Behavioral Health in the Fire Service

Participant Manual



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BEHAVIORAL HEALTH IN THE FIRE SERVICE

COURSE OBJECTIVES

- Understand the concepts of behavioral health, mental health, and mental illness
- Understand the major behavioral health concerns for firefighters, EMS personnel, and their families
- Understand how behavioral health initiatives have developed and changed in the fire service and the future direction of behavioral health in the fire service



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What is Behavioral Health?

NVFC				

BEHAVIORAL HEALTH

is a term used to refer to fields related to the study, assessment, diagnosis, treatment, and

PREVENTION

Of <u>mental illness</u> and <u>substance</u> <u>abuse</u>.



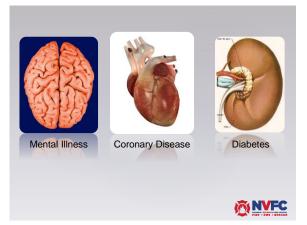
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Think About:

- · Mental Illness
- Coronary Disease
- · Diabetes

What comes to mind?





- Mental illness, coronary disease, and diabetes:
- · All affect an organ in the body
- · All can be hereditary
- · All can be exacerbated by stress
- · All may be helped by diet and exercise
- · All may be treated with medication

You can't cure or prevent any of them by "mind over matter"



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The <u>one major difference</u> is that mental health problems are often short term and reversible.



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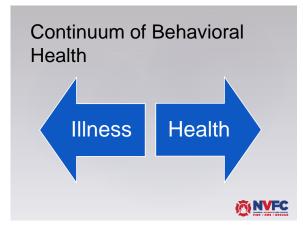


Mental health is as important as physical health.

- Good mental health contributes greatly to an overall feeling of well-being
- Untreated mental health disorders in adults can lead to diminished functioning, substance abuse, poor quality of life, and increased mortality
- Research shows untreated mental illness can slow healing from physical illnesses



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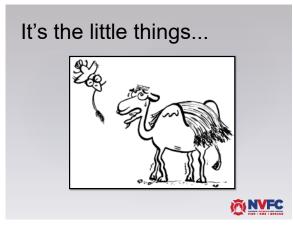


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Factors that Increase Risk

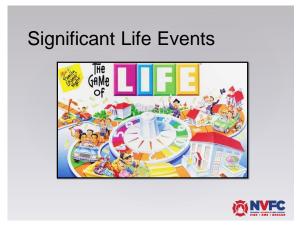
- Being previously in treatment for another disorder
- · Starting out as a firefighter at a young age
- · Being unmarried
- · Holding a supervisory rank in the fire service
- · Proximity to death during a traumatic event
- · Experiencing a series of events back-to-back



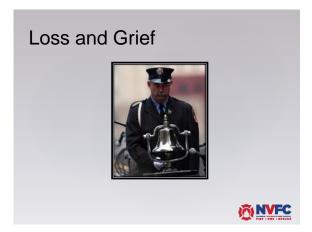












Depression



- Persistent feelings of sadness or anxiety
 Loss of interest or pleasure in usual activities that lasts for more than two weeks
- Changes in appetite that result in weight loss or gain unrelated to dieting
- Insomnia or oversleepingLoss of energy or increased fatigue
- Restlessness or irritability
- Feelings of worthlessness or persistent guilt
 Difficulty thinking, concentrating, remembering or making decisions

- Ongoing body aches and pains, problems with digestion that are not caused by physical disease Increased drinking, cigarette smoking, or using prescription or illicit drugs
- Thoughts of death or suicide or attempted suicide



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Anxiety



- · Painful, intrusive memories; recurring nightmares
- · Fatigue, headaches, muscle tension, muscle aches, irritability, or difficulty swallowing
- · Persistent obsessive thoughts
- · Intense feelings of panic and fear
- · Sweating, trembling, nausea, and difficulty talking
- · Excessive, irrational or ongoing anxiety or fear
- · Feelings of dread



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Post-Traumatic Stress Disorder

- · Hopelessness about the future
- · Memory problems
- · Trouble concentrating
- · Difficulty maintaining close relationships
- · Irritability or anger
- · Overwhelming guilt or shame
- · Self-destructive behavior, such as drinking too much
- · Trouble sleeping
- · Being easily startled or frightened
- · Hearing or seeing things that aren't there
- Flashbacks, or reliving the traumatic event for minutes or even days at a time
- · Upsetting dreams about the traumatic event
- Trying to avoid thinking or talking about the traumatic event
- · Feeling emotionally numb
- · Avoiding activities you once enjoyed



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Alcohol Abuse

- Have you ever felt you should Cut down on your drinking?
- Have people Annoyed you by criticizing your drinking?
- Have you ever felt bad or Guilty about your drinking?
- Have you ever had a drink first thing in the morning (as an "Eye opener") to steady your nerves or get rid of a hangover?



This is one drink.



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Legal and Illegal Drugs



- Oxycontin
- · Percocet
- · Dexedrine
- · Ritalin
- Concerta
- · Valium
- Xanax



In the beginning...

- Firefighting ranks among the most stressful and demanding occupations (Gist & Woodall, 1995)
- Critical Incident Stress Debriefing (CISD) became a movement in the industry, prevent negative outcomes (Mitchell, 1983)
- Control critical incident stress with effective use of ICS
- · NFPA 1500 includes CISM
- Accepted need for behavioral health assistance





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Where is it going?

- Psychological Assistance Programs
- Employee Assistance Programs (EAPs)
- · Evolution away from CISM
- Institution of Peer Support Team models
- Stress First Aid (SFA) adopted from the military models
- Eye Movement Desensitization and Reprocessing (EMDR)







7 Strategies of Initiative #13

- Debrief using operational strategies rather than clinical
- Individualize interventions using screening tools to help first responder determine if/what help is needed
- Recognize that not everyone is effected by an event and intervention is variable
- Offer Employee Assistance Programs (EAPs)
- 5. Train peer support programs to promote wellness and recognize early signs of stress
- Utilize resources to offer first responders, their families at home, and the organization immediate access to self-help
- 7. Provide training to Behavioral Health professionals and other supporting first responders



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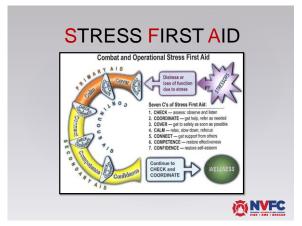
TRAUMA SCREENING QUESTIONNAIRE

- ☐ Bodily reactions (fast heartbeat, stomach churning, sweatiness, dizziness) when reminded of the event
- Difficulty falling or staying asleepIrritability or outbursts of
- Irritability or outbursts of angerDifficulty concentrating
- ☐ Heightened awareness of potential dangers to yourself and others
- ☐ Being jumpy or being startled at something unexpected
- ☐ Upsetting thoughts or memories about the event that have come into your mind against your will
- ☐ Upsetting dreams about the event
- Acting or feeling as though the event were happening again
- ☐ Feeling upset by reminders of the event

If you experience 6 or more in a 2-week period, seek help!







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Bring it Home



- · Daily self-assessment
- · Consider the people working next to you at your organizations and their needs
- · Become familiar with Life Safety Initiatives
- CISM has its place; PFA and SFA are there daily
- · Leaders don't need bugles
- · Only time you need to keep an 'open mic'



Finding a Model that Works



- · One size does not fit all
- Individual, department, regional differences
- · Assessment tools available
- · Community resources
- Don't force a program or concept that doesn't fit



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Finding a Model that Works Self Awareness Assessment Assistance Assistance Assistance

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