

National Institute of Food and Agriculture (NIFA)
2018 Farm Bill Report Requirement

Section 7412 of the Agriculture Improvement Act of 2018 (2018 Farm Bill) included language requiring the U.S. Department of Agriculture to provide a report to Congress describing the state of behavioral and mental health of individuals who are engaged in farming, ranching, and other occupations relating to agriculture.

Specifically, the language states:

*“(e) REPORT TO CONGRESS.—
“(1) IN GENERAL.—Not later than 1 year after the date of enactment of this subsection, the Secretary, in coordination with the Secretary of Health and Human Services, shall submit to Congress and any other relevant Federal department or agency, and make publicly available, a report describing the state of behavioral and mental health of individuals who are engaged in farming, ranching, and other occupations relating to agriculture.”*

USDA remains committed to ensuring the health and safety of agricultural producers and farm workers. When an individual participates in a USDA program, they are entering into a relationship with USDA, and with a partner that wants to help that individual succeed. We have seven strategic goals, the first of which is for fiscal years (FYs) 2018-2022 to "ensure USDA programs are delivered efficiently, effectively, and with integrity and a focus on customer service."

The Department, across all Mission Areas, has a responsibility to understand and help address the challenges producers may be facing. USDA has tools and options within its programs that county offices can leverage to help a producer achieve financial success on their farm. In addition, USDA has access to resources and referral services as a result of collaborations with the U.S. Health and Human Services' (HHS), Substance Abuse and Mental Health Services Administration (SAMHSA) and the U.S. Department of Veterans Affairs. Agricultural producers help form the backbone of rural America and need all the encouragement possible.

The following efforts are currently dedicated to supporting the behavioral and mental health needs of individuals in the agricultural sector.

National Institute of Food and Agriculture

A search of NIFA funding on the key word "suicide" identifies 202 capacity and competitively funded projects, including those that target vulnerable populations such as youth, elderly, and tribal.

Specific programs that have components that may increase understanding of suicide risk, and thus promote its prevention and greater overall behavioral health include:

- o Farm and Ranch Stress Assistance Network (FRSAN) (<https://nifa.usda.gov/program/farm-and-ranch-stress-assistance-network-frsan>): The FY 2019 Consolidated Appropriations Act provided \$2,000,000 for a pilot program to provide competitive grants to State departments of agriculture, State cooperative extension services, and nonprofit organizations to carry out programs to address farmer stress and suicide. NIFA is providing funding to four regional entities to help launch the network in North Central, Northeast, Southern, and Western regions. FRSAN will assist farmers, ranchers, and other agriculture-related

National Institute of Food and Agriculture (NIFA)
2018 Farm Bill Report Requirement

- workers in times of stress and offer a conduit to improving behavioral health awareness, literacy, and outcomes for them and their families. The long-term expectation is that agriculture producers and their families will now have greater opportunities to find help in their communities and states through outreach and the Cooperative Extension System.
- o AgrAbility (<https://nifa.usda.gov/program/agrability>): The program builds service capacity on national, regional, state, and local levels through:
 - a) Direct Assistance-aimed at accommodating disabilities in individuals who engage in farming and farm-related occupations;
 - b) Farm Safety Education;
 - c) Marketing-to direct the public to initiatives in AgrAbility-related education, and assistance;
 - d) Networking-to increase sharing of resources and sustainability of projects past NIFA funding. The National AgrAbility Project has been involved with Mental Health First Aid (MHFA) for several years and has a trained instructor involved in conducting programs. The MHFA training has been offered at the National AgrAbility Training Workshops in both 2018 and 2019.
 - o Rural Health and Safety Education (<https://nifa.usda.gov/funding-opportunity/rural-health-and-safety-education-competitive-grants-program-rhse>): Research shows that substance use disorders (SUDs) are a risk factor for suicide. RHSE is a competitive grant program that seeks to address the needs of rural Americans by providing individual and family health education programs. Per Congressional guidance in FYs 2017-2019, proposals emphasized the prevention and/or reduction of opioid misuse and abuse.
 - o Agricultural Risk Management Education Program (ARME) (<https://nifa.usda.gov/program/extension-risk-management-education-program>): The ARME Program is a competitive grant program that educates agricultural producers on the full range of risk management strategies. It provides funding for results and outcome-based risk management education projects to help producers learn and use tools and approaches, which can reduce the adverse effects of the uncertainties of weather, yields, prices, credit, Government policies, global markets, and other factors-including human resources and legal issues.

NIFA and the Farm Service Agency (FSA) have an interagency agreement in which the two agencies are working on the development of training, resources, and outreach materials that support USDA's FSA field employees as they serve farmers and ranchers under stress.

FSA's priority is to adequately support field employees with training on how to serve stressed customers by supporting them with their mental and physical health. FSA has more than 10,000 employees who engage with producers daily through farm and office visits in more than 2,000 county offices throughout the United States.

The interagency agreement includes the following objectives:

- o Improve FSA field employees' readiness to serve farmers and ranchers through training on mental and emotional health, as well as office and staff physical safety.
- o Increase the skill of field employees (particularly farm loan officials) in communicating with producers who may be experiencing farm/ranch financial stress, and in de-escalating tense or aggressive interactions.
- o Develop stronger connectivity between FSA field offices and local resource partners

National Institute of Food and Agriculture (NIFA)
2018 Farm Bill Report Requirement

to improve the accessibility of mental health and farm assistance resources for producers under stress.

Farm Service Agency

The Agriculture Mediation Program benefits participants in the following ways:

- o Assist in resolving disputes within a participant's financial means, providing a low-cost alternative to appeals, expensive litigation, and bankruptcy;
 - o Help reduce stress caused by lengthy litigation, which takes years to filter through the courts system, as opposed to mediation which generally takes only a few meetings to complete.
 - o Mediation is confidential. Documents are not used for any other legal action against the participants. (Source: https://www.fsa.usda.gov/Assets/USDA-FSA-Public/usdfiles/FactSheets/2018/agricultural_mediation_program_jan2018.pdf).
- o Primary Loan Servicing Program is available to eligible borrowers who, due to reasons beyond their control, are unable to make the scheduled payments on their debt to the Government. Restructuring options may include consolidation, rescheduling or re-amortization, deferral, interest rate reduction, and write down. The program allows delinquent or financially distressed FSA borrowers to become current on their loans and regain more solid, long-term financial footing. (https://www.fsa.usda.gov/Assets/USDA-FSA-Public/usdfiles/FactSheets/2016/farm_service_agency_programs.pdf#page=8)

Risk Management Agency

Crop Insurance Mediation: Federal crop insurance policies provide avenues to address disagreements between policyholders and their approved insurance providers.

<https://www.rma.usda.gov/en/About-RMA/Laws-and-Regulations/Mediation>

Rural Development (RD)

In addition to challenges associated with financial stressors, research shows that substance use disorders are a risk factor for suicide (Poorolajal, 2015). It is a priority for Rural Development to be a strong partner to rural communities and addressing the opioid epidemic and SUDs through:

- o Program resources such as Distance Learning and Telemedicine, Community Facilities Technical Assistance and Training, Rural Communities Development Initiative, Rural Business Development Grant programs. USDA Rural Development is giving funding priority for these loan and grant programs for prevention, treatment, and recovery opportunities in rural communities;
- o Creation of essential tools and resources, such as the opioid misuse tool created in partnership with NORC at the University of Chicago, for rural leaders to understand the impact and cause(s) of the crisis in their community; and tools to understand what federal resources are available to support grassroots strategies to address this crisis; and
- o Partnering with Federal, state and local government, non-profits, foundations, and-the private sector to raise awareness and leverage maximum resources to address the opioid epidemic affecting rural communities and farmers. For example, USDA's Rural Development and HHS/SAMHSA recently formalized a partnership to

National Institute of Food and Agriculture (NIFA)
2018 Farm Bill Report Requirement

effectively create addiction recovery transitional housing in rural communities, through which nonprofit organizations can purchase homes from USDA and convert them to transitional housing for people recovering from opioid misuse (<https://www.usda.gov/media/press-releases/2019/02/15/usda-and-hhs-partner-create-recovery-housing-rural-communities>).

More information on RD's Opioid Initiative: <https://www.usda.gov/topics/opioids>.

Health and Human Services (HHS) / Substance Abuse and Mental Health Services Administration (SAMHSA)

SAMHSA provides technical assistance on suicide prevention, including rural suicide prevention, through a variety of technical assistance and resource centers, including the Suicide Prevention resource Center, the Service Members, Veterans and their Families TA Center, and the Mental Health Technology Transfer Centers. SAMHSA's Suicide Prevention Resource Center has developed a Rural Primary Care Toolkit. Many of SAMHSA's suicide prevention grantees focus on suicide in rural areas.

All of SAMHSA suicide prevention resources can be found at <https://www.samhsa.gov/find-help/suicide-prevention>. In addition, USDA and industry partners are coordinating with the National Suicide Prevention Lifeline on how to train employees in addressing farmer-specific mental health care to those in agriculture who call into the Lifeline.

SAMHSA's Behavioral Health Treatment Services Locator is a confidential and anonymous source of information for persons seeking treatment facilities in the United States or U.S. Territories for substance use/addiction and/or mental health problems. Individuals can search for treatment providers by using SAMHSA's Behavioral Health Treatment Services Locator at <http://www.findtreatment.samhsa.gov>.

Providers Clinical Support System (PCSS) is a program funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) created in response to the opioid overdose epidemic to train primary care providers in the evidence-based prevention and treatment of opioid use disorders (OUD) and treatment of chronic pain. The program offers a number of trainings for rural populations as well as webinar, articles and reports.

SAMHSA's Center for Substance Abuse Treatment is accepting applications for fiscal year (FY) 2020 Rural Emergency Medical Services Training grants (Short Title: EMS Training). The purpose of this program is to recruit and train emergency medical services (EMS) personnel in rural areas. SAMHSA recognizes the great need for emergency services in rural areas and the critical role EMS personnel serve across the country.
<https://www.samhsa.gov/grants/grant-announcements/fg-20-005>

SAMHSA is accepting applications for fiscal year (FY) 2019 Rural Opioid Technical Assistance Grants (Short Title: ROTA). The purpose of this program is to develop and disseminate training and technical assistance for rural communities on addressing opioid issues affecting these communities. It is expected that grantees will facilitate the identification of model programs, develop and update materials related to the prevention, treatment and recovery activities for opioid use disorder (OUD), and ensure that high-quality training is provided.

National Institute of Food and Agriculture (NIFA)
2018 Farm Bill Report Requirement

<https://www.samhsa.gov/grants/grant-announcements/ti-19-010>

SAMHSA is accepting applications for fiscal year (FY) 2019 Tribal Opioid Response grants (Short Title: TOR). The program aims to address the opioid crisis in tribal communities by increasing access to culturally appropriate and evidence-based treatment, including medication-assisted treatment (MAT) using one of the three FDA-approved medications for the treatment of opioid use disorder (OUD). The intent is to reduce unmet treatment need and opioid overdose-related deaths through the provision of prevention, treatment and/or recovery activities for OUD.

<https://www.samhsa.gov/grants/grant-announcements/ti-19-012>

Additional resources can be found through SAMHSA's Technology Transfer Centers (TTC), including the Mental Health TTC, Addiction TTC, and Prevention TTC.

Health and Human Services / Office of Minority Health (OMH)

Eighty-three percent of hired farmworkers in the United States are of Hispanic origin.ⁱ Nearly seven in 10 farmworkers were born in Mexico, and six percent were born in Central America.ⁱⁱ Research has shown that nearly 40% of migrant farmworkers met criteria for depression and 30% for anxiety, and mental health issues were associated with stressors related to farmwork and the farmworker lifestyle (e.g. social isolation, working conditions, poverty, poor housing conditions, acculturative stress).^{iii,iv} These stressors were also predictive of suicidal ideation among migrant farmworkers.^v Language is a major barrier to health services utilization for farmworkers, as 71 percent of all farmworkers report speaking English less than well.^{vi} Thirty percent of all farmworkers report not being able to speak English at all.^{vii} Limited access to healthcare facilities is an additional barrier, and cultural beliefs also result in migrant farmworkers delaying care or not engaging in treatment.^{viii}

The HHS Office of Minority Health offers resources to support cultural and linguistic competency among health care providers. Providing culturally and linguistically appropriate services (CLAS) has been shown to be effective in improving quality of care and services.^{ix,x} The OMH Think Cultural Health website (thinkculturalhealth.hhs.gov) includes resources on the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care and e-learning programs providing education on CLAS, including the *Cultural Competency Program for Behavioral Health Professionals* and *Promoviendo Decisiones Saludables y Cambios en la Comunidad (Promoting Healthy Choices and Community Changes)* for *promotores de salud* and community health workers.

ⁱ U.S. Department of Labor. Findings from the National Agricultural Workers Survey (NAWS) 2015-2016. Retrieved from: https://www.doleta.gov/naws/research/docs/NAWS_Research_Report_13.pdf.

ⁱⁱ Ibid.

ⁱⁱⁱ Hiott AE, Grzywacz JG, Davis SW, Quandt SA, Arcury TA. Migrant farmworker stress: mental health implications. *J Rural Health*. 2008 Winter;24(1):32-9. doi: 10.1111/j.1748-0361.2008.00134.x.

^{iv} Magaña CG, Hovey JD. Psychosocial stressors associated with Mexican migrant farmworkers in the midwest United States. *J Immigr Health*. 2003 Apr;5(2):75-86.

^v Hovey JD, Magaña CG. Suicide Risk Factors Among Mexican Migrant Farmworker Women in the Midwest United States, *Archives of Suicide Research*, 2003. 7:2, 107-121, DOI: 10.1080/13811110301579

^{vi} U.S. Department of Labor.

^{vii} Ibid.

National Institute of Food and Agriculture (NIFA)
2018 Farm Bill Report Requirement

viii Arcury TA, Quandt SA. Delivery of Health Services to Migrant and Seasonal Farmworkers. *Annual Review of Public Health* 2007 28:1, 345-363

ix Goode TD, Dunne MC, Bronheim SM. The evidence base for cultural and linguistic competency in health care. (Commonwealth Fund Publication No. 962). Retrieved from The Commonwealth Fund website:

http://www.commonwealthfund.org/usr_doc/Goode_evidencebasecultlinguisticcomp_962.pdf

x Beach MC, Cooper LA, Robinson KA, Price EG, Gary TL, Jenckes MW, Powe NR. Strategies for improving minority healthcare quality. (AHRQ Publication No. 04-E008-02). Retrieved from the Agency of Healthcare Research and Quality website: <http://archive.ahrq.gov/downloads/pub/evidence/pdf/minqual/minqual.pdf>

National Institute of Food and Agriculture (NIFA)
2018 Farm Bill Report Requirement

References

Research shows that people in rural areas are much more likely to take their own lives (<https://www.cdc.gov/mmwr/volumes/66/ss/ss6618a1.htm>).

A study of suicide in 17 states found people whose occupation involved farming, fishing, or forestry were more than five times more likely to take their own lives than people in all occupations combined (<https://www.cdc.gov/mmwr/volumes/65/wr/pdfs/mm6525.pdf>).

Farmers and ranchers are experiencing more than 50% reduction in net farm income since 2013 (Farm Bureau, 2018). <https://www.tb.org/market-intel/net-farm-income-projected-to-drop-to-1.2-year-low>

Farmers and ranchers are experiencing more than 50 percent reduction in net farm income since 2013. Farm Policy News, U.S. Farm Income Forecast Released, "The U.S. Department of Agriculture Tuesday said net farm income will drop to \$62.3 billion, half of the record \$123 billion farmers earned in 2013, retrieved at <https://farmpolicynews.illinois.edu/2017/02/u-s-farm-income-forecast-released/>

Farmworkers have greater risk for poor self-rated physical health and elevated depressive symptoms. Grzyacz, J., et. al., Job Control, Psychological Demand, and Farmworker Health: Evidence From the National Agricultural Workers Survey, *Journal of Occupational and Environmental Medicine*: January 2014 - Volume 56 - Issue 1 - p 66-71

Poor mental health among farmers has consequences for farming: Lower rates of adoption of new technology, products, and policies. Hounsome, B., et. al., A Note on the Farmer Mental Health on Adoption: The Case of Agri-Environmental Schemes. *Agricultural Systems* 91: 229-241, 2006

Depression associated with increased farm injury. Hong, X., et.al., Depression, perceived stress and nerves associated with injury in the MICASA Study, a California farm worker population. *Improving Health Among Immigrant Populations*: Special Issue 10, 2014

Research shows that suicide is the leading cause of death among people with substance use disorders (SUDs). Poorolajal, J., Substance use disorder and risk of suicidal ideation, suicide attempt and suicide death: A meta-analysis, *Journal of Public Health* 38(3), October 2015

USDA 's Rural Development and HHS/SAMHSA recently formalized a partnership to effectively create addiction recovery transitional housing in rural communities through which nonprofit organizations will be able to purchase homes from USDA and convert them to transitional housing for people recovering from opioid misuse (<https://www.usda.gov/media/press-releases/2019/02/15/usda-and-hhs-partner-create-recovery-housing-rural-communities>).