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House of Representatives
COMMONWEALTH OF PENNSYLVANIA
HARRISBURG

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December 8, 2025

TO: Agriculture and Rural Affairs Committee Members

FROM: Eddie Day Pashinski, Majority Chair
Agricultural and Rural Affairs Committee

SUBJECT: Informational Meeting— **Cultivating Wellness: Supporting Farmers Through the Mental Health crisis**

The House Agriculture and Rural Affairs Committee will hold a Joint Informational Meeting with the Senate Agriculture and Rural Affairs Committee on Wed., January 14 2026

The meeting will begin at 9:00 a.m. and be held at:

Farm Show Complex
Erie Room
2300 N Cameron St
Harrisburg, PA 17110

The topic of the informational meeting is ***Cultivating Wellness: Supporting Farmers Through the Mental Health crisis***

Please contact Paula Hunter Phunter@pahouse.net or 717-783-0686 with your attendance plans. If you are not able to attend, please submit an official leave request form.

Thank you,

Eddie Day Pashinski



Joint Public Hearing

House Agriculture and Rural Affairs Committee
&
Senate Agriculture and Rural Affairs Committee



Cultivating Wellness: Supporting Farmers Through the Mental Health Crisis

Erie Room

Crossroads Conference Center, Pennsylvania Farm Show Complex

Wednesday, January 14, 2026

9:00 a.m.

Rep. Eddie Day Pashinski, Chair
Rep. Dan Moul, Republican Chair

Sen. Elder Vogel, Chair
Sen. Judith Schwank, Democratic Chair

House Agriculture and Rural Affairs Committee

Senate Agriculture and Rural Affairs Committee

9:00 a.m. Opening Remarks by Committee Chairs
Member Introductions

9:10 a.m. “Cultivating Wellness: Supporting Farmers Through the Mental Health Crisis”

- Russell Redding, Secretary
Pennsylvania Department of Agriculture
- Dr. Florence Becot, Ph.D., Rural Sociologist
Nationwide Insurance Early Career Professor in Agricultural Safety and Health
- Dr. Ginger Fenton, Ph.D., Extension Educator
Penn State Extension
- Lisa Wherry, Pennsylvania Farm Bureau Member
American Farm Bureau Federation Farm State of Mind Campaign Representative
- Jeff Corle, Somerset County Farmer/Music Artist/ Farmer Mental Health Advocate

10:25 a.m. Questions

10:45 a.m. Adjourn

Written Testimony for the Joint Agriculture and Rural Affairs Committee

Hearing on Farmer Mental Health

Submitted by: Jeff Corle

Former Dairy Farmer | Speaker | Songwriter | Advocate for Farmer Mental Health

Somerset County, Pennsylvania

Thank you, Chairman Vogel, Executive Director Ott, committee members, and distinguished guests for the opportunity to testify today.

I am not here as a credentialed expert of any kind. I am here simply as someone who has lived through farm loss, experienced the mental and emotional toll firsthand, and has since, because of a very bizarre twist of fate, spent the last few years touring the country, listening to hundreds of farmers tell similar stories.

Up until the spring of 2022, I was a fourth-generation dairy farmer milking cows on my family farm in Somerset County. That spring of 2022, economic pressures finally caught up to us, and I made the most difficult decision of my life: to shut down the dairy and to sell my beloved and beautiful Guernsey cows. I thought I was ready for that, but on the day of the sale, I began to experience feelings and emotions that I had never felt before. When the last of the cows, my stubborn little Dolly, was finally loaded onto the trailer and the trailer door slammed shut, reality began to set in. My life as a small dairy farmer was over.

When the truck pulled away from the barn that day, the best way I've come to describe this is that it literally felt as though something had been ripped out of me. And I must have led a charmed life up until that point because I honestly didn't know that you could feel so much physical pain from an emotional trauma.

In the days and weeks that followed the sale I was heartbroken, and I spiraled down into a deep depression filled with pain and anxiety. On a day I didn't think I could take the pain any longer, two things leaned against my bedroom wall: a loaded shotgun and my old guitar. Fortunately for me and my family I chose the guitar. Sadly, many farmers in similar circumstances are making another choice with famers now being three and half times more likely to commit suicide than the general public.

Now for that bizarre twist of fate I mentioned earlier. When I picked my guitar up that fateful day, I wrote a song really just as a way to get out all the pain and pent-up emotion I had inside and to somehow put into words what I was feeling. Little did I know at the time that

song, Empty Barn, would soon go viral, resonating with tens of thousands of people all over the country - mostly farmers and rural folks.

Empty Barn opened the door for me to start a new career as an independent music artist, keynote speaker, and farmer/rural mental health advocate. But I soon found out that Empty Barn was about far more than just me and my story. Touring the country performing and speaking made me acutely aware that we had a major problem because everywhere I went farmers were coming up to me wanting to tell me about their own stories of loss and grief, of the pain and heartache of shutting down a multi-generational operation, of losing their livelihoods, of losing their very identities. I cannot tell you how many people have stood in front of me with tears streaming down their faces as they talk about their own loss. I found that somehow music opens people up to share. I do the only thing I can do which is to listen and to ask if they're ok.

In my experience, the obvious heart of the problem is that we're losing way too many farms, way too fast. I don't know what we can do about that, but I do know, as I'm sure you all do, many farms still operating are hanging on by a thread, causing even more general stress and anxiety and feelings of loss and hopelessness out there in the countryside. That is coupled with the fact that many farms still operating are hanging on financially by a thread which in and of itself also causes massive stress and anxiety. I'm here to tell you, to testify, that people are hurting.

The other part of the problem is that farmers, especially men - guys that look like me, don't really have any language for how to even ask for help when they are hurting and feeling stress and anxiety. As many of you well know, farmers are raised to grin and bear it. We believe in the virtue of self-reliance. We see ourselves as the strong ones for our families and we don't want to show or admit to perceived weakness. I can testify that those are great virtues and great things to live by in most aspects of farm life, but they are the absolute worst things to hold on to when it comes to your own mental health.

I thank God I had my guitar and songwriting to express myself. Somehow, we've got to give folks tools that allow them to ask for help and to get relief. I don't remember now where I heard this, but I think it's appropriate to this hearing. Ask a farmer what phone numbers are on speed dial in his phone and he's likely to say wife and family of course, followed closely by, mechanic, vet, seed and fertilizer dealer, etc. All people that help solve problems on the farm. (especially the Wife!) But is there even one number in that phone for any kind of mental health problem solving? (again, other than the wife!)

That's part of what needs to change. We've got to provide language and somehow normalize asking for help.

Lily had asked me to perform Empty Barn today, but we couldn't quite work out the logistics, so I'll leave you with a few of the lines that people either sing back to me in concert or tell me how much they affected them.

I can get used to not working every day.

I can get used to not needing to bale hay.

I can get used to some old job off the farm.

But I will never get used to this empty barn.

For all my growing up, it was a special place, where we started and ended every single day.

We always had a full house, ladies that we loved.

I tried hard to keep it going, wish I didn't have to be the one.

Of all the lines in the song, "Wish I didn't have to be the one" is the one line that hits a lot of folks the hardest. I wrote that line from my own lived experience, again having no idea that so many others were experiencing the same pain of loss. The same sense of leaving their families down, of leaving their communities down, and of leaving ancestors and forebearers down.

It's a heavy load to bear, I can tell you.

So, one last thing is that I mentioned earlier that I do a lot of listening these days. I challenge you, the next time you get a sense that your friend or neighbor isn't doing so well, maybe experiencing some of that weight, please take the time to look them in the eye, make a human connection and ask, "Are you ok?" Keep that eye contact and maybe add "If you're not ok, let's talk about it."

Thank you.

Introduction

Thank you for the opportunity to present on this important topic. Good morning, my name is Lisa Wherry, and I am President of the Washington County Farm Bureau in Pennsylvania. Which is roughly over 500 of our members and also community members. I am truly honored to talk about how important Mental Health is to the farming community. It is near and dear to my heart because I personally have suffered from extreme stress that the farm can put on you.

I first started talking about Mental Health in 2018, because I learned from my own experience that so many farmers do not want to accept that it is okay not to be okay—and that's not okay. Being a part of the Farm Bureau network, including American Farm Bureau and Pennsylvania Farm Bureau, has given me a number of opportunities to find support for myself and my farm, and in return I'm able to contribute ideas to the broader efforts I'll talk about today, which are helping farmers and farm families around the country.

History of the Farm State of Mind Initiative

The American Farm Bureau Federation began working to address farmer mental well-being in 2017, when we partnered with the National Farmers Union to facilitate a dialogue about mental health and deploy solutions across farm country.

That partnership became the Farm State of Mind initiative. Eight years later, it is going strong and remains a key priority for our organization.

In 2026, we are entering a new chapter through creation of the Farm State of Mind Alliance.

The Farm State of Mind Alliance represents a joining of forces with the Farm Family Wellness Alliance, which was initiated by Farm Foundation and National 4-H Council in 2020. It will expand the reach of our collective messaging and resources to a broader coalition of food and farming sector partners, allowing for an even greater impact in rural communities.

What Farm State of Mind Offers

Since inception, the Farm State of Mind initiative's goals have been two-fold: to build awareness to reduce stigma, and to provide access to information and resources that promote farmer and rancher mental health wellness.

Over time, through the Farm State of Mind initiative we have carried out numerous campaigns to get people—including farmers—talking about mental health to help anyone who is struggling understand they are not alone, and to reduce the stigma that too often is a barrier to seeking help before it's too late.

This effort pervades all levels of Farm Bureau. Very importantly, our grassroots members have mobilized to make sure these messages are reaching into our farming communities. State and county Farm Bureaus, including Pennsylvania Farm Bureau, are actively engaged in outreach, communication and local events. For example, Pennsylvania Farm Bureau Women's Leadership Committee has been talking about mental well-being and featuring this as an agenda topic at their Farm Bureau Days. I have also traveled all around the state to the various counties, not just Washington County, handing stress balls and candy bars. Chocolate always relieves, and people tend to open up once you've fed them first.

Further driving the conversation, we have been able to conduct research to better understand the dynamics of rural stress, farmer and rural perceptions of mental health, and substance misuse among rural adults.

Importantly, Farm State of Mind makes available no-cost, online counseling and consultation services on the Togetherall platform, which is free to farmers and their family members over the age of 16.

This no-cost access is in addition to a national directory of state-by-state hotlines, which we put together in partnership with the University of Georgia, to make it easier for people to find help they need.

Finally, in partnership with Farm Credit and Michigan State University, we have deployed on-demand training for individuals who interact with farmers and ranchers, providing them with the skills to understand the sources of stress, identify effective communication strategies, reduce stigma related to mental health, and learn the warning signs of stress and suicide.

More information about all of this work and more, including tools to help someone in need, can be found at FarmStateOfMind.org.

An Ongoing Need

Having the leaders of the nation's two largest farmer professional organizations call attention to this issue in 2017, and commit their resources towards solutions, I believe was an important moment in elevating the conversation around rural mental health that we are still having today.

I also believe we have made strides in changing the conversation and encouraging farmers to reach out for help when they need it.

Sadly, as we in this room know, and as evidenced by the fact that this hearing is taking place, the need for this kind of effort remains.

Multiple studies show that farmer suicide rates are 2-5x higher than the national average. However, people are more than statistics.

It's safe to say that most people involved in agriculture know at least one person who has struggled with mental health.

And when one member of a family struggles with mental health, the whole family is deeply affected.

While it's true that mental health challenges aren't unique to the young or old, rural or urban, farming is a stressful occupation that is associated with increased levels of anxiety and depression.

Experiences such as natural disasters, extreme weather events, financial uncertainty, fluctuating markets, and other factors all contribute to extreme stress for farmers and ranchers who often live in a very isolated setting.

What the Farm State of Mind initiative uniquely brings to the table, from my perspective, is that it was created by farmer organizations who have deep insights into the needs, lifestyles, and concerns of farm families.

Just this past weekend, American Farm Bureau President Zippy Duvall used the stage at our annual National Convention to share a deeply moving and personal account of his own struggle with mental health after losing his first wife to illness. His story, and his willingness to so openly share it, is a powerful demonstration to our members that it's important to seek help, and that the farming community has their back.

Two of our members, Steve Breeding of Delaware and Marshal Sewell of Florida, have bravely also shared video testimonies of how mental health has impacted them and their families. We have been able to get these stories in front of a wider audience through social media and an Ad Council partnership.

Farmers and America's rural communities look out for one another, and to me that's what our Alliance and the Farm State of Mind initiative are all about – America's farm organizations coming together and showing up for America's farmers in a potentially life-changing way.

Closing

I appreciate the committee inviting me to present on this panel, and for drawing attention to farmer mental health during the Pennsylvania Farm Show. To build a sustainable future for agriculture for our nation and our world, we must promote the wellbeing of our nation's farmers and ranchers.

I hope that in addition to the policy discussion we will have, Pennsylvania's farmers will receive the message that it is okay not to be ok, and that you are not alone if you are struggling.

I also encourage anyone who feels they need support or knows someone they suspect is struggling from farm stress, to visit FarmStateOfMind.org and make use of our resources. The services available are private and anonymous, and they have helped many farm families already.

Testimony of
Ginger Fenton, PhD, Distinguished Extension Educator – Dairy
and Lead of Extension Farm Stress Team
On behalf of
Penn State Extension
and
Penn State College of Agricultural Sciences
for the
Joint Public Hearing of the House and Senate Agriculture and Rural Affairs Committees
Topic: Cultivating Wellness: Supporting Farmers Through the Mental Health Crisis
Presented on January 14, 2026
Keystone Conference Center, Pennsylvania Farm Show Complex -Erie Room

Chairpersons and distinguished committee members, on behalf of Penn State Extension and the College of Agricultural Sciences at Penn State University, I want to thank you for your continued attention to and concern regarding the mental health of our agricultural community in Pennsylvania. I am an educator with the Penn State Extension dairy team and the co-lead of the Extension Farm Stress Team. My work in Extension began more than 25 years ago in food safety, which fueled my interest in pre-harvest food safety and occupational safety and health for dairy farmers. Our farm, which belonged to my grandparents, was formerly a dairy, where we now raise corn, soybeans, and finish market hogs.

I would like to follow Dr. Becot's overview of the mental health and well-being of Pennsylvania's agricultural community by sharing some of the ways in which Penn State Extension has responded and will continue to support our agricultural community. Penn State Extension is uniquely positioned to reach across all aspects of agricultural production in Pennsylvania; therefore, our response to farm stress and approach to farmer well-being should also be encompassing and broad.

Most of our efforts to support the mental health of agricultural communities are facilitated through the Penn State Farm Stress team. This team evolved from efforts that began in 2017, when some dairy team members and the Center for Dairy Excellence were having more conversations with farmers who needed someone to listen. We observed an increased concern about the loss of milk markets and a sustained decline in dairy markets. As of today, the team is comprised of 15 members, including extension educators from three units and faculty members. These team members bring a range of expertise, including ag safety and health, field and forage crops, dairy, and family well-being, along with a substantial network of connections within the agricultural sector across the state. Several Farm Stress team members are also part of the Northeast Farm and Ranch Stress Assistance Network Extension cohort, *Culitvemos*, which has been an important avenue for learning about the work of other extension colleagues across the region and for

collaborating on common initiatives, including professional development opportunities. Besides some small grants to fund events and initiatives, the nature of the Farm Stress team programming does not readily lend itself to cost recovery. This is a group of committed and caring individuals, and I am proud to say that our efforts have been recognized by several national professional association awards and internally by Penn State Extension.

The resources provided by Penn State Extension aim to support the agricultural community as a whole; therefore, they target farmers and those connected to agriculture, including service providers and agencies locally, statewide, and beyond. In particular, we provide education about mental health challenges in agriculture, how to cope with them, and additional resources available for support. We often do this work in collaboration with outside partners such as the Pennsylvania Department of Agriculture, the Pennsylvania Centers for Ag Excellence, County Conservation Districts, Suicide Prevention Networks, the Department of Veteran's Affairs, and other ag businesses.

In addition to what we see in the media, research has demonstrated that farm stress is on the minds of the agricultural community. I was involved in a 2022 survey of Pennsylvania livestock producers and supporting industry professionals. Of those who responded to the survey, 89% of farmers and 90% of ag industry professionals felt that mental health was moderately or very important. Mental health was indicated as a serious issue in the farming community by 72% of ag industry professionals who responded.

Now, I will provide an overview of our key programs and resources.

Podcasts: Farmers can have demanding schedules and long hours, so one medium we have been using to reach farmers on their terms is a podcast. This format affords anonymity and convenience because it can be downloaded and played in the milking parlor or tractor cab. The *Farm Stress Real Talk* podcast, launched in May 2023, aims to provide practical information in digestible 15- to 20-minute segments. We have released 30 episodes featuring guests from Penn State and outside organizations to increase awareness of tools and share professional advice that farmers utilize to manage in trying times. The podcast team has tackled family dynamics surrounding farm succession, farm safety, the weather and climate-related stress, and ambiguous loss. Over 1000 downloads represent six continents and 42 states, in addition to Pennsylvania, to which approximately one-third of the downloads are attributed. The podcast was recognized as a resource by the Great Plains Center for Agricultural Health and featured in several popular agricultural press publications.

Workshops and Webinars: Another program specifically targeting farmers is Mending the Stress Fence. This 30-minute program is offered as a webinar or in person for farm groups. In the program, we explore the dimensions of wellness, pose open-ended questions to foster discussion, and provide resources for suicide prevention. Over the past year, we have observed an uptick in interest in this program for field and forage crop producers as these producers are feeling added pressure from export market uncertainty, high input

costs, and fluctuations in commodity prices. Educators have been invited to present this stress management talk during crops days, no-till field days, agronomic professional development conferences, conservation district trainings, to new and beginning farmer groups, and other events. Educators have reported that, as they attend these events, farmers approach them one-on-one after the presentation to talk or request additional information.

Following a presentation at a Crop and Planting Clinic in a Northern Tier County, the educator who presented received this email message from the organizer, "Your presentation really seemed to resonate with many of the farmers in the room. Maybe this was due to the recent flooding that occurred back in August, but either way, it was well-received. I think all but maybe one of the folks in attendance were unaware of the AgriStress Helpline and National Suicide Prevention Lifeline. I was surprised by this, and also by the number of people who provided positive feedback about your presentation and the topic in general." Another observation from informal audience polls at these meetings is the low number of attendees who are familiar with the 988 number. The farm stress team responded by creating a slide to be shared during presentations by educators across Extension teams. The slide lists several helplines, including the 988 and AgriStress helplines, along with the number for the Plain Sect helpline. An educator shared that following a presentation, she was approached by a Plain Sect farmer who shared with her about his son's mental health struggles.

Another effort that I am hopeful is familiar to many of you is the Farm Stress Wallet Card. (Copies will be available for distribution.) We have distributed thousands of these cards through various ag events. In distributing these cards, I remind the audience to take one and put it in their wallets or put the numbers in their phones. Calls to these helplines can be made on behalf of others if they are in a situation and aren't sure how to help a distressed person; the trained staff on the line can provide assistance. The notion of being better prepared to help your friends or neighbors seems to resonate with the farm community.

QPR stands for Question, Persuade, Refer. It is a nationally recognized suicide prevention program based on the principles of asking questions as to whether someone is having thoughts of suicide, persuading them to seek help, and referring them to someone appropriate to provide help. Penn State Extension has developed a suicide prevention curriculum for the agricultural sector. The 90-minute program covers key points on how and why stress manifests in farmers, as well as a useful role-playing scenario that allows participants to practice the concepts covered during instruction. The curriculum was submitted and is currently pending approval from the QPR Institute. For those who seek more in-depth training on suicide prevention, several farm stress team members also teach the 8-hour workshop, Mental Health First Aid.

While QPR for the agriculture program and Mental Health First Aid are suitable for anyone who feels a need to build their skill set surrounding suicide prevention, we recognize that

there is a continued need to equip professionals who serve the agricultural community and interact with farmers on a daily basis. Communicating with Farmers Under Stress is a two-hour program, delivered in-person or online, that provides guidance for those who support the agricultural industry to better equip themselves when they encounter farmers facing challenges. We cover the causes of stress for farmers, signs and symptoms of stress, active listening skills, and resources for help. The workshop has been offered at least 23 times by trained Extension educators to over 850 registrants representing 43 states and several countries, including Australia and Canada. Chip Flory, the host of AgriTalk radio, picked up on the course and featured it on his national ag program. Extension has collaborated with Horizon Farm Credit, the Pennsylvania Centers for Ag Excellence, and the Penn State College of Medicine in Hershey to reach our target audience. I would like to mention that the Conservation Districts have been extremely receptive to this training for their staff, as they have expressed concerns about the added stress some farmers experience when implementing conservation programs.

While I am encouraged by the continued interest in farm stress from Extension educators, faculty, and staff, our team has recognized a need for professional development to enhance our skill set and preparedness. Many Extension employees are public-facing and interact with farmers and the agricultural industry, so we wanted to provide professional development to bolster their confidence and also to equip ag industry leaders to recognize and respond to stress more effectively. The resulting webinar series was launched in 2022 and has covered twelve topics such as delivering difficult news with empathy, life after suicide, active listening skills, adolescent mental health, and the tensions of farm succession. These webinars are free and open to the public.

In March 2025, the Pennsylvania AgForum: Taking Action Together for Our Agricultural Community brought together stakeholders from across sectors who have an interest in addressing farm stress. The goals of the forum included building partnerships and implementing short-term collaborative projects identified through the Strategic Doing process. Over 50 stakeholders representing agriculture, healthcare, finance, mental health, childcare, academia, and government officials participated in the event.

In addition to the networking opportunities, some outputs from the forum included an article on health insurance options for farmers, a webinar series on land use issues, a public service announcement on farm stress that was broadcast by some Harrisburg area radio stations, and a grant-funded discussion group for farmers that features invited speakers and led to plans for a regional farm safety day. Additionally, a follow-up survey after the forum indicated that 94% of respondents (n=15) listed specific actions they had taken as a result of attending, including fostering interactions with farm families, taking steps to realign their plan of work with mental health, and examining their organization's policies, procedures, or programs. Obtaining resources from the forum specifically pertaining to farm stress was reported by 79% (n=14). This forum was made possible through grant funding from the Farm and Ranch Stress Assistance Network (also referred to as "FRSAN").

Given the encouraging results from the previous effort, another AgForum is planned for March 10, 2026, in Lancaster. Our team is excited to see what collaborations and projects result from this effort.

Additional information about the programs I referenced, as well as relevant articles on farm stress and mental and financial well-being for farmers, is available on the Penn State Extension website at <https://extension.psu.edu>.

I want to express my gratitude for a hearing focused on farmers' mental health. As we work with farmers daily in Extension, we frequently hear their concerns expressed about low commodity prices, high input costs, the lack of reliable labor, concern about future generations taking over the farm, managing and supporting multiple generations on the farm, and much more followed by the feelings of helplessness that frequently seem to be part of the conversation. With that said, and similarly to our farmers, much of the work that we have been doing has been on a shoestring as safety and health programs, including farm stress, are not typically able to generate revenue to cover costs and can be harder to get farmers to attend when compared to a production-oriented workshop or field day.

The Penn State Extension Farm Stress team plans to continue building partnerships and collaborative networks to increase awareness of resources related to mental health for the agricultural community. Our team will meet next week to plan future programs by examining gaps in coverage and expertise, assessing stakeholder needs, and identifying emerging issues. We appreciate your continued support of these programs and focusing on attention on the health and wellbeing of the agricultural community.

EXECUTIVE SUMMARY

**Testimony for the Record Submitted to:
The Pennsylvania House Agriculture and Rural Affairs Committee and
The Senate Agriculture and Rural Affairs Committee**

**For the Joint Hearing:
“Cultivating Wellness: Supporting Farmers Through the Mental Health Crisis”**
Wednesday, January 14, 2026
9:00 a.m.
Keystone Conference Center, Pennsylvania Farm Show Complex

Florence Becot, PhD, MS
Nationwide Insurance Early Career Professor/Associate Professor
Lead of the Agricultural Safety and Health Program
Department of Agricultural and Biological Engineering
Pennsylvania State University

Executive Summary

The Executive Summary preceding this testimony outlines my key recommendations. The following pages provide the evidence base, detailed analysis supporting those recommendations, and examples of existing programs, resources, and policies that Pennsylvania could adopt.

The Challenge

Pennsylvania's farm families face mental health challenges rooted in structural pressures often beyond their control (i.e., weather, commodity prices, regulations, concentration in businesses along the supply chain, farmland pressure, heavy workloads, high health insurance and caregiving costs, and geographic isolation). Nationally, agriculture has the fourth-highest suicide rate of any occupation, and farmers who die by suicide are less likely than the general population to have had prior treatment or warning signs, making prevention more difficult. In Pennsylvania, 42% of livestock farmers reported at least four symptoms of stress, and 70% of agricultural professionals identified mental health as a serious concern.

Although farmers are often portrayed as unwilling to seek help. Yet research shows they are more willing than able to access support. Family and friend supports are key supports but several barriers limit access to formal care: provider shortages (half of Pennsylvania's Primary Care Health Professional Shortage Areas are rural, or partially, rural), cost, time constraints inherent to farming, and limited agricultural-informed care. Furthermore, some farmers push back on the idea that they need to "work on themselves," noting that many of the stressors they face lie outside their control and require policy changes.

Mental health challenges are not only personal challenges for the farmers and their families experiencing them. They also have major implications for the viability of their farming operations and their ability to continue farming. In other words, mental health challenges in agriculture raise concerns about who will produce the food, fuel, and fiber that we all need to thrive, and whether the difficult conditions that many in the agricultural sector endure should be expected of anyone carrying out this essential work.

Current responses

Current responses most often address the symptoms of mental health challenges by focusing primarily on education, awareness, and crisis intervention even though the most significant drivers of mental health challenges are structural. Effective policy must address both.

Recommendations

I urge the General Assembly to consider the following actions:

Address the manifestation of mental health challenges

- **Address health care provider shortages** to improve access to primary and behavioral health, while reducing appointment waitlists and travel time.
- **Establish a counseling voucher program** to reduce financial barriers to mental health care.
- **Support the hiring of behavioral health specialists and/or social workers** to work in tandem with farm business service providers.
- **Provide baseline funding for the operation and marketing of a crisis hotline** staffed by behavioral health providers trained in the agricultural sector's contexts and preferences.
- **Support the delivery of training to health care providers** to help them learn about the agricultural sector and be more effective in meeting the needs of the farm population.

Address the underlying root causes of mental health challenges

By supporting farm operations:

- **Ensure fair and stable agricultural markets** by equipping the Attorney General to address anticompetitive practices that limit farmer choice and reduce margins.
- **Improve infrastructure and labor availability in meat and dairy processing** to address the bottlenecks that limit farmers' options and weaken their control over prices.
- **Review state disaster relief and insurance programs** to remove barriers in the application process and improve accessibility across farm scales and commodities produced.
- **Develop a Pennsylvania Substitute Farmer Program** to address challenges connected to heavy workloads and challenges taking time off when needed.
- **Support farm transition and business development supports.**
- **Invest in farm health and safety** by providing educational, technical, and financial assistance to overcome barriers implementing health and safety practices on the farm.
- **Strengthen the agricultural training and technical assistance ecosystem**, including in production, conservation practices, business management, human resources, marketing, and risk-management.
- **Expand research priorities to include the health and safety of agricultural populations** within Pennsylvania's Department of Agriculture research grant portfolio.

By supporting farm households:

- **Address health insurance affordability issues.**
- **Ensure that plans offered off the state insurance marketplace** systematically cover the 10 essential health benefits outlined in the ACA, including behavioral health coverage, and avoid underinsurance.
- **Increase access to affordable, high-quality childcare** by supporting parents and childcare providers and reviewing eligibility criteria for financial support to avoid disadvantaging self-employed families.
- **Establish paid family and medical leave**, including options for self-employed farmers to participate.
- **Expand broadband access** to enable telehealth and meet household and business needs.

The Opportunity

Above all, Pennsylvania needs a well-funded, long-term, and stable approach to farm mental health that avoids the cycle of crisis-driven expansion followed by retrenchment. A durable strategy requires predictable funding, reliable infrastructure, and strong cross-agency coordination to ensure support is available to farmers in all market conditions in tandem with addressing underlying root causes. Such consistency is essential to support the well-being and economic viability of the agricultural sector.

Full testimony with supporting evidence and references follows.

**Testimony for the Record Submitted to:
The Pennsylvania House Agriculture and Rural Affairs Committee and
The Senate Agriculture and Rural Affairs Committee**

For the Joint Hearing:

"Cultivating Wellness: Supporting Farmers Through the Mental Health Crisis"

Wednesday, January 14, 2026

9:00 a.m.

Keystone Conference Center, Pennsylvania Farm Show Complex

Florence Becot, PhD, MS

Nationwide Insurance Early Career Professor/Associate Professor

Lead of the Agricultural Safety and Health Program

Department of Agricultural and Biological Engineering

Pennsylvania State University

Chairmen Day Pashinski, Moul, Vogel, Chairwoman Schwank, and distinguished members of the committees, thank you for the opportunity to testify in today's hearing. And thank you for focusing on the mental health challenges impacting agricultural and rural communities. I know that the General Assembly cares deeply about the agricultural community, and I am appreciative that this joint hearing is being held.

My testimony is based on over a decade of peer-reviewed research and extension work to understand and support the health, safety, and economic viability of farm families. I have conducted research funded by the U.S. Department of Agriculture (USDA) and the Centers for Disease Control and Prevention (CDC) to understand the mental health challenges that farm families face, their help-seeking strategies to address these challenges, and the resources available to support them. As a faculty member at the state's land-grant university and previously a scientist at a rural hospital research institute, I am humbled and honored that thousands of farmers and their families across the country have entrusted my team and me with some of their most personal struggles. These struggles are not only personal, but they also have major implications for the viability of their farming operations and their ability to continue farming. In other words, mental health challenges in agriculture raise concerns about who will produce the food, fuel, and fiber that we all need to thrive, and whether the difficult conditions that many in the agricultural sector endure should be expected of anyone carrying out this essential work.

To frame my comments, I am starting with a farmer's personal story that demonstrates the emotional and financial toll of farming. This farmer is Duane Martin, whom I met early in 2024 when visiting collaborators. I do not remember what the impetus was, but at some point, during one of the meetings, Duane shared his story of having lost the dairy farm. There were barely any dry eyes in the room once Duane finished relaying his story. Chatting with Duane afterwards, he talked about his incredible sense of guilt for being the last generation on the farm despite having worked so hard. He said he had felt powerless in the face of forces outside of his control. Months later, Duane emailed me a seven-page account titled *"Sales Day"* out of the blue and encouraged me to use it in my work. I am grateful for his trust, and I am honoring it by sharing part of his story with you today:

"Every time I travel Route 8 towards Edmonston, I wonder how my cows felt that August 29th in the trailers taking them to Hosking's Sale barn. After the last trailer door shut and the truck pulled out, the end of an era. After 12 generations, no more Martins milked cows. My family went from the entire family milking 1,000 milk cows in 1931 to no one in 2021." [...] "I watched the trailers pullout. As they went, Pain [one of Duane's cows] looked out the trailer at me. It was not the normal look of her when she was caught pulling on a hose and standing there like to say, "Not me but the cow next to me did it". Instead, I will never forget the look of betrayal in her eyes. I went home that night and did not eat. I sat alone in my office, in the dark with my beagles, Otto and Buddy at my side."

Unfortunately, Duane's story is one that exemplifies the stories I have heard over and over again in my work with agricultural communities. While mental health challenges in the agricultural sector and in rural areas are not new, the farm income crisis of the late 2010s, followed by the fallout from the COVID-19 pandemic, unprecedented consolidation in a number of agricultural sectors, and the recent and sudden changes in our national policy landscape, have increased awareness of the challenges that farmers and their families face. Many people in organizations have stepped up to take on the challenge of supporting the mental health of the agricultural sector. As important as it is, we are still falling short and we need to expand our efforts.

1. Mental health, illnesses, and suicides in agriculture

Before turning to statistics, I want to clarify the meaning of the terms: *mental health*, *mental illness*, and *mental health challenges*. Everyone has mental health, and it naturally fluctuates with daily circumstances. No matter who we are, our mental health varies with good days and bad days as we go through the ebbs and flows of life. In the context of farmers' mental health, the focus is not on eliminating difficult days, but on addressing the underlying individual and structural stressors that lead to debilitating stress and extreme psychological pressures. *Mental illness* refers to a diagnosable condition in which persistent thoughts, feelings, or behaviors interfere with health, well-being, and daily functioning. It is generally recommended to seek support from a health care provider when these symptoms last longer than two weeks. Despite the persisting stigmas around mental health and illnesses, mental illnesses are not uncommon. About one in five U.S. adults lives with one [1]. When a diagnosed mental illness is well managed, people can still feel mentally well and have good mental health. A diagnosis is also not necessarily permanent; postpartum depression is one example. Last, the term *mental health challenges* is commonly used as an umbrella term to refer to stress, anxiety, sadness, depression, and similar illnesses, substance misuse, and suicide.

Studies across the U.S. have documented high levels of mental health challenges among farmers. For example, an estimated 8.7% to 58% of surveyed individuals working in agriculture reported signs of depression [2-4]. The variation stems from differences in study design and economic conditions at the time of data collection, underscoring the need for more research [5, 6]. Evidence also points to elevated rates of risky alcohol use among farmers [7], though rates of conditions like ADHD, PTSD, and schizophrenia do not appear higher than in the general population. In Pennsylvania, a 2022 survey, supported in part by the Pennsylvania Department of Agriculture, found that 42% of farmers and 53% of agricultural industry professionals reported four or more symptoms of stress [8]. In that same study, 70% of industry professionals identified mental health in agriculture as a serious concern.

Agriculture experiences the fourth-highest rates of suicide compared to all occupations. At the national level, 31.6 farm men per 100,000 died by suicide in 2016 compared to 27.4 men per 100,000 in all industries [9]. In Pennsylvania, 11 farmer suicides were documented between 2020 and 2024 [10-12]. This number is considered an undercount since compiling data on suicide is difficult. Society and some religions continue to stigmatize suicide. Obituaries are an important source of information about farm-related deaths, but families often choose to omit the cause of death. Coroners' reports are another important source of data, but not all suicides are known as some farmers mask their suicide as a farm accident to avoid bringing shame to the family and as a strategy for insurance and debt purposes.

The progression to suicide in agriculture differs from the general population, making early sign detection and prevention more difficult [5]. Farmers who died by suicide were less likely to have the following: alcohol or substance misuse, a diagnosed mental health illness, treatment for mental health challenges, or a history of suicidal thoughts or suicide attempts [5, 13]. This atypical progression to suicide in agriculture is due to a number of factors. Farmers have more functional attitudes towards death, which is particularly the case if they raise livestock, as they are frequently confronted with the illnesses and death of animals. Farmers are also more likely to have access to firearms and toxic chemicals. Lastly, the agricultural sector routinely faces high-intensity occupational stressors such as volatility in commodity prices, animal diseases, and weather. Taken together, these factors indicate that the decision to die by suicide in agriculture is likely more decisive, quicker, and harder to foresee.

2. What explains mental health challenges in agriculture?

Similar to the general population, farmers and their families experience several layers of stressors. Some are connected to their private lives, while others are connected to their professional lives. However, for farm families, their private and professional lives are deeply interconnected and inter-reliant with the constant exchange of resources (i.e., time, money, and energy) [14-16]. In other words, challenges impacting the farm operation impact the farm household and vice versa [17]. In addition, that also means that there is rarely an opportunity to step away from work problems. Farm (or occupational) stressors are complex and multifactorial: weather, commodity prices, regulations, concentration in businesses along the supply chain, farmland pressure, heavy workloads, and strained farm finances and relationships [8, 18-23]. Two additional risk factors are specific to agriculture: the constant uncertainty connected to productivity yields, commodity prices, or weather, and the vulnerability associated with massive losses of crops or livestock as a result of rain and windstorms, hail, late frost, pests, or disease. Farming primarily occurs in rural areas. These areas experience their own set of stressors due to reduced economic, educational, cultural, and social opportunities, limited broadband access, geographic isolation, and barriers to health care [24-29]. These occupational stressors, layered with geographic stressors, compound mental health challenges. Lastly, while stress in agriculture is not new, several factors are increasing pressure on the agricultural sector. These include labor shortages and lack of legal options to hire foreign workers, increased extreme weather events, and fewer farmers and farm workers to feed a growing and increasingly urban population [30-32].

When asked about stressors that impact them the most, farmers most often list those that impact the farm operation [8, 18, 33] which is not surprising as all of these are directly connected to the fear of losing the farm and their livelihood [14, 34, 35]. Not to be underappreciated, however, are the stressors connected to their personal lives. Relationship issues are frequent in the context of working with family members and can create particularly difficult farm transitions [18, 35, 36]. Health issues are another source of stress. Physical and mental health issues are interconnected, and they have rippling effects on financial well-being. Farming is a physically demanding and hazardous occupation, with between 19% and 33% of farm households reporting disabilities or health conditions that make it difficult to work [17, 37]. Accessing and paying for health care further affects farmers' ability to maintain their health; farmers often face high insurance premiums, high out-of-pocket costs, and limited availability of providers in rural areas [29, 38, 39]. Even getting time to visit a doctor can be considerably challenging given labor shortages and work demands [40]. Many farm households rely on off-farm employment to secure health insurance, but doing so reduces the time and energy available for farm operations, adding on as a source of stress [17]. Economic vulnerability remains a concern even with insurance. A national study found that one in five farm households carried more than \$1,000 in medical debt, and over half were not confident they could cover the costs of a major illness or injury without going into debt, despite more than 90% being insured [41]. The expiration on January 1, 2026 of the expanded health insurance marketplace subsidies and Enhanced Premium Tax Credits has heightened concerns that farm families relying on the insurance marketplace will be priced out of adequate coverage [42].

3. Variations in the experience of mental health challenges

Farmers' challenges vary by individual, household, and farm characteristics, including age, gender, race and ethnicity, income, marital status, immigration status, religion, farm scale and commodities produced, farming experience, and role on the farm. Often embedded in these factors are cultural norms about what can(not) or should(not) be done. Such variations need to be considered when seeking to understand challenges faced and how to best respond to them. Age and gender provide two illustrative examples.

Age. Among farmers who died by suicide, 45% were over the age of 65, despite this group comprising about one-third of the farming population, and they were more likely to have physical health challenges. Meanwhile, younger decedents were more likely to have relationship challenges [13]. From a help-seeking perspective, younger farmers are more likely to be open about their challenges and seek help than older farmers [18, 43].

Age also provides a marker related to where people are in their personal and professional lives. Early-career households face higher pressures as they have fewer resources (i.e., time, money, energy, experience) to draw on as they start a family and start, or take over a farm business [8, 44-46]. Meanwhile, older farm households tend to have more experience navigating challenging times, but as their financial assets are often tied to the farm business and as their social security benefits can be low, adequate income in later years can be a source of tension and explains why some continue farming in their older years [35, 47, 48]. Farm households with younger children and adults needing care can also face heightened stress due to challenges in securing help with caregiving [49-52]. For example, a national study showed that three-quarters of farm families experienced childcare challenges within the last five years, most often due to cost and availability, followed by distance to childcare and childcare quality [53]. These childcare challenges were in turn a source of stress while also negatively impacting farm households' finances and the development of their farm operation [54, 55].

Gender. Farm men are more likely to die by suicide, while farm women have reported higher stress levels [8, 13, 56]. Pre- and post-partum depression is common yet under-resourced or seldom discussed. In the same national study noted earlier, almost half of all farm families (47%) reported that someone in their household experienced pre and/or postpartum depression [53]. Juggling on-farm, off-farm, and caregiving responsibilities in the dangerous farm environment adds to farm women's stress. Meanwhile, many feel their challenges are invisible, which is confirmed in farm stress programming that disproportionately targets farm men [51, 55, 57, 58].

4. Farmers' response to mental health challenges

Research shows that farmers use a range of coping strategies when they experience mental health challenges [59-62]. Negative coping strategies are most common, including ignoring problems, substance misuse, isolation, stoicism, distraction (such as overworking or excessive television watching), and leaving agriculture altogether. Positive coping strategies are used less frequently. These include talking with family and friends (and less often with faith leaders or health care providers), practicing self-care, focusing on the positive, addressing financial or legal strains, and making operational changes such as reducing input use or adopting conservation practices.

Farmers are often encouraged to seek help from a health care provider, but several barriers limit their ability to do so. Farmers generally prefer primary care providers they already trust, particularly those who understand agriculture and can offer treatment options that fit their realities (e.g., the impracticality of taking a week off for a dairy farmer) [18, 34, 60]. Financial barriers also play a significant role; even with insurance, behavioral health care may not be covered. In a national survey, 14% of farm households did not have behavioral care coverage, while 33% did not know if their plan covered it (unpublished data). Access challenges are compounded by rural provider shortages, long waitlists, travel distances, time away from work, and concerns about confidentiality. In Pennsylvania, half of the federally designated Primary Care Health Professional Shortage Areas are in rural or partially rural areas. Meanwhile, 25% of rural Pennsylvanians live in a shortage area compared to less than 2% of urban residents [63].

Farmers are sometimes portrayed as unwilling to seek help. This can be seen in media articles about farmers' mental health or in mental health resources framed around convincing farmers to seek help [57, 64]. Research and on-the-ground experience tell a different story. Farmers and professionals who regularly work with farmers report that farmers are more willing than they are able to seek support, most willing to connect with financial assistance, and least able to access mental health care [34, 40]. More than once, I have been in rooms when farmers pushed back on the idea that they need to "work on themselves" or see a doctor, noting that much of what drives their stress lies outside their control and requires policy changes. We also need not lose sight that farmers are resilient and accustomed to dealing with uncertainty. They are no strangers to problem-solving, as they routinely address challenges related to machinery, livestock, crops, soil, spraying, weather, paperwork, and managing employees.

5. Organizational responses to farmer mental health challenges

As recognition of mental health challenges in agriculture has grown, farm organizations, farm service providers, and government agencies have expanded efforts to support farmers. These responses generally fall into three categories [57, 60].

Education and awareness efforts are focused on explaining mental health and mental illness, strategies to care for one's own mental health, supporting others, and finding additional resources. Education is also used as a conduit to reduce stigma related to mental health and help-seeking. In Pennsylvania, several organizations provide this type of programming, including, but not limited to, Penn State Extension, the Pennsylvania Farm Bureau, and the Pennsylvania Center for Dairy Excellence [65].

Improving access to care efforts have focused on making behavioral health care more accessible, including crisis hotlines staffed by providers familiar with agriculture, counseling voucher programs, and training for health care professionals to better understand agricultural contexts. Most often, this is being done through state departments of agriculture and land-grant universities. Pennsylvania currently partners with the national non-profit AgriSafe to offer a hotline, while the Northeast Farm and Ranch Stress Assistance Network (Cultivemos) contracts with another national non-profit, Farm Aid [66, 67]. Several Midwestern states, including Illinois, South Dakota and Wisconsin, offer voucher programs [68-70].

While not originally designed as mental health interventions, federal and state government programs that stabilize income or reduce economic strain for the farm business or the household play a role in **addressing structural stressors**. For the farm business, these include commodity and income support, crop and livestock insurance, and disaster relief programs. Agricultural Mediation Programs supported by the USDA are also relevant; in Pennsylvania, this program is offered through the Center for Agricultural and Shale Law at Penn State Dickinson Law [71]. For farm households, relevant federal programs and supplementary state programs include health insurance supports (e.g., Medicaid, the Children's Health Insurance Program (CHIP), premium tax credits), food programs (e.g., the Supplemental Nutrition Assistance Program (SNAP), the Women, Infants, and Children (WIC) program, and free or reduced-price school meals), income-support programs (e.g., unemployment insurance, TANF), family supports (e.g., unemployment insurance, Temporary Assistance for Needy Families (TANF)), and disability programs (e.g., Social Security Disability Insurance (SSDI), and Supplemental Security Income (SSI)). Few programs are specifically designed to support farm families' mental health and their financial well-being in tandem, but there are three notable exceptions in the Northeast. In New York, NY FarmNet at Cornell University provides financial and business management consultations alongside personal, family, and mental health support from staff who are farmers or have grown up on farms [72]. The New York Center for Agricultural Medicine and Health (NYCAMH) has a social worker on staff who works with safety specialists and other agricultural partners [46]. Both of these programs are financially supported by the state. In Vermont, the Agencies of Agriculture and Human Services jointly fund the Farm First Program to offer services to farmers ranging from labor and management issues to financial concerns, family stress, and alcohol or drug/substance problems based on the employee assistance program (EAP) model [73].

Rapid program deployment during crises addresses acute needs, but evidence on reach, effectiveness, and acceptability is limited [23]. Few initiatives in the first two categories have been formally evaluated with studies showing mixed, or modest, effects [74-78]. These interventions have been criticized for focusing on the acute symptoms of mental health rather than their causes [60, 79-81]. Lastly, these programs tend to expand in crises then contract once the crisis is perceived to be over. Yet farm mental health challenges are chronic, not episodic [18]. This stop-and-go pattern underscores the need for consistent baseline support and highlights risks to sustainable funding, infrastructure, and institutional memory [57, 81].

There is even less research on programs and resources that tackle structural stressors [23, 82] but the few studies suggest positive impacts [17, 83-85]. Importantly, farmers and stakeholders prioritize solutions that address structural stressors when asked how to best support mental health in agriculture [34, 60, 64, 86].

6. Strategies to address mental health challenges in agriculture

Addressing mental health challenges within Pennsylvania's agricultural sector requires a response that is comprehensive and sustained. As discussed, while individual attitudes influence how farmers cope with stress, the most significant drivers of distress are structural. Any effective response must therefore address both the manifestations of mental health challenges and their underlying root causes. The following proposed solutions below are based on research and conversations with farmers and stakeholders about strategies to support well-being and economic viability in the farm sector.

a) Address the manifestation of mental health challenges

Education and awareness efforts that reduce stigma and normalize help-seeking remain important. These efforts must be culturally informed and delivered by trusted agricultural organizations so that all members of agricultural communities feel safe acknowledging challenges and pursuing support. They should also go beyond describing symptoms and coping strategies to communicate the full range of resources available, especially those offering practical solutions to challenges on the farm and in the household. The state has an important role in ensuring adequate funding for these efforts along with helping with the coordination of efforts across the state to avoid duplication and meet the diverse needs of Pennsylvania's farm population (i.e., on the basis of age, gender, race, ethnicity, religion, commodities produced, and role in agriculture).

- **Address health care provider shortages** to improve access to primary and behavioral health, while reducing travel and waiting time. These efforts must be grounded in effective models to attract and retain healthcare providers in rural areas.
- **Establish a counseling voucher program** to reduce financial barriers to mental health care. Illinois, South Dakota, and Wisconsin offer examples of models run by their departments of agriculture or land-grant universities [68-70].
- **Support the hiring of behavioral health specialists and/or social workers to work in tandem with farm business service providers.** NY FarmNet and the New York Center for Agricultural Medicine and Health offer models that Pennsylvania could implement [46, 72].
- **Provide baseline funding for the operation and marketing of a crisis hotline** staffed by behavioral health providers trained in agricultural contexts and preferences. The Pennsylvania Department of Agriculture partners with the national non-profit AgriStress [66]. Other states run their own hotlines in partnership with land-grant universities or state-based non-profits who are in tune with the local realities.
- **Support the delivery of training to health care providers** to help them learn about the agricultural sector and be more effective in meeting the needs of the farm population. This applies to mental and physical health needs.

b) Address the underlying root causes of mental health challenges

Reducing the structural sources of stress that affect farm operations and farm households is essential.

To support farm operations:

- **Ensure fair and stable agricultural markets.** Inadequate and fluctuating prices are among the top stressors for farmers. Pennsylvania can ensure that the Attorney General has adequate resources to pursue antitrust and monopolistic practices among input suppliers, processors, and retailers, as consolidation in these sectors has reduced farmers' choice and profit margins.
- **Improve processing capacity and labor availability.** Bottlenecks in meat and dairy processing limit farmers' options and weaken their control over prices. The training of butchers through Pennsylvania's technical schools, supported by state funding, is an important step. This is particularly important as immigration policies and limits on H-1A visas are reducing the workforce in agriculture and food processing.

- **Review disaster relief and insurance programs.** Disaster relief and commodity insurance help buffer climate and market volatility, but application processes can be complex and coverage uneven based on scale and commodities produced. The state should review programs offered by the Department of Agriculture to identify and remove barriers.
- **Support solutions to reduce excessive workloads.** Heavy workloads and the inability to take time off create major stress and impede farmers' ability to care for their health and well-being. The state should explore the development of a Pennsylvania Substitute Farmer Program, similar to the substitute teacher model, to provide trained labor when farmers need time away. Such a program could also function as a workforce development platform for the agricultural sector. France uses a farmer-to-farmer model to offer this type of program, while Finland offers it through its farmers' social insurance program [87-89].
- **Support farm transition and business development.** The transition period, both for older farmers and for new or beginning farmers, is especially stressful. Continued work by the state on access to land, capital, risk-management tools, and generational transfer is critical. Existing efforts within PDA's Agricultural Business Development Center, along with organizations such Penn State Extension, Pennsylvania's Center of Excellence, and PA Farm Link, play an important role.
- **Support the health and safety of the agricultural sector.** The physical and mental health of those who work in agriculture, along with their safety while working, are deeply interconnected and directly influence their productivity and the state's economy. Just as the state invests in animal, soil, and water health, it must also invest in the people who care for them by providing resources beyond those required by pesticide safety mandates. These resources should include education, technical assistance, and financial resources that address the documented barriers to adopting health and safety practices in the inherently hazardous farm work environment.
- **Strengthen the agricultural training and technical assistance ecosystem.** Farmers need access to free and low-cost resources, training, and technical assistance in production practices, animal and soil health, conservation practices, business management, marketing, human resources, and risk management. Sustained support for the land-grant system, technical colleges, and Pennsylvania's Centers of Excellence, among others, is therefore key.
- **Expand the state's agricultural research priorities to include the health of the agricultural population.** While the Pennsylvania Department of Agriculture currently lists animal health as a priority area in its Research Grant Program, the health and safety of the people who care for them is not listed. Given limited state and federal funding for research on farmers' health and safety, adding human health to the state's priority areas would be a simple but meaningful way to support ongoing assessments and evidence-based solutions.

To support farm households:

- **Address health insurance affordability issues.** Many farm households struggle with health insurance costs. This is especially important given that the end of health insurance marketplace subsidies and Enhanced Premium Tax Credits is leading to increased plan prices on the state insurance marketplace, Pennie.
- **Ensure that plans offered off the state insurance marketplace** systematically cover the 10 essential health services from the Affordable Care Act (ACA), including behavioral health coverage [90] and avoid underinsurance through high out-of-pocket expenses and deductibles.
- **Increase access to affordable, high-quality childcare.** Farm families face persistent challenges finding and affording childcare. States such as Vermont and New Mexico offer examples of comprehensive policy solutions that simultaneously support parents and childcare providers [91, 92]. The Rural Childcare Policy framework from the Bipartisan Policy Center provides examples, including collaborations of partners at different levels (e.g., states, communities) [93]. The state should also review childcare financial assistance eligibility criteria to ensure that self-employed families are not disadvantaged by how business assets are counted.
- **Establish paid family and medical leave options.** Pennsylvania currently does not offer paid family and medical leave. The Family Care Act, debated last year, would have provided such support. If the bill is reconsidered, it will be important to ensure that there is an option for self-employed

individuals to participate, as is the case in several other states (e.g., Connecticut, New York State, and Washington State).

- **Expand broadband access.** Reliable, high-speed internet is now essential for meeting household and farm business needs. In the context of mental health, broadband enables access to telehealth services that farmers value for confidentiality and time savings. This is why continued efforts to expand broadband availability in rural areas are critical.

c) Final considerations

I recognize that this list of strategies is extensive. Mental health challenges in agriculture are complex, and as such, a comprehensive response is both justified and necessary. As I was recently reminded, an elephant is eaten one bite at a time. My goal was therefore to provide a roadmap to help the General Assembly phase the work in a realistic, coordinated manner across legislative committees, state agencies, and external partners in the short, medium, and long term.

To support this process, the state could convene a collaborative action-planning workshop to assess the feasibility and acceptability of these strategies among stakeholders, identify missing or underdeveloped approaches, and prioritize a sequence of actions with the greatest impact for Pennsylvania's agricultural communities. The Future Search approach has proven to be productive in tackling complex challenges because it is specifically designed to help diverse stakeholders develop shared strategies and produce a focused plan that can guide legislative and administrative decisions [94, 95].

Above all, Pennsylvania needs a well-funded, long-term, and stable approach to farmers' mental health challenges. One that avoids the cycle of rapid expansion in crises followed by retrenchment once those crises are perceived to be over. The reality is that there will always be crises. Some affect a single farm family at a time, while others impact an entire area or commodity group simultaneously. A sustained strategy requires predictable funding, durable infrastructure, and strong coordination across agencies and partner organizations so that support remains available to farmers regardless of market conditions. This consistency is critical for meeting immediate needs while addressing the deeper structural pressures that shape farmers' well-being.

7. Concluding comments

As discussed throughout this testimony, while individual attitudes influence how farmers seek help (or do not seek), the most significant drivers of distress are structural: volatile markets, labor and processing constraints, the weather, insufficient household income, lack of affordable health insurance and childcare, broadband gaps, and the pressures of succession and transition. Effective policy must address both the manifestations of mental health challenges and their root causes, ensuring farmers can access appropriate, affordable mental and behavioral health care when needed while also reducing stressors.

These issues are not abstract. They shape the daily lives, identities, and futures of farm families. Duane's experience is a powerful reminder. When he sold the cows, ending 12 generations of dairy farming, he described the moment as "the end of an era." After Duane sold the dairy cows, he went through a very difficult period, like many farmers in his situation. Duane was able to find support, but not all farmers do. Duane's story illustrates that support systems are crucial when farmers face difficult times, and that structural solutions are necessary for the agricultural sector to be viable and to continue feeding, fueling, and clothing the state and the nation.

Thank you again for holding today's hearing and inviting me to participate. I welcome your questions.

References

1. Substance Abuse and Mental Health Services Administration, *Key substance use and mental health indicators in the United States: Results from the 2024 National Survey on Drug Use and Health*. 2025: Rockville, MD.
2. Bjornestad, A., L. Brown, and L. Weidauer, *The relationship between social support and depressive symptoms in Midwestern farmers*. Journal of Rural Mental Health, 2019. **43**(4): p. 109-117.DOI: <https://doi.org/10.1037/rmh0000121>.
3. Scarth, R., L. Stallones, C. Zwerling, and L. Burmeister, *The prevalence of depressive symptoms and risk factors among Iowa and Colorado farmers*. American Journal of Industrial Medicine, 2000. **37**(4): p. 382-389.DOI: [https://doi.org/10.1002/\[SICI\]1097-0274](https://doi.org/10.1002/[SICI]1097-0274).
4. Rudolphi, J., R. Berg, and A. Parsaik, *Depression, anxiety and stress among young farmers and ranchers: a pilot study*. Community mental health journal, 2020. **56**(1): p. 126-134.
5. Chiswell, H., *Psychological morbidity in the farming community: a literature review*. Journal of agromedicine, 2022: p. 1-26.DOI: <https://doi.org/10.1080/1059924X.2022.2089419>.
6. Ward, J. and J.R. Blosnich, *Poor Mental Health Days and Depression by Farming Occupation and Sociodemographic Factors: BRFSS 2019 Data from 13 States*. Journal of agromedicine, 2025: p. 1-12.DOI: <https://doi.org/10.1080/1059924X.2025.2582655>.
7. Watanabe-Galloway, S., C. Chasek, A. Yoder, and J. Bell, *Substance use disorders in the farming population: Scoping review*. The Journal of Rural Health, 2022. **38**(1): p. 129-150.DOI: <https://doi.org/10.1111/jrh.12575>.
8. Anderson, M., C. Fairbairn, G. Fenton, J. Reed Harry, N. Hockenberry, M. Kirk, G. Pighetti, S. Pish, and J. Sebright, *Report on the Findings of the Pennsylvania Animal Agriculture Mental Wellness Survey*. 2022.
9. Peterson, C., Sussell, A., Li, J., Schumacher, P., Yeoman, K., & Stone, D., *Suicide rates by industry and occupation—National Violent Death Reporting System, 32 states, 2016*. Morbidity and Mortality Weekly Report, 2020. **69**(3): p. 57.DOI: <https://doi.org/10.15585/mmwr.mm6903a1>.
10. Michael, J., F. Becot, and L. Fetzer. *2023 Pennsylvania Farm Fatal Injury Summary*. 2024; Available from: <https://extension.psu.edu/2023-pennsylvania-farm-fatal-injury-summary>.
11. Michael, J. and K. Chege. *2020 Pennsylvania Farm Fatal Injury Summary*. 2021; Available from: <https://extension.psu.edu/2020-pennsylvania-farm-fatal-injury-summary>.
12. Michael, J. and L. Fetzer. *2022 Pennsylvania Farm Fatal Injury Summary*. 2023; Available from: <https://extension.psu.edu/2022-pennsylvania-farm-fatal-injury-summary>.
13. Miller, C., & Rudolphi, J., *Characteristics of suicide among farmers and ranchers: Using the CDC NVDRS 2003–2018*. American Journal of Industrial Medicine, 2022.DOI: <https://doi.org/10.1002/ajim.23399>.
14. Barlett, P., *American dreams, rural realities: Family farms in crisis*. 1993, Chapel Hill, NC: University of North Carolina Press.
15. Bennett, J. and S. Kohl, *Of time and the enterprise: North American family farm management in a context of resource marginality*. 1982, Minneapolis, MN: University of Minnesota Press.
16. Smithers, J. and P. Johnson, *The dynamics of family farming in North Huron County, Ontario. Part I. Development trajectories*. The Canadian Geographer/Le Géographe canadien, 2004. **48**(2): p. 191-208.DOI: <https://doi.org/10.1111/j.0008-3658.2004.00055.x>.
17. Becot, F. and S. Inwood, *Examining access to health insurance and health care along the life course to shed light on interactions between farm households' social needs, social policy, and the farm business*. Sociologia Ruralis, 2022. **62**(3): p. 485-508.DOI: <https://doi.org/10.1111/soru.12394>.
18. Daghang Yazd, S., S.A. Wheeler, and A. Zuo, *Key risk factors affecting farmers' mental health: A systematic review*. International Journal of Environmental Research and Public Health, 2019. **16**(23): p. 4849.DOI: <https://doi.org/10.3390/ijerph16234849>.
19. Schulman, M. and P. Armstrong, *Perceived stress, social support and survival: North Carolina farm operators and the farm crisis*. Journal of Sociology & Social Welfare, 1990. **17**(3): p. 3-22.DOI: <https://scholarworks.wmich.edu/jssw/vol17/iss3/2>.

20. Jadhav, R., C. Achutan, G. Haynatzki, S. Rajaram, and R. Rautiainen, *Review and Meta-analysis of Emerging Risk Factors for Agricultural Injury*. Journal of Agromedicine, 2016. **21**(3): p. 284-297.DOI: <https://doi.org/10.1080/1059924X.2016.1179611>.
21. Ringgenberg, W., Peek-Asa, C., Donham, K., & Ramirez, M., *Trends and characteristics of occupational suicide and homicide in farmers and agriculture workers, 1992–2010*. The Journal of Rural Health, 2018. **34**(3): p. 246-253.DOI: <https://doi.org/10.1111/jrh.12245>.
22. Braun, B., *Policy Brief: Farm Family Stressors: Private Problems, Public Issue*. National Council on Family Relations, 2019. **4**(2): p. 1-6.
23. Nye, C., B. Wheeler, D. Rose, B. Florence, M. Holton, D. Knezevic, J. Knook, S. Kyle, M. Parmer, M. Riley, A. Steiner, and H. Whitley, *Mental health, well-being and resilience in agricultural areas: Gaps and priorities. A research agenda for the Global North*. Journal of Rural Studies, 2025. **114**: p. 103506.DOI: <https://doi.org/10.1016/j.jrurstud.2024.103506>.
24. Ketsche, P., *Employment-based health insurance: Analysis of rural-urban differences in one state*. Medical care research and review, 2005. **62**(4): p. 458-478.DOI: <https://doi.org/10.1177/1077558705277386>.
25. Mushinski, D., A. Bernasek, and S. Weiler, *Job lock in rural versus urban labor markets*. Growth and Change, 2015. **46**(2): p. 253-273.DOI: <https://doi.org/10.1111/grow.12069>.
26. Slack, T., *Work in rural America in the era of globalization*, in *Rural America in a Globalizing World*, C. Bailey, L. Jensen, and E. Ransom, Editors. 2014, West Virginia University Press: Morgantown, WV.
27. Thiede, B., D. Lichter, and T. Slack, *Working, but poor: The good life in rural America?* Journal of Rural Studies, 2018. **59**: p. 183-193.DOI: <https://doi.org/10.1016/j.jrurstud.2016.02.007>.
28. Benda, N., T. Veinot, C. Sieck, and J. Ancker, *Broadband Internet Access Is a Social Determinant of Health!* American Journal of Public Health, 2020. **110**: p. 1123-1125.DOI: <https://doi.org/10.2105/AJPH.2020.305784>.
29. Jones, C.A., T. Parker, M. Ahearn, A. Mishra, and J. Variyam, *Health status and health care access of farm and rural populations*. 2009, Washington, DC: U.S. Department of Agriculture.
30. Irmak, S., *Agriculture and agricultural water management: Historical perspectives and integration of research and extension/outreach for large-scale technology adoption in production fields*. Journal of the ASABE, 2023. **66**(1): p. 167-192.DOI: <https://doi.org/10.13031/ja.15272>.
31. Howard, M., S. Ahmed, P. Lachapelle, and M. Schure, *Farmer and rancher perceptions of climate change and their relationships with mental health*. Journal of Rural Mental Health, 2020. **44**(2): p. 87.DOI: <https://doi.org/10.1037/rmh0000131>.
32. Hendrickson, M., *Covid lays bare the brittleness of a concentrated and consolidated food system*. Agriculture and Human Values, 2020. **37**(3): p. 579-580.DOI: <https://doi.org/10.1007/s10460-020-10092-y>.
33. Lunner Kolstrup, C., M. Kallioniemi, P. Lundqvist, H.-R. Kymäläinen, L. Stallones, and S. Brumby, *International perspectives on psychosocial working conditions, mental health, and stress of dairy farm operators*. Journal of Agromedicine, 2013. **18**(3): p. 244-255.DOI: <https://doi.org/10.1080/1059924X.2013.796903>.
34. Ruszkowski, S., F. Becot, C. Henning-Smith, and A. Bjornestad, *Financial and mental health challenges in agriculture: Key informants' perspectives on farmers' ability and willingness to seek help*. Journal of Rural Studies, 2026. **122**: p. 103977.DOI: <https://doi.org/10.1016/j.jrurstud.2025.103977>.
35. Lobley, M., J. Baker, and I. Whitehead, eds. *Keeping it in the family: international perspectives on succession and retirement on family farms*. Perspective on Rural Policy and Planning. 2012, Routledge: London, United Kingdom.
36. Contzen, S., K. Zbinden, C. Neuenschwander, and M. Métrailler, *Retirement as a discrete life-stage of farming men and women's biography?* Sociologia Ruralis, 2016. **57**(S1): p. 730-751.DOI: <https://doi.org/10.1111/soru.12154>.
37. Miller, C. and R. Aherin, *The prevalence of disabilities in the US farm population*. Journal of Agricultural Safety and Health, 2018. **24**(4): p. 243-260.DOI: <https://doi.org/10.13031/jash.12934>.
38. Inwood, S., A. Knudson, F. Becot, B. Brown, S. Goetz, J. Kolodinsky, S. Loveridge, K. Morris, J. Parker, R. Parsons, R. Welborn, and D. Albrecht, *Health Insurance and National Farm Policy*. Choices, 2018. **33**(1): p. 1-7.DOI: www.jstor.org/stable/264874251.

39. Ahearn, M., J. Williamson, and N. Black, *Implications of health care reform for farm businesses and families*. Applied Economic Perspectives and Policy, 2015. **37**(2): p. 260-286.DOI: <https://doi.org/10.1093/aepp/ppu030>.

40. Drouillard, D., P. Tinc, and J. Sorensen, "I Would Go if My Arm Were Hanging off": A Qualitative Study of Healthcare-Seeking Behaviors of Small Farm Owners in Central New York State. Journal of agricultural safety and health, 2017. **23**(1): p. 67-81.DOI: <https://doi.org/10.13031/jash.11848>.

41. Becot, F. and S. Inwood, *Medical economic vulnerability: a next step in expanding the farm resilience scholarship*. Agriculture and Human Values, 2022. **39**: p. 1097-1116.DOI: <https://doi.org/10.1007/s10460-022-10307-4>.

42. National Public Radio. *Farmers are about to pay a lot more for health insurance*. 2025; Available from: <https://www.npr.org/sections/shots-health-news/2025/12/31/nx-s1-5655252/u-s-farmer-insurance-premiums-tariffs-seeds-fertilizer-inflation-iowa>.

43. Roy, P., G. Tremblay, J. Oliffe, J. Jbilou, and S. Robertson, *Male farmers with mental health disorders: A scoping review*. Australian Journal of Rural Health, 2013. **21**(1): p. 3-7.DOI: <https://doi.org/10.1111/ajr.12008>.

44. Gale, H.F., *Longitudinal analysis of farm size over the farmer's life cycle*. Review of Agricultural Economics, 1994. **16**(1): p. 113-123.DOI: <https://doi.org/10.2307/1349526>.

45. Katchova, A. and R. Dinterman, *Evaluating financial stress and performance of beginning farmers during the agricultural downturn*. Agricultural Finance Review, 2018. **78**(4): p. 457-469.DOI: <https://doi.org/10.1108/AFR-08-2017-0074>.

46. New York Center for Agricultural Medicine and Health. *Counseling Services - Farm Partners Program*. 2026; Available from: <https://www.nycamh.org/services/farmpartners/>.

47. Inwood, S. and J. Sharp, *Farm persistence and adaptation at the rural–urban interface: Succession and farm adjustment*. Journal of Rural Studies, 2012. **28**(1): p. 107-117.DOI: <https://doi.org/10.1016/j.jrurstud.2011.07.005>.

48. Conway, S., J. McDonagh, M. Farrell, and A. Kinsella, *Uncovering obstacles: The exercise of symbolic power in the complex arena of intergenerational family farm transfer*. Journal of Rural Studies, 2017. **54**: p. 60-75.DOI: <https://doi.org/10.1016/j.jrurstud.2017.06.007>.

49. Becot, F., *Children, work, and safety on the farm during COVID-19: A harder juggling act*. Journal of Agromedicine, 2022. **27**(3): p. 315-238.DOI: <https://doi.org/10.1080/1059924X.2022.2068716>.

50. Budge, H. and S. Shortall, *Agriculture, COVID-19 and mental health: Does gender matter?* Sociologia Ruralis, 2023. **63**(S1): p. 82-94.DOI: <https://doi.org/10.1111/soru.12408>.

51. Rissing, A., S. Inwood, and E. Stengel, *The invisible labor and multidimensional impacts of negotiating childcare on farms*. Agriculture and Human Values, 2021. **38**: p. 431-447.DOI: <https://doi.org/10.1007/s10460-020-10162-1>.

52. Southard, E. and F. Becot, *Caregiving Along the Life Course Among Farming Households*. Journal of Agromedicine, Under review.

53. Becot, F. and S. Inwood, *Childcare in Agriculture: Key for Children's Safety and the Economic Viability of Farm and Ranch Businesses*, in *2023 National Farm Families Childcare Survey Findings – Research brief #1*. 2023: Marshfield, WI.DOI: <https://doi.org/10.21636/nfinc.nccrahs.childcaresurvey.researchbrief.1.2023>.

54. *Children's needs and childcare: an illustration of how underappreciated social and economic needs shape the farm enterprise*. Agriculture and Human Values, 2025. **42**: p. 693-712.DOI: <https://doi.org/10.1007/s10460-024-10594-z>.

55. Becot, F., S. Inwood, and H. Budge, "The source of all my joy and all my stress": Children and childcare as underappreciated sources of stress that affect farm women. Journal of Agromedicine, 2025. **30**(1): p. 114-131.DOI: <https://doi.org/10.1080/1059924X.2024.2427800>.

56. Wheeler, R. and C. Nye, *The health and well-being of women in farming: A systematic scoping review*. Journal of Agromedicine, 2025. **30**(1): p. 132-152.DOI: <https://doi.org/10.1080/1059924X.2024.2407385>.

57. Becot, F., S. Ruszkowski, C. Henning-Smith, and A. Bjornestad, *The landscape of farmer mental health programs in the US Midwest*. Journal of Agromedicine, 2025. **30**(4): p. 765-778.DOI: <https://doi.org/10.1080/1059924X.2025.2517842>.

58. Scheyett, A., S. Hollifield, A. Scarrow, A. Garcia, and I. Marburger, "A great life, if you can stand it": *Stress and farm women*. Journal of Rural Mental Health, 2024. **48**(3): p. 191–204.DOI: <https://doi.org/10.1037/rmh0000264>.

59. Proctor, C. and N. Hopkins, *Stressors and coping strategies in rural farmers: a qualitative study*. Journal of agromedicine, 2023. **28**(3): p. 415-424.DOI: <https://doi.org/10.1080/1059924X.2023.2173691>.

60. Henning-Smith, C., A. Alberth, A. Bjornestad, F. Becot, and S. Inwood, *Farmer Mental Health in the U.S. Midwest: Key Informant Perspectives*. Journal of Agromedicine, 2021. **27**(1): p. 15-24.DOI: <https://doi.org/10.1080/1059924X.2021.1893881>.

61. Billington, A., C. Cuthbertson, S. Iwinski, Y. Hu, M. Krishnaswamy, and J. Rudolphi, "Move forward": A *marginalia analysis of farmers' mental health management strategies*. Journal of Rural Studies, 2025. **117**: p. 103649.DOI: <https://doi.org/10.1016/j.jrurstud.2025.103649>.

62. Ruszkowski, S., F. Becot, A. Bjornestad, A. Smolski, M. Sundaram, D. Puthoff, and A. Alberth, *South Dakota Farmer Mental Health Assessment: Findings from the Qualitative Phase*. 2023, Marshfield, WI: National Farm Medicine Center.

63. Pennsylvania Office of Rural Health. *About Rural Health*. 2026; Available from: <https://www.porh.psu.edu/about/about-rural-health/>.

64. Stanley-Clarke, N., *The role of agricultural professionals in identifying, mitigating and supporting farming families during times of stress: Findings of a qualitative study*. Australian Journal of Rural Health, 2019. **27**(3): p. 203-209.DOI: <https://doi.org/10.1111/ajr12507>.

65. Becot, F. and S. Ruszkowski. *Resources to Support Mental and Financial Well-being in Agriculture*. 2024; Available from: <https://extension.psu.edu/resources-to-support-mental-and-financial-well-being-in-agriculture>.

66. Pennsylvania Department of Agriculture. *AgriStress HelpLine for Pennsylvania*. 2025; Available from: <https://www.pa.gov/agencies/pda/about-pda/mental-wellness-resources-for-the-agriculture-community>.

67. Cultivemos. *Resources*. n.d.; Available from: <https://www.cultivemos.org/resources/>.

68. Wisconsin Department of Agriculture Trade and Consumer Protection. *Farmer Wellness Program*. n.d.; Available from: https://datcp.wi.gov/Pages/Growing_WI/FarmerMentalHealthWellness.aspx.

69. South Dakota State University Extension. *Agriculture Behavioral Health Voucher Program*. n.d.; Available from: <https://extension.sdstate.edu/agriculture-behavioral-health-voucher-program>.

70. University of Illinois Urbana-Champaign. *Illinois Agricultural Mental Health Voucher Program*. n.d.; Available from: <https://publish.illinois.edu/farmstress/voucher-program/>.

71. Center for Agricultural and Shale Law at Penn State Dickinson Law. *Pennsylvania Agricultural Mediation Program*. 2025; Available from: <https://aglaw.psu.edu/pennsylvania-agricultural-mediation-program/>.

72. Cornell University. *NY FarmNet*. n.d.; Available from: <https://cals.cornell.edu/nyfarmnet>.

73. Farm First. *About Farm First*. 2025; Available from: <https://www.farmfirst.org/>.

74. Brumby, S., A. Chandrasekara, P. Kremer, S. Torres, S. McCoomb, and P. Lewandowski, *The effect of physical activity on psychological distress, cortisol and obesity: results of the farming fit intervention program*. BMC Public Health, 2013. **13**(1): p. 1-6.DOI: <https://doi.org/10.1186/1471-2458-13-1018>.

75. Cuthbertson, C., A. Brennan, J. Shutske, L. Zierl, A. Bjornestad, K. Macy, P. Schallhorn, G. Shelle, J. Dellifield, and J. Leatherman, *Developing and Implementing Farm Stress Training to Address Agricultural Producer Mental Health*. Health Promotion Practice, 2022. **23**(1): p. 8-10.DOI: <https://doi.org/10.1177/1524839920931849>.

76. Derringer, J. and M. Biddle, *Potential directions for farm stress research: A systematic review of educational interventions to reduce psychosocial stress among farm and rural populations*. The Journal of Rural Health, 2021. **38**(3): p. 554-573.DOI: <https://doi.org/10.1111/jrh.12633>.

77. Hagen, B., Albright, A., Sargeant, J., Winder, C., Harper, S., O'Sullivan, T., & Jones-Bitton, A., *Research trends in farmers' mental health: A scoping review of mental health outcomes and interventions among farming populations worldwide*. PLoS One, 2019. **14**(12): p. e0225661.DOI: <https://doi.org/10.1371/journal.pone.0225661>.

78. Younker, T. and H.L. Radunovich, *Farmer mental health interventions: a systematic review*. International journal of environmental research and public health, 2022. **19**(1): p. 244.DOI: <https://doi.org/10.3390/ijerph19010244>.

79. DeLind, L., *The U.S. farm crisis: Program responses and alternatives to them—the case of Michigan*. Agriculture and Human Values, 1986. **3**(4): p. 59-65.DOI: <https://doi.org/10.1007/BF01535486>.

80. Heaberlin, B. and A. Shattuck, *Farm stress and the production of rural sacrifice zones*. Journal of Rural Studies, 2023. **97**: p. 70-80.DOI: <https://doi.org/10.1016/j.jrurstud.2022.11.007>.

81. Inwood, S., F. Becot, A. Bjornestad, C. Henning-Smith, and A. Alberth, *Responding to Crisis: Farmer Mental Health Programs in the Extension North Central Region*. Journal of Extension, 2019. **57**(6): p. 6RIB1.DOI: <https://doi.org/10.34068/joe.57.06.20>.

82. Becot, F., A. Bauman, J. Crowe, B.B.R. Jablonski, K. Lim, and A. Spalding, *Farm households' social and economic needs and the future of agriculture: introduction to the symposium*. Agriculture and Human Values, 2025. **42**: p. 613-623.DOI: <https://doi.org/10.1007/s10460-024-10688-8>.

83. Droz, Y., V. Mieville-Ott, D. Jacques-Jouvenot, and G. Lafleur, *Malaise en agriculture. Une approche interdisciplinaire des politiques agricoles France-Québec-Suisse*, ed. K. Editions. 2014, Paris, France: Karthala Editions.

84. Mann, S., I. Zaharia, and L. Reissig, *Social Policy and Burnout: A Bi-national Comparison*. International Journal of Health, Wellness & Society, 2019. **9**(4): p. 63-75.DOI: <https://doi.org/10.1080/00207454.2020.1859502>.

85. Stayner, R. and E. Barclay, *Welfare and Support Services for Farm Families*. 2002, Kingston, Australia: Rural Industries Research and Development Corporation.

86. Marburger, I., A. Scheyett, and K.B. Yoo, *Exploring Farmers' Motivators and Barriers to Adopting Stress Management Behaviors*. OBM Integrative and Complementary Medicine, 2025. **10**(1): p. 1-16.

87. Service de remplacement. *Prenez soin de vous, nous assurons la continuité de vos travaux*. 2025; Available from: <https://servicederemplacement.fr/se-faire-replacer>.

88. Mela. *Farmers' holiday and stand-in scheme*. 2019; Available from: <https://www.mela.fi/en/agricultural-entrepreneurs/farmers-holiday-and-stand-in-scheme/>.

89. Successful Farming. *From Burnout to Baby Leave: The Substitute Farmer Program Changes Everything for French Producers*. 2025; Available from: https://www.agriculture.com/from-burnout-to-baby-leave-the-substitute-farmer-program-changes-everything-for-french-producers-11739709?utm_source=emailshare&utm_medium=social&utm_campaign=shareurlbuttons.

90. healthcare.gov. *Essential health benefits*. n.d.; Available from: <https://www.healthcare.gov/glossary/essential-health-benefits/>.

91. New Mexico Early Childhood Education and Care Department. *Universal Child Care*. 2025; Available from: <https://www.nmeecd.org/universal/>.

92. Vermont Agency of Human Services Department for Children and Families. *Act 76 (H.217)*. 2026; Available from: <https://dcf.vermont.gov/cdd/laws-rules/h.217>.

93. Bipartisan Policy Center. *Rural Child Care Policy Framework*. 2023; Available from: <https://bipartisanpolicy.org/report/rural-child-care-policy-framework/>.

94. Tinc, P. and J. Sorensen, *Stakeholders Team up for Action in New York Dairy (STAND): A Collaborative Action-Planning Workshop to Combat Toxic Stress among New York Dairy Farmers*. Journal of Agromedicine, 2020. **25**(1): p. 122-125.DOI: <https://doi.org/10.1080/1059924X.2019.1659202>.

95. Weisbord, M. and S. Janoff, *Future search: Getting the whole system in the room for vision, commitment, and action*. 2010, San Francisco, CA: Berrett-Koehler Publishers.