

Mental Health and First Responders: How Their Jobs Can Cause More than Just Stress

Firefighters, police officers, and other first responders never know what a day on the job is going to look like. Many of these people deal with high levels of trauma, and their mental health record is taking a toll.

- Jan 21, 2020

First responders are at high risk of more than you think. While they often deal with dangerous and life-threatening situations on the job, the trauma and emotional stress that comes with their day-to-day can really affect their mental health and cause post-traumatic stress disorder, depression, and anxiety—to name a few.

A recent study by the Ruderman Family Foundation found that in 2017, **more firefighters and police officers died by suicide** than in the line of duty. The same study found that Post-Traumatic Stress Disorder (PTSD) and depression can be almost *five times* as high among firefighters and police officers than the general public.

The stress of their jobs does not just go away when these responders go home at night. Many of them battle with mental health as a result of the jobs they love and the situations they are sent to improve. Unfortunately, not everyone struggling feels that he or she can ask for help. Plus, other factors that affect first responders are also known to increase the likelihood of mental health problems and substance abuse such as **physical strain, working long hours, and lack of sleep**.

“Law enforcement, firefighters as we know are routinely subjected to some very, very traumatic situations almost on a day to day basis. Not always, especially in rural areas, but when these do happen of course they have a cumulative affect,” said Rep. Warren Petryk.

First responders and firefighters can deal with a number of mental health issues, but many of them struggle with one or more of the following disorders:

PTSD. There are different manifestations of post-traumatic stress disorder, and it looks different for every person. Exposure to significant trauma (like the experiences of a first responder) are known to trigger the different types of PTSD. The **National Institute of Mental Health** notes three types of PTSD:

- *Re-experiencing*: Overwhelming fears, unexpected flashbacks of trauma events that include the same rapid breathing and sweating originally experienced, nightmares, and other intrusive symptoms characterize this type of PTSD.
- *Hyperarousal*: Often feeling on edge, intense anger response, insomnia, and/or being easily startled are all signs of hyperarousal.
- *Avoidance*: Feelings of guilt and depression (or having no feelings of attachment at all), difficulty remembering traumatic events, lack of interest in former hobbies, and avoiding places that trigger memories of trauma are all signs of avoidance.

Anxiety. **Anxiety symptoms** that last for most six months or more generally qualify for a diagnosis of generalized anxiety disorder (GAD), social anxiety disorder, panic disorder, obsessive-compulsive disorder (OCD), or phobia. The specific symptoms will vary depending on the disorder, but many include intense fears of specific places or things, obsessive thoughts that are intrusive, disrupted sleeping and eating patterns, substance abuse, and more.

Depression. Feeling sad or down is one thing, but if your sad feelings about a specific event or problem in your life is ongoing, and breeds feelings of hopelessness, loss, suicidal thoughts and behaviors, guilt, insomnia, it might be a case of **depression**. Depression can be diagnosed as mild (dysthymia), moderate, or severe, or it can be a symptom of another mental health disorder like post-traumatic stress disorder (PTSD). Depression can also be worsened or driven by substance abuse and addiction.

Substance Abuse. Addiction to drugs or alcohol is defined by a compulsive use of the drug (or drugs) of choice despite the negative consequences that can result. It is a chronic disease that actually has physical and **discernible changes in the brain**—therefore, it affects the person’s mental and physical health and personality. People who are diagnosed with addiction will not be able to stop using or drinking on their own, and they require professional detox and addiction treatment.

Co-occurring disorders. When people are living with both drug or alcohol dependence disorder and a diagnosed mental health condition, they are diagnosed with **co-occurring disorders**. The two issues often largely impact one another and make it difficult to treat one disorder without comprehensively treating the other.

Mental Health is Stigmatized

In a perfect world, every person dealing with a mental disorder would have the means, desire, and drive to seek treatment. However, there are a lot of social and cultural barriers that postpone or discourage them from getting the help they need.

Stigma is a significant issue for those living with mental illness in the United States. For example, only 24.6 percent of participants who were living with mental health symptoms thought that people

would care about their struggle. However, this same study found that 57.3 percent of respondents who were not struggling with mental health symptoms believed that people were sympathetic to the issue. Therefore, those with mental health issues mistakenly underestimate the overall sympathetic nature of the general population.

Most importantly, though, the cultural stigma behind mental health stems from the false idea that a person's mental health struggles are a sign of weakness and are unimportant. This, of course, is far from the truth.

Things Are Changing

There have been an upsurge in prevention and education efforts across many support organizations for active firefighters and first responders as well as retired veterans. This includes organizations like the **National Fire Protection Association** which has helped to increase awareness of how common mental health problems are among first responders and firefighters.

The fact of the matter is this: the majority of people do struggle with some form or mental health condition (or are affected by it); first responders, though, have high levels of mental health issues and suicidal thoughts. There is not much we can change about the unknown traumatic situations these first responders will be in. There is, though, a lot we can improve about the way we support their mental health through resources, treatment, and open communication.