



## Wellbeing initiatives and interventions in the Australian and New Zealand emergency service workforce

Claringbold, G., Robinson, N., Anglim, J., Kavadas, V., Walker, A., & Forsyth, L. 2022, [A systematic review of well-being interventions and initiatives for Australian and New Zealand emergency service workers](#). *Australian Journal of Psychology*, issue 74, no. 1.

### Aim of Study

This study:

- Focused on well-being initiatives and interventions implemented with Australian and New Zealand emergency service workers.
- Took a systematic review approach.
- Investigated:
  - how the well-being initiatives and interventions were implemented.
  - how they have been evaluated, and:
  - whether they were effective.

### Study rationale

Emergency service workers are exposed to stressful events that can adversely impact their wellbeing and have higher rates of PTSD, anxiety, and depression than the general population.

There is an abundance of research on the prevalence of mental health issues for emergency workers but very little evidence for interventions designed to improve mental health outcomes.

There are several geographical, institutional, and cultural characteristics that make the experience of emergency service workers in Australia and New Zealand unique. These are:

- Substantial distances between towns and many small remote areas that are difficult to access.
- Differences across geographies that impact the adoption and implementation of well-being interventions and initiatives
- Small stations in regional and remote areas do not have the same access to resources that metropolitan areas have, thereby increasing the stress for responders and reducing their support.
- New challenges are emerging, such as fire and rescue staff who are facing longer, more intense fire seasons and more severe flooding due to climate change.

### Scope and methodology

A systematic literature search identified 19 peer-reviewed studies eligible for inclusion:



- 5 studies examined debriefing or employee assistance programs
- 4 examined mental health literacy programs
- 2 examined a program building resilience
- 3 focused on mindfulness
- The remaining studies looked at training leadership behaviours, social support meetings, chaplain services, a physical activity program and emotional disclosure in writing.

Please see article for further information in search strategy, study selection, data extraction and quality assessment.

## Limitations

Several limitations should be noted:

- *A quantitative meta-analysis was not possible<sup>1</sup>* because of the diversity of study designs and small number of studies identified (only five studies examined comparable outcomes and all the interventions had substantial variation in the type, duration, and delivery format)
- *The review excluded many interventions currently underway* because it only looked at research published in the scientific literature.
- *The review was biased towards effective interventions* since these are more likely to be published.

## Results

The authors distinguished between:

- *Interventions*: programs with defined start and end points
- *Initiatives*: programs that are ongoing and self-sustaining.

### Types of interventions

2 studies looked at initiatives.

17 studies looked at interventions, specifically:

- 7 focused on primary interventions (individual-level for everyone).
- 11 focused on secondary interventions (individual-level for at risk employees or those showing early signs of mental health issues or exposure to trauma).
- 1 examined a tertiary intervention (treats mental health issues by reducing their impact and severity at the organisational-level).

### Evaluation measures

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<sup>1</sup> The authors provide supplementary information which summarises studies and outcome measures that could assist with future meta-analytic work



- Most studies measured mental health outcomes (e.g., depression, anxiety).
- Some studies used non-mental health related outcomes (e.g., satisfaction, changes to attitudes).

## Findings

Almost 1/2 of the studies were of a high standard (based on quality assessment).

Over 1/2 were secondary interventions.

10 were conducted in the last five years

Only 2 (of 19) reported mental health initiatives (i.e. ongoing and self-sustaining).

Only one study explored social support, even though social support has been found to provide a positive effect on mental health.

The interventions that were found to improve mental health and wellbeing were: physical activity, manager mental health training, social support, psychological debriefing, mindfulness, and an ambulance chaplaincy initiative.

## Conclusions and recommendations

Considering the critical role of emergency service workers, further research is needed into activities that enhance the mental and physical well-being of this essential workforce. There is specifically a need to address a literature gap about in emergency service workers in relation to:

- Primary interventions and organisational-level initiatives to prevent stress build up and enhance mental and physical wellbeing.
- The role of social support-based interventions in improving mental health outcomes.
- The grey literature to look at what wellbeing initiatives for emergency service responders are currently being evaluated.