



TRRU McMaster

Cultural Competency: Understanding Canadian Public Safety Personnel

Public Safety Personnel (PSP), like firefighters, police officers, paramedics, dispatchers and correctional officers, work in important roles to keep communities safe. Public safety jobs have unique stressors and challenges that can impact PSPs' mental health.

In this training course, you will complete a series of modules to learn about trauma, stressors and their impact among PSP. After completing this training course you will have a better understanding of the types of experiences and needs PSP have in their line of work and you will be better equipped to support PSP.



Understanding Trauma and PTSD



The Impacts of Trauma among Public Safety Personnel



Mental Health Impact on Equity Deserving Groups (Minority Stress)



Added Stressors from Organizational Culture



The Physical & Emotional Costs of a 24/7 Job



Conflict and Disruption in the Family



Cumulative Stress and the COVID-19 Pandemic



Self-Care and Coping



Mental Health Supports



Trauma-Informed Care



Feedback

Understanding Trauma and PTSD



Learning Objectives:

After completing this lesson, you will be better able to:

- 1 Define trauma and common responses to traumatic events.
- 2 Describe Posttraumatic Stress Disorder (PTSD) and identify risk factors for the development of PTSD after trauma exposure.
- 3 Summarize key elements of common psychological treatments for PTSD and related conditions.

What is trauma?

Trauma results from an "event, series of events, or a set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects of the individual's functioning and mental, physical, social, emotional, or spiritual well-being" (SAMHSA, 2014, pp. 7)

Trauma comes in many shapes and sizes. Traumatic events can include things that happen to you, things that you see happening to someone else and things you hear about happening to someone else. It can happen once or many times.

Whether an event is traumatic or not depends on how someone experiences it and what they believe it means. This means that what one person thinks is traumatic might not be seen the same way by someone else.



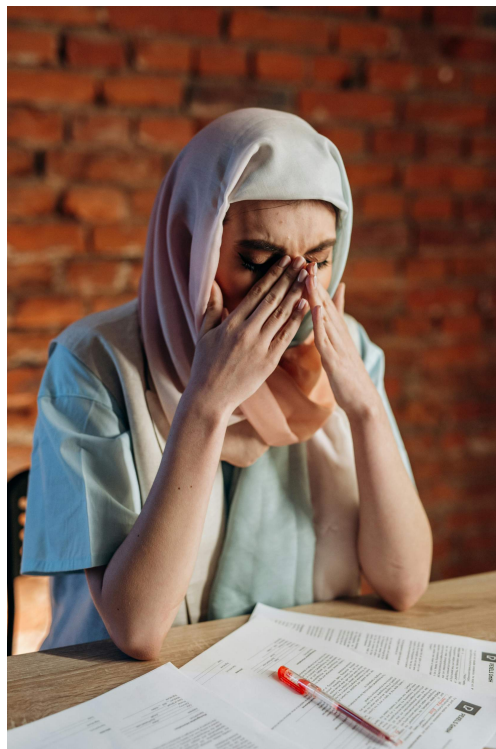
Responses to Trauma

The effects of trauma can also depend on the person. Some people may feel the negative effects of trauma right away, while others might experience them later. Trauma can affect a person in different ways, including emotionally, physically, mentally, and even in how they see the meaning of life (existential responses).

Click on each type of response below for some examples of common immediate responses to trauma.

Emotional Responses —

- Numbness and detachment
- Anxiety and fear
- Denial or constriction of feeling
- Depersonalization (e.g., feeling as if you are watching yourself move through life)



Physical Responses

- Faintness
- Sweating or shivering
- Greater startle responses
- Nausea and/or gastrointestinal distress



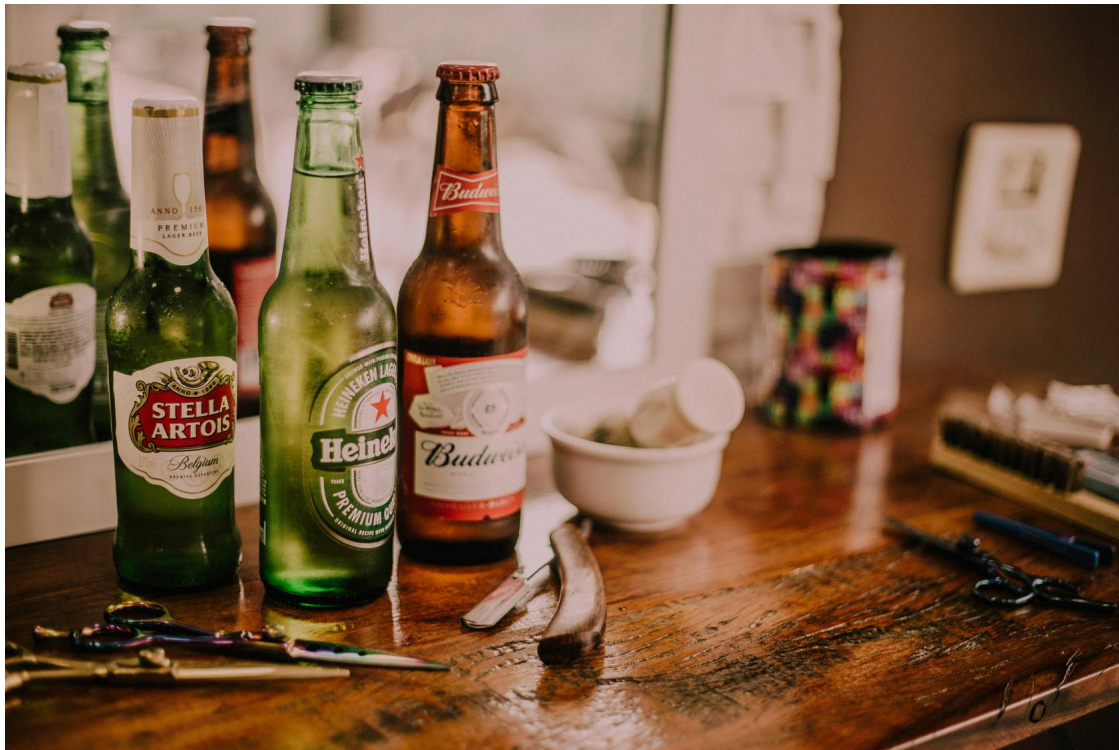
Cognitive Responses

- Difficulty concentrating
- Rumination or racing thoughts
- Distortion of time and space
- Memory problems (e.g., not being able to recall important aspects of the trauma)



Behavioural Responses —

- Sleep and appetite disturbances
- Avoidant behaviours
- Difficulty expressing oneself
- Increased use of alcohol, drugs and tobacco



Existential Responses —

- Intense use of prayer
- Loss of self-efficacy
- Despair about humanity
- Immediate disruption of life assumptions (e.g., fairness, safety, goodness, predictability of life)



Source: Adapted from Center for Substance Abuse Treatment (US). Trauma-Informed Care in Behavioral Health Services. Rockville (MD): Substance Abuse and Mental Health Services Administration (US); 2014. (Treatment Improvement Protocol (TIP) Series, No. 57.) Chapter 3, Understanding the Impact of Trauma. Available from:

<https://www.ncbi.nlm.nih.gov/books/NBK207191/>

Triggers and flashbacks are also two common experiences after trauma. Click on the tiles below to read about each.

Triggers

A trigger is something that reminds a person of a past trauma or part of a traumatic experience. It can be any kind of reminder, like a sound, smell, temperature, feeling, or something you see. Triggers can also be things like a specific season, holiday, or the anniversary of the event.

Flashbacks

A flashback is when someone feels like they are reliving a past traumatic experience as if it's happening again. During a flashback, the person often reacts as if the trauma is occurring right now. Flashbacks can happen when triggered by

CONTINUE

Knowledge Check

This knowledge check will help solidify your knowledge of trauma and responses to trauma. Answer the multiple choice questions below based on the course content above.

Which of the following best defines trauma?

- ☐ A single event that causes physical harm.
- ☐ An event or series of events experienced as harmful or life-threatening with lasting adverse effects on well-being.
- ☐ An event that is always life-threatening and causes immediate harm.
- ☐ Any negative event that happens to an individual.

SUBMIT

Which of the following is an example of a cognitive response to trauma?

-
- ☐ Numbness and detachment
 - ☐ Loss of self-efficacy
 - ☐ Sweating or shivering
 - ☐ Difficulty concentrating

SUBMIT

Which of the following is an example of an emotional response to trauma?

- ☐ Sweating or shivering
- ☐ Numbness and detachment
- ☐ Loss of self-efficacy

☐

Difficulty concentrating

SUBMIT

Which of the following is an example of an existential response to trauma?

☐

Loss of self-efficacy

☐

Numbness and detachment

☐

Difficulty concentrating

☐

Sweating or shivering

SUBMIT

Which of the following best defines a flashback?

- ☐ A vivid re-experiencing of a past traumatic event as if it were happening in the present.
- ☐ A momentary feeling of nostalgia triggered by a sensory experience.
- ☐ A recurring thought about a past event that is always under the individual's control.
- ☐ A mild memory of a past event that causes no emotional distress.

SUBMIT

CONTINUE

What happens to the body during trauma?

Fight, flight, or freeze. These three reactions are your body's way of trying to protect you when you are faced with something scary or dangerous. They are natural instincts that happen automatically, even if you don't consciously choose them.

1. Fight

This is when your body prepares to face danger head-on. You feel strong and ready to protect yourself. Your heart races, your muscles tighten, and your body gets ready to defend or fight back.

Example: If someone suddenly tries to harm you, you might feel a rush of energy, get angry, or fight to defend yourself.

2. Flight

This is when your body gets ready to escape or run away from danger. Your mind tells you to get out of the situation fast. Your heart speeds up, and you might feel a burst of energy that helps you run or leave quickly.

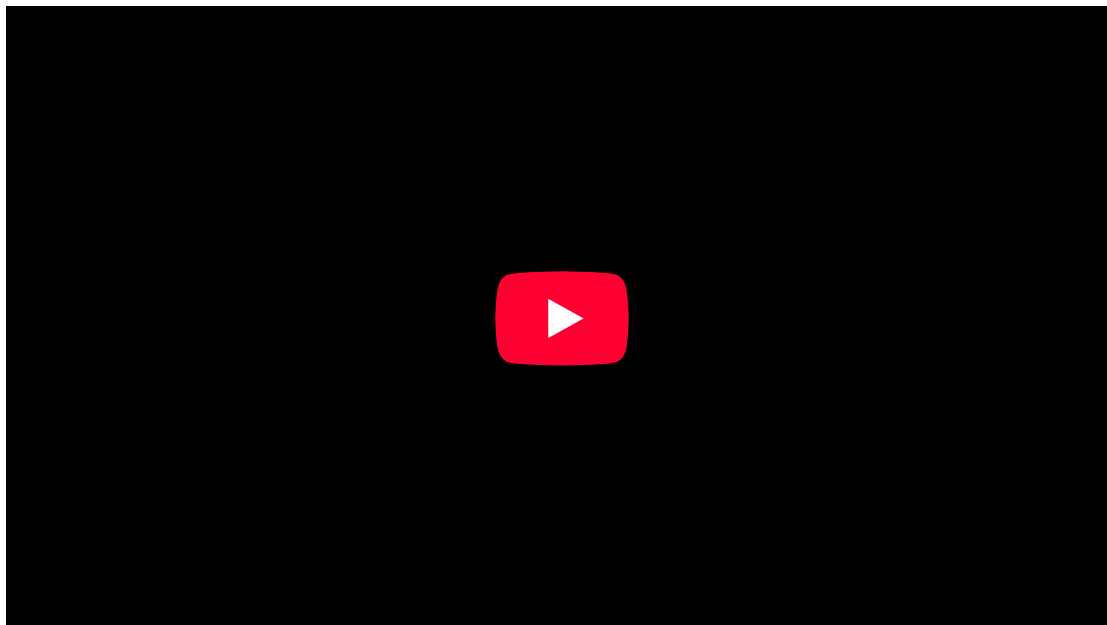
Example: If you see a dangerous animal, you might feel an urge to run away from it as fast as possible to stay safe.

3. Freeze

This is when your body feels stuck like it can't move or react at all. It's a defence mechanism that makes you go completely still, hoping that the danger won't notice you or that it will pass by.

Example: If you're scared, you might freeze in place, like when you see something dangerous but can't figure out what to do. Your body stays still and you feel paralyzed.

Watch the video below for a summary of the body's fight, flight and freeze response.



What is PTSD?

Posttraumatic stress disorder (PTSD) is a mental health diagnosis that is sometimes given to individuals after they experience a traumatic event or multiple traumatic events. Only a small number of individuals who experienced trauma will end up developing PTSD.

PTSD can involve several symptoms. Click the tiles below to read more about each of the four symptom clusters.

Re-experiencing Symptoms

Symptoms where the person can't stop thinking about the traumatic event. These thoughts might pop up unexpectedly and be hard to control, like flashbacks or nightmares.

Avoidance Behaviours

This is when someone tries to avoid anything that reminds them of the trauma. They might avoid certain places, activities, or even people that trigger memories of the event.

Negative Mood and Beliefs

This includes changes in how someone feels about themselves, others, or the world. They might feel numb or disconnected, or they may struggle with feelings like guilt or shame.

Changes in Arousal

This cluster involves being easily startled, feeling tense, or having trouble relaxing. It's when a person feels "on edge" a lot, which is a sign that their nervous system is stuck in a state of high alert.

Receiving a PTSD diagnosis at any point in your life is associated with a greater likelihood of being diagnosed with other trauma-related disorders, like mood disorders, anxiety disorders, substance use disorders and personality disorders.

Some people have suggested using the term "**post-traumatic stress injury**" instead of PTSD in order to focus the attention on the person's experience of trauma. This phrasing is meant to show that psychological trauma, like a physical injury, is something that happens to a person.

Case Example

Read the case example below for a depiction of what it was like for Kirsten to experience symptoms of PTSD after a car accident. Keep an eye out for symptoms that fall into the four symptom clusters of PTSD.

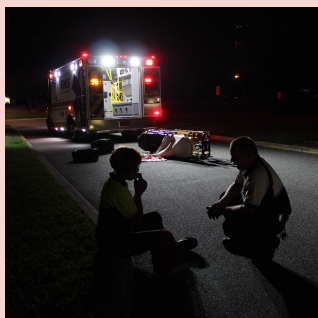
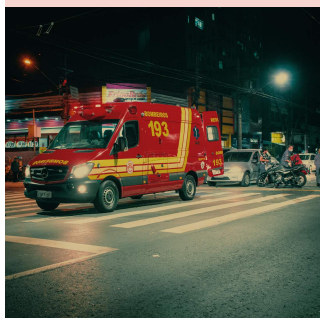
Kirsten was driving home from work when another car ran a red light and hit her on the driver's side. It was a terrifying moment—her car spun around, and she felt her heart race as the sound of crunching metal filled her ears. Thankfully, she wasn't seriously hurt, but the accident left her shaken.

In the days following the crash, Kirsten began to experience things she hadn't expected. Every time she got into a car, her palms would sweat, and her breath would become shallow. It was like her body went into fight-or-flight mode, even though she wasn't in danger. The memory of the accident would suddenly pop into her mind, causing her heart to race and making her feel dizzy and disoriented. Sometimes, it felt like she was reliving the moment all over again.

She also noticed that she became irritable and snapped at her family more than usual. Little things, like loud noises or being in traffic, would trigger feelings of panic. She couldn't focus at work, and she started avoiding driving altogether, even if it meant relying on others for a ride. Kirsten found herself withdrawing from friends and family, feeling disconnected, as though the world around her was happening without her.

At night, Kirsten had trouble sleeping. She kept having nightmares about the crash, waking up feeling scared and unable to calm down. Even when she wasn't dreaming, she would lie awake, her mind racing, unable to shut off the thoughts and feelings tied to the accident.

Over time, Kirsten realized that the accident had affected her far more than she initially thought. It wasn't just about physical recovery—it was about her mental and emotional healing, too.



CONTINUE

Risk Factors for PTSD

Not everyone who experiences a traumatic event will develop PTSD. Research shows us that some factors increase the chances of someone developing PTSD after they experience trauma.

These risk factors happen at different times. Pre-traumatic risk factors are present before a person goes through a traumatic event. Peri-traumatic risk factors occur during the traumatic event. Post-traumatic risk factors show up after the event has happened.

Read through the tabs below for more information about risk factors for PTSD.

**PRE-TRAUMATIC RISK
FACTORS**

**PERI-TRAUMATIC RISK
FACTORS**

**POST-TRAUMATIC RISK
FACTORS**

Pre-traumatic risk factors are things that happen before a traumatic event and increase a person's chances of developing PTSD after experiencing the trauma.

- Being female
- Having lower socioeconomic status
- Being younger at the time of trauma
- Less education
- Childhood hardships
- Race (minority status)
- Psychiatric history
- Family psychiatric history

**PRE-TRAUMATIC RISK
FACTORS**

**PERI-TRAUMATIC RISK
FACTORS**

**POST-TRAUMATIC RISK
FACTORS**

Peri-traumatic risk factors are things that happen during the traumatic event itself and increase a person's chances of developing PTSD afterward.

- Severity of trauma
- Perceived fear of death
- Physical injury
- Assaultive trauma
- Peri-traumatic dissociation (when a person feels disconnected or detached during or right after a traumatic event, as a way to cope with the shock or stress)

PRE-TRAUMATIC RISK FACTORS

PERI-TRAUMATIC RISK FACTORS

POST-TRAUMATIC RISK FACTORS

Post-traumatic risk factors are characteristics and events that happen after the traumatic event and they raise a person's risk for the development of PTSD.

- Lack of social support
- Financial stress
- Subsequent life stressors

Watch this brief video for an overview of what PTSD is and how it this diagnosis can affect someone's life.





What is trauma? The author of "The Body Keeps the Score" explains, with Bessel van der Kolk Subscribe to Big Think on YouTube ►►

<https://www.youtube.com/channel/UCvQECJukTDE2i6aCoMnS-Vg> Up next ►►

How to heal trauma with meaning: A case study in emotional evolution | BJ Miller

<https://www.youtube.com/c/bigthink/search?query=trauma> Contrary to popular belief, trauma is extremely common.

VIEW ON YOUTUBE >

Psychological Treatments for Trauma-Related Conditions

Psychological treatments for PTSD and other trauma-related conditions are ways to help people feel better by talking about their experiences and learning new ways to cope. These treatments can help reduce symptoms and improve everyday life. Here are some common types:

1. Cognitive Behavioural Therapy (CBT)

CBT is a type of therapy where you work with a therapist to understand how your thoughts and feelings are affecting your behaviour. For PTSD, it focuses on changing unhelpful thoughts about the trauma and teaching healthier ways of thinking.

How it works:

- You talk about the trauma and how it affects you.
- The therapist helps you change negative thoughts, like "I'm in danger all the time," into more balanced ones, like "I'm safe now and I can handle my feelings."
- You learn practical skills to deal with stress and anxiety.

2. Prolonged Exposure Therapy (PE)

Prolonged Exposure (PE) therapy is a type of CBT that focuses on gradually helping you face situations or memories that make you anxious in a safe way. The idea is that over time, facing the trauma-related thoughts and situations helps reduce fear and anxiety.

How it works:

- You start by talking about the traumatic event in detail with your therapist.
- Then, you slowly face situations you've been avoiding, like driving again after a car accident, until they no longer cause so much fear.

3. Eye Movement Desensitization and Reprocessing (EMDR)

EMDR is a type of therapy that helps people process traumatic memories by using a technique called bilateral stimulation, which often involves the therapist guiding you with eye movements. This helps your brain process the trauma more naturally and reduces emotional distress.

How it works:

- You focus on a traumatic memory while following the therapist's hand moving back and forth.
- Over time, the memory becomes less upsetting and the emotional charge decreases.

4. Group Therapy

Group therapy allows people with PTSD to meet in a safe space with others who understand what they're going through. It can feel comforting to talk with others who have had similar experiences. Group therapy helps reduce feelings of isolation.

How it works:

- A therapist leads the group, where members share their experiences and coping strategies.
- It helps build a sense of community and connection, which is important for healing.

5. Mindfulness and Relaxation Techniques

Mindfulness teaches you to focus on the present moment without judgment, which can help calm your mind when you feel overwhelmed by traumatic memories or anxiety.

How it works:

- You learn techniques like deep breathing, meditation, and body relaxation exercises to help you stay calm and grounded.
- Over time, mindfulness can help reduce stress and improve emotional well-being.

These treatments are proven to help many people with PTSD. They provide a safe space to work through difficult emotions and memories while teaching skills to feel more in control and less overwhelmed by the past. Working with a therapist is key to getting the most benefit from these treatments.

CONTINUE

Knowledge Check

This knowledge check will help solidify your knowledge on trauma and responses to trauma. Answer the multiple choice questions below based on the course content above.

Which of the following is an example of a negative mood and belief symptom of PTSD?

- ☐ Having flashbacks or nightmares about the trauma
- ☐ Feeling numb or disconnected from others
- ☐ Feeling tense or easily startled
- ☐ Avoiding places that remind you of the trauma

SUBMIT

Which of the following best describes the 'freeze' response during a traumatic event?

- ☐ Escaping or running away from danger
- ☐ Preparing to face danger head-on with increased energy
- ☐ Engaging in prayer or spiritual practices
- ☐ Feeling stuck and unable to move or react

SUBMIT

Which of the following is an example of a re-experiencing symptom of PTSD?

- ☐ Feeling tense or easily startled

- ☐ Feeling numb or disconnected from others
- ☐ Having flashbacks or nightmares about the trauma
- ☐ Avoiding places that remind you of the trauma

SUBMIT

Which of the following is a key feature of Cognitive Behavioural Therapy (CBT) for PTSD?

- ☐ Focusing on changing unhelpful thoughts about the trauma
- ☐ Gradually facing situations or memories that cause anxiety
- ☐ Using bilateral stimulation to process traumatic memories
- ☐ Meeting in a group setting to share experiences

SUBMIT

Which of the following is an example of a post-traumatic risk factor for developing PTSD?

- ☐ Perceived fear of death
- ☐ Severity of trauma
- ☐ Childhood adversity
- ☐ Lack of social support

SUBMIT

Summary

This lesson explored the complexities of trauma and PTSD, focusing on their definitions, symptoms, and treatment options. It highlighted the diverse ways individuals

experience and respond to trauma. Here are some key takeaways:

1. **Definition of Trauma.** Trauma is an event perceived as harmful, impacting mental and emotional health.
2. **Individual Responses to Trauma.** Trauma responses differ and can be emotional, physical, cognitive, behavioral, or existential.
3. **PTSD symptoms.** PTSD manifests through re-experiencing, avoidance, negative mood, and heightened arousal.
4. **Treatment options.** Therapies like CBT, EMDR, and mindfulness are effective for trauma recovery.

Understanding trauma and PTSD is a vital step toward fostering healing and resilience.

Lesson References

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The Impacts of Trauma among Public Safety Personnel



Learning Objectives

After completing this lesson, you will be better able to:

- 1 Identify the various types of trauma exposure common to PSP.
- 2 Recognize the varied impacts of trauma on PSP.
- 3 Understand how a perceived trauma hierarchy can affect help-seeking behaviours among PSP.
- 4 Identify protective factors and coping strategies that are helpful in supporting PSP after trauma exposure.

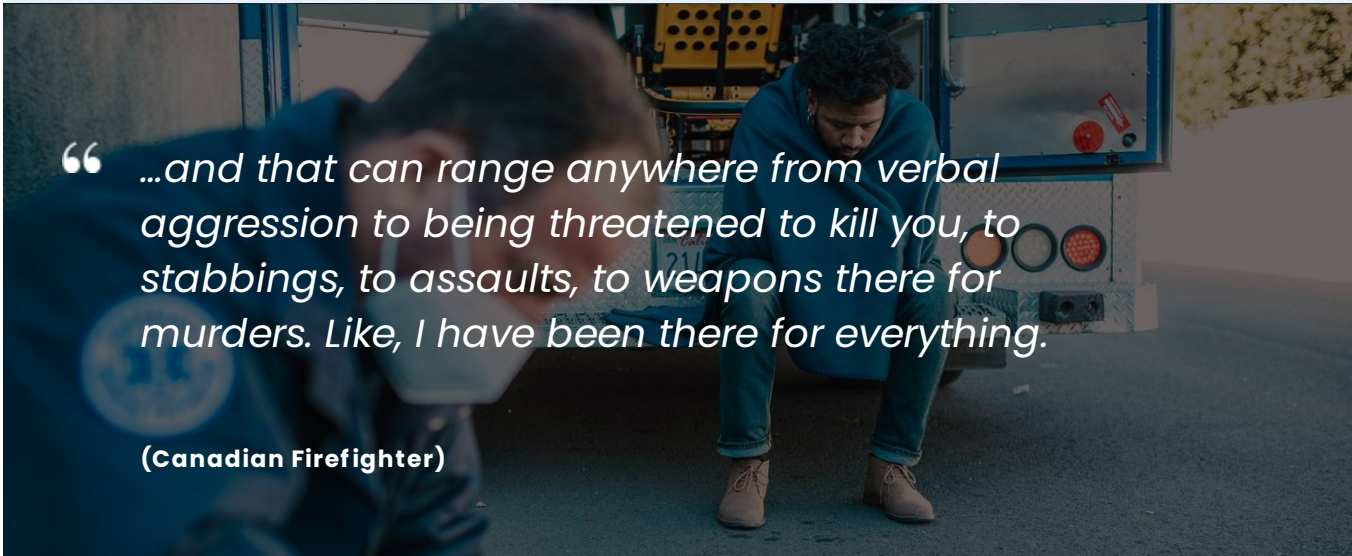


Trauma Exposure

PSP are regularly exposed to a range of potentially traumatic events (PTEs), both directly and indirectly, due to the nature of their work. PPTEs are traumatic events that may lead to mental health challenges (Ricciardelli et al., 2018). These events can include experiences of death, injury, sexual violence, and harassment, all of which can significantly impact PSPs' mental health. Research shows that PPTEs are linked to various mental health issues, such as PTSD, depression, anxiety, substance use, and suicidal thoughts.

PSP may also face potentially morally injurious events (PMIEs), where they either commit, witness, or fail to prevent actions that conflict with their moral beliefs. For example, they may be required to use more force than they are comfortable with, leading to anger, shame, guilt, betrayal, and worthlessness.

In addition to these types of events, PSP deal with other stressors from organizational and operational challenges. Organizational issues can include staff shortages or inconsistent leadership, while operational stressors include shift work, sleep deprivation, and public scrutiny. Research shows that both PPTEs and these workplace stressors are linked to mental health symptoms in PSP.

A photograph of a firefighter sitting on the back of a fire truck, looking down. The firefighter is wearing a blue jacket and pants. The background shows the side of the fire truck with various equipment and lights. A quote is overlaid on the image.

“...and that can range anywhere from verbal aggression to being threatened to kill you, to stabbings, to assaults, to weapons there for murders. Like, I have been there for everything.

(Canadian Firefighter)

The Impact of Trauma on PSP

Research tells us that PSP may experience a number of personal and work-related impacts in the aftermath of trauma exposure.

Personal Impacts

Trauma can change the way Public Safety Personnel (PSP) see life, often making them have a more negative view of the past and either very high or very low hopes for the future. This can make everyday life harder. PSP may feel like nothing will ever get better, that their opinions don't matter, or that their organization or government doesn't care about them. Their relationships with friends, family, and partners can also be affected. Trauma can make them lose trust in others and have negative beliefs about people. This can lead to problems like broken marriages, tense family relationships, and more stress and anger at home. Trauma can also change different parts of a PSP's personality, like their motivation, emotions, and self-esteem.

Click through the tabs below for more examples of how trauma in the workplace can impact a PSP's physical, mental, and social well-being.

Physical Impacts —

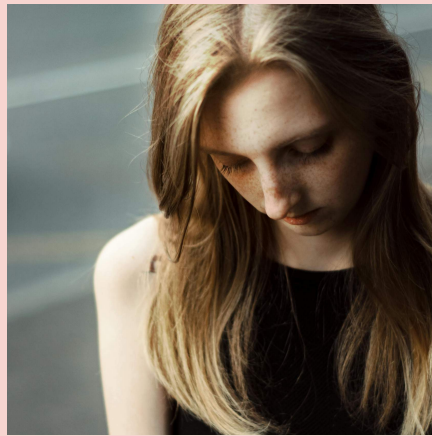
- headaches
- back pain
- digestive issues
- cardiac arrest

Psychological Impacts

- crying
- feeling unhappy
- anxiety and anger
- posttraumatic stress disorder (PTSD)
- increased substance use
- suicide ideation

Social Impacts

- social exclusion
- avoidance
- cynicism towards others



Work-Related Impacts

Research shows that experiencing trauma or symptoms related to it can lead to more sick days. Studies also show that these factors hurt workplace productivity and performance. PSPs report having problems with things like relationships at work, workload, resources, and administrative tasks. They also face challenges with things like staying alert, where they work, and interacting with the public.

Meet Ward, a firefighter from Alberta, as he shares his experience after exposure to a traumatic event at work. Pay attention to his descriptions of personal impacts after the trauma.

 YOUTUBE



Alberta firefighter shares his experience with PTSD

Veteran firefighter Ward Redwood struggled with post-traumatic stress disorder for years after responding to a fatal crash scene in 2011.

VIEW ON YOUTUBE >

Reflection

After hearing Ward's story, take some time to reflect on the following questions. Click the drop down menus after reflecting to read some possible answers.

What makes this work call a traumatic event? —

A traumatic event, or PTE, can include experiences of death, injury, sexual violence, and harassment. Ward describes how the event he experienced involved the death of multiple teenagers. Notably, traumatic events involving children or young adults may be especially difficult for PSP.

What symptoms of PTSD did Ward experience after the trauma?

There are four symptoms clusters of PTSD: re-experiencing, avoidance, changes in mood and cognitions, and arousal. Ward mentioned a few of these types of symptoms, including nightmares, sleepless nights, memory problems, difficulty concentrating, lack of enjoyment, and lack of positive emotions (e.g., love).

What social impacts did Ward experience as a result of the trauma?

Ward described pushing the trauma down and not talking about it. He subsequently went through a divorce and became a single dad. He described a lack of loving feelings, which may have impacted his relationships with loved ones, like his children.

What work-related impacts did Ward experience as a result of the trauma?

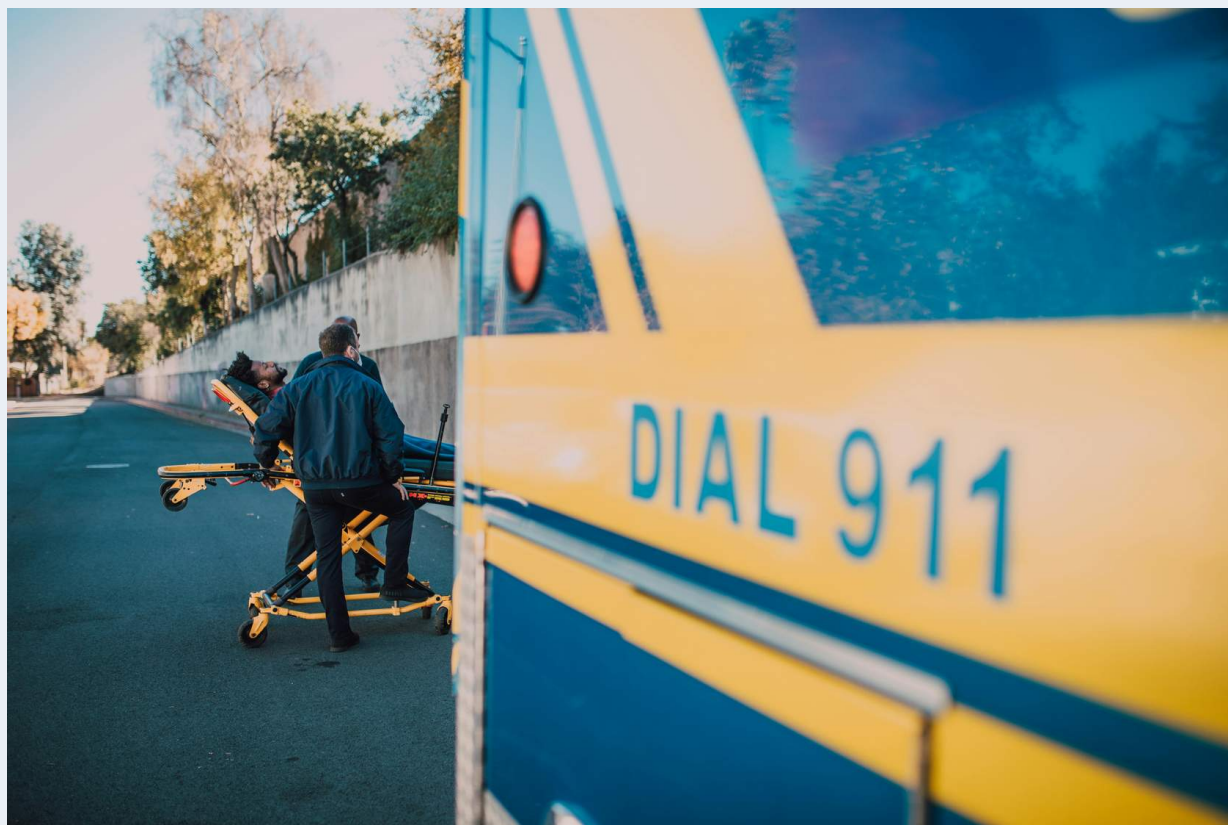
After receiving support for his mental health, Ward retired from firefighting earlier than initially planned.

CONTINUE

Trauma Hierarchy and Help-Seeking

Research shows that PSP often create a "trauma hierarchy," where they rank experiences as more or less traumatic based on the event and their role in it. For example, being directly involved in restraining an armed person might be seen as more traumatic than arriving after the situation is over. Similarly, one big traumatic event might be seen as more serious than many smaller events building up over time.

This trauma hierarchy can cause some experiences to be overlooked or not taken as seriously. It also supports the idea that trauma is different for everyone and may prevent PSP from seeking help. The trauma hierarchy can lead to stigma and discrimination around mental health. It's important to recognize and challenge this way of thinking to better support PSP dealing with any type of trauma.



"Trauma hierarchy" refers to **the way experiences are categorized, ordered and interpreted as more or less traumatic**, based on both the event and the PSP's role in the actual event. The existence of a trauma hierarchy can lead to discrediting or valuation of some experiences impacting the motivation for seeking timely help.

The trauma hierarchy among PSP is based on the idea that some experiences, like directly being involved in a traumatic event, are seen as more serious than others, such as just witnessing or hearing about trauma. This way of thinking ignores how different people experience distress and how their past trauma might affect them. PSP often find it hard to talk about the impact of the ongoing trauma they face at work. The trauma hierarchy can make it harder for them to ask for help for what they feel is "less serious" trauma, leading to denial, avoidance, or not seeking treatment. As a result, they may feel like their trauma isn't taken seriously.

To help all PSP dealing with trauma, it's important to break down the trauma hierarchy. This can encourage them to seek support and reduce the stigma around mental health.

Leaders in organizations can make a big difference by creating programs that reduce stigma and encourage seeking help. They can also update treatment plans regularly. Addressing the trauma hierarchy can lead to earlier support, fewer untreated mental health problems, and a healthier workforce, which will ultimately reduce missed workdays.

Protective Factors and Coping

Research shows that PSP with more social support are less likely to develop PTSD or major depressive disorder. Support from coworkers, family, and friends plays a key role in helping PSP stay resilient. Cultural values and community support also help build resilience to trauma. Programs that offer support and education have been shown to improve symptoms of depression, burnout, anxiety, sleep problems, and overall well-being.

PSP use different coping strategies to deal with trauma. Some are healthy, like relying on social support. Others are unhealthy ones, like withdrawal, avoidance, or substance use. Many PSP also use adaptive coping methods such as learning about mental health challenges, practicing self-reflection, and seeking treatment, including therapy or medication. Research also shows that some PSP experience posttraumatic growth as they recover and improve their well-being.

Social Support

Support from co-workers, friends and family are key to PSP's resilience

Psycho-education

Research shows that having supportive programs and psycho-education helps with improving symptoms of depression and anxiety.

Adaptive coping strategies

Adaptive coping strategies such as self-reflection, self-reliance, education and treatment help PSP

CONTINUE

Knowledge Check

This knowledge check will help solidify your knowledge of PSP's experiences with trauma. Answer the multiple choice questions below based on the course content above.

Which of the following is a personal impact of trauma exposure commonly experienced by PSP?

- ☐ Loss of trust in others
- ☐ Increased workplace productivity
- ☐ Enhanced physical health
- ☐ Improved emotional regulation

SUBMIT

Which of the following statements best describes the concept of trauma hierarchy among PSP?

- ☐ Trauma hierarchy refers to the categorization of traumatic events based on their perceived severity and the PSP's role in the event.
- ☐ Trauma hierarchy ensures that all traumatic experiences are treated equally regardless of their nature.
- ☐ Trauma hierarchy is a structured approach to documenting traumatic events for organizational records.
- ☐ Trauma hierarchy is a method used by PSP to prioritize their work tasks after a traumatic event.

SUBMIT

Which of the following is a key reason why dismantling the trauma hierarchy is important for PSP?

-
- ☐ It ensures that only severe trauma cases are prioritized.
 - ☐ It eliminates the need for organizational support programs.
 - ☐ It encourages PSP to seek help for all forms of trauma.
 - ☐ It reduces the workload of PSP by categorizing trauma.

SUBMIT

Which of the following are protective factors that help PSP build resilience to trauma?

- ☐ Social support from co-workers, family, and friends
- ☐ Withdrawal and avoidance behaviors
- ☐ Cynicism towards others

☐

Access to psycho-education programs

☐

Substance use as a coping mechanism

SUBMIT

Which of the following is a work-related impact of trauma exposure commonly experienced by PSP?

☐

Improved workplace productivity

☐

Enhanced interpersonal relationships

☐

Increased sickness absences

☐

Reduced operational challenges

SUBMIT

Summary

This lesson examined the trauma faced by PSP on the job and the effects on their lives. It emphasized understanding trauma, seeking help, and building resilience. Here are some key takeaways:

1. **Identify trauma types.** Understand the various traumatic events PSP face in their roles.
2. **Recognize personal impacts.** Acknowledge how trauma can affect relationships and self-view.
3. **Challenge trauma hierarchies.** Validate all trauma experiences to promote seeking help.
4. **Utilize coping strategies.** Leverage peer support and adaptive methods to build resilience.

Remember, recognizing and addressing trauma is key to fostering recovery and resilience.

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Mental Health Impact on Equity Deserving Groups (Minority Stress)





Learning Objectives

After completing this lesson, you will be better able to:

- 1 Define minority stress.
- 2 Understand the relationship between equity deserving groups and minority identities.
- 3 Recognize the mental health impact of minority stress on PSP with minority identities.
- 4 Describe the continuum of minority stress.
- 5 Recognize the impact of minority stress on PSP who identify with a minority group.

Introduction

A background image of dark, choppy ocean waves under a dim, overcast sky, creating a somber and contemplative mood.



The mental health impacts on equity-deserving groups are researched and studied under the concept of minority stress. This lesson will focus on minority stress that persons from equity-deserving groups experience in relation to their identity.

In this lesson, "**people with minority identities**" refers to individuals from equity-deserving groups in Canada. The concepts of status and identity are closely linked:

- **Status** is a social label that can be assigned or claimed, like having an equity-deserving status.
- **Social identity** is how someone personally identifies with a specific minority group, such as being a sexual minority.

Equity-deserving status refers to people or groups who face disadvantages or discrimination because of things like race, gender, disability, or sexual orientation. These groups are recognized as needing special support to ensure they have equal opportunities and fair treatment. When someone with an equity-deserving status recognizes their membership in a particular group, it becomes a key part of their identity. External stressors often relate to status, while internal stressors are tied to identity (which will be explained further).

Research shows that people with these identities face unique stress that affects their health and well-being. In Canada, the following groups are considered equity-deserving:

1. Sexual and gender minorities
2. Indigenous communities
3. Persons with disabilities
4. Persons of colour / visible minorities

People can have multiple minority identities. For example, someone can be both a person of colour and a sexual minority.

What is minority stress?

Minority stress refers to the extra psychological and emotional pressure that people from marginalized or minority groups feel because of prejudice, discrimination, and the fear of being treated unfairly.

It can come from things like harmful stereotypes, being excluded socially, or even everyday situations where someone feels they are treated differently because of their identity, such as being part of a racial minority, LGBTQ+ community, or having a disability. Over time, this added stress can affect both mental and physical health.

Minority stress is defined as the unique, ongoing, and uncontrollable stress that a person experiences, in addition to regular life stress, because of their minority identities.

Unique

It is additional to the stress experienced by all people and requires additional adaptation efforts.

Chronic

It is related to relatively stable social and cultural structures.

Uncontrollable

It is beyond the person's capacity for control and resistance as it is socially based.

Watch the video below for an overview of minority stress, including the theory it is based on, and examples of the types of stressors that may be experienced.

 **YOUTUBE**



Minority Stress Theory

Introduction to Meyer's (2003) Minority Stress Theory Minority stress theory was developed by Ilan H. Meyer in the early two thousands to provide a framework for understanding stress processes in minority group members and to help contextualize negative health outcomes observed among minorities. All music contained within this video licensed under creative commons.

VIEW ON YOUTUBE >

CONTINUE

Minority Stress Framework

The minority stress framework helps explain how people with minority identities face extra stress at work, which can harm their mental health. Research shows that:

- People from minority groups experience more stress because of their stigmatized identity.
- This stress can lead to emotional struggles, problems in relationships, and negative thinking, all of which increase the risk of mental health issues.
- These stress-related challenges can make it more likely that stigma will contribute to mental health problems.
- Overthinking or focusing too much on stigma is what connects stress from stigma to emotional distress.

By understanding these stressors, organizations can recognize the difficulties faced by minority individuals and offer the right support to help them succeed at work.



Components of the Framework

The minority stress framework includes 5 key components.

- **Identity:** stress that a person experiences because of their status and identity as belonging to an equity deserving minority community.
- **Additional stress:** the stress that a person experiences over and above the general life stressors.
- **Socially based stress:** stress that comes from social conditions, institutions, structures and forces relating to their stigmatized identities.

- **Stress from denigrating experiences:** stress that stems from prejudice, discrimination, micro-aggression and their correlates and have an impact on their mental and physical health.
- **Impact on mental health:** the cumulative effect of these stress is adverse mental health outcomes.

Research suggests that minority stress may be associated with adverse mental health outcomes such as:

- Posttraumatic stress disorder (PTSD)
- Mood disorders (depression, bipolar disorders)
- Anxiety disorders
- Substance use disorders
- Body image disturbances
- Eating disorders
- Suicide ideation and attempts

Research on the impact of minority stress on the mental health of PSP is an under-researched area. Ongoing research from the Trauma and Recovery Research Unit seeks to address this gap.

The Process and Types of Minority Stress

There are three processes of minority stress:

- 1 External, **objective stressful events** and condition
- 2 **Expectation** of such events and **vigilance** such expectations require
- 3 **Internalization** of negative societal attitudes

A Continuum of External (Distal) and Internal (Proximal) Stressors

External (Distal) minority stressors are external events such as discrimination, violence, microaggressions, hate crimes, and exclusion.

Internal (Proximal) minority stressors are internal experiences, including feelings of internalized homophobia, rejection sensitivity, identity concealment, and internalizing negative cultural stereotypes or attitudes.

These stressors can negatively affect the mental health, physical health, and overall well-being of individuals with minority or intersectional identities.

Here are some key distal and proximal stressors in the minority stress framework:

INTERNALIZED NEGATIVITY

HYPERVIGILANCE

DISCRIMINATION AND
VIOLENCE

Internalized negativity, like homo/bi/transphobia, happens when negative beliefs from society about minority groups are turned inward. When people realize they are part of a minority group, they often adopt the negative attitudes, stereotypes, and judgments that society has about their group. This can lead to increased mental and emotional stress.

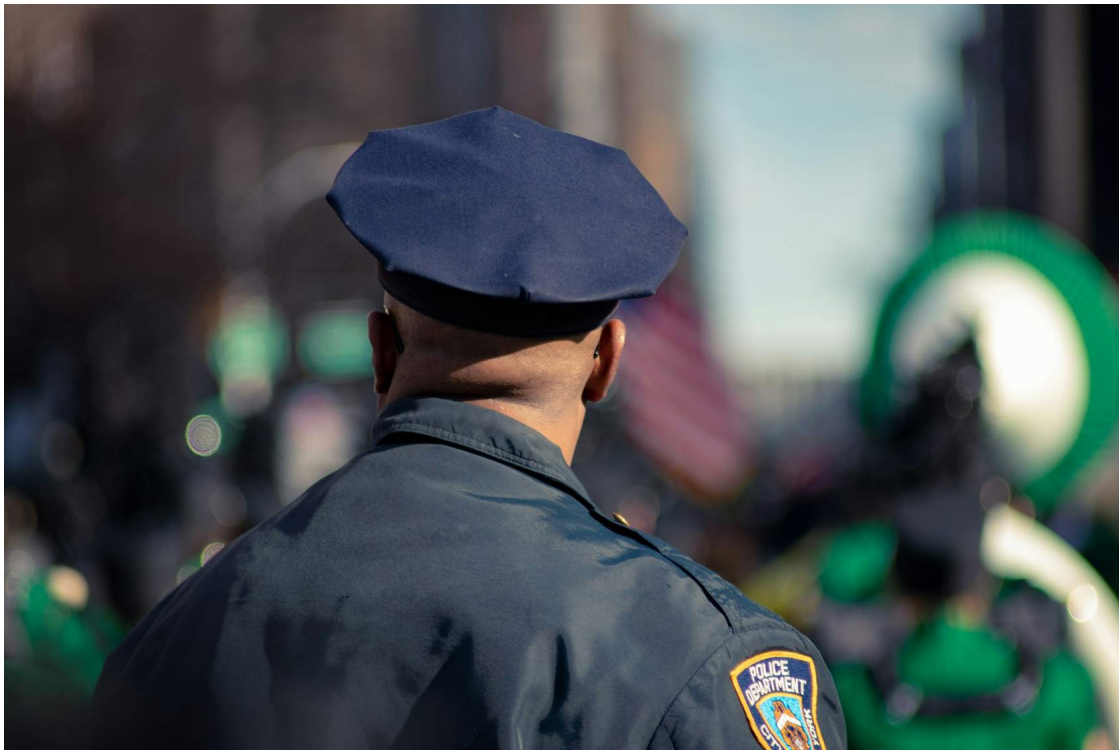


INTERNALIZED NEGATIVITY

HYPERVIGILANCE

**DISCRIMINATION AND
VIOLENCE**

When people feel that others judge them because of their minority identity, they may start being extra cautious or on guard as a way to protect themselves. Over time, this constant alertness can become overwhelming, leading to hypervigilance. This stress makes people feel fearful and mistrustful when interacting with others outside their group and can also cause them to feel isolated or disconnected from society. As a result, stigmatization can hurt their self-esteem, job opportunities, and ability to fit in socially.



INTERNALIZED NEGATIVITY

HYPERVIGILANCE

**DISCRIMINATION AND
VIOLENCE**

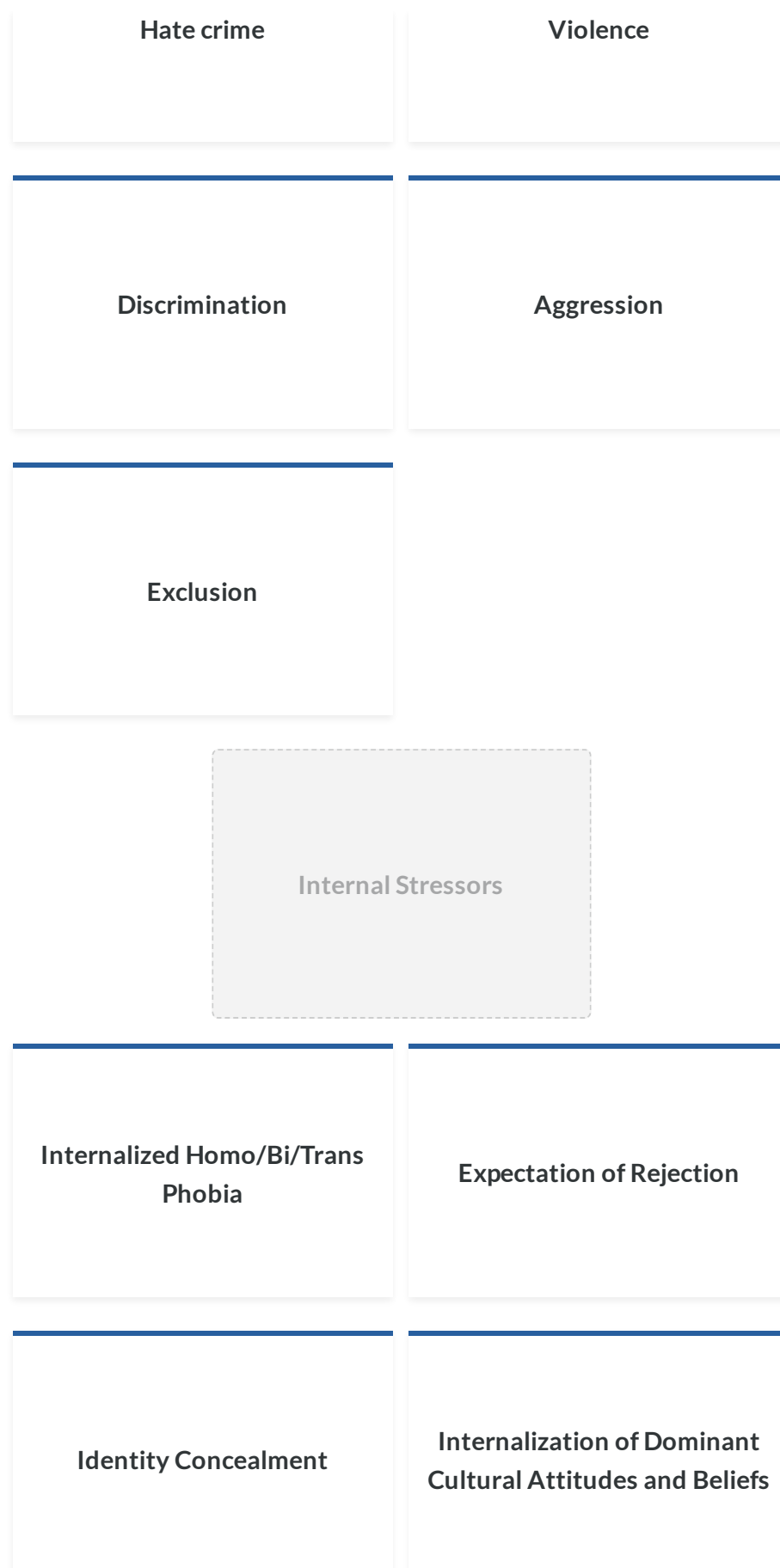
The main sources of minority stress come from rejection, discrimination, and violence that people experience because of their minority identity. These negative experiences have a strong impact because they trigger deep feelings, like the fear of being rejected or the expectation of violence, which can be even more stressful than the event itself.



Based on your learnings of the types of minority stressors, complete the card sorting task below. Drag and drop the top card to either the "External Stressors" or "Internal Stressors" card deck based on the above content.

External Stressors

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CONTINUE

Knowledge Check

This knowledge check will help solidify your knowledge on minority stress. Answer the multiple choice questions below based on the course content above.

What is the best definition of minority stress?

- ☐ Stress that arises from prejudice, discrimination, and social exclusion faced by minority groups.
- ☐ Stress that only affects individuals in high-stress professions.
- ☐ Stress experienced by all individuals in their daily lives.
- ☐ Stress caused by personal failures and lack of resilience.

SUBMIT

Which of the following is an example of an internal/proximal stressor?

- ☐ Exclusion from social activities
- ☐ Hate crimes
- ☐ Discrimination in the workplace
- ☐ Internalized negativity, such as internalized homophobia

SUBMIT

Which of the following is NOT a component of the minority stress framework?

- ☐ Stress from social conditions and structures

- ☐ Stress from internalized societal attitudes
- ☐ Stress from acute physical injuries
- ☐ Stress from prejudice and discrimination

SUBMIT

What does social identity mean?

- ☐ A social label assigned by society to individuals.
- ☐ How someone personally identifies with a specific minority group.
- ☐ The legal status of an individual in society.
- ☐ The professional role someone holds in their workplace.

SUBMIT

Which of the following is an example of an external/distal stressor?

- ☐ Hate crimes
- ☐ Rejection sensitivity
- ☐ Identity concealment
- ☐ Internalized negativity

SUBMIT

CONTINUE

Resilience and Minority Stress

People from equity deserving groups who face minority stress are not just victims of it—they also have strengths that help them cope and be resilient. Having a minority identity can bring both stress and the ability to bounce back from it.

Personal and group resources for coping with minority stress:

- **Personal resources** are individual qualities, like personality, that help people deal with stress.
- **Group resources** are support systems within a community that everyone in that group can access.

When group support is missing, even strong individuals may struggle to cope. Group-level resources are very important in shaping how well people can manage stress and stay resilient.

Click on each tile in the slide deck below for some examples of the mental health benefits of group resources.

Supportive Environment

Being closely connected to a minority community can provide a supportive social

1 of 5

environment where people are not judged or stigmatized.

Shared Perspective

It helps people see their situation in a new light, as they can relate to others who share their experiences, rather than comparing themselves to the dominant culture

2 of 5

Emotional Validation

The group validates and understands the experiences and feelings of its members.

3 of 5

Being part of the group

Group Pride

Minority communities create supportive values, norms, and practices that help people feel proud of their identity, rather than feeling stigmatized by the broader culture.

Key Resiliency factors

Resilience is the ability to bounce back and stay strong after facing challenges, stress, or difficult situations. It's about coping with tough times, learning from them, and finding ways to keep going.



Resiliency Factors

- Social support and acceptance
- Pride in their identity
- Psychosocial/medical support
- Self-acceptance
- Openness and agency
- Engagement in social justice
- Sense of community

Resilience factors for dealing with minority stress include having support from others, access to mental health or medical help, accepting oneself, being open, taking action,

and growing from difficult experiences. Getting involved in social justice or activism can be an important way to build resilience. Feeling connected to a community and being proud of one's identity are also key to staying strong when facing minority stress.

The need for structural resilience

Focusing only on a person's resilience and coping skills, while ignoring the impact of social oppression, can make it seem like the person isn't strong enough to handle the stress. It's important to make positive changes in society and improve systems and structures at the organizational level to better address minority stress.

Public Safety Personnel's Experiences with Minority Stress

PSP who belong to various equity deserving minority groups may experience minority stress in the workplace. Research from the Trauma and Recovery Research Unit at McMaster University during the COVID-19 pandemic shed light on some of these experiences. Read the following quotes from Canadian PSP to gain insight into the experience of minority stress.



"Two conflicting worlds I find when it comes to the label of PSP and a member of the LGBTQ+ community. It's one of those things that you're so proud to be on one aspect. So being a

PSP there's always that relation to social media posts or conversations you have with friends or family and the public about these individuals, these men and women who are doing extraordinary jobs for the safety of others in the public atmosphere. So you want to identify with that crowd. But when it comes to being... identifying as a member of the LGBTQ+ community there's a different... you don't want to so much be on top of that identifiable remark. You don't jump at the opportunities and say I'm also that too in a public atmosphere specifically."



"There have been an accumulation of calls in my role as a PSP where a person that I'm assisting, whether it's on a 911 call or in person like hands on patient care, where they're a victim of homophobia or they're a victim of their attack because of a conversation that they're participating in or something

they were standing up for. And having those exposures and incidents in the back of my memory make me very hesitant to be very vocal about something. Because I've had a call taken both by 911 and been on scene with a person who have said, called someone out for their homophobic views and that person happened to have a really well intentioned sucker punch for that person. And so that's why I compartmentalize and that's why I kind of read the room first because I am in a very unique position to have been exposed to these people in our society who have been victims of violence in that regard and I don't want to become that same survivor of violence."

Case Example

Read the following case example of Alex, a firefighter, who experiences minority stress in the work place. Pay attention to Alex's experience with both internal/proximal and external/distal stressors.

Alex is a 34-year-old firefighter who identifies as a gay man and is part of a racial minority. He has been working for the fire department for 10 years. Alex is passionate about his job and has always worked hard to gain the respect of his peers. However, he faces daily challenges that impact his mental health and well-being, stemming from several stressors related to his minority identities.

Alex regularly experiences discriminatory comments and microaggressions from some of his coworkers. For example, during training sessions, a few colleagues make offhand jokes about LGBTQ+ people or comment on how "tough" they expect a firefighter to be, implying that being gay might make him less capable in the field. These comments are hurtful and isolating, yet Alex feels powerless to address them directly, fearing backlash or being labeled as overly sensitive.

After shifts, some of the team members go out for drinks or hang out together. Alex has noticed that he is often excluded from these activities. While no one explicitly tells him he isn't welcome, the subtle exclusion feels uncomfortable. He suspects that his sexual orientation and racial identity are factors in being left out, but he isn't certain and doesn't want to confront anyone about it.

The department has no visible LGBTQ+ representation, and there are no specific policies or resources addressing the needs of sexual minorities. Alex feels this absence of representation makes it harder to feel supported or safe in the workplace. He has never seen an LGBTQ+ firefighter in a leadership role, which further contributes to his sense of isolation.

Despite the progress he has made in his career, Alex often feels like he needs to hide parts of himself to fit in. He has internalized societal stereotypes about being gay and sometimes worries that his coworkers perceive him as less capable or professional because of his sexuality. This internalized stigma makes him hesitant to fully express himself at work, especially in leadership situations or when interacting with senior officers.

Alex constantly anticipates discrimination or rejection. For example, he feels anxious during team-building exercises or situations where he might have to reveal personal details. He fears that coming out at work might lead to rejection or even discrimination, and he worries that speaking out about his experiences with discrimination could jeopardize his career.

Alex often feels pressured to conceal his identity, particularly in social situations within the department. At work, he avoids talking about his personal life, especially when his colleagues discuss their spouses or families. He doesn't bring up his partner and stays quiet during conversations that might reveal his sexual orientation, even though it feels emotionally draining to constantly hide this part of himself.

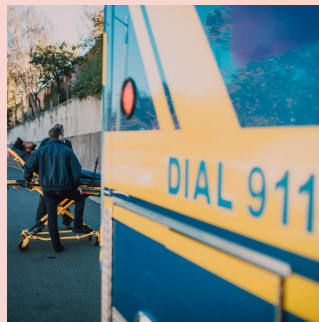
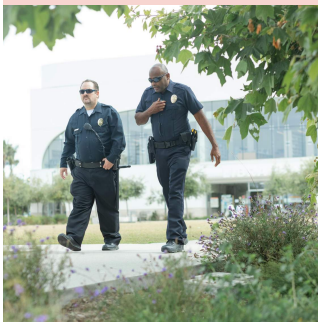
The combination of these minority stressors takes a toll on Alex's mental health. He often feels anxious, isolated, and disconnected from his colleagues. He experiences periods of sadness and stress, and sometimes doubts his ability to succeed in his career. His physical health has also started to suffer, with frequent headaches, trouble sleeping, and a general sense of fatigue. Despite his passion for his job, the cumulative effect of these stressors is leading to burnout.

Reflection

After reading the case example above, reflect on the following questions:

- What external/distal stressors did Alex experience?
- What internal/proximal stressors did Alex experience?
- How did these experiences impact Alex's mental health and well-being?
- What group resources may Alex benefit from? How might these resources help Alex?

Alex's experience highlights the significant impact that minority stress can have on a person's mental and physical health. Distal stressors, such as discriminatory comments and exclusion, exacerbate his internal struggles, including internalized stigma and the fear of rejection. These cumulative stressors affect not only his well-being but also his performance at work, leading to a sense of isolation and alienation in an otherwise fulfilling career. Understanding and addressing both distal and proximal minority stressors is crucial in supporting individuals like Alex in high-stress professions, ensuring they can thrive while maintaining their mental and physical health.



Summary

This lesson delves into the concept of minority stress, its effects on mental health, and the importance of resilience and systemic support. It also distinguishes between external and internal stressors faced by marginalized groups. Here are some key takeaways:

1. **Understand minority stress.** It refers to the added stress marginalized individuals face due to societal prejudice.
2. **Recognize the continuum of stressors.** External events are distal stressors, while internal identity-related experiences are proximal stressors.
3. **Identify resilience factors.** Personal and community resources are vital for managing minority stress.
4. **Acknowledge the need for systemic change.** Structural improvements are necessary to support those experiencing minority stress.

By understanding and addressing minority stress, we can foster a more inclusive and supportive environment for all.

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Added Stressors from Organizational Culture



Learning Objectives

After completing this lesson, you will be better able to:

- 1 Recognize how relationships with leadership can pose an additional layer of workplace stress for PSP.
- 2 Understand PSP's experiences and perspectives on their relationship with leaders.
- 3 Define moral injury and describe how PSP's experiences with leaders may result in moral injury.
- 4 Recognize the impact of mental health stigma in the workplace culture.

A blurred image of a police car at night, with its lights on, creating a bokeh effect in the background.

Feeling Disposable and Disconnected from Leadership

Throughout the COVID-19 pandemic, PSP faced widespread challenges, including stressors involving organizational leadership.

Research from the Trauma and Recovery Research Unit at McMaster University shows that PSP often feel disposable and disconnected from their organization's leadership. PSP described feeling like "a faceless, nameless person to the region." This disconnection comes from how leadership behaves, like making decisions without considering PSP's views, rejecting their requests or suggestions, or not providing access to mental health support. When this happens, PSP often feel unheard and unseen, which breaks trust between them and leadership. Organizational stressors also led many PSP to consider leaving their jobs during the COVID-19 pandemic.

Organizational challenges exacerbated by the COVID-19 pandemic

Organizational Stressors (based on 60 interviews)

- Communication breakdown
- Disagreement with new policies
- Low perception of leadership support
- Increased workload/hours



Main reasons for wanting to leave:

- Mental health impacts
- Poor working conditions
- Feeling dehumanized by the organization
- Pushback from the public



Public Safety Services at Risk

1 in 2 PSP of study participants said there is a 50% or higher chance of their **leaving the organization.**

44% of PSP study participants said there is a 50% or higher chance of their **leaving their profession altogether.**

Organizational issues during the COVID-19 pandemic included communication breakdowns, disagreements with new policies, low support and increased workloads. Many PSP reported wanting to leave their positions and/or professions during the COVID-19 pandemic in Canada.

Let's hear directly from some Canadian PSP about their experiences.

PSP feel like they would not be missed at work if they left.

PSP feel like they would not be missed at work if they left, as they would simply be replaced with someone else. PSP perceive that they are treated as just a number, or a means to an end, by their leaders.

"As we move up the chain of command, there was this dispirit occurrence where you're a faceless, nameless person to the region."

Canadian PSP

"I definitely have points where I'm like 'my work would not care if I were to disappear tomorrow.' They would have a fresh, new body, meat in the seat, and it wouldn't even blip for them."

Canadian PSP

PSP perceived many of the organizational initiatives with distrust.

PSP described being skeptical of organizational initiatives and viewed employers' actions as "lip service," that lacked genuine concern for their well-being.

"Like I've senior admin approach me and be like, "Hey, is everything OK?" and right to their face I'll go, "No. I'm not good." They're, "oh, OK," and they'll just walk away. Because they're doing their job, because they have to ask, but they don't need to know the answer; do you see what I'm saying?"

Canadian PSP

"Our upper management tries to say that 'We've got your back, and we are worried for you, and concerned about you, and want you to do OK.' But actions speak louder than words, is something I've always been told."

Canadian PSP

Alternatively, PSP who feel seen and cared for by their employer reported better outcomes.

Watch this brief video to hear about Brandon's experience as a paramedic during the pandemic.

 **YOUTUBE**



Fighting fires during COVID: "When you see someone, you don't necessarily know they are struggling"

"We're really good at being stoic. So when you see someone, you don't necessarily know that they are struggling." In this interview, Brandon Currie, a firefighter in British Columbia, talks about the unique occupational challenges and stresses faced by firefighters and the impact it can have on their mental health.

[VIEW ON YOUTUBE >](#)

Reflection

After hearing Brandon's story, take a moment to read and reflect upon the following questions.

- What stood out to you about Brandon's description of feeling supported by organizational leadership?
- Did anything surprise you? Why or why not?

- Compare and contrast the quotes above describing a lack of organizational support to Brandon's experience. What specific differences do you notice?



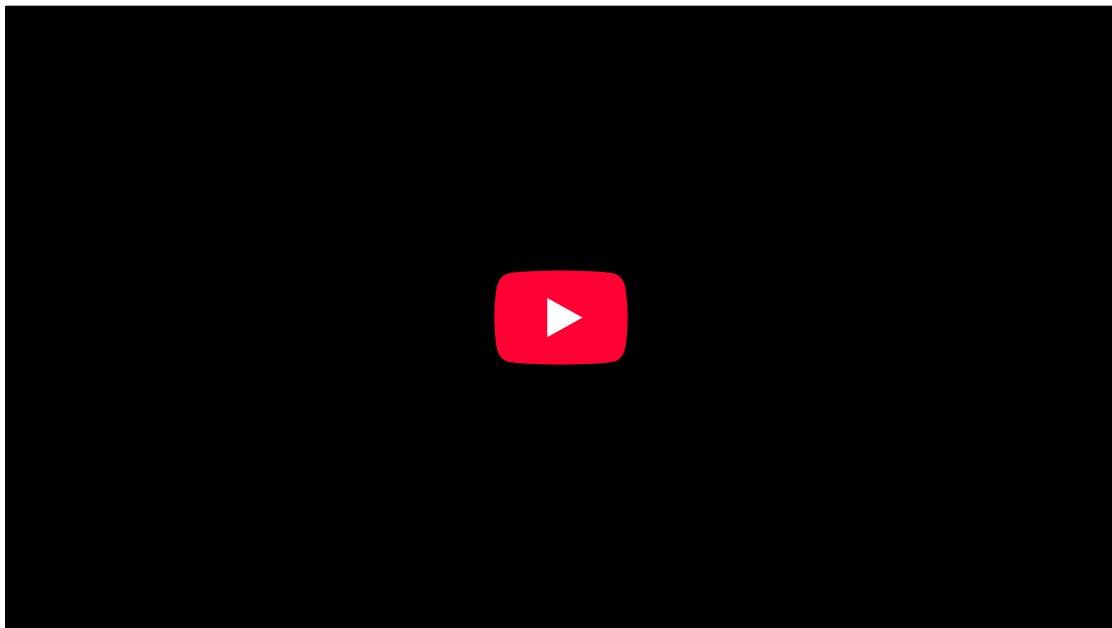
Ultimately, PSPs want to know that their organizational leaders have their back and will make decisions in their best interests. When this happens, PSP feel supported, connected, and appropriately equipped to carry out their occupational duties.

CONTINUE

Moral Injury

PSP may perceive poor interactions with leadership as sources of betrayal from those who have the responsibility to care for them. In such cases, PSP may report elevated anger and frustration toward their leaders. Here, PSP may experience moral injury.

 YOUTUBE



The History of Moral Injury

A report on the history of moral injury, based on research from KCMHR, released by King's College London and Forces in Mind Trust (FiMT).

[VIEW ON YOUTUBE >](#)

What is Moral Injury?

Moral injury is a **psychological, emotional, and spiritual distress** that some people feel after experiencing **situations where their deeply held moral values are violated**. It can happen when a person has to act in a way that goes against their values, or when they witness or become a victim of someone else's moral violation. Moral injury often brings strong feelings like **guilt, shame, anger, and betrayal**. It can also lead to changes in how a person views themselves and others, as well as social withdrawal. While moral injury is not yet recognized as a specific mental health disorder, it is linked to conditions like Posttraumatic Stress Disorder (PTSD), Major Depressive Disorder, substance abuse, and other mental health problems.



Reflection

- What moral values or beliefs may be violated for PSP when they perceive their leaders as inaccessible?

- What impact can violated moral values and beliefs related to leadership have on PSP?

CONTINUE

Stigma and A “Suck it Up” Workplace Culture

PSP often work in environments where mental health struggles are stigmatized. They're frequently told to "suck it up" and push through stress or trauma without showing vulnerability. This mentality can make it hard for them to seek help when they need it, as they might fear being judged or seen as weak. As a result, many PSP face mental health challenges in silence, which can affect their well-being and job performance. Changing this culture and providing more support is crucial to help them manage stress and stay healthy.

Stoicism

PSP perceive the organizational culture as dominated by emotional detachment or stoicism. To be stoic means to remain calm and strong, especially in difficult or stressful situations, without letting emotions like anger or sadness take over.

Moreover, PSP reported stigmatization about mental health and emotional needs.

"Because I guess it depends – actually, it doesn't even matter, it doesn't matter whether you're male or female, because you're going to be judged. Like I say, it is like dog eat dog. You cannot be viewed as weak. You do not disclose your feelings. This is men and women. But I mean, equally, to whoever is viewing you, I guess, is how people are going to judge you. But if you – if you go through a stressful situation and, you know, you show emotion, you're weak. If you go through, you know, a stressful situation and you freeze and you don't react, people are just so critical. Like everybody's critical. Managers, staff, nurses – we're all critical of each other, we're all critical of ourselves. And I guess, somehow, you have to make people feel like – I don't know. I really don't know. Because I'm going through this just myself that I finally got to the point where I'm OK with getting help. And the way that I look at it, personally, is, like, I feel like a Robin Williams that, you know, like I'm happy and go lucky and fake on the outside, but you're battling with so much on the inside that you don't want anybody to see that. And, I don't know, I guess like, if somebody like me seeks help and is willing to get help then maybe it would be OK for other people to do the same."

Canadian PSP

"There's such a culture ingrained in corrections and first responders in general, of 'this is fine, this is normal, you're going to be OK; suck it up, get over it. Somebody else will kill each other tomorrow.' There's just that culture already. And then, you know, people get into it and they're like, 'well, I'm just going to act like everybody else; you know, I don't want to seem weak, I don't want, you know, an inmate to see me upset, right.' So, it's just, there's just such a culture of we don't talk about it. "

Canadian Corrections Officer

Reluctance to Seek Help

PSP may not want to show vulnerability in front of their coworkers because of the stigma around showing weakness. They are often not encouraged to take care of themselves and can feel responsible for situations that are out of their control. There may be a greater hesitation to seek help for mental health issues because of fear of judgment from coworkers or consequences from employers. PSP might also avoid using peer support services because they worry about the consequences of getting help.

"They try to say that 'well, your peer support will reach out to you. We've activated your peer support.' Well, the peer support person you activated to me isn't a diffuse, and it's not a debrief. That person – I don't trust that person because they're going to go and tell everybody what I said. So why would you think for one second that I'm OK with that? I would rather speak to my partner about it than to a person that I know is just going to – and they try to say that they'll keep it quiet, but it's come out in union meetings where a peer support person has brought something to management without that person's consent."

Canadian PSP

"– but there's still that stigma of people are worried about 'if I say something, am I going to be looked at as weaker, or is it going to hurt me in promotion for something?'"

Knowledge Check

This knowledge check will help solidify your knowledge on organizational stressors. Answer the multiple choice questions below based on the course content above.

Why may PSP perceive many organizational initiatives with distrust?

- ☐ The initiatives provided excessive support to PSP.
- ☐ They felt the initiatives were implemented too quickly without proper planning.
- ☐ The initiatives were overly focused on financial benefits for PSP.
- ☐ They believed the initiatives lacked genuine concern for their well-being.

SUBMIT

How may PSP experience moral injury in their professions?

-
- ☐ By having too much autonomy in decision-making
 - ☐ By being praised for their efforts during challenging situations
 - ☐ By receiving excessive support from organizational leadership
 - ☐ By witnessing or being the victim of someone else's moral violation
 - ☐ By being required to act in a way that violates their moral values

SUBMIT

What was one of the main reasons PSP felt disconnected from organizational leadership during the COVID-19 pandemic?

- ☐ PSP were given too much autonomy in decision-making.
- ☐ Leaders made decisions without considering PSP perspectives.

- ☐ PSP received excessive mental health support from leadership.
- ☐ Leaders frequently praised PSP for their efforts during the pandemic.

SUBMIT

Which of the following are symptoms of moral injury?

- ☐ Social withdrawal
- ☐ Enhanced decision-making skills
- ☐ Increased physical stamina
- ☐ Heightened sense of optimism
- ☐ Guilt and shame

Summary

This lesson examined the unique stressors faced by PSP due to organizational culture, especially during the COVID-19 pandemic. It focused on the role of leadership and the importance of fostering a supportive and mentally healthy workplace environment. Here are some key takeaways:

1. **Recognize the impact of leadership on workplace stress.** Leadership actions shape PSP's sense of support and connection.
2. **Understand moral injury as a serious consequence.** Poor leadership interactions can cause emotional distress and feelings of betrayal.
3. **Challenge the stigma around mental health.** Encouraging vulnerability helps PSP seek support without fear of judgment.
4. **Acknowledge the importance of genuine support.** PSP feel valued and thrive when leaders show authentic care.
5. **Promote a culture of mental health awareness.** Leadership should prioritize open discussions and proactive support.

Fostering a supportive and understanding organizational culture can significantly improve the well-being of PSP.

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The Physical & Emotional Costs of a 24/7 Job



Learning Objectives

After completing this lesson, you will be better able to:

- 1 Recognize the impacts a 24/7 job can have on PSP's physical and mental health.
- 2 Familiarize yourself with the stressors of a 24/7 job.
- 3 Identify ways of managing these negative impacts.

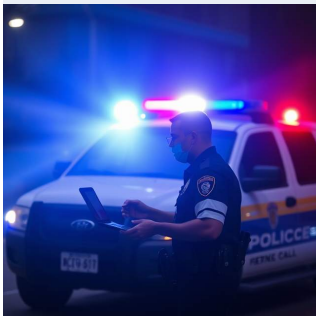
More Than Just a 9 to 5

PSP are always on call—meaning they work 24 hours a day, 7 days a week. Emergencies don't happen on a set schedule, so these workers must be ready at any time to jump into action, no matter if it's day or night, a holiday, or the weekend. This

round-the-clock availability can make their jobs challenging, as they often work long shifts and face unpredictable situations. But their dedication is key to keeping communities safe and responding quickly when people need help most.

The 24/7 nature of PSP jobs can have a significant impact on both the workers and their personal lives. On the job, the constant readiness required can lead to physical and mental exhaustion, as responders often work long shifts with little downtime. This can increase stress levels and contribute to burnout, affecting their overall well-being. The unpredictable hours can also strain personal relationships, as PSP may miss family events, holidays, or special occasions due to being on duty.

Additionally, the pressure to always be prepared for emergencies can make it difficult to maintain a healthy work-life balance, potentially affecting their ability to relax and recharge. On the positive side, many PSP find deep satisfaction in their work, knowing they are helping others in times of crisis. However, without proper support and coping mechanisms, the demands of 24/7 schedules can take a toll on both their physical health and mental resilience.



Case Example

Read the case example below of the day in the life of a firefighter. Notice the all encompassing nature of the job and its effects on mental health and well-being.

It's 6:00 AM and Sarah, a firefighter, is finishing her shift. After a long night of calls, she's exhausted. Just as she starts to relax, her phone rings—another emergency. She grabs her gear and heads back to the station. It's only been a few hours since she got off, but that's the reality of being a firefighter. Emergencies don't happen on a schedule, so she has to be ready to go at any moment.

Over the next few hours, Sarah responds to several urgent calls—one for a house fire, another for a car crash, and then a medical emergency. Each situation is physically demanding and emotionally taxing. She's used to the chaos and the stress, but it still takes a toll. The fear of not getting to someone in time, the pressure to make life-saving decisions quickly, and the exhaustion from not having enough sleep all build up.

By the end of the day, Sarah is physically drained, but it's far from over. She has to be back at the station again tomorrow, ready for whatever comes her way. The unpredictability of the job means she can't ever fully relax, and even when she's at home, the thought of the next emergency is always on her mind.

The 24/7 nature of the job is tough on her mental health. Sarah often feels anxious, stressed, and sometimes isolated, knowing that her work-life balance is a constant struggle. Missing family events, late-night calls, and the emotional weight of the work often make it hard for her to unwind. Despite the challenges, Sarah remains committed to her job, but the pressure and stress of always being "on call" can be overwhelming at times.

Increased Burden During the COVID-19 Pandemic

During the pandemic, PSP faced extremely stressful and traumatic situations, which led to worse mental health outcomes. As more people needed care each day, PSP found

themselves in increasingly unmanageable situations. This forced managers and leaders to quickly adjust work and organizational policies. As a result, PSP were asked to provide more services, but with fewer staff and resources. This imbalance created even more stress. PSP also dealt with heavy workloads and understaffing, a higher risk of illness, stress from the pressure to perform, lack of communication and support from supervisors, difficult decision-making, and isolation. In addition to the stress from their work, PSP became increasingly worried about the health of their families and themselves. The usual job-related stresses, like exposure to critical incidents and violence, became even more overwhelming due to personal and organizational factors.



"I have worked more this year than I have ever worked in my entire life [...] I have missed out on things with my family."

Firefighter

CONTINUE

Recognizing the Impact of a 24/7 Job

COVID-19 made existing stress even worse and added new challenges, causing the line between personal and work life for PSP to blur. The pandemic led to significant staff shortages in Canada's emergency system, while the number of people needing help increased. As a result, PSP found it harder to manage both their work responsibilities and personal needs, as their professional demands took over their lives.

Drag & Drop Activity

Since the start of the pandemic, PSP have been dealing with more stress. They've been asked to do more with fewer resources. This activity is designed to help identify and show the new or worsened stress factors that PSP are dealing with today.

Here is a list of events PSP may or may not experience due to their job. Drag and drop each answer in the correct box.

Experienced by PSP

Guilt

Obligation to take on more
hours

Understaffing

Chronic fatigue

Organizational pressure

Not experienced by PSP

**Enough recovery time
between shifts**

Consistent sleep schedule

Always leave work on time

Psychological support at work

Impact on Overall Health and Well-being

Since COVID-19, PSP have often faced understaffing, leading their organizations to push them to work more hours than they should. This can make PSP feel guilty and constantly tired. Because they're often asked to cover both day and night shifts, PSP rarely get off work on time, don't have enough time to recover between shifts, and struggle to keep a regular sleep schedule. On top of that, many PSP feel like they don't get enough emotional support from their organization.

Ultimately, PSP's overall well-being is heavily impacted because of the nature of their profession.

As mentioned during the drag & drop activity, PSP report experiencing disturbances in their sleep schedules, as well as negative impacts on their physical health, mental well-being, and personal relationships.

- Sleep and supportive relationships constitute pillars for stable and healthy lives.
- Sleep deficiencies affect decision-making, problem-solving, emotions, and the ability to cope with change.
- Having a supportive social environment reduces risks of depression and promotes growth.

Watch the video below for a glimpse into the real-life experience of paramedics who work a 24/7 job.

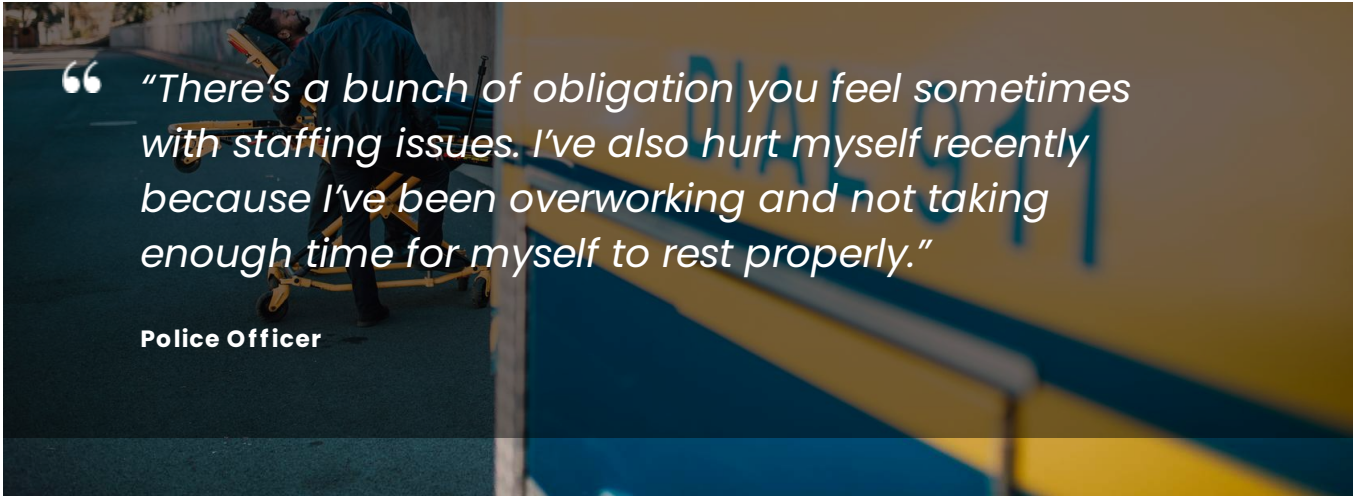
Health-care Crisis **Ambulance Delays**



"I've taken overtime not because I need to, but because it comes down to 'if you don't say yes to this shift, this ambulance won't have a person tonight.'"

Paramedic





“There’s a bunch of obligation you feel sometimes with staffing issues. I’ve also hurt myself recently because I’ve been overworking and not taking enough time for myself to rest properly.”

Police Officer

All these stressors depict one central problem: PSP jobs tend to take up considerable space in their lives, and many feel they don’t have enough time to recover. Finding ways to reduce these stressors is essential to protect PSP longevity and psychological well-being.

How to Respond and Support PSP

There are different ways peer support volunteers and crisis line staff may provide support to PSP experiencing stress. You may:

1

Encourage PSP to express their feelings in a judgment-free conversation.

2

Be patient and demonstrate empathy.

3

Acknowledge PSP experiences of guilt and pressure.

4

Give PSP permission to not only care for others but to care for themselves as well.

5

Offer flexibility in the way care is provided to accommodate schedules.

Knowledge Check

Complete the knowledge check below to solidify your understanding of the 24/7 nature of the PSP professions. Answer the questions below based on the content above.

What is one of the primary challenges faced by PSP due to the 24/7 nature of their jobs?



Having too much downtime between shifts



Experiencing reduced job satisfaction



Having consistent sleep schedules



Balancing work and personal life

SUBMIT

What is a key reason why PSP jobs are considered more than a typical 9 to 5?

- ☐ PSP jobs allow for extended periods of downtime between shifts.
- ☐ PSP jobs provide consistent work-life balance due to flexible scheduling.
- ☐ PSP jobs primarily involve routine tasks that can be scheduled in advance.
- ☐ PSP jobs require workers to be available 24/7, including nights, weekends, and holidays.

SUBMIT

Select all that apply: Which of the following are impacts of PSP work on mental health and well-being?

☐

Increased risk of burnout due to long shifts and unpredictable hours

☐

Strained personal relationships from missing family events and holidays

☐

Improved work-life balance from flexible scheduling

☐

Heightened stress levels from constant readiness for emergencies

☐

Enhanced emotional resilience due to consistent downtime

SUBMIT

Which of the following is an effective way to support PSP experiencing stress?

- ☐ Advise PSP to work longer hours to manage their stress.
- ☐ Ignore PSP experiences of guilt and pressure to avoid making them uncomfortable.
- ☐ Focus solely on their professional performance rather than their personal needs.
- ☐ Encourage PSP to express their feelings in a judgment-free conversation.

SUBMIT

Summary

This lesson examined the demanding nature of 24/7 jobs for public safety personnel, focusing on their physical, emotional, and relational challenges. It stressed the need for awareness and proactive strategies to address these issues. Here are some key takeaways:

1. **Understand the toll.** A 24/7 job can cause serious physical and mental health challenges for PSP.
2. **Recognize stressors.** The unpredictable demands of PSP work introduce unique stress factors.

3. Support is essential. Open communication and empathy are key to helping PSP navigate their challenges.

By applying these insights, PSP can better manage their demanding roles and maintain their well-being.

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-

Conflict and Disruption in the Family



Learning Objectives

After completing this lesson, you will be better able to:

- 1 Understand how PSP work affects family relationships.
- 2 Describe the impact of prioritizing work over personal wellbeing, and the difficulties in balancing professional and family life.
- 3 Recognize the barriers to communication with family members that PSP face due to confidentiality and lack of understanding.

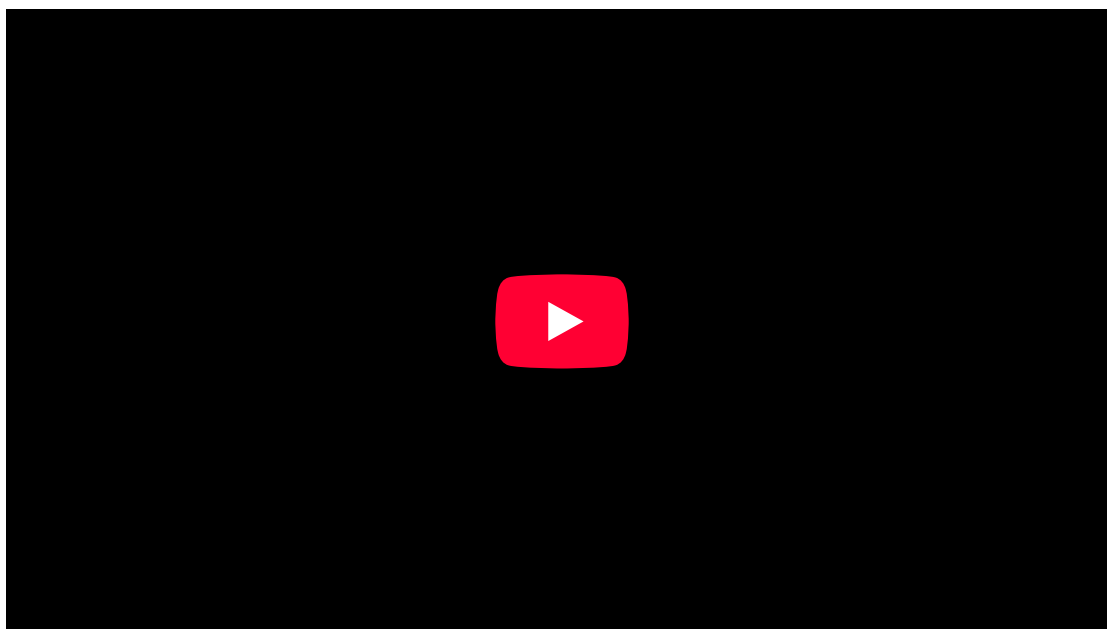
Family Life

Being a PSP, like a police officer, firefighter, or paramedic, can have a big impact on family life. The job often requires long hours, unpredictable shifts, and being away from home for emergencies. This can lead to stress and worry for both the worker and their family, as they may miss important events or time together. The emotional toll of

dealing with difficult or traumatic situations at work can also affect relationships. Family members sometimes feel disconnected or overwhelmed by the stress at home. Balancing the demands of the job with family time can be challenging, but support from loved ones can help make it easier.

Watch the video below for insight into the impacts

 **YOUTUBE**



Words from Public Safety Personnel Families: Amanda, Laryssa, and Ian

Uploaded by CIPSRT – ICRTSP on 2023-03-05.

VIEW ON YOUTUBE >

The COVID-19 pandemic added an extra layer of stress to PSP and their families.

PSP had to keep doing their risky jobs while also handling new health guidelines and constantly changing rules. This caused a lot of stress for them because they had more work, more trauma to deal with, and were asked to enforce health measures, often without enough resources or help.

Research shows that the stress was especially tough for law enforcement officers. They had to manage lockdowns, enforce restrictions, and adapt to new safety rules all while facing more criticism from the public. This made their job harder and created strain in their personal lives and family relationships.

The stress from their jobs often carried over into their home life. A study found that during the pandemic, the roles of public safety workers caused more problems in families. There were more arguments, communication issues, and tension at home. Some workers even isolated themselves from their families to avoid spreading the virus, which made them feel even more alone. Partners of public safety workers also felt more anxiety and stress, especially when safety rules weren't clear. The combination of unpredictable work hours, exhaustion, and the constant uncertainty of the pandemic made family life even harder.

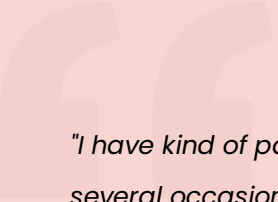
The pandemic made things even tougher for families who were already dealing with the stress of public safety work. These jobs often involve long hours, exposure to trauma, and high stress, which already affects family life. The added challenges of the pandemic, like longer shifts and more health risks, made these problems worse. Many partners of public safety workers felt burned out as they tried to support their loved ones while also managing their own pandemic stress.

CONTINUE

Let's hear directly from some Canadian PSP about their experiences.

PSP often miss important family milestones due to the demands of their jobs.

PSP are frequently required to prioritize their jobs over family commitments, missing important personal milestones like birthdays, graduations, and anniversaries. These absences not only affect the individual emotionally but can also create tension within the family. This can lead to feelings of neglect and resentment. Over time, repeated sacrifices like these may damage family bonds, making it harder for PSP to reconnect with their loved ones when they're finally available.



"I have kind of paid the price of being away from my extended family for several occasions and missing graduations, and larger birthdays and larger anniversaries because I was the one with the dangerous job."

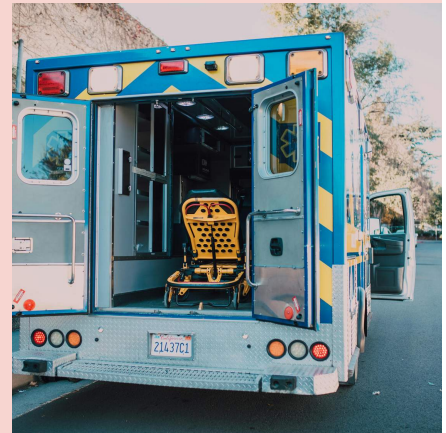
- Canadian PSP

PSP feel isolated from family members, especially during stressful work periods.

Isolation is another common consequence of PSP work. The demanding schedules, emotional toll, and physical separation can cause significant strain on family relationships. PSP often feel misunderstood or judged by family members who are not familiar with the demands of their work. This isolation can lead to fractured relationships, leaving PSP feeling disconnected not only from their colleagues and friends but also from their immediate families.

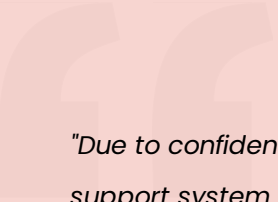
"My relationship with my family; my mum and dad are quite elderly... My relationship with them deteriorated. My relationship with my two older brothers deteriorated to the point where I don't even have any contact to this day with my eldest brother."

- Canadian PSP



PSP find it challenging to communicate with family about their work due to confidentiality issues and lack of understanding.

Due to the sensitive and sometimes traumatic nature of their work, PSP are often bound by confidentiality. This prevents them from sharing their experiences with family members. This barrier to communication can make it difficult for PSP to seek support from their loved ones, leading to feelings of isolation. Moreover, because family members may not fully understand the stressors that come with the job, they might unintentionally minimize the challenges PSP face, further widening the emotional gap.



"Due to confidentiality, PSP can't talk about their experiences with family/their support system outside work; non-PSP don't understand."

- Canadian PSP

CONTINUE

PSP often feel pressure to prioritize their work over their own wellbeing and family needs.

For many PSP, their job can make them feel like work has to come first, even if it hurts their health or relationships with family. This pressure can cause stress, tiredness, and emotional exhaustion. PSP often have a hard time balancing their duties to the public with their personal lives. This struggle can lead to problems in relationships, less time with family, and difficulty fully enjoying family life.

"Interviewer: During the pandemic, did you ever feel you had to place your work ahead of your own wellbeing or your family?"

Respondent: I have – I've always felt that I've had to do that because of the nature of my job, it had nothing to do with COVID."

PSP discussed the emotional toll of the job leading to disengagement from family life at home.

After long, stressful shifts, PSP often return home feeling emotionally drained and unable to fully participate in family life. This emotional disconnection can leave PSP isolated from their families, even when they're physically present. The heavy psychological toll of their work can prevent them from engaging in day-to-day family activities or participating in conversations, further widening the gap between them and their loved ones.

"I found myself just disconnected even when I got home. I couldn't open myself up to take on anymore decision-making... I found myself isolated heavily from my family once I got home."

- Canadian PSP

CONTINUE

PSP reported constant fear of exposure to danger, including during crises like COVID-19.

PSP work in high-risk environments, often putting their own safety at risk. This fear can extend beyond the workplace and affect family dynamics. The constant worry about bringing home danger—whether it's from the virus, violence, or other job-related risks—creates additional emotional strain. PSP may distance themselves from their families out of concern for their safety, which, while well-intentioned, can contribute to further isolation and emotional disconnection.

"It's in the back of your mind – is your family safe? Coming back home for sure, I mean it affects you personally a little bit... You signed up for it, you go in and deal with consequences later."

– Canadian PSP

PSP often struggled with separating their professional identity from their personal one, leading to strained family dynamics.

For PSP, it can be hard to separate their job from their personal life. The need to stay alert and focused at work makes it tough to relax and switch into "family mode." The stress and constant awareness needed for their job can spill over into their personal lives, making it hard for them to be fully present or emotionally available for their families.

"We always had to apply our craft and be switched on... The problem is that when you have this hyper strengthened version of your identity in your professional life, it's harder to shake that person off when you got to come home and your family suffers."

– Canadian PSP

Reflection

Take a moment to read and reflect upon the following questions.

1

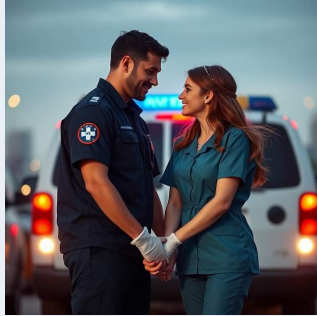
What emotional or psychological barriers might prevent PSP from fully engaging with family life once they return home?

2

What strategies can be used to help PSP reconnect emotionally with their families after work-related stress?

Public safety personnel often face conflicts and disruptions in their family relationships. They may miss important moments, feel emotionally distant, or struggle to share their experiences. These challenges make it hard to maintain strong, healthy relationships with their families. However, by understanding these struggles, both PSP and their families can work together to find ways

to reconnect and make their relationships stronger, even with the challenges of the job.



Knowledge Check

This knowledge check will help solidify your learnings on the impact of PSP work on the family. Answer the questions below based on the content above.

What is one of the primary challenges PSP face in maintaining strong family relationships?

- ☐ Limited access to recreational activities
- ☐ Lack of professional training

☐

Frequent absences due to work commitments

☐

Over-reliance on family for emotional support

SUBMIT

What were some of the key challenges PSP families faced during the COVID-19 pandemic?

☐

Increased marital strain and communication difficulties

☐

Heightened feelings of isolation due to virus transmission concerns

☐

Improved work-life balance due to flexible schedules

☐

Reduced occupational stress due to decreased workloads

SUBMIT

What is one way the emotional toll of high-stress jobs can affect PSP family relationships?

- ☐ Emotional disconnection from loved ones
- ☐ Improved communication with family members
- ☐ Strengthened family bonds through shared experiences
- ☐ Increased participation in family activities

SUBMIT

What is one of the main reasons PSP face barriers to communication with their families?

-
- ☐ Frequent relocation due to job demands
 - ☐ Lack of interest from family members
 - ☐ Confidentiality restrictions prevent sharing work experiences
 - ☐ Limited access to communication tools

SUBMIT

Summary

This lesson examined the challenges public safety personnel (PSP) face in maintaining healthy family relationships due to occupational stress and communication barriers.

Here are some key takeaways:

1. **Recognize the impact of work on family life.** PSP often miss personal milestones, causing emotional strain.
2. **Understand the importance of communication.** Barriers like confidentiality can hinder family connections.
3. **Acknowledge the emotional toll of high-stress jobs.** Job-related stress can lead to isolation from family.
4. **Support PSP in finding balance.** Self-care and open dialogue can improve family relationships.

By addressing these challenges, PSP and their families can build stronger, more supportive connections.

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Cumulative Stress and the COVID-19 Pandemic



Learning Objectives

After completing this lesson, you will be better able to:

- 1 Define cumulative stress.
- 2 Recognize the mental health impact that cumulative stress had on PSP during the COVID-19 pandemic.
- 3 Describe how organizations can contribute to or improve cumulative stress for PSP.

What is cumulative stress?

Cumulative stress is the emotional, mental, and physical impact that long-term stress has on a person. It builds up

over time from being in stressful situations, whether at work or in personal life.



Biology of Cumulative Stress:

Our brains and bodies have evolved to respond to danger to provide survival and safety. The brain's limbic system is our internal alarm and regulator. It releases stress hormones like adrenaline and cortisol. These hormones increase blood flow to the muscles and sharpen our senses, allowing our bodies to respond quickly. Once the threat is over, the body gets rid of stress hormones and returns to normal.

However, when trauma or stressful situations occur and last a long time, the effects of the body's response last longer as well. The limbic system gets stuck on high alert, and everyday stresses contribute to keeping the alarm loud and active.

The prefrontal cortex is the part of the brain that's usually in charge of calming down the limbic system. When someone is constantly in this state of high alert, their prefrontal cortex has trouble regulating their emotions, and negative thinking can take over.

This creates a vicious cycle in which a person keeps thinking about their past stressors, which in turn pushes their limbic system to remain on high alert. Their thoughts keep their body tense and stressed, in a constant state of readiness to respond to danger.

It's important to remember that these responses to stress are involuntary. The body reacts to perceived danger before the brain can determine what is happening.

Some people experiencing cumulative stress will also experience further mental health challenges, including symptoms of PTSD, depression, or anxiety.

Cumulative stress can also result in

- difficulties reading faces and social cues
- misinterpreting others' behaviour as threatening



Knowledge Check

This knowledge check will help solidify your knowledge of the biological impact of cumulative stress. Answer the questions below based on your learnings above.

What happens to the brain's limbic system when someone experiences prolonged stress?

- ☐ It gets stuck on high alert, keeping the body tense and stressed.
- ☐ It enhances the prefrontal cortex's ability to calm it down.
- ☐ It stops releasing stress hormones like adrenaline and cortisol.
- ☐ It becomes more efficient at regulating emotions.

SUBMIT

Which of the following describe the biological effects of cumulative stress?
Select all that apply.

☐

Everyday stresses contribute to maintaining a heightened state of alertness.

- ☐ Stress hormones like adrenaline and cortisol are no longer released.
- ☐ The limbic system remains on high alert, keeping the body tense and stressed.
- ☐ The body quickly returns to a normal state after the stressor is removed.
- ☐ The prefrontal cortex struggles to regulate emotions effectively.

SUBMIT

Which of the following are ways cumulative stress can manifest?

- ☐ Improved emotional regulation
- ☐ Enhanced ability to handle trauma
- ☐ Difficulty reading faces and social cues

☐

Misinterpreting others' behaviours as threatening

SUBMIT

CONTINUE

Cumulative Stress & PSP During the COVID-19 Pandemic

Research from the Trauma and Recovery Research Unit at McMaster University during the COVID-19 pandemic found that several ongoing stressors impacted PSP daily during this period:

**SUPPORT FROM
LEADERS**

**COMMUNICATION
ISSUES**

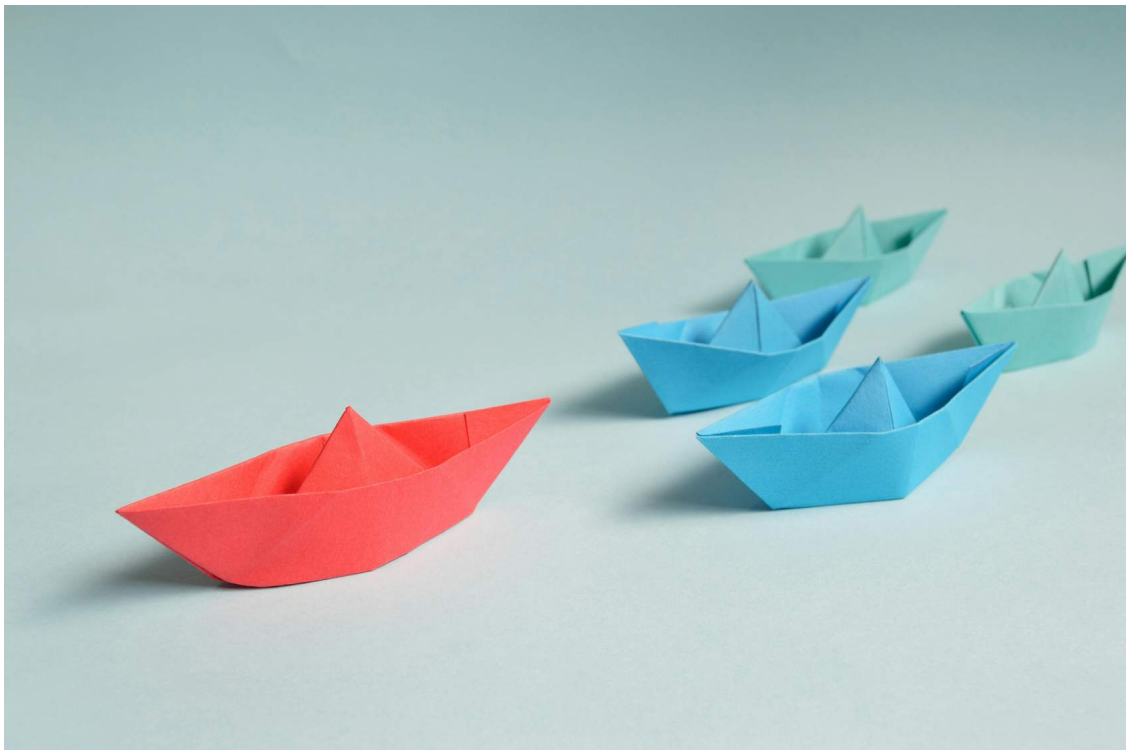
**TEAM
DISRUPTIONS**

**MISSING FORMAL
SUPPORTS**

PSP felt unsupported and misunderstood by their leaders, and the pandemic made the gap between them and upper management even wider.

During the pandemic, PSP felt that leadership, especially senior leaders, were unavailable and hard to reach. As a result, many believed that leaders didn't fully understand the challenges and

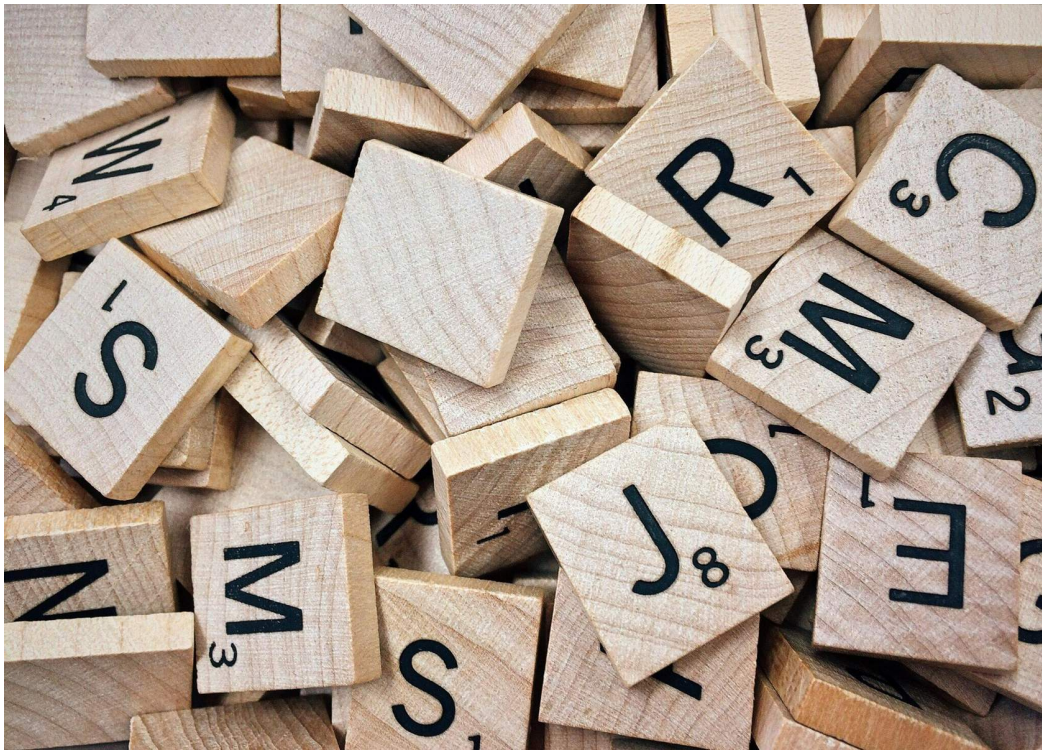
stress PSP faced. The policies and orders from higher up seemed to show a lack of understanding about the conditions PSP were working under.



SUPPORT FROM LEADERS	COMMUNICATION ISSUES	TEAM DISTRUPTIONS	MISSING FORMAL SUPPORTS

PSP reported that two-way communication was often missing during the pandemic, and the information they did receive was usually unclear and lacked transparency.

Many PSP felt that the organization’s attempts to show appreciation, like pizza parties, didn't really acknowledge the heavy workload, increased stress, and risk of infection they faced during the pandemic. As a result, PSP felt expendable, undervalued, and like they were just pawns instead of people making personal sacrifices to ensure safety and healthcare continued. They also felt their basic human needs, such as lunch breaks and bathroom time, were being ignored.



SUPPORT FROM LEADERS	COMMUNICATION ISSUES	TEAM DISTRUPTIONS	MISSING FORMAL SUPPORTS

It's important for PSP to feel supported by their teammates to do their jobs effectively, but during the pandemic, many PSP felt a lack of team unity.

PSP described organizational communication as overwhelming, inconsistent, and confusing. The large number of emails with constantly changing protocols and procedures added extra stress and often made it difficult for PSP to stay updated on changes, especially on their days off.



**SUPPORT FROM
LEADERS**

**COMMUNICATION
ISSUES**

**TEAM
DISTURPTIONS**

**MISSING FORMAL
SUPPORTS**

PSP shared that their organization lacked sufficient psychological support and expressed a need for training sessions to help better manage their mental health.

PSP felt that being part of a team built on trust helped lessen the negative effects of workplace stress during the pandemic. The "we are in this together" mentality, where colleagues supported each other and worked toward a common goal, helped strengthen team identity for many. However, as the pandemic went on, PSP said their relationships with coworkers began to break down, and conflict increased. They pointed to factors like workplace bullying, burnout, heavier workloads, irritability, exhaustion, and unequal pay gaps as reasons for the breakdown in team relationships.

M E N T A L

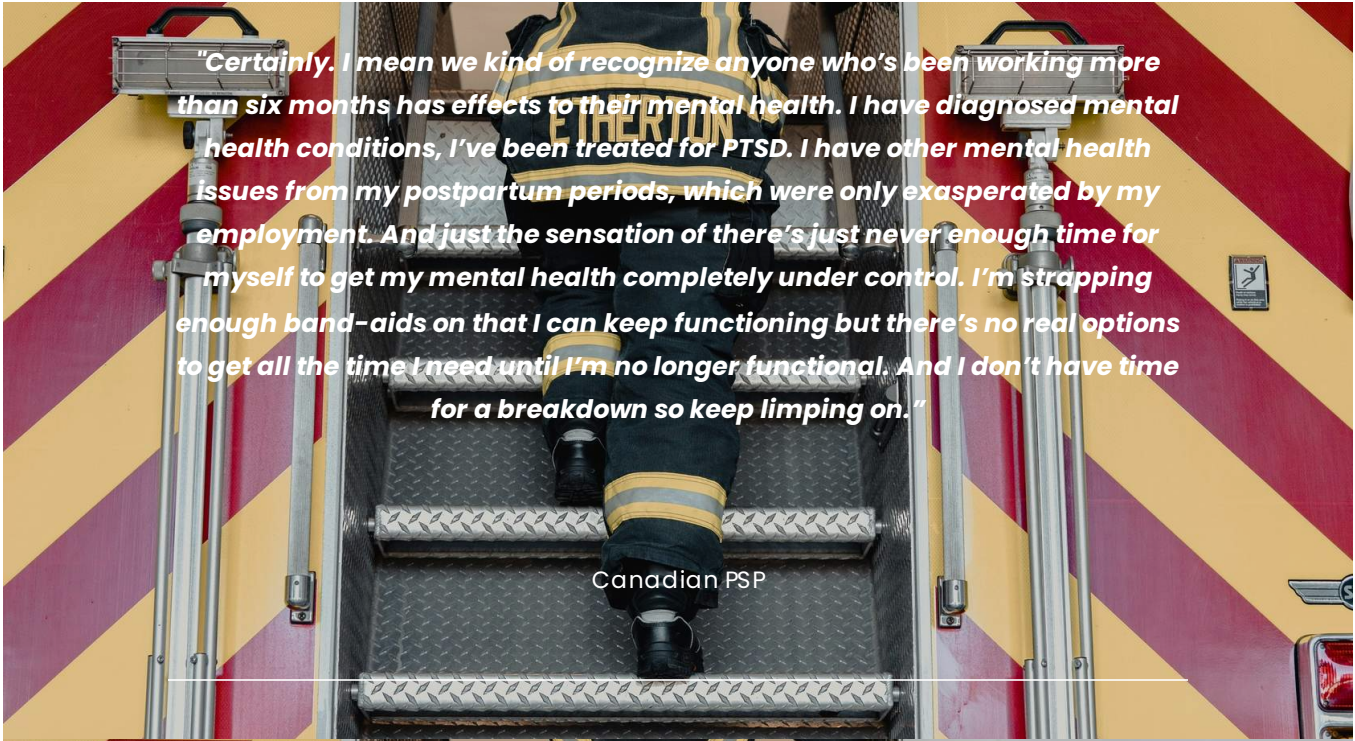
H E A L T H

M A T T E R S

"Introspection is important when you're angry. It's often not about the thing that's immediately in front of you, it's all these other things. But that takes effort and time – time that we don't have because we're getting overtime and no sleep and we're eating poorly. We have families to take care of, we don't have time to self-analyse ourselves. And so we just attribute it to the closest thing to us, which is COVID and our supervisors. And then it becomes just this – it's implosive. And it just, we're stressed for the sake of being stressed."

Canadian PSP

WSFR



"Certainly. I mean we kind of recognize anyone who's been working more than six months has effects to their mental health. I have diagnosed mental health conditions, I've been treated for PTSD. I have other mental health issues from my postpartum periods, which were only exasperated by my employment. And just the sensation of there's just never enough time for myself to get my mental health completely under control. I'm strapping enough band-aids on that I can keep functioning but there's no real options to get all the time I need until I'm no longer functional. And I don't have time for a breakdown so keep limping on."

Canadian PSP

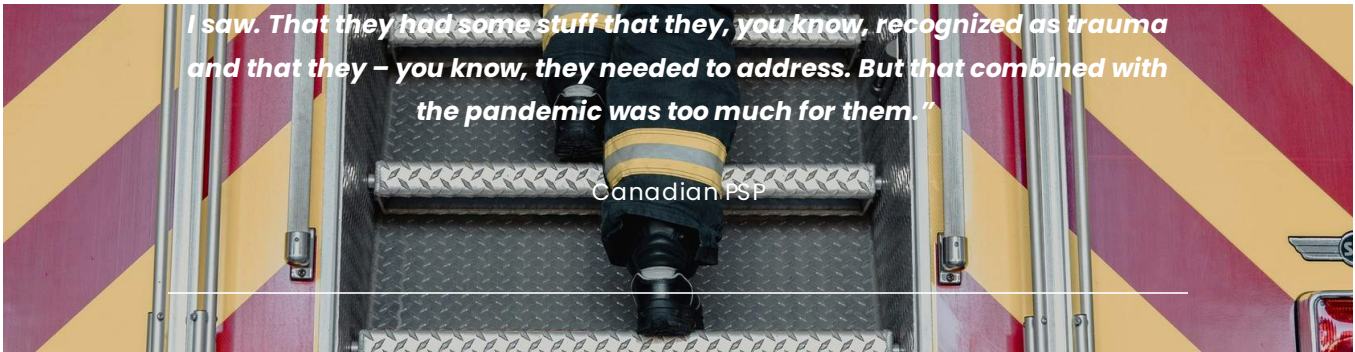


"A lot of what we do - you know, we're exposed to a lot of traumatic things. It's not that one traumatic thing that kind of sets us over the edge, right - and I think this is well-documented anyways, that cumulative effect, the years of doing this stuff. So, you know - and I think that's well-documented anyway."

Canadian PSP



"I think a lot of times the stuff that had accumulated over the years, that this was - that this - whether it was the fear of infection or listening to the COVID patients on the phone, that this was more of a tipping point. Like it was just the straw that broke the camel's back. You know. They might have been OK for a little while longer until - you know might have been OK indefinitely, but this was all too much for them. So I think that would be the commonality that



I saw. That they had some stuff that they, you know, recognized as trauma and that they – you know, they needed to address. But that combined with the pandemic was too much for them.”

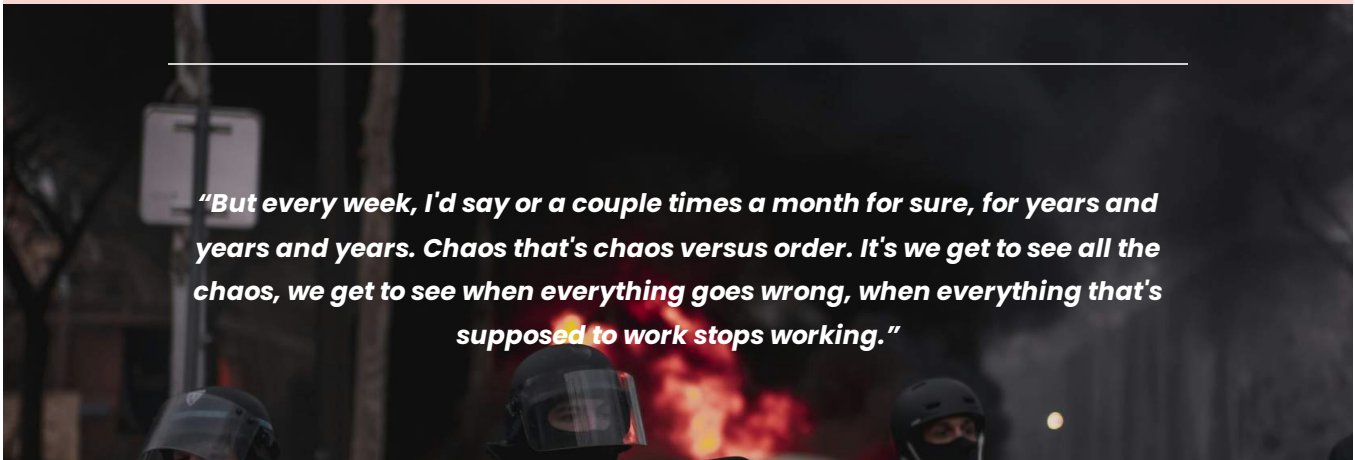
Canadian PSP

In addition to these work-related stressors during the COVID-19 pandemic, PSP were not immune to the pandemic-related stressors civilians felt, including facing financial struggles, health conditions and risks, or family difficulties and loss.

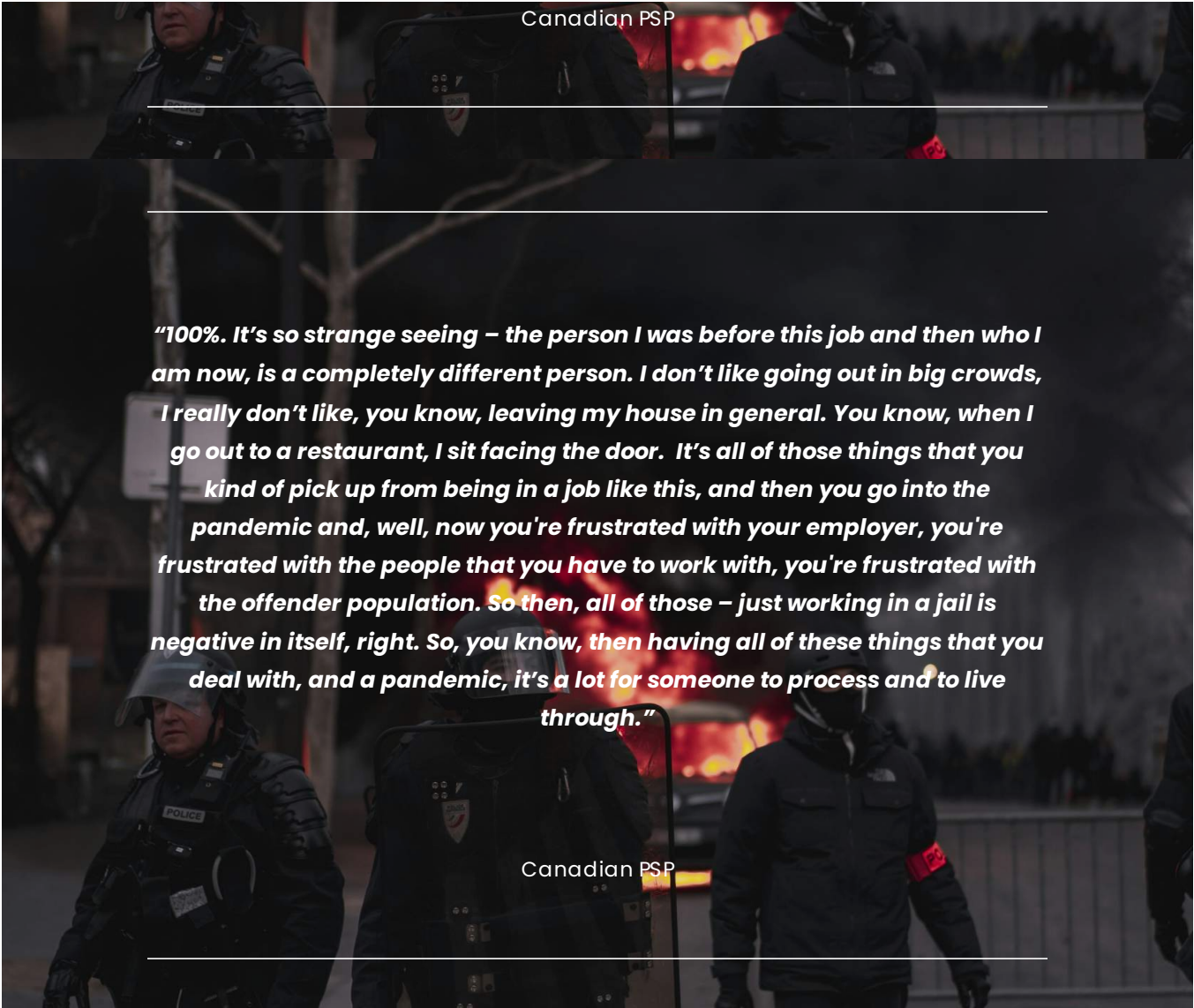
These pandemic-related cumulative stressors significantly impacted PSP in many ways. Research shows us that:

- 38.62% of PSP surveyed reported elevated symptoms of PTSD
- 47% reported moderate or severe levels of depression
- 50% reported moderate to severe anxiety
- 48% reported moderate to severe stress
- 75% scored above the normed average for difficulties with emotion regulation

Please scroll through the quotes below from Canadian PSP to better understand their experiences of cumulative stress during the COVID-19 pandemic.



“But every week, I’d say or a couple times a month for sure, for years and years and years. Chaos that’s chaos versus order. It’s we get to see all the chaos, we get to see when everything goes wrong, when everything that’s supposed to work stops working.”

A background image showing three Canadian PSP officers in riot gear, including helmets and shields, standing in a line. The scene is dimly lit, possibly at night or in low light conditions, with some blurred lights in the background.

Canadian PSP

"100%. It's so strange seeing – the person I was before this job and then who I am now, is a completely different person. I don't like going out in big crowds, I really don't like, you know, leaving my house in general. You know, when I go out to a restaurant, I sit facing the door. It's all of those things that you kind of pick up from being in a job like this, and then you go into the pandemic and, well, now you're frustrated with your employer, you're frustrated with the people that you have to work with, you're frustrated with the offender population. So then, all of those – just working in a jail is negative in itself, right. So, you know, then having all of these things that you deal with, and a pandemic, it's a lot for someone to process and to live through."

Canadian PSP

CONTINUE

Responding to Cumulative Stress

How can organizations support PSP as they face cumulative stressors on the job?

- Be a visible, accessible presence to demonstrate support for and interest in your employees' work.
- Acknowledge PSP stress through actions, such as providing accessible mental health support to staff (e.g., in-service, benefits, etc.).
- Build team trust and support to foster a team-focused sense of identity and belonging.
- To reduce the risk of burnout and exhaustion, assign reasonable workloads and rotate workers from high-stress to low-stress tasks.
- Ensure structures are in place for colleagues to provide social support to each other (e.g., regular breaks, peer support groups, etc.).
- Managers and supervisors can support employees by checking in frequently with staff, especially if there are any indicators of potential psychological distress (e.g., avoiding team interaction/meetings, signs/symptoms of distress, etc.).

Reflection Question

Based on your learnings in this lesson and this course more broadly, reflect on the following questions related to cumulative stress.

- Which of the recommendations for organizations would be most impactful and important to you? Why?
- How else might organizations support PSP in meaningful ways?

- What are some barriers that may impact PSP's ability to care for their mental health in the midst of facing cumulative stress?

Knowledge Check

This knowledge check will help solidify your learnings on cumulative stress. Answer the following questions based on the content above.

What is cumulative stress?

- ☐ The result of a single traumatic event
- ☐ The emotional, mental, and physical toll of prolonged stress
- ☐ A temporary response to a stressful situation
- ☐ A condition that only affects physical health

SUBMIT

What was a common perception among PSP regarding leadership during the COVID-19 pandemic?

- ☐ Leadership was supportive and accessible during the pandemic.
- ☐ Leadership demonstrated a clear understanding of PSP's working conditions.
- ☐ Leadership was perceived as unavailable and disconnected from PSP's challenges.
- ☐ Leadership effectively addressed PSP's mental health needs during the pandemic.

SUBMIT

Which of the following were stressors experienced by PSP during the COVID-19 pandemic? Select all that apply.

-
- ☐ Lack of support and accessibility from leadership
 - ☐ Adequate psychological supports provided by organizations
 - ☐ Increased workload and risk of infection
 - ☐ Clear and transparent communication from organizations
 - ☐ Breakdown of team cohesion and increased workplace conflict

SUBMIT

Summary

This lesson focused on cumulative stress, particularly its effects on PSP during the COVID-19 pandemic. It covered the definition, biological basis, mental health challenges associated with prolonged stress, and strategies for coping and organizational support. Here are some key takeaways:

1. **Understand cumulative stress.** It results from prolonged emotional, mental, and physical strain.
2. **Recognize mental health impacts.** PSP are at risk for PTSD, anxiety, and depression due to cumulative stress.

3. Acknowledge leadership's role. Management's visible support is essential in addressing PSP stressors.

By applying these insights, you can better support PSP and address the challenges of cumulative stress effectively.

Lesson References

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Self-Care and Coping



Learning Objectives

After completing this lesson, you will be better able to:

- 1 Recognize the challenging impacts that public safety work may have on maintaining self-care and coping strategies.
- 2 Understand the relationship between self-care and mental health/well-being.
- 3 Identify coping strategies that PSP may commonly use.

Self-Care & Coping

The terms "self-care" and "coping" are often used in media. But what do these terms really mean? Click on the tiles below to learn.

Self-Care

Self-care is taking responsibility for your own health and well-being by being aware of your needs, staying disciplined, and being able to take care of yourself. It helps you maintain good physical and mental health.

Coping

Coping refers to the thoughts and actions people use to deal with stressful situations, both inside and outside of themselves.

Self-care and coping can look different for everyone, depending on what works best for them. Self-care is all about taking time to look after your physical, emotional, and mental well-being. For some people, this might mean taking a bubble bath or getting a good night's sleep. For others, it could be spending time with friends, going for a walk, or practicing mindfulness. Coping, on the other hand, refers to how we manage stress or difficult emotions. Some people cope by talking things out with a loved one, while others might prefer journaling, exercising, or even playing a video game to take their mind off things. It's important to remember that what helps one person may not work for someone else and that's okay! Everyone has their own way of taking care of themselves and handling tough situations.



The COVID-19 Pandemic Impacted PSP's Ability to Cope

Since PSP are constantly responsible for protecting the safety and security of the public, they often work long hours or overtime, leaving them little time to focus on self-care. These working conditions became even harder during the COVID-19 pandemic.

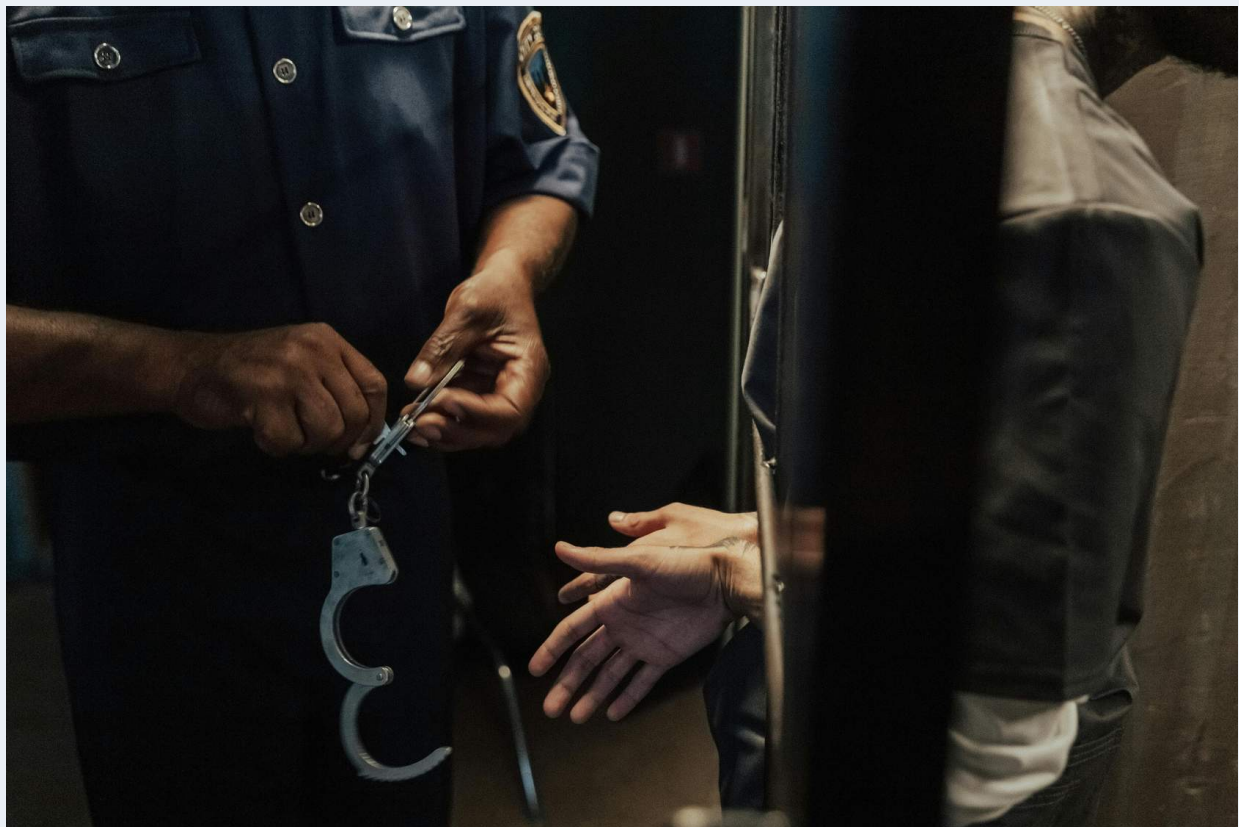
The pandemic's restrictions and unexpected challenges changed the way PSP typically dealt with stress. They relied heavily on their coworkers for support, as they were often the only ones who truly understood the unique pressures and emotional toll of the job. But strict safety measures meant many PSP had to take extra precautions to avoid spreading or catching COVID-19, which led to more isolation and tension in their personal lives. They had to set boundaries with friends and family who didn't follow the same safety precautions, which made already stressful situations even harder. As a result, PSP often turned to individual coping strategies. Some found comfort in activities like spending time outdoors, reading, or reflecting, while others struggled with the lack of social and community support. For some, this isolation became too much, and they turned to new coping methods, like using medication as a last resort.



Here a paramedic talks about working extremely long shifts without breaks, and the negative impacts to their physical and mental health.

"They're driving more. They are – you know what I mean? Like, they don't have that downtime to destress anymore or eat a hot meal. A lot of the paramedics in the cities, they don't even get back to their station for 12 hours, and sometimes they have to, like basically put their foot down to have a bathroom break. [...] And a lot of people don't realise that. That, like the city calls, there's so much all the time that you don't even have time to take care of yourself and deal with basic needs. So, like no wonder they're getting sick. No wonder they're burnt out."

“Yeah. It’s like this cultural, there is definitely a stigma and a culture of suck it up [...] like in corrections if you take time off you’re known as a B, like you’re just weak, you don’t do that right? [...] And then the one that does need to take time off, they’re just like no I don’t want to be painted with that label, so they just continue to try to be strong and then I think it’s detrimental because it just continues to add up.”



Here a Corrections Officer talks about the negative stigma and toxic culture in the workplace.

Let's Hear from PSP Directly

Brandon is a firefighter based in British Columbia. In this short video, he talks about the importance of prioritizing self-care as a PSP.

Did these efforts help firefighters cope during the pandemic?

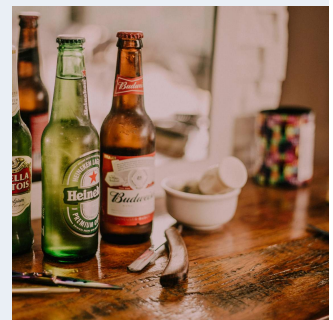
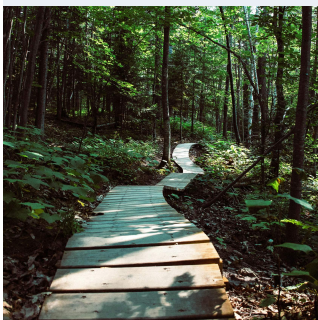
"I think the support for my work, if they made mental health and making sure that people were OK, and giving them outlets, a priority. Making a more stable and more positive work environment, I think that would have changed a lot. But that's not really a service you can give. That's the whole mentality that needs change."

Canadian PSP

What coping strategies do PSP typically use?

Research from McMaster University's Trauma and Recovery Research Unit shows that PSP may commonly turn to a set of coping strategies to care for their mental health. These include, but are not limited to:

- Dark Humour
- Nature
- Exercise
- Social Support
- Substances

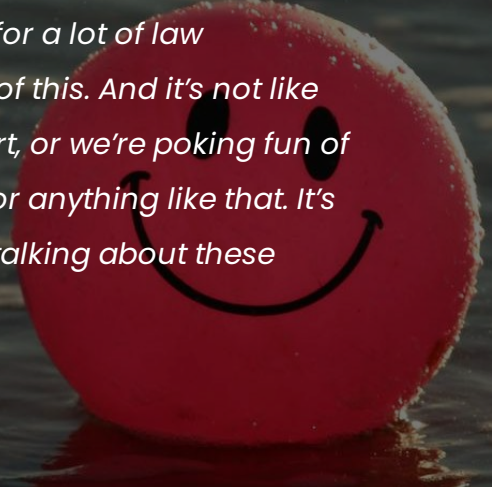


1. Dark Humour

PSP often use dark humor as a way to cope with their worries and stress while making sense of the traumatic experiences they face every day. This use of humor isn't because they are cold or heartless; instead, it acts as a shield to protect them from feelings of anger, stress, and other negative emotions.

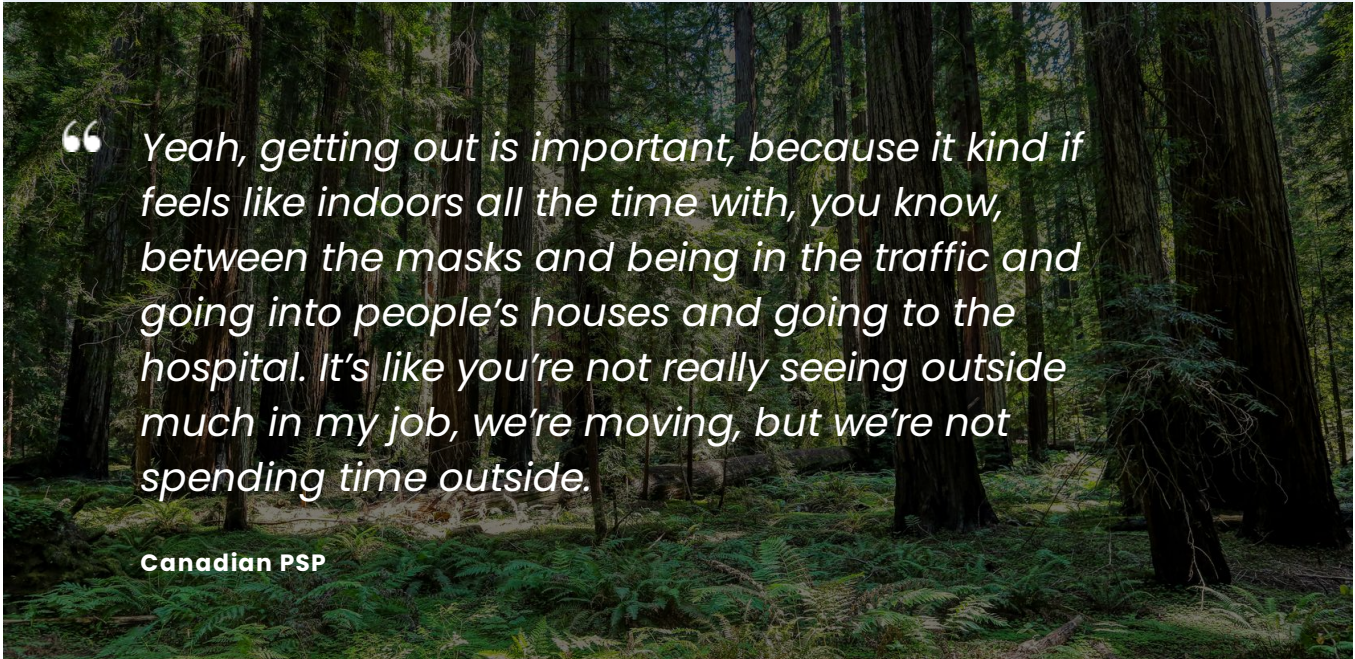
“ I think knowing before – yeah, beforehand knowing about – especially public safety within the law enforcement is that we see a lot of things, and we have ways of coping and ways of going about our days. And a lot of the times humour is the biggest thing, dark humour. I can go around talking about very casually about very, very traumatic events and I think it's very normal for a lot of law enforcement officers to talk very, very lightly of this. And it's not like we're making fun of anyone who's gotten hurt, or we're poking fun of – because they're inmates that they're lowly or anything like that. It's just it's our way of going about our day and talking about these things and coping.

Canadian PSP



2. Nature

PSP often immerse themselves in nature to escape work-related stress, especially during the COVID-19 pandemic when public closures and social distancing measures limited their ability to engage in other activities.

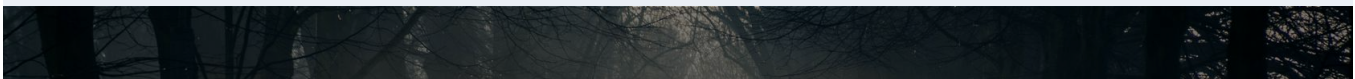


“ Yeah, getting out is important, because it kind of feels like indoors all the time with, you know, between the masks and being in the traffic and going into people’s houses and going to the hospital. It’s like you’re not really seeing outside much in my job, we’re moving, but we’re not spending time outside.

Canadian PSP

3. Exercise

Many PSP use physical activity as an outlet to relieve the stress associated with their profession. Although many gyms were closed during the pandemic, PSP adapted by finding alternative ways to stay active.



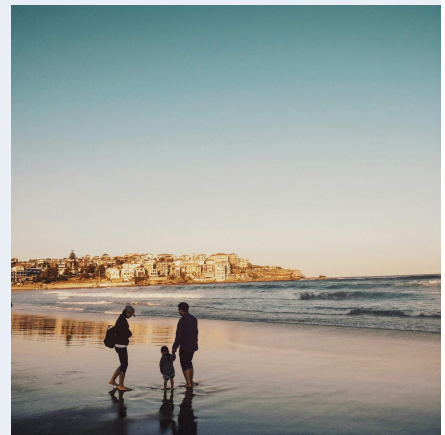
“ Exercise, I work out a lot. I don't work out more now than I did before COVID. I've always worked out a lot because it makes me feel good physically and mentally. So I've been continuing to do that which has helped.

Canadian PSP

4. Social Support

PSP rely a lot on their coworkers for support in dealing with work-related stress, as they are often the ones who truly understand the unique challenges of the job. Many PSP also turn to their families and pets for connection and support, which helps improve their mental well-being and motivates them to keep going.

Research has shown that PSP who feel they have strong social support networks are less likely to develop mental health issues like PTSD and depression.



"No, I think that just at the end, working in a fire department, working with your cohort, your close people like that, is that, those become your family, right? Because your family is not as accessible as before. Because of fear of COVID and stuff like that. So if I would have had a bad crew at work, I think it would have gone a lot differently. So having good people in your tight circle, is I think the only way I got through it."

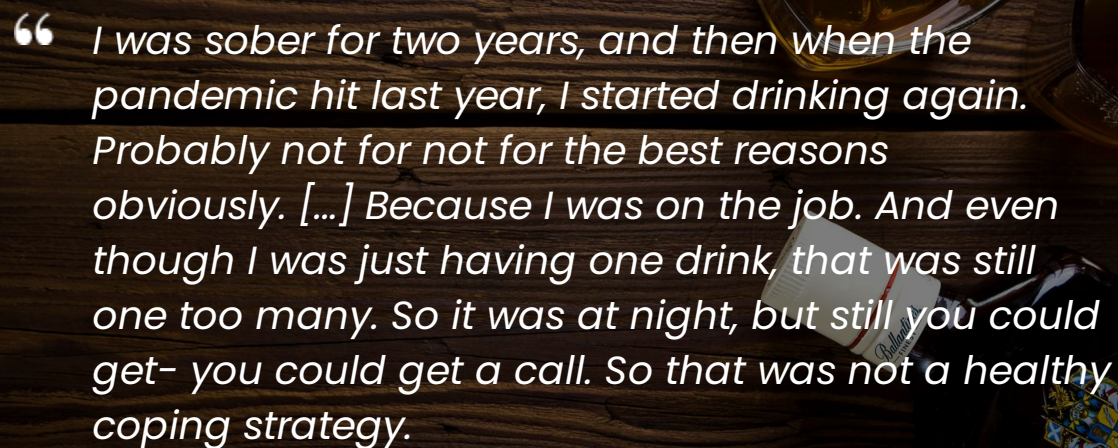
Canadian PSP

"No matter what, you have to walk your dogs, you have to take care of them. So having other beings in the house that needed care and attention was very useful. Thank God. And if that was what got my ass out of the house, because I had to walk the dogs, then I walk the dogs. And even if I had a day where I stayed at home, somebody still got to walk that day. And they still go outside"

Canadian PSP

5. Substance Use

During the COVID-19 pandemic, PSP couldn't use their usual coping methods, like going to the gym or spending time with family and friends, because of busy work schedules and restrictions. As a result, some PSP turned to alcohol and drugs to cope with the stress they experienced on the job.



“ I was sober for two years, and then when the pandemic hit last year, I started drinking again. Probably not for not for the best reasons obviously. [...] Because I was on the job. And even though I was just having one drink, that was still one too many. So it was at night, but still you could get- you could get a call. So that was not a healthy coping strategy.

Canadian PSP

Let's Hear from Reece

Reece, a paramedic from Manitoba, describes the way he and his coworkers would cope with the stressors during the pandemic.

How did you cope with fear?

Knowledge Check

This knowledge check will help solidify your learning of self-care and coping among PSP. Answer the questions below based on the content above.

Which of the following best defines the concept of coping?

- ☐ Relying on social support networks to manage emotional challenges.
- ☐ The practice of taking responsibility for one's health and well-being through self-awareness and self-discipline.

☐

The thoughts and behaviours individuals use to handle stressful situations.

☐

Engaging in physical activities to improve mental and physical health.

SUBMIT

Which of the following best explains the difference between coping and self-care?

☐

Coping and self-care are interchangeable terms with no significant differences.

☐

Coping involves managing stress, while self-care focuses on maintaining overall well-being.

☐

Coping is a proactive approach, while self-care is a reactive approach.

☐

Coping is about physical health, while self-care is about emotional health.

SUBMIT

Select all that apply: Why are coping and self-care essential for PSP?

☐

They provide PSP with tools to handle challenging situations effectively.

☐

They ensure PSP can work longer hours without experiencing burnout.

☐

They allow PSP to better manage the stress and emotional toll of their work.

☐

They eliminate the need for external support systems like coworkers or family.

☐

They help PSP maintain their physical and mental health.

SUBMIT

Select all the coping strategies that PSP commonly used during the COVID-19 pandemic.

- ☐ Avoiding all forms of social interaction to focus on work.
- ☐ Immersing themselves in nature to escape work-related stress.
- ☐ Dark humour to manage stress and emotions.
- ☐ Relying solely on substances like alcohol to cope with stress.
- ☐ Turning to physical exercise as an outlet for stress relief.

SUBMIT

Why is it crucial for PSP to prioritize self-care?

To allow them to work longer hours without experiencing



☒

burnout.

☐

To eliminate the need for external support systems like coworkers or family.

☐

To focus solely on physical health over mental well-being.

☐

To ensure they can effectively handle the stress and emotional toll of their work.

SUBMIT

Summary

This lesson explored the critical role of self-care and coping strategies for Public Safety Personnel, addressing their unique stressors and cultural barriers to mental health support. Here are some key takeaways:

1. **Recognize the unique stressors.** PSP face significant challenges in maintaining self-care due to demanding work schedules.
2. **Identify effective coping strategies.** Engaging in nature and physical activity can help alleviate stress.
3. **Promote social support.** Strong connections with coworkers and loved ones are crucial for mental well-being.

4. Acknowledge pandemic impacts. The COVID-19 pandemic has influenced coping mechanisms for PSP.

Remember, prioritizing self-care and seeking support are essential steps toward maintaining mental health and resilience.

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Mental Health Supports



Learning Objectives

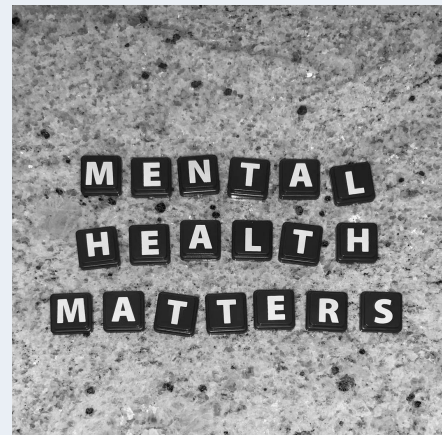
After completing this lesson, you will be better able to:

- 1 Describe the mental health toll the COVID-19 pandemic had on PSP's mental health.
- 2 Recognize barriers to mental health supports that PSP face.
- 3 Define cultural competency and its importance for supporting PSPs' mental health.

Mental Health among PSP

Mental health refers to a person's emotional, psychological, and social well-being. It affects how we

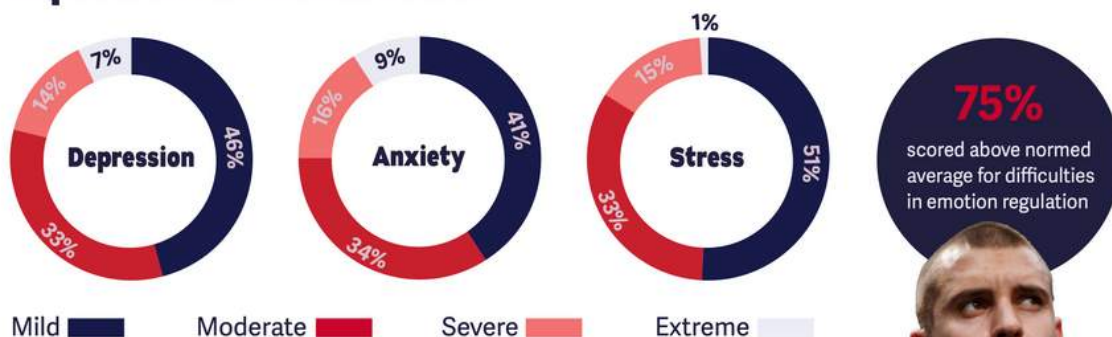
think, feel, and behave in our daily lives. Good mental health helps us cope with stress, relate to others, and make decisions. It is just as important as physical health. Everyone has mental health that can change over time depending on life experiences, stress, and other factors. When mental health is not good, it can affect how we handle challenges, relate to others, and enjoy life.



PSP often experience many different types of stressful and traumatic events, like accidents, fires, and life-threatening injuries. In a large survey of Canadian PSP, people reported experiencing an average of 11 out of 16 different types of traumatic events, with many (71.3%) experiencing these events 11 times or more. Because of this constant exposure to trauma, PSP have higher rates of mental health issues, such as post-traumatic stress injuries, PTSD, substance use problems, depression, and anxiety. In fact, nearly 45% of Canadian PSP were found to have at least one mental health condition. Even though they need mental health support, many PSP are hesitant to seek help because of stigma and a lack of proper resources.

During the COVID-19 pandemic, PSP worked on the frontlines to help their communities. Research done during and after the pandemic shows the impact it had on PSP's mental health. A study by McMaster University's Trauma and Recovery Research Unit found that nearly half of the 721 Canadian PSP surveyed between February 2021 and April 2023 showed signs of PTSD. Additionally, 61% showed symptoms of depression, 53% of anxiety, and 67% of stress. As mental health issues and burnout rise, more and more PSP are thinking about leaving their jobs because of their struggles with mental health. This could lead to a shortage of workers in this important field.

Impacts on PSP mental health



38.62% of PSP met cut-off for probable PTSD

18.6% of PSP report low levels of organizational support

When we came back out of the back of the truck after gowning up, the patient was lying face down on his steps and he had had a cardiac arrest in the time it took for us to finish putting on this PPE. So, then we went from take a call for someone who was still alive to someone who has died in the time for us to put on PPE.

- Paramedic



For more information on the Trauma and Recover Research Unit's COVID-19 findings with PSP, go to the following website:

<https://www.thetraumaandrecoverylab.com/payingthepriceforsafety>

Many PSP report that it is hard to find the time to care for them mental health when it is difficult to access supports. Self-Assessment Tools, like the one pictured below

adapted from the Mental Health Continuum Model, can be helpful for PSP to get a snapshot of their current mental health and receive direction to relevant supports.

The Mental Health Continuum Model (MHCM) is a self-assessment tool that checks your mental health status. By giving you the ability to identify changes in your mental health, this tool can increase resilience, reduce stigma, and improve well-being.

Once you've used the tool to check in with yourself, it will show your place on the continuum and direct you to helpful resources.

Click on the following link to try out the Self-Assessment Tool for yourself:

<https://canemerg-urgencecan.com/mental-health-continuum-model/>

“ And just the sensation of there's just never enough time for myself to get my mental health completely under control I'm strapping enough band-aids on that I can keep functioning but there's no real options to get all the time I need until I'm no longer functional. And I don't have time for breakdown so keep limping on.”

Canadian PSP

Barriers to Mental Health Support

One of the main challenges for PSP is the lack of mental health professionals who are specifically trained to help them. Treating the mental health needs of PSP requires special knowledge and skills. Right now, there aren't many mental health workers with this expertise, so PSP have been struggling without proper help for years. Many PSP also don't have easy access to the right kind of support for trauma-related issues, and often, it's up to the individual to find the right care on their own.

Take a look at what PSP had to say about access to mental health supports by scrolling through the quotes below.

"What else? I mean they offer things like, "We off a discount if you go to this gym." I'm like, "Great, do you provide time for me to actually go and babysitting for when my kids were super young because I can't take advantage of that."

We don't have anything that's actually attached to our station so it's all external stuff that we have to go to."

Canadian PSP

"Well it's just, though I can relate to her right? Like because it was clear she didn't understand my issues or what I was having anxiety about. You know I had told her I'm having anxiety about something and she's like "well just tell yourself that's not happening." Well OK, if it was that easy obviously, I would say it's not happening. So I had one session with her, and it was horrible. So like I don't know if I would waste my time."

Canadian PSP

"I've seen my doctor at least three times for different – essentially, PTSD things that I've dealt with over the years, and got nowhere with him; because he doesn't specialize in mental health. And so I've just been, I guess, suffering in silence for probably two-thirds of my career, not knowing how to do it, not knowing what to do; just, you know, get up and go to work and do it again the next day."

Canadian PSP

The Need for Specialized Mental Health Training

PSP say that the most important part of getting mental health help is working with someone who understands their job and the challenges they face. To help PSP properly, mental health providers need to know about the tough and often traumatic situations they deal with, the culture of their work, and the stress they experience every day. In short, effective mental health support for PSP needs to come from providers who are trained to understand trauma and the unique nature of their work.

"And so if you have people that I actually really understand how the work is done, then you can better treat them."

CONTINUE

Cultural Competency

Cultural competency means having the knowledge, skills, and attitudes to understand and respect different cultures. For mental health providers, it means offering care that aligns with the patient's cultural background. This is important for improving health outcomes and ensuring the right support is given. By understanding the cultural context of a patient, clinicians can create a treatment plan that better meets the person's needs. Having this cultural knowledge is crucial for providing effective care, especially for PSP.

PSP have jobs that are physically, mentally, and emotionally demanding. They often need to make quick decisions in uncertain situations and are regularly exposed to traumatic events like violence and accidents. To provide the best care, it's important to understand the unique challenges PSP face. Their jobs not only affect their mental health but also involve specific beliefs, values, and behaviors that can influence how well mental health support works if these factors aren't considered.

Watch the video below for examples of how cultural competence has been helpful in addressing the unique mental health needs of PSP in the United States.

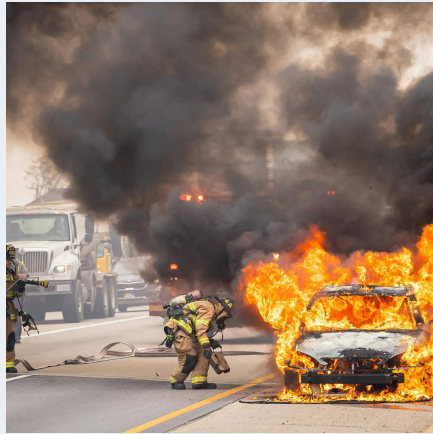




How First Responders Benefit from Cultural Competence in Mental Health

Being a First Responder is more than just a role, in many ways, it is an identity. Even in the face of being on the front lines of unimaginable events, First Responders across the Nation continue to show up to protect and service our communities.

[VIEW ON YOUTUBE >](#)



Becoming Culturally Competent

Becoming culturally competent requires knowledge about PSP occupations, including the structures and policies that shape their work, the various roles within the occupation and how they are related to each other, as well as their work duties and responsibilities.

"I would say that they need to understand the work environment, and that, they – personally I always believe that if you were doing research you should integrate yourself in that, meaning go to some – not just one day of being or in a work along place; go for a week, for a month; live a month in a firehouse or do a ride-on with cops for a month. You'll see how the real – like a situation can snap in an instant, and then you understand our way of thinking."

Canadian PSP

It also requires an understanding of the difficulties in establishing trust in mental health providers.

"...corrections officers are very skeptical, very non-trusting people. They are – it is a job hazard to trust people. I've been to a lot of therapists. I have seen my fair share – I have had to explain my story over and over again. We are not in the business of trusting people. So if you want to get through to us, you need to be pretty sticky, and you need to be trustworthy, and you need to be honest. And if you can't help us, don't help us. Move onto somebody that can – move out of the way for somebody that can."

Canadian PSP

An important part of developing knowledge about PSP occupations is understanding the types of trauma exposures inherent in their work. Many PSP fear talking about their trauma will harm the mental health provider. Being comfortable talking about traumatic situations has been identified as a necessary skill for mental health providers.

"We now have trauma informed counsellors which is nice. Because the first counselling session I ever went to at the end the lady asked me not to come back because I gave her nightmares. That was a stress and that prevented me from going to counselling for awhile because I didn't want hurt someone trying to seek help."

Canadian PSP

CONTINUE

Knowledge Check

This knowledge check will help solidify your learnings on mental health supports for PSP. Answer the questions below based on the content above.

What does mental health primarily refer to?

- ☐ A person's physical fitness and exercise routines
- ☐ A person's emotional, psychological, and social well-being
- ☐ A person's ability to achieve career success
- ☐ A person's ability to avoid stress and challenges

SUBMIT

Select all that apply: Which of the following are barriers to mental health support for PSP?

- ☐ Limited time and resources to prioritize mental health care
- ☐ Easily accessible trauma-related mental health support
- ☐ Abundance of culturally competent mental health providers
- ☐ Stigma associated with seeking mental health help
- ☐ Lack of mental health professionals trained to address PSP-specific challenges

SUBMIT

What does cultural competency mean in the context of mental health support for PSP?

-
- ☐ Avoiding discussions about cultural differences to prevent misunderstandings
 - ☐ Focusing solely on the physical health of individuals
 - ☐ Providing the same treatment plan for all individuals regardless of their background
 - ☐ Understanding and respecting different cultures to provide effective care

SUBMIT

Select all that apply: Why is cultural competence important for mental health support in PSP?

- ☐ It eliminates the need for mental health providers to understand PSP's trauma exposures.
- ☐ It ensures PSP receive care that respects their cultural background and work environment.

☐

It helps mental health providers create treatment plans suited to PSP's unique needs.

☐

It builds trust by addressing PSP's skepticism towards mental health providers.

☐

It focuses solely on the physical health of PSP to improve their mental well-being.

SUBMIT

Summary

PSP face unique mental health challenges due to the demands of their jobs. Addressing these challenges requires tailored support and proactive strategies. Here are some key takeaways:

1. **Understand the challenges.** Public safety work exposes personnel to high stress and traumatic events.
2. **Prioritize specialized care.** Mental health support should be culturally competent and tailored to their experiences.
3. **Use self-assessment tools.** Regular evaluations can help identify mental health needs early.

Remember, prioritizing mental health is key to sustaining a fulfilling career in public safety.

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Trauma-Informed Care



Learning Objectives

After completing the lesson, you will be better able to:

- 1 Define trauma-informed care (TIC) and its benefits.
- 2 Describe how TIC is implemented at the organizational and clinical levels.
- 3 Recognize the value of TIC among PSP professions.

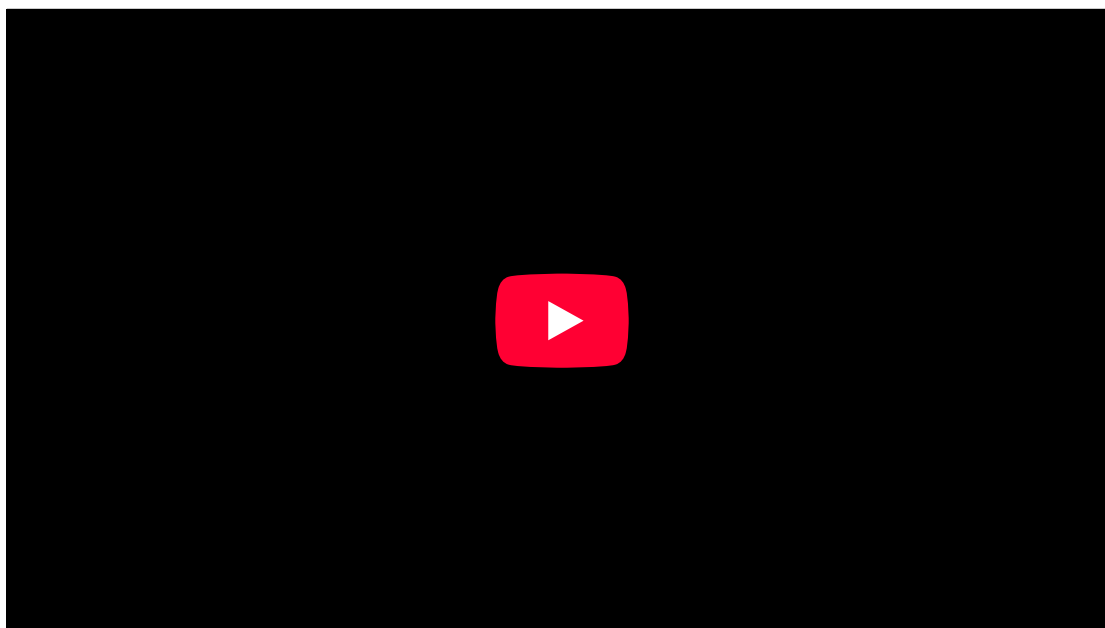
What is Trauma-Informed Care?

Trauma is a common experience, with nearly two-thirds of Canadian adults reporting they've been exposed to at least one potentially traumatic event. While most people who go through trauma have few or no long-term symptoms, some may experience more serious and lasting mental health effects, such as post-traumatic stress disorder (PTSD) or substance abuse. It's not just the severity of the event that makes it traumatic,

but also how the person views the event. Two people can experience the same traumatic event, but each may react to it very differently.

As mental health providers become more aware of how trauma affects people, they are recognizing the importance of using trauma-informed care. Trauma-informed care (TIC) is an approach that focuses on the strengths of individuals and acknowledges that trauma has a big impact on a person's physical, mental, and social development. This approach understands that trauma affects how people engage with healthcare services and how they respond to care. TIC also considers cultural, historical, and gender-related factors, making it especially helpful for understanding biases in racial and ethnic discrimination. The Substance Abuse and Mental Health Service Administration (SAMHSA) outlines six core principles to help create supportive environments that promote safety and reduce the risk of re-traumatization. These principles include safety, trust, transparency, peer support, collaboration, empowerment, and attention to cultural, historical, and gender issues.

 **YOUTUBE**



First Responders: Trauma Informed Care

Benefits of Trauma-Informed Care

In many different settings (such as hospitals, mental health care, and end-of-life care), trauma-informed care (TIC) has shown a big improvement in patient outcomes. For example, using TIC with adults has been linked to reductions in symptoms of depression, anxiety, and PTSD, a lower risk of re-traumatization, better relationships between patients and providers, and a better quality of life. In an inpatient mental health unit, TIC has also helped reduce the frequency and intensity of challenging behaviors, including aggression.



Safety

Throughout the organization, patients and staff feel physically and psychologically safe



Trustworthiness + Transparency

Decisions are made with transparency, and with the goal of building and maintaining trust



Peer Support

Individuals with shared experiences are integrated into the organization and viewed as integral to service delivery



Collaboration

Power differences — between staff and clients and among organizational staff — are leveled to support shared decision-making



Empowerment

Patient and staff strengths are recognized, built on, and validated — this includes a belief in resilience and the ability to heal from trauma



Humility + Responsiveness

Biases and stereotypes (e.g., based on race, ethnicity, sexual orientation, age, geography) and historical trauma are recognized and addressed

Source: <https://www.traumainformedcare.chcs.org/what-is-trauma-informed-care/>

Integrating and practicing trauma-informed care (TIC) requires changes within both the organization and clinical practices. Most experts agree that TIC should first be implemented at an organizational level before it's applied in clinical settings.

TIC has many definitions and different models for putting it into practice. Implementing trauma-informed services can improve things like screening and assessment processes, treatment planning, and placement, while also reducing the risk of re-traumatization. TIC can help create a greater sense of safety for clients with histories of trauma. For TIC to be effective, it needs to include both clinical and organizational practices that understand and address the impact of trauma on both individuals and providers.

Key elements of TIC implementation often include the following (Adapted from Menschner & Maul, 2016):

- Acknowledging the impact of trauma on physical, psychological, social health and wellbeing
- Recognizing signs and symptoms of trauma among individuals and their families
- Integrating knowledge about trauma into practice and policies
- Seeking to avoid re-traumatization

One of the leading organizations in developing TIC approaches to care, the Substance Abuse SAMHSA (2014) has developed four assumptions to guide the implementation of TIC into organizations and practice.

The Four Rs of Trauma-Informed Care



This figure is adapted from: Substance Abuse and Mental Health Services Administration. (2014). SAMHSA's concept of trauma and Guidance for a trauma-informed approach. HHS publication no. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration.

<https://www.childtrends.org/publications/how-to-implement-trauma-informed-care-to-build-resilience-to-childhood-trauma>

“A program, organization, or system that is trauma-informed realizes the widespread impact of trauma and understands potential paths for healing; recognizes the signs and symptoms of trauma in staff, clients, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, practices, and seeks to actively resist re-traumatization.”

(SAMHSA, 2012, p. 4)

CONTINUE

Integrating TIC into Organizational Practices

As an organizational approach, TIC is embedded and integrated into all areas of health services delivery.

Integrating the principles of TIC in organization practice involves the following (Adapted from Menscher & Maul, 2016):

Leading and communicating about the transformative process —

Integrating TIC into an organization starts with strong support and commitment from leadership. Communication with all staff members should begin early, be ongoing, and remain transparent. The goal is not just to put TIC practices in place, but to transform the entire organization, which will benefit patients, families, and staff. This process requires significant investments of time and resources, especially for staff training. A detailed plan and strategy for rolling out these changes are essential to support this level of transformation.

Engaging Patients in Organizational Planning —

Including individuals who have experienced trauma in the change process is important to provide an informed perspective on the decisions and steps involved in implementing TIC. Ideally, these individuals should be part of all core steering committees and other relevant groups.

Training Clinical and Non-Clinical Staff

TIC starts with the first contact a person has with an organization, such as interactions with receptionists, intake personnel, and direct care staff. It recognizes that every staff member can either positively or negatively impact an individual's willingness to engage with health services. Clinical staff may need extra training on how to apply TIC strategies and build trust and safety in their relationships with patients.

Creating a Safe Environment

Individuals who have experienced trauma often have increased anxiety when they are in a new setting and feel physically, socially, or emotionally unsafe. Conducting an audit of the physical, social, and emotional environment in the organization can identify areas of improvement.

Integrating Trauma-Informed into Clinical Practice

Integrating the principles of TIC into clinical practice involves the following (Adapted from Menscher & Maul, 2016):

Involving Individuals into the Treatment Process

Traditional care approaches are often clinician-directed, with little opportunity for patient input. In contrast, in trauma-informed care (TIC), patients are actively involved in their care and are the main decision-makers in the process. People who have experienced trauma often feel powerless or trapped, so giving them a voice and control over their care is an important way to help them regain agency and control over their lives.

Screening for Trauma —

While experts agree that trauma screening is necessary, there are many differences in when and how to screen patients. Supporters of universal screening for all patients believe it's valuable to have this information from the start to guide care. Universal screening can also help reduce gender and racial biases. However, some suggest that building trust and a therapeutic relationship with the patient is essential before asking about trauma history, as screening too soon could potentially re-traumatize them. Despite these differences, screening should consider the setting (e.g., primary care vs. mental health care), the provider's ability to offer appropriate care options, and the importance of minimizing re-screening. It should also be conducted by healthcare professionals trained in trauma screening.

Training in Trauma-Specific Treatment —

There are several evidence-based trauma-specific interventions and treatments available for clients, such as:

- Eye Movement Desensitization and Reprocessing (EMDR)
- Prolonged Exposure Therapy (PE)
- Cognitive Processing Therapy (CPT)

Trauma Informed



Trauma-Informed Care and Public Safety Personnel

Implementing TIC into both organizational and clinical practices is important for mental health providers who care for PSP. As discussed in earlier modules, PSP face higher levels of stress and trauma due to their roles in protecting the safety and well-being of the public. Many PSP also report experiencing organizational stress, leading to

frustration, detachment, and burnout. Understanding and applying the principles of TIC is a key step in caring for PSP.

Being trauma-informed doesn't mean assuming everyone has a history of trauma. It means being aware that trauma is possible, especially among high-risk groups like PSP. Mental health providers need to recognize and assess the potential for trauma in PSP and take a holistic approach that considers the emotional, behavioral, cognitive, spiritual, and physical health of the individual.

Becoming trauma-informed takes time. Starting with the six principles of TIC is a good place to begin, as studies on TIC in PSP occupations have shown that emotional safety and trust, supported by strong team relationships, are very important.

Other strategies for providing trauma-informed care for PSP include:

Psychoeducation

Providing psychoeducation about trauma and its effects can help PSP to explore their own behaviours and normalize their experiences due to high levels of stigma.

Grounding

Many PSP would benefit from grounding and breathing exercises to help PSP when they are dysregulated or triggered by a trauma memory. Avoid trauma is difficult for PSP occupations. Instead, helping PSP to learn to regulate their trauma

Knowledge Check

This knowledge check will help solidify your knowledge of trauma-informed care.

Answer the questions below based on the content above.

Which of the following is a demonstrated benefit of implementing Trauma-Informed Care (TIC)?

☐

Increased frequency of re-traumatization

☐

Improved patient-provider relationships

- ☐ Reduction in symptoms of depression, anxiety, and PTSD
- ☐ Increased aggression in in-patient mental health units
- ☐ Prioritization of rapid diagnosis over patient safety

SUBMIT

Which of the following is a key element of implementing Trauma-Informed Care (TIC) at the organizational level?

- ☐ Focusing solely on clinical staff training
- ☐ Engaging individuals with trauma in organizational planning
- ☐ Acknowledging the impact of trauma on individuals and their families
- ☐ Prioritizing rapid implementation over planning

SUBMIT

Which of the following best describes Trauma-Informed Care (TIC)?

- ☐ A strengths-based approach that acknowledges the prevalence and impact of trauma while promoting safety and reducing re-traumatization.
- ☐ A care approach that focuses solely on treating trauma-related disorders.
- ☐ An approach that applies only to mental health professionals working with trauma survivors.
- ☐ A clinical method that prioritizes rapid diagnosis and treatment of trauma symptoms.

SUBMIT

Which of the following is a key consideration when implementing Trauma-Informed Care (TIC) in clinical practice?

- ☐ Screening for trauma only after treatment begins
- ☐ Focusing solely on trauma-specific treatments
- ☐ Prioritizing rapid diagnosis over building trust
- ☐ Engaging patients as active participants in their care

SUBMIT

Which of the following strategies are recommended for implementing Trauma-Informed Care (TIC) for Public Safety Personnel (PSP)?

- ☐ Providing psychoeducation about trauma and its effects

- ☐ Engaging PSP in grounding and breathing exercises
- ☐ Assuming all PSP have a history of trauma
- ☐ Prioritizing rapid implementation over planning
- ☐ Focusing solely on clinical staff training

SUBMIT

Summary

This lesson focuses on Trauma-Informed Care (TIC) and its role in addressing the effects of trauma on individuals. It emphasizes the principles of TIC and its benefits in organizational and clinical settings. Here are some key takeaways:

1. **Benefits of TIC.** TIC is associated with reduced mental health challenges and increased quality of life among adults.
2. **Implement TIC principles.** Recognizing trauma's impact is essential for effective care.
3. **Collective action.** Integrating TIC requires participation at both the organizational and clinical levels.
4. **Foster supportive environments.** Integrating TIC improves patient outcomes and trust.

By applying these principles, you can create meaningful change and support those affected by trauma.

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Feedback



- 1 Was this training relevant to the work that you do?
- 2 Was the training easy to use? If not, please explain.
- 3 Was the training easy to understand? If not, please explain.
- 4 Was there anything in the modules that was new information to you? Please explain.
- 5 Do you have any suggestions for changes to the training (e.g., add content, delete content)?