Safety Watch: Collaboration protects farmers in Argentina

April 11, 2016

Editor’s note: In 2015, Dr. Marcos Grigioni traveled to Iowa from Argentina to meet with agricultural safety and health practitioners at the University of Iowa. Dr. Grigioni attended the University of Iowa Rural Health and Agricultural Medicine Course, visited several farms, took part in a Practical Farmers of Iowa field day and spent time with the staff of Iowa’s Center for Agricultural Safety and Health (I-CASH). In May, researchers from the UI College of Public Health will travel to Argentina to meet with farmers, veterinarians and university staff to begin developing an agricultural safety and health program for Argentine producers.

By Dr. Marcos Grigioni and Brandi Janssen, PhD

In Argentina, as in almost all the world, rural work is some of the most risky and dangerous, with large numbers of deaths and injuries from accidents and illnesses. But unlike other countries with rich agricultural heritage, in Argentina, the protection of the health and safety of a rural producer and his team of family labor is almost nonexistent.

Thanks to the collaboration provided by professionals from the University of Iowa and I-CASH, agricultural health and safety begins to be on the agenda of many government institutions, producer organizations and companies linked to the Argentine rural sector.

Agricultural development in Argentina has been accompanied by a huge range of training and education in many varied areas, including: administration, economics, computer science, languages, marketing, mechanics, biotechnology, among others. In parallel, many research and related activities emphasize “sustainability and sustainable rural development” to meet current needs without compromising the lifestyles and satisfaction of future generations.

However, “the Achilles heel of Argentina’s agricultural production” is the huge deficit related to the training of farmers on issues related to health and safety. Rapid and increasingly complex development of new production methods has exposed producers and their families to new challenges and dangers. Most of the problems arising from changes in the way farmers produce have been addressed by the wealth of information and support offered by different companies, government and non-profit agencies.

Unfortunately, the emphasis on production has resulted in a gap in services addressing the health and safety of farmers. As a result, farm injuries are responsible for many rural deaths each year — at least 62 farmers, 33 children and 108 rural workers in 2015.

There are some very positive exceptions. For example, numerous training activities related to the handling of agrochemicals are carried out by local, provincial and national governments, input companies and producer’s organizations. This shows that when the decision is made, change can happen. (continues next page)
However, this interest for training on issues related to agrochemicals is caused more by pressure from urban residents concerned about the environmental aspect than interest in caring for farmers’ health.

Like in Iowa, farming is an important industry. Also as in Iowa, the public lacks information and knowledge about the agricultural sector and livestock production. This has resulted in many attacks on agriculture in Argentina.

To reverse this situation, the agricultural sector should generate abundant and reliable information from the work of all branches and specialties that are involved in farming. This transforms knowledge into the best defense and, at the same time, into an instrument of development and growth of the sector. Education and prevention remain the main tools for combating farm-related accidents and diseases.

In Argentina, thanks to the collaboration and help of professionals from the University of Iowa and Iowa’s Center for Agricultural Safety and Health (I-CASH), agricultural medicine is taking its first steps, adding more and more space on the agenda of those professionals, institutions and organizations really concerned about rural development and the welfare of producers and their families.

This joint work, knowledge and experience of professionals from the University of Iowa and I-CASH, when applied in Argentina, will serve to preserve health and even save the lives of farmers who live thousands of kilometers away and who may never meet in person.

This cooperative work is one of the pillars of agricultural medicine. Focusing only on production is a short-term goal; if agricultural producers do not stay healthy, all the rest of the production chain suffers. To do this we need to develop an intersectoral and multidisciplinary network composed of governmental and non-governmental organizations, social work, organizations of professionals, producers, health institutions, private educational and public, media and businesses to encourage the health and safety of agricultural workers in a coordinated manner.

There are many opportunities for collaborations in Argentina that could improve health and safety in agriculture. Companies whose customers are farmers must commit to not only commercial activities, but also social actions. Producer organizations and the health system should also be links in agricultural occupational risk prevention.

Argentine universities should include the farmer and their families within a non-formal education scheme, luring them with educational offers that can quickly and effectively be applied to their daily rural work. This will especially benefit small and medium producers so they have a better quality of life and thus higher productivity.

In Argentina, we should begin by understanding that “increased production does not mean a better quality of life for producers” and that talk of sustainability and sustainable rural development is utopian until we change the sad reality that shows that in each agricultural campaign, we lose dozens of producers and rural workers in accidents.

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