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PTSD is a psychological disorder that can affect those who have gone through a traumatic event or a series of experiences. It usually occurs when individuals have been exposed to an overwhelming and frightening experience. Trauma can leave a person feeling emotionally or physically distressed and it may have a negative impact on their mental, physical, social and/or spiritual well-being. It can be very intimidating and life-threatening. Through their work, fire fighters are exposed to potentially traumatic experiences during every shift. It is important to remember that fire fighters are people too and have the same risks that others do with their personal lives.

Those suffering from PTSD find it difficult to cope with their experience, as they continue to endure long-lasting, extreme and distressing thoughts and feelings even after the traumatic situation has ended. Fire fighters may find themselves living it over again through flash recollections or nightmares. Additionally, they may experience intense emotions like fear, sadness and anger and feel disconnected from their crew, their family or their community. Fire fighters struggling with PTSD often try to avoid situations or anything that reminds them of the traumatic event.

To be diagnosed with PTSD, someone must have been exposed to a traumatic event. This could include firsthand experience of the event, witnessing it taking place to others, or being informed that a close family member or friend has gone through something upsetting. Repeated exposure to horrific details of trauma, such as those that fire fighters may witness firsthand, can lead to the development of PTSD. This can be particularly true when it comes to responses concerning children who have been victimized and hurt.

PTSD symptoms can be categorized into four groups and a diagnosis requires specific number of symptoms in each category. The intensity of each symptom may vary from person to person.

- 1. Intrusion (one or more symptoms): Intrusive thoughts such as repeated, involuntary memories, distressing dreams or flashbacks of the traumatic event. Flashbacks may be so vivid that people feel they are reliving the traumatic experience or seeing it before their eyes.
- 2. Avoidance (one or more symptoms): Avoiding reminders of the traumatic event may include avoiding people, places, activities, objects and situations that may trigger distressing memories. People may try to avoid remembering or thinking about the traumatic event. They may resist talking about what happened or how they feel about it.
- 3. Alterations in cognition and mood (two or more symptoms): Inability to remember important aspects of the traumatic event; negative thoughts and feelings leading to ongoing and distorted beliefs about oneself or others (e.g., "I am bad," "No one can be trusted"); distorted thoughts about the cause or consequences of the event leading to wrongly blaming self or other; ongoing fear, horror, anger, guilt or shame; much less interest in activities previously enjoyed; feeling detached or estranged from others; or being unable to experience positive emotions (a void of happiness or satisfaction).
- 4. Alterations in arousal and reactivity (two or more symptoms): Arousal and reactive symptoms may include being irritable and having angry outbursts; behaving recklessly or in a self-destructive way; being overly watchful of one's surroundings in a suspecting way; being easily startled; or having problems concentrating or sleeping.

American Psychiatric Association, 2022

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