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Grace McKeon, Ruth Wells, Zachary Steel, Veronique Moseley & Simon Rosenbaum, 2021, [Self-Reported Physical and Mental Health of Informal Caregivers of Emergency Service Workers](#), *Journal of Loss and Trauma*, vol. 26, no 6, pp.507-518.

Study aims

1. To examine the health of the informal caregivers of ESWs compared to the general Australian population
2. To compare the health status of informal caregivers to the ESWs.

Key finding

The health of informal caregivers of ESWs was found to be compromised compared to general Australian population data.

Background and knowledge gap

Little is known about the health impact of providing informal care to ESWs (e.g., their family and friends).

“While qualitative studies of emergency service workers (ESWs) and their partners have shown that the job stress experienced at work negatively impacts relationships at home, there is limited quantitative data focused on the carers and loved ones of ESWs (Burke 1993; Regehr 2005).”

This area of study is important because informal caregivers are contributing unpaid labour to the emergency services industry. By and large, they are women (77%), who play an important role in both supporting the mental health of ESWs and offsetting public health costs.

Data Collection

Baseline data: From an intervention study that recruited both ESWs and their informal caregivers. This intervention – a pilot run by Behind the Seen – recruited 34 ESWs and 30 informal carers. Participants were screened using the physical activity vital sign and the Kessler 10 (K10) for psychological



distress. Data from all questionnaires were self-completed online through the MetricWire mobile phone application.

Data Analysis

Analysis was performed using SPSS V25. Descriptive statistics including means (SD) for continuous outcomes and frequencies n (%) for categorical data were calculated. Where possible, normative values from the general Australian population using published data were used as a comparator. Independent samples t-test (continuous variables) and Chi Square (categorical variables) were used to determine if there was a significant difference between ESWs and their informal carers. Significance was set at $p < 0.05$

Findings

This study found high rates of psychological and physical morbidity among the informal caregivers of ESWs. This is consistent with other research on the impact of caregiving among other populations (like the military).

Of particular concern, roughly one in three of the informal caregivers were experiencing high or very high levels of psychological distress, compared to 13% of the general Australian population (Statistics AB, 2018).

Similarly, 73% of the caregivers reported poor sleep quality, and their mental health symptoms and quality of life were poorer than the general population.

There is a strong relationship between shift work and work family conflict, particularly among rotating shift workers (Lovibond & Lovibond, 1995). Shift work and the requirement to respond to unpredictable emergencies adversely impact numerous aspects of family life, including marital and parental roles, leisure and social opportunities, and home routines (Roth & Moore, 2009).

It is also possible that some of the coping mechanisms adopted by ESWs have negative impacts on relationships. For example, emotional numbing is a strategy often used to help emergency workers cope with tragic events by minimising emotions and focusing on the cognitive aspect of the job.



In addition to the poor mental health outcomes, high levels of sedentary behaviour were reported among the carers and only 30% were meeting the WHO physical activity guidelines. The consequences of inactivity include an increased risk of chronic health conditions such as heart disease, diabetes, and all-cause mortality (Lee et al., 2012).

It is evident that this population appear to be particularly vulnerable and need targeted interventions to address these health outcomes. Given the well-documented relationship between physical activity and mental health, lifestyle interventions may play an important role in helping to protect and treat carers physical and mental health.

Implications

Interventions should be expanded to include informal caregivers.

There has been an increase in organizational support systems developed for ESWs over the past few years, however, these generally neglect family members. Treatment approaches should consider extending to target the whole family unit who play important role in supporting ESWs

Future research should consider a dyadic analysis of the physical and mental health outcomes of emergency workers and their informal caregivers.