

Emergency and First Responders and Alcohol Abuse

The relationship between emergency and first responders and alcohol abuse is a tragically close one. Many use alcohol as a coping mechanism for traumatic experiences, to encourage camaraderie, and for pain.

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Why Are Emergency Responders Vulnerable to Alcohol Abuse?


Tragically, there is a serious problem of emergency and first responders and alcohol abuse. Exposure to traumatic experiences, while a part of the daily jobs of police, firefighters, and EMTs, can lead to the development of multiple behavioral health disorders. Confronting serious bodily injury, violence, and loss on a daily basis can leave many emergency personnel feeling isolated and unbalanced. An estimated 30% of first responders develop conditions like [depression](#), post-traumatic stress disorder (PTSD), and [suicidal thoughts](#), compared to 20% of the general population. Among these behavioral disorders, many first responders suffer from an Alcohol Use Disorder (also known as an alcohol addiction).

Alcohol consumption (including heavy drinking and [binge drinking](#)) among first responders is higher than that of the general population. In addition to coping with the solemn events of their jobs, emergency responders may drink for a number of other reasons not as grave. For instance, when surveyed, firefighters listed maintaining a difficult schedule, camaraderie, peer support, and stress management as reasons for drinking.

Many first responders engage in social drinking and never progress to alcohol dependence. However, for those that do, the weight of guilt and shame can often lead to total devastation in their personal and professional lives.

Rates of Alcohol Abuse Among Emergency Responders

Rates of alcohol abuse vary among police officers, firefighters, and EMTs, and distinctions exist between men and women and career civil servants and volunteers as well. Past month heavy or binge drinking was reported by about half of male firefighters; 9% reported driving under the influence. Conversely, almost 89% of female firefighters reported past month alcohol consumption. Another study revealed that over 39% of female firefighters binge drank, compared to less than 15% among the general population. Volunteer firefighters, on the other hand, reported past month alcohol use at a rate of 70%; 45% reported binge drinking.



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Among other emergency responders, a study of police officers showed that female drinking rates were likewise higher than males (16% and 11% respectively). High risk of alcohol and drug use was observed in as much as 40% of EMTs and paramedics.

Additionally, first responders are at an even greater risk of developing an alcohol addiction following “critical incidents” such as witnessing death (including the deaths of citizens and fellow personnel). One study showed that alcohol use increased incrementally for the first 8 days after an incident and didn’t return to normal for another 8 months. After Hurricane Katrina, for example, alcohol use among police officers increased significantly; another study estimated the increase measured from 2 to 7 drinks per day.

Getting Help for a Functioning Alcoholic

The link between substance abuse, depression, and suicide attempts is vital in understanding and treating addiction in the first responder workforce. Many first responders carry an enormous weight of responsibility in their jobs, all of which enforce zero tolerance policies regarding dangerous drinking habits. Subsequently, a majority of these individuals will “suffer in silence,” refusing to seek help for their addiction due to stigma and shame.

Alcohol Abuse

Alcohol abuse is when your drinking leads to problems, but not physical addiction.

Causes, incidence, and risk factors

There is no known cause of alcohol abuse or alcoholism.

Research suggests that certain genes may increase the risk of alcoholism, but which genes and how they work are not known.

How much you drink can influence your chances of becoming dependent.

Those at risk for developing alcoholism include:

- Men who have 15 or more drinks a week.
- Women who have 12 or more drinks a week.
- Anyone who has five or more drinks per occasion at least once a week.
- One drink is defined as a 12-ounce bottle of beer, a 5-ounce glass of wine, or a 1 1/2-ounce shot of liquor.
- You have an increased risk for alcohol abuse and dependence if you have a parent with alcoholism.

Signs and Symptoms of Alcohol Abuse:

- You continue to drink, even when health, work, or family are being harmed.
- Become violent when drinking.
- Are not able to control drinking (being unable to stop or reduce alcohol intake).
- Make excuses to drink.
- Miss work or school, or have a decrease in performance because of drinking.
- Stop taking part in activities because of alcohol.
- Need to use alcohol on most days to get through the day.
- Try to hide alcohol use.
- Memory lapses after heavy drinking.
- Needing more and more alcohol to feel "drunk".
- Alcohol withdrawal symptoms when you haven't had a drink for a while.

The following questions are used by **the National Institute on Alcohol Abuse and Alcoholism** to screen for alcohol abuse or dependence:

- Do you ever drive when you have been drinking?
- Do you have to drink more than before to get drunk or feel the desired effect?
- Have you felt that you should cut down on your drinking?
- Have you ever had any blackouts after drinking?
- Have you ever missed work or lost a job because of drinking?
- Is someone in your family worried about your drinking?

RESOURCES FOR ALCOHOL RELATED ISSUES

If you or somebody close to you is feeling the effects of alcohol abuse, there are plenty of resources available.

Centerstone 800-681-7444

Metro Government EAP 877-871-6274

AFL-CIO EAP: Confidential Contact Numbers
615-269-0980 (Nashville)
800-752-4929 (TN Only)

National Council on Alcoholism and Drug Dependence, Inc.

www.ncadd.org

National Institute on Alcohol Abuse and Alcoholism

www.niaaa.nih.gov

AA Nashville: (615)831-1050, or 800-559-2252

www.aanashville.org