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Agriculture has long been recognized to be a hazardous profession. Within the past decade, increasing attention has been paid to quantifying and correcting these hazards.¹ Traditionally, efforts designed to correct the risk associated with agriculture have included the triad of education, engineering, and enforcement.² These approaches have unquestionably been a very important means of addressing the problems of injuries and medical illness linked to work on farms. However, limiting interventions to engineering innovations, education and enforcement of regulations is not sufficient. Education efforts, while very important, have not been proven to be effective. Engineering innovations such as rollover protective structures on tractors have been important for the reduction of injuries and fatalities but are not in place on many pieces of older equipment. Enforcement of safety regulations have traditionally not had a large impact on the family farm. Farms with ten or fewer employees are currently effectively exempt from OSHA regulations governing safety practices in agriculture.

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Injury and death rates in agriculture continue to be relatively high.³ In 1995, the death rate in agriculture was 24 per 100,000 workers compared to 4 per 100,000 for all occupations. According to this data, agriculture was second only to mining in terms of risk for fatal injury. A variety of medical illnesses are disproportionately common in those engaged in production agriculture, including respiratory disease, cancers of the lip and the skin, and hearing loss. There is also some evidence that cancers of the hematopoietic system are more common in agricultural workers. In some aspects of agriculture, for example, animal confinement, up to 50% of workers are affected by work-related respiratory disorders.⁴

Barriers exist to implementation of health and safety practices that can make farms a safer workplace. Farmers have a high level of awareness and concern about the health problems they face.⁵ Reasons for not using existing safety devices such as rollover protective structures include the cost of retrofitting older equipment, concern that they are not effective and concern about interference with operation of the tractor. Cost also plays a role in a farmer's decision concerning utilization of occupational health services at clinics such as those that exist in Iowa through the Iowa Agricultural Health and Safety network.

There is a need for new incentives to help convince farmers to take advantage of existing technology to reduce hazards from working with machinery as well as health risks from agricultural exposures. Insurance rebates have been proposed as mechanisms for providing immediate incentives and increasing the affordability of network services and other costs of primary prevention.⁶ Financial incentives linked to successful completion of a farm safety inspection have been successfully used to improve farm work environments in Minnesota.⁷

To date, this model has not been applied to reduction of health insurance premiums. It is proposed that a farm inspection and health promotion process be linked to health insurance products for farmers who choose to participate in the program. This program would consist of the three-fold approach to the problem of the high incidence of injury and illness on farms. Voluntary enrollment in this program would lead to inspection of each participating farm and health screening of participants by trained personnel. Identification of problems would be followed by recommendations for corrections. An opportunity would be given for making necessary changes. Participating farmers would also utilize screening and preventive medicine services designed to address health problems for which they are at risk. These programs will be coupled with an education effort with a focus on prevention and risk reduction.

Two midwestern health insurance carriers have expressed strong inter-

est in the development of this type of program for farm families. Their claims processing infrastructure could be used to determine whether or not participating farm families have fewer claims for injury or illness related to work on the farms than do control farmers. Also, claims information could be used to assess the financial feasibility of such a program, which is critical to such a venture. Existing agricultural injury data collection systems, including the program for agricultural injury surveillance in Iowa, would be used to monitor injuries.

In summary, it is proposed that health insurance incentives be offered to farmers to participate in a safe farms program targeting both machinery lacking available safety features as well as the prevention of medical illness such as pulmonary disorders, cancer and dermatoses. The time has come to work more closely with the health insurance industry to devise economically feasible and sustainable programs to benefit farm families.

REFERENCES

1. National Coalition for Agricultural Safety and Health. 1989. *Agriculture at Risk: A Report to the Nation*. Iowa City, IA: The Institute of Agricultural Medicine and Occupational Health, University of Iowa.
2. Murphy DJ. Safety and health for production agriculture. St. Joseph, MI: American Society of Agricultural Engineers, 1992.
3. Accident Facts, 1995 ed. Chicago, IL: National Safety Council.
4. Donham KJ, Rubino MJ, Thedel TD, Kammermeyer J. Potential health hazards of workers in swine confinement buildings. *J Occup Med* 1977; 19:383-87.
5. Thu K, Donham KJ, Yoder D, Ogilvie L. The farm family perception of occupational health: A multi-state survey of knowledge, attitudes, behaviors, and ideas. *Am J Ind Med* 1990; 18:427-32.
6. Shutske JM, Ohmans PJ. Shifting the paradigm: Rethinking our approach to agricultural safety and health issues. *J Agromed* 1995; 2(3):39-44.
7. Shutske JM, Bryant D. Using inspections to promote farm safety: A summary of the Farm Insurance Safety Audit Project (FISA). University of Minnesota Extension Service and Department of Agricultural Engineering; School of Public Health, Division of Environmental and Occupational Health. 1994.