

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Centers for Disease Control and Prevention****National Institute for Occupational Safety and Health**

[Announcement Number 736]

Intervention Studies in Agricultural Safety and Health; Notice of Availability of Funds for Fiscal Year 1997**Introduction**

The Centers for Disease Control and Prevention (CDC), National Institute for Occupational Safety and Health (NIOSH), announces that grant applications are being accepted for innovative small projects relating to occupational safety and health in the agriculture industry. Such projects are intended to develop and evaluate the effectiveness of methods or approaches for preventing injuries and illnesses among agricultural workers. Thus, this announcement is not intended for traditional hypothesis-testing research projects to identify and investigate the relationships between health outcomes and occupational exposures to hazardous agents.

CDC is committed to achieving the health promotion and disease prevention objectives of "Healthy People 2000," a national activity to reduce morbidity and mortality and improve the quality of life. This announcement is related to the priority area of "Occupational Safety and Health." (For ordering a copy of "Healthy People 2000," see the section *Where to Obtain Additional Information*.)

Authority

This program is authorized under the Public Health Service Act, as amended, Section 301(a) (42 U.S.C. 241(a)), and the Occupational Safety and Health Act of 1970, Section 20(a) (29 U.S.C. 669(a)) and Section 22 (29 U.S.C. 671). The applicable program regulation is 42 CFR Part 52.

Eligible Applicants

Eligible applicants include nonprofit and for-profit organizations, universities, colleges, research institutions, and other public and private organizations, including State and local governments and small, minority- and/or woman-owned businesses.

Note: An organization described in section 501(c)(4) of the Internal Revenue Code of 1986 which engages in lobbying activities

shall not be eligible to receive Federal funds constituting an award, grant, contract, loan, or any other form.

Smoke-Free Workplace

CDC strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of all tobacco products, and Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities that receive Federal funds in which education, library, day care, health care, and early childhood development services are provided to children.

Availability of Funds

About \$500,000 is available in fiscal year (FY) 1997 to fund approximately 3 to 4 project grants. The amount of funding available may vary and is subject to change. Awards are anticipated to range from \$150,000 to \$200,000 in total costs (direct and indirect) per year. Awards are expected to begin on or about September 1, 1997. Awards will be made for a 12-month budget period within a project period not to exceed 3 years. Continuation awards within the project period will be made on the basis of satisfactory progress and availability of funds.

Use of Funds**Restrictions on Lobbying**

Applicants should be aware of restrictions on the use of HHS funds for lobbying of Federal or State legislative bodies. Under the provisions of 31 U.S.C. 1352 (which has been in effect since December 23, 1989), recipients (and their subtier contractors) are prohibited from using appropriated Federal funds (other than profits from a Federal contract) for lobbying Congress or any Federal agency in connection with the award of a particular contract, grant, cooperative agreement, or loan. This includes grants/cooperative agreements that, in whole or in part, involve conferences for which Federal funds cannot be used directly or indirectly to encourage participants to lobby or to instruct participants on how to lobby.

In addition, the FY 1997 HHS Appropriations Act, which became effective October 1, 1996, expressly prohibits the use of 1997 appropriated funds for indirect or "grass roots" lobbying efforts that are designed to support or defeat legislation pending before State legislatures. This new law, Section 503 of Public Law No. 104-208, provides as follows:

Section 503(a) No part of any appropriation contained in this Act shall be used, other than for normal and recognized executive-legislative relationships, for publicity or

propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, radio, television, or video presentation designed to support or defeat legislation pending before the Congress, * * * except in presentation to the Congress or any State legislative body itself.

(b) No part of any appropriation contained in this Act shall be used to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence legislation or appropriations pending before the Congress or any State legislature.

Department of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 1997, as enacted by the Omnibus Consolidated Appropriations Act, 1997, Division A, Title I, Section 101(e), Public Law 104-208 (September 30, 1996).

Background

Agricultural workers represent a major workforce in the United States. The agricultural industry, by classification, includes those involved in farming, agricultural technology, fishing, and forestry. The health and safety effects in this industry are diverse, and the potential for disease and injury covers a wide range of populations and work.

Hired workers, farm owner-operators, and unpaid family members who live in the work environment are exposed to the health and safety hazards of farming in the United States. The number of hired workers varies widely by season from 600,000 to 950,000 workers (United States Department of Agriculture (USDA) National Agricultural Statistics Service, Farm Labor, 1995 and 1996). USDA data show 5.9 million persons own, operate, and manage farms or are family members who live on these farms (Farm Costs and Return Survey, 1993). It is unknown how many children and other family members of migrant or seasonal workers who are not recorded as working are exposed. These agricultural workers and their families experience a disproportionate share of fatalities, injuries and diseases associated with many physical, chemical, and biological hazards. Because many who work in agriculture are not covered by traditional protections (e.g., workers' compensation, Occupational Safety and Health Administration regulations), data on such injuries are more difficult to reach and available data are likely to underestimate the scope of the problem.

According to the National Traumatic Occupational Fatality surveillance system, the fatality rate for agricultural industries is 2.6 times greater than the national average for all industries; the

average is more than 740 deaths annually. Data from the Bureau of Labor Statistics Annual Survey for 1994 indicate that the rate for injuries involving lost workdays in the agricultural industries exceeds all industry sectors (including mining) except construction and transportation.

Agricultural workers are also more likely to develop serious work-related illnesses or disabling conditions. In particular, agricultural workers experience increased rates of certain forms of lung disease (e.g., occupational asthma and hypersensitivity pneumonitis); cumulative trauma disorders such as carpal tunnel syndrome and other musculoskeletal disorders; noise-induced hearing loss; and certain types of cancer (e.g., leukemia, non-Hodgkin's lymphoma, and multiple myeloma).

In 1989, Congress directed CDC to sponsor broad-based, public health initiatives to reduce the significant injuries and illnesses among agriculture workers and their families. Through cooperative agreement awards, the National Institute for Occupational Safety and Health (NIOSH) established cooperative efforts with universities, public health departments, and others, to address the research, surveillance, and intervention priorities of the agricultural industry. These programs included laboratory research, broad-based epidemiology, public health surveillance, education and training, and the provision of basic health and hazard control services in the agricultural community.

In December 1994, an external review panel evaluated the NIOSH Agriculture Initiative. The panel recommended that NIOSH continue its strong support of the Agriculture Initiative; and in addition to its current efforts, provide for intervention research grants to enable current and previous collaborators, as well as other groups, the opportunity to propose innovative research or demonstrations projects. Interventions include techniques such as engineering control technologies, model standards, worker participation programs, training, and community programs to prevent disease or injury. Intervention research determines the efficacy and efficiency of these techniques or combinations of these techniques.

Although many intervention strategies have been applied to various work settings, knowledge about what works best is limited. Employers, owner-operators, agricultural workers, public decision makers, cooperative extension services agents, and others, need this information to make informed decisions

about prevention strategies that work well and support the use of limited resources. Research is needed to pilot and evaluate prevention intervention efforts which, if successful, can be adopted on a wider scale in a region or throughout the nation. This work should be done in cooperation with agricultural workers and employers to assure consideration of the economic and organizational factors that determine if interventions will be adopted.

Purpose

NIOSH seeks to prevent work-related diseases and injuries in the agricultural production industry by designing, implementing, and evaluating measures to reduce occupational hazards. If prevention measures are currently unavailable, new technologies should be developed for controlling hazardous exposures. Such new technologies must be evaluated to determine if prevention measures are feasible, even for smaller agricultural operations.

Intervention research—including control technology, educational programs, health promotion activities, and community-based initiatives—examines the utility and impact of new and existing preventive measures in the workplace.

Programmatic Interest

The focus of these grants should facilitate progress in preventing adverse effects among agricultural workers. A project that is proposed to develop or test the efficacy of an intervention should be designed to establish, discover, develop, elucidate, or confirm information relating to occupational safety and health, including innovative methods, techniques, and approaches for solving occupational safety and health problems. These grants should not be directed at the development of an intervention, but to test the efficacy of a known intervention.

A project that is proposed to demonstrate the effectiveness of an intervention should address, either on a pilot or full-scale basis, the technical or economic feasibility of implementing a new/improved innovative procedure, method, technique, or system for preventing occupational safety or health problems. A demonstration project should be conducted in an actual workplace where a baseline measure of the occupational problem will be defined, the new/improved approach will be implemented, a follow-up measure of the problem will be documented, and an evaluation of the benefits will be conducted.

NIOSH and its partners in the public and private sectors developed the high priority areas identified below to provide a framework to guide occupational safety and health research in the next decade—not only for NIOSH but also for the entire occupational safety and health community. Approximately 500 organizations and individuals outside NIOSH provided input into the development of the National Occupational Research Agenda (NORA). This attempt to guide and coordinate research nationally is responsive to a broadly perceived need to address systematically those topics that are most pressing and most likely to yield gains to the worker and the nation. Fiscal constraints on occupational safety and health research are increasing, making even more compelling the need for a coordinated and focused research agenda. NIOSH intends to support projects that facilitate progress in understanding and preventing adverse effects among workers. The conditions or examples listed under each category are selected examples, not comprehensive definitions of the category. Investigators may also apply in other areas related to agricultural safety and health, but the rationale for the significance of the research and demonstrations to agriculture must be developed in the application.

The NORA identifies 21 research priorities. These priorities reflect a remarkable degree of concurrence among a large number of stakeholders. The NORA priority research areas are grouped into three categories: Disease and Injury, Work Environment and Workforce, and Research Tools and Approaches. This announcement relates primarily to the priority research area, Intervention Effectiveness Research, number 18 on the list. The NORA document is available through the NIOSH Home Page: <http://www.cdc.gov/niosh/nora.html>.

NORA Priority Research Areas

Disease and Injury

1. Allergic and Irritant Dermatitis
2. Asthma and Chronic Obstructive Pulmonary Disease
3. Fertility and Pregnancy Abnormalities
4. Hearing Loss
5. Infectious Diseases
6. Low Back Disorders
7. Musculoskeletal Disorders of the Upper Extremities
8. Traumatic Injuries

Work Environment and Workforce

9. Emerging Technologies

10. Indoor Environment
11. Mixed Exposures
12. Organization of Work
13. Special Populations at Risk

Research Tools and Approaches

14. Cancer Research Methods
15. Control Technology and Personal Protective Equipment
16. Exposure Assessment Methods
17. Health Services Research
18. Intervention Effectiveness Research
19. Risk Assessment Methods
20. Social and Economic Consequences of Workplace Illness and Injury
21. Surveillance Research Methods

Potential applicants with questions concerning the acceptability of their proposed work are strongly encouraged to contact the programmatic technical assistance person identified in this announcement in the section *WHERE TO OBTAIN ADDITIONAL INFORMATION*.

Technical Reporting Requirements

Progress reports are required annually as part of the continuation application (75 days prior to the start of the next budget period). The annual progress reports must contain information on accomplishments during the previous budget period and plans for each remaining year of the project. Financial status reports (FSR) are required no later than 90 days after the end of the budget period.

The final performance and financial status reports are required 90 days after the end of the project period. The final performance report should include, at a minimum, a statement of original objectives, a summary of research methodology, a summary of positive and negative findings, and a list of publications resulting from the project. Research papers, project reports, or theses are acceptable items to include in the final report. The final report should stand alone rather than citing the original application. Three copies of reprints of publications prepared under the grant should accompany the report.

Evaluation Criteria

Upon receipt, applications will be reviewed by CDC for completeness and responsiveness. Applications determined to be incomplete or unresponsive to this announcement will be returned to the applicant without further consideration. If the proposed project involves organizations or persons other than those affiliated with the applicant organization, letters of support and/or cooperation must be included.

Applications that are complete and responsive to the announcement will be reviewed by an initial review (IRG) group (peer review) in which they will be determined to be competitive or noncompetitive based on the review criteria. Applications determined to be noncompetitive will be withdrawn from further consideration and the principal investigator/program director and the official signing for the applicant organization will be promptly notified. Applications judged to be competitive will be discussed and assigned a priority score.

Review criteria for technical merit are as follows:

1. Technical significance and originality of the proposed project.
2. Appropriateness and adequacy of the study design and methodology proposed to carry out the project.
3. Qualifications and research experience of the Principal Investigator and staff, particularly but not exclusively in the area of the proposed project.
4. Availability of resources necessary to perform the project.
5. Documentation of cooperation from other participants in the project, where applicable.
6. Adequacy of plans to include both sexes and minorities and their subgroups as appropriate for the scientific goals of the project. (Plans for the recruitment and retention of subjects will also be evaluated.)
7. Appropriateness of budget and period of support.

8. Human Subjects—Procedures adequate for the protection of human subjects must be documented. Recommendations on the adequacy of protections include: (1) protections appear adequate and there are no comments to make or concerns to raise, (2) protections appear adequate, but there are comments regarding the protocol, (3) protections appear inadequate and the IRG has concerns related to human subjects, or (4) disapproval of the application is recommended because the research risks are sufficiently serious and protection against the risks are inadequate as to make the entire application unacceptable.

The following will be considered in making funding decisions:

1. Quality of the proposed project as determined by peer review.
2. Availability of funds.
3. Program balance among priority areas of the announcement.

Executive Order 12372 Review

Applications are not subject to the review requirements of Executive Order 12372.

Public Health System Reporting Requirement

This program is not subject to the Public Health System Reporting Requirements.

Catalog of Federal Domestic Assistance Number

The Catalog of Federal Domestic Assistance number is 93.262.

Other Requirements

Paperwork Reduction Act

Projects that involve the collection of information from 10 or more individuals and funded by the grant will be subject to review and approval by the Office of Management and Budget (OMB) under the Paperwork Reduction Act.

Human Subjects

The applicant must comply with the Department of Health and Human Services Regulations, 45 CFR Part 46, regarding the protection of human subjects. Assurances must be provided to demonstrate that the project will be subject to initial and continuing review by an appropriate institutional review committee. The applicant will be responsible for providing assurance in accordance with the appropriate guidelines provided in the application kit.

Women and Racial and Ethnic Minorities

It is the policy of the CDC to ensure that women and racial and ethnic groups will be included in CDC supported research projects involving human subjects, whenever feasible and appropriate. Racial and ethnic groups are those defined in OMB Directive No. 15 and include American Indian, Alaskan Native, Asian, Pacific Islander, Black and Hispanic. Applicants shall ensure that women and racial and ethnic minority populations are appropriately represented in applications for research involving human subjects. Where clear and compelling rationale exists that inclusion is not feasible, this situation must be explained as part of the application. In conducting the review of applications for scientific merit, review groups will evaluate proposed plans for inclusion of minorities and both sexes as part of the scientific assessment and assigned score. This policy does not apply to research studies when the investigator cannot control the race, ethnicity and/or sex of subjects. Further guidance to this policy is contained in the **Federal Register**, Vol. 60, No. 179, Friday, September 15, 1995, pages 47947-47951.

Application Submission and Deadlines

A. Preapplication Letter of Intent

Although not a prerequisite of application, a non-binding letter of intent-to-apply is requested from

potential applicants. The letter should be submitted to the Grants Management Officer (whose address is reflected in section B., "Applications"). It should be postmarked no later than June 9, 1997. The letter should identify the announcement number, name of the principal investigator, and specify the priority area to be addressed by the proposed project. The letter of intent does not influence review or funding decisions, but it will enable CDC to plan the review more efficiently, and will ensure that each applicant receives timely and relevant information prior to application submission.

B. Applications

Applicants should use Form PHS-398 (OMB Number 0925-0001) and adhere to the ERRATA Instruction Sheet for Form PHS-398 contained in the Grant Application Kit. Please submit an original and five copies on or before July 15, 1997 to: Ron Van Duyne, Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention, (CDC), 255 East Paces Ferry Road, NE., Room 321, MS-E13, Atlanta, GA 30305.

C. Deadlines

1. Applications shall be considered as meeting a deadline if they are either:

A. Received at the above address on or before the deadline date, or

B. Sent on or before the deadline date to the above address, and received in time for the review process. Applicants should request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a commercial carrier or the U.S. Postal Service. Private metered postmarks shall not be accepted as proof of timely mailings.

2. Applications which do not meet the criteria above are considered late applications and will be returned to the applicant.

Where To Obtain Additional Information

To receive an application kit, call (404) 332-4561. You will be asked to

leave your name, address, and telephone number and will need to refer to announcement 736. You will receive a complete application kit. Business management information may be obtained from Joanne Wojcik, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE., MS-E13, Atlanta, GA 30305, telephone (404) 842-6535; fax: (404) 842-6513; Internet: jcw6@cdc.gov.

Programmatic technical assistance may be obtained from Roy M. Fleming, Sc.D., Associate Director for Grants, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention (CDC), 1600 Clifton Road, NE., Building 1, Room 3053, MS-D30, Atlanta, GA 30333, telephone (404) 639-3343; fax: (404) 639-4616; Internet: rmf2@cdc.gov.

Please Refer to Announcement Number 736 When Requesting Information and Submitting an Application

This and other CDC Announcements can be found on the CDC home page at <http://www.cdc.gov>.

CDC will not send application kits by facsimile or express mail.

Potential applicants may obtain a copy of "Healthy People 2000" (Full Report, Stock No. 017-001-00474-0) or "Healthy People 2000" (Summary Report, Stock No. 017-001-00473-1) through the Superintendent of Documents, Government Printing Office, Washington, DC 20402-9325, telephone (202) 512-1800.

Dated: May 1, 1997.

Diane D. Porter,

Acting Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention (CDC).

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