

BRIDGING THE GAP:

The Impact of Operational Demands on Families of Emergency Service Workers



Written By:

Mark Blazejowski

Katie Fitzpatrick

Luke Frauton

Owen MacNeill

Community Partners:

Martine Gilliot

Siusan MacKenzie



Bridging the Gap: The Impact of Operational Demands on the Families of Emergency Service Workers

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Mark Blazejowski

Kaitlyn Fitzpatrick

Luke Frauton

Owen MacNeill

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Report Submitted to:

Martine Gilliot, Family Matters Lead

Emergency Services Foundation

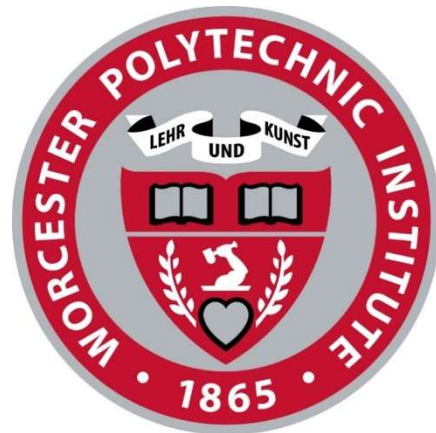
Advisors Uma Kumar, Ph.D. and Joseph Sarkis, Ph.D.

Worcester Polytechnic Institute

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ABSTRACT

When emergency service workers are deployed for multiple days, their families face emotional and logistical burdens. To improve mental health resources for families of emergency service workers, the team worked with the Emergency Services Foundation to examine the needs of families before, during, and after deployments. The team interviewed 30 family members and emergency service workers to understand the experiences of families during deployments. Wellbeing teams from six emergency management agencies were interviewed to evaluate current resources. The Job Demands-Resources model was used to identify challenges families faced as well as coping strategies they used. The team identified eight practices that agencies can adopt to support the mental health of families throughout deployments.



EXECUTIVE SUMMARY

The families of emergency service workers (ESW) play a vital role in supporting the wellbeing of ESWs. At times of deployment their own wellbeing is also put under pressure. Different emergency management agencies acknowledge the importance of family support and have initiatives in place; however, these resources fall short, in relation to deployments. This project examines the experiences and needs of families throughout the deployment process and offers recommendations to help agencies strengthen the resources and outreach provided to ESW families at such times.

Sponsor - Emergency Services Foundation

Our sponsor, the Emergency Services Foundation (ESF), is an organization dedicated to upstream prevention and early intervention initiatives with aims to improve mental health and wellbeing across the entire emergency services sector in Victoria. ESF conducts research on mental wellbeing of ESWs and the families of these workers. They have implemented a Family Matters strategy, which focuses on supporting families across four different pillars. The goal of our project is to connect the third and fourth pillars. The third pillar focuses on education to enable family members to be a wellbeing resource, while the fourth is focused on reducing the impact of operational activity on families of ESWs. This gap is the key problem that our project is aiming to address. We provide recommendations for how to address this gap.

Challenges ESW Families Face

There are significant mental health challenges that ESWs face that are inherent to their line of work. Families of these workers also often experience similar significant mental health challenges that stem from the family's relationship to emergency service work, including additional issues distinct from those suffered by ESWs. Families experience vicarious trauma, additional logistical demands, and

isolation when their family members are away. Family members of ESWs are likely to be the first to recognize changes in the mental health of the ESWs and thus are the first who can support them. Improving mental health across the sector requires supporting not just the ESWs themselves, but also the families of ESWs.

Current Wellbeing Support Practices

Organizations have adopted strategies and services to provide some family education and support. Programs such as educational workshops, peer support networks, and psychological first aid are used throughout the emergency sector. However, many of these supports are designed primarily for ESWs rather than their families, and few address the specific challenges that arise during deployment. Organizations acknowledge that strong family relationships can help families manage deployment trauma and stress indicating the findings of this study will be well received. Despite extensive research, little published research focuses on family experiences of deployment in emergency services. These gaps in evidence and practice are leaving families without the targeted resources they need to navigate the demands of deployment.

APPROACH

Objective 1: Determine Deployment Characteristics and Assess Current Agency Support Practices

To assess the effectiveness of current agency support practices, the project team studied six ESF member agencies' operational deployment characteristics and the support that the agencies provided the families during these operational deployments. These agencies include Country Fire Authority (CFA), Forest Fire Management (FFM), Fire Rescue Victoria (FRV), Australian Red Cross, Victoria State Emergency Service (SES), and Triple Zero Victoria (TZV). We conducted semi-structured interviews both online

and at various agency locations to acquire this information. Our questions were designed with the main objective of determining the nature of a deployment and the current state of support for families before, during, and after deployments with respect to each agency. By using semi-structured interviews, we were able to tailor our follow-up questions to the characteristics of each agency.

Objective 2: Ascertain Needs of ESW Families

To effectively support families of ESWs during operational deployments, the team gathered data on the needs of families and strategies they use to support their wellbeing. We conducted online semi-structured interviews with 20 family members of ESWs and 10 ESWs with previous deployment experience.

Two team members were present at each interview to help facilitate the conversation with a guiding set of questions. These questions were designed with prior theoretical approaches in mind and explored the needs of families before, during, and after deployment. This structure was adopted under the assumption that each stage of the deployment process poses unique challenges.

Objective 3: Develop a Family Engagement Framework

The third objective was to develop a family engagement framework that agencies can use to help guide ESW family support before, during, and after the deployment process. The framework recommendations are grounded in evidence from the interviews with agencies and with family members and ESWs in addition to secondary research from literature. The research team analyzed the data for common themes, which were then used to propose suggestions within a framework for agencies to implement. The resulting family engagement framework provides a practical tool to help agencies strengthen their capacity to support ESW families throughout the deployment process. The framework addresses

the gap between how agencies feel they support families with their support systems and how families perceive this support.

RESULTS

The team started by making sense of what a deployment looks like across different agencies. A clear definition of deployment shapes what families experience and what support is offered. We examined the supports agencies provided and then compared them to the supports families believed they had. Their perspectives revealed a gap in perception and experience, which underpins the recommendations of our project. The inputs shown in Figure ES1 were all used to identify the needs of families during deployments.



FIGURE ES1: INFORMATION AND EVIDENCE SOURCES TO ASSESS EMERGENCY SERVICE WORKER FAMILY WELLBEING NEEDS

Understanding Each Agency Deployment

Through six agency interviews, we determined that there were differences between frontline deployments and supporting role deployments, such as those to incident control centers. Each agency had different areas of expertise and personnel which makes the deployments relatively unique to each agency. However, we found common themes between the deployment challenges these individuals' families faced. They all encounter additional burdens at home and face difficulty communicating with their ESW. Additionally, the vicarious trauma and stress experienced by these families is similar

whether their ESW is deployed as a frontline worker or as a supporting role to an incident control center.

Agency Support Practices

We learned from these agencies that there are already several support practices in place to support the mental health of individuals in the sector. Two of the most common programs mentioned by agencies is the Employee Assistance Program (EAP) and peer support network. EAPs provide independent and confidential mental health and wellbeing support for workers and peer programs which are based on the theory that the ability to support each other is a great strength. One of our key findings was that the mental health and wellbeing supports provided mostly target ESWs. These tools that the agencies provide to ESWs could also be incredibly useful to families, but access to and knowledge about these programs is not evident.

Understanding the Needs of Families Across the Deployment Process

We conducted 30 interviews with ESWs and their family members, this helped us to gauge the gaps in the current support practices offered by agencies. Families claimed that deployments created tangible, emotional, and relationship burdens on themselves. Some of the key challenges faced by families and the supports that they use to overcome these are shown in Figure ES2.

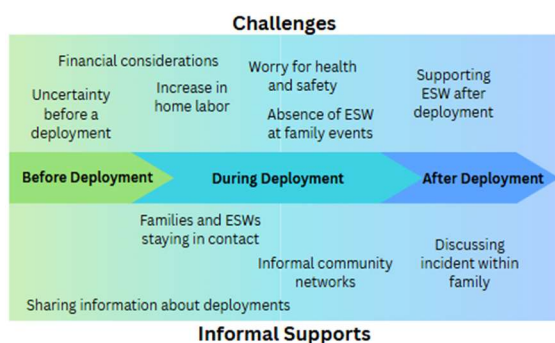


FIGURE ES2: THE CHALLENGES AND INFORMAL SUPPORTS OF FAMILY MEMBERS THROUGHOUT THE DEPLOYMENT PROCESS

Families face many and diverse challenges while their family member is away on a deployment. Currently, despite the agencies' belief that they are providing some support to families, families reported that there was next to no formal support from the agencies. Most of the agency support practices did not meet the needs of families or this information was not communicated in a way to reach families. This lack of information leads families to rely on their own informal support strategies.

Ultimately, this gap in access to information and resources underpins the recommendations that we are providing to the agencies on how they can better support families during deployments. This connects back to the Family Matters strategy which identifies the need to effectively support the mental health of the family as a unit including how operational activity impacts family life. The findings of this study provide agencies unique insights which can be applied for continuous improvement.

Limitations of Findings

There were several limitations that affect project findings. Many of the family interviewees were ESWs themselves or very experienced in the emergency services community. These interviewee characteristics may have provided a different perspective based on their years of operational experience leading to better coping strategies as they were able to learn and adapt to their families' specific needs over time. Many families also stated that participating in this study made it easier to understand the deployment process and its unpredictability. There were also a few interviewees that were in the same families as each other, which may have limited diversity in our responses. While we aimed to get an equal number of interviewees from each of the participating agencies this was not possible meaning the data may not reflect the experiences of families from underrepresented agencies such as the Australian Red Cross.

RECOMMENDATIONS

Recommendations have been made that would be applicable to all six participating agencies. These have been broken down into a framework of distinct stages of before, during, and after deployments. These recommendations are informed by our background research, interviews with families and workers, and agency interviews.

BEFORE DEPLOYMENT

Collect Family Contact Information

This recommendation is distinct from the next of kin information as needs might be required elsewhere. As the basis for all of our recommendations, agencies need to collect the contact information of family members as part of the deployment registration process. Many agencies stated that they rely on decentralized or brigade-based communication. For agencies, the inability to contact family members directly creates a disconnect and an inability to provide any direct and meaningful support at all for families.

Establish Direct Communication Channels with Families

Once agencies have the contact information, the next step is to establish an effective direct preferred communication channel with the affected families. This communication can be through a variety of platforms such as WhatsApp, SMS, or other social media platforms. These channels can be where the most recent information about a deployment is located and maintained. This would be an easy and ideal way for families who may check more frequently and want to stay more involved with the deployment.

Provide Information about Deployments Directly to Family Members

The information provided to families about the deployments is often incomplete and unhelpful. There is currently a heavy reliance on the individual ESWs to communicate information to

the families. However, the ESW is often busy and exhausted and does not have answers, leaving families in a position with a high level of uncertainty. This uncertainty may lead to seeking information elsewhere such as from news outlets, which can often be vague and panic-inducing.

DURING DEPLOYMENT

Maintain Formal Communication with Families Throughout Deployment

We recommend that agencies provide a reliable point of contact who can verify ESW safety and wellbeing. Several families expressed that they had previously lost contact with their family member during deployments, leading to an increase in stress and worry. Providing this point of contact would reassure the family, especially in a deployment situation where mobile service is limited.

Explore Feasible Supports to Reduce Home Burden

Many family primary caregivers we spoke with stated that deployments were an extremely difficult time in navigating their normal duties at home. These duties include child and pet care, preparing food, and financial considerations. We recommend that more consideration be given to how to help address these issues for caregivers.

Strengthen Family, Peer, and Community Support Networks

Peer support networks are already in place to help ESWs; however, we feel the same level of check-in style support could also apply to families of deployed personnel. Similarly, community events hosted by local brigades and stations were mentioned by families in helping them with feelings of isolation and providing a sense of community. We recommend that agencies consider how to extend their peer support networks to families to help build a system that allows family members to support each other at times of deployment.

Recognize and Reinforce Contributions of Family Members

Family members play a significant role during the deployment process; however, their role is given less recognition. Families supporting ESWs enable the ESWs to succeed in completing their duties while away. Acknowledgement, such as a personalized letter thanking family members for their contribution, would go a long way in motivating these family members to continue supporting their ESW.

Improve Awareness of Family-Focused Mental Health Supports

Families play an important role in mental health support for the entire community. Family members may struggle with their own mental health challenges after deployments, making it important that support is available to them if needed. Family members we interviewed felt that they were responsible for the mental health of their ESW, even if they were struggling themselves. Some agencies have started to educate families on mental health techniques and resources, but we recommend that agencies supplement this by addressing the specific mental health challenges of families of ESWs. There are current supports such as Supportal and the Recovery After Trauma booklet that already exist to help families manage their wellbeing. By improving the awareness of resources available to families they can proactively address mental health struggles within their family.

CONSIDERATIONS

When implementing these recommendations, it is important to consider scalability and feasibility. Given our findings, there exists similarity in needs across the six agencies we worked with. It

is important to determine whether these recommendations should be implemented at the agency or local level, as this could determine the effectiveness of each agency's particular strategy. Each recommendation should be thoughtfully tailored and adjusted to meet the needs of each agency in order to more effectively support the families of ESWs in the long run.

CONCLUSION

The impact of deployments on families of emergency service workers is substantial and cumulative. Families are exposed to a variety of disruptions to their daily life when a family member is deployed away from home. These disruptions can lead to mental health challenges and logistical concerns for the emergency service worker's family.

Our conversations with agency wellbeing managers, families, and ESWs themselves have enabled us to conclude:

1. Families feel unsupported throughout the deployment process and want to be treated as key stakeholders.
2. Agencies do not have the ability to meaningfully contact families.
3. The needs of families are consistent across agencies involved in deployments.
4. Some resources already exist that could easily be developed further and tailored to meet the needs of families during the deployment process.
5. Better support for families throughout the deployment process will also support the mental health, wellbeing, and sustainability of the Victorian emergency service workforce.

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AUTHORSHIP



Mark Blazejowski

Mark was the primary author of the “Mental Health Challenges in Emergency Service Work” and “The Family Matters Strategy” sections in the Background. Mark also contributed to writing and editing the Results and Recommendation sections. Mark was the primary note-taker for various meetings and played an important role in analyzing interview data.



Kaitlyn Fitzpatrick

Kaitlyn was the primary author of the introduction to the paper and methodology, as well as the “Organizational Support For ESW Families” section in the Background. Kaitlyn also contributed to writing and editing the Results and Recommendation sections. Kaitlyn took a leading role in conducting the agency interviews.



Luke Frauton

Luke was the primary author of the Executive Summary, Conclusion, and the “Current Agency Support Practices” section in the Background. Luke also played a key part in writing and editing the Methodology, Results, and Recommendations sections. Luke contacted the workers and volunteers to schedule interviews.



Owen MacNeill

Owen was the primary author of the “Challenges Affecting Families of Emergency Service Workers,” “Ascertain Needs of Families of ESWs,” and “Analyzing Interview Data” sections. Owen also contributed to writing and editing the Results and Recommendation sections. Owen managed contacting families and scheduling interviews with them.

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INTRODUCTION

In the state of Victoria, Australia, more than 139,000 individuals are engaged in emergency service work (Emergency Services Foundation, 2025b). While the psychological toll on emergency service workers (ESWs) has been well documented, less attention has been paid to the families that support them, especially during times of deployment. The Emergency Services Foundation (ESF) is a not-for-profit organization that aims to support emergency workers and their families' mental health and wellbeing. Working in conjunction with ESF, this project seeks to identify how families of ESWs are impacted during periods of deployment and assess current support systems. Deployment has been defined as when an ESW is away from home for an extended period in a different capacity than usual.

This project is situated within the broader societal context of increasing emergency services demand due to the growing frequency and intensity of environmental disasters. The average temperature in Australia has increased significantly, heavy short-term rainfall events are more intense, and longer fire seasons have occurred (State of the Climate, 2024). While emergency workers are trained and supported to operate in these conditions, their families are often unprepared and unaware of supports offered.

ESF has recognized the significant role families play in supporting the emergency services workforce and has taken a proactive approach in early intervention and support for mental health.

As part of their broader wellbeing efforts, ESF is implementing its Family Matters Strategy, which focuses on supporting families across four key pillars, ESF has already targeted the first two pillars (Figure 1). Their third pillar focuses on education to enable family members to be a wellbeing resource, and their fourth pillar is reducing the impact of operational activity on families. While progress has been made on the third pillar, the fourth needs further development. This project seeks to address that gap by analyzing how families are currently supported and suggesting potential improvements that could be made.

This project aims to support ESW family mental health and wellbeing during worker deployment periods. The project team interviewed families, experts, and government agencies to determine unmet family needs when their family members are deployed. This report begins with a background on mental health challenges faced by both ESWs and their families, drawing on recent studies and relevant literature. Following that, the project team evaluates current support systems aimed at helping ESW's families and identifies strengths and gaps. The methodology section outlines the methods the project team used to acquire and integrate evidence, including interviews with families and experts. Study findings are then presented, which will inform recommendations for ESF to support ESW families during ESW deployment.

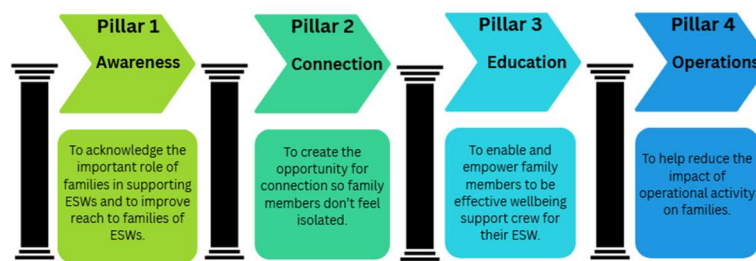


FIGURE 1: FAMILY MATTERS STRATEGY (EMERGENCY SERVICES FOUNDATION, 2025A)

BACKGROUND

This section begins by examining the mental health challenges of ESWs to gain an understanding of this sector's challenges. A review of experiences and mental health challenges faced by families of ESWs is then presented. The section then presents examples of approaches to support mental health at both an individual and organizational level. The section concludes by reviewing ESF's Family Matters strategy, which provided the strategic direction for this project.

MENTAL HEALTH CHALLENGES IN EMERGENCY SERVICE WORK

Mental health issues have become increasingly relevant in society with mental health support and studies gaining importance (Blomqvist et al., 2019). In emergency service work, mental health challenges can affect these brave individuals daily within these duties.

There are significant mental challenges for ESWs during deployments, a period in which an emergency service worker is expected to be away from their normal workload for an extended time period. Beyond Blue, an Australian mental health organization, conducted a national study to examine the mental health and wellbeing of ESWs (Lawrence et al., 2018). The study found that around one-third of all ESWs have high or very high psychological distress compared to the rate of one in eight among all Australian adults (Figure 2). This issue is important because it can affect ESWs after deployment and it can affect ESWs workforce interest, where the issues can be a recruitment barrier for this important job.



FIGURE 2: GRAPHIC SHOWING THAT 1 IN 3 EMERGENCY SERVICE WORKERS HAVE HIGH OR VERY HIGH PSYCHOLOGICAL DISTRESS (LAWRENCE ET AL., 2018)

ESWs face similar risks when compared to military veterans in terms of developing mental health conditions (Kyron et al., 2022). Despite these comparisons, there have been fewer studies done on ESWs when compared to military personnel. The relationship between the two professions is significant and shows how ESWs and their mental health challenges should receive similar awareness and support. Past studies have been limited in detail and sample size. These studies have shown significant and harmful risks of depression, PTSD, anxiety, and increased alcohol consumption.

Currently, there are currently over 80,000 paid ESWs in Australia. These paid workers include paramedics, firefighters, police officers, and state emergency services workers. Roughly 420,000 emergency volunteers assist these paid workers in the field. In the field, roughly 500,000 total workers are exposed to numerous traumatic events and other stressors (Varker et al., 2018). Some emergency service workers such as front-line firefighters may be placed extremely close to dangerous situations (Figure 3).



FIGURE 3: EMERGENCY SERVICE WORKER IN ACTION AT A FIRE (CFA, 2025)

The risk of PTSD development increases depending on the number of traumatic experience exposures. The chance of a mental health issue is also higher for long-term ESWs compared to newer workers (Varker et al., 2018). This finding

shows the need for mental health resources and strategies to combat these issues. If ESW employees struggle with their mental health, this could discourage new individuals from joining the emergency services.

The suicide rate increase for Australian ESWs in a state of crisis is 4 to 8 times greater than usual over the past few years. Additionally, abnormally large alcohol usage was present in roughly 37% of police officers due to multiple other factors (Varker et al., 2018). These factors may be linked to low morale and poor mental health, which can reduce job performance. These low morale and poor mental health issues are serious due to the daily work of ESWs and how important it is to address these traumatic events. ESW mental health support is crucial to maintaining the wellbeing of the public.

CHALLENGES AFFECTING FAMILIES OF EMERGENCY SERVICE WORKERS

There are significant mental health challenges for ESWs, as seen in the previous section. Families of these workers also often experience significant mental health difficulties, including issues distinct from those suffered by ESWs.

Studies have shown that ESW families' mental health is extremely important. Although methodological differences make direct comparison difficult, several common themes emerge. Time management is a major theme, as free time, division of home labor, and advanced scheduling are complicated for families of ESWs. Family members describe how emergency work often restricts family time and how other family members often give up commitments or opportunities to facilitate family life (Hill et al., 2020). Family members were also likely to take on more responsibility at home, shouldering tasks like grocery shopping, transporting their children, or caring for pets. Spouses sometimes had to change jobs or alter their work schedule to

facilitate childcare or being close to the firefighter's place of work (Lantz et al., 2024). These changes in lifestyle indicate that being a family member of an ESW may come with additional challenges and stress. In response, family members are likely to take on additional burdens to facilitate their ESW's career, leading to increased stress. While family members accepted these challenges as a part of being in a family with an ESW, some expressed that their work went unrecognized by their family members or their ESW's work organization (Traynor et al., 2024).

Family members also expressed concern for their ESW relatives stemming from their careers. Family members recognized the inherent risks of emergency work and used different strategies to cope. Many family members reported that they didn't actively think about the danger of their ESW's work, but that certain situations, such as seeing emergency situations from afar or seeing their partner coming home covered in residue from an incident, would trigger their worry and anxiety (Hill et al., 2020). Uncertainty was a common frustration of family members, as they wanted context about emergency incidents for practical purposes, but also to emotionally settle themselves and to support their ESW. This uncertainty was commonly related to the duration or nature of the incident, information which ESWs often couldn't provide for confidentiality reasons or due to not knowing themselves (Lantz et al., 2024).

Relationships between ESWs and their families were strained by emergency work. Firefighters sometimes reported difficulty adjusting their attitudes when returning home from work, leading to tension within the family. Spouses reported feeling that they often had to subdue their own personal struggles or emotions to support their ESW (Watkins et al., 2021; Traynor et al., 2024). Family members also expressed a desire to help their ESW cope with traumatic

events, but some reported that their partner became withdrawn or emotionally unavailable after a traumatic incident. Conversely, ESWs reported trying to shield their families from any emergency-related emotional toll by not discussing work with their family (Hill et al., 2020; Traynor et al., 2024). This finding is especially significant given the correlation between withdrawn behavior and psychological distress on the spouse's part (Cowlshaw et al., 2010). However, many family members appreciated that their partners used varied emotional outlets, such as solitary work or peer support, provided that their partners received the support they needed and were comfortable coming to a family member for help if needed (Traynor et al., 2024).

Families do see some beneficial outcomes from this work environment. Emergency work, while sometimes burdensome to family relationships, can provide meaning and a bond for the family. Families often make a collective commitment to support emergency work, which provided a shared sense of purpose and joy (Lantz et al., 2024). Family members also described having stronger relationships with their ESW after talking about emotionally fraught or challenging subjects (Traynor et al., 2024).

Figure 4 provides a summary of challenges faced by emergency service worker families. Tangible challenges are tasks or obstacles that burden the family member with additional work, financial burden, or obstacles to achieving personal goals. Emotional challenges affect the inner life of the family member, including new stressors or irritations. Relationship challenges are obstacles to ESW and family relationships.

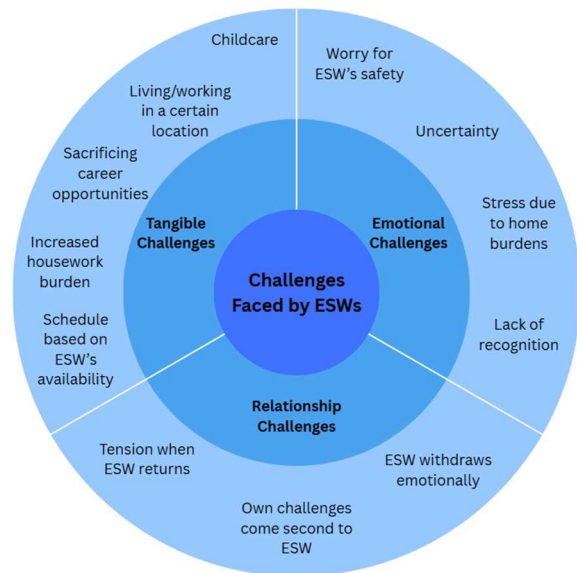


FIGURE 4: TANGIBLE, EMOTIONAL, AND RELATIONSHIP CHALLENGES FACED BY FAMILIES OF EMERGENCY SERVICE WORKERS.

CURRENT RESOURCES AND TREATMENTS FOR EMERGENCY WORKERS AND THEIR FAMILIES

Organizations adopt strategies and services to provide ESW family education and support. These efforts highlight the link between family and ESW wellbeing. These organizations acknowledge that strong family relationships can help families manage deployment trauma and stress.

Programs like workshops to educate families on how to deal with the absence of their ESW already exist to assist in maintaining wellbeing during deployments. Programs analyzed by Fogarty et al. (2021) called “Behind the Seen”, an organization aimed at facilitating conversations about mental health, were created to increase awareness of trauma and mental health for families of ESWs. The team defines stigma as particularly negative feelings towards circumstances specifically around mental health. The “Behind the Seen” programs included workshops to reduce this stigma and recognize

early signs of distress; they also host outreach events to share their message more broadly (Figure 5).



FIGURE 5: “BEHIND THE SEEN” MENTAL HEALTH CONFERENCE PRESENTATION

The workshops are designed with ESWs in mind and are effective because families are also active participants. “Behind the Seen” offers a common language to discuss mental health and open communication between ESWs and their families. The workshops also highlighted the importance of peer connection through interacting with other families who are going through a similar experience (Fogarty et al., 2021). Reducing feelings of isolation and the stigma of mental health challenges is vital in maintaining family wellbeing. By developing strategies that effectively improve awareness and education, families can be more comfortable and empowered to support their ESW. ESWs can be made aware of equal entitlement for their own wellbeing and the wellbeing of their family members.

Peer support programs have also proven to be impactful by strengthening a family’s ability to be resilient in more practical ways. A peer support program utilizes trained peers within organizations, providing social support and guidance. Donovan (2022) suggests that support networks facilitate post-traumatic growth (PTG) and conducted a study analyzing what characteristics of peer support facilitate this PTG.

Five main themes emerged from her research, as shown in Figure 6.



FIGURE 6: FIVE MAJOR THEMES OF PEER SUPPORT (DONOVAN, 2022)

Uncertainty and long hours are in the nature of emergency service deployments. Peer support programs could help families by providing them with the resources they need to confront the mental health challenges that their family members or themselves are facing. In practice, peer support can create spaces where families feel understood and help reduce the stigma surrounding mental health. With open communication and mutual understanding, families are better able to adapt, maintain emotional stability, and support their loved ones before, during, and after deployments.

ORGANIZATIONAL SUPPORT FOR EMERGENCY SERVICE WORKER FAMILIES

ESF is one of many organizations that provide mental health services to ESWs. Across Australia and internationally, several organizations work to mitigate the mental health impacts of emergency service work on families. Examining these

organizations can provide insight into effective strategies and inform ESF's own strategy.

Phoenix Australia is a key Australian organization that provides training and aids ESWs who are seeking trauma recovery. While their programs focus on veterans, first responders, and those affected by trauma, they often integrate families into their programs and services. Phoenix Australia conducts rigorous, evidence-based research on PTSD and other trauma-related conditions and provides tools to help these individuals. Their Responder Assist program helps ESWs by providing clinical intake and advice services. The organization also offers training modules and online resources that can be used by families of ESWs (*Responder Assist*, 2025). They also provide advice to families as shown in Figure 7.



FIGURE 7: RECOMMENDATIONS FOR FAMILIES OF EMERGENCY SERVICE WORKERS WHO HAVE FACED TRAUMA (PHOENIX AUSTRALIA, 2025)

Although Phoenix Australia's programs primarily focus on the individuals serving in emergency roles, they acknowledge the importance of a strong support network, notably the families of ESWs (Phoenix Australia, 2025).

Around the world, there are several organizations that are helping families of ESWs. Wounded Warriors Canada provides programs for both

veterans and first responders. They also aim to help families of ESWs through their wellbeing services. Programs such as Couples Overcoming PTSD Every Day (COPE) and Couples Resiliency aid in helping families by strengthening family dynamics and providing therapeutic resources. These programs are grounded in clinical research and delivered by mental health professionals (Couples Overcoming PTSD Every Day, 2025).

Each of these organizations shares a commitment to strengthening families as a core support system for ESWs, but they vary in their approaches. Types of approaches are summarized in Figure 8.



FIGURE 8: WAYS TO SUPPORT FAMILIES OF EMERGENCY SERVICE WORKERS

These organizations give insight into potential methods that could be recommended to support families; however, they do not focus on periods of deployment, so novel approaches to helping families of ESWs may be necessary.

THE FAMILY MATTERS STRATEGY

ESF's current strategy to support the families of ESWs during deployments is known as the Family Matters Strategy. ESF wants to better support these families through the Family Matters Strategy because of the valuable support that they provide to the ESWs themselves. This topic has

received increased attention in recent years due to the mental health challenges that ESWs face. ESF also recently implemented a free online system called Supportal as a part of their Family Matters Strategy, meant to provide resources and support directly to the families of ESWs (Emergency Services Foundation, 2025c).

There are four pillars of the Family Matters Strategy, as shown in Figure 1. This project targets the gap between the third pillar of this strategy, education, and the fourth pillar, operations. This project is critical in filling the gap, which enables operations to occur to help families.

The Family Matters Strategy directly impacts ESW families through household logistics and more, hence the need for this strategy. The third pillar, education, is best exemplified by The Mental Health Continuum model, which is a helpful resource for families learning how to best support each other and the ESWs (Emergency Services Foundation, 2025a). This model has been adapted for different agencies and organizations to further education and raise awareness for mental health in the emergency services (Keyes, 2002). A version of this mental health continuum model from the Forest Fire Management agency appears in Figure 9 (Forest Fire Management, 2025).

ESF has an adaptation of this mental health continuum model, in which they identify common behavioral patterns within five different categories of healthy daily life. These categories are emotions, thinking, behavior, health, and habits (Emergency Services Foundation, 2025a). Each category has different support options and actions for the ESW or family member support. This model is an important part of the education pillar and an important step in developing a plan to support everyone affected by deployments.

The fourth pillar of the Family Matters Strategy is operations, which makes sure that the overall framework reduces the impact of operational activity on these families. Our project will be focused on the gap by exploring the current outcomes of family support resources and improving their effectiveness.

This background provides the foundation to explore the challenges faced by families of ESWs. The next section focuses on how we gathered data to analyze current support and provide evidence-based recommendations to ESF. By interviewing key agency leaders and speaking directly with families of ESWs and ESWs themselves, we gained valuable insights into how families can be supported during periods of deployment.



FIGURE 9: THE MENTAL HEALTH CONTINUUM MODEL (FOREST FIRE MANAGEMENT, 2025)

METHODS

The goal of this project was to support the Emergency Services Foundation in understanding and improving the support provided to ESW families during deployment periods. As established in the introduction, deployment has been defined as when an ESW is away from home for an extended period of time in a different capacity than usual due to a specific emergency event, such as a bushfire or flood. Family wellbeing during deployment refers to the emotional, psychological, and social health of individuals within the family unit, recognizing that healthy family relationships are important to the resilience of both ESWs and their family members.

This project placed family experiences at the core of the research because families are central to bridging the gap of ESW wellbeing. This project combined both agency and family experience informing current practice understanding and unmet needs. Agencies offered insights into existing support programs and organizational priorities, while families shared firsthand experiences with ESW deployment challenges and stress. These perspectives guided the development of recommendations for ESF that were both practical and based on lived experiences, supplemented with research and evidence.

To achieve these goals, this methodology relies on evidence from background research, including a literature review, ESF's Family Matters Strategy, and international practices. The project goal, objectives and methods are summarized in Figure 10.

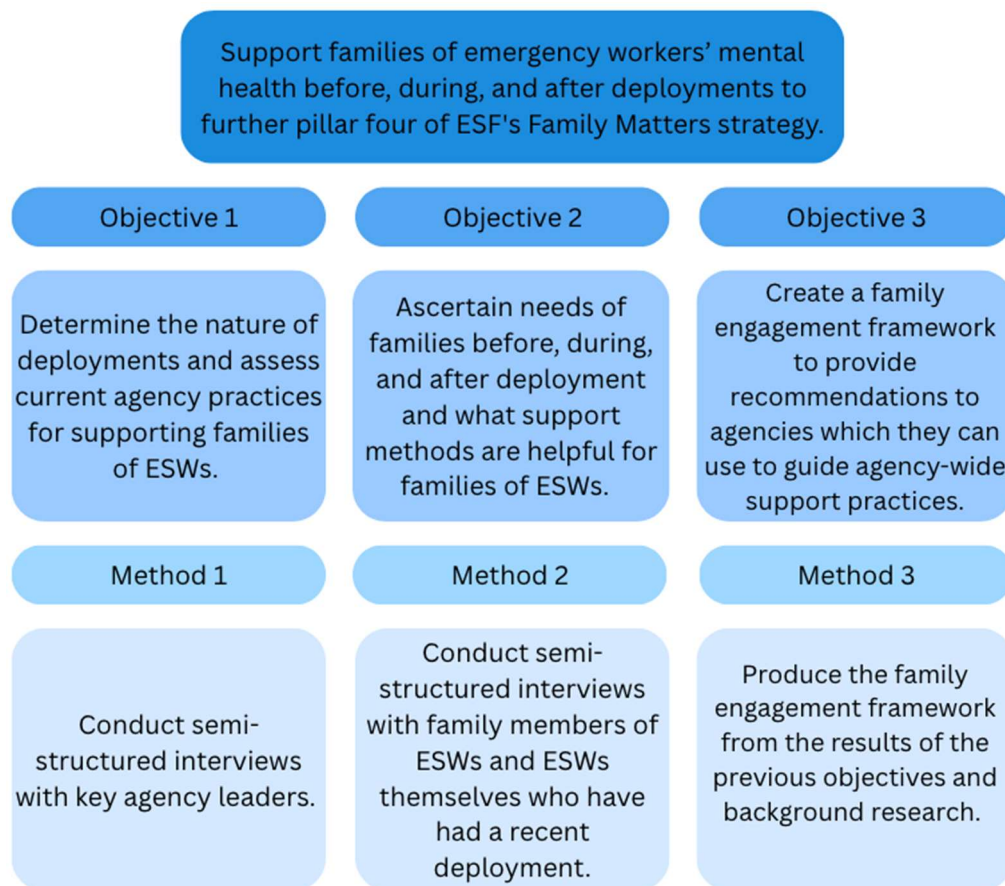


FIGURE 10: THE RELATIONSHIPS BETWEEN THE PROJECT GOAL, OBJECTIVES, AND METHODS

DETERMINE DEPLOYMENT CHARACTERISTICS AND ASSESS CURRENT AGENCY SUPPORT PRACTICES

To assess the effectiveness of current support practices, the project team studied each ESW agency's family operational deployment characteristics and their support during deployment. We conducted semi-structured interviews both online and at various agency locations to acquire this knowledge. We interviewed eight agency leaders across six ESF member agencies. Interviewee titles and tenure with their respective organizations are summarized in Table 1. ESF handled both the agency participant recruitment and scheduling of interviews.

TABLE 1: AGENCY WELLBEING MANAGER STUDY
PARTICIPANT BACKGROUNDS

Agency	Interviewee Role	Interviewee Years at Agency
Fire Rescue Victoria	Psychological Services Manager	5
Country Fire Authority	Organizational Wellbeing Manager	6
Forest Fire Management Victoria	Acting Manager, Health and Wellbeing	12
	Health and Wellbeing Advisor	7
Australian Red Cross	State Manager Programs Victoria	3
	Lead Workforce and Capability	5
Victoria State Emergency Service	Wellbeing Services Team	N/A
Triple Zero Victoria	Senior Manager Emergency Management	4

The entire team was present at each interview, where the team guided the interview using a set of questions (see Appendix A) while being mindful of distinctions between the different agencies. These questions were designed with the main objective of determining the nature of a deployment and determining the current state of support for families before, during, and after deployments for each specific agency.

Through these interviews, and using qualitative research evaluation techniques, the team gained insight into both the commonalities and the nuances between the support services for each agency. This method ensured that the recommendations provided to ESF were applicable to the whole ESW sector but also recognized the unique capabilities of each agency.

ASCERTAIN NEEDS OF FAMILIES OF EMERGENCY SERVICE WORKERS

To effectively support families of ESWs during operational deployments, the team gathered data on the needs of families and strategies they use to support their wellbeing. The team conducted online semi-structured interviews with 20 family members of ESWs and 10 ESWs with previous deployment experience. Table 2 summarizes the participant information including the gender, relationship to ESW, and agency affiliation. ESF managed the process of recruiting families through the flyer shown in Figure 11, and the research team scheduled each interview individually.

TABLE 2: CHARACTERISTICS OF FAMILY MEMBER AND
EMERGENCY SERVICE WORKER PARTICIPANTS

Characteristics	Family	ESWs
Gender		
Male	4	8
Female	16	2
Relationship to ESW		
Spouse	17	N/A
Child	3	
Agency Affiliation		
Fire Rescue Victoria	5	1
Country Fire Authority	5	2
Forest Fire Management Victoria	4	3
Victoria State Emergency Service	1	2
Australian Red Cross	1	0
Triple Zero Victoria	2	2
Victoria Police	2	0



FIGURE 11: FLYER FROM THE EMERGENCY SERVICES FOUNDATION FOR STUDY PARTICIPANT RECRUITMENT

We provided study participants with a consent form before each interview (see Appendix B). The consent form explained the nature of the research project, informing them of how their data would be stored and used, and emphasizing that the subject could withdraw from the study at any time and for any reason.

Two research team members were present during each interview. One researcher was the lead interviewer, asking questions and guiding the conversation, while the other researcher took notes and supported the lead interviewer. The interview was structured around the questions in Appendices C and D. These questions were designed with prior theoretical approaches in mind, such as family systems theory, the job demands-resources model, and the transactional model of stress and coping (Helm, 2023; Bakker and Demerouti, 2007; Kivak, 2024). The questions also explored the needs of families before, during, and after deployment. This structure was adopted due to the assumption that each stage of the deployment process poses unique challenges.

ANALYZING INTERVIEW DATA

Once the interviews were conducted, the research team coded the transcripts to identify common

terminology, themes, and experiences. The interview coding processes for the agency leaders and the families were performed independently by research team members to draw conclusions from each method and then reviewed as a team to validate the conclusions. An inductive approach was used during this process, as the topic of family wellbeing during deployment is unexplored in prior literature (Rowley, 2012).

The coding process focused on identifying demands placed on family members during the deployment process as well as strategies and resources that the families used to meet these demands. This process was informed by the Job Demands-Resources model, where the ‘job’ of the family member was to be at home during a deployment (Bakker and Demerouti, 2007). This approach allowed the research team to identify common struggles experienced by families, as well as ways in which their demands were and were not met.

DEVELOPING A FAMILY ENGAGEMENT FRAMEWORK

The third objective was to develop a family engagement framework that emergency service agencies can use to guide ESW family support before, during, and after deployment. The framework recommendations are grounded in evidence from interviews with agencies and family members, in addition to secondary research from the literature. As described in the previous section, the research team analyzed the data for common themes, which were then used to propose suggestions within a framework for agencies to implement. The resulting family engagement framework provides a practical tool to help agencies strengthen their capacity to support ESW families. The framework addresses the gap between how organizations feel they support families with their support systems and family support perception before, during, and after deployment.

RESULTS

This section presents the findings from agency, ESW, and family interviews. We start by making sense of what “deployment” looks like across agencies, as this shapes what families experience and what support is offered. We then address the study’s primary objective: examining supports across the three phases of deployment- before, during, and after- through families’ reported needs and coping strategies. The project team evaluated the needs of ESW families through the methodological process results summarized in Figure 12.



FIGURE 12: INFORMATION AND EVIDENCE SOURCES TO ASSESS EMERGENCY SERVICE WORKER FAMILY WELLBEING NEEDS

UNDERSTANDING DEPLOYMENTS AND EXISTING AGENCY SUPPORTS

Before examining family needs across the three phases of deployment, it was necessary to understand how agencies define and operationalize “deployment,” as well as the support practices currently in place. These organizational perspectives provide essential context for interpreting family experiences and highlight the structural conditions that shape what families face before, during, and after deployments.

The project team conducted interviews with mental health leaders across six different emergency service agencies. The questions were

aimed at understanding current resources available to families and where potential gaps in support exist.

DEPLOYMENT CHARACTERISTICS

Through agency interviews, we determined that agency deployment descriptions can be categorized into two different groups. One category had ESWs on the front lines of an emergency event. The other category was ESWs that had supporting roles during an emergency event. Example ESWs with frontline roles include firefighters and volunteers responding to storms or floods. Support roles varied greatly. For example, some ESWs managed the disaster response from a control center such as intelligence personnel or dispatchers. Other

ESWs provided services to ESWs themselves, for example peer support officers. Some ESWs in support roles stayed deployed beyond the disaster had ended, such as Australian Red Cross volunteers providing support to communities.

This distinction between frontline and supporting roles affects the concerns families may have. Frontline ESWs are exposed to dangers that cause additional stressors for their ESW families. However, families of both frontline and supporting ESWs experience similar deployment challenges. They both encounter additional burdens at home and face difficulty communicating with ESWs during the deployment. Additionally, agencies reported that families understood that both frontline and support deployments could have adverse effects on the mental health of the ESW, implying that many of the most significant challenges for families and ESWs themselves are present during both frontline and supporting deployments.

The duration of deployments, and the breakdown of work, rest, and travel time varied slightly for each agency but, overall, were similar.

AGENCY SUPPORT PRACTICES

Through the six interviews with agency leaders, the team was able to obtain data on agency support practices towards families of emergency service workers.

One of the most common programs across these six agencies is the Employee Assistance Program (EAP). EAPs are a general guide for agencies to use in supporting the mental health and wellbeing of their workers. The EAP provides a set of general support systems for ESWs and their families. EAPs include support to ESWs with confidential counseling, practical support, and psychological first aid. EAPs are meant to increase ESW overall wellbeing.

Another agency support practice is delivering fridge magnets to families as a guide on how to identify and measure the state and wellbeing of their ESW at home. Some of these magnets summarize elements of the Mental Health Continuum Model, while others simply provide phone numbers and resources to support health and wellbeing as shown in Figure 13.



FIGURE 13: TRIPLE ZERO WELLBEING FRIDGE MAGNET TO EDUCATE EMERGENCY SERVICE WORKERS' FAMILIES

This direct communication channel enables agencies to more effectively provide information to families about the support that they offer. Even though these handouts are targeted at the families, the materials that the team saw were all meant to identify how the ESW was feeling. These resources do not address the situation where a family member is in distress and needs psychological, practical, or emotional support. Additionally, not all agencies have the resources to provide a resource like this to every household.

One of the team's key findings was that the mental health and wellbeing support that is being provided only targeted ESWs themselves. Some agencies have useful tools available to the workers including EAPs or Peer Support Networks; however, their scope is generally limited to ESWs. Another major issue is minimal family awareness of support programs. The following quote is representative of this awareness concern:

“If an emergency service person wants a peer support officer to contact their family... the peer support officer can do that, but it's not like families are told.”

-FRV Psychological Services Manager

Even though this support is available to families, agencies are relying on ESWs to communicate the available support to their family rather than directly through the agency itself. This reliance may lead to a disconnect between what the agencies believe they are providing and how the families are perceiving that support.

Certain agencies also lack family contact information of their ESWs, making it difficult to inform ESWs, let alone families, of available supports. This is illustrated by the following quote:

“Reaching our members with information about what's available to them is pretty tough. Never mind reaching their family members whose details we don't actually have.”

-CFA Organizational Wellbeing Manager

The first step towards supporting families is understanding them.

UNDERSTANDING THE NEEDS AND SUPPORTS OF FAMILIES ACROSS THE DEPLOYMENT PROCESS

Having established how agencies define deployments and the support practices they have in place, the analysis now turns to the core objective of this study: understanding what families experience and what they need across the three phases of the deployment process - before, during, and after. This section presents the demands families face and the supports they draw upon to manage those demands. The project team interviewed 20 family members of ESWs as well as 10 ESWs.

Figure 14 shows the needs of families, as well as the support they utilized to meet these needs throughout the deployment process. The following section will discuss each need and support in detail, based on the results of the family interviews and interviews with the ESWs themselves.

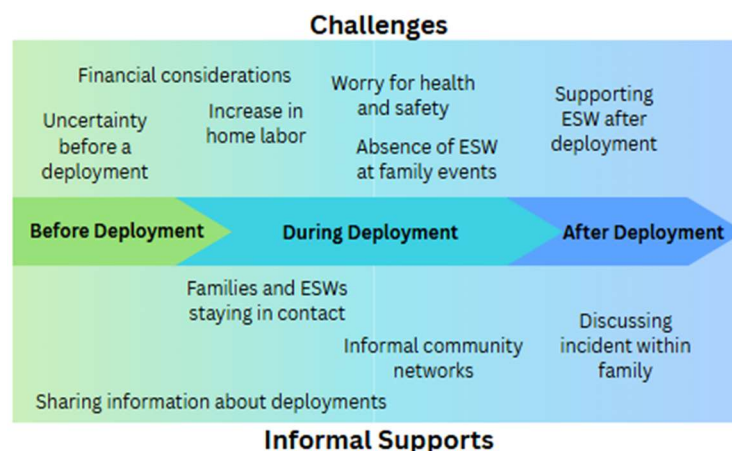


FIGURE 14: THE CHALLENGES AND INFORMAL SUPPORTS OF FAMILY MEMBERS THROUGHOUT THE DEPLOYMENT PROCESS

NEEDS OF FAMILIES

During the interview process, families identified the demands that they faced due to a family member's operational deployment. These demands arose before deployment commenced and continued after deployment ended. Deployments placed tangible, emotional, and relationship burdens on family members, similar to the experiences shown in Figure 4.

UNCERTAINTY BEFORE A DEPLOYMENT

Families have stated the importance of knowing where their ESW is going for an operational deployment and information about the deployment itself. Information that family members reported wanting to know included what the ESWs are doing, how long they are working for each day, and how many days they will be gone from home. When agencies give little to no notice before deployment it gives little preparation for the family. This limited preparation time can create stress and anxiety.

FINANCIAL CONSIDERATIONS

The financial burden that families faced during deployments varied greatly depending on the agency. While none of the subjects reported that their family was financially harmed by a deployment, several respondents raised it as a point of tension for other families. This burden varied significantly across agencies. For example, deployments imposed a clear financial burden on families of volunteer ESWs who didn't have an agreement with their employer. Deployments of professional ESWs often came with a financial incentive. For these professionals, the balancing of extra pay versus spending time with family was a source of stress within the family.

INCREASE IN HOME LABOR

Families typically faced an increase in home labor duties. Many spouses of ESWs reported that caring for young children was a particular

challenge when their partner went on deployment. This is represented with the following quote:

“At that time my children were very young, so all of the family load ... comes back to one person ... for an indefinite length of time.”

-Partner of CFA Volunteer

Other examples of increased home labor included household chores, paying bills, taking care of pets, and cooking. These findings agree with prior research of families of ESWs, confirming that families face increased burdens of childcare and home labor (Lantz et al., 2024; Hill et al., 2020).

Some children of ESWs also reported that when their parent was deployed, they took on more responsibility at home. Examples of these children's self-care activities included older children learning to cook for themselves and finding their own transportation to and from school.

WORRY FOR HEALTH AND SAFETY

Families of ESWs stated that they felt worried about the safety of the ESW during deployment. Several respondents stated that they avoid watching the news while their family member is away since they tend to think of the worst-case scenario in most situations.

Others stated that the news often dramatized the situations their family member was exposed to. Family members also recall feeling stressed or worried when their ESW would return home late or not contact them throughout their deployment.

Children of ESWs often exhibited more anxiety surrounding family member deployment. Most

ESWs did not share information about their jobs while their children were young as they did not want to worry about their children. However, families found that as their children got older, they were able to have more in-depth conversations about the work they do. This awareness made the children worry less, and appreciate the work that their family member does, with some of their children choosing to join the emergency services themselves.

ABSENCE OF ESW AT FAMILY EVENTS

Several interviewees reported that deployments caused ESWs to be absent from family activities. One spouse of a CFA volunteer reported that a deployment caused her husband to be absent from the family's New Years plans. A spouse of an FRV firefighter said:

“My son ... had a big presentation, the grade six pinnacle of all their study for primary school. Now his dad wasn't there. Now we have to prepare him for that. My daughter's [going to] have a showcase, a dancing thing, and he's not [going to] be there either.”

-Partner of FRV Employee

The unpredictable nature of deployments exacerbated this demand and increased family member stress. The stress that an absent ESW placed on the family varied depending on the family dynamic, as some families were more accustomed to the deployment process while others viewed it as a major disruption. Families also reported that wanting to spend family time together would be a primary reason for an ESW to choose not to be deployed.

SUPPORTING ESW AFTER DEPLOYMENT

After emergency service workers returned home, families reported that they still had to take on additional demands to support their ESW. Some family members reported that they needed to be supportive of their partner's mental health while they were also struggling with their own stress. Some family members reported that their ESW suffered from serious mental health issues, such as PTSD, which required intervention. One spouse of a CFA volunteer described the experience of supporting a recently deployed worker, saying:

“You do have to be supportive while you're managing yourself. And it's probably that old thing of 'I've got to be strong.' I can fall apart in the middle, but I can't while everyone else is around me.”

-Partner of CFA volunteer

Other families emphasized that they felt a duty to be a supportive partner to the ESW who had been doing essential work. Families also expressed that this role became more difficult after particularly intense disasters, such as the Black Saturday fires in 2009 or Black Summer from 2019-2020, which strongly impacted the mental health of many ESWs.

SUPPORTS THAT FAMILIES UTILIZED

Families have used different strategies to overcome different needs that they have faced due to ESW deployments. These supports range from resources that agencies currently offer to strategies that the families have themselves. The main support strategies fall under common themes shown in Figure 15.



FIGURE 15: MAIN SUPPORT STRATEGIES UTILIZED BY FAMILIES

SHARING INFORMATION ABOUT DEPLOYMENT

Another important theme was information about ESW activities during deployment. This information can come through multiple sources, either directly from the ESW themselves or also from the agency. Usually, there are a few days of notice and a roughly accurate timeframe for how long a deployment may be, but all this information comes from the ESW themselves. Families advocated the need for this accurate information to plan logistics and everyday habits. Some family members have stated that the ESW also didn't have an accurate timeframe of their deployment, creating discrepancies and uncertainty. It helps the family feel more secure knowing when the ESW will return home.

FAMILIES AND ESWs STAYING IN CONTACT

Staying in contact with family members is an effective strategy for overcoming family needs related to the overall knowledge of deployment characteristics and ESW situation. There are multiple methods that families have used to achieve this contact, such as calling or texting the ESW while they are away. The ESW staying in contact with the family members helps the family

members worry less about the ESW's health and safety during deployment. This constant and consistent communication also alleviates ESW stress. Knowing that their family members are doing well and not worried about their safety is an important stress reliever. However, the ability to stay in contact remained an issue for many families, either due to long hours, lack of cellular service, or by choice. And even staying in contact cannot replace direct human connection. One family member claimed:

“There's only so much you can rely on calling somebody, particularly when you're used to the direct connection in person.”

-Son of FRV employee

Although staying connected during a deployment is beneficial to the overall family mental health, ESWs being away from their families still has an impact one way or another.

INFORMAL COMMUNITY NETWORKS

Families of ESWs found that community support can be a great resource to help their family thrive during deployments. In certain agencies such as SES and CFA, local brigades or units provide a close-knit community that families can rely on for support. Community support is powerful in that it helps ease the feeling of being isolated and alone while your partner is away on a deployment. One partner of a CFA volunteer described this situation:

“The women of the men that went away to fight those fires, knew, I guess the anguish that the other women would be going through if they were new to that situation. So that they did make a point of passing information back regularly and any details that they had available.”

-Partner of CFA volunteer

The community shares common experiences; by talking about their shared experiences, they can begin to learn from each other. The community also provides important information to some families who may be new to the deployment process.

HABITS AND ROUTINES

While not a support per se, families reported that staying in a routine helped them manage their family and household while their family member was deployed. Keeping a schedule and letting life carry on while their ESW is away helps families stay organized. If families were given more notice of an upcoming deployment, they would arrange their plans for the upcoming days to manage their time appropriately. Several family members reported that their family would prepare meals before a deployment so that there would be less work for the partner at home. While families cannot predict everything that will happen while their ESW is away, they can plan for upcoming events and openly communicate what needs they may have.

PROCESSING INCIDENT WITHIN FAMILY

When the ESW talks with family members after deployments, it tends to be helpful for the ESW and the family. Some ESWs choose not to talk with their family because sharing can be more difficult depending on different types of deployments and the job that the ESW is doing.

For example, an ESW may choose not to open up to their family members about being on the frontline for a fire as to not increase anxiety in their partner or family.

After particularly traumatic situations, ESWs may need a peer support officer or other mental health support, as processing the incident among the family might result in vicarious trauma for the family members. Much of this burden is shared across units or brigades, and because these ESWs share similar experiences it is easier to debrief within the workforce rather than at home. Family members have stated the importance of debriefing for their own peace of mind, and once the family members are more used to deployments it can even become a fun talking point for the family. Depending on the situation, this has proven to be an effective strategy for ESWs looking for comfort with their family, and for the family members themselves looking to make sure that the ESW is doing alright.

LIMITATIONS OF FINDINGS

There were several limitations in the project that affected the findings of this project. These limitations centered around bias in subjects and bias in the project team.

BIAS IN STUDY SUBJECT SAMPLE

Many of the family subjects interviewed were ESWs themselves or were very experienced within the emergency service community. These family members might have been better at coping with the challenges of deployment, as well as more knowledgeable than the average family member about what their ESW would be doing. This prior experience may have reduced the stress for these families and reduced their need for resources during deployments. Most of the families interviewed were also experienced with emergency work and deployments, having been a part of the lifestyle for several years. This situation might have made their experiences with recent deployments easier as well as clouding

their memories of previous deployments with which they did struggle.

There were also a few subjects interviewed who were in the same family as each other. Same-family interviewees may have overrepresented some experiences within the data set, but the team has avoided basing any conclusions exclusively based on the experiences of one person or family.

Some agencies have been overrepresented during the interview process. The representation of each agency in the study participants is shown in Figure 16. The figure shows that the Australian Red Cross, State Emergency Service, and Victoria Police may be underrepresented in the survey data and that the results may not accurately reflect the experiences of family members affiliated with these agencies. Because the distinctions between the agencies only indirectly affect the families, this may or may not affect the findings of the project.

BIAS IN PROJECT TEAM

The team did not have any experience in emergency service work or have family members who are ESWs. This may have unintentionally brought preconceived notions into conversations with participants, which could have potentially shaped the way questions were framed or how answers were interpreted. To avoid this, the project team was provided with an in-depth orientation on arrival in Melbourne. Additionally, the project team carefully designed semi-structured interview questions and ensured documentation reflected participants' perspectives as accurately as possible. By keeping these limitations in mind, the research team provided proper deliverables to further ESF's mission and support families of ESWs.

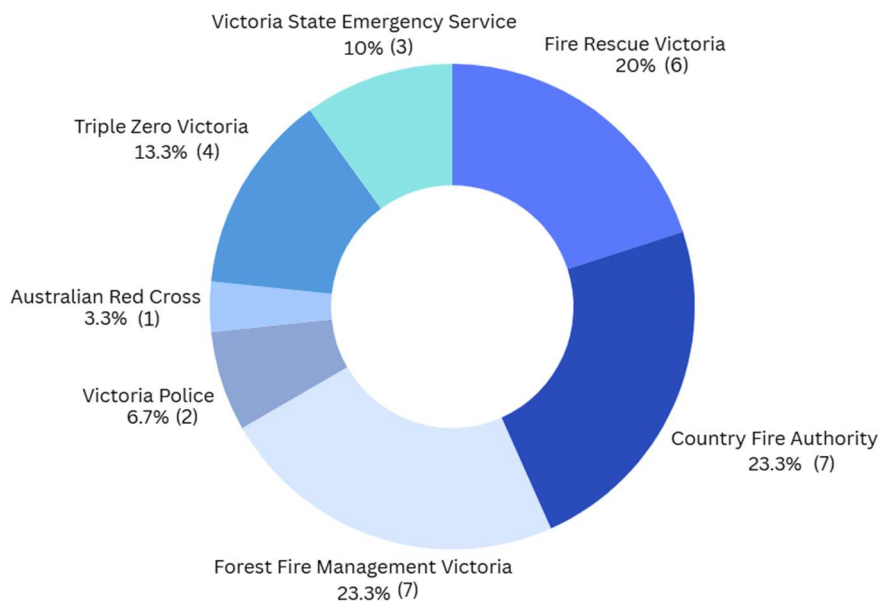


FIGURE 16: THE DISTRIBUTION OF AGENCY AFFILIATION FOR 30 INTERVIEW SUBJECTS

RECOMMENDATIONS

We conducted 6 agency interviews, 20 ESW family interviews, and 10 ESW interviews to develop a set of recommendations that broke down the distinct stages of before, during, and after deployments. These recommendations are supported by the general themes and findings found in our results chapter of this report. While these recommendations are not specific initiatives, they are a loose framework that agencies can use to begin supporting families of ESWs in more practical ways. Our framework is shown below in Figure 17.

	Recommendation	Justification
Before	Collect contact information of families	A foundational step allowing agencies to proactively contact families
	Establish direct communication channels with families	Families understand where information will come from
	Provide information about deployments directly to family members	Reduces uncertainty and recognizes the impact deployments have on families
	Maintain formal communication with families throughout deployment	Reassures families of ESW safety
During	Explore feasible supports to reduce home burden	Reduces sacrifices families have to make to accommodate deployment
	Strengthen family, peer and community support networks	Family members can seek help from others in similar situations
After	Recognise and reinforce contributions of family members	Improves family morale and willingness to facilitate future deployments
	Improve awareness of family-focused mental health supports	Improves chances of both families and emergency service workers using preexisting mental health resources when needed

FIGURE 17: THE RECOMMENDATIONS AND JUSTIFICATIONS FOR PRACTICES AGENCIES CAN IMPLEMENT TO SUPPORT FAMILIES DURING DEPLOYMENTS

BEFORE DEPLOYMENTS

COLLECT CONTACT INFORMATION OF FAMILIES

To actively reach out to families, agencies should collect a list of contact information. During the agency interview process, agencies reported various levels of contact with families. Some agencies, predominantly those utilizing paid ESWs, had robust lists of emergency contact information but could not necessarily use this information for communications. Other agencies, particularly decentralized, volunteer-based organizations, reported that they had almost no ability to directly contact families.

The inability to contact family members directly hampers not only the following suggestions but also pre-existing initiatives designed to improve family well-being. During the family interview process, families reported not knowing about any family-centric resources, even for the agencies which had them. This lack of resources negatively impacts a family's ability to do their 'job' of staying at home during a deployment (Bakker and Demerouti, 2007). This lack of awareness provides further confirmation that the current level of outreach to families is not enough to effectively communicate these resources to them. Within the scope of deployment, timely outreach becomes even more important, as some resources will be best utilized before, during, or directly after a deployment. As such, our recommendation is that agencies build processes and systems to collect contact information of families which can be used for proactive messaging.

ESTABLISH DIRECT COMMUNICATION CHANNELS WITH FAMILIES

Once contact details of families are obtained, we recommend that agencies establish a direct communication channel with the family. This direct communication channel could be a variety of options such as WhatsApp, SMS, or other social media channels, depending on the preference of the agency. Once all the families are established within the channel, this is where the most recent information about a deployment would be located. This would help families feel secure that they will receive information from the agencies throughout a deployment and where to find that information.

If a direct communication channel is established, families are less likely to panic when trying to find more information. They will know that there are no new updates if they check the channel and nothing new is posted or messaged. This communication setup is great for families who may check more frequently and want to stay more involved with the deployment, while not overwhelming those who may not want to check that information as often. It would at least give the families the opportunity to see that information and the security of knowing what is happening on the deployment.

PROVIDE INFORMATION ABOUT DEPLOYMENTS DIRECTLY TO FAMILY MEMBERS

The information families receive about deployments is frequently unhelpful and incomplete. Currently, families rely on ESWs to communicate details such as the location, duration, and nature of a given incident, but ESWs frequently don't know this information or underestimate the importance of this information to their families. This lack of information leaves families in a difficult position with a high level of uncertainty about what, when, where, and why their ESW is being deployed. Because agencies do not currently provide information to families, their only recourse would be to seek information from news media, which is often similarly vague and panic-inducing. In a situation such as this, with a finite duration and a tendency for families to imagine the worst, research suggests that using information to reduce uncertainty will similarly reduce anxiety (Brashers, 2001).

We recommend that agencies communicate information about the deployment length and location to family members, as this information aids the family member in planning and preparing for the deployment. While we understand that agencies will not always have this information, when available, we recommend that it be communicated to families. This information could be within the communication channel that we recommend agencies establish, as directing all information through that one channel keeps it simpler for the families and the agency. This information would fill a gap that this and other studies have identified as a major source of stress for families (Lantz et al., 2024).

Additionally, for family members newer to the deployment process, broad information about the role deployed workers play in addressing an emergency with an emphasis on safety would be reassuring for family members who are nervous and unsure of what deployment entails. Families further mentioned that they worried about details not related to job duties, such as how their ESW was being fed, where they were sleeping, or how much rest they would have. This information need not be exhaustive or specific to the deployment at hand, but such an overview would reduce the anxiety for many families.

DURING DEPLOYMENTS

MAINTAIN FORMAL COMMUNICATION WITH FAMILIES THROUGHOUT DEPLOYMENT

We recommend that agencies provide contact information of someone who can verify the safety and wellbeing of the ESW. Several families expressed that they had lost contact with their ESW before, which led to an increase in stress and worry. Providing a number that families can contact in case of an emergency would reassure the family, especially in a deployment situation where cell service is limited. Some family members reported that such an arrangement was coordinated at a local level, but we recommend a more formal and universal approach to this problem.

We also recommend that agencies update families throughout the deployment process utilizing that same communication channel. Even something as simple as a few sentences describing the actions of the ESW throughout a shift would provide an emotional connection from the ESW to the families. Again, as mentioned in the previous section, this would reduce the uncertainty and anxiety for families associated with deployments.

EXPLORE FEASIBLE SUPPORTS TO REDUCE HOME BURDEN

Many family members that we spoke to serve as primary caregivers for their family while their partner is away on a deployment. Multiple individuals stated that deployments were an extremely difficult period in navigating their normal duties at home, as they need to manage childcare, pet care, and preparing food. These findings are also supported by previous studies, which suggest that family members take on increased duties at home to support ESWs (Lantz et al., 2024; Traynor et al., 2024). These individuals expressed that it may be helpful if the agencies provided practical or financial assistance to families such as paying for childcare so they can go to work, providing dog walking services, or even something as simple as providing meal vouchers or prepared meals to have after a long day.

Therefore, we recommend that agencies begin exploring how to provide either direct financial assistance or services to support caregivers in these areas. Whether financially feasible or not, on an agency-by-agency basis, it is worth taking a deeper look at. Although mental health supports are invaluable to family members,

this type of logistical support could help alleviate stressors that would otherwise worsen the mental health of family members.

STRENGTHEN FAMILY, PEER, AND COMMUNITY SUPPORT NETWORKS

Many workers that we interviewed reported that their peer support networks were a key factor in feeling supported and improving their overall mental health during deployments. Many family members also stated that the community events hosted by the local brigades and stations were incredibly useful in fostering a sense of community and social connection, especially for the family members. The literature also shows that peer support networks are valuable in promoting the overall mental health of family members (Donovan, 2022).

However, these peer support networks are tailored to the ESWs themselves, not to their family members. We recommend that agencies develop a network of family members capable of supporting each other. Just as families may not understand the experiences of ESWs, the reverse is true, and it is valuable for families to have access to supportive individuals with similar experiences. Several family members reported that they supported and were supported by their friends who were also families of ESWs, but for individuals without connections in the community, a formal network would be a powerful resource.

It is not just family member peer networks that deserve support. We also recommend that agencies provide resources to encourage dialogue within families and within communities. Through the interview process, families have expressed a range of communities that supported them during deployments, from extended family and friends to other members of the emergency service community. Strengthening these communities and relationships would provide more support to families and ESWs as well.

It is important to note that these networks should be developed prior to any deployment, but that the networks and communities could be relied upon during and after deployments.

AFTER DEPLOYMENTS

RECOGNIZE AND REINFORCE CONTRIBUTIONS OF FAMILY MEMBERS

Families of ESWs make significant sacrifices through the course of the deployment, with additional burdens taking a toll on these family members. While the families adopt this role with grace and community-mindedness, some reported that they felt their needs were subordinated to the needs and challenges of their ESW. This finding is also supported by previous research about families of ESWs (Hill et al., 2020). The burdens families take on at home enable ESWs to succeed on deployments, and any acknowledgement would have an outsized impact in motivating these family members.

Communicating directly with family members, in line with the suggestions above, would also serve to recognize family members. Communicating directly with families signals that agencies recognize the part that families play in enabling deployments, and that the details of deployments have real consequences for families back at home. Several families did not express an explicit desire to be lauded by agencies but did desire a more substantive relationship with them. Treating families as real stakeholders in the deployment process is one major way that agencies could recognize the contributions that families make to successful operations.

IMPROVE AWARENESS OF FAMILY-FOCUSED MENTAL HEALTH SUPPORTS

Families play a prominent role in mental health support for each other and their ESW. It is important for family members who are struggling with their mental health to have support available to them, as well as the ability to aid an ESW who is struggling. During the interview process, family members expressed that they felt responsible for the mental health of their ESW even while they were going through serious mental struggles themselves. Strengthening the mental health of the family member also reduces the stress on the ESW, and vice versa, as suggested by family systems theory (Helm, 2023). While some agencies have already started the process of educating families in mental health techniques and resources, we recommend that this should be supplemented by addressing the mental health challenges of families of ESWs specifically as supported by Fogarty et al. (2021).

The goal of this suggestion is to empower families to proactively address mental health struggles within their family. Families reported that the conclusion of a deployment was a particularly sensitive time in this respect, as both the ESW and the family began processing the events of the deployment. Thus, focusing on educational resources and providing counseling resources at this time would have an outsized impact on the mental health of ESWs and their families.

CONSIDERATIONS

When considering the implementation of these recommendations, scalability and feasibility are important qualities. Determining whether it is more appropriate to implement these suggestions at a central or local level might depend on the strategy or organizational structure of a particular agency. Family experiences during deployments are relatively similar across agencies, and collaboration between agencies could reduce costs and improve the scope of any potential support.

These recommendations should be tailored to the needs of each individual agency to more effectively support the families of ESWs in the long term. The recommendations provided here broadly represent the general themes, considering the results of this project and other background research, and showcases effective methods to support families during deployments. Specific details are not articulated and should be considered at the agency level.

CONCLUSION

The impact of deployments on families of emergency service workers is substantial and cumulative. Families are exposed to a variety of disruptions to their daily life when a family member is deployed. These disruptions can lead to mental health challenges and logistical concerns for the emergency service worker's family. We conducted interviews with agencies, families, and ESWs themselves to determine the severity of this impact and what supports are currently lacking in the sector. There is a gap between what the agencies believe they are providing to the families and how the families perceive this support.

Through the conversations we had with agencies and families, we found that currently existing resources are failing to reach families due to a lack of communication. Agencies reported not being able to reach families for a variety of reasons, and families reported not knowing about resources that were available to them. This result shows that family wellbeing initiatives need to improve communication with affected families to have a meaningful impact.

We further identified eight recommendations that agencies could implement to support families of emergency service workers during deployment. These recommendations were grounded in the challenges that families faced during the deployment process as well as informal supports they utilized. We believe that these recommendations are achievable and will make a meaningful difference to supporting families before, during, and after deployments. We also identified that agencies could collaborate to support families throughout the deployment process, as the needs of families do not change much across different agencies.

Families want to be stakeholders in the deployment process. This is supported by our interviews with them, as well as prior literature on families of ESWs in general. By acknowledging the role that families play in the deployment process, and dealing with them in a thoughtful manner, agencies can have a positive impact on families, such as the one shown in Figure 18, throughout the deployment process.

Future research could explore the efficacy of one or more of the suggestions or examine different ways to implement resources dedicated to meeting family needs. We believe that supporting families will make the emergency services sector stronger, and we hope to have contributed to the wellbeing of workers and their families with this project.



FIGURE 18: AN EXAMPLE OF A FAMILY WITH AN EMERGENCY SERVICE WORKER

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APPENDICES

APPENDIX A: QUESTIONS FOR AGENCY INTERVIEWS

1. How does family wellbeing fit within your agency's mental health strategy?
 - a. What does a deployment look like for your agency?
 - b. What kinds of deployments are most common?
 - c. Roughly how long do these deployments tend to last?
2. Can you give an example of a deployment for your agency?
3. What types of resources, support, or communication practices are available to families before or during deployments?
 - a. Are there formal programs, informal support, or partner-led initiatives?
 - b. How are families notified of these support strategies?
4. How does your agency maintain connections and communication with families during deployments?
 - a. Who in your organization is responsible for this (Wellbeing managers, Peer Networks, etc.)?
5. Following a deployment or large-scale emergency, what support is available to help families reintegrate into their daily lives?
 - a. Are there any specific strategies or practices that you find especially effective?
6. In your perspective, what are the biggest barriers to effectively supporting families during and after deployments?
 - a. What makes it difficult to maintain consistent support across the workforce?
 - b. Are there specific demographics (e.g., volunteers, rural families) for whom support is more limited?
7. How does your agency know whether current support for families is working or are effective?
 - a. Do you receive feedback from staff, families, or partners?
 - b. Are there any ways (formal or informal) that you access success?
8. In your opinion, what additional support or resources would make the biggest difference for families during deployments?
 - a. Are there any examples from other agencies or sectors that you think work well?
9. What would help your agency to strengthen family support around deployments? (e.g., funding, partnerships, training, coordination, research)
10. If you could design an ideal initiative to better support families, what would it include?

APPENDIX B: CONSENT FORM



Informed Consent Agreement for Participation in a Research Study

On behalf of the Emergency Services Foundation (ESF), students from Worcester Polytechnic Institute (WPI) are seeking your consent to interview you as part of a research study aimed at supporting families of emergency workers involved in an operational deployment.

Purpose of the Study

The purpose of this study is to determine the best support and communication practices that emergency service agencies can use during operational deployments to support families of deployed workers. If you consent, the student team will interview you about your past experiences with deployments as a family member.

Privacy Protection

The ESF values the privacy of every person and must comply with Victorian privacy law when collecting and managing all personal information. Conversations will be recorded for the purpose of review by the research team. Voice recordings may be used in a final presentation available to the public; however, no sensitive information will be used. In our final report, no identifying information will be used about any participants. If the research team wants to use a recording of your voice in any presentation, they will check with you to ensure that you approve.

Your Participation in this Research is Voluntary

If you choose to participate, you may terminate the conversation at any point, and you may choose not to answer any questions.

In signing below, you acknowledge your willingness to participate in the conversation, which should not continue longer than one hour. The conversation will take place virtually through Microsoft Teams.

If you have any further questions about the study, please contact our ESF IQP team at gr-mel-b25-esf@wpi.edu, our WPI faculty advisors at jsarkis@wpi.edu, or the WPI Institutional Review Board manager, Ruth McKeogh, at irb@wpi.edu

I understand the purpose of this study and agree to participate in this conversation.

NAME: _____

PHONE: _____

EMAIL: _____

SIGNATURE: _____ **DATE:** _____

APPENDIX C: QUESTIONS FOR FAMILY INTERVIEWS

1. Can you tell us a bit about your family and how emergency service work fits into your daily life?
2. Thinking about times when your family member has been deployed or away on major incidents – what are some of the typical changes that happen for your family?
3. When you first find out a deployment is approaching, what sorts of things help your family to prepare?
4. How does your family usually organize things at home when your partner is away? (e.g., routines, childcare, or staying in touch)
5. Does your partner's agency share any information or resources before deployments?
 - a. How useful are these, and what is missing that would make your family feel better prepared?
6. During deployments, what sorts of things have you found helpful in staying connected and reassured?
7. Some families have contact with their partner's organization while they are away. Has that been part of your experience? If so, what is helpful? If not, what else might be useful?
8. When your partner returns home, how do you usually find the first few weeks to be?
 - a. How did the deployment affect your relationship with your family?
9. What helps your family get back into your usual daily life and routines?
10. Following a deployment, do you talk about what happened when they get back?
11. Over time, what have you found helps make the deployment process easier to manage?
12. Is there anything that you wish existed to help families prepare for and manage deployments?
13. What advice would you give to other families who are going through the deployment process for the first time?
14. Is there anything else you would like to add about what helps your family not just cope, but thrive in the deployment process?

APPENDIX D: QUESTIONS FOR ESW INTERVIEWS

1. To start, can you tell us a bit about yourself and your family situation?
 - a. What is your role in emergency services?
 - b. Who is at home during deployments (partner, children, extended family)?
2. Thinking about times when you have been deployed or away on major incidents – how would you describe what that period is like for your family?
3. When you first find out a deployment is approaching, what sorts of things help your family to prepare?
4. How does your family usually organize things at home when you are away? (e.g., routines, childcare, or staying in touch)
5. Does your agency share any information or resources before deployments with your family?
 - a. How are these resources provided to you and your family?
 - b. How helpful do you and your family find them?
6. During deployments, what sorts of things have you found helpful in staying connected and reassured?
7. Does your family have people, routines, or supports that they rely on when you are away?
8. Some families have contact with their partner's organization while they are away. Has that been part of your family's experience? If so, what is helpful? If not, what else might be useful?
9. When you return home, how do you usually find the first few weeks to be?
 - a. How did the deployment affect your relationship with your family?
10. After you return, do you and your family talk about the deployment?
11. What helps your family get back into your usual daily life and routines?
12. Over time, do you feel your family has become better adjusted to deployments?
13. Is there anything that you wish existed to help families prepare for and manage deployments?
14. What advice would you give to other families who are going through the deployment process for the first time?
15. Is there anything else you would like to add about what helps your family not just cope, but thrive in the deployment process?