

Poster #3

University of California, Davis Farmer Health Study: 1993-2006

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Introduction: Although California is the leading agricultural state, few health studies have considered the broad range of Californian farmers. The UC Davis Farmer Health Study followed a randomly chosen state-wide cohort with an aim to identify the prevalence and risk factors for acute and chronic disease.

Methods: 1,947 California farmers were interviewed by telephone in 1993, with follow-up surveys in 1998 (N=1349) and 2004 (N=866). Sub-studies using pulmonary function testing were completed in 1996 and 2003. Subjects answered questions on farming tasks, environmental exposures, and their health status. Both cross-sectional and longitudinal analyses tested associations between risk factors and health outcomes, adjusting for age and relevant covariates. Death rates were compared between farmers and the general California population.

Results: A selection of major findings follow: Farming time in dusty conditions was independently associated with the prevalence of persistent wheeze in 1993 (high dust exposure OR = 1.9, (95% CI = 1.1-3.3), and persistent wheeze was associated with a decline in work ability ($p=0.0001$) in a multivariate model. Those with respiratory symptoms in 1993 significantly reduced time in dust by 14% (95% CI = 7.2-20.7), the symptomless only by 3% (95% CI = 0.5-4.7). Sprains and strains were the most common injury (42.9%). Risk factors for injury include previous injury, medium or high exertion level and workshop activity. Of 1797 tracked subjects, 233 (13%) were deceased by 2005. In 1998, adjusting for age, 35 male deaths were expected while only 22 were observed.

Conclusions: Major risk factors exist for farmers, especially with respect to injury and respiratory health. Effective communication of these risks and preventative measures must be the next priority.

This study is funded by NIOSH # 1U50 OH07550

Poster #4

Farmworker Injury Research To Practice: Farmworker Injury Data Translated Into Occupational Health Training For Migrant Health Center Clinicians

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Background: Results from Northeast Center research indicate that while a substantial proportion of adult migrant farmworker visits to health centers involve a work-related injury or illness, nearly 50% of clinicians report never having had any training in occupational medicine.

Objectives: Northeast Center researchers translated an extensive body of migrant farmworker injury and occupational illness data collected over 5 years and 7 states into an occupational medicine training curriculum specifically targeted to farmworkers. A manual developed collaboratively with the Migrant Clinician's Network is the first of its kind in the nation. The current presentation relates to the formative evaluation of this manual.

Methods: Interviews were carried out with 8 Northeast migrant clinicians to determine the optimal format and content for daily use. A prototype occupational health-training module was then developed and presented at a conference of migrant health professionals. Once a final draft was approved, a formal evaluation was undertaken to ascertain the level of use and degree of usefulness in a number of Northeastern migrant health centers. The manual was disseminated to 30 providers at several migrant clinics; some providers received a one-day training in its use by an occupational medicine physician, to others with no associated training, allowing researchers to also determine the optimal dissemination method.

Results: Important content sections identified by clinicians for inclusion were: Virtual farm visits, including extensive photos and common injuries and conditions (provided in the Commodity Profiles section), Diagnosis and Treatment of farmworker injuries, Cultural Competency, Workers Compensations Forms, Patient Education.

Conclusions: Evaluation results indicate that the NEC-MCN Clinician's Manual is useful to Migrant Clinicians,

HEALTH & SAFETY IN WESTERN AGRICULTURE: Research to Practice



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