

Who Takes Care of the Caregivers?

Worries about the mental health of EMS practitioners prompt grassroots campaigns to help

ON MARCH 12, 2014, Ann Farina and her EMS co-workers in Spokane, Wash., were rocked by the suicide of their 25-year-old colleague. “He was a really outgoing guy,” Farina said. “There was a lot of shock.”

Yet in talking about it with her friends at other EMS agencies, she soon realized that “we all knew somebody in EMS who had committed suicide or had a very serious attempt at suicide,” Farina recalled.

Two weeks after her co-worker’s death, Farina and a group of concerned EMS practitioners from around the country launched the Code Green Campaign. To raise awareness and let those struggling with mental health issues know they aren’t alone, Code Green invited EMS practitioners to anonymously share their struggles with depression, substance abuse and anxiety.



“Even the strongest of us have our breaking points,” said Kelly Grayson, a critical care paramedic and member of the Code Green Campaign’s board of directors. “You don’t go into an EMS career thinking it’s going to be all

sunshine and roses. But you go into EMS thinking you can handle what you’re going to see. And to a certain extent you can handle it – until you can’t.”

The campaign hit a nerve. Raw, painful stories about struggling with panic attacks, flashbacks, and suicidal thoughts poured in, day and night.

“I’m sick of dealing with everybody else’s problems. I’m sick of sleeping all day. I’m sick of the pictures in my head. I’m sick of the kids that haunt me in my dreams. I’m sick of mothers’ screams ... I’m sick of nobody understanding,” wrote one.

“The shift work has been taking its toll and there’s no ‘taking a few weeks off’ since I need the income ... I started doing this because it was what I loved, but now there’s no escape. There’s no break. There’s no sleep ... I miss the way I used to love this job,” wrote another.



Fiona Campbell, Code Green Campaign secretary, with their mascot, Annie, at an event in Austin, Texas. The group chose a goat to represent first responders “because she is stubborn and will eat anything,” Code Green President Ann Farina jokes.

Scope Bigger than Once Understood

From the critical incident stress debriefings popular in the 80’s and 90’s, to the studies of post-traumatic stress in responders after 9/11, concern about the mental health of first responders is nothing new.

What’s different today is a growing awareness that mental health issues among EMS practitioners may be far more widespread, and is taking a greater toll on the EMS workforce, than previously understood.

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Who Takes Care... CONTINUED FROM COVER

When Farina and her team launched Code Green, they spent weeks searching for studies on EMS and depression, anxiety and post-traumatic stress, only to come up mostly empty handed. “There have not been a lot of high-quality studies looking at mental health in U.S.-based, non-police first responders who were not involved with 9/11 or Hurricane Katrina,” Farina said.

Nor are suicide statistics easy to come by. Though the National Institute for Occupational Safety and Health (NIOSH) collects data on jobs linked to suicide, paramedic and firefighters aren’t included among the other healthcare professions.

The best estimates come from the Firefighter Behavioral Health Alliance. It’s run by retired firefighter and counselor Jeff Dill, whose group collects and confirms confidential reports of EMS suicides.

In 2014, Dill’s group confirmed 104 suicides by fire and EMS professionals – more than the 87 firefighters who were killed in the line of duty.

“People don’t really understand how bad off it is in the fire and EMS service,” he said, noting that his statistics are likely an underestimate. “We are losing a lot of people to suicide.”

Dill launched his organization after seeing his suburban Chicago firefighters return from post-Katrina New Orleans deeply disturbed by what they had seen. “They wanted to talk to counselors, but they were frustrated. The counselors were good people, but they didn’t really understand our culture,” he said.

Seeing a need for counselors who firefighters would trust, Dill went back to school and earned a master’s degree in community counseling. In 2009, he founded a counseling service for firefighters, and now does workshops to help fire departments create programs to help their responders cope.

“When we put on this uniform, we believe we are supposed to act a certain way. Be strong, brave, help others, do not show weakness. Unfortunately we turn to addictions and other unhealthy ways of coping,” Dill said.

Dealing With the Issues

Even with the heightened awareness of mental health issues among first responders, figuring out how to prevent

EMS practitioners from developing mental health issues – and how best to help those who do – is an even bigger challenge.

In recent years, critical incident stress debriefing has waned in popularity, as studies have questioned whether talking about memories of disturbing events is actually helpful.

Though the idea that responders should suffer in silence has begun to fall away, EMS practitioners aren’t exactly eager to discuss their psychological and emotional struggles, Farina said.

“What we’re hearing is there is a lot of fear about speaking up about it. A lot of people know somebody who got

fired or removed from work because of a mental health issue. There is a stigma about admitting you’re struggling. And there is a very strong sentiment among first responders that for a counselor or therapist to be effective, they need to have first responder experience, or else they won’t understand.”

Though some companies have employee assistance programs that offer counseling services, many responders are reluctant to tap those resources for fear of being “found out,” she added.

Grayson knows first-hand just how difficult talking about mental health issues can be. After seeing too many news

“Plaguing me these days are random crying spells, difficulty communicating person to person, complete inability to make hardly any friends, weight gain and the perpetual feeling of being consumed in loneliness.”

Alabama paramedic, 7 years in EMS, posted to the Code Green Campaign’s website

WHERE TO GO FOR HELP

Code Green (codegreencampaign.org) lists resources on their website, including Safe Call Now, a 24/7 help line staffed by first responders, for first responders.

NAEMT has compiled a resource library of articles, tips and other information about suicide prevention, mental health first aid, and building emotional resiliency. Find the mental health resources at naemt.org, under the EMS Health & Safety tab.



**THE CODE GREEN
CAMPAIGN**

We call code strokes, code STEMIs, and code traumas. It is time we called a code alert on our mental health.

stories and Facebook posts about young EMS practitioners committing suicide, Grayson decided to share his lifelong struggle with depression in a column for EMS1.com.

“I thought, ‘Enough of this. If I can stand up and admit I suffer from depression, maybe it will inspire others to speak out and get help,’” Grayson said. “I wanted to spread the message that admitting you have PTSD or depression is not a sign of weakness. It’s a sign of courage. You are strong enough to admit it and get help for your problem.”

The response to his column, which ran in March 2014, was overwhelming. “So many people came up to me wanting to talk, or wrote me to say ‘thank you’, that this was something they’d been dealing with but were afraid to say anything,” Grayson said.

While reducing the stigma of mental health issues is an important step, Farina and Grayson believe the EMS profession needs to do more. That includes helping to prepare EMS practitioners to psychologically and emotionally cope with the stresses of the jobs as part of their initial and ongoing education, and developing peer support networks – trusted EMS confidantes who can provide support and help connect those who are suffering with mental health professionals.

And there are already signs that the efforts of Code Green are having an impact. Last fall, a 20-year-old EMT wrote to Code Green about the horror of doing CPR on a one-month old baby who didn’t survive. *“I was struck with an indescribable emotional cocktail of helplessness, anger, and sadness ... It took everything out of me,”* he wrote. *“I feel as though I’m at the breaking point.”*

Six months later, he shared an update. His new post talked about seeking help, being diagnosed with PTSD, depression and anxiety, and the changes it meant for his life.

“Today I look back, in awe that I could ever get to such a low point ... This website, my therapist, my doctor, and my support system saved my life ... If you are struggling, you can’t do it alone. Be vocal, lose your pride and get some help.”

Jenifer Goodwin is NAEMT’s communications projects manager.



SURVIVOR RETREAT HELPS FAMILIES GRIEVE, REMEMBER

In May, the Firefighter Behavioral Health Alliance brought together a dozen family members of firefighters who had committed suicide for a survivor retreat. Held in Savannah, Ga., the gathering gave families the chance to talk, to grieve and to remember their loved ones with others who understood their pain. They plan to hold another retreat in the spring.

The group is also offering higher education scholarships to the children and spouses of firefighters who took their own lives. Find out more at ffbha.org.

