



# AGRABILITY CHIT CHAT

June 2004

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## MENTAL HEALTH MATTERS

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### MENTAL HEALTH MATTERS

#### Colleen Jolly

Are you surviving or thriving? An optimist or a pessimist? Do you have confidence that you'll do the best you can with what you have? How do you respond to strong emotions, manage stress, or meet a challenge?

Your answers might vary from time to time depending on your current circumstances, the stresses of every day, your physical health and many other factors. Just as people in good physical condition can still be challenged by illness or accident, people with good over-all emotional health can sometimes have emotional problems or develop a mental illness such as depression or an anxiety disorder.

Mental health is harder to define than physical health. There are no weight and height charts to follow, no recommended

daily allowances of nutrients, optimal blood pressures or immunizations. Yet mental health can be influenced by physical causes such as the chemical imbalances in the brain that impact depression, and mental health can itself influence physical health. Mental health can be improved by attention to emotional and spiritual needs and is a critical component of a satisfying and successful life.

Our culture of independence and hard work can be a barrier to seeking assistance at times when your mental health isn't as good as it could be. You might not recognize increased anger and impatience as signs of depression, for example. Or, you might feel that you ought to be able to handle a tough situation just by trying harder. Although about 16 percent of American adults will develop depression at some point, only one fifth will receive the care they need to treat the condition. As many as 8 million Americans who have serious mental illnesses don't receive adequate treatment each year. (National Mental Health Association at [www.nmha.org/may/fastfacts.cfm](http://www.nmha.org/may/fastfacts.cfm), 6/3/04).

In the workplace, stress causes about 1 million U.S. employees to miss work each day. One study has concluded that employee absenteeism due to depression costs U.S. businesses between \$33 billion and \$44 billion per year. (National Mental

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Health Association, 6/3/04) Recognizing signs of depression in yourself or your family members and seeking treatment is one important step to restoring mental health. While it is imperative to seek assistance when mental illness threatens your well-being, there are also ways to encourage and maintain strong mental health throughout your life. The Canadian Mental Health Association suggests these tips for mental health:

[www.vcn.bc.ca/rmdcmha/tips.html](http://www.vcn.bc.ca/rmdcmha/tips.html), 6/3/04

**Build your confidence** - Identify your abilities and weaknesses, accept them, build on them, and do the best you can with what you have.

**Accept (and give) compliments** - Many people have difficulty accepting kindness from others yet everyone needs to remember those positive strokes when times get tough.

**Make time for family and friends** -

Relationships need nurturing just like any good health habit.

**Give and accept support** - Relationships thrive when they are "put to the test."

**Work within a meaningful budget** -

Financial problems are often a source of stress.

**Volunteer** - Being involved in community gives a sense of purpose and satisfaction that paid work cannot.

**Manage stress** - Learn ways to deal with those times that threaten to overwhelm your mental well-being.

**Find strength in numbers** - Sharing a problem with others who have had similar experiences may help you find a solution and make you feel less isolated.

**Identify and deal with moods** - Everyone needs safe and constructive ways to express anger, sadness, joy and fear.

**Learn to be at peace with yourself** - Get to know who you are, what makes you really happy, and to accept what you can and cannot change about yourself.

### MEN AND DEPRESSION

**Colleen Jolly**

Depression is almost always caused by a combination of genetic, psychological and environmental factors. Some of the common symptoms of depression include a sad mood, loss of pleasure or interest in activities once enjoyed, changes in appetite or sleep patterns, loss of energy and difficulty concentrating. But some doctors and counselors believe additional symptoms may suggest depression in men. Men may be more likely to show depression by abusing alcohol or drugs, eating or work compulsively, becoming reckless or violent or withdrawing from others.

Many men were taught not to ask for or accept help and not to show emotion. Men are told to be strong, to take control, and to perform well. Depression affects approximately 19 million Americans of both sexes. Even though 80 percent of people who seek help will get relief, only one in three people actually seek help and most of these are women. Men may be brought up to believe that expressing emotion is largely a feminine trait. Men may also fear that being diagnosed with depression will cause others to see them as weak or may label them, hurting their job security or future prospects. (*The Personal Nature of Agriculture: Men and Depression*, Randy R. Weigel, University of Wyoming, B-1104)

For more information about men and depression, visit Real Men, Real Depression at [www.nimh.nih.gov/](http://www.nimh.nih.gov/) the web site of the National Institute of Mental Health. Also look for "*The Personal Nature of Agriculture: Men and Depression*," Randy R. Weigel, University of Wyoming, B-1104 which is available on the Iowa State University Extension to families Rural Mental Health web site [www.extension.iastate.edu/mentalhealth/publications.htm](http://www.extension.iastate.edu/mentalhealth/publications.htm)

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### **POWERFUL TOOLS FOR FAMILY CAREGIVER MENTAL HEALTH**

**Colleen Jolly**

Are you a person who provides assistance with activities of daily living for an elderly family member? Do you think of yourself as a caregiver? Caregivers often just see themselves as spouses, daughters, or sons doing what family members do! But there is a problem hidden in how we define ourselves. Too often a person providing many hours of support for a family member doesn't see the toll that those extra hours of work may have upon his or her own mental and physical health. Too often caregivers do not seek assistance because they feel available programs are for "real" caregivers. The result for the caregiver is often a break down in their own physical and mental health and a reduced quality of care for the person needing assistance.

Sixty-one percent of "intense" family caregivers (those providing at least 21 hours of care a week) have suffered from depression. (National Family Caregivers Association/Fortis Long Term Care, *Caregiving Across the Life Cycle*, 1998.) Other studies indicate that caregivers for persons with dementia are up to 3 times as likely to suffer depression during the course of their caregiving. People over 85 years of age are the fastest growing segment of our population. Spouses of persons needing care tend to be the oldest caregivers and also tend to provide the greatest number of hours of personal care. Elderly caregivers with a history of illness themselves who are experiencing caregiving related stress have a 63% higher mortality rate than their non-caregiving peers. (Journal of the American Medical Association, Vol. 282, No. 23, 1999.)

Iowa State University Extension, in cooperation with a variety of community agencies and organizations has introduced *Powerful Tools for Caregivers*, an

educational series designed to provide the caregiver with the tools needed to take care of him or herself. Caregivers often feel that they have no control over events. That feeling of powerlessness has a negative impact on emotional and physical health. *Powerful Tools for Caregivers* focuses on skills to increase the caregiver's own well-being.

*Powerful Tools for Caregivers* has already been taught in several Iowa locations and many more classes will be scheduled throughout the next few months. If you'd like to know about classes in your area, contact your extension office, or contact Colleen Jolly at 515-294-4824 or [cjolly@iastate.edu](mailto:cjolly@iastate.edu). You may also visit the Iowa Family Caregiver site to find information about classes that have been scheduled. [www.iowafamilycaregiver.org](http://www.iowafamilycaregiver.org)

### **RESOURCES**

In addition to the resources mentioned throughout this newsletter, there are a few that stand out as excellent publications for agricultural workers experiencing hard times. If you don't have access to the internet, please contact me at 515-294-8522 and I will mail you the information you are interested in.

The three publication links below are from the University of Wyoming Extension Service "the personal nature of agriculture" series by Randy R. Weigel.

#### **Men and Depression**

[www.uwyo.edu/CES/PUBS/B1104.pdf](http://www.uwyo.edu/CES/PUBS/B1104.pdf)

#### **Surviving Tragedy**

[www.uwyo.edu/ces/PUBS/B-1117.pdf](http://www.uwyo.edu/ces/PUBS/B-1117.pdf)

#### **Men Seeking Help**

[www.uwyo.edu/CES/PUBS/B1134.pdf](http://www.uwyo.edu/CES/PUBS/B1134.pdf)

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The University of Minnesota Extension Service has published the following on loss and change.

**Losing a Way of Life? Ambiguous Loss in Farm Families** by Pauline Boss, PhD  
<http://www.extension.umn.edu/distribution/familydevelopment/DE7614.html>

**Change: Loss, Opportunity, and Resilience** by Sharon M. Danes, PhD  
<http://www.extension.umn.edu/distribution/familydevelopment/DE7421.html> (EH)

### CONSUMER COMMENTS

#### VeraBeth Bricker

Verabeth Eckert Bricker is this month's guest columnist. Verabeth and her family are looking forward to spending more time outdoors upon the completion of their own private park. Although she writes about her son David, his new set of wheels, and the planning for their retreat area, Verabeth points out, "It's all about mental health at our house!" (EH)

David, my son, was born with Fragile X syndrome (FXS) in 1953, however, it wasn't until May, 1991, that the gene responsible for this syndrome was identified. FXS is the number one cause of inherited learning disabilities, mental retardation and developmental delays. David's intellectual assessment places him as moderately mentally retarded—at the pre-school level. He also has autistic traits and displays obsessive-compulsive behavior.

We live on a farm between Ladora and Victor, Iowa. When my husband died approximately 1 ½ years ago, he left me with three adult children with disabilities and since then I've had a dream for a retreat at the back of the field behind our house. The land back there has always had wet areas so I contacted Patrick Lake at the Iowa County Soil and Water Conservation District (ICSWCD) and he developed a CRP

Plan Map for wetlands with four excavated areas, a 5-foot fire break on the perimeter with an internal grass firebreak that divides the wet lands into quarters. Five grasses are included in the seeding mix with 7 flowering plants including Black-eyed Susan and Sawtooth sunflower. I also wanted a miniature forest on the northwest section so Quentin Offerman, ICSWCD, developed a tree planting plan including Burr and Red Oak, Black Walnut, Black Cherry and River Birch. The evergreen species include Eastern Red Cedar, Norway Spruce and Red Pine. There will be an access lane from the miniature forest to the wet lands. I envision a little picnic area on the knoll. Even at my age, dreams and actualizing them are possible.

What does all this have to do with David? David has three big loves: he loves hauling manure with his brother, Kurt; he loves visiting with our priest, Father Okumu, after Saturday night mass; he loves riding a golf cart. It happens we live on the juncture of new and old Highway #6, so it isn't safe to get out on the road, but I wanted a place to ride bikes, three-wheelers, go-carts and even golf carts. I purchased a second-hand golf cart and proceeded to teach David to drive. First, I had him steer the cart while I had my foot on the accelerator. We went around the bean bin, past the well and horse pens, in front of the windbreak over and over. When he had that conquered, I let him put his foot on the accelerator and steer, too, and we traveled the same path over and over. He's not good with reverse, so if he has to go backward, he gets out to push. Since he's conquered the golf cart, he has another love and that is riding the motorized carts at K-Mart and Wal\*Mart.

Within the next few weeks the forest should be planted, the wetlands established and seeded, so we'll be able to go down our north fence lane to our retreat. David will never have a normal "set of wheels" so the

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golf cart is his “set of wheels” to explore many safe paths on our own land.

### **NEWSLETTER THOUGHTS**

**Erin Haafke**

*Summer Travel or Vacation Adventures* will be the theme of the August 2004 newsletter.

Please call or e-mail me with your thoughts, where you traveled to, and what you did! I would be happy to write your remarks, suggestions, and experiences for others to learn from or be encouraged by in the upcoming Chit Chat Newsletter! My phone number is 515-294-8522 or send me an e-mail at [ehaafke@iastate.edu](mailto:ehaafke@iastate.edu).

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IOWA AGRABILITY - A joint effort of ISU Extension and the Rural Solutions Program of Easter Seals Iowa. The program can help farm family members with a disability stay in farming.

This newsletter from the Iowa AgrAbility Project will be sent monthly to AgrAbility families and other interested individuals. Please send comments and suggestions to:

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96 LeBaron Hall, Ames, IA 50011

E-mail: [ehaafke@iastate.edu](mailto:ehaafke@iastate.edu)

Phone: ISU Answerline at 1-800-262-3804

TDD: 1-800-854-1658.

Web site: [www.extension.iastate.edu/agrability/](http://www.extension.iastate.edu/agrability/)

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## **Iowa AgrAbility Project**

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