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

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SIGNS 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.

SIGNS 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>
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<tr>
<td>Backaches</td>
<td>Bitterness</td>
<td>Acting Out</td>
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<td>Eating Irregularities</td>
<td>Anger</td>
<td>Withdrawal</td>
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<td>Sleep Disturbances</td>
<td>Anxiety</td>
<td>Passive-Aggressiveness</td>
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<tr>
<td>Frequent Sickness</td>
<td>Loss of Spirit</td>
<td>Alcoholism</td>
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<tr>
<td>Exhaustion</td>
<td>Loss of Humor</td>
<td>Violence</td>
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**Cognitive**
- Memory Loss
- Lack of Concentration
- Inability to Make Decisions

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

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1 ChecklistWilliamsFetsch (Rev. 5.302)
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>
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<tbody>
<tr>
<td>Appearance: Sad face, slow movements, unkempt look.</td>
<td>Anxiety or depression: Severe, intense feelings of anxiety or depression.</td>
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<td>Unhappy feelings: Feeling sad, hopeless, discouraged, listless.</td>
<td>Withdrawal or isolation: Withdrawn, alone, lack of friends and supports.</td>
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<td>Negative thoughts: “I’m a failure,” “I’m no good,” “No one cares.”</td>
<td>Helpless and hopeless: Sense of complete powerlessness, a hopeless feeling.</td>
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<td>Reduced activity and pleasure in usual activities: “Doing anything is just too much of an effort.”</td>
<td>Alcohol abuse: There is often a link between alcoholism and suicide.</td>
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<td>People problems: “I don’t want anyone to see me,” “I feel so lonely.”</td>
<td>Previous suicidal attempts: May have been previous attempts of low to high lethality.</td>
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<td>Physical problems: Sleeping problems, decreased sexual interest, headaches.</td>
<td>Suicidal plan: Frequent or constant thoughts with a specific plan in mind.</td>
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<td>Guilt and low self esteem: “It’s all my fault,” “I should be punished.”</td>
<td>Cries for help: Making a will, giving possessions away, making statements such as “I’m calling it quits,” or “Maybe my family would be better off without me.”</td>
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HOW TO REFER A PERSON FOR HELP

1. Be aware of the agencies and resources available in your community – what services 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 resource 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.