

Firefighter Strong

News for a Better You and a Stronger Crew



Sufficient staffing means a stronger, safer department.
Pull-out guide for recruiting tips included inside!

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ABOUT THE

National Volunteer Fire Council

The NVFC is the leading nonprofit membership association representing the interests of the volunteer fire, EMS, and rescue services. The NVFC serves as the voice of the volunteer in the national arena and provides resources, programs, education, and advocacy for first responders across the nation. Many of the NVFC's programs and initiatives apply to all members of the fire and emergency services, whether volunteer or career. Membership in the NVFC is low-cost and provides a wide array of benefits; find information at www.nvfc.org/ **BeYourBest**. Learn more about the NVFC and access resources at www.nvfc.org.

DISCLAIMER

The information and resources presented in this document are for informational purposes only. They are not intended to offer a diagnosis or treatment of any health issue. Consult a healthcare professional if you feel you may be experiencing a health issue or for any questions you may have. This document does not provide a comprehensive listing of resources that are available.



A Stronger Fire Service Starts Here

By Steve Hirsch, NVFC Chair

Cancer. Post-traumatic stress. Injuries. Low retention. There are a lot of risks and challenges that today's fire and emergency services face. It may seem daunting to address all of the issues, but the truth is they are all connected.

That is the idea behind the National Volunteer Fire Council's (NVFC) Serve Strong campaign. In a nutshell, a better you means a better crew. In other words, by proactively addressing issues relating to health, safety, and overall wellbeing, we become stronger and more effective as a whole.

It starts with the culture and priorities of the department. A department that embraces a culture where the health and safety of members comes first will see a reduction in injuries, fatalities, and life-altering illnesses while also seeing an increase in morale, productivity, and member satisfaction/fulfillment. Members will feel valued and appreciated, and you'll be creating an environment and a community to which people want to belong.

It is also the responsibility of each individual. Placing value on your own health and safety as well as that of your crew makes you a better and more capable responder. Every action you take as a firefighter, EMS provider, or rescue worker has a direct impact on your crew, your family, and the community you protect. That includes the decisions you make in regards to health and safety.

It all ties together. Proactively addressing critical issues including cancer, behavioral health, physical health, safety, and inclusion makes us stronger, both as individuals and as a team. By emphasizing overall health and safety and creating a positive culture in our departments, we will perform at our best and be more successful in our mission to serve our communities.

The NVFC is here to help. This newsletter provides information and resources to assist all members of the fire and emergency services – whether volunteer or career, from chief to new recruit – recognize and understand critical issues impacting our overall wellbeing. The next step is up to you. By taking action where there are areas you can improve upon as an individual and as a department, you are creating a safer, healthier, and better workforce for all. A stronger fire service starts here, and it starts with each of us.

Find additional resources to help you Serve Strong at www.nvfc.org/ServeStrong. The NVFC board of directors and staff are here for you. Contact our office at 202-887-5700 or nvffoffice@nvfc.org.

NVFC **SERVE STRONG**

Growing from the Pain: Lessons to be Learned from Firefighter Cancer

By Cathy McCray

I would like to share the last eight months of my life with you. I have never been one to share a lot of personal things, but I think that telling my story is necessary in order to impact others in changing their thought processes. I have survived to tell you about my experience and help in the fight against firefighter cancer.

I have been employed with Loudoun County (VA) Fire & Rescue for 14 years, and I have been exposed to many different IDLH (immediately dangerous to life or health) environments throughout my career. Like most firefighters, my focus has always been to serve and protect others. However, what I have found is that when it comes to occupational cancer, we must fight for ourselves. It is a very different battle, and it is very personal.

I had my annual 1582 work physical in April 2018 and no issues were found. That made it all the more shocking when I was diagnosed with stage III ovarian cancer on May 30, 2018. It has been determined that my cancer is occupational. I had extensive surgery followed by chemo and

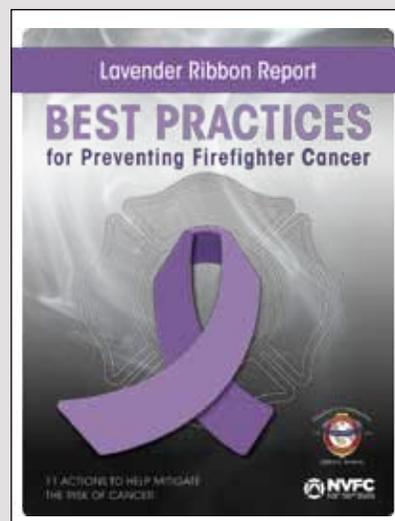
numerous follow-up procedures. I live alone and had to move back in with my mom in order to be cared for while going through the treatments, despite it being 3 ½ hours away from my job. It has been an extremely difficult process and it has changed me.

Fortunately, I am now in remission. I was able to return to work, first with light duty at the fire training academy, and eventually back to full duty. I have a long commute and was able to stay with a coworker and his family while working admin hours. It is very humbling. My work family has made it less stressful, and they have bent over backwards to help me mentally, physically, and emotionally. For this I am very grateful.

I want to share some very important lessons I have learned from this life-changing journey. Wisdom is what makes change, and wisdom comes from learning. We have so much to learn about firefighter cancers. By telling our stories and raising awareness of the dangers, we will gain wisdom. Change will come.

First and foremost, you must be your own advocate and fight for your life. No

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Learn the 11 actions every firefighter needs to take to lessen their risks of cancer. Download the *Lavender Ribbon Report* at www.nvfc.org/cancer.

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one else is going to do this for you. When you receive your annual work physical or any checkup, keep records of all that you go through and the results. The reality is that you need to ask doctors to check you for cancers and other illnesses. Most fire department physicals only evaluate and treat what is listed in NFPA 1582. Make sure that your personal healthcare providers are aware of your occupation and/or volunteer status. You also need to educate them of the types of exposures you encounter.

It is necessary to ask lots of questions — even the hard ones — and pay attention to your body. I had routine checkups, mammograms, pelvic exams/pap smears, and I thought I was in great shape. I was told ovarian cancer can only be found from a scan. It was very scary for me to learn that in spite of what I was doing for myself, it wasn't enough.

I also want to emphasize the importance of documenting all calls we respond to and filling out appropriate exposure forms every time. For one thing, this helps you better understand your risks and share them with your healthcare provider. For another, this is necessary when it comes to getting benefits under cancer presumption laws. Multiple states have passed these bills to assist those in public safety. Under these laws, if a firefighter is diagnosed with a cancer and there are no legitimate explanations of the cause, it is presumed that it is from their work environment and considered occupational cancer. Each state is different as to what types of cancers are covered, and it may

only cover paid firefighters and not volunteer. There are some states that do not have any cancer presumption laws. It makes me angry that politicians would put money above providing needed benefits to all firefighters, but this is what happens. While in this battle, I have learned a lot about how a bill is introduced into legislation and the process that takes place for it to move forward. I encourage all firefighters to educate themselves on this and on the cancer presumption laws in your state. If you do not have one or if the laws are inadequate (such as not covering volunteers), then fight to get this changed.

Being able to produce records of exposure is a critical step in the process for getting a worker's compensation benefit as the burden of proof is placed on the firefighter. Once you've received a diagnosis, this can seem overwhelming. My diagnosis felt like I was being handed a death sentence. I didn't want to feel that way, but I couldn't help but have those thoughts. As I have made progress and am preparing myself to pursue a work-related injury, I will have to go back and relive every event that I have gone through. I have been informed that my claim will most likely be denied the first time and that I will need to retain an attorney. I will be required to have facts about specific exposures in order to prove occupational cancer. I will need to make sure that I have exposure forms completed appropriately for every IDLH environment to which I have been exposed. Cancer is not cheap, and the cost of paying out is the drive behind making it difficult on those who are trying to fight. It is a frustrating and painful process on top of what I am already going through,

but that is the reality and the reason why firefighters need to make sure they keep these exposure records.

I am very grateful and blessed to work for an organization that has become proactive in cancer prevention. We have the ability and resources to educate all of our people and to provide extra equipment when ours needs to be decontaminated. We are also still learning how to handle the circumstances that occur when one of our own receives a cancer diagnosis. My perspective of my work environment will never be the same, but I do feel secure in knowing that those above me are trying to understand and see it from a different perspective as well. They are working to change the toxic cultures that have evolved so that we can reduce the cancer risks our firefighters face moving forward. Regardless of your department's size or budget, there are many things you can do to reduce the risks for your responders.

Be the voice of positive change in your department.

To my brothers and sisters who are struggling with cancer or other occupational illness, I encourage you to reach out to those around you as well as educate yourselves as much as possible. Take as much time as you need so that you don't become overwhelmed. Remember that there are people and organizations that are willing to assist you, and this support can make so much difference. I found the Firefighter Cancer Support Network to be a great resource. My work

family has been an amazing support system every step of the way. They have also stood up for our organization and worked to advocate for additional cancer presumption legislation in Virginia.

I encourage those of you that are fighting for yourself or for other individuals to keep fighting and know that you are making a huge impact on the lives of many. We will continue the process of growing and learning, and through these efforts we will create change and innovation so that we can put an end to firefighter cancer. ■ ■



ABOUT THE AUTHOR

Cathy McCray is a career firefighter/technician in Loudoun County, VA. She has served with Loudoun County Fire & Rescue for 14 years and is also an adjunct instructor for West Virginia University Fire Service Extension. She started her career as a volunteer firefighter in West Virginia in 1993.

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Improving your Culture of



By Chief Judy Smith Thill

Researching articles on firefighter safety, there were quite a few that focused on “creating” a culture of safety. With all the information we now have at our fingertips on line-of-duty injuries and deaths, all fire departments should already have some kind of safety culture started. It might not be documented, and it might not be perfect, but my guess is you all have a safety culture, so you really don’t need to “create” one. However, you most likely need to improve on the culture of safety you have.

We all know that safety improvements can get very expensive with adding equipment, vehicles, and fire stations; however, the first thing you need in order to improve the safety culture of your department is actually free. Having the right attitude costs nothing! You need to start with the attitudes of leadership, as well as of the firefighters. If leadership doesn’t have or show a commitment to safety and firefighters take no responsibility themselves, it will be difficult for you to improve the safety culture, or any part of the organization, no matter how much money you have.

When looking to improve anything in your fire department, it needs to begin with leadership, since that is the foundation for everything. For example,

if your department has a high number of injuries, you will probably also find a leadership problem. Leadership needs to involve company officers and firefighters in all aspects of improving the culture. Company officers have the most influence over firefighters, and the firefighters are the ones who will be most affected by any changes. So, input by everyone is critical when trying to improve your safety culture.

Leaders need to communicate their commitment in both words and actions. Words can be in the form of written policies and procedures, and actions include setting examples and walking the talk. Policies, procedures, and actions need to be supported and promoted by all levels of leadership. That consistency is crucial.

What about the rank and file? Firefighters need to follow policies and guidelines established; however, firefighters also must take personal responsibility for their own safety and the safety of fellow firefighters. They cannot simply point to leadership and say, “It is their responsibility” or “S/he doesn’t care, so why should I?” For those who may have less than supportive leadership, firefighters can still develop and follow their own good safety habits and practices.

Funding a new initiative is often looked at as a barrier to any safety improvement. However, many times, little to no money is needed to make an impact, even for concerns involving the most recent focus of cardiac, cancer, and post-traumatic stress concerns.

Cardiac issues have been the leading cause of firefighter on-duty deaths for years, and although the root causes go far beyond fitness levels, functional fitness is still extremely important. Some may think a gym full of fancy exercise equipment is needed to start a fitness program, yet there are many departments that use their own station layouts and fire equipment to create workout routines without any added costs.

The fire service is now seeing higher rates of cancer in firefighters. Maybe you can’t afford extractors to wash gear, but you can set up procedures where you require a gross decon before heading back after fire calls. Firefighters can also wash their hands and faces while still on-scene, and shower as soon as possible once back at the station. Just those simple acts can remove a significant amount of cancer causing contaminants with little to no cost.

There has also been an increase in firefighter suicides because of post-traumatic stress injury/disorder. There are many free resources you can offer. First, do you encourage talking after bad calls, or are firefighters told to suck it up and deal with it? Don't feel comfortable talking? Maybe a local clergy person is willing to be on-call. Have you gotten the NVFC Share the Load materials for your firefighters? They have all kinds of resources, including a 24/7 helpline number you can post for firefighters to call if they need to talk. More information on these free resources is available at www.nvfc.org/help.

As you can see, large sums of money are not always needed to make a significant improvement in your safety culture. It starts with the right attitude and committing to start tackling some of these issues with the resources you have. Yes, there will always be improvements that cost more money than you have; however, my guess is there are many free and inexpensive actions you have yet to take.

Improving your safety culture starts at the top, but it needs to include all levels of leadership, as well as the firefighters. Cultures are not programs. Safety should not be a program. Safety needs to be integrated into the regular routines, policies, and guidelines of the departments and continually evaluated and improved. You won't see a miraculous change overnight as it will take time, but

you need to start somewhere to move forward so you don't stay stagnant. If the organization never starts moving in the right direction, there will be zero hope for improvement in your safety culture.

Start small. Get creative. Be a champion for safety. ■ ■



ABOUT THE AUTHOR

Judy Smith Thill has been chief of the Inver Grove Heights (MN) Fire Department since 2007. Her 30 years in the fire service include 19 years as a paid-on-call firefighter and 23 years as a full-time chief officer. She is a board member of the MN State Fire Department Association, vice chair of the MN State Fire Chiefs Association Education Committee, and one of two MN directors to the National Volunteer Fire Council. Judy has a BS degree in safety management from Indiana University of Pennsylvania, MBA (abt) from Cardinal Stritch University, and has completed three Executive Leaders Programs.

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Strains and Sprains: Preventing Firefighter/EMS Injuries



BY KENN FONTENOT

While working a multi-vehicle pileup on the interstate, my partner and I were loading one of two patients into the ambulance. As my partner was turning to lower the backboard onto the jump seat for the first patient, I heard a crack and then a loud groan. My partner had suffered a severe lower back strain; he had turned sideways with a heavy load, and his back gave way.

Strains and sprains are the most common of injuries suffered by firefighters and EMS providers. According to the National Fire Protection Association, 48% (24,495) of injuries during fireground operations and 53% (30,970) of overall injuries for firefighters in 2017 were strains, sprains, and muscular pain. The CDC reported that for the year 2016, EMS providers suffered 7,500 sprains and strains. Many of these are preventable.

Improper lifting techniques, poor or no physical fitness training, overreach, lifting/moving loads that are too heavy, and improper shoes or attire are some of the reasons why responders get strain, sprain, and muscular pain injuries. Additionally, we go from zero to full throttle without the opportunity to warm up our joints and muscles. The combination of these factors can result in emergency scene injuries. Let us look at each individually as well as some solutions to help reduce these injuries.

As a disclaimer, I am not a gym instructor or trained as a physiologist. I did train under the direction and guidance of a competent instructor and strongly suggest that at first, responders should do the same. This avoids injuries, poor techniques, and helps guide you toward a desired physical condition outcome.

Lifting

With all the injury prevention information out there today, it amazes me how many responders still use poor lifting techniques. This is particularly true with younger responders. When I was working on the ambulance, I would often have to slow down enthusiastic younger members when moving patients so that we could position ourselves for a good, safe lift. These young'uns did not realize the dangerous position and lifting techniques they were using. They were still very strong and not concerned with long-term back injuries. They did not realize that on a normal shift, we would lift several thousand pounds when moving and lifting patients. Over time, this takes a toll on your back even when using good posture and techniques. It only gets worse if you use poor lifting practices.

I cringe when watching a firefighter moving a 14' roof ladder using a one-person lift and using their back instead of the legs to lift it. I immediately stop them, and we have a discussion about better ways to lift this equipment. A two-person

24' extension ladder raise is another skill that requires practice and teamwork. While not particularly heavy, these ladders are unwieldy and cumbersome. Good teamwork and proper lifting techniques are necessary to prevent injury.

If the load or person you are trying to lift is excessively heavy, ask for help. It is far better to take a couple of seconds longer waiting for assistance than to get injured. Departments should have guidelines as to what is a "heavy lift" when moving or lifting patients. Our ambulance organization used anything over 300 pounds as our threshold for asking for more help. Also, use additional responders when moving patients across ditches or up/down inclines as these are often slippery and more support is needed for a safe transport or transfer.

The best way to lift loads is with bent knees and a straight back. The quads (thighs) are the strongest muscles in the body; use these muscles to lift and not your lower back. This is the technique that I have personally used for my entire career and avoided back injuries. It takes practice and awareness that on each lift, you need to take the time to position yourself properly with your legs under you before moving or lifting.

Turning or twisting your back while moving a load is another way that many back injuries occur. When you need to

turn, turn your whole body, not only your upper torso. This prevents a twisting movement, which when under a load will strain your lower back. Even a relatively light load can cause injuries.

Physical Fitness Training

Many strains, sprains, and back injuries can be avoided with a proper exercise program. To fully prepare for the tasks you do as a first responder, your exercise routine must include both muscle strength and cardio. I did circuit training to incorporate both cardio and muscle strength into my workout. This technique provided a good balance for both.

You will benefit most if your fitness routine includes exercises that prepare your body for what you will be doing on the job. I would do specific exercises that targeted my back and quads. My favorite, because it closely mimicked lifting a spine board or stretcher, was the "Sumo Squat," which you can do by itself or with the addition of a weight. Another favorite was the "Wall Squat," where you hold a balance ball against the wall with your back while doing squats. These are two great moves to strengthen the muscles needed for safe lifting. I truly believe that these two exercises played an important role in preventing injuries to my lower back.

It is important to do all the exercises in your routine correctly or you risk injury, which of course defeats the whole point. Consult with a trainer, and there are many online resources that demonstrate proper fitness techniques. The National Volunteer Fire Council's Heart-Healthy Firefighter Program has some video examples of functional fitness exercises available at www.healthy-firefighter.org.

Overreaching

Overreaching is another common cause of shoulder and back injuries. Try not to extend your reach to the full extension of your arms as this places undue strain on the shoulders, chest, and back. Additionally, the load may become unbalanced and injure knees or ankles. Keep the load as close to you as possible when moving anything or when using equipment. If the load becomes too

cumbersome or heavy, put it down and seek additional resources to help move it.

One of the most common times I see overreaching is when using hydraulic rescue tools. Often, the rescuer is working the tool at arms length or above mid chest height. As you can imagine, this places a tremendous strain on the arms, shoulders, chest, and back. Ask for help or use a ladder.

Proper Attire

Ankle strains and sprains also account for a large number of responder injuries. We want to ensure that our foot wear is properly suited to our needs and that the fit is good. Boots play an important role in keeping the ankle stable when walking or operating at emergency scenes. They should fit properly and be of a design that will provide stability for the ankles. Low-quarter foot wear, even when worn as station wear, is not well suited for keeping ankles stable.

Additional Factors

A good, well-balanced nutrition program will increase your overall health and wellness, which may lessen your chance of being injured. Rewarding and/or recognizing the healthy achievements of your responders is a great way to motivate the crew. We had a trained nutritionist who worked with us to develop healthy eating programs, discouraged fast food, and worked very hard to have tobacco use eliminated. The organization provided financial prizes and rewards to encourage members to participate. The change over

the first year was indeed remarkable. Responders started bringing healthy, home-prepared meals and the eating of fast food almost stopped. Injuries dropped drastically, many stopped using tobacco products, and the overall health and wellness of our members was greatly improved.

Responder exhaustion is another piece to the injury puzzle. After a certain amount of hard work, responders need rehab. Providing hydration and good nutrition to tired emergency workers should be a component of all emergency action plans. Additionally, command should ensure that there are enough fresh personnel to conduct the activities needed to mitigate the emergency scene. Calling for additional resources is an excellent way to keep on-scene workers from becoming too tired to work safely, effectively, and efficiently.

Leadership should encourage safe and healthy work habits and lifestyles, and lead by example. Providing for the well-being of your members is money well spent. Healthy, strong responders will be less likely to suffer sprains, strains, and back injuries, and time off due to injury will be reduced.

In conclusion, a good, well-rounded injury prevention program that includes all of these components and is supported by leadership should be a part of any organization's safety initiatives. The result can be a reduction of strains, sprains, and back injuries at the emergency scene, at the station, and while off duty. Begin implementing your program today. ■ ■



ABOUT THE AUTHOR

Kenn Fontenot is a Louisiana director for the National Volunteer Fire Council and past chair of the NVFC Health, Safety, and Training Committee. He is also a charter member and first fire chief of the LeBlanc Volunteer Fire Department and captain/safety officer for the Milton Volunteer Fire Department. Kenn is a principal member on the National Fire Protection Association 1001 standards committee and alternate member of NFPA 1021. He is the chief of training for St. Landry Fire District #3, served for 14 years as the regional fire training coordinator at the Louisiana State University Fire and Emergency Training Institute, and is a past-president of the Louisiana State Firemen's Association.



SURVIVAL Mediterranean Style

By David Rainey, MD and Stefanos N. Kales, MD

Firefighters and other emergency responders face many dangers while on the job, including exposure to smoke, chemicals, severe heat stress, sleep deprivation, job stress, and other environmental hazards. Often, these are accompanied by a lack of exercise and unhealthy food choices. As a result, volunteer firefighters are at increased risk for obesity, heart disease, cancer, and behavioral health issues.

The United States Fire Administration and National Fire Protection Association have reported that the leading cause of on-duty firefighter deaths each year is heart attack, also called sudden cardiac death (SCD). Scientific research has documented that in almost all these cases, firefighters succumbing to SCD were found to have significant underlying heart disease that made them vulnerable. Moreover, many of the cancers related to firefighting are also related to obesity.

There is reason for hope, however. Healthy eating, physical fitness, and good sleep habits are all important “countermeasures” first responders can employ to significantly lower your risk of heart disease, cancer, depression, and many other chronic diseases. Even more appealing is that these lifestyle measures don’t simply help

you and your loved ones live longer, they improve the quality of life you’re living now.

The Mediterranean diet is one of the hottest and most talked about eating styles in America. However, unlike many popular trend diets (e.g. Keto, Paleo, Atkins, South Beach), the Mediterranean diet has a safety record of thousands of years. Additionally, it is the most widely studied and scientifically supported eating pattern for reducing chronic disease risks and enjoying a longer, healthier life. Based on decades of rigorous scientific evidence, the Mediterranean diet is one of only three eating patterns highlighted and recommended by the U.S.

Government’s 2015 expert nutrition panel. Moreover, for two years in a row, multi-disciplinary expert panels put together by U.S. News and World Report chose the Mediterranean diet as best in several specific health categories, best overall, and as the “easiest to follow” among 40 popular diets.

Despite its name, the Mediterranean Diet isn’t a specific “diet” in the sense of having a list of foods you can and cannot eat. It is a lifestyle most closely associated with the traditional eating patterns and essential foods of Greece, Spain, and Southern Italy. The primary features of the Mediterranean diet include ample intake of extra virgin olive oil (instead of butter), fruits,



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vegetables, unrefined whole grains, water as a beverage, and fish. This way of eating also encourages moderate intake of dairy, eggs, wine, and lean meats, and low intake of red meat and sugary sweets. There is no calorie counting and no food is forbidden. You can try small changes and follow the suggestions as much or as little as you like.

As you see in our Firefighter's Mediterranean Pyramid graphic, the core elements we recommend for responders are Mediterranean eating along with good sleep, exercise, and spending quality time with friends and family.

Research conducted worldwide has proven this way of eating is effective in reducing the risks of heart disease, diabetes, cancer, depression, dementia, and premature death. It is also associated with better sleep, sexual function, and overall quality

of life. In 2014, Dr. Kales and his team of researchers at the Harvard Chan School of Public Health received a grant from the U.S. Department of Homeland Security to research the Mediterranean diet's benefits for first responders. The team worked together with other researchers and fire service partners including the National Volunteer Fire Council to develop the program "Feeding America's Bravest: Survival Mediterranean Style!" A multitude of resources (information, tools, recipes, and videos) to help you live a firefighter's Mediterranean lifestyle are available at www.hsph.harvard.edu/firefighters-study/feeding-americas-bravest.

Getting started is easy. We suggest these five small steps to improve your health. Feel free to try one at a time or all of them gradually.

1. Replace butter and stick margarine with extra virgin olive oil and eat at least four tablespoons per day.
2. Drink water instead of sodas, energy drinks, and other sugary beverages. A glass of red wine with off-duty dinners is fine.
3. Choose chicken, turkey, fish, eggs, and beans. Limit red and processed meat.
4. Eat more fruits and vegetables. Eat fresh berries instead of sweet desserts.
5. Choose whole grains. Avoid refined carbohydrates.

We thank firefighters and emergency medical personnel for their service to help keep the public safe. We hope you will try out these tools for living a Mediterranean lifestyle to help prevent unnecessary line-of-duty deaths and promote healthier, happier lives for America's bravest. ■ ■

Firefighters' Mediterranean Pyramid



Good Nutrition, Adequate Sleep and Frequent Physical Activity (150 minutes of moderate intensity or 75 minutes of vigorous intensity aerobic activity each week) promote weight control and reduce the risks of heart disease and cancer, while lowering stress and its negative consequences. Spend quality time with family and co-workers.

Feeding America's Bravest: Firefighters Mediterranean Diet Intervention Pyramid © 2017
S.N. Kales (PI) Funded by US Federal Emergency Management Agency Assistance to
Firefighters Grant program: Award Number EMW-2014-FP-00612

FIREFIGHTER FUNCTIONAL FITNESS

for Real-World Results



By Dan Kerrigan and Jim Moss

The list of hazards is endless for firefighters, but you can control your fitness.

First Things First

Year after year, the leading cause of on-duty deaths as documented by the United States Fire Administration is stress and overexertion. This is the category that includes heart attacks and strokes.

“Research provides consistent evidence that an inadequate level of physical fitness places firefighters at direct risk for a cardiac event and indirectly through elevated body mass index (BMI), triglyceride levels, and blood pressure.”

- Dr. Stefanos Kales

If we are going to take steps to truly improve firefighter health and fitness and make a meaningful impact on reducing deaths suffered by the fire service, there are a few things that we must agree on

before we ever pick up a barbell or set foot on a treadmill. First and foremost, there is absolutely no room for entitlement or mediocrity in our fire service. It is not a hobby or a right. It is a privilege that comes with lifelong responsibility. We must hold ourselves accountable by committing to the fact that regardless of age, gender, rank, or status as a volunteer or career firefighter, our fitness for duty is a requirement – it is an integral part of the oath we swore when we decided to become a firefighter, and it must be taken seriously.

Next, it is **imperative** that all fire service organizations take whatever steps are necessary to provide their firefighters with access to annual NFPA 1582-compliant medical evaluations. The implementation of an annual occupational physical program is proven to save lives by identifying undiagnosed cardiovascular conditions, among other things. If your organization does not provide appropriate medical evaluations, download the International Association of Fire Chiefs’ free Health Care Provider’s Guide to Firefighter Physicals and take it to your own doctor.

Once these commitments are made and appropriate actions taken, we can turn our attention to another very important component of overall firefighter wellness: We are occupational athletes; therefore, we must train accordingly.

Applying a Method to the Madness

Consider some of the tasks that we perform: connecting the supply line to the hydrant, stretching attack lines, advancing/operating attack lines, forcible entry, carrying and raising ladders, ventilation, and more. All of these activities require us to be in peak physical condition so that we can perform our duties safely, effectively, and efficiently.

At Firefighter Functional Fitness, we stress the fact that fitness training should replicate the physical demands of the fireground. With that in mind, we created *The Big 8 of Firefighter Functional Fitness*, which consists of three foundational components – core strength, cardiovascular capacity, and flexibility – along with five functional strength components – push, pull, lift, carry, and drag.

Taking Action

In the simplest terms, every workout should be focused on at least one of the components of The Big 8. Doing so ensures that we are focusing on the strenuous athletic tasks required of firefighters. In fact, combining functional strength training with near-maximal heart rate cardiovascular training represents the essence of what we do on the fireground.

There are a number of ways that we can put The Big 8 into action around the firehouse, in training, and during down time at the station and at home. Here are some simple examples of how to improve your fitness for duty without the need for a lot of specialized equipment.

1. Drill Tower Evolutions: If you have access to a drill tower, you know that they present almost endless opportunities for tactical training. They also present numerous opportunities for improving your functional fitness. One of the simplest ways to accomplish this is to complete an exercise or movement at each level of the tower, essentially creating a vertical firefighter fitness circuit. Here's a quick example of a circuit that primarily focuses on body weight movements with the additional challenge of the stair climbing.

- Ground Level: 10 push-ups
- First Floor: 10 air squats
- Second Floor: Plank for 30 seconds
- Third Floor: 10 lunges
- Fourth Floor: Bear crawl for 100 feet
- Fifth Floor: 10 supine leg lifts
- Roof: 10 burpees

Once you've finished your burpees, descend the stairs down to ground level, catch your breath, and start again. Complete 3-5 rounds. Increase the intensity by adding clean turnout gear, an SCBA, or even go "on-air," breathing off your cylinder.

2. Firehouse Circuit: This is a more traditional workout circuit method that can be completed prior to the start of training or even as part of your regular training, because it improves skills and proficiency as well. A firefighter training circuit combines wearing firefighter PPE and specific firefighter tasks. You'll also notice that there is no specialized fitness equipment needed. Using The Big 8 concept as the foundation, you can push, pull, lift, carry, and drag objects in your firefighter training circuit for a 5-minute round. Perform each station for 30-60 seconds before moving on to the next. Complete 3-5 rounds total, with 3-5 minutes of rest in between.

- Tire, sled, or dummy drag
- Sledgehammer tire strikes
- Bear crawl with rapid intervention pack
- Farmer's carry (saws, rescue tools, or foam pails)
- Ground ladder carry and raise
- Ground ladder climb and lower

3. "Flex Time": Whether career or volunteer, we all have opportunities around the station and at home to mix in some functional training during our less-busy moments. Incorporating flexibility training into your regimen will go a long way toward reducing your chances of a musculoskeletal injury while also increasing mobility, core strength, and muscular endurance. Flexibility training can be completed as a stand-alone session (consider basic functional yoga) or as part of a warm-up or cool-down during a functional strength or cardiovascular capacity training session.

Here is a simple flexibility routine that you can do in the station or at home:

- Mountain Pose (stand tall)
- Chair Pose (hinge your torso forward 45 degrees at your hips)
- Forward Fold (hands reach down to feet, stretching your back and hamstrings)
- Runners Lunge (right leg forward, left leg back and straight)
- While in runners lunge, twist your torso and reach your right arm high.
- Repeat the sequence, performing the runners lunge on the left side.

Training Together Yields Better Results

Training as a group increases individual effectiveness and success, while also building camaraderie and providing "positive peer pressure." And most importantly, it is fun. Just remember that training is not meant to be punitive. Provide encouragement and recognize that varying fitness levels will require different levels of intensity and difficulty. Be inclusive, not critical.

Workout Levels

We must all be cognizant of the varying levels of conditioning in our groups. It is also important to consider how a workout may impact the rest of our day. For these reasons, we encourage firefighters to adapt their workout attire accordingly. As your level of fitness allows, progress through each stage.

Stage 1: Gym clothes

Stage 2: Add turnout coat and pants, boots, helmet, and gloves*

Stage 3: Add SCBA cylinder*

Stage 4: Add wearing SCBA mask and breathe from air from cylinder*

**If you choose to work out in your PPE, make sure that everything is clean and free from smoke and particle contamination.*

Take your fitness and health to the next level. Learn more about *Firefighter Functional Fitness* at FirefighterFunctionalFitness.com. Access additional firefighter health and wellness resources from the National Volunteer Fire Council's Heart-Healthy Firefighter Program at www.healthy-firefighter.org. ■ ■



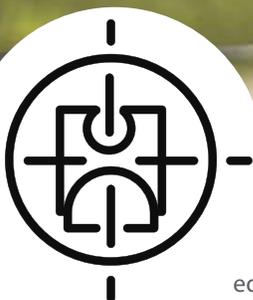
ABOUT THE AUTHOR

Dan Kerrigan and Jim Moss are co-authors of *Firefighter Functional Fitness* and share the message nationally with a mission to "create a healthier fire service, one firefighter at a time." Dan is a chief fire marshal, an IAFF peer fitness trainer, an ACE-certified group fitness instructor, and an at-large director on the IAFC Safety, Health, and Survival Section's board of directors. Jim is a career fire captain, NASM-certified personal trainer, and an IAFF peer fitness trainer.

Responding to Active Shooter/Hostile Events

POLICE LINE DO NOT CROSS

POLICE



BY GEORGE STEVENS

Fire departments spend thousands of dollars on firefighting equipment to fight fire effectively and efficiently.

Firefighters spend thousands of hours attending training classes and meetings so that they can safely and effectively fight fire. We know these efforts are required, and that is what we do. We know that unless we prepare to fight fires, when called upon, we will not save lives or property and we will put our firefighters at undue risk.

However, in the course of the last few years an increasing amount of our time, effort, and money has been directed to EMS calls. This has impacted how we prepare and train for the job. For instance, with the rise in opioid responses, many fire departments are now equipping their firefighters with NARCAN® and training them in administering the drug.

Unfortunately, the number of active shooter events are also increasing. So much so that the National Fire Protection Association has issued *NFPA 3000™ (PS), Standard for an Active Shooter/Hostile Event Response (ASHER)*. This document was prepared by more than 40 members of a committee that included representatives from the Department of Homeland

Security, Department of Justice, Federal Bureau of Investigation, Department of Defense, International Association of Fire Fighters, National Volunteer Fire Council, fire service, law enforcement, EMS agencies, hospitals, universities, and others. All firefighters and EMS providers need to become familiar with NFPA 3000.

For your firefighters and EMS personnel to respond safely and effectively to an active shooter/hostile event, your department needs to plan the response and equip and train your firefighters to save lives. Advance preparation is an important step in mitigating the hazards to which firefighters and EMS providers will be exposed.

Fortunately, for the most part, to be able to respond safely and effectively to active shooter events we only need to expand on what we do day in and day out.

First, fire departments need to assess the risk in their jurisdiction. Even the smallest volunteer fire departments have high risk facilities such as schools and places of worship. Once high risks facilities have been identified, work with the facility and other agencies to plan an ASHER. For their safety and effectiveness, firefighters need to know the layout of schools, churches, synagogues, mosques, and other high-

risk facilities in their jurisdiction. This is no different than pre-planning for a fire. They also need to know what other agencies will be responding and what responsibilities each agency will have at an ASHER, just like they would need to know for other types of response.

ASHERs require responders to maintain situational awareness and plan for the unexpected. Firefighters and EMS providers need to be aware of what they might be facing when dealing with an ASHER. Many responders think of only having to be concerned about a shooter; however, they may also have to deal with improvised explosive devices (IED), a vehicle used as a weapon, or other hazards. There may also be more than one shooter, as has been the case at several school shootings. Be prepared to react to the unexpected.

Many of us respond to bomb threats at schools by staging in a certain area. Your department needs to consider a different staging area when making repeated responses to a facility. Whenever responding to an active shooter event, always keep in mind the possibility of ambush.

To meet NFPA 3000 and for firefighter safety, firefighters must be protected

by a minimum Level III-A ballistic vest and an identifying garment to enter the warm zone. Because the cold zone could become a hot zone without any warning, firefighters in the cold zone should also be protected with a ballistic vest if possible, and must have on an identifying garment. Firefighters staging in the cold zone and those entering the warm zone should be aware of the possibility of an IED being planted in the area, the possibility of unexpected sniper fire or an active shooter entering the area, and the use of a vehicle as a weapon.

Purchasing ballistic vests for firefighters and EMS providers will be an added expense for many departments, but one that is proving necessary to keep today's responders safe. Every day volunteer firefighters and EMS providers respond to calls that have a potential to expose them to the threat of gunfire. There have been instances of firefighters and EMS providers being wounded or killed by gunfire when responding to what they thought would be a routine EMS call. Some of these responders were not shot maliciously or with harmful intent, but rather from people suffering from a medical condition that caused irrational behavior. Unfortunately, these patients perceived the responders coming to help them as a risk to their life.

Firefighters and EMS providers are also at risk while responding to motor vehicle accidents (MVA). The person trapped in the car may be a fugitive from the law or suicidal. Your department should consider issuing ballistic vests to all of their personnel that respond to EMS and MVA calls. For day in day out use, when responding to EMS and MVA calls, a Level III-A vest will offer a considerable amount of protection. The cost of these vests is starting to come down. Level III-A vests are now available from several companies for less than \$500. Additional protection from rifles can be added by inserting plates into sleeves in the vests.

To meet the standard to deliver threat-based care, firefighters and EMS personnel responding to an ASHER will need to complete training on *Tactical Emergency*

Casualty Care (TECC) Guidelines for First Responders with a Duty to Act or TECC Guidelines for BLS/ALS Medical Providers. There are also many courses available to teach how to apply combat applied tourniquets (CATs) and blood stopper bandages.

My jurisdiction has been providing CATs to our firefighter and EMS personnel for over two years now. These tourniquets have been credited for saving the lives of patients of MVAs and lawn mower

accidents. We are encouraging businesses, schools, government facilities, and places of worship to store CATs and blood stopping bandages in strategic places in their facilities.

We should always evaluate our actions based on risk/reward. The better equipped and trained firefighters and EMS personnel are, the lower the risk and greater the reward. ■ ■



ABOUT THE AUTHOR

George Stevens has served as a volunteer firefighter/first responder on Pine Ridge Volunteer Fire Department since 1986. He serves as Mississippi director to the National Volunteer Fire Council (NVFC), chairs the NVFC Homeland Security Committee, and represents the NVFC on the NFPA 3000 Committee. He also serves as president of the Mississippi Volunteer Firefighters Association and works as fire coordinator for Lamar County.

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The Body, Mind & Soul

OF OPIOID RESPONSES

By Tom Miller

It's 3:00 p.m. on a Saturday afternoon. Your department is dispatched to an MVA with injuries at a local service station. You roll up on a single vehicle into the guardrail. Upon doing a 360, you discover a male driver and female passenger unconscious and unresponsive in the front of the vehicle and a toddler in the back of the car screaming. There is no airbag deployment, but there are needles and heated spoons visible in the console between the driver and passenger. In your mind you think, "Here we go again..."

You quickly check and the driver and passenger; both have faint pulses but are not breathing. Neither appears physically hurt and there was no air bag deployment. By now EMS and law enforcement are on scene. The child is removed from the back seat and you note the heavily soiled diaper that doesn't appear to have been changed in quite a while. The driver and passenger are pulled from the vehicle and are being worked. The passenger is given 4 mg of naloxone and starts to come around. The driver is a big guy who gets 8 mg of naloxone before he stirs. Suddenly, he wants to fight – but is quickly restrained by several firefighters and the medic.

The female starts the, "I don't know what happened...am I going to jail? I don't do drugs..." tape that you have heard

over and over before. Some 10 minutes later, she thinks to ask about her child – after she has been telling the driver how much she loves him and that, "... he didn't do anything..." To get away from the cacophony, you and another firefighter take the child inside the small convenience store to get her a clean diaper and something to eat. The child quickly calms in the arms of the storekeeper, a grandmother who has just the right touch.

You wore gloves, were careful to not get a needle stick, and helped hold the patient down when he decided to come out of his high swinging. Your body is stressed but intact. The two patients will live to get high another day. Your crew is safe. The EMS team is safe. Law enforcement is doing their investigation and have called Child Protective Services for the child. You see the stress that it takes on all. There is the usual gallows humor banter generated by frustration from this scenario, which seems to repeat itself over and over in your community.

Your mind thinks back to the first time you ran a call with this couple. How they were found at a park and ride unconscious and unresponsive from another overdose. You start playing the "What if?" game which has no right answers. You mind goes to the little child and wondering if she is OK. You go back inside the store and see that the child is sipping on the juice that you and your buddy bought and clinging ever

so tightly to the storekeeper. You wonder if there is a new memory in the little girl's mind.

Many first responders struggle with how to keep events like this in perspective. We see people and situations at their worst. With the opioid epidemic, we see self-destruction on a grand scale. It gets harder and harder to "box it all up" or not get cynical or even angry at having to respond to the same types of self-inflicted calls day-in and day-out. The stress turns into compassion fatigue – sometimes called vicarious traumatization – which is an indifference to the pleas for help from those who are suffering due to the frequency or number of such appeals. They want us to help keep them alive, but it feels like they don't want help with the root cause of why someone had to call 911. In other words, "Save me so I can go destroy myself again."

Departments need to pay close attention to their members and closely monitor their mental health. In areas where call volumes spike, the risks are greater. Officers and peers can get clues from social media posts, comments made in passing, and from direct pleas for help. If left untreated, compassion fatigue can lead to burnout, a cumulative process marked by emotional exhaustion and withdrawal associated with increased workload and institutional stress that is not trauma-related.

Continued exposure without intervention can lead to more serious stress-related issues, including post-traumatic stress disorder.

Organizations should have a plan to address the emotional and behavioral health of their members. Whether it is an Employee Assistance Program, Psychological First Aid, Critical Incident Stress Management (CISM), department chaplaincy, peer-to-peer programs, mentor programs, or other similar processes, members should have access to healthy mechanisms for dealing with cumulative stress. Organizations can promote access to free resources such as the NVFC's Share the Load support program or local behavioral health programs. Members should be able to seek help without fear of reprisal. Officers and leaders must be ready to confront this issue head-on, including the risk for member suicide, or they risk increased turnover or poor on-scene performance.

In addition to taking the time to re-stock the rig, take the time to take stock in your members. Make sure that they know that you really care and that they can talk about their reactions and emotional responses to problem calls. Learn the signs and symptoms of compassion fatigue, burnout, and stress disorders. If needed, take a

class on Psychological First Aid, CISM, or other clinically proven interventions. Don't forget to lead by example. Take care of yourself as well. Don't make stress a "taboo" subject at the station. Every minute of every day is an opportunity to help...not just our communities, but ourselves. ■ ■



ABOUT THE AUTHOR

Tom Miller has 35 years of experience in the fire service. He is a Pro Board-certified Firefighter I & II; Driver Operator - Pumper; Fire Instructor III; Hazardous Materials Technician & Incident Commander; and is certified as a Swift Water Rescue Technician. He is also state certified as a Fire Officer I & II. He has been on the adjunct faculty of West Virginia University Fire Service Extension since 1990. Tom is West Virginia's director to the National Volunteer Fire Council, serves as a principal on the NFPA 472/473/1072/475 Technical Committee for HazMat and WMD Response and is on the Joint 1001/472 Task Group, and is active with the various committees for the West Virginia State Firemen's Association.

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The Mindful Firefighter

By Hersch Wilson

One of the regular tasks we do on any fire department is wash trucks. It is a point of pride to have clean vehicles. As a firefighter, in doing so, I have a choice every Saturday morning. I can think that this is a tedious and ridiculous task — the trucks will just become dirty over a week of calls. I can be on autopilot: not really present but just caught up in a million different worries, not even aware of what I am doing.

Or I can be mindful; I can realize that all over the country, firefighters are washing trucks and I am part of this great community. I can allow myself to become absorbed in the task, the sound of water, the camaraderie of the firehouse, the feel of a soapy sponge, the look of a truck as it reappears clean and shining. The choice is mine. Two paths can lead to boredom and even despair (the thought of doing this every Saturday for decades), or one decision leads to fulfillment. Just like in our “regular” lives, full of mundane and sometimes absurd tasks, we can practice mindfulness.

“Mindfulness is the basic human ability to be fully present, aware of where we are and what we’re doing, and not overly reactive or overwhelmed by what’s going on around us.”

- Mindfulness.org

The gist of this article is that no matter the past, no matter the difficulties that the universe has in store for us, we can adopt a mindset — a way of thinking — that helps us stay calmer and be in the present.

If I’ve learned anything as a firefighter, it’s that the present is all we have. Stuff happens, the universe doesn’t care about our plans, the future isn’t a promise.

A story to illustrate:

A Buddhist monk was being chased by a tiger through the forest. He came to a cliff with a long vine hanging down into the valley below. He grabbed the vine and began furiously climbing down. Looking up, he noticed that the tiger was climbing down after him. He started to move quickly, and then he looked down. There below was a python, the largest he’d ever seen, wrapped around the vine staring at him. So above him was the tiger and below was the python. Stressed, he glanced to the side, and there he saw hanging from the vine was a big red strawberry. He paused for a second and then ate it and enjoyed it.



The tiger is our ruminating about the past, the python is our worrying about the future, and the strawberry is the present. The present can be today, or it can be a singular moment, the sweetness of a strawberry, the gloriousness of a smile. The goal is no matter the past or the future, to enjoy the “nowness” of that strawberry.

The past is over. We can only learn from it. The future is out of our control. This moment is all we are guaranteed.

Being mindful is not merely a practice for monks and the spiritually inclined; it offers real-world benefits to help us stay calm and reduce stress.

How Mindfulness Reduces Stress

Mindfulness can help us reduce stress in a couple of ways.

1. Often we are on mental “auto-pilot.” The tigers and the pythons are loose in our brains, and we are reacting to them without really thinking about them. Hitting the mindful pause button allows us to put them in perspective.
2. When we pause, even if only for a moment, we tend not to just react. We can consider alternatives to how we want to respond rather than responding automatically.

3. We are more self-aware. When we take that moment to be mindful, we are in touch with our bodies and notice where stress hits us.
4. When we are mindful, we tend not to overreact. We can better keep our perspective and respond to problems more creatively.

Practicing Mindfulness

Becoming more mindful takes practice, just like any new habit, from learning how to operate a new pumper to practicing your golf swing (which can be a very mindful activity). Here are a couple ways to start.

Meditating

The gold standard, of course, is carving out regular time daily to meditate, even if for 10 minutes a day. It is a valuable and worthwhile practice that can help calm your mind, reduce stress, and help you keep perspective. There are a variety of resources available online to help you start a meditation practice.

The Mindful Walk

Turn off your smartphone (leave your pager on!) and take a walk. In Zen practice, walking meditation is called Kinhin. Focus on your breathing, on being outdoors, on the sky, and how your body feels as it moves. Don't plan your day or use this time to worry; just walk and focus on the rhythm of your walking and breathing.

When You're Stressed...

Learn to Step Away.

Although there are significant problems that we need to deal with, often what causes us stress are minor things: a petty argument with a sibling, being stuck in traffic, responding to the same address for the fifth time for a false alarm. Before we get hooked, before our stress level starts



to rise, learn to step away. It can actually be physically stepping away. For example, when a heated argument is beginning at a scene, it is often best to step away and calm down. Or it can mentally be stepping away, being mindful of the situation: does this situation really call for me to get upset? It is surprising how often — when we practice a little mindfulness — the answer is “no.”

Breathe.

In both situations, whether physically or mentally stepping away, the next step is to focus on your breathing. This is a relaxation exercise. Stand up or sit up straight and take six deep and slow breaths: It's called square breathing. Two seconds in, two seconds holding the breath in, two seconds out, and two seconds hold, and repeat. Soon, after a little practice, taking that first breath will begin to relax you. Your shoulders will relax, the anxiety in your chest will diminish, and you will calm down.

A Final Note

By its very nature, firefighting teaches mindfulness. Think about how many times you've been in a non-fire situation where people are upset, going a little crazy (maybe at a family gathering). And we think to ourselves, there is nothing here to be upset about: everyone is alive, no one is hurt, why go crazy? That is a mindful moment brought to you by your experience of being a firefighter. Because we see what we see, it puts everything else in perspective. Because we see what we see, 90% of the time we know we can make a choice to stay calm. That's being mindful.

The payoff of being calm and mindful is the strawberry; all those beautiful moments in life, that if we don't slow down, we'll miss. And that is a real tragedy. So be brave, be kind, fight fires, and be mindful! ■ ■ ■



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Hersch Wilson is the assistant chief with Hondo Volunteer Fire and Rescue in Santa Fe County, NM. He has been with the department since 1987. In his “other life” he is a writer and a soccer coach. Visit him at Herschwilson.com or on Facebook at ‘Hersch Wilson-Firefighter.’





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GROWING OUR RANKS: Equity, Inclusion, and the Path to Success

BY ALI ROTHROCK

In today's fire service, the issues of "diversity and inclusion" are frequently discussed. They are buzzwords that come up at fire service conferences and in departments as leaders strategize how to bolster their dwindling ranks. I think a more accurate way to both describe the problem plaguing the fire service currently and show us a clearer path to eradicating it is to actually switch the order of the words. We cannot have a diverse fire service until we first have an inclusive one.

We can entice people from all walks of life to walk through the firehouse doors, but if the environment they find does not allow room for them they will walk right back out. We see this time and time again in the fire service.

Inclusivity has a lot to do with perspective and personal life experiences. Someone who grew up playing sports might think that slapping someone on the butt is a

sign of comradery and of a job well done. Doing that to someone unfamiliar with it or to someone of the opposite gender could contribute to them questioning their physical safety in the station. Someone else might think severely criticizing the new person is a way to show them that they care or that they are a member of the team, but the person on the receiving end may come to dread the station as a hostile environment. You might be an affectionate person and think that giving bear hugs is a way to show inclusivity, but to someone else that is a violation of their personal boundaries. In these cases, well-intentioned attempts at inclusivity miss the mark.

Equality and equity are terms that are also often misinterpreted. Equality is thinking that everyone needs the same thing to be successful. Equity means we understand that different people need different things to reach the same goal. While having "equality" as a part of your fire department's mission or vision statement or telling prospective members that your

department believes in equality for all is positive and a step in the right direction, it is again missing the mark.

I remember a training chief telling me a story about a situation at her local academy that perfectly illustrates this point. Each day she would get a report on the status of all candidates in the current academy class. A few weeks in she started getting word about an issue with one of the candidates, the only woman in the class. This candidate was competent, passionate, and was doing well in all areas except for one, the ladder skill. None of the instructors could tell the training chief exactly what the issue was, so she set out to see the problem for herself.

The next day the training chief, a few instructors, and the candidate stood on the academy grounds at the back of the ladder truck. The candidate was poised and ready at the ladder bed. The instructor had the skill sheet in front of him and a pen ready to write down any issues. He then gave the candidate the command to

start. She took a step up on the tailboard and was reaching into the ladder bed to grasp the ladder rung when the instructor yelled, "Stop!" The training chief asked what the issue was. "She has to keep both feet on the ground," the instructor stated, showing the chief the skill sheet where that specific requirement was noted. The training chief realized the issue and crossed out the requirement that the candidate needed to have both feet on the ground. She gave the candidate the go-ahead to begin again. The candidate stepped up on the tailboard briefly, pulled the ladder out, stepped back down, and completed the rest of the evolution successfully and safely.

In this situation equality would be exactly what that instructor was doing. He assumed that all candidates must perform a skill in the exact same way. Equity would be recognizing that a shorter candidate (it could be male or female) would need to perform the skill in a slightly different way. This change did not cause the candidate or anyone else to be unsafe, nor did it bend the rules to allow her to unfairly succeed. The candidate was not excused from performing the skill as it is certainly a necessary proficiency for the job. The training chief simply recognized that the candidate's stature made it so she needed to perform the skill in a slightly different way than her taller counterparts.

Perpetuating the myth that firefighters need to all be the same size and weight contributes to an exclusive culture that the fire service cannot ultimately survive. If we continue to operate from a standpoint of equality and not equity, we will lose competent and passionate firefighters. The well is only so deep. We eventually will have to start appealing to other

Creating a Safe and Positive Work Environment

All members of fire, EMS, and rescue services should be treated and treat others with dignity and respect, free from harassment, bullying, and discrimination of any kind. The NVFC and partner organizations have released a Joint Anti-Harassment, Bullying, and Discrimination Statement as well as compiled resources to help departments implement their own policies to protect personnel and create a safe and positive work environment. Visit www.nvfc.org/anti-harassment-resources.

demographics to fill the ranks. That time is now.

There are many reasons someone might be unwelcome in a firehouse. This applies to all genders and other demographics. There could be more dangerous reasons like abuse or harassment. If this abuse or harassment is not properly dealt with immediately, you will see that toxic attitude spread and spread. There could be less obvious reasons someone feels unwelcome, like not having gear that properly fits. This is a big safety issue but not one that many departments feel is a priority. Another reason someone could feel unwelcome in a firehouse could come from them realizing that the proper facilities don't exist in the station for them. All of these situations contribute to negative consequences for the individual, the department, and the fire service as a whole.

There are plenty of ways to create a more inclusive environment to get your department ready for diverse ranks. Be clear on your expectations for your members and leaders. Be very clear on what comments and behaviors you will not tolerate. Take anti-discrimination training. Make sure that your SOPs/SOGs are up-to-date and reflect your diverse ranks.

It is important to understand that equity and inclusivity are not a zero-sum game. In a zero-sum game there are no winners without losers. For every point you win, someone else loses a point. But making sure that someone has gear that fits them doesn't mean you get less gear that fits you. More value is created when we treat others with equity. In the fire service, we are all winners when we create an inclusive and equitable environment for our members and recruits. Having more participants in the game means we all have a better chance to be successful. ■ ■



ABOUT THE AUTHOR

Ali Rothrock has been a member of the volunteer fire service for 14 years and currently serves as a firefighter and EMT in Pennsylvania. She works full time in mental health education, serves on her local CISM team, is the Eastern Division Trustee of the International Association of Women in the Fire and Emergency Services, and is CEO and lead instructor of On the Job and Off. <https://onthejobandoff.com>

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What Do You Say to Someone Struggling from Emotional Trauma?

By Chief Jared Meeker

You might already know that mental health conditions occur at higher rates for first responders compared to the general public. We are routinely exposed to physical and emotional trauma, sometimes on a daily basis.

Most people in this world do not see what we first responders see, and they cannot relate to what we feel after a tragic call — the change of mood, the feeling of depression, the attempts to file away those images from that traumatic event in hopes they never return. It is not surprising, then, that for many firefighters a traumatic incident or the accumulation of witnessing trauma over time can have a significant impact on their mental wellbeing.

You may notice that a fellow first responder is struggling from one of those calls, or a series of stressful bad calls that just won't leave their minds. You might have overheard them discuss their sleepless nights, their nightmares, and their increased anxiety. Or it might be the opposite; they may be isolating

themselves or shutting down in response to the grief or sadness.

You want to help them, but you don't know what to say. What if they get defensive when you approach them? What if they deny there is a problem? What if the depression has taken over and the person is having suicidal thoughts? What if they refuse your help?

It may seem intimidating to approach someone who is struggling, but we are firefighters and we don't turn our backs on someone in need, especially one of our own. Reaching out may be the key to getting that responder the help they need.

First, it is important to be able to recognize the signs that someone may need help. Many in the fire service try to hide or downplay what they are experiencing, perhaps out of fear of how others might perceive them, or because the department's culture doesn't foster open communication, or maybe because of lingering misconceptions about mental health.

Some of the more common signs that someone is struggling include:

- Avoiding people, places, or activities that could remind them of the traumatic event(s)
- Trouble sleeping or nightmares
- Trouble concentrating as their minds wander easily
- Overwhelming guilt or shame
- Recurring distressing memories of an event or series of events
- Irritability with angry outbursts
- Drinking or using prescription medications too much

Unfortunately, I know all too well what it is like to walk in their shoes. I recently recovered from one of those situations that overfilled my stress bucket and placed me into a state of depression. I wrote about my experience in the last issue of *Firefighter Strong*. In that article, I explained how each of us has a bucket in our minds that gets filled with stressful moments over time. For some, their stress buckets

can keep filling up and never spill. But for others, we reach a point where it just becomes too much, and the stress bucket starts to overflow.

What is it that will finally overflow that stress bucket? Will it be a traumatic stress incident, such as a senseless motor vehicle accident caused by a driver under the influence? Or will it happen unexpectedly, maybe while watching a movie, when a part of the film takes your mind back to one of those traumatic events in your past?

After my incident, many people would not approach me because they didn't know what to say or felt they couldn't help. At the same time, I didn't reach out to anyone as I wasn't sure what I wanted to hear. After many months of struggling with the depression and PTSD on my own, an acquaintance I ran into broke through the barrier I had built up. He asked me how I was doing and told me about resources that could help me. Although it still took me some time to follow through on getting the help I needed, that conversation was the first step and opened up the path to recovery.

So, what should you say or do when you know someone is struggling? Here are some tips to help you:

- First and foremost, be compassionate. We use compassion on every call. Talking to someone who is struggling with emotional trauma doesn't require any special training. Let the person know you are there for them and that they are important to you.
- Notice what you are observing that creates concern and have a conversation with them. Explain to them the signs and symptoms that you have noticed and that you want to help.
- Periodically check-in with the individual. Volunteer firefighters can hide by just staying home and struggling in silence.
- Avoid asking questions that prompt limited or vague answers. For instance, when I ask my firefighters "How are you doing," 99.9% of the time the response will be "I'm okay chief." Instead, phrase the question in a way that will encourage a more detailed and open response, such as: "That child drowning

call will stress me for a while as she was the similar age as my niece. How is this going to affect you?"

- Listen actively. When you get someone talking about the stress they are feeling, do not interrupt them. Just keep listening and let them open up.
- Do not try to compare one of your prior traumatic events in an attempt to lessen their traumatic event.
- All conversations must be in confidence. The only way an individual in crisis is going to open up is trusting that you will keep what they say in confidence. The exception is if they express that they are planning to commit suicide, at which point follow department protocol to get them through the crisis point.
- Only offer help to your ability, then suggest options for additional help, such as a local peer support team, a seasoned veteran, or behavioral health specialist.

A simple "I want to help" or "I will listen when you are ready" can go a long way, but sometimes you will need to give the person time to heal by themselves and then be there for them when they are ready to talk or show emotion. There is

only so much you can do if the person is not ready or willing to open up or accept help.

I also want to say a few words to those who are struggling. Don't be afraid of professional help. Many responders won't seek the help of a professional because of the stigma that it shows weakness. That is so far from the truth. There are some things that we can't fix by ourselves, and the way your mind works is one of them. It is important as first responders that we recognize when we truly need help. The treatment can only start with you standing up to say that you need help and that you want your life back.

It is always important that we prioritize taking care of ourselves, and also that we are there for our brothers and sisters to ensure their mental wellness and emotional health.

Stand up for yourself... life is too short. ■ ■

The National Volunteer Fire Council & American Addiction Centers partner to provide the Fire/EMS Helpline at 1-888-731-FIRE (3473). Calls are anonymous and confidential, and the trained counselors who answer the calls can get you the help you need.

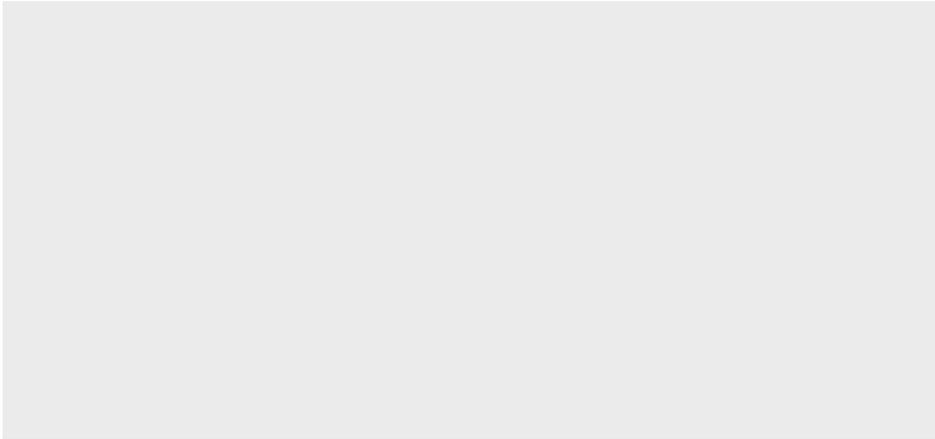
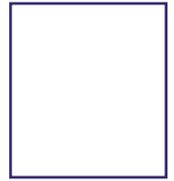


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Jared Meeker is a 30+ year fire service veteran currently serving as a fire chief for the Lake Shore Fire Department, a combination fire department in upstate New York. His passion for the fire service includes teaching incident command skills to aspiring fire officers and career survival skills to all first responders. Jared has written two prior NVFC articles, *When the Stress Bucket Overflows: A Firefighter's Story of Pain and Healing* and *Fireflies and the Fire Service*, available at www.nvfc.org. He currently offers a training program on firefighter behavioral health; learn more at <https://seeingincoloragain.wordpress.com/sizing-up-your-behavioral-health>



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