The STRESS Test
The following test was developed by psychologists Lyle H. Miller, Ph.D. and Alma Dell Smith, Ph.D. of Stress Directions, Inc.

To get your score, add up the figures and subtract by 20. Any number over 30 indicates a susceptibility to stress. You are very susceptible if your score is between 50 and 75, and extremely susceptible if it is over 75.

Susceptibility Scale from the Personal Stress Navigator™ by Lyle Miller, Ph.D. and Alma Dell Smith, Ph.D., c. 2003, Stress Directions, Inc.

www.stressdirections.com

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References

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McSparron, W. Depression and Help-Seeking Behavior of North Dakota Farmers, Dissertation Research, UND, 2002
We all experience stress in our lives. Stress affects everyone differently and the way we cope varies from person to person. When faced with a crisis, the level of stress escalates significantly. A crisis is any event that produces stress beyond what regular coping skills can handle.

A crisis can come in many forms. North Dakotans who face a disaster-related crisis include farmers who have lost crops, businesspeople who have damaged inventory and a drop in business or fewer customers, and families who have lost personal belongings. North Dakotans also face personal and family-related crises. A chronic, persistent stressor also can lead to a crisis when a person no longer can cope. The source of stress may vary, but in a crisis, everyone struggles to cope.

Do you know someone who is having trouble coping? Whether you are a family member, neighbor, elevator worker, bulk truck driver, clergy member or other business/community person, you can help!

Taking a Close Look At Yourself

Being there for others is great, but everyone needs to take a look at how they handle the stress in their own lives. Doing this before things get out of control may trigger an action that could keep you from falling into a major depression. Take the stress test and read about how you can assess your personal situation.
How Vulnerable are You to Stress?

Score each item from 1 (almost always) to 5 (never) according to how much of the time each statement applies to you.

_____ 1. I eat at least one hot, balanced meal a day.
_____ 2. I get seven to eight hours of sleep at least four nights a week.
_____ 3. I give and receive affection regularly.
_____ 4. I have at least one relative within 50 miles on whom I can rely.
_____ 5. I exercise to the point of perspiration at least twice a week.
_____ 6. I smoke less than half a pack of cigarettes a day.
_____ 7. I have fewer than five alcoholic drinks a week.
_____ 8. I am the appropriate weight for my height.

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_____ 9. I have an income adequate to meet basic expenses.
_____ 10. I get strength from my religious beliefs.
_____ 11. I regularly attend club or social activities.
_____ 12. I have a network of friends and acquaintances.
_____ 13. I have one or more friends to confide in about personal matters.
_____ 14. I am in good health (including eyesight, hearing, teeth).
_____ 15. I am able to speak openly about my feelings when angry or worried.
_____ 16. I have regular conversations with the people I live with about domestic problems, such as chores, money and daily living issues.
_____ 17. I do something for fun at least once a week.
_____ 18. I am able to organize my time effectively.
_____ 19. I drink fewer than three cups of coffee (or tea or cola drinks) a day.
_____ 20. I take quiet time for myself during the day.

_____ Total

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Positive and Negative Coping Methods

<table>
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<tr>
<th>Negative Methods</th>
<th>Positive Methods</th>
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<td>Commitment</td>
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<td>Tantrums</td>
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<td>Worrying</td>
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<td>Drugs</td>
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<td>Esteem building</td>
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<td>Assertiveness</td>
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<td></td>
<td>Conflict resolution</td>
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</tbody>
</table>
How many positive or negative methods do you use?
How many do you see in others?

Source: A Positive Approach to Stress Management. (1983)
Appleton, Wis.: Aid Association for Lutherans

"Let's call it a day, Flo. I'm all 'crabbed' out."

Cartoon used with permission from Jerry Palen.

Remember

Never swear to secrecy or leave a suicidal person alone.
If a person is suicidal, seek help immediately.
Listening to Your Body

Distress Signals

- **Body Symptoms**: sweating, dry mouth, headache, backache, intestinal distress, hunched shoulders, flushed

- **Mood Changes**: frustration, irritability, hopelessness, restlessness, impatience, forgetfulness, panic attacks

- **Behavior**: disturbed sleep patterns, emotional outbursts, overreacting, talking too fast or too loud, increased alcohol use

- **Long-term Stress-related Illness**: back pain, skin disorders, asthma, peptic ulcers, high blood pressure

Stress Solutions

- **Diet**: Increase fresh fruits and vegetables, grains, fiber and lean meat. Decrease salt, fat, caffeine and refined sugar.

- **Lifestyle Changes**: Exercise more, improve time management, take more time for yourself and learn to relax.

- **Relationships**: Surround yourself with positive people, talk about your worries, ask for help and keep your sense of humor.
Children’s Stress Symptoms

Behavior
- Crying or looking sad
- Whining
- Being down on self
- Hurting others or self
- Clinging to adults
- Withdrawing from others
- Frequent tantrums
- Nervous behaviors, such as biting nails
- Self-destructive behaviors, such as eating disorders
- Abuse of alcohol or other chemicals

Health
- Frequent headaches, stomachaches, nausea
- Can’t sleep
- Grinding teeth
- Nervous tic or stuttering
- Low-grade fevers
- Sick more often
- Fatigue
- Change in eating habits

continued
Learning
• Drop in grades
• Avoids homework
• Daydreams, can’t concentrate

Family Stress Symptoms
• Sense of urgency – no time to relax or find the root of the problem
• Constant sense of frustration or too much to do
• Explosive arguments
• Isolation
• Abuse of alcohol or other chemicals
• Little time together
• Conversations center on time and tasks rather than people and feelings
• Sense of guilt
• Little enjoyment from family life
**Setbacks**

Everyone experiences setbacks from time to time. To adjust to setbacks:

1. Avoid trying to control the uncontrollable, such as weather, markets.

2. Avoid trying to blame someone or something for problems. Blaming and other acts of anger only make things worse.

3. Look for some meaning, some new sense of direction.

4. Avoid being too quick to judge the outcomes.

5. You are not alone!

6. Get your emotions out. Talk and talk and talk some more. Don’t bottle things up inside and explode later. Open your mouth and your heart. Let go of the past and move on.

7. Avoid making assumptions about **why** something occurred. Stick to known facts.

8. Keep a sense of humor!
Stress and Depression

Prolonged, persistent stress can lead to symptoms of depression. A farmer dealing with ongoing financial stress, for example, could be at risk of developing clinical depression. Depression is one of the most underrecognized and undertreated conditions in any state. A 2002 survey of North Dakota farm operators found a high rate of depression (42 percent), nearly twice the rate found in similar populations.

Financial stress was a key factor in understanding the high rate of depression in this study. Financial stress was a predictor of depression. Yet, farm operators were less willing to seek help from professionals than from informal resources.

Untreated depression impairs a person’s ability to function and can increase the risk of health problems and suicide. Depression is an example of a mental health issue that often is masked by working excessive hours, isolation, and increased use of alcohol and drugs. Men are less likely to admit to depression and doctors are less likely to suspect it.

Farmers are a hardy, self-reliant bunch. This is also true of several other professions. That self-reliant spirit comes from finding creative solutions to hardships and the normal day-to-day challenges. The long work hours inherent in the job can create and add stress that leads to burnout. In the end, this can make reaching out for help hard for these individuals.
Depression Warning Signs: What to Look For

A formal diagnosis of a major depressive disorder may include:

- Depressed, sad mood (persistent) or *irritability
- *Loss of interest and pleasure in nearly all activities
- Change in appetite (weight loss or gain)
- Restlessness/agitations or slowing in physical movement
- *Fatigue or loss of energy
- Feelings of worthlessness or hopelessness and/or excessive and inappropriate guilt
- Inability to concentrate and/or make decisions
- *Sleep disturbance (insomnia or sleeping too much)
- Recurrent thoughts of death or suicide; suicide plan/attempt or statements about suicide
- Impairment in daily life functioning – social isolation, withdrawal, neglect of responsibilities and/or appearance, failing to complete tasks, etc.

*Research has found some differences in the way each gender reacts to depression. For example, men will more commonly admit to symptoms with asterisk.
Other Depression Warning Signs

- *Alcohol or drug use
- *Overinvolvement with work
- *Withdrawal from relationships
- *Rigid demands ("leave me alone")
- *Avoiding others
- *Increased anger and/or aggressive behavior
- *Engaging in reckless behavior
- Talking about suicide or ending it all
- Giving away possessions

*Research has found some differences in the way each gender reacts to depression. For example, men will more commonly admit to symptoms with asterisk.
What Can You Do To Help Someone Else?

1. Listen
2. Respond
3. Refer and/or tell a family member

Be a “front-line” responder. You can play a significant role in helping those who struggle with depression or who may be at risk for suicide. You don’t have to be a trained counselor to make a difference. You just have to be brave enough to approach the person and let him or her know you care. As a friend or family member, you are one of the few who will be able to notice a change in the person and provide help as needed.

LISTEN, RESPOND, REFER

LISTEN

• It’s the most important thing you can do! Allow the person to express anger, fear, anxiety – share honest feelings and perceptions of the situation.

• Repeat what you heard: facts, content, the problem, his or her feelings (“I hear you saying… . It sounds like you are … .”)

• Never provide reassurances (“Don’t worry, it will be fine.”).

• Never dismiss the problem (“Everyone has troubles.”).
• Listen attentively; try to understand what he/she is saying, feeling, thinking.

• Reinforce positive thinking and responses, and help problem solve.

• Remain calm if the person expresses suicidal thoughts. Talk about it. In most cases, the person is relieved to tell someone. Talking about the situation out loud can release some of the deep emotions inside and allow the person to hear for himself or herself that he or she needs to seek help.

**RESPOND**

State concerns and ask questions:

• State your concerns about his/her behavior, mood, appearance, etc.

• Ask questions about changes you observe.
  – “I see you have trouble concentrating. You asked me to repeat the same information several times in our visit today, unlike our usual visits.”
  – “I noticed you’re really quiet. Is there something bothering you?”

• If you have an idea of the problem, ask directly.
  – “Tell me how you’re managing.”

Don’t try to analyze and interpret, and don’t tell them about someone who has a worse situation! Stating your specific concern about his/her situation is the
best way to avoid analyzing or arguing about the person’s safety.

Ask about suicide:

- If concerned about suicide, ask if he/she is considering harming him/herself or attempting suicide. If yes, follow up with questions such as: “Do you have plans to harm yourself or others? Have you taken any actions toward carrying out this plan? How do you see the future? Do you feel hopeless, like giving up? Have you ever wished you could go to sleep and never wake up? What has kept you alive to this point?”

- If the person engages in talk about a plan and actions taken, consider this person at high risk and seek help immediately. Call 211 or 911.

Communicate that you care:

- “I am concerned about you. I worry that you may not be able to handle the stress and I want to help.”

- Make a plan together. “Let’s go talk to the pastor/doctor together and see how we can get through this together.”

- If you’re really worried about someone and aren’t comfortable approaching that person, ask another trusted person (friend, family member, clergyperson) for an opinion or to go with you. You also can call 211 to consult about the situation.
REFER
An important goal, and often the most difficult for us to do, is to get that person to seek help.

- Begin by directly talking about what you see and your concerns. Suggest that he/she seek help from a health-care provider or mental health professional. You can offer to go together or have another trusted person accompany him/her. For example: “I am concerned about you. I think it could be helpful for you to talk to someone or to see your doctor.”

- Provide information about the resources – you can call ahead on your own to ask about services and/or obtain advice about the situation. Explain it as well as possible to the person. This takes the “fear of the unknown” away and provides a first, logical step to recovery. Encourage the person to schedule and attend the initial appointment.
Remember

Depression is one of the most treatable medical conditions that can strike anyone at any age. Treatment can alleviate symptoms in 80 percent of cases. One in five people will be affected by a mental health problem each year.

Life involves many risks and setbacks. But no problem is so great that you and the person you’re concerned about cannot handle it together.

You can make a difference.
Resources

For depression and/or suicide risk:

- Call 211: Statewide 24-hour crisis intervention, health and human services information and referral.

- Refer to a local health-care provider or local mental health professional. If you meet resistance, suggest and accompany the person to a professional you know. Some examples might be: clergy members, medically trained personnel, hospital emergency room personnel, law enforcement agencies/personnel, school counselors.

- National Suicide Hopeline Network: (800) SUICIDE

- National Suicide Prevention Lifeline: (800) 273-TALK
North Dakota Mental Health Service Centers

Beulah and Hazen
West Central Human Service Center
Hazen Office
1101 3rd Ave. N.W.
Beulah, ND 58523
(701) 873-2399

Bismarck
West Central Human Service Center
1237 Divide Ave. W., Suite 5
Bismarck, ND 58501
(701) 328-8888

Devils Lake
Lake Region Human Service Center
200 Highway 2 S.W.
Devils Lake, ND 58301
(701) 665-2200

Dickinson
Badlands Human Service Center
200 Pulver Hall
Dickinson, ND 58601
(701) 227-7500

Fargo
Southeast Human Service Center
2624 9th Ave. S.W.
Fargo, ND 58103
(701) 298-4500

Grafton
Northeast Human Service Center
Fifth and School Road
Grafton, ND 58237
(701) 352-4334

Grand Forks
Northeast Human Service Center
151 4th St. S., Suite 401
Grand Forks, ND 58201
(701) 795-3000

Jamestown
South Central Human Service Center
520 3rd St. N.W., Box 2055
Jamestown, ND 58502-2055
(701) 253-6300

Minot
North Central Human Service Center
1015 S. Broadway, Suite 18
Minot, ND 58701
(701) 857-8500

Williston
Northwest Human Service Center
316 2nd Ave. W.
Williston, ND 58801
(701) 774-4600
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