

Farm women - health, wellbeing and safety

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Presentation Aims



- Women and farms
- Sustainable Farm Families (SFF)
- Program process
- Results



Agriculture - our human resource

- Contribute approx. 35.6 billion (ABS 2006)
- Aging workforce across Australia
- Predominantly family owned or operated
- Rural health statistics high rates of **preventable illnesses, injury and suicides**



Women work on farms/ off farms

- Farmers
- Management and administration tasks
- New farming business opportunities
- Main carers (triple shift)
- Often support the farm with off farm income
- Reports on the Invisible Work of Farm Women (RIRDC)
- Hide farm work (Pini,B 2005)





In 1893 women working or contributing to farm work were removed from the census.

1. True
2. False

Farming businesses – linkage to health conditions?





Sustainable Farm Families (SFF)

- Informed by a social model of health SFF
- Recognises health & rural sustainability is created where live, work & people play
- Delivered to farm (women and men)



Sustainable Farm Families

- Better health
- Better business
- Better understanding

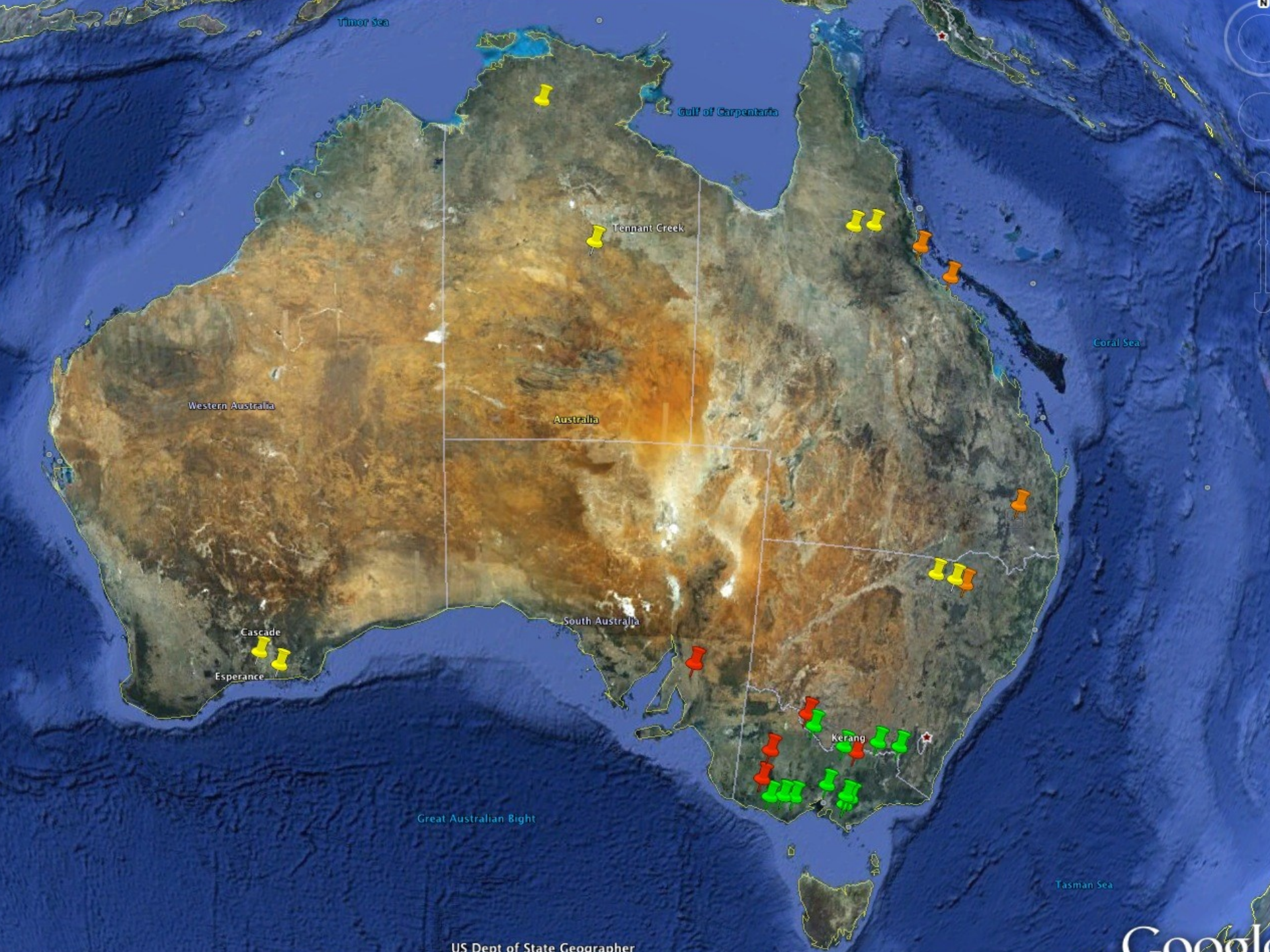




Sustainable Farm Families™

The most important aspect of a healthy Australian farm?
A healthy farming family.





Timor Sea

Gulf of Carpentaria

Coral Sea

Western Australia

Australia

South Australia

Cascade

Esperance

Great Australian Bight

Kerang

Tasman Sea

SFF Program – how it works

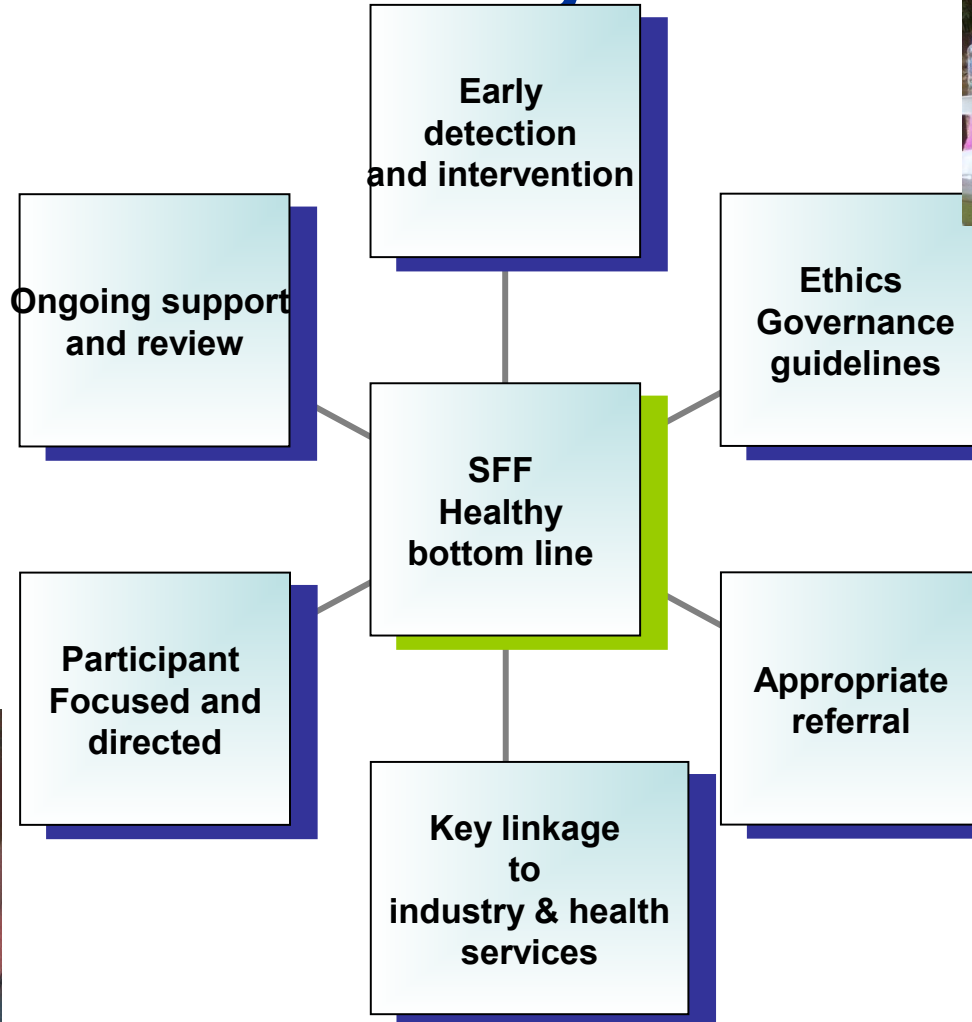
Recruitment and close collaboration with industry partners and health services to optimise delivery of programs

Workshop one -Physical assessment and referrals
2-days with focus on rural health, cancer, heart, stress, diet, OH&S, gender specific issues and taking action

Workshop two- Physical assessment and referrals
1-day program with focus on anxiety, depression
Gender specific issues to opposite sex. Action planning

Workshop three- Physical assessment and referrals
1- day program focus on health and business,
Diabetes, physical activity and action plan review

SFF and Farm Family Health



Walk the talk –healthy food



Results



**Broadacre, dairy, cotton, sugar and remote n = 521
 (women n= 264, men n = 257)**

Variable	Number of participants	Percentage of participants
Female	264	50.7%
Born in Australia	238	90.2%
Language other than English	3	1.1%
Current smoker	18	6.8%
Previous smoker	66	25.1%
Mod – Severe body pain previous 4 weeks	69	26.2%
Health rating, good - excellent	240	90.9%
Health rating poor to fair	24	9.1%

Data SFF,SDFF, SCFF and Remote

Factor Year 1 only	SFF n=58 (22%)	SDFF n=101 (38%)	CSFF n=34 (13%)	Remote n=70 (26%)
Australian born (%)	91	91	82	91
Spoke English at home (%)	100	97	100	100
Average Age (years) <small>(range 22-72)</small>	46	48	48	42
Currently Smoke (%)	1.4	5.9	8.8	12.8
Alcohol least weekly (%)	65.5	29	53	76.1
Drink at high-risk levels ^a at least once a month (%)	20.7	11	23.5	45

Women with risk factors

Clinical indicators for at risk

Body mass index \geq (n=157)

Total cholesterol \geq 5.5mmol (n=66)

*(additional 6 on lipid therapy)

Total blood glucose \geq 5.5 mmol (n=71)

Waist circumference \geq 88cm (n=126)

Blood pressure (systolic) \geq 140 (mm Hg)(57)

Blood pressure (diastolic) \geq 90 (mm Hg) (46)

% participants

60%

25%

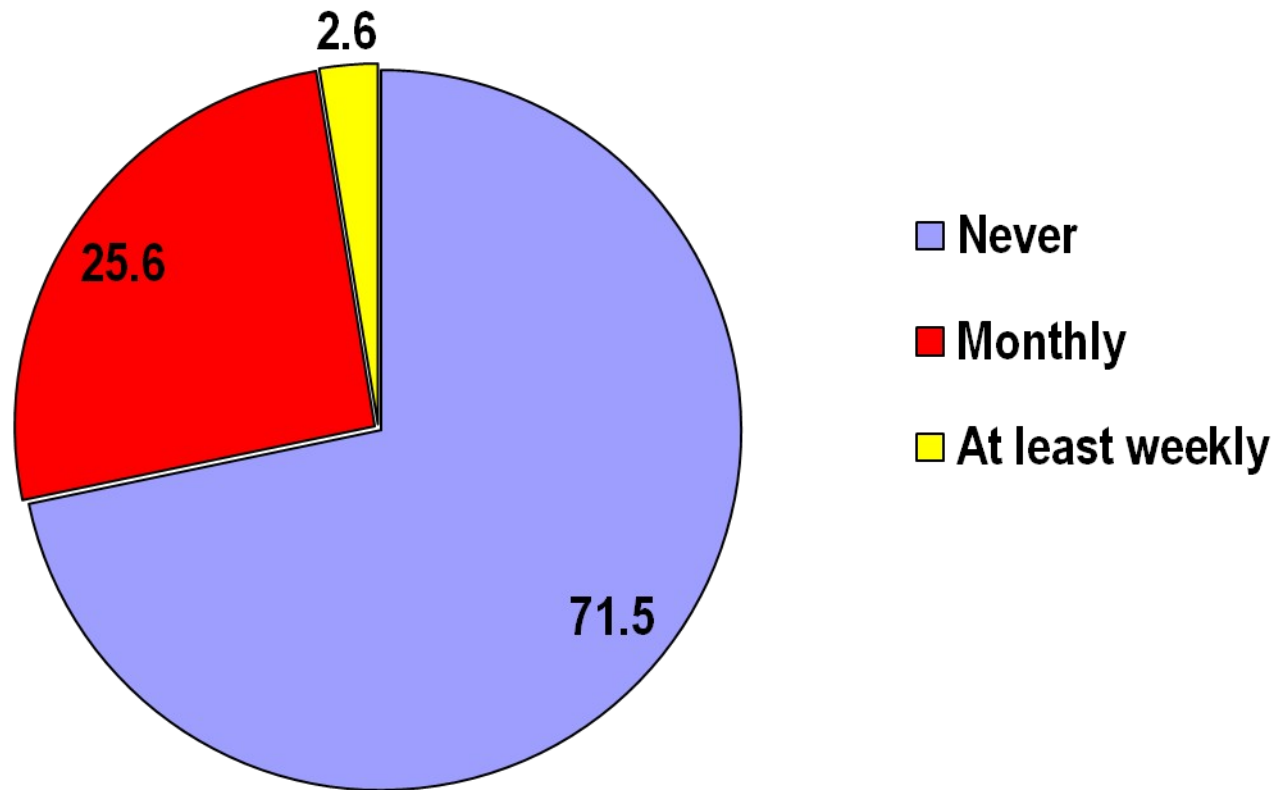
27.1%

48%

21.6%

17.4%

More than 6 standard drinks in one occasion n = 235 (89%)



Changes over the program – all women (2 year data)

Clinical indicators for participants at risk

Body mass index ≥ 25 (n= 219)

Mean (+standard error)

-.201 (.089) *

Total cholesterol ≥ 5.5 mmol (n=219)

-.214 (.065)**

Total blood glucose ≥ 5.5 mmol (n=219)

-.048 (.046)

Waist circumference ≥ 88 cm (n=219)

-1.343 (.879)**

**Blood pressure (systolic) ≥ 140 (mm Hg)
(n= 221)**

-2.33 (.650)**

**Blood pressure (diastolic) ≥ 90 (mm Hg)
(n= 221)**

-.213 (.213)

Changes over the program – women with elevated indicators (2 year data)

Clinical indicators for participants at risk

Body mass index ≥ 25 (n=130)

Total cholesterol ≥ 5.5 mmol (n=55)

Total blood glucose ≥ 5.5 mmol (n=52)

Waist circumference ≥ 102 cm (n=105)

Blood pressure (systolic) ≥ 140 (mm Hg)
(n=48)

Blood pressure (diastolic) ≥ 90 (mm Hg)
(n=42)

Mean (+standard error)

-.363 (.135) **

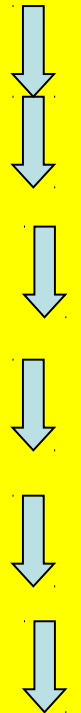
-.821 (.1529)***

-.594 (.106) ***

- .25(.462)***

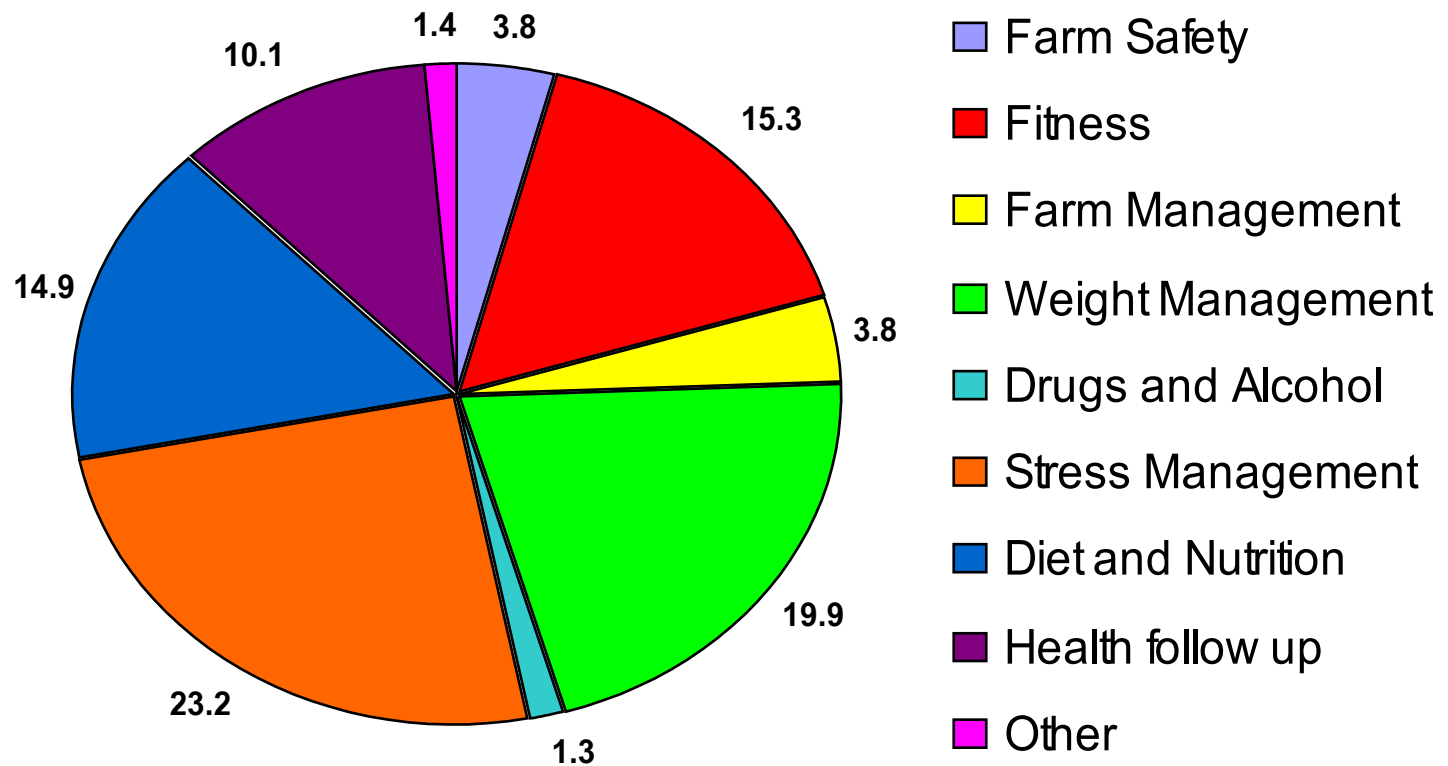
-10.35 (1.79)***

-7.167 (1.265)***



Action Plans - Women

(247/264 responded)





Results ?

- Overwhelmingly women felt more empowered
- Improved risk factors
- High numbers of returns 83%
- Policy guidance for industry and government
- Making health matter to farming families
- Feeding into the National Centre for Farmer Health



As you leave today

- 1.** Identify one thing personally or professionally you can do to work with women in farming populations.
- 2.** Consider women living on farms as a specific target group



Thank you to our funding bodies



An Australian Government Initiative



Joint Research Venture
Rural Industries R&D Corporation
Grains R&D Corporation
Meat & Livestock Australia
Australian Wool Innovation Ltd
Sugar R&D Corporation
Cotton R&D Corporation
Dairy Australia



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Australian Government
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Australian Government
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Development Corporation**



Australian Government
Department of Health and Ageing



Department of
Primary Industries

National Centre for Farmer Health Inaugural Conference

‘Opening the Gates on Farmer Health’



11-13 October 2010
Hamilton, Victoria

For more details visit

www.farmerhealth.org.au