Recognizing Stress, Anger, Depression, and Suicidal Thinking and Knowing What to Do Next

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Introduction

Contrary to the myth of idyllic scenes of farm and ranch life, farm and ranch families have lots to be stressed about. Economic and market conditions change regularly, so profits are uncertain. Furthermore the prices that farmers and ranchers have to pay for their inputs (e.g. gasoline, diesel, fertilizer, equipment, feed, seed, etc.) as well as the prices they get for their outputs (milk, grain, hay, beef, lambs, chickens, pigs, eggs, etc.) are mostly out of their control as is the weather on which they depend for abundant rain and sunshine. Prices are usually set by others, so their control over both what they pay for their inputs and what they receive for their outputs is outside their control, which contributes to feelings of powerlessness and leads to high stress levels.

Farm/Ranch Stress

Farming is one of the top 12 high stress occupations. The National Institute for Occupational Safety and Health studied 130 occupations and examined the incidence of stress-related diseases (coronary heart and artery disease, hypertension, ulcers, and nervous disorders). They examined more than 22,000 Tennessee workers’ health records, death certificates, hospital admissions, and mental health center admissions and found that farm owners were among 12 categories of workers that displayed high incidence of stress-related illnesses. When the death certificates were analyzed alone, farm owners were second only to laborers in the rate of death for stress-related diseases.

What were the top stressors for farmers? In a study of close to 1,000 New Zealand dairy farmers, the highest levels of stress were reported for time pressures, machinery failures, weather, and government policies. A study of 1,015 individuals from 669 New Zealand farms reported that their leading stressors were “increased work load at peak times,” “dealing with workers’ compensation,” “bad weather,” and “complying with health and safety legislation”. In a study of 500 farmers in England and Wales, the major stressors were government regulations, paperwork, financial difficulties, and health related problems. Other studies identified the top stressors as economic factors, work overload, relationship issues, coping with new legislation, excessive paperwork, and media criticism. A study of 1,343 Iowa farm residents identified their top ten stressors to include death of a spouse, death of a child, disabling injury of a family member, disabling injury to oneself, foreclosure on a mortgage or loan, divorce, machinery breakdown during harvest, loss of crop to

1 This is to acknowledge and express appreciation for the literature review provided by Christina L. Collins, Graduate Student, Department of Human Development & Family Studies, Colorado State University.
weather, loss of crop to pests or disease, and severe weather conditions. One of the most stressful intergenerational farming/ranching issues is the transfer of the family ranch/farm from one generation to the next and the need to keep it stable and operating in order to sustain profitability.

Among farmers, who experiences more stress? Among two-generation farm families in which both parents and their adult children were actively involved in operating the farm or ranch, researchers found that the younger generation experienced more stress, less perceived social support, and less occupational satisfaction than the older generation. The authors inferred that feelings of powerlessness from working on a multigenerational farm where they had little power and more financial pressure and debt load may contribute to higher stress levels among younger farmers. The most frequently occurring stressor for two-generation farm families in Iowa was living with “tight money”. For sons- and daughters-in-law, another frequently reported stressor was not being on one’s own. For mothers and fathers, the most frequently reported stressor was taking responsibility for risks and disagreements over spending. A frequently reported stressor for daughters-in-law and mothers was “not being a part of the operation.” A study of 242 senior generation farmers and 239 junior generation farmers found that: “...neither generation is happy with the communication in their two-generation farm family. Items such as handling arguments, fair criticism and family problems were ranked low by both groups”. In another study, daughters-in-law were reported to experience the highest level of stress within family units with a negative relationship with the parents-in-law exacerbating her stress levels. Stress levels were found to be higher for mixed type operations (e.g. livestock and grain) than for grain farmers. Overall, the integrated nature of working, playing, and living side by side, day after day seems to lead to stressors that may be unique among farm and ranch families.

Do farmers and ranchers experience significantly higher levels of stress than does the general population? Research with more than 22,000 Tennessee workers, as reported earlier, indicated that farming is one of the top 12 (of 130) high stress occupations. In a study of 303 people in the United Kingdom, farmers scored significantly higher than the general population on measures of stress. More research is needed comparing the stress levels of farmers and ranchers with the general population.

Ranch/Farm Anger

There is a dearth of research comparing the levels of anger between farming and non-farming populations. Only one published study was found that reported such a comparison. It examined the anger levels of 323 parents who participated in an anger management parenting program. Participants were divided into three groups: 1) people who lived on a farm or ranch or rural setting; 2) people who lived in a small town; and 3) people who lived in a small city or metropolis. The research compared the three groups’ average scores on self-reported anger levels, anger expression and control, verbal and physical aggression, and family violence. There was no statistically significant difference between groups on any variable, except for state anger, which refers to the intensity of one’s anger at a particular moment. Those parents who lived on a farm or ranch or in a rural setting reported significantly lower levels of state anger than parents who lived in a small city or metropolis. More research is needed comparing anger levels of farmers/ranchers with those of non-farm populations.
Farm/Ranch Depression

Many ranchers and farmers struggle with depression. Nevertheless, it is still not clear whether they experience lower or higher levels of depression and other mental health problems than the general population.

Some researchers found lower or inconsistent levels of depression in a Colorado sample of farm residents, although those who were female, in poor physical health, and unmarried or who were younger tended to be more depressed than older farmers. Other researchers also found lower levels of general psychiatric morbidity than the general population in Great Britain although they were more likely to think that life was not worth living. Still other researchers found inconsistent patterns of psychiatric morbidity and depression or that Australian farmers did not experience higher rates of mental health problems than non-farmers.

Other researchers found higher levels of depression in farmers and ranchers than the general population. Researchers studied a sample of 17,000 people in Norway and found higher levels of anxiety and depression among full-time, part-time, and all farmers than among nonfarm men and women. They speculated that the higher levels of depression and anxiety may be due to longer work hours, physically harder work, and lower income than non-farmers. Other researchers found that high levels of occupational stress among British farmers may contribute to elevated depression and anxiety levels. Other researchers found a correlation between exposure to pesticides and high levels of depression among Colorado farmers and ranchers. Research with North Dakota farmers found that their depression levels were almost twice that found in past research with other rural populations. North Dakota farmers were least likely to seek help from mental health professionals or clergy and were resistant to expressing negative emotions to others. Still others found that Iowa farmers were 1.74 times more likely to exhibit signs of depression than Colorado farmers. Iowa farm men who experienced five stressors within the previous year were more likely to experience depression if they had: lost something of sentimental value; experienced substantial income decline; gone deeply into debt; faced legal problems; or experienced an increase in health problems.

Researchers found that Virginia farmers’ depression rates were 1.7 times the rate of depression among the American working population, 1.4 times higher than that of Iowa farmers, and 2.3 times higher than those of Colorado farmers and ranchers. The higher levels of depression in Virginia may be attributed to lack of access to adequate medical help and having an older sample.

Ranch/Farm Suicide Rates

While some researchers found lower and others found higher depression levels among farm residents, there is extensive research evidence that farmers and ranchers have high rates of suicide. Higher rates of suicide in farmers and ranchers have been reported in the United Kingdom, Australia, Canada, Scotland, and the United States. In Colorado, historically, the leading external causes of death on farms and ranches have been: 1) suicide; 2) animal incidents; and 3) tractor/machinery rollovers (T. Daniels, personal communication, August 22, 2000). Between 2000 and 2004, the external cause of death for one out of five Colorado ranchers and farmers was suicide (K. Bol, e-mail communication, October 20, 2005 and Statistics Section of Colorado Department of Health and Environment). In Colorado three out of four suicides are committed by men. In China, two out of three suicides are committed by women.
In the United States, it has been reported that farm women, children, adolescents, and farm laborers were at a low risk of suicide, but that farmers and ranchers were 1.5-2.0 times more likely to commit suicide than other adult men. They found a crude death rate, which does not adjust for age, of all full-time farmers in the sample to be 48.1 per 100,000. Researchers in Kentucky also reported a crude death rate of 48.1 per 100,000 in a sample of farmers. These suicide rates are much higher than both the U.S. suicide rate of 11.0 per 100,000 and the Colorado suicide rate of 17.1 per 100,000 in 2005. The suicide rate for rural men is on average twice that of their urban counterparts after controlling for divorce and ethnicity, and the rate is increasing over time.

The most common suicide method was firearms, in the United Kingdom, Australia, Scotland, and the United States.

Why do farmers and ranchers commit suicide at higher rates than the general population? No clear answer was found in the literature. Researchers found no support for the sometimes hypothesized relationship between farming residents and increased levels of mental health problems. They identified the following difficulties that farmers and ranchers reported facing when seeking mental health assistance: the demands of family farms; the culture of farming communities; and the shortage of health care professionals with rural farming communities. Other researchers used the psychological autopsies of 84 farmers who died between 1991 and 1994 in England and Wales and hypothesized the following possible causes of high suicide rates: high accessibility to firearms; occupational stress; financial difficulties; and family problems. They also found that retirement seems to be a trying transition for farmers in the sample. Other researchers found no significant seasonal variation of suicide in their sample of United Kingdom farmers. Interestingly, a group of researchers reported that upon the passage of legislation in 1989 to further regulate firearm ownership, registration, and storage in England and Wales, there was a reduction in firearm deaths and a reduction in farm suicides. By the end of the study, hanging was more frequent than firearms as cause of death.

In summary, in the U.S. increased access to firearms may account for elevated levels of completed suicide, but pesticides, financial loss, and barriers to seeking mental health treatment may be related as well. However, considering some researchers’ findings that farmers and ranchers experience fewer mental health problems than the general population, the link between farmers and ranchers and an elevated risk for suicide is not well understood and warrants further research.

What to Do Next?

The first thing to do is to recognize signs of farm and ranch stress in a friend, neighbor, spouse, family member, or oneself. See the Appendix below. Make copies of the Appendix and hand it out to groups and individuals so they too recognize the signs of trouble. If you are concerned about someone, make note of signs of chronic, prolonged stress that you notice in the person. Take note of signs of depression that you observe in them. Pay special attention to signs of suicidal intent or thinking. If you suspect that someone may be depressed and suicidal, prepare yourself with the next steps before you visit with them.

Second, take action. Find out what resources are available in your area to assist folks with high levels of stress, anger, depression, and suicidal thinking. They may be few and far between in many rural settings, but almost always there are at least one or two marriage and family therapists, psychologists, social workers, mental health counselors, clergy, or guidance counselors within
driving distance. TherapistLocator.net is a good resource for finding marriage and family therapists in your area at http://therapistlocator.net. If necessary, you can always call 1-800-SUICIDE which is a suicide prevention, crisis intervention, and referral telephone number that offers a live human being to listen well to depressed and suicidal callers and refer them to local resources 24 hours per day.

Third, connect. Make an excuse to stop by and visit with the person you are concerned about. Sit down with them face-to-face. Say something like: “Joe, how long have we known each other—22 years? We’ve been friends and neighbors for a long time, and I have to say that I am worried about you. I see your sad face. I hear how hopeless you sound. When you say, ‘I’m calling it quits; let’s have a last cigarette together,’ I am afraid. I am afraid that you’re thinking about hurting yourself. Are you? … Tell me about it. I’ve got all the time in the world. Tell me what’s going on.” Then listen. Do not moralize. Don’t say, “Cowboy it up, Joe!” Don’t say, “You’ve got to look at the bright side.” Those comments may set up roadblocks so that Joe will stop talking with you. Instead, paraphrase what you are hearing. “Sounds like things have gotten so bad financially that you don’t know what to do next. … And you’re thinking that maybe your family would be better off without you. Am I getting it right what’s going on for you?”

If you recognize signs of depression and suicidal thinking in a family member, friend, or yourself, call 1-800-SUICIDE for help and local resources. Use “How to Refer a Person for Help” in the Appendix. Connect Joe with a professional. You can always call 911 or transport your friend to an emergency room at the nearest hospital.

For additional trustworthy information, call Colorado State University Extension (970-491-6281) or call their “Other Bookstore” (970-491-6198), http://www.ext.colostate.edu/PUBS/CONSUMER/pubcons.html.

- Managing stress during tough times (no. 10.255)
- Making decisions and coping well with drought (no. 10.256)
- Farming and ranching: Health hazard or opportunity? (no. 10.201)
- Ranching and farming with family members (no. 10.217)
- Youth and suicide (no. 10.213)
- Dealing with our anger (no. 10.236)
- Dealing with others’ anger (no. 10.237)
- Dealing with couples’ anger (no. 10.238)

For more trustworthy information, contact the University of Wyoming, http://agecon.uwyo.edu/riskmgtrisk/HUMANFamily.htm.

References are available from the author upon request.
APPENDIX

Farm and Ranch Family Stress and Depression:
A Checklist and Guide for Making Referrals

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Colorado State University

SIGN OF FARM AND RANCH STRESS

The last few years have been difficult for farm and ranch families. Many are experiencing financial and emotional stress as a result. There are several signs or symptoms when a farm family may be in need of help. These are signs that can be observed by friends, extended family members, neighbors, milk haulers, veterinarians, clergy persons, school personnel or health and human service workers. These signs include:

- **Change in routines.** The rancher or ranch family stops attending church, drops out of 4-H, Home-makers or other groups, or no longer stops in at the local coffee shop or feed mill.
- **Increase in illness.** Farmers or farm family members may experience more upper respiratory illnesses (colds, flu) or other chronic conditions (aches, pains, persistent cough).
- **Appearance of farmstead declines.** The farm family no longer takes pride in the way farm buildings and grounds appear, or no longer has the time to do maintenance work.
- **Care of livestock declines.** Cattle may not be cared for in the usual way; they may lose condition, appear gaunt or show signs of neglect or physical abuse.
- **Increase in farm or ranch accidents.** The risk of farm accidents increases due to fatigue or loss of ability to concentrate; children may be at risk if there isn’t adequate childcare.
- **Children show signs of stress.** Farm and ranch children may act out, decline in academic performance or be increasingly absent from school; they may also show signs of physical abuse or neglect.

SIGN OF CHRONIC, PROLONGED STRESS

When farm and ranch families are stressed out for long periods of time – chronic, prolonged stress – they may experience a number of signs and symptoms. Watch for the following effects in farm families you see on a day-to-day basis:

<table>
<thead>
<tr>
<th>Physical</th>
<th>Emotional</th>
<th>Behavioral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Headaches</td>
<td>Sadness</td>
<td>Irritability</td>
</tr>
<tr>
<td>Ulcers</td>
<td>Depression</td>
<td>Backbiting</td>
</tr>
<tr>
<td>Backaches</td>
<td>Bitterness</td>
<td>Acting Out</td>
</tr>
<tr>
<td>Eating Irregularities</td>
<td>Anxiety</td>
<td>Withdrawal</td>
</tr>
<tr>
<td>Sleep Disturbances</td>
<td>Loss of Spirit</td>
<td>Passive-Aggressiveness</td>
</tr>
<tr>
<td>Frequent Sickness</td>
<td>Loss of Humor</td>
<td>Alcoholism</td>
</tr>
<tr>
<td>Exhaustion</td>
<td></td>
<td>Violence</td>
</tr>
</tbody>
</table>
Cognitive
Memory Loss
Lack of Concentration
Inability to Make Decisions

Self-Esteem
“I’m a failure.”
“I blew it.”
“Why can’t I…?”

SIGNS OF DEPRESSION OR SUICIDAL INTENT
The greater the number of signs or symptoms a ranch or farm family is experiencing, the greater your concern should be. In addition, if family members are exhibiting the following signs of depression or suicidal intent, it is important that you connect them with professional help as soon as possible. All cries for help should be taken seriously.

<table>
<thead>
<tr>
<th>Signs of Depression</th>
<th>Signs of Suicidal Intent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appearance: Sad face, slow movements, unkempt look.</td>
<td>Anxiety or depression: Severe, intense</td>
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<tr>
<td></td>
<td>feelings of anxiety or depression.</td>
</tr>
<tr>
<td>Unhappy feelings: Feeling sad, hopeless, discouraged, and</td>
<td>Withdrawal or isolation: Withdrawn, alone,</td>
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<tr>
<td>listless.</td>
<td>lack of friends and supports.</td>
</tr>
<tr>
<td>Negative thoughts: “I’m a failure;” “I’m no good,” “No</td>
<td>Helpless and hopeless: Sense of complete</td>
</tr>
<tr>
<td>one cares.”</td>
<td>powerlessness, a hopeless feeling.</td>
</tr>
<tr>
<td>Reduced activity and pleasure in usual activities: “Doing</td>
<td>Alcohol abuse: There is often a link</td>
</tr>
<tr>
<td>anything is just too much of an effort.”</td>
<td>between alcoholism and suicide.</td>
</tr>
<tr>
<td>People problems: “I don’t want anyone to see me,” “I</td>
<td>Previous suicidal attempts: May have</td>
</tr>
<tr>
<td>feel so lonely.”</td>
<td>been previous attempts of low to high</td>
</tr>
<tr>
<td></td>
<td>lethality.</td>
</tr>
<tr>
<td>Physical problems: Sleeping problems, decreased sexual</td>
<td>Suicidal plan: Frequent or constant</td>
</tr>
<tr>
<td>interest, headaches.</td>
<td>thoughts with a specific plan in mind.</td>
</tr>
<tr>
<td>Guilt and low self esteem: “It’s all my fault,” “I</td>
<td>Cries for help: Making a will, giving</td>
</tr>
<tr>
<td>should be punished.”</td>
<td>possessions away, making statements such as</td>
</tr>
<tr>
<td></td>
<td>“I’m calling it quits,” or “Maybe my family</td>
</tr>
<tr>
<td></td>
<td>would be better off without me.”</td>
</tr>
</tbody>
</table>

HOW TO REFER A PERSON FOR HELP

1. Beware of the agencies and resources available you your community—what serices they offer and what their limitations are.
2. Listen for signs and symptoms that the person or family needs help which you can’t provide, i.e., financial, legal or personal counseling.
3. Assess what agency or community resources would be most appropriate to address the person’s (or family’s) problems.
4. Discuss the referral with the person or family (It sounds/looks like you are feeling ____. I think ____ could help you deal with your situation.”)
5. Explore the individual’s or family’s willingness to initiate contact with the community resource (“How do you feel about seeking help from this person/agency?”).
6. Where the person or family is unwilling to take the initiative or where there is some danger if action is not taken, you should take the initiative:
   a. Call the agency and ask to speak to the intake worker (if there is one).
   b. Identify yourself and your relationship with the person or family.
   c. State what you think the person’s or family’s needs are (needs immediate protection from suicidal acts, needs an appointment for counseling, needs financial or legal advice).
   d. Provide the agency with background information (name, address and phone; age and gender; nature of current problem or crisis; any past history you’re aware of; further information as called for).
   e. Ask the agency what follow-up action they will take:
      *When will they act on the referral?
      *Who will be the person for you to contact later if necessary?
      *What will be the cost of the service (flat fee/sliding scale)?
      *Do you need to do anything else to complete the referral?

7. Make sure the person or family and the referral agency connect and get together. Make one or more follow-up contacts with the agency if called for by the situation.