Working With Distressed Clientele
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 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!

Remember

Never swear to secrecy or leave a suicidal person alone. If a person is suicidal, seek help immediately.
Positive and Negative Coping Methods

Positive Methods

Spiritual
Commitment  Prayer  Surrender  Valuing  Worship
Faith  Faith
Surrender  Valuing  Worship

Mental
Time management  Problem solving
Life planning  Relabeling
Organizing  Imagination

Physical
Relaxation  Music
Self-care  Exercise  Stretching  Play
Relaxation  Music
Self-care  Exercise  Stretching  Play

Diversion
Learning  Nourishment
Work  Getaways
Hobbies  Biofeedback

Family
Balancing  Contact  Flexibility  Networking  Linking  Limits
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Interpersonal
Affirmation  Togetherness
Expression  Esteem building
Assertiveness  Conflict resolution

Negative Methods

Indulging  Tobacco
Revenge  Withdrawal
Tantrums  Alcohol
Fault finding  Eating
Worrying  Passivity
Denial  Stubbornness
Illness  Drugs

How many positive or negative methods do you use?

How many do you see in others?
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 oneself
- Hurting others or oneself
- Clinging to adults
- Withdrawing from others
- Having frequent tantrums
- Displaying nervous behaviors, such as biting nails
- Engaging in self-destructive behaviors, such as eating disorders
- Abusing 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

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:

- Avoid trying to control the uncontrollable, such as the weather, markets.
- Avoid trying to blame someone or something for problems. Blaming and other acts of anger only make things worse.
- Look for some meaning, some new sense of direction.
- Avoid being too quick to judge the outcomes.
- Know you are not alone!
- 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.
- Avoid making assumptions about why something occurred. Stick to known facts.
- 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 under-recognized 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 in other states. No follow-up or similar study has been done with North Dakota farm operators since then.

Financial stress was a key factor in 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 also is 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.

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 more commonly will admit to symptoms with an 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.

1. **LISTEN**

- Listening is the most important thing you can do! Allow the person to express anger, fear and anxiety, and 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 …. So what you’re telling me is….”)
- 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. Reflect back what you hear to give the person a chance to clarify and voice his/her concerns.
- Reinforce positive thinking and responses, and help problem solve. Help the person make a plan. What’s the first step? How can I help?
- 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.
2. 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 the person 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.
3. 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/pastor.”

- 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

One in five people will be affected by a mental health problem each year. However, 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.

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 helpline, 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 Prevention Lifeline**: 1-800-273-8255 (TALK)
  24-hour crisis intervention if you or someone you know are having suicidal thoughts.

References

Family Information Services, Minneapolis, Minn., Joan Comeau, editor, 1991-93

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

McSparron, W. Depression and Help-Seeking Behavior of North Dakota Farmers, Dissertation Research, University of North Dakota, 2002

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(original completed in 1993) by Wanda McSparron, Ph.D., Concordia College Counseling Psychologist, and Deb Gebeke, Ph.D., NDSU Extension Service

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