## SAFETY AND LOSS CONTROL

***Injuries and Aging Workers***, by Kathleen L. Ringenbach and Rick R. Jacobs (Pennsylvania State University)

The relationship between an aging workforce and injuries in the workplace was explored via attitudinal/background survey and accident/injury reports within a nuclear power plant. Hypotheses of the relationship between aging and safety orientations and the role of safety orientations in forecasting injuries were tested in a sample of 209 workers at the plant. Results indicated that age of worker is related to various reports of health status and safety orientations and that safety orientations are related to different measures of injuries. Implications of these results for dealing with aging workforces and accident prevention programs are presented along with perspectives on direction for future research. *Journal of Safety Research*, Fall 1995, 26(3): 169–176. (Reprinted with permission of the *Journal of Safety Research.*)

***Safety Climate***, by Ian R. Coyle (Safetysearch, Benowa, Australia), Stuart David Sleeman (ABB Environmental Services, Wakefield, Massachusetts), and Neil Adams (University of New South Wales)

*Safety climate*, the objective measurement of attitudes and perceptions toward Occupational Health & Safety (OH&S) issues, has been largely ignored, and measures such as lost time and frequency rate have been used to determine the efficacy of OH&S programs. Yet, it is clear that measuring the precursors of accidents identified in a safety climate analysis provides a powerful proactive management tool. This paper reports on safety climate factors found in clerical and service organizations in Australia. Concurrent validity studies are reported. In contradistinction to published studies, it is argued that safety climate factors are not stable across organizations. The significance of this for planning and assessing the efficacy of OH&S programs is discussed. It is concluded that, although safety climate factors are not stable, the safety climate factor pattern identified in organizations provides a powerful management tool for designing OH&S programs. *Journal of Safety Research*, Winter 1995, 26(4): 247–254. (Reprinted with permission of the *Journal of Safety Research.*)

## ENVIRONMENTAL RISK AND INSURANCE

***Regulation, Moral Hazard and Insurance of Environmental Risks***, by Jean-Jacques Laffont (GREMAQ and IDEI, Université des Sciences Sociales, Toulouse, France)

A large class of major environmental risks are subject to severe moral hazard problems. The purpose of this paper is to study the potential conflicts between cost minimization and safety care. The intuition is that regulatory efforts or sheer competition inducing a greater focus on cost minimization may tilt the agents' trade-off toward taking too much risk. Here we study the problem in the context of regulation of a natural monopoly and see how high powered incentives may conflict with safety care. We address the issue of moral hazard in environmental risk with adverse selection, limited liability, risk aversion and multiprincipals. *Journal of Public Economics*, November 1995, 58(3): 319–336. (Reprinted with permission of the *Journal of Public Economics*.)

## LIABILITY RULES

***Injury, Liability, and the Decision to File a Medical Malpractice Claim***, by Frank A. Sloan and Chee Ruey Hsieh (Duke University)

The authors used two data sets based on interviews with families who suffered an adverse birth outcome in Florida—either a stillbirth, an infant death, or a permanent birth-related injury—to assess the decision to file a medical malpractice claim. These data were supplemented by medical evaluations of liability. The authors found that cases in which the physician evaluators thought the physician had been negligent were much more likely to have become claims, as were more serious injuries. Overall, the view of critics of the current medical malpractice system that innocent physicians are just as likely, or more likely, to be sued than the guilty ones and that patients sue when they do not obtain a "perfect result" is not confirmed. Claims were less likely to result when the family had health insurance, either private or public, and when families had been told by the physician that there might be a problem with the child. The mother's educational attainment and family income had no effect on the probability of claiming. Mothers who admitted to consuming alcohol during pregnancy were more likely to claim. *Law & Society Review*, 1995, 29(3): 413-436. (Reprinted with permission of the *Law & Society Review*.)