



AGRICULTURAL WORKERS AND MENTAL HEALTH

Mental health is an important component of an individual's overall health. Poor mental health affects an individual's productivity, their hobbies and motivations, their ability to handle life challenges, and their overall contentment and ability to enjoy life. Poor mental health may be especially difficult to identify, treat, and overcome among agricultural workers, who face multiple challenges including language barriers, poor access to health insurance, and high rates of poverty. However, many agricultural workers from Latin American cultures, especially indigenous cultures, acknowledge how deeply mental health can impact one's wellbeing and physical health. The following is a collection of recent facts and figures pertaining to the mental health of agricultural workers. The last section of the factsheet includes recommendations and advice for healthcare and service providers who work with this population.

Prevalence of Mental Health Disorders Among Agricultural Workers

- Among the 915,725 agricultural workers and their family members who received health care services at Migrant Health Centers in 2019, mental health disorders were one of the most commonly reported diagnoses.^{1,2} More than 41,000 (4.6%) were diagnosed with an anxiety disorder, and over 33,000 (3.6%) were diagnosed with a depressive disorder. Substance abuse and alcohol-related disorders were less common, as only 1.2% of the patient population was diagnosed with one of these disorders.
- A study of 248 female adult agricultural workers in North Carolina found that nearly a third (31%) of participants had elevated symptoms of depression, significantly greater than the rate of depression among U.S. Hispanic females (11%).³
- A comparison study of 35 Latina agricultural workers and 60 Latina non-agricultural workers found that the agricultural workers had significantly higher mean scores on scales measuring stress and anxiety as compared to the non-agricultural workers.⁴ More than one in four (28.6%) of the agricultural worker women had elevated depressive symptoms.
- Elevated levels of anxiety and depressive symptoms were documented among 75 male and female agricultural workers in the Midwest.⁷ Nearly one third (31%; 22% of males and 39% of females) had elevated levels of anxiety and more than one third (39%; 35% of males and 42% of females) had elevated depressive symptoms.
- A study conducted in North Carolina found a positive correlation between levels of daytime sleepiness and levels of depressive symptoms among agricultural workers.⁸ Of the 300 agricultural workers surveyed, 28% reported having elevated levels of depressive symptoms. The study also found that excessive daytime sleepiness and depressive

symptoms increased with increasing age. These statistics are especially problematic and dangerous since agricultural work requires dangerous machinery and tools, toxic pesticides, and transferring heavy loads.

- A third (33%) of agricultural workers in Yuma County, Arizona reported experiencing one or more days of poor mental health in the past month, and 31% reported one or more days of poor physical health in the past month.⁹
- Research conducted with nearly 400 agricultural workers in North Carolina found that 50% were at risk for alcohol misuse, 17% had substantial depressive symptoms, and 9% had substantial anxiety.¹⁰
- According to the 2009-2010 National Agricultural Workers Survey, 9% of agricultural workers experienced elevated depressive symptoms (8% of men and 17% of women).¹¹

Cultural Understanding of Mental Health Disorders

The vast majority of agricultural workers in the U.S. are immigrants from Mexico and Central America, and they bring new and different health concepts, pathologies, and treatments from their countries of origin as compared to the biomedical understanding of disease prevalent in the U.S.^{12,13} The points below primarily focus on Mexican and indigenous Mexican understandings of mental illness, but it is important to understand that Latino immigrants and agricultural workers are extremely diverse, so the findings below should not be generalized to all agricultural workers.

- In Mexico, there are numerous culture-bound illnesses that are widely acknowledged, including *susto*, *nervios*, *mal de ojo*, *empacho*, *coraje*, and *ataques de nervios*.^{6,14} Several of these have mental health causes with physical effects: *Susto* is a condition that can include several symptoms including disturbed sleep, depression, gastro-intestinal issues, and listlessness that are brought on by a sudden frightful event.¹⁵ *Nervios* is a set of symptoms that can include worry, jumpiness, irritability, depression, agitation, and nervousness.¹⁶
- Immigrants from different countries and different regions within a country have different understandings of culture-bound illnesses, but research with Latinos in Mexico, Guatemala, and the U.S. has found fairly consistent understandings of *nervios*.¹⁷
- Indigenous Mexicans often place special emphasis on the connections between the spirit, mind, and body, and many traditional treatments for physical conditions emphasize healing emotional and mental trauma or stress.¹⁸
- Among male agricultural workers in California, 22% were found to have symptoms of *nervios*, which is a condition of stress in many Hispanic cultures.⁵ A third of Mexican migrants interviewed in another study reported suffering *coraje*, *nervios*, or *susto* at the time of the interview, all culturally-bound mental health conditions.⁶
- One report on a study of agricultural workers along the U.S.-Mexico border found that 41% of participants reported *nervios*, 37% reported depression and 17% reported *latidos* (heart palpitations), which were attributed to anxiety.¹⁹

Mental Health Risk Factors Among Agricultural Workers

- There are several underlying factors that contribute to the poor mental health of agricultural workers, but numerous research studies have found that economic hardship and poverty are driving factors.^{3,9,20} Other contributing factors are associated with the nature of agricultural work, such as frequent mobility, long work hours, and limited or nonexistent benefits.
- Many immigrant agricultural workers in the U.S. have witnessed violence, been displaced from their home due to violence, poverty, or natural disasters, or have been exposed to other traumatic events. Research conducted in Guatemala more than 15 years after the end of the country's civil war found that 50% of sampled participants had screened positive for post-traumatic stress disorder, 41% screened positive for depression, and 23% for dependence on alcohol.²¹
- Nationwide, agricultural workers who report having low control in their jobs and a high psychological demand at work are more likely to experience depressive symptoms.⁵
- Agricultural worker women who experienced low food security or economic hardship had a higher prevalence of symptoms of depression as compared to those who did not. Women with marginal, low or very low food security were 2.3 times more likely to report depressive symptoms. Documentation status, education level, and household size were not associated with depressive symptoms.³
- Low household incomes and poor housing conditions were associated with higher symptoms of nervios among male agricultural workers. Other factors that were associated with nervios were use of illegal substances, higher acculturation levels, and a high perceived level of stress.⁵
- One study published in 2008 reported on which factors common to the agricultural worker lifestyle resulted in poor mental health. Poor mental health was measured through documentation of signs of anxiety and depression.²² The following conclusions were observed:
 - Five domains of stress were noted: immigration legality and logistics, social isolation, work conditions, family, and substance use disorders by others
 - Social isolation was the strongest contributor to anxiety
 - Stressful working conditions had the strongest association with depression
- In Arizona, age, sex, and perceived levels of stress were found to be associated with more reported days of poor mental health among agricultural workers. Women and older workers experienced more days of poor mental health than men or younger workers.⁹
- Among male agricultural workers, experiencing an occupational injury was a significant risk factor for experiencing depression. Among 200 agricultural workers in Nebraska, men who had experienced an occupational injury were seven times more likely to be depressed.²³

- Poor housing conditions, such as overcrowding and a lack of a secure storage space for personal belongings were associated with higher rates of depression and anxiety among agricultural workers in North Carolina.¹⁰
- Primary stressors reported by Latino dairy workers included being away from family, fear of deportation, working conditions and language barriers.²⁴
- Research conducted in Immokalee, Florida with Latinos documented that low levels of social support, lower educational levels, and increased life stressors were associated with lower self-rated mental health scores among U.S.-born residents. The only significant predictor of low self-reported mental health scores among foreign-born residents was low levels of social support.²⁵
- In the Midwest, agricultural workers identified being away from family or friends, rigid work demands, unpredictable housing, low family income or low pay, and poor housing conditions as the most common stressors in their lives.⁷ Men and women generally reported the same stressors, but a higher percentage of men (39%) reported being away from family or friends as a stressor compared to women (26%), and a higher percentage of women (47%) reported poor housing conditions as a stressor compared to men (36%).
- A qualitative study published in 2008 examined the factors that contribute to depression among 38 adult Mexican immigrant men.²⁶ This is a good proxy for the population as a 2009 national update on agricultural workers by the Department of Labor found that 68% of agricultural workers were born in Mexico.²⁷ When interviewed for the causes of depression, the following responses, all related to the immigrant experience, were noted:
 - Separation from loved ones and/or family,
 - Discrimination and harassment in the community
 - Long hours and multiple jobs,
 - Not having a job or receiving bad pay,
 - Social isolation, and
 - A change in drug or alcohol use.²⁶
- Depressive syndromes have been found to be more prevalent among indigenous Mexican agricultural workers than those who are non-indigenous, and Spanish literacy contributed to a decreased likelihood in having a depressive syndrome.²⁸ Residing in the U.S. for seven or more years was associated with a lower prevalence of self-reported poor emotional or mental health and lower stress levels among indigenous Mexican agricultural workers in the U.S. compared to their newly-arrived counterparts.
- Although poor mental health is regarded as a stigma, it seems to be especially apparent within the Latino culture. Latina women, for example, are more likely than White or Black women to feel embarrassed about discussing personal issues, fearing what others may think, or believing family members may think they are crazy.²⁹

Substance Use Disorder

- Migration from Mexico to the United States has been linked to substance use disorders. One research study interviewed 5,826 individuals in Mexico.³⁰ Respondents who migrated to the United States or who had family who migrated to the United States were more likely to:
 - Use alcohol, marijuana, cocaine, and other illicit drugs at least once in their lifetime;
 - Develop a substance use disorder; and
 - Have a current (within the last 12 months) substance use disorder
- One study conducted in North Carolina that interviewed 125 male migrant agricultural workers reported that 39% may be alcohol dependent.³¹
- Alcohol use among male agricultural workers has been found to vary widely within the population. In North Carolina, 18% of male workers had never consumed alcohol and 35% had not consumed alcohol in the past three months, but nearly half (49%) had engaged in heavy episodic drinking at some point in the past three months and 24% did so regularly. Agricultural workers were found to be at greater risk for alcohol dependence compared to other non-agricultural worker immigrants.³² A literature review assessing alcohol dependence among agricultural workers in the eastern U.S. found that most studies reported a prevalence of at least 30% among male agricultural workers in that region.³³
- Research conducted with Mayan indigenous persons in Mexico and California has found that speaking Maya was protective against at-risk drinking.³⁴
- A study conducted among agricultural workers concluded that the frequency of substance use, in this case crack-cocaine, alcohol and marijuana, was not necessarily associated with ethnicity but rather with the type of crop work that the worker was employed in.³⁵
- Among female adult farmworkers found that 32% of participants aged 50 years and older screened positive for at-risk drinking, compared to much lower prevalence in younger age groups.³⁶ The prevalence of at-risk drinking was positively associated with perceived discrimination and legal concerns related to immigration status.

Recommendations for Healthcare or Service Providers

- A study which gathered the input of 15 researchers who each have a background in the research of treatment and services for the Hispanic population published that Latinos/Hispanics are discouraged from seeking mental health treatment due to the cultural insensitivity, stereotyping, and unacknowledged racism they have experienced with health care providers in the past.³⁷
- The use of participatory research methods and community health workers who are representative of the community have been found to be useful in improving access to mental and behavioral health care services.^{38,39}
- Studies have found that there are traditional values in the Latino culture that contribute to the under-use of mental health services. Some of these values include respect, familism and faith which are built around the premise of courtesy, reliance on family members as opposed to those who are non-family, and an emphasis on family goals as opposed to those

of an individual.^{38,40} Fatalism is another important component in Latino culture, and it is the idea that problems such as those related to health are beyond an individual's control.⁴⁰

- It is important for health or other service providers to be knowledgeable on how elements that are intrinsic to the population such as culture-bound illnesses,²⁹ traditional cultural values,⁴⁰ and the immigrant experience²⁶ contribute to agricultural workers' poor mental health and work against treatment-seeking behavior. It is also important for providers to acknowledge existing cultural understandings of how mental health impacts one's physical health, and use those cultural understandings as a bridge between the biomedical and traditional ethnomedical models of mental health pathology and treatment.
- Identifying the different factors that contribute to agricultural worker stress can aid in the designing of programs and practices that help manage or even prevent those mental health issues that plague this population.²² One idea is to organize a social network within the agricultural worker community that will support an interactive and positive outlet such as a sporting event.²⁹

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