

INDIVIDUAL AND FAMILY ACTIONS TO DEAL WITH POSSIBLE FARMER SUICIDE

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There is a more common and mostly preventable cause of death among agricultural producers that isn't occupational injuries or physical illnesses. It is suicide, and it should be understood and handled better than it usually is currently.

This is the third article in a four-part "Farm and Ranch Life" series about suicide among farmers, ranchers and agricultural workers.

A farmer who purposefully ended his life recently gave many warning signs but also demanded that his family not undertake legal proceedings to obtain professional behavioral healthcare assistance or to ask for help from his family, neighbors, and any farm crises services that were available to assist him with depression, field work, and financial obligations. He would take care of the problems himself, he said.

Two weeks after his immediate family reluctantly agreed to give him more time to pursue his own farm debt solutions, the farmer ended his life with a shotgun blast. What can we learn from this and other self-destructive actions by people engaged in farming?

Sometimes farm family members and others able to intervene must undertake actions to prevent another person's self-destruction despite resistance from this person. Spouses, coworkers, and friends of a distressed farmer should ask the farmer about sleeplessness over recent nights, his/her worries, and especially those that entail perceptions about how others might view the farmer (See last week's article for a list of concerns to check out).

They should also check for ways the farmer may have been exposed to farm chemicals that exacerbate nervous systems of insects—and humans, such as those that are sometimes used when planting and spraying crops. Certain insecticides, and also some other farm chemicals, can enhance anxiety and depression.

The concerned persons should also ask about psychotropic medications, if any, that the farmer has been prescribed to quell emotional upset. When exposed to toxic levels of certain farm insecticides that speed up transmission of nerve signals, selective serotonin reuptake inhibitor (SSRI) medications that are often used to treat anxiety and depression can actually worsen the user's disorientation and irrational thinking.

Take immediate action, when suspicious about any of these circumstances, in spite of any resistance by the distressed farmer, and accompany the farmer to a physician, behavioral healthcare provider, or a hospital Emergency Room that is versed in the proper procedures to prevent possible self-harm. This recommendation comes from a widow whose husband undertook suicide, as well as from my 40+ years' experience as a behavioral health professional who has worked with farmers.

Physicians, behavioral healthcare providers, nurses and other licensed healthcare professionals (including veterinarians and others) can learn about these potentially life-saving matters in an "Agricultural Medicine" course which is offered annually in a dozen medical and public health

institutions around the U.S. and in several other countries. Many healthcare providers have too little knowledge about how SSRIs can worsen an already overstimulated nervous system.

Persons interested in the Agricultural Medicine course can perform an online search with the words, “Agricultural Medicine” or contact the University of Iowa, where the course originated, at: www.publichealth.uiowa.edu/gpcah/education/iowa-ag-med-course/.

What to do when an at-risk farmer refuses to cooperate with treatment. Most reasonable persons, including farmers who are overly distressed, usually recognize that their judgment is altered and they acquiesce to the recommendations of those concerned about them.

If the at-risk farmer is unwilling to cooperate, those worried about this person can approach their county mental health referee, who is usually an attorney and who understands legal proceedings about a request for commitment to a hospital psychiatric unit for a 48-hr. evaluation. This step is a “last resort.”

The person being evaluated is entitled to have personal legal representation (court-paid if necessary) and an advocate who is familiar with mental health commitment proceedings. A subsequent court hearing that includes the recommendations of the inpatient evaluation and other relevant information, determines the recommended follow-up.

A Kansas farmer who has considered suicide many times and struggles with uncertainty daily, volunteered his thoughts to me about the prevention of suicide. He and his wife lost all but a 40 acre parcel of their land during the 1980s’ Farm Crisis.

Both partners secured off-farm jobs and managed eventually to purchase an additional 80 acres away from their original farmstead. A troubling circumstance to this farmer are daily views of the land adjoining their home place which they no longer own.

He has been hospitalized numerous times to curtail suicide. This farmer credits his life to several salvaging factors:

- He has a support network of family members, fellow farmers, and two counselors with whom he “levels” and who understand agriculture
- Anti-anxiety and antidepressant medications help him maintain emotional stability
- His Christian faith
- Keeping active and having a sustaining purpose: to prevent suicide by other farmers

There is still more to learn about preventing suicide by farmers. See next week’s final article in this series.

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