Student Nurses' Experiences with Invisible Workers in the Backstretch 11th National CHNC Conference

Stephanie Eusebio, Laura McKenzie, & Aryn Nemani
University of New Brunswick/Humber College
Collaborative BN Program





Our Clinical Group







University of New Brunswick/Humber College Nursing Curriculum

- Humber College is proud of its collaboration with the University of New Brunswick
- Community health nursing is the main focus during the fall of third year
- There were 31 community placements during the fall 2015 semester
- Each placement consisted of 7-8 students and a clinical instructor
- We were the first group to be placed at Woodbine Racetrack



Objectives

- Highlight our "invisible population" at the racetrack including their strengths and health risks
- Explore the use of the community health nursing process to address the health risks of the population
- 3. Demonstrate the value of unique clinical placements to advance practice for community health nursing students
- Demonstrate the need for greater CHN advocacy in the backstretch community



Woodbine Racetrack



- Woodbine Racetrack is located in Toronto, Ontario
- Main focus is on horseracing and gambling
- It is the largest racetrack in Ontario
- Common perception is that horseracing is a glamorous industry
- Few know about the backstretch population
- This "invisible population" is underserviced and faces extreme health inequities

Our Population: The Backstretch

- This population is a tightknit community who share a unique lifestyle and culture
- Backbone of the horseracing industry
- Typical positions include: hot walkers, groomers, exercise riders and blacksmiths
- Working season is between mid-March and mid-December



Demographics

- Total population: approximately 1,800 backstretch workers
- Gender: primarily male dominated
- Age range: 18 mid 70s
- Working status: a mix of local, migrant and immigrant workers
- Education level: varies





Gatekeeper

Chaplain Shawn

- Member of the Race Track Chaplaincy of Canada
- Various responsibilities on a daily basis
- Advocate for the backstretch population
- Key liaison between the backstretch community and
 - outside resources
- Served as a gatekeeper for our group project





Our Project

Aim

- To determine the health assets and health risks of the backstretch workers at the racetrack
- To support the development of interventions that would improve the quality of health of the population

How

Utilized the Community Health Nursing Process

Resource

 Diem, E., & Moyer, A. (2005). Community health nursing projects: Making a difference. Toronto. Lippincott & Williams



Assessment

- Windshield Survey of the community was conducted
- Focused on the following sectors: economics, health and social services, recreation, physical environment, safety and working conditions, transportation, & social support systems
- Gathered information about the population, their strengths and their risks
 - a. Primary Sources
 - b. Secondary Sources





Economics

- Average salary between \$300-\$500 per week
- No benefits and sick days
- Unregulated profession

Health and Social Services

- Partnership with the Rexdale Community Centre
- Onsite access to social worker
- Massage therapy through Humber College
- Red Cross Blood Donor and One Match clinic events
- Limited access to healthcare providers (e.g., doctor, nurses)
- Limited access to dental services



Recreation

- Lack of organized recreational activities
- Lack of opportunities to socialize
- Greater risk of alcohol and drug use
- Increased rate of gambling

Physical environment

- John Howard Community Centre
- Physical isolation from the outside community
- Poor living conditions



Safety & Working Conditions

- 13-16 hour work days
- Unsafe work environments
- Lack of safety equipment
- High levels of physical and mental stress

Transportation

- Limited access to automobiles
- Limited access to public transportation
- Heavy reliance on bicycles and walking



Social Support Networks

- Organized activities through the chaplaincy
- Live onsite during race season
- Relationships among the population varied





Population Strengths:

- Strong work ethic
- A love of horses
- Dedication to their work and the horses
- Comradery and close friendships
- Resilience throughout the community
- Support from Chaplain Shawn



Population Risks:

- Poor living and working conditions
- Poor dental health and practices
- Poor knowledge and awareness of nutrition
- Limited knowledge about healthy sexuality and safe sex practices
- Inadequate management of repetitive work injuries and discomforts related to job
- Ineffective coping skills to deal with tremendous stress
- High risk of loneliness and depression related to social isolation



Planning

Priority Issues for Action

- 1. Lack of access to information and support related to
 - a. Healthy sexual practices and consent
 - b. Effective dental health practices
 - c. Effective stress management skills
 - d. Appropriate joint and musculoskeletal pain management
- 2. Lack of access to positive recreational activities
 - Healthy social interaction



Health Promotion Strategies

- Develop Personal Skills: Health Fair
 - Healthy sexuality and consent
 - Dental health
 - Stress management
 - Joint and musculoskeletal pain management
- 2. Create Supportive Environments
 - Bowling night



Action

- 1. Health Fair
 - Time
 - Place
 - Attendance
- 2. Bowling Night
 - Time
 - Place
 - Attendance



Evaluation

- Health Fair
- Bowling

Limitations

- Finances
- Time restrictions
- Varied schedules of the population

Sustainability

Resources left behind



Conclusions

- The backstretch workers are an invisible population
- Resilient and dedicated workers who are passionate about horses
- They experience many barriers to health
- Unique clinical placement
- There is a need to support and raise awareness about the population



References

- Bailey, D. N., & Dougherty, A. (2014, January). A nurse-led wellness program for migrant backstretch workers. *Nursing Forum*, 49(1), 30-38.
- Campbell, R. M., Klei, A. G., Hodges, B. D., Fisman, D., & Kitto, S. (2014). A comparison of health access between permanent residents, undocumented immigrants and refugee claimants in Toronto, Canada. *Journal of Immigrant and Minority Health*, 16(1),165-176.
- Castaneda, H., Kline, N., & Dickey, N. (2010). Health concerns of migrant backstretch workers at horse racetracks. *Journal of Health Care for the Poor and Underserved*, 21(2), pp. 489-503
- Diem, E., & Moyer, A. (2005). *Community health nursing projects: Making a difference*. Toronto. Lippincott & Williams
- Kiesler, J., Vaughn. L.M., & Kaur, G. (2013). "Voicing" the social determinants of health on the backside of a horse racetrack. *Journal of Health Care for the Poor and Underserved*, 24(3), pp. 1074-1088





References

- KY Racing Health Services Center Celebrates A Decade Of Helping Backstretch Workers. (2015, April 23). Retrieved from http://www.paulickreport.com/ news/the-biz/ky-racing-health-services-center-celebrates-a-decade-of- helping-backstretch-workers/
- Medley, M. (2015). The community that ensures Woodbine Racetrack thrives.

 *Race Track Chaplaincy of Canada. Retrieved from http://www.rtccanada.com/public/index.cfm?menuid=411&shownews=true
- Snierson, L. (2015, April 5). Aiding former backstretch workers. The eighth pole perseveres in New England. Retrieved from https://www.thoroughbredracing.com/articles/aiding-former-backstretchworkers-eighth-pole-perseveres-new-England
- Swanberg, J., Clouser, J., Westneat, S., Marsh, M., & Reed, D. (2013).

 Occupational injuries on thoroughbred horse farms: A description of Latino and Non-Latino workers'experiences. *International Journal of Environmental Research and Public Health.* 10(12), 6500-6516. doi: 10.3390/ijerph10126500





THANK YOU





