

FIREFIGHTER RISK FACTORS FOR STRESS AND SUICIDE

Stressors Unique to Firefighters:

- **Uncertainty** – performance, peer acceptance, employment/shifts, injury/illness, risk
- **Physical response to alarm** – natural stress response & heightened alert/physical triggers
- **Interpersonal tension** – relationship with management, peers, family, spouse, shift-work
- **Exposure to human tragedy** – car crash call can have equal stress to large disaster
- **Fear - heightened alert state** – risk to health and physical safety

Other Stress Factors

- Increased involvement in **medical emergency calls** (non-fire) in additional to fire calls
- **Health issues** related to prolonged/cumulative stress **or injury** from job
- **Alcohol** use/misuse that may be part of the culture or peer group 'norm'
- **Sleep deprivation and fatigue** from workload and or shift-work
- **Work second job** or family business – accumulating work stress rather than stress-relief activities

Risk Factors for Post-Traumatic Stress

- Person with **high level of hostility** or easily agitated – increased susceptibility
- **Low level of self-efficacy** (belief in one's ability to complete tasks/reach goals) predicted PTSD levels
- A **high level of reported work strain** was associated with increased PTSD
- Engaging in **negative self-appraisals** (how we view/judge ourselves) increased risk of PTSD

Protective Factors against stress and trauma effects

- Higher levels of **family and at-work social support** were associated with lower odds ratios for PTSD
- A positive **work support climate** (superiors sensitive, open and supportive post incident) reduced posttraumatic distress after critical incident involvement
- **Employee control climate** (sense of having control or influence or environment or activities) reduced anxiety and stress caused by posttraumatic distress.
- **Belief that they have coping skills** and tools to handle stress and trauma

High levels of **occupational stress and traumatic stress** can contribute to **increased suicide risk**

3 I's of Suicide

1. physical or emotional pain that is experienced as **Intolerable**, unbearably distressing;
2. a life situation perceived as **Interminable**, that is seen as continuing unchanged;
3. a life situation that is perceived as **Inescapable**, such that no coping action already tried or conceived will make a significant difference.

3 Social Risk Factors

- **Thwarted belongingness** – belief one is alone; prevented from being part of peer/work group or family
- **Perceived burdensomeness** – believe you are a burden to others
- **Capability for suicide** – ability to overcome human aversion to pain and death (from life experience and personality traits)

Additional Firefighter Suicide Risk Factors:

- **Responding/attending to suicides** - attempts or suicide death with post-trauma reactions/memories
- **Acceptance of death** as potential consequence; come to terms with mortality
- May have **acute trauma stress, cumulative stress, or PTSD**
- May use/abuse **alcohol for coping**
- Access to **weapons** (particularly in US) or other 'means'

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Cumulative Stress: The signs and symptoms tend to progress through several phases.

Phase	Signs/Symptoms	Action
<p>Phase 1 - Warning Early warning signs are often more emotional than physical and may take a year or more before they are noticeable.</p>	<ul style="list-style-type: none"> • feelings of vague anxiety • depression • boredom • apathy • emotional fatigue 	<ul style="list-style-type: none"> • talking about feelings • taking a vacation • making a change from regular activities • taking time for yourself
<p>Phase 2 - Mild Symptoms Warning signs have progressed and intensified. Over a period of 6 to 18 months, physical signs may also be evident.</p>	<ul style="list-style-type: none"> • sleep disturbances • more frequent headaches/colds • muscle aches • intensified physical and emotional fatigue • withdrawal from contact with others • irritability • intensified depression 	<ul style="list-style-type: none"> • more aggressive lifestyle changes may be needed • short-term counseling
<p>Phase 3 - Entrenched Cumulative Stress This phase occurs when the above phases continue to be ignored. Stress starts to create a deeper impact on career, family life and personal well-being.</p>	<ul style="list-style-type: none"> • increased use of alcohol, smoking, non-prescription drugs • depression • physical and emotional fatigue • loss of sex drive • ulcers • marital discord • crying spells • intense anxiety • rigid thinking • withdrawal • restlessness • sleeplessness 	<ul style="list-style-type: none"> • The help of medical and psychological professionals is highly recommended.
<p>Phase 4 - Severe/ Debilitating Cumulative Stress Reaction This phase is often considered "self-destructive" and tends to occur after 5 to 10 years of continued stress.</p>	<ul style="list-style-type: none"> • careers end prematurely • asthma • heart conditions • severe depression • lowered self-esteem/self-confidence • inability to perform one's job • inability to manage personal life • withdrawal • uncontrolled anger, grief, rage • suicidal or homicidal thinking • muscle tremors • extreme chronic fatigue • over-reaction to minor events • agitation • carelessness, forgetfulness • paranoia 	<ul style="list-style-type: none"> • Significant intervention from professionals recommended

(From: Anschuetz, B.L. "The High Cost of Caring: Coping with Workplace Stress" in Sharing: Epilepsy Ontario.)