Lebanon but also the psychosocial stressors to which these workers were exposed that led to their chronic illnesses. Using the model of job demands and control, she tried to explain why the worst jobs are those where you have too many demands and no control over how they are carried out. She believed that this model is also applicable to farmers and farmworkers, as the agricultural workplace has shifted from a family farm to an employer or workplace that brings with it new regulations, new rules, and new requirements that can be very stressful in themselves. Alternatively, in her words: "A workplace brings new demands because suddenly you find yourself in a hierarchical structure with a big company that doesn't even come to the work site but is based in another city or even another country and tells you how to manage and what to do. So that's a stressor." She also mentioned the Proteus group working with immigrant farmworkers or with employers but also acknowledged, "We [researchers] don't do as good a job here in Iowa as we did in Oregon, for example, working directly with farmworkers." She emphasized that they are aware that immigrant farmworkers, especially the young ones, do not have the power to say, "We are going to use personal protective equipment or implement a policy to wear seat belts when we are driving around in the truck or on the tractor." So, if you educate them about the dangers in their workplace, they can at least focus

on what they can do and control in these limited circumstances: “They’re told what to do, and if they resist, they could get fired.”

While migrant farmworkers were rarely the focus of the Iowa interviewees’ research and occupational safety and health activities, the opposite was true for the interlocutors from three other agricultural safety and health centers and colleges in Omaha, Wisconsin, and Minneapolis. Cattle feedyards, big farms, and meat-processing industries in these regions are predominantly staffed by male immigrant farmworkers, primarily from Mexico and, to a lesser extent, from Guatemala, El Salvador, Nicaragua, Cuba, South Africa, etc. A researcher involved in the Feedyard Safety Project explained that migration patterns are changing in the United States. In the past, seasonal workers took three different routes: one group went up the West Coast, then one group went up the East Coast, and one group went up the Midwest. This is no longer the case today. In Nebraska, for example, “point-to-point” migration is replacing “follow-the-crop” migration. In his words: “There are very, very few migrants who move from crop to crop, season to season. We have people who come directly from Mexico to Nebraska to do seasonal work in the cornfields, such as corn ginning or seed sorting, and then go back to Mexico. So, they have an H-2A visa, which is our agricultural guest worker program.”

The interviewees from CS-CASH described the work of farmworkers in the agri-food industry in general as very dangerous and under hazardous conditions. They are exposed to high demands, long hours, great time pressure, and many repetitive tasks. They do not get enough rest breaks between shifts or workweeks, but what makes immigrant farmworkers even more at risk is the fact that they receive little to no safety training from their employers. For example, if they have access to personal protective equipment, they probably have not been told to use it or how to use it. In addition, many of the workers have only a limited level of formal education in their home countries. When they come to a new place, a new life, a new society, a new culture, a new language, and a new system, all these circumstances make it even more difficult for them. A specialist in ergonomic engineering went on to emphasize that immigrant workers usually come from much smaller farms and feed yards in their home countries, and now they have to look after 100,000 cattle:

People come here and want to be cowboys and so on. Ranchers are the ones who do not usually grow crops; they mainly work with animals and often in large areas. When it comes to animal handling, being hit by an animal often does not result in fatal accidents, but there are still a lot of injuries. There is much more material on the safety of machinery than on the safety of working with animals.

According to most CS-CASH interviewees, immigrant farmworkers also struggle with cultural and language barriers, logistical obstacles, and difficulty accessing and navigating services that may be available to them, particularly mental health support. An associate professor in the Department of Health Promotion who has spent most

of her career doing research with immigrant, migrant, and seasonal farmworkers illustrated this very vividly:

Distance is a real barrier. To get from where I live in the eastern part of my state [Nebraska] to the western part of my state is an eight-hour drive just to cross my state. In my state, most of the services are in urban areas. In the rural areas, there is not very much. Therefore, if you want to access services or support, you might have to take a day off work, get a ride into town, and then find someone to go to. I mean, that is a whole lot of challenges. Therefore, I would say that there are not a lot of people who have access to formal mental health support services.

Interviewees acknowledged that people who are different from the mainstream are highly discriminated against, especially if they do not speak the language and have an uncertain immigration status. They admitted that many farmworkers in the agri-food industry do not have US work authorization and are, therefore, considered undocumented. These people fear being arrested and deported because of their immigration status. They fear being seen and speaking out about unfair treatment and dangerous workplace conditions. One researcher who has studied immigrant workers in meat processing plants mentioned that the workforce comes from twenty to thirty different countries, speaking different languages and coming from different African countries where war may be raging. These workers come to the United States because they are not safe in their home country and mostly out of economic necessity.

The first author learned that many migrant farmworkers were very afraid of being seen by the authorities during a visit to a dairy farm organized by her host—a researcher from the NFMC. The farm operator began by explaining that his farm, which has around 450 dairy cows, requires huge investments if it is to survive. He had to hire farmworkers from Mexico to milk cows in two shifts and work in the fields. However, the farmworkers themselves did not want to be officially health-insured and visible for fear of deportation. The farmer explained that working with cows is very dangerous and that if a farmworker is injured, he will cover all the costs of his health, as he cannot survive without farmworkers. When asked if it would be easier for him to hire a local worker without a migrant background, he replied: “I would hire anyone who comes to my door, but they [the locals] are usually gone by lunch.” The farmer confirmed that farmers are desperate for labor these days. If they cannot find US workers, they turn to immigrant labor because they have no other choice. They usually rely on guest worker visa programs and build housing for farmworkers on the farm. The farmer also mentioned that there are numerous requirements that an employer must provide—housing or food or cooking facilities, transportation, etc.—and that he has to plan this into his operating budget. Even though this farm was presented as an example of good relations between a farmer and the farmworkers, the host-researcher emphasized that this cannot be generalized: “Some farms

have really good relations with their workers and try to do their best. They take care of them, get to know them, and sometimes even travel to the workers' home countries to meet their families. Others do not care; they do not play by the rules and try to maximize their profitability at the expense of the workers. So, it's very diverse."

Interviewees from Marshfield (NFMC and the Wisconsin Farm Center mental health group) and Minneapolis (UMASH) listed numerous support services and materials for farmers and farmworkers (e.g., mental health fact sheets, mental health counseling, Agri-Stress Hotline) that are available free in English and Spanish. However, as noted above, undocumented farmworkers rarely access these services and materials. Compared to other US industries where an employer has a number of obligations—overtime pay, minimum wages, permission to organize, etc.—none of this exists in agriculture. However, in the following section, we describe how to reach out to immigrant farmworkers to get them to attend support programs to alleviate their precarious conditions or stress-related illnesses.

Doing the good stuff: building immigrant farmworkers' community

Despite numerous mental health programs developed for farmers and farmworkers, interviewees working directly with migrant farmworkers did not believe that they attended programs such as Mental Health First Aid. Partly for the reasons mentioned above (e.g., the fact that they receive little to no health and safety training from their employers or are not encouraged to use such materials or are not informed how to use them) and largely because they are afraid to speak openly about their working conditions and health. This does not mean, however, that immigrant farmworkers are without any support or are reluctant to participate in programs to address dangerous workplaces and stress-related illnesses. A researcher from the Department of Environmental, Agricultural & Occupational Health at CS-CASH (Omaha) involved an anthropologist in one of his immigrant safety projects to better understand the safety and health of immigrant farmworkers on feed yards and examine their perspectives, needs, experiences, and culture. The main goal of this four-year project was to create safety training materials to use on the ranches and to inform employers and workers about workers' compensation insurance in case of injury and illness. The ethnographer was asked to work directly with people in the feed yard "to get into their heads and figure out why you do this and why you don't do this," according to the interviewee. In the Zoom interview, the anthropologist said that these workers are exposed to very dangerous circumstances and that they have the highest injury rate among other feedyard workers. He talked about his field research and shared photos of their tired hands, stitched injuries on various parts of their bodies, broken ankles, their faces marked by chronic pain or their tired and worried expressions, but also their small gardens with vegetables and chickens around their shelters, small children and pregnant women—everything that makes them proud and happy despite the hard life. He spoke about the importance of safety culture in

the feed yards but emphasized that the positive aspects of their residential communities are even more important for their well-being.

Another researcher and trainer from the Department of Health Promotion and CS-CASH mentioned the *Bienvenido* (in English: Welcome) program, which migrant farmworkers enthusiastically received. She herself had been researching access to health care and health-related issues for more than ten years. Therefore, she already knew that depression and alcohol use were a problem, and anxiety and tobacco use were high. She had had many conversations with the workers but also had long-standing relationships with service providers across the state to document some of the farmworkers' needs or how they were feeling, "If they are feeling a little isolated or lonely because they have left their families, you know, all these myriad things that they are experiencing." The program was not designed as a research program but as a service to the farmworker community, which includes facilitator training. Her group ran the program four times in four different camps for agricultural workers from 2020 to 2022, adapting it slightly to the target group of seasonal workers. Instead of the original nine lessons and nine weeks, they adapted it and condensed it to five sessions in two to three weeks, as their migrant and seasonal workers spent a maximum of five weeks there. Their team reached the program participants at their housing sites, where they picked them up after they finished their work. She could not hide her satisfaction with the program, which was "experienced as a real joy because we bring the workers together, have a meal together, and talk about what good mental health is." Instead of turning to substances or other risky behaviors, the program's questions were: How do you deal with anger? What does assertive communication look like? What resources are out there to help you? How do we make sure we take time for ourselves and our families? How can we manage stress more positively? The program was conducted entirely in Spanish in an interactive group format that brought together only men who were talking about mental health for the first time in their lives:

The guys come with their little books under their arms and their pencils, ready for class, which is really cool. They are excited to be there; they enjoy the class. The feedback we have gotten from them is that they wish the course were longer and that they really like the topics. Originally, they came because they heard we give you a meal and give you \$60 when you finish the program. That gets them in the door, but they come back because they have so much fun, and they really like it.

The trainer believed that the most important effect is the interaction between the participants. During the lessons, the migrant workers find themselves in a group; they are part of their crew, something they never do: "They joke with each other all day, but they don't know each other on a deeper level. This program allows them to get to know even their co-workers better." So, the main benefits are the sense of belonging to a group and the knowledge of mental health. Finally, building a

community through face-to-face interaction challenges their still fatalistic beliefs about their destiny to live life as it should be.

The interviewee from the Upper Midwest Agricultural Safety and Health Center, who works with dairy workers in Minnesota, explains how to get migrant farmworkers to think about health and safety issues, even if their English or Spanish is poor. As the project coordinator of *La Seguridad* (in English: Safety) and a Spanish-speaking instructor, she said that the dairy farm labor force in the United States is predominantly Hispanic. In the past, dairy farms were mostly family-owned, but now they need to expand, or they are out of business. Family farms or larger farms and corporations can no longer run their business themselves, so they have to hire labor, which is usually immigrant labor. Her job is to seek out dairy farms that have voluntarily chosen to participate in the program; otherwise, access to immigrant farmworkers is impossible. When employers show interest in the safety of their workers, she meets with the workers and discusses possible injuries on the farm and ways to prevent them. She meets workers who work very hard on night and day shifts, usually twelve hours a day, six days a week, and are at high risk of exhaustion and injury due to this workload. Other risks come from working with large animals, machinery, and chemicals—all of which are addressed in their one-hour training course. As many of the workers are not fluent in Spanish, four graphics (units) are discussed with the help of bilingual participants. The first unit is about general hazards on the farm, the second is about handling animals, the third is about machinery, and the fourth is about workers' rights—protecting them whether they have documents or not. "I want them to know about workers' compensation and that they are insured by the law that covers injuries on the farm," she repeated several times.

Her main goal is to get workers thinking and talking by discussing numerous hypothetical examples of risky circumstances in the workplace. Sometimes, they are shy and do not want to talk about their experiences, especially if the owner is sitting over there. In such cases, she gives them examples of other workers in other states: "I just ask them, what do you think happened to them at these dairies? Just ideas, and how do you think it can be prevented? We usually talk this way, but sometimes they do not want to talk because they are tired. But I always try to motivate them." In these conversations, she also learns that an employer usually asks an experienced worker to mentor the new employees and tell them what to do and what rules to follow. Sometimes, newly hired workers have not even worked with cows before, and now that they are working twelve hours a day on a dairy farm, they suffer repetitive motion injuries. So, she reiterated, "It's important that they know that you came here to work, that you want to save money and go home healthy." She concluded by explaining that her activities are always about making workers aware of dangerous working conditions but also about making them feel comfortable either in their workplace or in a discussion group so they can at least build that community.

CONCLUSIONS

While the Midwest interlocutors were aware that not all mental health educational and training programs are focused on migrant farmworkers, but instead on rural health, farm owners, farm operators, farm family members, farming communities, and professionals that work with farmers, they acknowledged the existence of migrant workers as a reality in contemporary agriculture in the United States mainly due to shortages of “local” labor. Particularly, the interlocutors from Wisconsin, Nebraska, and Minnesota emphasized the importance of migrant farmworkers in the context of intensive industrialization of agriculture. At the same time, the interviewees from Iowa spoke about them only indirectly. However, all the interviewees emphasized the shift from family-organized farming to industrial agriculture, bringing about limited control over the performed work and increased work demands in the workplace. Coupled with hazardous conditions of work and exposure to various physical risks, these contribute to increased distress among farmworkers. For migrant farmworkers, language and cultural issues, logistical obstacles, and difficulties in accessing as well as navigating formal mental health support services that may be available to them exacerbate these risks. The interlocutors also mentioned recruitment and other migration-related issues that structurally affect the position of migrant farmworkers. For fear of deportation in cases of undocumented work and/or legal status in the United States, workers may prefer to remain invisible and without any health insurance. In this respect, migration itself could also be a social determinant of health that mirrors the health effects of social structures on migrant farmworkers (Castañeda et al., 2015). The international human rights approach could, therefore, present a valuable legal framework used to advocate for migrant farmworkers and to address their social determinants of health (Ramos, 2018).

In view of the increased competitiveness required in the treadmill of contemporary US agriculture, employers must consider various operating and other costs (such as providing accommodation to migrant farmworkers) to retain these workers. On the other hand, some agricultural employers seek to maximize productivity and profitability at the expense of the workers.

When asked about the main obstacles of migrant farmworkers in accessing (mental) health support services, the interlocutors mentioned farmworkers’ receiving little to no health and safety training and information from their employers and the fear of speaking openly about their working conditions due to their insecure or even undocumented legal status in the United States. Nevertheless, they talked about various incentives that help migrant farmworkers foster a sense of belonging through building a community in their face-to-face educational activities. The result was also their improved well-being not only on farms but also in the communities in which they reside. The interviewees also pointed to the need to work directly with migrant farmworkers to engage in conversations with them, develop interactions, and provide a space where they could open up about their distress. By fostering

such a sense of group belonging, they believed migrants' knowledge of mental health also improved, and sometimes, workers could even act as mentors or facilitators for others in their community. Among others, a goal of such programs was to develop long-standing relationships with service providers and farm owners or operators to ensure they voluntarily participate in such programs and facilitate access to migrant farmworkers. In this respect, one of the study's limitations is that it only covers the perspective of health and safety professionals and researchers on how migrants perceive their health, safety, and community issues, while the migrants' perspective is lacking.

The interlocutors also addressed the effect that physical harm (such as pesticide exposure or various body injuries) had on migrant farmworkers' feelings of distress. One of the directions worth exploring might also be the interplay of mental and physical health since distress might have an impact on physical health and vice versa. In this regard, one of the challenges is for physicians and other professionals to understand the link between physical symptoms (for example, those that result from pesticide exposure for farmworkers) and mental health difficulties of this group, which remains an under-explored topic (Hovey & Seligman, 2006).

Finally, it seems that the complexity and heterogeneity of the needs of migrant farmworkers also require policy commitments. The interlocutors indirectly referred to structural obstacles, mentioning the inadequacies of the temporary recruitment programs for migrant farmworkers that enhance their various vulnerabilities. When structurally based approaches are absent, "exclusion may be normalized or a sense of powerlessness among migrant agricultural workers and their supporters may be instilled" (Cohen & Caxaj, 2022, p. 144). As Thu (1998) has observed, when research and intervention programs simply assume the existence of industrial agriculture and fail to address the role of political, economic, and social factors in the health issues of farmers and farmworkers, educational interventions are hailed as the prevailing solution to these issues despite their often questionable results. On the other hand, it is also worth examining the resilience and agency of migrant farmworkers in the face of their exposure to such structural conditions that often keep them in poverty and are detrimental to their mental health (Dueweke et al., 2015).

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POVZETEK

OBVLADOVANJE STISK DELAVCEV MIGRANTOV V KMETIJSTVU: SPOZNAVANJE S SREDNJEGA ZAHODA ZDA

Duška Knežević Hočevar, Sanja Cukut Krilić

Kmetijstvo je eden od gospodarskih sektorjev, kjer so zdravstvena in varnostna tveganja za delavce še posebej visoka. Ta panoga se pospešeno industrializira in modernizira, zaradi česar so tudi delovni aranžmaji v njej vedno bolj fleksibilni in začasni. Posledično se kmetijstvo sooča s pomanjkanjem delovne sile in vse pogostejšim zaposlovanjem delavcev migrantov. Pri slednjih so poleg običajnih zdravstvenih tveganj za stiske prisotni še pomanjkanje socialnih mrež, različne oblike diskriminacije, jezikovne ovire, pogosto neustrezni delovni in bivanjski pogoji ter pomanjkljiv dostop do zdravstvenih in drugih oblik oskrbe in pomoči. Ni naključje, da je vedno bolj prisotno vprašanje, kako lahko obstoječe programe na področju varnostnih in zdravstvenih tveganj ustrezneje prilagodimo zaposlenim migrantom v kmetijstvu.

Prispevek temelji na tematski analizi dvajsetih polstrukturiranih pogovorov s strokovnjaki in raziskovalci na področju varnostnih in zdravstvenih tveganj v štirih ameriških zveznih državah: Iowi, Minnesoti, Nebraski in Wisconsinu. Avtorici se osredotočata na okoliščine ranljivosti delavcev migrantov v kmetijstvu in na dileme, ki so jih sogovornice in sogovorniki poudarili ob presoji programov za zmanjševanje njihovih stisk. Četudi so se sogovorniki strinjali, da se vsi izobraževalni programi na področju duševnega zdravja ne osredotočajo na migrante, so slednje prepoznali kot resničnost v sodobnem kmetijstvu v ZDA, ki se sooča s pomanjkanjem delavcev. S prehodom na industrijsko kmetijstvo se je dodatno zmanjšal nadzor nad delom, povečale so se delovne zahteve in različna fizična tveganja v delovnem okolju, s tem pa tudi stiske delavcev v kmetijstvu. Ena od temeljnih ovir za delavce migrante je njihov neurejen oziroma negotov pravni status v ZDA, zaradi česar pogosto želijo ostati nevidni tudi službam za zagotavljanje pomoči in se bojijo spregovoriti o svojih delovnih in življenjskih pogojih. Sogovorniki so v zvezi s tem poudarili, da ni pomembno le izboljševanje delovnih pogojev te skupine, temveč tudi neposredno delo v skupnostih, kjer ti delavci živijo, ter omogočanje pogovorov o njihovih stiskah. Izpostavili so tudi pomen dela z lastniki in upravljalci kmetij, ki so lahko pomemben člen pri zagotavljanju dostopa do delavcev migrantov. Sogovorniki so se dotaknili tudi strukturnih omejitev, zlasti pomanjkljivosti začasnih programov zaposlovanja delavcev migrantov v kmetijstvu, ki prispevajo k izključenosti in nevidnosti te skupine delavcev.

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MIGRATION STUDIES

TEMATSKI SKLOP / THEMATIC SECTION

DUŠEVNO ZDRAVJE V KONTEKSTU MIGRACIJ / MENTAL HEALTH IN THE CONTEXT OF MIGRATION

Sanja Cukut Krilić

Mental Health in the Context of Migration: Introduction to the Thematic Section

Dino Manzoni, Liljana Šprah

The Impact of the COVID-19 Pandemic on the Mental Health of Refugees: A Systematic Literature Review

Mojca Vah Jevšnik

Navigating Integration and Emotional Distress During Vulnerable Stages of Life: The Case of Slovenian Repatriates From Venezuela

Martina Bofulin

Three's a Crowd? Language Assistance in Mental Healthcare Settings in Slovenia

Maja Gostič

Mental Health and Psychosocial Support for Forcibly Displaced People: Insights From Slovenia

Duška Knežević Hočevar, Sanja Cukut Krilić

Managing the Distress of Migrant Farmworkers: Lessons Learned From the Midwestern United States

ČLANKI / ARTICLES

Milan Mrđenović, Matjaž Klemenčič

Kongresnik John Blatnik v boju za državljske pravice v ZDA

Klara Kožar Rosulnik, Marina Lukšič Hacin, Marijanca Ajša Vižintin

Mednarodno kroženje in izmenjava najvišje izobraženih ali beg možganov?

Francesco Della Puppa

Practicing Multi-Sited Ethnography: Reflections, Strategies, and Tools for Qualitative Research on Transnational Migration

Yassir Ali Mohammed

Sudanese Migration and Destination Countries: Motivation Factors and the Role of Gender

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