More of the same? Migrant agricultural workers’ health, safety, and legal rights in the COVID-19 context

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Abstract
In this paper, we report on research findings from a cross-sectional survey with 143 primarily Mexican migrant agricultural worker respondents in British Columbia (BC), Canada. Participants reported high rates of experiences of threats and violence by employers, limited faith in the follow-through of both Canadian and country-of-origin authorities when reporting concerns, and a unanimous lack of knowledge in how to file a claim of a legal matter (e.g., housing, human rights violation). Most participants also reported that they believed they would receive poorer health care in relation to their Canadian counterparts and that their privacy would not be protected. While certain indicators, such as knowledge of resources for transportation, translation, and legal advocacy were higher than previous research would suggest, most participants did not feel confident that more serious issues would be addressed if they sought help.

Our results suggest migrant workers in BC report similar, or even higher, rates of experiences and expectations of poor social support, legal protection, and health care in comparison to prior research in this region and elsewhere. While further research would be required to confirm this hypoth-

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esis, the impact of COVID-19 on this population is undeniable. Our findings highlight the need for greater regional and provincial commitments to fund targeted services for migrant agricultural workers that address the unique barriers they face. Additionally, greater attention and funding must be dedicated to supporting this population to navigate and access services that already exist. Together, dedicated initiatives could make a major difference for this workforce. Federal investments in support services of this nature would ensure the sustainability of such efforts. In addition, reforms to temporary migrant agricultural programs, such as open work permits and immediate access to permanent residence, would better afford workers opportunities to access the rights and protections that are currently out of reach for many.

**Keywords**
Migrant Agricultural Workers, Health and Health Care, Safety, Legal Rights, Service Navigation, Social Support, Barriers, Seasonal Agricultural Worker Program (SAWP), British Columbia (BC), Canada

**Introduction**
The arrival and continued presence of COVID-19 has drastically changed the world. While all people have been affected, certain populations have been uniquely disadvantaged. In the Canadian context, this is particularly true for migrant workers involved in food processing and agriculture. With a focus on the migrant agricultural worker population in the interior of British Columbia, our research team administered surveys to 143 workers to identify their accounts of health, social, and legal challenges. This cross-sectional data, gathered during the 2020 agricultural season, suggest that this workforce is significantly disadvantaged in both accessing and navigating services and protections. These findings largely confirm prior research conducted with this population in this region and elsewhere (Hennebry et al., 2016; Colindres et al., 2021). Ongoing scholarship illustrates the unique systemic constraints that make it difficult for this population to seek help, navigate the healthcare system, or advocate for their rights. Our current findings lend weight to the notion that policy and program reforms, together with community-based interventions, are required to support this population and uphold their rights. Under the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families, the United Nations has asserted that migrant workers are a group requiring dedicated protection (United Nations, 1990). This group is uniquely at risk of exploitation and abuse due to the political and economic factors that precipitate migration and the lack of wide recognition of their rights and protections when working abroad. Despite a reliance on migrant labor in upholding food systems in the country, Canada has yet to sign onto and ratify this convention (United Nations, 2014).

One in five agricultural workers in Canada is a temporary foreign worker (Statistics Canada, 2020). Entering Canada under two main streams, the Seasonal Agricultural Worker Program (SAWP) and the Temporary Foreign Worker Program Low-Wage Agricultural Stream (TFWP-LAS), these tens of thousands of workers are essential to Canada’s agricultural system and food supply. Their importance was highlighted when Canada’s prime minister quickly announced an exception for migrant workers in agriculture to travel amidst international border closures in the spring of 2020, once the COVID-19 pandemic was identified as an international threat (Dubinski, 2020).

Scholars have long documented migrant agricultural workers’ political, economic, and social marginalization in Canadian society. Among the key concerns identified are (1) unique barriers workers face accessing and navigating service systems; (2) work permits specific to one employer and temporary migration status that make it difficult for them to refuse unsafe work, report workplace abuse, and/or assert their rights; and (3) their virtual “deportability” should they become injured or raise concerns about their workplace treatment, living conditions, or basic human rights (Basok et al., 2014; Vosko, 2016, 2018; Caxaj, Cohen, Buffam et al., 2020; Caxaj, Cohen, & Marsden, 2020; Walia, 2010). Amidst these complex challenges, migrant agricultural workers are typically placed on farms in rural regions with limited ethno-cultural diversity, often resulting in racialized stigma and subtle and
overt experiences of discrimination. Despite the importance of their labor to the agricultural industry, racialized farmworkers are often left out of broader narratives extolling the virtues of locally produced food from family-run farms (Guthman, 2008). Taken together, we have previously argued that these conditions create lived and perpetual structural vulnerabilities, akin to “relentless border walls” (Caxaj & Cohen, 2021a), as they mark this workforce as temporary and expendable noncitizens by virtue of their ethno-cultural and migratory status. Furthermore, workers’ access to rights and services that they are afforded “on paper” are not fully accessed or actualized as a result of their entrenched social, political, and often geographic marginalization (see for example McLaughlin et al., 2014).

During the COVID-19 pandemic, thousands of migrant agricultural workers were exposed to the virus, with this group having one of the highest infection rates compared to other occupational sectors (Faraday et al., 2021). Since 2020, several migrant agricultural workers have died during their time in Canada, with at least seven individuals dying during the post-arrival quarantine period and several more since then (Caxaj et al., 2022; Mojtehedzadeh & Keung, 2021). Crowded and unsanitary conditions in employer-provided housing were major factors contributing to migrant workers’ susceptibility to contracting COVID-19. A lack of adequate ventilation, an insufficient number and condition of bathroom facilities, as well as a lack of enforcement of provincial housing standards have been well documented across Canada during the pandemic and before (Cole, 2020; Haley et al., 2020; Tomic et al., 2010). Another major barrier for this workforce when facing health challenges is that employers may act as gatekeepers and are often the only resource available for workers who require medical care (Caxaj, Cohen & Marsden, 2020; Hennebry et al., 2016; Landry et al., 2021). During the COVID-19 pandemic, this problematic dynamic was exacerbated by public health units that regularly liaised with employers and industry as their primary method to access migrant agricultural workers.

In this research article, we report on key findings of a cross-sectional survey conducted in 2020 with migrant agricultural workers in the Okanagan Valley region of British Columbia. The purpose of this study was to provide a description of migrant agricultural workers’ help-seeking and service navigation experiences and perspectives across health, social, and legal domains. These findings, considered together with prior research, lend weight to claims that migrant agricultural workers’ health, safety, and wellbeing continue to be poor. During the COVID-19 pandemic, these challenges have only been made more complex. These findings can help identify key service sector gaps as well as help-seeking and policy gaps that contribute to this group’s marginalization, with the aim of delivering services and protections that better meet the needs of migrant agricultural workers.

Review of the Literature

Access to Health Services
Researchers have previously documented migrant agricultural workers’ lack of access and limited ability to navigate existing health services. Factors include language barriers, geographic isolation, and social stigma and/or discrimination (Caxaj & Cohen, 2021b; Caxaj & Díaz, 2018; Hennebry et al., 2016; Pysklywec et al., 2011). Most notably, migrant agricultural workers are uniquely dependent on employers to help them with transportation and often language translation when seeking healthcare (Colindres et al., 2021; Hennebry et al., 2016). Furthermore, this relationship is normalized by program authorities, including foreign consular officials and federal agencies. Most practically this enables employers to act as gatekeepers and to wield their discretion in terms of whether a worker should or should not pursue care or report a workplace injury (Caxaj & Cohen, 2019; Cohen & Caxaj, 2018; Hennebry et al., 2016).

Scholars have also noted that occupational health protections offered to workers may exist more “on paper” than in practice as a result of limited measures taken to oversee workplace environments, as well as barriers posed by the nature of migrant agricultural programs (Cole et al., 2019; McLaughlin et al., 2014). Furthermore, previous surveys in Canada indicate that injured workers are unlikely to file reports that would enable them to
receive support or compensation despite their eligibility (Colindres et al., 2021; Hennebry et al., 2016). A prior study in BC indicated that half of respondents expected to receive inferior health care in comparison to their Canadian counterparts (Colindres et al., 2021), with similar findings reported in Ontario (Hennebry et al., 2016). Undermining many workers’ ability to stay safe and healthy are justifiable concerns of repatriation or loss of employment that are inherent to their temporary and conditional status as workers in Canada (Hennebry & Williams, 2015; Orkin et al., 2014). Consequently, some workers may avoid seeking care, accept unsafe workplace conditions, or choose to not report a workplace injury in order to not threaten their relationship with their employer (Caxaj, Cohen, Buffam et al., 2020; Caxaj & Cohen, 2019).

**Social Connectedness and Supports**

Migrant agricultural workers report a limited sense of belonging in the communities where they work and live, and they may experience subtle and explicit discrimination in addition to geographic and social isolation (Caxaj & Diaz, 2018; McLaughlin, 2016; Vosko et al., 2019). Basok and George’s (2021) research suggests that lack of labor mobility and separation from family are two important factors that limit migrant agricultural workers’ sense of inclusion in Canadian society. These findings are consistent with prior research that has documented the profound role of familial separation in contributing to migrant laborers’ poor mental health and wellbeing (Letiecq et al., 2014; McLaughlin, 2009). Others have argued that migrant agricultural workers’ invisibility, and thus marginalization, is necessitated by contradictory agricultural rhetoric that situates food production as an inherently “local” practice (Lozanski & Baumgartner, 2022). Notions of the idyllic “family farm” and agricultural exceptionalism can further normalize substandard conditions and treatments of migrant agricultural workers as necessary sacrifices toward this ideal (Weiler et al., 2016). In sum, the structural elements of the temporary migration program, ideas that invisibilize migrant workers’ role in food production, as well as their limited labor mobility and geographic discrimination and stigma all contribute to their exclusion from Canadian society.

Vulnerabilities linked to migrant agricultural workers’ participation in temporary migration programs structure and limit their social lives and their opportunities to build connections with the wider community (Basok & George, 2021; Horgan & Liinamaa, 2017; Preibisch, 2004). This exclusion is often felt along racial and citizenship lines and may include heightened surveillance and scrutiny, threats, or fear of deportation (Basok et al., 2014; Caxaj & Cohen, 2021a; Caxaj, Cohen, & Marsden, 2020; Faraday, 2012). Furthermore, some employers may control workers’ movements and sociability, practically restricting workers to their employer’s property (Caxaj & Cohen, 2019; Cohen & Caxaj, 2018; Horgan & Liinamaa, 2017; Perry, 2018; Smith, 2015). Fuelled by fears of deportation or other punishments, rivalry and competition—which may even be instigated along racial lines (e.g., workers from one country vs. those from another)—undermine solidarity and support among migrant workers (Binford & Preibisch, 2021; Juárez Cerdi, 2010; Preibisch & Encalada Grez, 2010). This workforce often struggles to establish social networks, since they are afforded few opportunities to build friendships and familiarize themselves with programs and services beyond their worksite (Basok, 2000; Caxaj & Diaz, 2018; Juárez Cerdi, 2010).

Practical difficulties such as language barriers, limited internet coverage, lack of access to a vehicle or public transportation, and poor cell phone coverage can further limit workers’ ability to stay connected to people and resources away from their work site (Cohen & Caxaj, 2018; Cole et al., 2019; Hennebry et al., 2016). Furthermore, formal services that are in place often lack the flexibility and cultural safety practices necessary to ensure this group’s access and comfort navigating these services (Curtis et al., 2019; Schill & Caxaj, 2019). While informal volunteers, churches, and nonprofit services and targeted clinics may provide more appropriate aid to this population, support is often ad hoc, volunteer-run, and/or underfunded. In many regions, these supports are not available at all (Caxaj & Cohen, 2021b; Caxaj, Cohen, Buffam et al., 2020).
Legal Rights and Protections
Migrant agricultural workers face a number of barriers when trying to access legal rights and protections. Their temporary legal status precludes them from full access to the benefits and protections afforded to permanent resident and citizen workers, and their restricted work permits tie them to a single employer and limit their labor mobility and willingness to report abuse (Faraday, 2012; Marsden, 2018; Strauss & McGrath, 2017). Prior research has demonstrated that migrant workers are often unaware of the rights and protections they have, and they lack an understanding of how to file legal claims or complaints (Colindres et al., 2021; Rodgers, 2018). This, combined with a major dearth of legal services aimed at the migrant worker community, results in a real lack of access to justice for this population.

Another major barrier for migrant workers pursuing labor rights is the complaint-driven process for reporting abuse or unsafe conditions that places the burden of reporting on the worker (Caxaj & Cohen, 2019; Marsden et al., 2020; Vosko et al., 2019). Many reporting mechanisms are not available in the languages workers speak, and there is often limited follow-up with the complainant when reports of abuse are made. Workers also may choose not to report workplace violations or abuse due to a fear of losing their employment (Migrant Worker Health Expert Working Group, 2020). These fears are not unfounded as Mexican agricultural workers who supported labor unions have been blacklisted from the program (Vosko, 2016, and hundreds of workers who became injured or ill were repatriated (Orkin et al., 2014). This deportability (Basok et al., 2014; Vosko, 2018) creates a climate of coercion where workers endure abuse, harassment, and labor violation, yet often do not complain or report abuse because of the fear of losing their livelihood. Taken together, these factors create a complex set of obstacles for migrant workers wishing to pursue justice.

Study Background
Cross-sectional data collection in 2020 was developed as one component of an intervention study funded by the Vancouver Foundation that followed migrant agricultural workers’ health, safety, and legal access trajectories over a two-year period. We developed and implemented a support model intervention working closely with settlement organizations and a migrant-rights legal clinic. This intervention consisted of an outreach worker and a legal advocate who provided support and services to migrant agricultural workers in the Okanagan region over two years. The outreach worker focused on building relationships, bridging access to services through information-seeking, referrals, and accompaniment, as well as organizing community-building events and initiatives (e.g., soccer tournaments, workshops). The legal advocate focused on providing legal advice, navigation, and representation to migrant agricultural workers on a variety of legal issues, including injury compensation, human-rights abuses, migratory needs, and employment standards.

Our study faced a few challenges. For one thing, as our baseline data were gathered in 2019, and the second year of data collection was in 2020 at the start of the COVID-19 pandemic, it was impossible to ensure continuity in our sample from year 1 to year 2. Further, comparisons between our cross-sectional data gathered from each year posed challenges because of the undeniable history effects posed by COVID-19 (Mara & Peugh, 2020). Nonetheless, in qualitative research conducted before the pandemic, we captured promising trends in help-seeking by migrant workers that suggest that the availability of these services have made a strong impact on this population (Caxaj & Cohen, 2021c; Cohen & Caxaj, 2022). Yet there is a timely need to capture indicators and the degree of challenges as they have been uniquely experienced by migrant agricultural workers during the COVID-19 pandemic. Thus, we are presenting our 2020 survey results as stand-alone, cross-sectional data that provide important insight into the challenges faced by migrant agricultural workers given our “new normal” of the current pandemic context. In our discussion, we will explore potential implications of these findings in relation to prior survey research conducted with this population, both from Ontario and our own work over the 2019 season.

Research team members all brought significant experience working with migrant agricultural work-
ers and/or Latin American populations. The research assistant, a native Spanish speaker from Mexico with a family history of working in agriculture, led recruitment and survey administration. Co-leads on the project brought over 15 years of combined experience working directly with migrant agricultural workers, both through research and support-service provision. Organizational research partners, including a settlement organization and legal advocacy organization, brought additional support by helping spread the word about the research study and providing feedback and guidance on survey items and knowledge-mobilization strategies following from the analysis.

Research Methods

Survey Instrument

We developed a survey to assess migrant agricultural workers’ experience, knowledge, attitudes, and perceptions of health, social, and legal services in British Columbia. Survey content was developed based on themes identified by prior research of migrant agricultural workers in Ontario (Hennebry et al., 2016), and British Columbia (Caxaj & Cohen, 2019; Caxaj & Diaz, 2018; Cohen & Caxaj, 2018), and input on question development and translation was provided through consultations with migrant agricultural workers and their support networks. The final instrument assessed workers’ experiences using dichotomous yes/no questions. Knowledge, attitudes, and perceptions were assessed using 5-point Likert response scale questions. The team collected feedback on the survey after the first year of data collection (2019), and based on the feedback, added additional questions to the version of the survey delivered the following year. The final survey is available upon request from the authors.

Sample

Between May and November 2020, the survey was administered to a sample of migrant agricultural workers throughout the Okanagan region of British Columbia. A snowball sampling technique was employed, using recruitment by outreach volunteers in public spaces frequented by migrant agricultural workers (e.g., grocery stores, shopping centers). The survey was administered by a bilingual and bicultural research assistant. All COVID-19 safety recommendations applicable at the time were adhered to during these in-person meetings. During survey administration, the research assistant explained the survey instructions and consent information, describing the voluntary and confidential nature of the survey and stressing that help and support services would not be contingent on participation.

Survey Analysis

From the potential participants who were approached (162), 160 agreed to a one-on-one administration session of the survey. Two individuals did not provide consent after the research assistant read the survey instructions and consent information. For the purposes of this analysis, questionnaires that were not repeat respondents in the same year and with fewer than two missing items for each construct were considered valid, for a total of 143 valid surveys. Research assistants entered and coded the survey data to the Qualtrics XM Platform. The data were exported and analysed using SPSS (version 11.5). Frequencies and descriptive statistics were computed for all survey items, and a subset of surveys was rechecked for accuracy in data entry.

Demographics

Our study sample included 158 respondents, from whom 143 responses were considered valid (see Table 1). Of these 143 participants, 3 (2.1%) were male, and 131 (91.6%) were female, with 9 responses missing. The vast majority (n=142, 99.3%) were Mexican workers, with only a single respondent (0.7%) from Jamaica. Of these respondents, 89 (62.2%) identified as Indigenous, 37 (25.9%) identified as “partially Indigenous,” and 16 (11.2%) did not identify as Indigenous. Most participants disclosed that they were participants of the SAWP, while a few came under the TFWP-LAS.

Findings

Discrimination, Violence, and Belonging

Of the 143 participants sampled, 54 (38%) reported experiencing discrimination due to their
More than one in four participants (n=38, 26.5%) reported being threatened or intimidated by their employer. Furthermore, 14% (n=20) reported being assaulted by a workplace superior (employer, supervisor) in the past 5 years working in Canada. Notably, 110 participants (76.9%) disagreed or strongly disagreed with the statement “I feel included in Canadian society while I work in Canada.”

Almost all participants (92.3%) responded that they believed their job in Canada posed a risk to their health, with 69.2% considering this risk large. Of all respondents, 23 participants (16.1%) reported that they had been injured while working in Canada. Of these injured workers (n=23), 12 (52%) reported that they could no longer work that season as a consequence of their injury, 11 (49%) could not sustain the same level of productivity, negatively impacting their livelihood (e.g., hours put in, speed), and 5 (22%) were repatriated, losing their source of income entirely.

Fewer than half of the migrant agricultural workers surveyed (n=62) confirmed that they had received workplace safety training (43.4%). Among these 62 respondents, the length of training varied greatly, with 15 (24.2%) reporting training time of less than 20 minutes, 16 participants (25.8%) reporting 20 to 40 minutes, and 18 (29%) reporting 40 to 60 minutes. Only 13 respondents (21.0%) reported 1 hour or more of training. Of the 62 workers who did receive workplace training, 42 (57.7%) felt that the training prepared them little to not at all to stay safe at work.

Of all the respondents, 93 (65.0%) felt that they would be a little able, or not at all able, to stay healthy and safe while working and living in Canada, with 69 (48.3%) feeling that their employers had done little to nothing to prevent them from being infected with COVID-19. Finally, 10 (7.0%) felt that the restrictions put in place by their employers limited their freedom.

### Table 1. Demographics

<table>
<thead>
<tr>
<th>Factors</th>
<th>n</th>
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<tr>
<td><strong>Sex</strong></td>
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<tr>
<td>Male</td>
<td>131</td>
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<td>Female</td>
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<td><strong>Age</strong></td>
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<td>25–34</td>
<td>29</td>
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<tr>
<td>35–44</td>
<td>56</td>
<td>39.2</td>
</tr>
<tr>
<td>45–54</td>
<td>42</td>
<td>29.4</td>
</tr>
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<td>55–64</td>
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<td></td>
<td></td>
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<tr>
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<td>3.5</td>
</tr>
<tr>
<td>2–3 years</td>
<td>13</td>
<td>9.1</td>
</tr>
<tr>
<td>4–5 years</td>
<td>19</td>
<td>13.3</td>
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<td>6–10 years</td>
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<td>28.0</td>
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<td>11–15 years</td>
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<td>16–20 years</td>
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<td><strong>TOTAL</strong></td>
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<tr>
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<td>98.6</td>
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<tr>
<td><strong>TOTAL</strong></td>
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<tr>
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<td>99.3</td>
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<td>University degree or higher</td>
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<td>1.4</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>143</td>
<td>100.0</td>
</tr>
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</table>

Frequency (n) and relative percentage (%) by category of response. Missing data: sex (9 cases), years worked in Canadian agriculture (2 cases), and self-identification (1 case).
(2.1%) reported not knowing who to reach out to for support with translation, and only 5 participants (3.5%) stated that they did not know who to contact to get help with transportation. Only 6 participants (4.2%) disagreed or strongly disagreed that there were enough support people available to help them assert their rights. Furthermore, well over half of participants (n=87, 60.8%) had received services from a support group during their time in Canada. Support groups were defined as both formal and informal organizations that provided targeted services for migrant agricultural workers. Almost all participants (n=140, 98.6%) agreed that they would continue to stay in touch with a support person, if one were available, until a serious issue was resolved. Yet in striking contrast, of the 143 survey participants, only 12 participants (8.4%) agreed or strongly agreed that they would get the help they needed if a serious problem arose.

**Justice-Seeking, Reporting, and Enforcement**

Of participants surveyed, 125 (88.8%) reported not knowing what rights they had as workers in Canada (e.g., labor or housing rights). Close to 4 in 10 respondents (n=57, 39.9%) disagreed or strongly disagreed that reporting problems to Canadian authorities would contribute to greater protection for themselves or their co-workers. Migrant agricultural workers viewed consular officials from their countries of origin as even less reliable channels for protection, with 80.4% of respondents disagreeing or strongly disagreeing that these officials would take their concerns seriously. Notably, 60.8% of respondents (n=87) reported that their work site had not been visited by a Canadian government inspector in the last 2 years. Almost all respondents (n=140, 97.7%) felt that they did not have the same rights as Canadians while working in Canada. Despite these feelings of marginalization, over half of respondents (n=72, 50.4%) stated that they would report workplace mistreatment or assault to Canadian authorities. Furthermore, 66.5% (n=95) affirmed an intention to report unsafe or unhealthy work conditions to their country-of-origin officials (i.e., consulates). These high rates of intention stood in contrast to the fact that all participants (100%) disagreed with the statement “I know what steps I need to take to start a claim that I am entitled to make [elaborated through examples of workplace injury compensation, housing violations, etc.]”

**Accessibility and Confidentiality of Health Services**

Across several survey items, migrant agricultural workers expressed a lack of faith in the Canadian healthcare system. For example, 91 (63.6%) reported that they did not agree that they would receive the medical attention they needed in Canada. Strikingly, 137 respondents (95.8%) stated that they disagreed or strongly disagreed that they would receive the same quality of care as Canadians, while 108 (75.5%) disagreed or strongly disagreed that healthcare providers understood that their health issues could affect their employment. When asked if they felt confident that their medical information would not be shared unless the respondent provided consent, over half of participants (n=75, 52.5%) disagreed or strongly disagreed. Roughly two-thirds of participants (n=95, 66.4%) disagreed or strongly disagreed that staff, including medical staff, took time to explain next steps in their care or support. The majority of participants (n=125, 87.4%) also reported not knowing how to share information with medical professionals or support people.

Respondents were asked if they had sought medical assistance due to illness or injury in the previous 5 years. Fifty participants (35%) stated they had. Within this subgroup, 7 (15%) paid for their healthcare out of pocket, 33 (66%) reported that their employer or supervisor was their translator when receiving care, and 23 (46%) reported that they had not been afforded privacy from their boss or supervisor during their medical visit. Of the 33 participants who received translation by an employer or employer representative, only two (6%) were offered the option of an independent translator.

**Discussion**

**Discrimination, Violence, and Belonging**

Our data suggest several areas of concern for migrant agricultural workers. Race and country-of-origin–based discrimination and threats or intimi-
ination and assaults by a boss or supervisor were reported by a sizeable group of participants. This is fairly consistent with the results from a survey undertaken during the 2019 season in the same region in which 31.3% of participants reported experiences of discrimination, 21.8% reported threats or intimidation by employers, and 15.1% reported employer or supervisor assault (Colindres et al., 2021). Similarly, Hennebry et al.’s 2016 research in Ontario found that more than 25% of migrant agricultural worker respondents considered their employer to be “aggressive.” Consistency in reporting across regions and time periods suggest that reported rates of discriminatory and violent incidences as experienced by migrant agricultural workers are reliable. Ideally, further research should employ the probabilistic sampling required to indicate the true rate of occurrence of such incidents among this population. Unfortunately, this is difficult to implement with such a transient and marginalized population for which the data are not available from authorities to create an accurate sampling frame.

Particularly concerning is the fact that one in four individuals reported experiencing intimidation or threats by a boss or supervisor, a finding that aligns with prior literature in Canada (Colindres et al., 2021; Hennebry et al., 2016). Furthermore, workers’ fear of deportation (Basok et al., 2014), temporary status, and reliance on employers to “rename” them to return in subsequent seasons illustrate the context of precarity that this population navigates. This may indicate that employers, in both subtle and direct ways, are reinforcing these points of vulnerabilities through threats and intimidations. Incidents of aggression and intimidation have also been observed through research conducted in the United States, with processes of racialization enforcing mistreatment, especially among Triqui Indigenous-identified migrant workers (Holmes, 2013).

Of participants surveyed, 76.9% disagreed or strongly disagreed with the statement “I feel included in Canadian society while I work in Canada.” This finding contrasts with 2019 survey data from the same region, where 57% of respondents reported the same. Qualitative research has documented migrant agricultural workers’ exclusion from wider society, suggesting complex social and political discourses, as well as workplace control and surveillance in reinforcing this marginalization (Caxaj & Cohen, 2019; Cohen & Caxaj, 2018; Basok & George, 2021; Horgan & Liinamaa, 2017; Perry, 2018). Recent accounts of migrant agricultural workers’ heightened surveillance, isolation, and experiences of xenophobic attitudes (Haley et al., 2020; Hennebry et al., 2020) strongly suggest that exclusion may be heightened amidst the COVID-19 context.

Most of our predominantly Mexican sample identified as Indigenous. Consistent with prior research in BC (Otero & Preisbisch, 2015), these demographics represent a higher proportion of Indigenous-identified people than the general Mexican population (Instituto Nacional de Estadística y Geografía, 2015). While we did not prompt workers to identify their specific ethnic affiliation, many did share their Indigenous group, with the most common being Maya, Nahua, Zapoteco, and Otomi. In line with Holmes’ (2013) work that explored the experiences of Indigenous Triqui farmworkers in the U.S., our findings point to the need for further research to investigate how experiences of discrimination, violence, and belonging may be shaped by Indigenous status and specific group affiliations.

**Workplace Risk and Injury Trajectory**

The vast majority of participants believed their work in Canada put their health at risk, with most participants agreeing that this risk was large. This is notable given that research conducted in Ontario with migrant agricultural workers found that 52% of respondents considered their participation in a temporary migrant program to be hazardous to their health, while 72% found not knowing the English language hazardous to their health (Hennebry et al., 2016). Among respondents in our survey who reported experiencing a workplace injury in the past five seasons (n=23), 12 could not work as a result, 11 could not work at the same speed or for the same number of hours, and 5 were sent back to their country of origin (repatriated) and lost their ability to earn an income in Canada. Prior research indicates that medical repatriation is a common occurrence among injured migrant agrig-
cultural workers (Orkin et al., 2014). This poses a serious threat not only to workers’ ability to sustain their source of income in their current season of employment, but also to return to work in Canada in subsequent seasons. Furthermore, migrant agricultural workers face many challenges accessing compensation for workplace injuries, including language barriers, lack of knowledge of entitlements, and employer gatekeeping (Rodgers, 2018; Vosko et al., 2019).

Our prior research also suggests that clinicians often do not initiate compensation claims for migrant agricultural workers, perhaps because of a false assumption that they are ineligible (Caxaj, Cohen, & Marsden, 2020). These many barriers for injury compensation are exacerbated if workers return to their countries of origin. Further research is required to consider the help-seeking strategies employed by this population and the strategies offered by service providers in addressing workers’ reduced income if their productivity is decreased as a result of injury during their time in Canada.

Given that most migrant agricultural workers consider their employment a large risk to their health, investment in prevention strategies in the workplace may be well received by this population and warrant further investigation. This is especially the case in the Canadian context, where occupational health research with this population has largely lagged, especially in comparison to the international literature. Fewer than half of the participants confirmed that they had received any workplace safety training, and the duration of training had varied widely (e.g., from 20 to over 60 minutes). Furthermore, of those who did receive training, most considered it insufficient to keep them safe and healthy at work. This highlights the need for improvements in workplace health and safety training for this workforce. The discrepancy between respondents in terms of their confidence in training received to keep them safe (higher) versus healthy (lower) suggests that a priority assessment of areas of health and safety promotion should be conducted to better assess this workforce’s needs in this regard.

Few participants believed that the COVID-19 restrictions put in place by their employer restricted their freedom. This is notable given the high-profile cases that have suggested the contrary in the news in the past two years. Part of this perception may be explained by qualitative research findings that suggest that because of the precarious and temporary nature of employment, migrant agricultural workers may not only contribute to their own segregation and mobility restrictions, but also, internalize the need for this behavior in order to try to prevent possible deportation (Basok et al., 2014; Perry, 2018). Taking this finding more at face value, it may indicate that migrant agricultural workers accept the need to restrict their movement as a result of the risk posed by COVID-19 to their health and farm operations and their own livelihood.

**Service Navigation**

Our findings stood in contrast to previous research findings (Colindres et al., 2021), since most respondents felt confident that there was someone they could reach out to for help with translation, transportation, or for legal advocacy. Furthermore, while only 15.1% of participants indicated receiving help from a support group in previous surveys (Colindres et al., 2021), 60.8% of 2020 respondents reported the same. This suggests that the launching of the support model intervention (described above; see also Cohen & Caxaj, 2022) provided participants with a viable option for these resources, as no formal services existed in the region beforehand. Further research would be required to test this hypothesis.

Consistent with previously published 2019 data in the region (Colindres et al., 2021, the vast majority of participants (98.6%) also reported that they would continue to work with (e.g., communicate, meet with) a support person until a serious problem was resolved. Yet in contrast, only 12 participants (18.4%) agreed or strongly agreed that they would be able to get the help they needed if a serious problem arose. This suggests that despite the strong visibility of support people across domains of transportation, translation, and legal rights, migrant agricultural workers continued to lack confidence that their serious issues could be addressed. A willingness to stay in touch with support people suggests that workers had intentions to maintain lines of communication even if they doubted the
ability of service providers to address their more complex needs.

These responses raise many questions in terms of what types of support, if any, can address the main challenges and threats faced by migrant agricultural workers. Our prior qualitative examination of migrant agricultural workers’ access to supports and services, both before and during the COVID-19 pandemic, identified three key contextual factors that limited the extent to which supports could be actualized for this group. These factors include: (1) onus on workers to identify and report concerns, and consequently, take on related risk to assert their rights to dignity, health, and safety; (2) paternalism and control that both enforce and normalize employer gatekeeping and surveillance, often shaping how health and social services are offered; and (3) system-enabled vulnerabilities through limited infrastructure and/or funding for existing services and an underinvestment in prevention measures, including enforcement (Caxaj & Cohen, 2021a; Cohen & Caxaj, 2022). It may be that although support persons were known and visible to migrant agricultural workers, larger factors (such as those described above) kept participants from feeling truly able to follow through, or benefit from, the skill sets offered by these support persons.

Other scholars have identified broader political mechanisms, such as deportability, temporary status, limited entitlements and access to rights, and the nature of work permits that are employer-specific (“tied”) and often contingent on employer nomination (“being named back”) as key factors that contribute to workers’ unfreedom during their time in Canada (Strauss & McGrath, 2017; Vosko, 2016). Furthermore, a broader geopolitical climate can also incentivize conformity or silence surrounding health and human rights violations because of a lack of economic opportunities for migrant agricultural workers in their countries of origin (Binford, 2013). Considering these wider factors infringing upon workers’ mobility and freedom during their time in Canada, policy and political solutions are required before this population can more fully benefit from support services.

**Justice-Seeking, Reporting, and Enforcement**

Survey responses indicate that participants held limited confidence in both Canadian officials and their country-of-origin representatives, with 4 in 10 participants lacking confidence that reporting issues to Canadian authorities would lead to greater protection for themselves or their co-workers, and 80.4% disagreeing that foreign consular officials would take their concerns seriously. In comparison to prior research in the region (Colindres et al., 2021), these respondents reported higher rates of disagreement that authorities would address their concerns. Given various accounts of greater precarity and legal uncertainty faced by migrant agricultural workers in the COVID-19 context, limited confidence in authorities’ ability to respond and protect this workforce is not surprising. Prior research in the Canadian context also indicates that a significant number of workers report poor and hazardous working conditions, including limited access to water, toilets, and personal protective equipment (PPE), and lack of protection from pesticides (Hennebry et al., 2016). So long as these conditions persist, hesitation and/or a lack of confidence to report to authorities will further entrench the inequitable conditions faced by this group.

Of particular note, almost all participants felt they did not enjoy the same rights as Canadians (97.7%) and all participants surveyed (100%) disagreed that they had the knowledge to start a legal claim. Despite this, roughly half of participants stated that they would report workplace mistreatment or assault to Canadian authorities, and over half the participants expressed a willingness to report hazardous or unhealthy conditions to their government representatives. Yet the majority of participants stated that they did not know what rights (e.g., labor and housing rights) they had as workers in Canada, raising questions as to what exactly participants would be able to effectively report to authorities. These reports were comparable to prior research in the region (Colindres et al., 2021), although this group of respondents did indicate less inclination to report workplace mistreatment to both foreign and Canadian authorities, and none (versus 11.7%) believed that they had the knowledge necessary to start a legal claim. Consistent with a 2019 survey conducted in the same region (Colindres et al., 2021), our findings suggest that there is a strong willingness among many par-
participants to report concerns to authorities. However, a lack of knowledge of their rights and the procedures required to file claims may pose obstacles to pursuing justice for this group. Likewise, surveys conducted in Ontario with this workforce found that only 22% had been given information about their healthcare entitlements, and 93% reported that they did not have knowledge of workplace safety insurance, creating a fundamental obstacle to them accessing injury compensation (Hennebry et al., 2016). Further research is required to consider the ideal ratio of legal advocates to migrant agricultural workers, and given the complex legal challenges they face, how to implement effective mechanisms, such as cross-sectoral partnerships, to best deliver these services (League et al., 2021).

**Accessibility and Confidentiality of Health Services**

Specific to the group of participants who sought medical care among our sample, the number who reported paying out of pocket for medical procedures and who did not have access to independent translation largely aligned with 2019 survey results (Colindres et al., 2021). Similarly, research in Ontario found that roughly half of workers encountered communication barriers when accessing healthcare, with those not fluent in English relying on co-workers and volunteers to communicate with clinicians (Hennebry et al., 2016). While we asked respondents specifically about relying on a boss for translation, and many confirmed that this was the case, these reports did not perfectly coincide with levels of privacy reported by participants as we would have assumed. Further qualitative inquiries would be required to understand the notion of privacy and confidentiality as understood by this population, and within this unique lived context. It is possible that notions of privacy may be defined differently across cultures, or workers may view employer mediation in healthcare as a necessary component of their restricted work permit.

Overall, survey responses suggested that many participants lacked confidence in the healthcare system and related supports. The majority of participants did not know how to share information with healthcare professionals and support people, and did not believe they would receive the medical attention they required in Canada. In addition, most disagreed that they would receive the same quality of care as Canadians. Respondents also did not believe that healthcare professionals understood that health issues could affect their employment, and lacked confidence that their medical information would be kept confidential. In contrast to cross-sectional survey findings in 2019 with a similar sample (Colindres et al., 2021), survey respondents in this study reported lower expectations and less knowledge across all the above-mentioned indicators. This suggests that these areas have remained areas of concern for migrant agricultural workers and also raises the question about whether this population’s confidence in the healthcare system has decreased. Well-documented factors such as a move to digital and telephone-provided healthcare support, a more burdened healthcare system, and clinician burn-out because of COVID-19 that have negatively affected patient care, especially among underserved and racialized populations, lends credibility to this hypothesis.

Most notably, almost all participants believed that they would not receive the same quality of care as Canadians (95.8%) and stated that they did not know how to share information with medical professionals (87.4%). In comparison, prior research in Ontario indicated that only a slight majority (50.7%) believed that their healthcare treatment was inferior to permanent residents (Hennebry et al., 2016), and prior research in this same BC region indicated that 60.3% of respondents did not believe they would receive the same quality of care as Canadians (Colindres et al., 2021). Likewise, prior Ontario research found that 43% of migrant agricultural workers reported confusion regarding medical procedures related to their health concerns (Hennebry et al., 2016). In the current COVID-19 context, where issues of workplace compensation and income loss are well-known (Jagger, 2022), it is also important to note that 75.5% of participants did not feel confident that clinicians understood that health issues could affect their employment. Findings across these studies indicate that continued barriers in healthcare access, navigation, and confidence in the healthcare system are likely
became more entrenched during the COVID-19 pandemic.

**Limitations, Conclusion, and Implications**

A few study limitations should be considered. Firstly, as the research assistant who conducted data collection became known to participants, it is possible that the rapport that developed could contribute to social desirability bias. Nonetheless, several responses, such as 100% of respondents stating that they did not know how to start a legal claim, would suggest that impression management was not a strong factor (Lajunen & Summala, 2003). Furthermore, it is likely that the relationships of trust established between the research team and the participants were important factors in migrant workers’ willingness to participate and stay in touch with the research team over several seasons. Secondly, the study relied on a convenience sample because this population is hard to reach, and no sampling frame was available to us. While we recruited participants from general spaces where most migrant workers might go (e.g., grocery stores, shopping centers), it is likely that those we were unable to reach experience even greater barriers. Future research should explore options for probabilistic sampling with this population.

Lastly, although we asked participants about their Indigenous identity, no questions probed into experiences that may be informed by this social and political status, and we did not ask respondents to state their affiliation with any specific cultural group, although some volunteered this information. Future research could follow Holmes’ (2013) work and examine the experiences of Indigenous migrant agricultural workers enrolled in temporary work programs in Canada, and seek to understand if particular cultural identities determine differing experiences.

Our findings suggest that the COVID-19 pandemic has negatively impacted migrant agricultural workers’ experiences accessing health, social, and legal services and supports. Furthermore, these results support previous research that has shown that migrant agricultural workers are highly vulnerable and precarious due to complex structural issues and a significant lack of supports and services designed for them. Key areas of concern identified in this research include a high reported rate of experiences of threats and violence by employers, a lack of confidence in both country-of-origin and Canadian authorities, and a unanimous lack of confidence in reporting concerns of a legal matter. The majority of participants also reported a lack of faith in the healthcare system, responding that they expected that care provided would be inferior to their Canadian counterparts and that their privacy would not be protected. On a positive note, most participants reported knowing how to get help with transportation, translation, and asserting their rights—a finding which followed the launch of the first legal and outreach support model for this population in the region in the fall of 2019. On the other hand, most respondents reported that they did not expect that they would get the help they needed if a serious issue arose, despite their willingness to maintain communication with a support person. Across several areas of concern, our survey participants reported more concerns about their health, social, and legal rights in comparison to prior research in the region and elsewhere.

The present findings support our previously published work (see Caxaj & Cohen, 2021a) outlining challenges and recommendations for establishing community-based support models for migrant farmworkers. Ultimately, support models such as the one we piloted in the Okanagan have great potential for meeting some of the major needs of migrant farmworkers: access to healthcare, transportation, social, and legal support. However, their ability to address larger factors that underlie migrants’ vulnerability (such as precarious legal status) continues to be limited. Nonetheless, regional support models have the potential to improve experiences for migrant farmworkers, and by building inroads with migrant workers and service providers alike, transform services and food systems to better represent the priorities of migrant workers.

These findings point to several implications. First, more comprehensive and targeted legal advocacy services are needed to address and help workers navigate knowledge gaps in asserting their legal rights. Government investment in this type of support for migrant agricultural workers may provide
better opportunities for them to benefit from legal rights and protections that are currently out of reach. Second, regional programming, including the provision of independent translation, transportation, and service navigation, can combat migrant agricultural workers’ isolation and provide for a more accessible and comprehensive service delivery experience.

Third, clinicians and service providers targeting migrant worker communities should receive training on the unique vulnerabilities and barriers faced by migrant workers, as well as their legal entitlements. Training especially should highlight the dangers of employers’ gatekeeping or interfering in the medical care of workers, the need for confidentiality from employers, and the risk workers face of medical repatriation. Fourth, both federal and provincial governments must commit to enhanced mechanisms for oversight and enforcement of migrant agricultural worker programs. Changes should include increased unannounced and proactive inspections (to take the burden of reporting off workers), culturally appropriate and meaningful engagement with workers throughout the assessment process, and accessible tip lines in workers’ preferred languages. To complement these strategies, strong antireprisal protections must be in place to protect whistle-blowers. As current reports indicate, existing oversight mechanisms are woefully inadequate (Office of the Auditor General of Canada, 2021).

Last, to mitigate the potential for abuse and exploitation, work permits of migrant agricultural workers should be open and not contingent upon employment with a single employer. This would allow workers more labor mobility should they face poor treatment, harassment, or poor conditions on one farm. The introduction of the Open Work Permit for Vulnerable Workers in 2019 has proven to be insufficient because of the length of time it takes to receive a decision on an application as well as the lack of systematic financial and housing support available to applicants. For these reasons, permanent status upon arrival must be part of a political solution that can better afford workers access to full rights, protections, and justice.

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