

## Editorial

### **Rural Practice Forum: Working with Farm Families in Crisis**

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Marlene Buchner MS., RN has worked with farm families in crisis for several years. She has some concrete suggestions for rural nurses. Over the past years, many family farms have been declared disaster areas by the president because of floods, storms, and crop disease. Because of this turmoil the farmer has had to make some very hard decisions that affect his life, the lives of his family and even those of the people who live and work in his community. The pressure from those decisions create tremendous stress that becomes evident in physical and psychological manifestations of disease. Rural health nurses, public health nurses, and parish nurses should all be aware of the signs of depression, mental anxiety, and profound lack of willingness to survive or cope with life. To do this the nurse must be trained well in communication skills that allow her to take a detailed history of the patient. This history will provide a basis to treat the person holistically and address his/her physical, psychological and spiritual needs. Many farm families are not aware that they are in need of help or have any problems. Many are in the different stages of grief, one of which may be denial.

To begin to address the health needs of the rural farm population, there needs to be an understanding of what services may be available in the farming community. The Parish Nurse is working in some of these areas. Parish nurses are trained to assist in health screenings and can link farm families with health services. They can provide referral resources, give out information and conduct small group meetings. Parish nurses need to educate the clergy and others about their training.

Rural Response networks can work with church groups such as Lutheran Social Services. They can train facilitators to help farm families who are experiencing transition in a lifestyle change, they can provide counseling on the telephone for those that are not comfortable in group sessions, they can also conduct group sessions. They can connect the farm families to resources and services and they can initiate programs that provide food boxes to churches and food pantries.

Rural health care systems may also have programs to help farm families cope with the farm crises. Kids programs can provide an outlet that helps farm children express their concerns and the impact of the farm crisis on their lives. A program for preteens and teenagers can focus on self-esteem and peer pressures. Mental health counseling services may be available for farm families (US Department of Health and Human Services, 2000).

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