



Supporting Mental Health in
First Responders

A Guide for Families

BCFirstRespondersMentalHealth.com

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Introduction

While first responders are on the front lines responding to emergencies and other traumatic events, their loved ones play important supporting roles. Whether you are a family member, friend, or any other loved one, the stresses a first responder brings home affects you as well.

Family members are a primary source of support for first responders. They are often the first to notice changes in mood and behaviour, can encourage their loved ones to get help, can help them access resources, and are there for them long after an incident has happened.

It's important for families to understand what mental health is, how to identify the early signs and symptoms of those who are struggling with their mental health, and how to access resources to support their loved ones.

Mental health in first responders

In the past few years, there has been increased discussion around first responders and the mental health issues they face. There have been a number of media stories profiling first responders who say their mental health issues stem from the trauma and stress they experience on the job.

First responders are repeatedly exposed to distressing situations, violence, trauma, and death. They also encounter daily workplace stressors such as heavy workloads, rotating shifts, and, occasionally, discrimination and bullying. These factors can have an immediate detrimental impact on some individuals; for others, the negative effects build up over weeks, months, or even years.

Many first responders will experience symptoms of a mental health condition either temporarily or on a recurring or ongoing basis. These conditions include anxiety, depression, substance misuse, and post-traumatic stress disorder (PTSD).

While awareness about mental health issues in the workplace has increased over the years, there is still a lot of stigma associated with mental health challenges. Research commissioned by the BC First Responders Mental Health Committee found that many first responders are cautious in talking to the leadership in their organization about any mental health issues they have in their workplaces. This stigma can also make first responders reluctant to discuss these issues at home with friends and family, even though the stresses they face on the job can affect their loved ones.

Those who have mental health conditions or experience symptoms can have positive outcomes if they have the right support from family, friends, and their workplace. Families, especially, can help in tackling barriers and improving the mental health of their loved ones.

Role of the family

Supporting the first responder in your family isn't easy. They work long shifts and odd hours, often bring the stress of their work back home, and are more likely to experience mental health issues.

You probably see the first responder in your family on a daily basis. This means you have a key role to play in supporting the mental health of your loved one. This support includes:

- Recognizing the signs and symptoms of loved ones who may be struggling with their mental health
- Having conversations with loved ones about these struggles
- Help your partner engage in practices that will keep them healthy
- Understanding what resources are available to you and your family

Communication can be challenging for first responders' families at the best of times. First responders often come home from work and "don't want to talk about it." This may be because of burnout and exhaustion, compartmentalization, confidentiality concerns, or not wanting to traumatize their family members. Unfortunately, this lack of communication can contribute to first responders' disconnection and isolation from their primary support people. While there is no exact formula for healthy communication, families should talk about and set their boundaries and expectations together — ideally, earlier rather than later.

This package includes information on the following topics to help people support the first responders in their families:

Understanding mental health

First responders regularly encounter stressful situations, which can affect the brain over time. This section describes those effects and how they help with understanding the mental health challenges of first responders.

Recognizing signs and symptoms

Family members are in a good position to recognize the signs and symptoms of loved ones who may be struggling with their mental health, often recognizing any deterioration before the loved one does. If family recognizes that this may be occurring, they are able to take action.

This section describes how to recognize the signs and symptoms of those struggling with mental health issues.

Having a conversation

It's important for family to take action if they think a loved one needs mental health support, whether it's because they recognize signs and symptoms or because the loved one

seeks help from them directly. Family need to respond with empathy and understanding. This section provides information on how to have this conversation.

Taking care of yourself

It isn't just first responders who feel the stress of the job — family feels that stress too. Family members need to take care of themselves if they are going to be able to support their loved one.

Information on how to take care of yourself can be found in this section.

Available resources

Family members should also know where to refer a loved one to for more resources and support. First responders usually have a range of resources available to support their mental health, including counselling. There are also several community supports available to the public that are useful.

This section includes a template for listing the resources available to you, and already includes some important community and first responder resources. Stick it on your fridge or in a home office so you have it handy when needed.

Further reading

Often, reading about the similar challenges others have faced and how they coped with them can help provide a path forward. This section includes a list of reading material.

Understanding mental health

*Content adapted with permission from *“Staying Emotionally Healthy in the Fire Service: What You and Your Family Should Know,”* prepared by Matthew Johnston, September 2015.

The nature of the job

First responders regularly encounter stressful situations. Most people will never have to experience the things first responders see, hear, or do as part of their job. To perform their required duties, their minds are forced to adapt, and it will gradually alter the way they interpret a traumatic event. Just like a callus forming on a hand due to repeated pressure, their minds thicken and harden in response to repeated exposure to stress.

This is what enables them to “get the job done.” Through training and experience, the analytical part of the mind learns to suppress natural emotional responses while at work. The brain changes the way it organizes information so that what was once considered traumatic becomes a normal part of daily reality.

First responders work under a command structure where personal decision making is restricted by industry protocols and guidelines. Training within this structure creates dependable, logic-based behaviour that trumps personal thoughts and actions in the face of extreme circumstances. In other words, first responders are trained to respond instinctively with calm and rational behaviour during stressful events.

How the brain constructs an emotional barrier

The brain’s limbic system largely governs emotions, behaviours, and long-term memory. First responders are trained to remain calm during potentially traumatic situations so their emotional and behavioural patterns can follow predictable paths. This training is what makes it possible for them to place personal feelings, beliefs, and reactions on hold when they encounter challenging circumstances.

In reaction to stress and anxiety, our limbic systems are programmed to have us respond in one of three ways: fight, flight, or freeze. These responses have been integral to our survival as a species — but they are simply not options for first responders attending to emergency situations. Instead, when they encounter a traumatic situation as a first responder, their limbic system is suppressed so that they can respond calmly and logically.

Over time, as first responders attend calls of a traumatic nature, they start to develop a strong dissociative barrier between risk and action. This allows them to run into a burning building or provide medical treatment to an injured child in hazardous conditions. In these moments, the needs of the people they’re trying to save supersede their own physical and emotional needs. This demonstrates how effectively a well-trained analytical mind can override the natural emotional and behavioural reactions to a dangerous situation.

Sometimes first responders go through a stressful encounter and have no problem bouncing back. Other times, a first responder may need extra support to work through it and return to feeling like themselves.

Encourage your loved one to consider seeking help from a mental health professional if they are experiencing any of the following:

- Difficulty sleeping, including frequent nightmares or night terrors
- Unwanted thoughts or feelings that affect concentration
- Flashbacks
- Chronic fatigue
- Loss of interest in usually enjoyable activities
- Irritability toward others
- Addiction, such as to alcohol, drugs, or gambling
- Self-insulating behaviours, including a lack of interest in social connectedness
- Frequent feelings of hopelessness, shame, or guilt
- Compulsion to work excessively at the expense of important relationships

Recognizing signs and symptoms

Even though a first responder's mental health is influenced by what is occurring in their brain, it does not mean that mental health is invisible. There are usually signs and symptoms if a first responder is struggling.

The Mental Health Continuum Model illustrates the different mental health phases a first responder may experience throughout their life and career. It also describes the physical and mental effects associated with each phase. The model includes the following phases:

- Healthy and adaptive coping (green)
- Mild and reversible distress (yellow)
- More severe and persistent functioning impairment (orange)
- Clinical illnesses and disorders requiring concentrated medical care (red)

Being aware of these signs and symptoms can help guide you to when you may need to have a conversation with your loved one.

You can also point your loved one to useful self-assessment tools that can help determine whether they need the intervention of a health care provider. [HeretoHelp](#), a project of the BC Partners for Mental Health and Substance Use Information, offers four screening self-tests that help people evaluate their own mental health or wellness. These tests look for signs or symptoms that can show up in some mental illnesses and can also help someone identify patterns of feelings or substance use. The four self-tests focus on depression, anxiety disorders, risky drinking, and well-being. Access the four self-tests at heretohelp.bc.ca/screening-self-tests.

Mental Health Continuum Model

Healthy	Reacting	Injured	Ill
<ul style="list-style-type: none"> • Normal fluctuations in mood, calm, takes things in stride • Normal sleep patterns, few sleep difficulties • Physically well, good energy level • Consistent performance • Sense of humour, in control mentally • Physically active and socially active • Limited or no gambling/alcohol use 	<ul style="list-style-type: none"> • Nervousness, irritability, impatience, sadness, feeling overwhelmed • Trouble sleeping, intrusive thoughts, nightmares • Tired/low energy, muscle tension, headaches • Procrastination • Displaced sarcasm, forgetfulness • Decreased physical and social activity • Regular but controlled gambling/alcohol use 	<ul style="list-style-type: none"> • Anxiety, anger, pervasive sadness, hopelessness • Restless or disturbed sleep, recurring images or nightmares • Increased fatigue, aches and pains • Difficulties with performance and concentration, workaholism, or presenteeism • Negative attitude • Social avoidance or withdrawal • Increased gambling/alcohol use 	<ul style="list-style-type: none"> • Excessive anxiety, easily angered, depressed mood, suicidal thoughts • Unable to fall or stay asleep, sleeping too much or too little • Exhaustion, physical illness • Unable to perform duties/control behaviour/concentrate, overt subordination, absenteeism • Isolation, avoiding social events, not going out or answering the phone • Gambling, alcohol, or other addictions
Actions to take at each phase of the continuum			
<ul style="list-style-type: none"> • Focus on task at hand • Break problems into manageable chunks • Identify and nurture support systems • Maintain healthy lifestyle 	<ul style="list-style-type: none"> • Recognize limits • Identify and minimize stressors • Engage in healthy coping strategies • Get adequate food, rest, and exercise 	<ul style="list-style-type: none"> • Identify and understand own signs of distress • Seek social support and talk with someone instead of withdrawing • Seek help 	<ul style="list-style-type: none"> • Seek consultation as needed • Follow health care provider recommendations • Regain physical and mental health

Having a conversation

*Reproduced from *What to say and why*, by beyondblue, which creates mentally healthy environments and supports people across Australia.

It's common to feel unsure about how to talk about anxiety or depression, or to worry about saying the wrong thing. Here are some useful phrases people who have experienced anxiety or depression say are most helpful to hear during difficult times. These are statements in a conversation which help someone to feel listened to, understood, and hopeful that things can improve.

"I'm here for you."

Anxiety and depression can make people feel very isolated and alone. Hearing someone say explicitly that they'll be there, and will stick by you during recovery, can really help. Of course, it's most important that you follow through on that promise.

"I can see this is a really hard time for you."

Validating that the experience of anxiety and depression is difficult is one of the most helpful things you can say. The least helpful statements are those that shut down the conversation ("I know how you feel," "just snap out of it," "you're attention seeking," "think more positively," "you'll be alright," "just get over it").

"I'm not sure what to do, but I'm sure we can figure it out together."

You don't have to always have the answers — and it's best not to pretend you do. What's important is that you're willing to stick around and help them figure out how to start feeling better.

"What can I do to help? Just tell me how."

Ask them to be honest about how you can help them. The support they need will change throughout their recovery so be prepared to be flexible. Taking initiative and doing small things to show you care can also help.

"I know it doesn't feel like it now but there is hope that things can get better."

Encourage hope. Remind them that anxiety and depression are treatable, and with the right support, most people recover.

"Have you thought about seeing your doctor or calling the employee assistance program? There is support available."

Highlight the importance of seeking professional support. Friends and family can offer a great deal of support but professionals have a crucial role in treating anxiety and depression and promoting recovery.

“This conversation is between you and me.”

It's important you are able to be trusted. Respect their privacy by not sharing what they tell you with anyone unless they say you can (unless they are at risk of hurting themselves).

“I'm sorry if I said the wrong thing. Can we start again?”

Don't beat yourself up if you say the wrong thing, or offence is taken to something you say. You're both trying to talk through a difficult experience. Focus on what's more important in the conversation.

“I have noticed you seem to be doing better lately. Is that how it feels for you?”

Noticing the positive changes can be hard to spot, particularly if they are small and gradual. But gently pointing out your observations can help them to feel like things might just be improving.

“Do you feel like doing something together to help take your mind off things?”

It's best not to talk about how they're feeling all the time. Doing an activity you both enjoy can help people with anxiety and depression change the focus of their negative thinking and offer a sense of hope for the future.

Taking care of yourself

*Reproduced from *Supporting a Loved One*, by the Canadian Mental Health Association.

Having a family member with a mental illness can be very stressful. Whether the ill person is a son, daughter, husband, wife, brother or sister, you will be affected by their illness too. A person with a psychiatric disorder often needs much love, help and support. At the same time, the problems, fears and behaviour of your ill relative may strain your patience and your ability to cope.

There are many different kinds of mental illness, and each has its own symptoms. During periods when your relative is ill, he/she may be demanding and disruptive, or extremely withdrawn and inactive. In fact, an ill person's behaviour may keep on changing because the symptoms may fluctuate.

Whether you suspect, or know for certain, that a member of your family has a psychiatric disorder, you will probably find that it helps to learn about the disorder.

Who is taking care of you?

When a loved one experiences a mental illness, their care and support can take a lot of time and energy. But your own needs are just as important, too. If you aren't well, it's harder to help someone else regain wellness. Here are some tips to think about.

1. Accept your own feelings and know that you are not alone

It is natural to feel many different emotions when a loved one is diagnosed with a mental illness. Other people experience the same challenges and complicated mix of emotions, just like you. Let yourself feel whatever you need to feel.

2. Learn more

Take time to learn more about mental illnesses. This will give you a better understanding of your loved one's experiences and help you see what they may be going through. You can find reliable information online, through provincial or territorial health services, and through community organizations.

3. Stay connected

Embarrassment, social stigma and fear can stop many family members from seeking help when a loved one is diagnosed with a mental illness. But that can isolate you at a time when you need the most support from others. Talk to trusted friends and family and let them know what you're experiencing. If you aren't sure where to go, try connecting with a community organization.

4. Join a support group

Support groups are a good place to share your experiences, learn from others, and connect with people who understand what you're going through. To find a local support group, contact a local community mental health organization like the Canadian Mental Health Association (CMHA). CMHA has branches all over Canada that offer a range of services that can help.

5. Take time for yourself

If you are caring for a loved one, your responsibilities may use up your physical and emotional energy. It's important to take time for yourself. It can help you recharge and give you a more balanced perspective toward any challenges you experience. Schedule opportunities that allow you to relax, have fun and get away so you can come back to your loved one with a healthier outlook. You can't care for someone else if you haven't cared for yourself first.

6. Seek help for yourself

Caring for a loved one who's unwell can be stressful. Long periods of stress can lead to mental health or substance use problems. Seek help if you find your own well-being slipping, and encourage family members to seek help if they need it. Mental illness can also have a big impact on family relationships. It's a good idea to seek counselling for the entire family.

7. Develop coping strategies for challenging behaviours

There may be times when a loved one shows strange or challenging behaviours that can make you feel confused, embarrassed, or scared. This can happen in public or in private. It's best to talk with your loved one's care team for strategies to manage challenging situations. Here are some tips:

- Learn more about your options.
- Plan the best strategies for the situation.
- Understand that this is not personal.
- Realize that some behaviours may be beyond your loved one's control. They may be as distressing to them as they are to you.

It's also important to tell your loved one (and their care team) what behaviours you aren't willing to tolerate. You have rights, too — you never have to tolerate dangerous or abusive behaviour.

Available resources

Complete the contact details for the resources available in your family member’s workplace so it’s easier for you to help them find support if they are struggling with their mental health. You may need to contact your family member’s HR department or union to collect this information.

Organizational resources

Contact name

Phone

Email

Employee assistance program

Organizational peer support team

Organizational critical incident response team

Employee’s union

Organizational chaplain

Extended health benefits provider

Crisis resources

Phone

Crisis Intervention and Suicide Prevention Center of BC (24 hours a day)

A volunteer organization committed to helping people help themselves and others deal with crisis.

crisiscentre.bc.ca

1.800.SUICIDE
(1.800.784.2433)

WorkSafeBC Crisis Support Line (24 hours a day)

Contact the WorkSafeBC Crisis Support Line if you or your family is in emotional crisis and you've been injured at work.

worksafebc.com/contact-us

1.800.624.2928

WorkSafeBC Critical Incident Response (9 a.m. to 11 p.m.)

Confidential program that helps workers who have experienced a traumatic event in the workplace.

worksafebc.com/contact-us

1.888.922.3700

310Mental Health Support (24 hours a day)

Access to emotional support, information, and resources specific to mental health.

crisislines.bc.ca

310.6789 (no need
to dial area code)

VictimLinkBC

Information and referral services to victims of family violence — please call 911 if you are in immediate danger.

1.800.563.0808

Honour House Society

Honour House provides free accommodation for first responders and their families while receiving medical care in Metro Vancouver.

honourhouse.ca

778.397.4399

First Responder Support Network

Provides educational treatment programs to promote recovery from stress and critical incidents experienced by first responders and their families.

frsn.org

1.415.721.9789

BC First Responders' Mental Health

Offers resources to help you support your colleagues, family and friends, and yourself.

bcfirstrespondersmentalhealth.com

N/A

Further reading

This list contains some reading material that can help families better understand the challenges of loving a first responder and supporting their mental health.

- *Emotional Survival for Law Enforcement: A Guide for Officers and Their Families*, by Kevin M. Gilmartin (2002)
- *A Hero Lives in My Family: A Story for Kids of First Responders*, by Dr. Susan Hunt (2015)
- *I Love a Cop: What Police Families Need to Know*, by Ellen Kirschman (2018)
- *I Love a Fire Fighter: What The Family Needs to Know*, by Ellen Kirschman (2004)