



## Self-Reported Physical and Mental Health of Informal Caregivers of Emergency Service Workers (2021)

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Ref: Grace McKeon, Ruth Wells, Zachary Steel, Veronique Moseley, and 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

Work and family are interrelated, and our data suggest that the occupational stressors related to emergency service work may impact upon partners and informal caregivers. From other research we know that MH stressors include:

- The requirement to respond to unpredictable emergencies.
- Shift work -there is a strong relationship between shift work and work family conflict.
- Coping mechanisms (i.e emotional numbing) can negative impacts on relationships.

### Research objectives

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

### Questions and background of study

What we know:

- emergency service workers (ESWs) including police, firefighters and paramedics are at a significantly increased risk of poor mental health.
- and that partners, family members and friends play an import role in providing support to ESWs (and can help reduce the impact of highly stressful work.
- also those in caring roles (e.g., for older adults or military personnel) face increased mental and physical health risks.

There has been no research on the *health impacts of caring for someone in the emergency services.*

### Method

Used baseline data from an intervention study that recruited both ESWs and their informal caregivers.

### Subjects:

- N ¼ 30 informal caregivers and N ¼ 34 ESWs (N ¼ 64 in total)
- between 18-65 yrs
- saw their ESW family member at least once a week.

### Indicators for measurement:

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- MH was assessed through - levels of psychological distress (using KESSLER-10), depression, anxiety and stress symptoms (using DASS-21), sleep quality (using PSQI) , quality of life (AQoL-6D).
- Physical health was assessed through - physical activity levels and sedentary behaviour (both strong predictors of health outcomes) using the SIMPAQ.

### **Limitations**

- Small sample size
- biased sample: people willing to sign up as a support person to a physical activity program.
- Unknown variables: the extent of their caregiver duties and length of their relationship.
- cross-sectional study - cannot infer causality of being a carer.

### **Findings**

The health profiles of the informal caregivers of ESWs are poorer than the general population.

- 1 in 3 informal caregivers were found to have high- very high levels of psychological distress (compared to 13% of the general Australian population)
- 73% of the caregivers reported poor sleep quality, and their mental health symptoms and quality of life were poorer than the general population.
- Only 30% of carers in the study were meeting World Health Organisation physical activity guidelines.

### **Discussion**

Work and family are interrelated, and our data suggest that the occupational stressors related to emergency service work may impact upon partners and informal caregivers. From other research we know that MH stressors include:

- The requirement to respond to unpredictable emergencies.
- Shift work -there is a strong relationship between shift work and work family conflict.
- Coping mechanisms (i.e emotional numbing) can negative impacts on relationships.

As well as high rates of psychological distress, informal caregivers of ESWs were found to have high rates of physical morbidity. Consequences of physical inactivity and sedentary behaviour include an increased risk of chronic health conditions such as heart disease, diabetes and all-cause mortality (Lee et al., 2012). High levels of sedentary behaviour suggest that carers of ESWs are particularly vulnerable and need targeted interventions to address these health outcomes.

### **Future research**

Consideration of the dyadic qualities of the relationship between ESWs and caregivers with respect to physical and mental health outcomes.

### **Implications for the sector**

Despite the small sample size, the alarmingly high rate of psychological distress in the data highlights an urgent need for additional support for the family members of ESWs.

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.



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There has been an increase in organizational support systems developed for ESWs over the past few years, however, these generally neglect family members.

Given the well-documented relationship between physical activity and mental health, lifestyle interventions and treatment approaches should be extended to target the whole family unit.