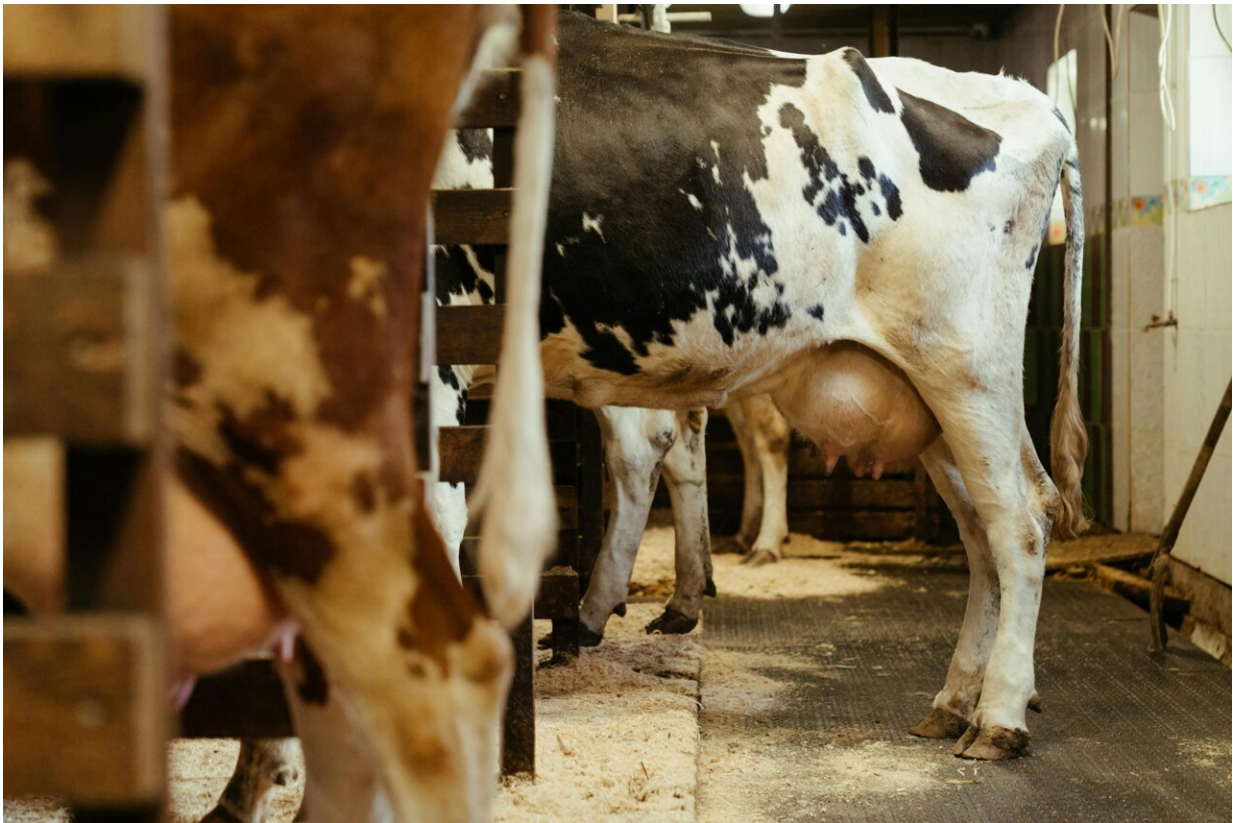


# As bird flu spreads on dairy farms, few workers are tested

July 8 2024, by Nada Hassanein, Stateline.org

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Credit: cottonbro studio from Pexels

Public health officials are concerned about bird flu, which so far has been detected in three dairy farmworkers—two in Michigan and one in Texas—as well as in cattle in a dozen states.

The farmworkers' symptoms were mild, and researchers have not found that the H5N1 virus, also known as bird flu, can spread from person to person. The federal Centers for Disease Control and Prevention says there is little risk to the general public. However, [flu viruses](#) evolve, and H5N1 could mutate and gain the ability to infect people more easily.

"The reason public health authorities are and should be on high alert is because this is a potential high-consequence pathogen," said Meghan Davis, an epidemiologist and microbiologist at Johns Hopkins University.

That's why state officials are so focused on testing and surveillance of dairy workers. But they are encountering significant challenges.

H5N1 is deadly to domestic poultry and can wipe out entire flocks in a matter of days, the U.S. Department of Agriculture says. As a result, the [poultry industry](#) has responded vigorously to the threat, culling entire flocks when they detect even one infected bird. But H5N1 is milder in cows, and the response on [dairy farms](#) has been less aggressive.

The CDC and USDA have advised dairy farms to monitor for the virus in cattle and humans, but testing remains voluntary, except for herds moving across state lines.

In addition, dairy farms are often in remote rural areas, and workers have little access to transportation and no sick leave. As a result, it's difficult for them to travel to health care providers for testing and treatment. Many dairy workers, who are mostly immigrants, speak Indigenous languages like Nahuatl or K'iche, according to the National Center for Farmworker Health, a nonprofit that offers support and training for centers that focus on the health of farmworkers.

Dr. Amesh Adalja, an infectious disease physician and scholar at the

Johns Hopkins Center for Health Security, emphasized that the current bird flu strain isn't a pandemic threat to humans. That's why, he said, this is the perfect time to get the right testing and surveillance measures in place.

"If you can't get it right with something that's as forgiving as this virus has been, in terms of its inefficiency in infecting humans, it really doesn't bode well for when the stakes are higher," Adalja said.

So far, cases of the virus have been documented among domestic livestock in Colorado, Idaho, Iowa, Kansas, Michigan, Minnesota, New Mexico, North Carolina, Ohio, South Dakota, Texas and Wyoming, according to the USDA. Last month, federal officials announced grants to farms to offset the cost of milk loss from sick cows.

Four states—Kansas, Nebraska, New Mexico and Texas—are launching voluntary pilot programs to test for the virus in dairy farms' bulk milk tanks.

In Michigan, where the virus has been detected in 25 herds, Tim Boring, director of the state Department of Agriculture and Rural Development, said efforts are focused on trying to help farmers recoup losses and agree to testing. Last month, the agency announced it would use a combination of federal and state money to give as much as \$28,000 to up to 20 affected farms.

The state also launched a study to find out if there are antibodies in people exposed to sick cows, aiming to determine if there have been any asymptomatic infections.

Dr. Natasha Bagdasarian, Michigan's chief medical executive, said the state is working with community health clinics and local health departments to reach farmworkers.

"They not only know the farms in their counties, but they also know many of the farmworker organizations," she said.

Dairy farmworkers, who are often immigrants, can't afford to miss a day of work, and can be reluctant to reach out to request testing or say they feel sick, advocates say.

"This is a population of people that is just vastly underserved when it comes to both outreach and trust established with state and federal agencies," said Elizabeth Strater, strategic campaigns director at United Farm Workers, a labor union. "This is a group of workers that are some of the poorest workers in the United States."

Immigrants make up 51% of daily labor at dairy farms, and farms that employ immigrants produce 79% of the nation's milk supply, according to the National Milk Producers Federation.

Amy Liebman of the Migrant Clinicians Network, an education and outreach group of experts in migrant health, said testing should be administered on the farms rather than in clinics.

"Dairies are in rural areas, very isolated geographically. You're not going to get all these workers in one place to be able to do any kind of surveying or testing. It is a matter of really trying to go to where the workers are," she said.

But it hasn't been easy getting farm owners to agree to that. The Texas state health department told Stateline it has offered on-site testing to farmers, but as of mid-June, it had tested only about 20 symptomatic dairy workers who volunteered for testing. It also has given personal protective equipment to "interested dairies" and posted a notice online offering to deliver the equipment.

Coordination among state or local agricultural and health departments is key to tracking viral spread. A lack of coordination and monitoring can be contributing to underreporting cases.

"I think it is definitely more widespread than is currently reported," said Dr. Shira Doron, chief infection control officer at Tufts Medicine. "The barriers between the agencies are really hampering our efforts right now."

The CDC has offered a \$75 payment to any farmworker who agrees to be tested and provide blood and nasal swab samples to the agency. But Doris Garcia-Ruiz, who directs farmworker outreach at Texas Rio Grande Legal Aid, said that won't make up for days of lost income.

"If they take the time off to go to their doctor's office, they don't have sick leave, so they're not going to get paid," she said.

The CDC's latest figures show that at least 53 people have been tested in the cattle outbreak, with a majority of those in Michigan. Strater says that's not enough.

"That's abysmal," she said. "Our method of testing is so passive. They're relying on workers reporting to medical clinics; these are workers that are not going to be taking themselves for medical treatment unless they're experiencing something life-threatening."

Getting workers to use personal protective equipment also is a challenge. The CDC recommends that workers wear respirators, waterproof aprons and coveralls, unvented safety goggles or a face shield, and rubber boots with sealed seams that can be sanitized. It also advises that workers follow a specific sequence of steps to remove the PPE at the end of a shift to avoid contamination.

"Dairy work is very wet, very hands-on," said Christine Sauvé, who leads community engagement at the Michigan Immigrant Rights Center.

"While some industries are very familiar with PPE ... the full recommendation from CDC is new and different. And so that really needs the full promotion from the employer, and then also from the state agencies."

Sauvé worries that Michigan is prioritizing farmers' losses, rather than farmworkers' health, in its response. While the risk to the public is low, she and other experts say the population of farmworkers shouldn't be forgotten.

Bethany Alcauter of the National Center for Farmworker Health described [bird flu](#) threat as "kind of a ticking time bomb."

"Maybe it hasn't fully gone off yet. But if we don't manage it well, it could," Alcauter said.

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