

**Farmworker Equity Express
Annual Evaluation Report
Fiscal Year 2024-2025**



**SAN MATEO COUNTY HEALTH
BEHAVIORAL HEALTH
& RECOVERY SERVICES**

San Mateo County Behavioral Health and Recovery Services Mental Health Services Act Innovation Evaluation

Farmworker Equity Express Annual Report
Fiscal Year 2024-2025

This report was developed by RDA Consulting under contract with the County of San Mateo Behavioral Health and Recovery Services.

RDA Consulting, 2025



SAN MATEO COUNTY HEALTH
**BEHAVIORAL HEALTH
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Table of Contents

Introduction	4
Program Innovations and Adaptations	6
Evaluation Overview	8
Evaluation Findings	11
Recommendations	34
Appendices	35



Introduction

In 2004, interest holders throughout the mental health system in California joined together in support of Proposition 63, the Mental Health Services Act (MHSA). The MHSA was intended to “expand and transform” the public mental health system according to the values of: 1) Recovery, Wellness, and Resiliency; 2) Consumer and Family Driven; 3) Community Collaboration; 4) Cultural Competency; and 5) Integrated Services. MHSA provided an infusion of funds to support programs that serve public mental health consumers, their families, and communities.

The purpose of the Innovation (INN) component of MHSA is to pilot new and emerging mental health practices and approaches that seek to address the needs of unserved and underserved populations and that contribute to learning across the state. As such, MHSA INN funds provide an opportunity for counties to implement innovative mental health services and learn about implementing practices that have the potential to transform the behavioral health system.

Pursuant to Welfare and Institutions Code Section 5830, all MHSA Innovation projects must meet the following requirements:

Address one of the following as its primary purpose:

- Increase access to underserved groups.
- Increase the quality of services, including measurable outcomes.
- Promote interagency and community collaboration.
- Increase access to services.

Support innovative approaches by doing one of the following:

- Introducing new mental health practices or approaches, including, but not limited to, prevention and early intervention.
- Making a change to an existing mental health practice or approach, including, but not limited to, adaptation for a new setting or community.

INNOVATION (INN)

INN projects are new, creative mental health practices/approaches that contribute to the learning process in the mental health field. INN projects must be developed in partnership with communities through a process that is inclusive and representative, especially of unserved, underserved, and inappropriately served individuals.

- Introducing a new application to the behavioral health system of a promising community-driven practice or an approach that has been successful in non-mental health contexts or settings.

All INN projects must also be approved by the Mental Health Services Oversight and Accountability Commission (MHSOAC), and counties are required to submit annual, as well as final INN Project Reports at the conclusion of the pilot. In December 2022, San Mateo County (SMC) Behavioral Health and Recovery Services (BHRS) was awarded a four-year MHSOAC grant from the MHSOAC to implement their new Farmworker Equity Express Program. This report details the first fiscal year¹ (FY) of program implementation from July 1, 2024, to June 30, 2025 (FY24-25).

Program Overview

The Farmworker Equity Express program was created to address the unique challenges faced by farmworkers in SMC, a group that includes over 1,500 individuals and their families, many of whom are immigrants. These farmworkers often struggle with isolation, poor housing, and limited access to health services, contributing to mental health issues like depression, anxiety, and stress. Recognizing the need for accessible and culturally

responsive care, the Farmworker Equity Express brings behavioral health services directly to the farms through a mobile bus, making it easier for farmworkers and their families to get help where they live and work. This program offers innovative care tailored to the needs of farmworkers, ensuring services are convenient, culturally relevant, and offered in Spanish.

Developed by Ayudando Latinos a Soñar (ALAS) and SMC BHRS, Farmworker Equity Express helps farmworkers overcome barriers such as transportation and language by bringing bilingual staff directly to farm locations. The mobile bus visits 23 farms in the region, providing a range of services such as counseling, recovery support, and community resources. The program also integrates cultural arts, allowing farmworkers and their families to engage in

Photo 1. Farmworker Equity Express Bus²



¹ A fiscal year goes from July 1st of the previous year to June 30th of the following year.

² Photo Source: <https://drive.google.com/drive/folders/idxTirVdogV8lnCttknYamNIq0dyUhprc>

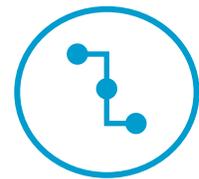


activities like storytelling, creating altars and murals, which celebrate their heritage while promoting healing.

Through this mobile approach, the Farmworker Equity Express connects Latinx farmworkers and their families with much-needed mental health support in a setting that is familiar and welcoming, helping to build stronger, healthier communities. It represents a new way of delivering care by meeting people where they are and honoring their cultural identity, making a lasting impact on the well-being of farmworkers and their families.

Program Innovations and Adaptations

Referral Pipeline. During the fiscal year 2024–2025, ALAS continued piloting drop-in crisis hours for participants, both on the mobile services bus and onsite at ALAS, as another method of engaging and enrolling new farmworkers. This pilot program ended in February of 2025. The ALAS food pantry program continued to grow as a successful initial entry point for farmworkers to learn about the program, connect with a case manager, and obtain mental health referrals.



Service Developments. ALAS continued to offer a range of mental health service offerings and engagement approaches, including ideas that incorporated mental health de-stigmatization and the arts. The team continued several new service groups and offerings between the Fall of 2024 and the Spring of 2025, including: Asesoría individual (individual counseling), Asesoría grupal (group counseling), Exploración o evaluación (screening or assessment), Actividades artísticas culturales (cultural arts activities), Arte como Sanación (Art as a Form of Healing group), Grupos Compadres (Friends group), Grupos Corazones de Oro (Hearts of Gold group), Taller/grupo de parejas (Couples group), Hijas de la Luna (Daughters of the Moon group), Aprendiendo y jugando (Learning and Playing group), Reinas de Corazones (Queen of Hearts group), Grupos de madres "Bebé y yo" ("Baby and Me" group), Foto Historias, and Talleres sobre el duelo (Grief workshops).



Mobile Service Engagement. From Fall 2024 through Spring 2025, during unexpected events that impacted the community including community violence, the political climate post-November 2024 election, and climate-related weather events, ALAS staff creatively adapted to the conditions by adapting service hours and expanding to various in-person sites accessible to communities. For example, the community violence and post-election fear that the community experienced led to the extension of the pilot drop-in mental health clinic.



Community Engagement. ALAS engaged current and new program participants at a variety of social and community events throughout FY24-25. Some of these events began in the Fall of 2024, such as food distribution partnerships with local schools, community health fairs, and local field trips. Other events took place in the Spring and Summer of 2024, including Farmworkers appreciation week and a Cesar Chavez day celebration. The community also held a memorial service in January 2025 for the victims of a mass shooting in Half Moon Bay that occurred two years prior.



Staff Transitions. ALAS experienced staffing transitions during their second year of implementation for the Farmworker Equity Express program. In December 2024, the team underwent a staffing transition, welcoming a new part-time clinician-in-training, while losing another full-time farmworker mental health clinician.



External Challenges and Safety-Driven Adaptations. As ALAS advanced this work, the broader political environment created additional challenges that shaped both program delivery and evaluation activities. Rising anti-immigration sentiment nationally led to incidents of harassment and threats directed at both staff and community members. To safeguard participant and staff well-being, ALAS shifted several events to private or invitation-only formats, hired security for select activities, and prepared contingency plans for moving services online when safety concerns increased. These adaptations ensured continuity of care while honoring the community's need for protection and stability.



These circumstances also influenced the evaluation approach for FY24-25. Given the pressures placed on ALAS staff during this period, the evaluation team worked closely with SMC and ALAS leadership to ensure evaluation activities did not add strain or compromise safety. Together, the groups agreed to limit quantitative data collection during the months of heightened threats, prioritizing staff capacity and community well-being. As such, this annual report focuses primarily on qualitative data collected before these incidents occurred, supplemented with limited quantitative information. This shared decision reflects a commitment to conducting evaluation in a responsive, ethical manner that respects the lived realities of the farmworker community and those who serve them.



Evaluation Overview

In July 2023, ALAS and SMC BHRS partnered with RDA Consulting³ (hereafter evaluation team) to conduct a multi-year evaluation of the Farmworker Equity Express program, concluding in 2026. The purpose of this evaluation is to: (1) evaluate Farmworker Equity Express program processes (implementation) and outcomes; (2) support continuous program improvement efforts; and (3) satisfy and comply with MHSA INN regulatory requirements, including annual and final evaluation reports to the MHSOAC.

Since starting the evaluation of the Farmworker Equity Express program in July 2023, the evaluation team has worked closely with ALAS and SMC BHRS to accomplish several key evaluation activities:



Developed an Evaluation Plan. In partnership with ALAS, the evaluation team developed an evaluation plan that is intended to be used as a roadmap throughout the evaluation process. This plan is inclusive of the learning goals, evaluation questions, the proposed evaluation methodology and analytic framework, potential limitations, and reporting requirements.



Refined Data Collection Tools. Collaboratively, ALAS and the evaluation team revisited and refined the data collection tools such as focus group protocols and the participant survey to closely align with Year 2 evaluation and program needs.



Focus Group Training. The evaluation team did not conduct a second focus group training for ALAS program staff as they had already been trained in Year 1. Trained program staff facilitated the program participant and cultural arts provider focus groups. These staff were provided with a stipend.



Fiscal Year 2 Data Collection. Data collection for Year 2 of reporting was a collaborative effort. Described in greater detail below, the evaluation team reviewed program meeting notes between the evaluation team and the ALAS team, meanwhile the ALAS team helped to facilitate the farmworker participant and cultural arts provider focus groups. ALAS also administered the participant surveys and intake assessment forms.

³ RDA is an employee-owned consulting firm that provides equity-centered, evidence-driven solutions in collaboration with our partners to improve social systems and services.



Fiscal Year 2 Data Analysis. To inform this report, the evaluation team analyzed the data collected in the second FY of the program. This includes data gathered from the focus groups, meeting notes from the monthly evaluation meetings with the evaluation team and ALAS staff, participant surveys, and intake assessment forms. Together, the evaluation team and ALAS made sense of the findings during a virtual data party. During the data party, ALAS provided the evaluation team with additional insights to help inform data interpretation.

Throughout this partnership, the evaluation team also held regular monthly meetings with ALAS and SMC BHRS to stay updated on the program’s progress, discuss any new developments, and share evaluation progress. These ongoing meetings will continue to ensure the evaluation remains on track and that the findings are used to support the program’s growth and success. Collectively, these efforts have laid the groundwork for an evaluation that will help to answer key questions about how the program is working and the impact it is having on the program participants. The following section outlines the specific evaluation questions guiding this work.

Evaluation Questions

In alignment with the program’s learning goals, the evaluation team, ALAS, and SMC BHRS developed a set of four evaluation questions (EQs) to guide the assessment of the Farmworker Equity Express program. The EQs aim to explore how well the program is meeting its goals and how it can continue to improve. By answering these questions, interest holders can gain a clearer picture of the program’s contributions to farmworker behavioral health and well-being. The four EQs and their associated learning goals are outlined in Table 1 below.

Table 1. Evaluation Questions and Associated Learning Goals

Evaluation Questions and Learning Goals	
EQ1.	How is the Farmworker Equity Express <u>program being implemented</u> over time?
Learning Goal (EQ1): To assess and improve the implementation of the Farmworker Equity Express program to ensure it effectively meets participant needs, fosters collaboration, and delivers quality services.	
EQ2.	To what extent does the Farmworker Equity Express program, a culturally responsive mobile behavioral health resource, <u>expand access to and utilization of behavioral health services</u> in the Latinx farmworker community?

Evaluation Questions and Learning Goals

Learning Goal (EQ2):

To determine the extent to which the Farmworker Equity Express program enhances access to and utilization of behavioral health services among the Latinx farmworker community, while reducing stigma and increasing awareness of available resources.

EQ3. To what extent does the Farmworker Equity Express program, an integrated approach using cultural arts and formal clinical services, **support behavioral health service adoption and outcomes** among the Latinx farmworker community?

Learning Goal (EQ3):

To examine the extent to which the Farmworker Equity Express program improves behavioral health service adoption and outcomes within the Latinx farmworker community, integrating cultural arts activities with formal clinical services, ultimately improving mental and behavioral health along with quality of life.

EQ4. To what extent does the Farmworker Equity Express program **identify the needs and best practices** to support farmworker behavioral health?

Learning Goal (EQ4):

To identify and document the needs, best practices, and lessons learned from the Farmworker Equity Express program, ensuring its adaptability for replication and scaling in other counties implementing similar programs to better support farmworker behavioral health.

Methodology

For the evaluation of the Farmworker Equity Express program, the evaluation team used a mixed-methods approach, combining both quantitative and qualitative data to provide a holistic view of the program. This method ensured that the evaluation team addressed SMC BHRS and ALAS priorities, answered key evaluation questions, and met MHSa INN reporting requirements. The annual evaluation report includes information about how the program was put into action, how participants engaged with services, and the short-term outcomes achieved during FY24–25. As detailed in the **‘Evaluation Overview’** above, the evaluation team used a collaborative and culturally responsive evaluation approach that engaged key interest holders, such as the ALAS team and the farmworker community, and centered their voices throughout the evaluation process. In previous years, the ALAS team coordinated and convened the Community Advisory Board (CAB) comprised of six farmworkers and six ALAS staff, to ensure the farmworker community voice was represented. While the CAB was not as involved during FY24–25 in providing feedback and input, they plan to continue involvement in the future. Data Collection, Sources, Analysis, and Limitations can be found in **Appendix A**.



Evaluation Findings

This section describes the findings relating to the evaluation questions (EQs) outlined above (see **'Evaluation Questions'** for more information). Findings are presented in a way that clearly addresses each question, making it easier to understand the impact the Farmworker Equity Express program has on participants in its second year of implementation. It is important to note that the EQs are not mutually exclusive as findings from one area can often inform another, providing a more interconnected understanding of the program. This approach helps to give a more holistic view of the program and how its meeting the needs of program participants as well as where there may be opportunities for growth.

Photo 3. Painting of Farmworker Equity Express Bus⁴



⁴ Photo Source: <https://drive.google.com/drive/folders/1nHilHc0FqYAqf9ZTc1M6tuXePOzMgXci>

EQ1. PROGRAM IMPLEMENTATION



This section highlights the Farmworker Equity Express program's second year of implementation, showcasing its adaptability, cultural responsiveness, and role as both a behavioral health resource and community support. It also details key services and challenges related to implementation.

EQ1. HOW IS THE FARMWORKER EQUITY EXPRESS PROGRAM BEING IMPLEMENTED OVER TIME?

Program Offerings

In its second year, the Farmworker Equity Express continued to provide a wide range of services, that were flexible, responsive, accessible, and culturally grounded, adapting to and meeting the unique needs of farmworkers while emphasizing cultural relevance and joy. Survey respondents⁶ reported connecting to ALAS services directly through the mobile bus, highlighting the program's ability to serve a dual purpose: (1) key community resource and (2) critical behavioral health service. Building on the resources and knowledge from other ALAS programs, as well as being responsive to the needs of farmworkers, the Farmworker Equity Express program offered a multitude of services to farmworker



participants, including a variety of groups, workshops, and classes. In its second year, the program continued to offer services such as the Talleres Sobre el Duelo (grief workshops), asesoría individual (individual counseling), asesoría grupal (group counseling), exploración o evaluación (screening or assessment), actividades artísticas culturales (cultural arts activities), Arte como Sanación (Art as a Form of Healing group), Grupos Compadres (Friends group), Grupos Corazones de Oro (Hearts of Gold group), Taller/grupo de parejas

⁵ Photo Source: ALAS Instagram - <https://www.instagram.com/alahmb/?hl=en>

⁶ Counts and percentages for these and other metrics are not reported to comply with DHCS public reporting guidelines for masking personal information representing subgroups of fewer than 11 individuals. For more information, see:

<https://www.dhcs.ca.gov/dataandstats/Pages/PublicReportingGuidelines.aspx>

(Couples group), Hijas de la Luna (Daughters of the Moon group), Aprendiendo y jugando (Learning and Playing group), Reinas de Corazones (Queen of Hearts group), Grupos de madres "Bebé y yo" ("Baby and Me" group), and Fotohistorias (Photovoice). In addition, the program

offered referrals to other services, field trips (e.g., Alcatraz), advocacy in the community (e.g., 555 Kelly), and provided basic needs services (e.g., food pantry) (Figure 1). Across the wide range of services and offerings provided, the three most utilized and highest rated were the guitar classes, field trip outings (e.g., Alcatraz, Tigres del Norte concert) across the Bay Area.

"The guitar program is a beautiful activity where we get to know people from different regions of cultures. It's so nice to be able to share this with others, and we hope to keep learning and joining all the activities you offer."

- Focus Group Participant
(Cultural Arts Provider)

Figure 1. Farmworker Equity Express Key Services



Program Implementation Strengths

The Farmworker Equity Express program continued to showcase multiple strengths in its implementation. A core strength of the program was its commitment to meet farmworkers' needs flexibly, adapting service hours, and pivoting during challenging circumstances, amidst staffing transitions. During unexpected events, like incidents of community violence, ALAS staff disseminated 'Know Your Rights' cards and training across multiple modalities (e.g., in-person, via phone and Zoom), launched legal aid funds, and temporarily paused drop-in clinics due to increased Border Patrol activity. Additionally, during climate-related weather events, the program was quick to provide disaster relief services, including

“We have to be flexible as an organization- we have the privilege, the resources, and the power, so we must adapt to the needs of the community rather than expecting the community to adapt to us.”

- Focus Group Participant
(ALAS Staff)

emergency food distribution at sites accessible to the community. Furthermore, the quick response was enhanced through strong collaboration and local, multi-sector partnerships that met community where they were at, allowing the program to address various social determinants of health needs (e.g.,

housing, food, substance use, healthcare access, transportation). This illustrates the program’s commitment to rapid crisis response, which helped to build trust within the farmworker community. Moreover, the positive energy and consistent presence of ALAS staff in the community, with emphasis on cultural elements, including the beautiful and intentional design of the Farmworker Equity Express bus, positively impacted engagement, bolstered trust, and allowed participants to feel understood and supported, aligning services with their cultural values and needs.

“The people that come to visit us...they’re kind to us, and we return that kindness. That’s what makes you want to keep coming and spending time with them.”

- Focus Group Participant (Farmworker)

Photo 3. ALAS Staff & Participants During the Cempasúchil (Marigold) Harvest⁷



⁷ Photo Source: <https://drive.google.com/drive/folders/1nHilHc0FqYAqf9ZTc1M6tuXePOzMgXci>

EQ2. ACCESS TO SERVICES



The following section provides a detailed overview of respondents' engagement with the Farmworker Equity Express program, including their experiences accessing and utilizing services, levels of service utilization, and the program's reach within the community.

EQ2. TO WHAT EXTENT DOES THE FARMWORKER EQUITY EXPRESS PROGRAM, A CULTURALLY RESPONSIVE MOBILE BEHAVIORAL HEALTH RESOURCE, EXPAND ACCESS TO AND UTILIZATION OF BEHAVIORAL HEALTH SERVICES IN THE LATINX FARMWORKER COMMUNITY?

Program Engagement

Throughout FY24–25, the ALAS farmworker team maintained steady outreach to keep farmworkers and families informed about the Farmworker Equity Express program.

Engagement happened through multiple ongoing touchpoints, ranging from smaller community visits to large-scale distribution events. Early-year outreach events typically reached fewer than 11 farmworkers at a time, while major Red Card Distribution events dramatically expanded visibility, reaching an estimated 350–700 individuals. Regular Farmworker Friday Lunch Distributions provided another consistent avenue for connection, engaging anywhere from 36 to 135 farmworkers during active months. Similarly, the Food Distribution to Farms route created reliable monthly contact with the community, reaching 57 to 233 farmworkers each month. Together, these outreach activities ensured that the Farmworker Equity Express program remained consistently visible, accessible, and connected to the farmworker community throughout the year, meeting individuals where they are and reinforcing trust in ALAS as a dependable source of support.⁸

Throughout the second year of implementation, **the Farmworker Equity Express program continued to make significant strides in breaking down barriers to behavioral health care,**

⁸ Data Source: Activity Log, FY24–25.

effectively expanding farmworkers' access to and utilization of behavioral health services.

Multiple staff report a steady stream of mental health referrals and note that more farmworkers are reaching out to get connected to services. By incorporating the mobile bus, the program reduced common barriers such as transportation, cost, and time, making it easier for farmworkers to engage in the services offered.

That [compadres] group was good because we got to share our experiences and talk. Our experiences from the past...or our childhood, what it more or less was like. It was nice. It was good for me. We'd like the opportunity to do it again, to have the opportunity to talk again."

- Focus Group Participant (Farmworker)

Culturally relevant activities and an emphasis on relationship-building were also key program elements that influenced how farmworkers engaged with services. Together, the mobile bus, culturally-tailored services, intentional relationship building and positive energy of staff, helped program participants feel valued and cared for, creating an environment where participants were comfortable sharing vulnerable information related to their mental and behavioral health—topics they were not accustomed to speak about. Mental health stigma persists among the farmworker community, particularly around therapy and needing mental health services. For many farmworkers, this is the first time they are accessing mental health services or engaging in therapy. Multiple farmworker focus group participants shared that they were able to open up about childhood and life experiences and find support in the group therapy space.

"We meet people, we open up, we learn more and we don't feel so alone. Because sometimes, even if you have your family, you need someone to give you a pat on the back and say, 'I'm here. You're not alone.' Even if you have a family, you still need someone. Thanks to you, we've found that."

- Focus Group Participant (Cultural Arts Provider)

Service Accessibility

The program continued to demonstrate strong accessibility in FY24–25, with participant survey responses closely mirroring the highly positive ratings from the previous year.

Similar to FY23–24, respondents strongly agreed that services were culturally relevant and aligned with their beliefs, with this year’s average rating⁹ remaining very high (4.8 out of 5, compared to last year’s 4.8 (Table 2). Perceptions of staff support and resource connection also remained strong. This year, respondents rated this aspect 4.5 on average, slightly lower than last year’s 4.8 but still indicating that participants felt supported by program staff. As in the prior year, the convenience of scheduling and service locations continued to be a strength, with this year’s respondents rating these aspects 4.5 out of 5, compared to last year’s 4.8. Consistent with FY23–24, participants affirmed that services were offered in their preferred language, predominantly Spanish, with this year’s average rating at 4.8, nearly identical to last year’s 4.8. These findings reflect the program’s dedication to making behavioral health services accessible and responsive to the specific needs and cultural backgrounds of the farmworker community.

Table 2. Participant Survey Respondents’ Experiences with Service Accessibility, April–June 2025¹⁰

On average, participant survey respondents strongly agreed that:	Count	Average
Groups and services are relevant to their culture and beliefs.	*	4.8
Staff connected them to other helpful resources and services.	*	4.5
Groups were held at convenient times and locations.	*	4.5
Groups were offered in their preferred language.	*	4.8

⁹ The ratings are based on a five-point Likert scale with 1=strongly disagree, 2=disagree, 3=neutral, 4=agree, and 5=strongly agree.

¹⁰ Data Source: Participant Survey, 2025. Counts and percentages for these and other metrics are not reported to comply with DHCS public reporting guidelines for masking personal information representing subgroups of fewer than 11 individuals. For more information, see:

<https://www.dhcs.ca.gov/dataandstats/Pages/PublicReportingGuidelines.aspx>

Service Utilization

In its second year of implementation, the Farmworker Equity Express program served a total of 67 farmworkers¹¹ through individual and group counseling. Of these farmworkers served, 59 were unique individuals, meaning eight individuals received services more than once (Figure 2).

Figure 2. Number of Farmworkers and Families who Received Behavioral Health Services, FY24-25¹²



Farmworker program participants received a similar amount of behavioral health services through the program. On average, farmworker participants (N=34) received 17 individual counseling sessions (range: 2 to 46 sessions) and 19 group counseling sessions (N=33; range: 1 to 51 sessions).¹³ Overall, program staff facilitated a total of 1,235 individual (N=589) and group counseling (N=646) sessions to farmworker participants (Figure 3).

¹¹ Note that these individuals served are individuals who received program services; whereas the ranges provided in 'Program Engagement' reflect individuals that staff outreached to, providing these individuals information about the program.

¹² Data Source: Program Services Log, FY24-25. Counts and percentages for these and other metrics are not reported to comply with DHCS public reporting guidelines for masking personal information representing subgroups of fewer than 11 individuals. For more information, see:

<https://www.dhcs.ca.gov/dataandstats/Pages/PublicReportingGuidelines.aspx>

¹³ Data Source: Program Service Log, FY24-25.

Figure 3. Total Individual and Group Counseling Sessions Provided, FY24–25¹³



Farmworker participants experienced rapid access to services. The time between inquiry and receipt of individual counseling was typically very short, with a median of 0 days. This means that over half of participants (N=16) received services immediately or on the same day they initially contacted the program, while some participants (N=13) experienced longer wait times (mean = 8.3 days, range: 0 to 51 days). Group counseling followed the same pattern, where the median was 0 days, and more than three-quarters of participants received services immediately (N=25). While fewer than 11 group counseling participants waited eight to 11 days, the majority accessed support without delay.¹⁴

Farmworkers are engaged in a variety of behavioral health programs, offered across multiple modalities. This includes individual counseling, couples relationship workshops, and mental health groups such as Compadres, Hijas de la Luna, and guitar classes. Staff are also preparing to expand certain offerings, like the couples relationship workshop and grief counseling, suggesting that the program’s services are responsive to the needs of the farmworker community and culturally relevant offerings may be more familiar to the farmworker community. Additionally, staff are in the process of creating new offerings, including “fotohistorias,” where participants will share pictures and stories to open dialogue.

¹⁴ Data Source: Program Service Log, FY24–25.

“Most of our farmworkers come from a background where mental health services aren’t traditionally accessible, so incorporating cultural elements makes them feel more connected.”

- Focus Group Participant (Program Staff)

Across FY24–25, the Farmworker Equity Express program delivered a wide array of behavioral health, cultural arts, wellness, and clinical services that together provided consistent support to farmworkers and their families. Participation varied across program areas depending on season, program type, and community needs, with clinician-led groups, cultural arts activities, community wellness events, early intervention services, and clinical counseling all showing steady engagement throughout the year. Some offerings reached small groups in intimate, relationship-focused settings, while others such as community fairs and seasonal events connected with hundreds of individuals at once. To offer a clear snapshot of this activity, the following table (Table 3) presents the range of participation for each service area,¹⁵ reflecting both the diversity of programming and the breadth of community engagement achieved this fiscal year.

Table 3. Ranges of Monthly Participation Across All Farmworker Equity Express Program Activities, FY24–25¹⁶

Service	Range of Participants ¹⁶	Months Active In	Total Attendance ¹⁷
Mental Health Groups Led by Clinicians			
Semillas de Esperanza	12–18	Dec 2024–Jun 2025	102
Convivio Entre Compadres	8	Aug–Dec 2024	40
Fotohistorias	13	Aug–Sep 2024	26
Cultural Arts			
Art and Heart on the Bus	15–29	Sep 2024–Jun 2025	168

¹⁵ Because it is unclear whether participants are duplicates in these services, ranges are presented instead of average participation. For example, if 11 participants were recorded in March 2025 and 15 were recorded in April 2025, but it is unclear if they are recurring participants, then 11–15 is the range that is presented instead.

¹⁶ While the data provided are aggregated counts, some data may be duplicated; therefore, ranges are provided instead.

¹⁷ These totals reflect the number of times community members participated in these activities and may include returning individuals, as attendance data do not distinguish unique participants. This means we summed up the ranges across each service to reflect total attendance.

Service	Range of Participants ¹⁶	Months Active In	Total Attendance ¹⁷
Arte como Sanación	14-19	Jul-Oct 2024; Jan-Feb 2025; Apr-Jun 2025	138
Guitarra en el Campo	8-10	Oct 2024-Apr 2025	64
Accordeon Classes	4-7	Jul-Nov 2024; Jan-Mar 2025	39
Other Activities and Events			
Open to all farmworker community and family members¹⁸			
Annual Farmworker Christmas Caravan	300	Dec 2024	300 ²¹
Farmworker Health Fair	239	Nov 2024	239 ²¹
Know Your Rights Workshops	90	Feb-Mar 2025	180
Annual Cesar Chavez Day Celebration	170	Mar 2025	170 ²¹
Outdoor Activities with Golden Gate National Parks Conservancy	17-42	Sep 2024; Mar 2025	59
Nutrition Classes with Second Harvest	15	Oct-Dec 2024	45
“Healthy Habits” Smartwatch Program	45	Mar 2025	45 ²¹
Family in Filoli	19	Apr 2025	19 ²¹
Driver’s Education Workshops	7	Apr 2025	* ²¹
2 nd Annual Farmworker Remembrance Event	200-300	Jan 2025	-- ¹⁹
Group specific events²⁰			
Compadres Group Activities	8	Sep 2024; Dec 2024	16
Farmworker Music Program Performances	5	Mar 2025	* ²¹
One-Off Events²²			
Workers Rights Training	23	Jul 2024	23 ²¹
Altars	20	Nov 2024	20 ²¹
Christmas Ornaments	6	Dec 2024	* ²¹
Early Intervention Assessments			
Mi Familia Y Yo Home Visits	2-8	Oct 2024-Jun 2025	54
Ages & Stages Assessments Conducted	0-8	Jul 2024-Jun 2025	17
Clinical Services			

¹⁸ These include public events that are open to the community.

¹⁹ Only the range was provided.

²⁰ These events are for farmworkers who participated in mental health or cultural arts groups only.

²¹ May reflect unique individuals for this service or event only, since it was a one-off event or service. Masked to protect confidentiality for n<11.

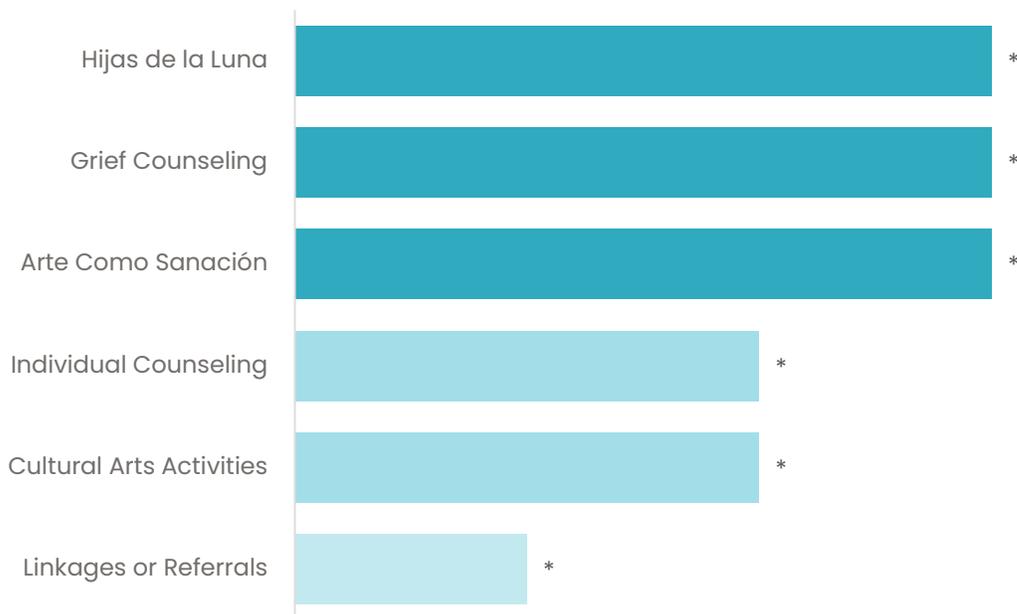
²² Open to the public unless otherwise specified. Masked to protect confidentiality for n<11.

Service	Range of Participants ¹⁶	Months Active In	Total Attendance ¹⁷
Received Counseling from Mental Health Clinician A	9-11	Jul 2024-Jun 2025	116
Received Counseling from Mental Health Clinician B	3-9	Jul 2024-Jun 2025	67
Received Counseling from Mental Health Clinician C	0-8	Jul 2024-Jun 2025	62
Received Counseling from Mental Health Clinician D	1-2	Jul 2024-Jun 2025	18
Received Counseling from Mental Health Clinician E	*	Jun 2025	* ²³

²³ May reflect unique individuals since these counseling sessions only occurred in a one month timeframe. Masked to protect confidentiality for n<11.

Service utilization patterns in FY24–25 reflected similar trends to the previous year, even with a smaller respondent group and the option to select multiple services. As in FY23–24, participants most frequently engaged with the program’s culturally centered and healing-oriented offerings, including Hijas de la Luna, grief counseling, and Arte Como Sanación, each selected by three respondents (Figure 4). Individual counseling and cultural arts activities were accessed by two respondents each, while linkages or referrals remained the least utilized service, selected by one respondent. These results echo last year’s findings, suggesting that participants continue to gravitate toward the program’s culturally responsive support spaces, while services such as linkages and referrals may require continued visibility and communication to increase awareness and use.

Figure 4. Participant Survey Respondents' Utilization of Services, April–June 2025²⁴



Demographic Characteristics of Respondents

Demographic data helps identify whether the program is effectively reaching its target population, Latinx farmworkers, and allows program staff to make adjustments to better serve underrepresented groups. Additionally, this information ensures that Farmworker Equity Express’s culturally grounded programming resonates with the diverse identities within the

²⁴ Data Source: Participant Survey, 2025. It is important to note that survey respondents were able to select more than one service. Counts and percentages for these and other metrics are not reported to comply with DHCS public reporting guidelines for masking personal information representing subgroups of fewer than 11 individuals. For more information, see: <https://www.dhcs.ca.gov/dataandstats/Pages/PublicReportingGuidelines.aspx>

Latinx community. By continuing to check in with the demographics of those that are engaging with the program, program staff can ensure that they are continuing to seek out new voices, unique points of view, and members from all corners and facets of the community to continue to enrich and grow the Farmworker Equity Express.

The demographic profile of Farmworker Equity Express participants in FY24–25 remained closely aligned with last year’s profile, continuing to reflect a culturally and linguistically connected farmworker community. Participants remained overwhelmingly Hispanic/Latino/a/x and primarily of Mexican origin, reinforcing that the program is consistently reaching its intended population. Spanish continued to be the dominant preferred language, underscoring the ongoing importance of language-accessible, culturally responsive services. This year’s data also illustrate the program’s broad reach across the lifespan. Participants ranged from early childhood through older adulthood, highlighting that Farmworker Equity Express is not only serving individual workers but also supporting entire families across multiple generations. This sustained intergenerational reach reflects the program’s flexibility and responsiveness to diverse household needs within the farmworker community. The geographic concentration of participants continues to demonstrate that Farmworker Equity Express is primarily serving the local Half Moon Bay community (Table 4).

Table 4. Demographic Characteristics of Farmworkers and Family Participants, FY24–25²⁵

Category	Count	Percent
Age groups²⁶	*	100%
<15 years old	*	*
15–25 years old	14	24%
26–40 years old	15	25%
41–60 years old	16	27%
61+ years old	*	*
Sex assigned at birth	59	100%
Female	40	68%
Male	19	32%
Sexual orientation	30	100%
Heterosexual or straight	30	100%
Gender identity	52	100%
Female	30	58%
Male	22	42%

²⁵ Data Source: Program Service Log, FY24–25.

Category	Count	Percent
Country of Origin²⁶	*	100%
Mexico	50	85%
Guatemala	*	*
Ethnicity	59	100%
Hispanic or Latino/a/x	59	100%
Primary Language	*	100%
Spanish	48	83%
Other ²⁷	*	*
Disability²⁶	*	100%
No known disability	51	86%
Veteran Status	59	100%
Not a veteran	59	100%
City of Residence²⁶	*	100%
Half Moon Bay	54	92%
Other ²⁸	*	*

²⁶ This data is masked to protect participant confidentiality based on CDSS guidelines:

https://www.cdss.ca.gov/portals/9/Data%20De-Identification%20Guidelines%20DSS%20Reference%20Guide_FINAL.pdf

²⁷ Other primary languages include English and other.

²⁸ Other cities of residence include Granada, Moss Beach, Pescadero.

EQ3. PARTICIPANT OUTCOMES



The following section examines how the Farmworker Equity Express program, through its integration of cultural arts and formal clinical services, supports behavioral health service adoption and enhances outcomes among the Latinx farmworker community. It explores improvements in participants' behavioral health, quality of life, cultural and community connections, and highlights the mutual impact between program staff and participants.

EQ3. TO WHAT EXTENT DOES THE FARMWORKER EQUITY EXPRESS PROGRAM, AN INTEGRATED APPROACH USING CULTURAL ARTS AND FORMAL CLINICAL SERVICES, SUPPORT BEHAVIORAL HEALTH SERVICE ADOPTION AND OUTCOMES AMONG THE LATINX FARMWORKER COMMUNITY?

Behavioral Health and Quality of Life

Farmworker Equity Express program activities have made a positive impact on participants' behavioral health, quality of life, cultural connection, and adoption of mental health services – all essential protective factors. Focus group discussions with program participants and staff revealed perceived and observed improvements in participants' emotional wellbeing, self-belief, and coping skills. Groups like *guitar class* provide safe spaces for expressing oneself, and reconnecting with one's heritage, through song and music, making them feel valued and supported. The consistent support and presence from ALAS staff have allowed program participants to cultivate trust and a sense of security. Participation in culturally relevant and interactive elements helped reduce stress and stigma around mental health, offering a break from routine, and a chance to reset and relax, creating a supportive environment for emotional expression. One farmworker focus group participant shared that they felt inspired to write a corrido song as a means to express themselves. Others believe it allowed them to dream and see things from a different perspective, expanding their worldview.

“Together, we’ve found support and a genuine interest in learning and helping us grow...we see life in a new way and believe that yes...getting where you want to go is possible. Above all, the dreams we had buried deep down are starting to come back. Thank you for your support. You’ve shown us that there are people we who truly care about our well-being—our physical, mental, and spiritual well-being.”

– *Focus Group Participant (Cultural Arts Group Provider)*

Cultural arts integration, particularly music, singing, and dance has served as a healing practice and therapy in and of itself. This further reflects the success of the program’s culturally responsive approach and creation of a safe space that allows participants to feel valued and cared for. At the individual level, singing has served as a protective factor and has given participants a healthy outlet to express themselves. The effects of the guitar classes have also positively impacted the community and families of the farmworker participants, with multiple participants sharing that it’s allowed them to spread joy to those around them and share music with the next generation, with a few reporting teaching their kids songs in Spanish.

Furthermore, the program’s culturally integrated approach has effectively promoted both acceptance and sustained use of behavioral health services among the Latinx farmworker population. Participant survey results revealed that all respondents, on average, felt very comfortable reaching out to ALAS staff for future resources and services, with respondents rating their comfort level a five (Table 5). This comfort level, built through culturally tailored activities and trust-building efforts, has led respondents to engage with services they might otherwise avoid. In focus groups, participants shared that the program’s supportive environment helped them see mental health as equally important as physical health, challenging cultural norms around ignoring emotional pain. Survey respondents specifically reported that therapy or community connections had positively impacted their mental health, illustrating the program’s role in normalizing behavioral health care within the farmworker community. However, they also expressed that the wait times for behavioral health services are long and that more services for children are needed.

**Table 5. Participant Survey Respondents' Level of Comfort Reaching out to ALAS Staff
April–June 2025²⁹**

On average, participant survey respondents strongly agreed that:	Count	Average
I feel comfortable reaching out to ALAS staff in the future for resources and services.	*	5

Most participant survey respondents expressed satisfaction with the Farmworker Equity Express program. Survey respondents reported satisfaction with the services provided, with one farmworker focus group participant noting that they especially appreciated the support received from the program. In addition, survey respondents noted they learned something useful through their participation in the program.³⁰

“More than anything, [I like] the support that ALAS gives us. The support is the best.”
 – Focus Group Participant
 (Farmworker)

Cultural and Community Connection

Participant survey data showed that the program significantly strengthened participants' connection to their culture and community, serving as additional protective factors. Survey respondents strongly agreed that they felt more connected to their cultural roots and the broader community while participating in the program, resulting in an average of 4.8 for both (Table 6). This further reflects the success of the program’s culturally responsive approach, which was integral in helping participants feel grounded and understood. Programs like *Reinas de Corazones* have provided a safe space for participants to release stress and feel comfortable expressing themselves. Furthermore, participation in cultural events and gathering over meals, maintain traditional and regional cultural ties. This blend of cultural connection and community engagement has allowed participants to experience a renewed sense of belonging, emotional release, and empowerment, further underscoring the program’s impact on their overall well-being.

²⁹ Data Source: Participant Survey, 2025. Counts and percentages for these and other metrics are not reported to comply with DHCS public reporting guidelines for masking personal information representing subgroups of fewer than 11 individuals. For more information, see: <https://www.dhcs.ca.gov/dataandstats/Pages/PublicReportingGuidelines.aspx>

³⁰ Data Source: Participant Survey, 2025.

Table 6. Participant Survey Respondents' Level of Cultural and Community Connection,
April-June 2025³¹

On average, participant survey respondents strongly agreed that:	Count	Average
I feel connected to my culture.	*	4.8
I feel connected to my community.	*	4.8

Farmworkers who have participated in the Farmworker Equity Express bus program have built relationships and a supportive community that has allowed them to feel less alone.

Being able to connect with people has allowed them to build trusting relationships that create space for sharing their feelings honestly and vulnerably. This community has been built on cultural

“Singing has healed something inside me. Thanks to that, I’d rather sing or play guitar now than be out in the streets smoking or drinking.”

- Focus Group Participant
(Farmworker)

traditions, including shared meals and celebrations that sustain them. Many also report that these relationships have allowed them a space to put their phone away and connect with others.

“...With me, they can open up; some have cried, and they feel comfortable.”

- Focus Group Participant
(Cultural Arts Provider)

While program staff and cultural arts providers positively impact participants, **the participants, in turn, leave a lasting impression on the staff and providers.** A cultural arts provider focus group participant recalled a powerful moment when a

farmworker participant shared that the staff and cultural arts providers are important to the participants just as the participants are important to the staff and providers, highlighting the reciprocal relationship and deep connection formed through the program.

“You are important to me, and I am important to you.”

- Focus Group Participant (Cultural Arts Provider)

³¹ Data Source: Participant Survey, 2024. Counts and percentages for these and other metrics are not reported to comply with DHCS public reporting guidelines for masking personal information representing subgroups of fewer than 11 individuals. For more information, see:

<https://www.dhcs.ca.gov/dataandstats/Pages/PublicReportingGuidelines.aspx>

EQ4. NEEDS AND BEST PRACTICES



The following section outlines the key needs and best practices identified by the Farmworker Equity Express program to support farmworker behavioral health.

EQ4. TO WHAT EXTENT DOES THE FARMWORKER EQUITY EXPRESS PROGRAM IDENTIFY THE NEEDS AND BEST PRACTICES TO SUPPORT FARMWORKER BEHAVIORAL HEALTH?

As this program is an INN program, it is important to document the needs and best practices to support farmworker behavioral health. **This year's intake assessment findings continue to reveal mental health needs among Farmworker Equity Express participants, with results that closely resemble last year's.** On average, respondents rated their overall mental health at 2.5 and their mental health over the past 30 days at 3.3 (Figure 5), which is similar to last year's range of "slightly good" scores (2.8 and 2.6, respectively) and suggests continued opportunities to strengthen mental health support. Coping ability also remained an important area for participants, with respondents rating their ability to cope with mental health symptoms at 3.4 and with daily stressors at 3.1 (Figure 6), slightly higher than last year's averages of 3 and 2.8, respectively. Participants reported the greatest improvement in daily functioning, with an average rating of 3.6 for their ability to manage or participate in daily life activities (Figure 7), compared to last year's rating of 2.8. These findings indicate that while respondents continue to experience ongoing mental health challenges, they also reported stronger coping skills and improved daily functioning compared to the previous year.³²

³² The ratings are based on a five-point Likert scale with 1=strongly disagree, 2=disagree, 3=neutral, 4=agree, and 5=strongly agree

Figure 5. Intake Assessment Form Respondents' Mental Health Self-Ratings, April-June 2025³³

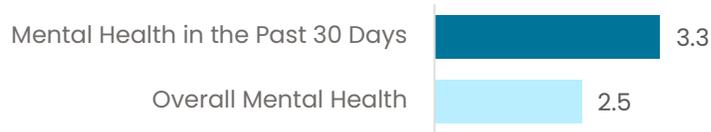


Figure 6. Intake Assessment Form Respondents' Coping Ability Self-Ratings, April-June 2025³⁴

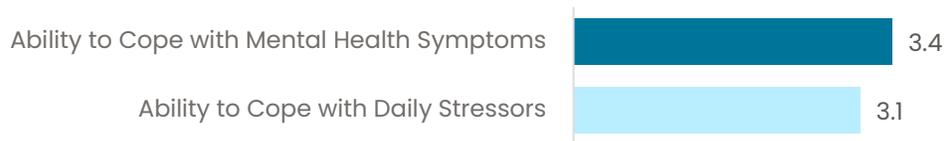


Figure 7. Intake Assessment Form Respondents' Participation in Daily Life Self-Rating, April-June 2025³⁵



Intake assessment responses from FY24–25 show that participants continued to experience a range of co-occurring behavioral health symptoms at the time they entered the program, echoing the complexity of needs observed last fiscal year. Similar to last year, these findings demonstrate that participants often present with multiple overlapping concerns, underscoring the continued need for accessible, comprehensive, and culturally responsive behavioral health support through this program (Figure 8).

³³ Data Source: Intake Assessment Form, 2025. Counts and percentages for these and other metrics are not reported to comply with DHCS public reporting guidelines for masking personal information representing subgroups of fewer than 11 individuals. For more information, see:

<https://www.dhcs.ca.gov/dataandstats/Pages/PublicReportingGuidelines.aspx>

³⁴ Data Source: Intake Assessment Form, 2025. Masked for sample size $n < 11$.

³⁵ Data Source: Intake Assessment Form, 2025. Masked for sample size $n < 11$.

Figure 8. Intake Assessment Form Respondents' Behavioral Health Symptoms at Intake, April–June 2025³⁶

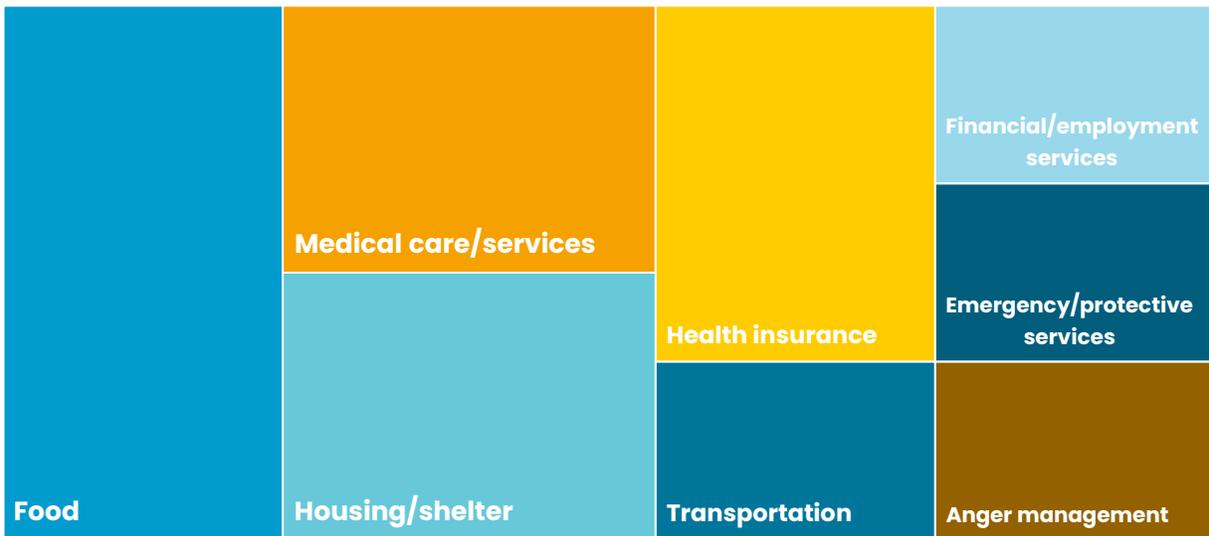


Intake assessment data from FY24–25 show that participants continued to identify a range of basic needs at program entry, similar to patterns observed last year. Food assistance remained the most commonly reported need, underscoring the ongoing importance of food security for many farmworker families (Figure 9). Focus group discussions with farmworkers corroborated the need for and appreciation of social determinants of health support, with food and high cost of living identified as the most common needs. These results suggest that addressing farmworkers' basic needs is important for supporting their mental health. When these everyday needs are met, individuals and families feel more stable and can focus on their overall well-being.

³⁶ Data Source: Intake Assessment Form, 2025. Counts and percentages for these and other metrics are not reported to comply with DHCS public reporting guidelines for masking personal information representing subgroups of fewer than 11 individuals. For more information, see:

<https://www.dhcs.ca.gov/dataandstats/Pages/PublicReportingGuidelines.aspx>

Figure 9. Intake Assessment Form Respondents' Supports Needed at Intake, April-June 2025³⁷



Looking ahead, the Farmworker Equity Express program’s experience provides lessons learned and best practices that can inform future behavioral health programs who service underserved communities. **Key practices, such as community involvement in program design, ongoing cultural competency training for staff, and a trauma-informed approach tailored to the unique challenges farmworkers face, are promising in enhancing the program’s impact.** As the program continues to evolve, these strategies will remain central to ensuring that behavioral health services remain accessible, relevant, and responsive to the diverse needs of farmworkers. As it moves forward, the program’s ongoing commitment to adapting and expanding its services will continue to strengthen its role as a trusted resource, improving behavioral health outcomes and quality of life for the farmworker community.

³⁷ Data Source: Intake Assessment Form, 2025. Counts and percentages for these and other metrics are not reported to comply with DHCS public reporting guidelines for masking personal information representing subgroups of fewer than 11 individuals. For more information, see:

<https://www.dhcs.ca.gov/dataandstats/Pages/PublicReportingGuidelines.aspx>



Recommendations

Based on findings from the second year of the Farmworker Equity Express program, several recommendations can help to improve the program's impact and sustainability. These recommendations focus on expanding current successes, addressing participant needs, and further strengthening program delivery.

- **Continue Expanding Awareness of Referrals and Screening Services.** Since few respondents utilized linkages, referrals, and screening services, consider enhancing communication around these offerings. Staff could integrate information about these services into popular sessions like grief counseling or cultural arts activities to boost awareness and understanding of the benefits they provide.
- **Maintain and Expand High-Engagement Cultural Arts Programming.** Cultural arts activities continued to draw steady attendance and remain central to community connection. Sustaining these offerings and exploring opportunities for additional sessions or locations may continue to support participants' emotional wellness and sense of belonging.
- **Enhance Support for Stress, Mood, and Coping Needs Identified at Intake.** This year's intake assessments showed ongoing mental health challenges, including anxiety, sleep changes, and difficulty managing stress. Offering additional psychoeducation workshops, stress management skills groups, or brief coping strategy sessions could help address these needs in ways that are accessible and culturally responsive.
- **Support Continued Growth in Clinical Counseling Capacity.** Clinician caseloads remained steady throughout the year, with multiple providers supporting farmworker and family mental health needs. As participation in groups and community activities grows, ensuring adequate staffing and maintaining bilingual, culturally responsive clinical support will be important for meeting ongoing demand, thus alleviating the long wait times participants experience.
- **Expand Child- and Youth-Focused Services to Meet Emerging Family Needs.** Several participants shared that more activities and supports for their children would be beneficial, highlighting an important opportunity to strengthen family-centered programming. Consider increasing offerings designed specifically for children and youth such as arts-based groups, mentorship activities, child-friendly wellness workshops, or expanded early intervention supports. Integrating more child-focused services into existing cultural arts, wellness, and community events may also help families engage with one another.

Appendices

Appendix A. Data Collection, Sources, Analysis, and Limitations

Data Collection and Sources

As part of the evaluation planning process, the evaluation team, SMC BHRS, and ALAS collaborated to identify and discuss needed and existing qualitative and quantitative data sources that could be used to address the EQs for FY24–25 reporting. **Appendix B** provides a detailed overview of the learning goals, evaluation questions, the indicators and measures, and the data sources used for this evaluation.

Data Sources

Quantitative Data

Participant Survey. In collaboration with ALAS, the evaluation team adapted an existing participant survey from a similar program³⁸ to understand participants' experiences with services received from the Farmworker Equity Express program as well as other activities participants engaged in. The information gathered from the 9-item participant survey included the length of time participants engaged in Farmworker Equity Express services, the groups participated in, the services received, experiences with mental health-related groups, workshops, or other events, experiences with participation in groups and services, and program satisfaction. Participants were also asked self-stigma questions. In addition, the survey provided the opportunity for participants to share any learnings from program services and/or activities, general feedback about the program, along with optional demographic information. In June 2025, ALAS administered the survey to participants after engagement in services, groups, workshops, and other activities. The survey was confidential and voluntary. The evaluation team provided incentives to the program participants who completed the survey. There were five (N=5) farmworkers who participated in the survey.

Intake Assessment Form. In June 2025, ALAS provided the evaluation team with data captured in the intake assessment form. ALAS staff administered this form to all program participants at intake in-person and in paper format. The intake assessment form included four core questions that gathered information around participants' overall mental health as well as self-rated physical and mental health, and ability to: manage symptoms, cope with

³⁸ ALAS Cariño Project.

stressors, and engage in daily life. Similarly to the survey, there were ten (N=10) farmworkers who completed an intake assessment form.

The participant survey and intake assessment form were made accessible to program participants in both English and Spanish. ALAS administered both in-person and in paper format to ensure ease of access. To maintain data security, ALAS staff scanned and securely transferred the completed surveys and assessment forms to the evaluation team, where they were entered into designated Google Forms in a protected folder for analysis.

Activity Log. ALAS staff shared activity log data with the evaluation team for this FY. This spreadsheet contained the number of individuals who engaged in the various program services monthly (July 2024 to June 2025). It is important to note that these counts are aggregated and may be duplicated. Therefore, the data presented from this spreadsheet are reflected as ranges. The services documented in this spreadsheet include behavioral health outreach, mental health groups led by clinicians, cultural arts, other activities and events, early intervention assessments, and clinical services. This log was developed and maintained by ALAS staff.

Program Services Log. In addition to the Activity Log, ALAS staff also provided the evaluation team with a spreadsheet that included how many individuals engaged in individual and/or group counseling sessions. A total of 33 farmworkers and families were recorded in the individual counseling tab, while 34 farmworkers and families were reported in the group counseling session tab. Each tab contained similar information including client initials, date of first inquiry, referral source, date of first appointment, date of last appointment, name of the individual or group counseling session, number of sessions completed, whether the individual received other mental health services, who facilitated and co-facilitated the session, as well as demographic information such as age, primary language, race, ethnicity, country of origin, assigned sex at birth, whether they identify as intersex, gender identity, sexual orientation, disability and veteran status, and city of residence. This log was developed and maintained by ALAS staff.

Qualitative Data

Focus Groups. To address all four EQs, three focus groups were conducted, including one focus group with farmworker participants, one focus group with the cultural arts provider group, and one focus group with ALAS staff. Each focus group was tailored to gather unique insights from each group based on their position within the context of the Farmworkers Equity Express program. Two of the focus groups were held in-person and onsite for approximately 90 minutes each, while the ALAS staff focus group was held virtually. Two trained ALAS staff conducted the farmworker participant and cultural arts provider focus groups; meanwhile the evaluation team facilitated the ALAS staff focus group. The evaluation team developed all

protocols for the focus groups with input from ALAS staff. In addition, the evaluation team provided incentives to the program participants who participated in the focus groups.

The focus group with farmworker participants involved discussions of program access, engagement, and impact; program satisfaction and perceived responsiveness; mental and behavioral health service access, awareness, knowledge, and stigma reduction; as well as the nature of outcomes experienced, including those related to behavioral health, mental health, and quality of life. There were six (N=6) farmworkers who participated in the focus group.

The focus group with the cultural arts provider group delved into perspectives on program implementation; cultural responsiveness; collaboration with program staff; participants' engagement and satisfaction with cultural arts activities; and the impact of these activities on participants' outcomes. There were six (N=6) cultural arts providers who participated in the focus group.

The focus group with ALAS staff contained discussions around the need for program flexibility and adaptability to meet the changing needs of the farmworker community, including referrals to external partnerships to expand access to services, as well as the incorporation of culturally appropriate elements into mental health service offerings. There were eight (N= 8) ALAS staff who participated in the focus group.

Evaluation Meeting Documentation.

Evaluation team members utilized monthly evaluation meetings with ALAS staff as an opportunity to make additional observations of the Farmworker Equity Express program. These meetings allowed the evaluation team to document how the program is being implemented over time and to what extent the program is identifying needs and best practices to support participants. The evaluation team documented these additional observations through meeting notes and used a portion of these meetings to gather program updates from ALAS which entailed information on program implementation, its

Photo 4. Farmworkers Memorial³⁹



³⁹ Photo Source: https://drive.google.com/drive/folders/1FUw2kGAGp-DrEejKlprIbBMdR03U_IzL

successes, challenges, adaptations, as well as best practices and lessons learned. These meetings were held virtually for up to one hour.

Data Analysis

As detailed in the **'Methodology'** section above, the evaluation team conducted a mixed-methods evaluation using qualitative and quantitative analysis techniques that helped to evaluate the program processes and outcomes. By conducting both qualitative and quantitative analysis, there was an opportunity to triangulate findings from multiple data sources—and data types—to produce a more robust set of findings that complement and build upon each other.

Separate analytic approaches were used to analyze the quantitative and qualitative data. To assess measures from the **quantitative data sources** listed above, the evaluation team utilized Microsoft Excel to calculate descriptive statistics such as basic frequencies and averages, such as the number and demographics of those served, the type and number of services rendered, and the number of participants served by the program, among many others.⁴⁰ Data gathered from the **qualitative data sources**, including portions from the intake assessment form and survey, were analyzed using a systematic approach. Responses were transcribed, reviewed, and thematically analyzed to identify recurring themes and key takeaways that informed the evaluation questions.

To further bolster the findings, the evaluation team took a collaborative approach by not only analyzing the data but also hosting a virtual data party with the ALAS team. This data party provided a platform to present the initial findings, encouraging open discussion and feedback. The evaluation team invited the ALAS team to share their perspectives, offer additional context, and ensure that the interpretations were both accurate and culturally appropriate. These discussions were crucial, as they not only validated the findings but also added depth and nuance to the analysis. The insights gathered from this engagement were directly incorporated into the final findings and this report, ensuring that the results were reflective of the ALAS team's and program participants' expertise and experience.

Limitations

Like any real-world program, there are natural limitations to collecting and analyzing data. While this report provides a snapshot of the experiences of farmworkers who participated in the Farmworker Equity Express program, the following limitations should be kept in mind when reviewing the findings. First, **not every participant completed the survey or joined the focus group**, meaning only a portion of feedback was gathered from those engaged with the program. For example, although five farmworkers responded to the survey, more were involved in the program. Similarly, only ten farmworkers completed the intake assessment

⁴⁰ See **Appendix B** for more information on additional data measures.

form, so the results might not fully represent everyone’s experiences. Furthermore, the evaluation team was **unable to match data** across the datasets as there were different unique identification numbers provided in both datasets, making it challenging to understand participants’ trajectory throughout the program. Additionally, **nonresponse bias** should be considered, as those who chose not to participate in the survey or focus group may have different perspectives or experiences from those who did, potentially impacting the overall findings. Additionally, because participation in the surveys was voluntary, there is the possibility of **self-selection bias**—those with particularly strong opinions, whether positive or negative, may have been more likely to participate. This could skew the results and overrepresent certain views. **Self-report bias** is also a consideration, as participants may unintentionally misrepresent their experiences, either by exaggerating or downplaying them. Another factor is **social desirability bias**, where respondents might have felt the need to provide responses they believed were more favorable or acceptable, rather than being fully candid. For example, some participants may have spoken more positively about the program than they truly felt, especially if they were reluctant to express criticism. **Recall bias** could also affect the findings, as participants were asked to reflect on past experiences, and their memories may not always be precise, especially for events that took place earlier in the year.

Limited access to data also posed a challenge, as not all requested data was provided,⁴¹ limiting the evaluation team’s ability to triangulate findings and present a more robust view of farmworkers’ experiences throughout the program. Furthermore, while the survey was offered in both English and Spanish, farmworkers who completed the survey in Spanish found the **self-stigma portion difficult to understand**, describing the Likert scale statements as confusing. As a result, the data from this section was incomplete for nearly all participants and was excluded from the evaluation. It is also important to note that throughout the findings, frequencies are used to present most of the quantitative data, such as demographic characteristics and services accessed, while averages are reported for Likert scale responses. This approach was chosen to provide a clear, accurate interpretation of the results given the **small sample size**, avoiding percentages to prevent any potential misrepresentation or generalization. In addition, RDA follows the Department of Health Care Services (DHCS) data privacy guidelines, where any sample sizes less than 11 that may compromise a participant’s privacy are masked with an asterisk.⁴²

Despite these limitations, the feedback collected can help guide ALAS in refining its programming to better serve farmworkers, their families, and the broader community moving forward.

⁴¹ See ‘**Program Innovations and Adaptations**’ for more information.

⁴² For more information, see: <https://www.dhcs.ca.gov/dataandstats/Documents/DHCS-DDG-V2.1-010821%20%281%29.pdf>

Appendix B. Learning Goals, Evaluation Questions, Data Indicators and Measures, and Data Sources

LEARNING GOAL	PROCESS EVALUATION		
<p>To assess and improve the implementation of the Mobile BHS for Farmworkers program to ensure it effectively meets participant needs, fosters collaboration, and delivers quality services.</p>	Evaluation Question	Data Measures	Data Sources
	<p>How is the Mobile BHS for Farmworkers program being implemented over time?</p>	<ul style="list-style-type: none"> • Successes and/or challenges to implementation • Adaptations to implementation in response to participant needs • Demographics of participants served • Total number of participants served • Total, count, and type of services provided • Collaboration • Staff support • Staff satisfaction • Type of culturally responsive interventions used • Participants' behavioral health needs met 	<ul style="list-style-type: none"> • Farmworker Equity Express staff focus group • Participant focus group • Evaluation meeting notes • Participant survey • Cultural art provider(s) focus group

		<ul style="list-style-type: none"> • Program elements that contributed to participant engagement • Program elements that contributed to participant perceived outcomes 	
OUTCOME EVALUATION			
<p>To determine the extent to which the Mobile BHS for Farmworkers program enhances access to and utilization of behavioral health services among the Latinx farmworker community, while reducing stigma and increasing awareness of available resources.</p>	<p>To what extent does the Mobile BHS for Farmworkers program, a culturally responsive mobile behavioral health resource, expand access to and utilization of behavioral health services in the Latinx farmworker community?</p>	<ul style="list-style-type: none"> • Count of farmworkers/families served by mobile service • Count of farmworkers/families linked to behavioral health services • Count of farmworkers/families attending behavioral health service appointments • Count of farmworkers/families who experienced increased access to behavioral health services • Count of farmworkers/families who experienced increased 	<ul style="list-style-type: none"> • Intake assessment form • Participant survey • Participant focus group • Farmworker Equity Express staff focus group

		<p>awareness of mental health and behavioral health</p> <ul style="list-style-type: none"> Count of farmworkers/families who experienced increased knowledge of mental health and behavioral health 	
<p>To examine the extent to which the Mobile BHS for Farmworkers program improves behavioral health service adoption and outcomes within the Latinx farmworker community, integrating cultural arts activities with formal clinical services, ultimately improving mental and behavioral health along with quality of life.</p>	<p>To what extent does the Mobile BHS for Farmworkers program, an integrated approach using cultural arts and formal clinical services, support behavioral health service adoption and outcomes among the Latinx farmworker community?</p>	<ul style="list-style-type: none"> Demographics, count of farmworkers/families participating in cultural arts activities Farmworker satisfaction with cultural arts activities and behavioral health services Count and average of farmworkers who report experiencing increased protective factors and improved behavioral health outcomes Type and count of referrals and linkages to other resources and services (e.g., basic needs) Count and average of farmworkers who report experiencing improved mental health 	<ul style="list-style-type: none"> Intake assessment form Participant survey Participant focus group Farmworker Equity Express staff focus group Cultural art provider(s) focus group

		<ul style="list-style-type: none"> Count and average of farmworkers who report experiencing improved quality of life 	
<p>To identify and document the needs, best practices, and lessons learned from the Mobile BHS for Farmworkers program, ensuring its adaptability for replication and scaling in other counties implementing similar programs to better support farmworker behavioral health.</p>	<p>To what extent does the Mobile BHS for Farmworkers program identify the needs and best practices to support farmworker behavioral health?</p>	<ul style="list-style-type: none"> Most commonly identified behavioral health symptoms and causes Most commonly identified unmet basic needs Most highly rated program components Program modifications made over time in response to client and staff feedback Reported lessons learned 	<ul style="list-style-type: none"> Intake assessment form Participant focus group Farmworker Equity Express staff focus group Evaluation meeting notes