



# Checking in: A Behavioral Health Size-Up

## Episode 2: Leadership

### **Jonathan Abramson**

I went to an overdose call. When you're dealing with drugs and stuff, the police department comes with you. I went to school with a guy named Ryan. He became the sheriff out here. He walked in the house. The girl's mother who had just overdosed, her daughter overdosed. She ended up dying. Ryan went into the house to make sure everything's clear before the medics and the fire department go in and the mom came at him with the a gun and shot him in the face. I had four and a half hours left on my shift. I went straight home. I didn't even hang out. I just told him I had to go. And then a week later I went to a stabbing call on an Indian reservation and this gentleman had been stabbed all the way through with, it's not quite a sword, but pretty close to it.

There's six of us taking our two-minute rotations on CPR and stuff. Life flight was there, so we had a doctor and everything there. His wife was over here screaming on the other side of the caution tape. Later on, that night, I didn't sleep. All I could hear was her screaming. I had this ripping headache. My heart rate was just really high. I ended up taking a really hot shower and relaxing enough where I could at least just think straight. And all I could think about was that for the next two weeks I didn't sleep unless I was so exhausted that I'd literally just pass out standing there or sitting there. I couldn't just lay down and go to sleep because anytime I did, all I heard was screaming and the sound of air coming out of his lungs every time he did a chest compression. I left the fire department.

**Jonathan Abramson**

I decided I couldn't do it any longer and I turned in my gear. Do I regret that decision? Yeah, I do. I wish I could have stuck with it, but there was, I wanted to do the firefighter part, but they don't do that anymore. If you're a firefighter, you have to be a medic as well. That wasn't my thing. I couldn't handle it. I've seen a lot of people die in my hands and that didn't affect me as much as trying to save somebody's life and it not working. I still have effects from it today. Not very many people I was open about until I started getting better. I was worried about myself telling somebody and somebody else judging me. If you guys ever have PTSD or depression or anything like that, talk to somebody. Find that person that you can talk to, talk to 'em until you're fricking blue in the face, because if you don't, you're going to end up hurting yourself or somebody else. I hurt a lot of people along the way. I ruined a lot of relationships and a lot of friendships don't go there.

**Craig Luecke**

*Checking In: A Behavioral Health Size-Up.* This podcast is brought to you by the National Fallen Firefighters Foundation with funding from the U.S. Department of Homeland Security, Federal Emergency Management Agency, and the Fire Prevention and Safety Award program. For more information about the National Fallen Firefighters Foundation, please visit [everyonegoeshome.org](http://everyonegoeshome.org) or [firehero.org](http://firehero.org). If you or someone you know is in need of immediate support, please call the National Suicide Prevention Lifeline at 1-800-273-TALK. That's 1 800-273- 8255.

Welcome everyone to episode two of our podcast, *Checking In: A Behavioral Health Size-Up*. I am your host for the series, Craig Luecke. Thank you so much for stopping by and checking us out. The firefighter you heard at the beginning of this episode; his name is Jonathan Abramson from Oregon. We appreciate him opening up and telling his story with all of us. You can find him at [facebook.com/jonathan.abramson](https://facebook.com/jonathan.abramson) and he's very open to talking to each and every one of you. On this episode, we will focus on leadership when dealing with behavioral health. And joining us again for the round table of experts, we have Patricia Watson with the National Center for Post-Traumatic Stress Disorder, and she's a former military psychologist. Vickie Taylor, the director of Prince William County, Virginia Public Safety Resilience Program, Dr. Richard Gist, who is the deputy director of the Kansas City Fire Department and also the principal assistant to the Fire Chief Frank Leto, a captain with the New York City Fire Department and Deputy Director of the Counseling Services Unit. And Victor Stagnaro, Director of Fire Service Programs with the National Fallen Firefighters Foundation. Frank, I'd like to start with you.

**Craig Luecke**

You've been with the FDNY for over 33 years. What in your opinion is a leader?

**Frank Leto**

Well, I think about leadership in the fire service or leadership in FDNY, is when I walked in the door 33 years ago, is the lieutenant pointed me in direction of a firefighter and said, this is the senior man. This is the person that you are going to emulate. This is the person that you're going to follow around, watch what he does or he or she does and do the same. I mean, we rarely dealt with the lieutenant when we had a fire or emergency. The captain was when we got in trouble. It was those informal leaders at the firehouse that were really the leaders of the fire department.

**Craig Luecke**

Vickie not the types of guys, how do you relate leadership to PTSD and stress injury in the workplace?

**Vickie Taylor**

I think one of the most important pieces about leadership in terms of the stress injuries that people can accumulate over a career has to do with leaders that create an organization where the right kind of conversations can occur. So it might be that it is the simple thing that Frank was talking about. Here's the senior guy, follow him around, see what he does, watch what he does, listen, learn. It may be that you come back from a call that in anybody's book would seem routine, but you take the time to say timeout, what did we do? How well did we do it? What are things that we would repeat? Are there things we should improve? So, we're not only creating the atmosphere where it's safe to talk, but that we're continually trying to improve what we do without the fear of punishment or this is some sort of critique that says who did something wrong, but more how do we get better as a team? And creating that climate where those conversations can happen is critical in a leadership role. So, when we ask firefighters who are candidates for company officers, think about a great officer you had. We consistently get two answers. They cared about me as a whole person, and the other thing was they had the ability to bring out the best in me and help me function as part of a team. They pushed me for excellence, but it was excellence as part of a team, not at me as an individual.

**Victor Stagnaro**

And I think that's a terrific point. You need to keep in mind that they did it in such a way that fits the fire service culture. Sometimes we think about making people feel valuable and people will begin to roll their eyes and say, do we need to sit around in a circle and hold hands? Some of the most valuable leaders that I worked with were not the types of guys I wanted to date my sister. I knew they cared about me. They would reach over; they would stop before we'd go into a burning building, and they made sure I had my gear on. Just simple things and they were tough. They're not coddling, gentle people. They fit the culture of the tough work that we do, but they still made you feel valuable. They still made you feel like they cared for you, and they wanted you to make sure you got home at the end of a shift.

**Craig Luecke**

Patricia, you've done a lot of work with the military. What do they teach their officers on how to recognize PTSD and stress injury?

**Patricia Watson**

In the military there was so an acknowledgement that you cannot prevent PTSD. We're not trying to give people stress management and courses on resilience ahead of time and think that that's going to prevent PTSD. What we're trying to do is give them those things that could be tools, but also constantly be checking on people because resilience is not a trait, it's not something that's there all the time. It ebbs and flows depending on the circumstances of a person's life. So it's important to have people around who can be aware, pay attention, know that people go in and out of resilience all the way up to being injured and then I'll know the signs of that, pay attention, check in with them, and be able to provide support in the moment in a culturally correct way that makes sense to that person. Also, bridge to higher levels of care.

**Patricia Watson**

Know about the resources that you can turn to and create the climate where people are just taking this as part of the job. Look, it's going to happen on this job that people have PTSD, it happens on this job. Everyone knows it. We are now in a world where people can Google PTSD and know that it's going to happen in certain jobs more than others. So let's be matter of fact about it and put in place supports for people that might either help prevent or might catch them early on or might bridge them to higher levels of care when they need it. So a good leader is going to be aware of all those things and know how to orchestrate like a good conductor would when to intervene, how to intervene in a culturally appropriate way and when to let people distract themselves because that's good in high stress. And then when to maybe go, okay, now that we're not in that high stress mode, we might need to approach this differently. Don't get stuck in one form of dealing with what's happening. Let's figure out other ways that might be helpful at different times.

**Craig Luecke**

Frank, in the FDNY, what do you teach the company officer on what to look for and what can they do while on the job to check on their people?

**Frank Leto**

Since 9/11, our programs have changed dramatically. Education is a real important part of our behavioral health program, so we are talking about that in rookie school, probie school, as we call it in New York. We are talking about that as officers get promoted and we're talking about it in the stations. We, have educational teams that'll go out and talk about different issues, and it could be anything from depression or having a child with autism, just getting stuff onto the table. Again, giving our officers another level of education about signs and symptoms, resources that are available, giving officers tools to work with. And in the past, they didn't have those tools. Good company officers went out to look for them, but they weren't there readily available. So, what we try to do is have it there in their toolbox. I mean, as a company officer myself, I always thought of the men and women that were riding in that truck. Not only them, but I had their families with them. I had their wives, I had their husbands, I had their kids, and I wanted them to bring them home. Not only physically safe, but emotionally as well.

**Victor Stagnaro**

I think one of the great values to that is the identification of stress injuries and to think of stress injuries in the sense just as you would you fix a broken arm, splint a broken leg. And what FDNY has done is they've created this identification of there's also stressors that create injuries and sometimes it's not job related. Sometimes it's something that's going on at home, whether it's problems with your children, marriage, whatever it might be, but identifying those stress injuries and then having tools to help that person get through that.

**Craig Luecke**

Vickie, as a company or unit officer, how would I know one of the members of my team has suffered a stress injury? What do I look for? How do I check on my coworkers?

**Vickie Taylor**

The first thing is you start the first day, the person comes to work with you and you get to know them because everybody's different. And we need to know what a person's baseline is. And that way as you get to know that person, then you are much more sensitive to, Frank is acting differently today. I should pay attention to that. If Frank's acting differently at the next shift, it might be a good time to check in and say, "Hey, I noticed that you're quieter than usual. Is everything going okay? Is there anything that I can do?" So that it's very matter of fact, and it's simply knowing people well enough and being sensitive enough to early changes so that we intervene quickly and early in a very matter of fact way without the stigma, the shaming that people sometimes feel to say, "well, actually, now that you mention it, I do have something bugging me." That we make that okay. And that is the role modeling that Patricia talked about. Is that the leader makes that okay by modeling that it's okay, we talk about it, we put it on the table, we figure out what are the resources, what are the resources that are going to fit for you? We need a whole menu of things for people because one size doesn't fit everybody.

**Craig Luecke**

Patricia, as a company officer, I hear all that, but how do I know when to pry into someone's life? My experience as a firefighter for 36 years, it is rare for someone to just come into work and spill out what's going on at home. How do I approach the situation?

**Patricia Watson**

So, I would say two things. One, you want to be paying attention to two things. One, either some incident that you know about in their life and that gives you an entree, and it doesn't have to be on the job. It could be something happened on the job, or it could be something that happened at home. Number two, it doesn't have to look like a critical incident. It could be a typical incident on the job, but this person felt like they didn't do what they should have done. So, we think when people go into more intensive stress, we're not wanting people to walk around asking people how they're doing every day. What you're looking for are more persistent changes in a person's behavior. You're looking over time, you start gathering data. Your entree. If you just go up to a person one day and say, how are you doing?

The odds are they're going to say fine. If you watch 'em over time and you start to notice or people come up to you and say, this person's not characteristically this quiet or this isolated, or this person usually is quiet and now they're blowing up at everything, then you start to gather information over time so that if you ask them, Hey, I've been hearing stories or I've been noticing that you're different. You're different than you used to be. If they then say, no, I'm fine. Then you have data. You can say to them, no, actually let me tell you what I've seen or what other people have told me. That's why I'm asking you because I hear you saying you're fine, but I'm seeing something differently. It's not matching with what I'm seeing or what I'm hearing. Then you've got a little more to work with a person.

They might not be as resistant, but if you've set up the culture as Vickie said from the start, that it's a natural thing to say, "Hey, we talk about these things for two reasons. One, I care about you. Two, stress affects your functioning on the job, and we need to worry about other people as well." Then it's just a natural part of a conversation. It's not all of a sudden out of the blue, oh my God, he's asking me what's wrong with me. But you're going to be wanting to look for things that are where a person's behavior becomes more out of control, more persistent. They're no longer themselves, and there's a whole list of things. It could have to do with sleep. It could have to do with their expression of emotions. It could have to do with changes in moral values. Maybe they're becoming more addictive towards something or other in their life. Maybe they're having frequent kind of nightmares or trouble sleeping, but things that are more persistent and less in their control is what you're looking for.

**Craig Luecke**

Okay, now Frank, I'm a company officer and I have a member of my team and I see something's going on and we've determined that this individual has mixed feelings about EAP, employee assistance program. What do I do next?

**Frank Leto**

Well, for organizations that do not have built in programs like most or EAPs that are not trusted, we have to look in the community. There are resources in the community that are readily available. There are resources in the community that our insurance will pay for, and a proactive company officer is going to going to take the bull by the horns and before he speaks to this individual is going to find those resources and be able to deliver that to the member. But it is a process. It's not going to happen overnight. We're talking about trust that has to be developed and trust is something that a company officer is going to have to establish not only in the station, but on the fire ground.

**Craig Luecke**

Victor, at what point are we crossing the line and getting in trouble as a company officer for prying too far into someone's business?

**Victor Stagnaro**

Well, and I think that is a real issue, and there's the art of leadership and you need to know that. There's the management side of it, and there's a difference between managing and leading, and they both have an art part of it, but I think that's the art of leadership is you need to understand when you're crossing the line. You have to have some level of loyalty to the organization. But at the same time, you got to care for your people. And that's actually the organization's asking you of that. And that may be not only just in a career department setting but think about it even in a volunteer setting where you may have an incident and those people disperse after a call, they go back home. So, the ways in which you do that, you have to be very creative in order to be able to get that information so you can care for those people. And I think Vickie probably has a lot more experience with that question, but I think that there's a lot of creativity that needs to go with that.

**Frank Leto**

There's also a liability of turning a blind eye. I mean, if you are recognizing it, there may be other members of that station or that department that are recognizing it, and as a company officer, it's your responsibility to address it. So there may be liability to address it, but there's also liability not to.



**Vickie Taylor**

But you can talk to a person also without prying. So, you're looking at the major intensive changes in behavior and you say to the person, I have noticed. Sometimes the best officers I know say, I'm not trying to pry into your personal business and you don't need to tell me what's going on, but here's what I notice about your behavior. We need to make a plan so that you can get some support. Let's talk that through. And you may never know what the person is struggling with, and you don't have to know. What you have to know is how to talk about what you've observed and then say, what is it that we need here? What level of assistance do we need?

**Patricia Watson**

We think one of the reasons we developed the model, the stress first aid model the way we did is that it's kind of a broad framework of what we found in the research literature and in practice that people tend to need when they're in difficult situations. So a company officer or a leader of sorts could organize a conversation around that, okay, I've noticed this behavior. I'm telling you this because, and it could be one of two reasons I care about you or because what you're doing is going to have an impact on the job. Okay, so you lay that out. Now based on that, what you need might fall into one of these five categories. Maybe that person needs to feel more safe psychologically, somehow or another. Maybe they need calming in some way or another because they're just keyed up all the time.

Maybe they need to be connected to the right forms of support. Maybe they need to learn new skills to be more competent to handle what it is they're going through at that moment. So they need some retraining or skill building, or maybe it's just that they need to have more confidence or hope in one form or another, and that's going to be different for each and every person. So a good, I think company commander could organize the entire conversation knowing that those are kind of basic needs that people have could organize a conversation around present future. They focus on the behavior, and then what do we need to do to get you these needs met going into the future? One of my favorite examples where a leader really stepped up and took this seriously was a company that had a veteran who came in who was fairly new, but a competent firefighter.

**Patricia Watson**

But they had a trigger where they drove over a bridge on the way to a fire, and it triggered them back to something that had happened in combat setting where there was a bomb underneath the bridge. So from that point onward, they started avoiding going over that bridge. Okay, so they were obviously it was having a big effect on their job. Now, the company commander could have at that point, fired that person and said, you can't operate. You're not functioning, so we're going to release you. Instead, what they did, they worked within the department to do what we call systematic desensitization. But it's basically having somebody support you to get closer and closer to your goal. Have somebody gave him music to listen to, had somebody sitting with them. So he practiced going over the bridge. This is a veteran who now I think their future trajectory, the way they're going to move through life is going to be very, very different than if they had been fired or just sent mental health because now they got support around them on the job all the time. Integrated, supported every day, not just once a week with a mental health practitioner. So I like that example of how a leader could really change the course of a person's life within the job.

**Craig Luecke**

What do you say to a department chief or a county or a city that has maybe one or two fire stations hardly any revenue, a tough budget? What is your recommendation to those departments?

**Richard Gist**

Partnerships, you can choose to go it alone if you're one of those organizations, but you don't have, you have mutual aid packs, you have automatic aid packs. This is the same basic concept. Partnerships.

**Frank Leto**

Look for low hanging fruit. Stress first aid training is available and free. So how about that department that has 20 members all being educated in stress first aid? So that doesn't cost anything. Let's look for local resources out there. Let's lift the stigma. Let's start talking about these issues. PTSD is something that's going to happen in the fire service at a higher level. Let's let people know that. Let's let them know when they walk in the door, this may occur, and these are the things that we can do to support you if it does happen. I think saying that there's not a budget for it is an excuse. I think you can do most of this for not increasing your budget at all.

**Craig Luecke**

Thank you, Frank. We are out of time for this episode of *Checking In*, focusing in on leadership. I hope you found this informative, and you will continue to listen to all of our episodes. And a special thank you to our panel with Patricia Watson, Vickie Taylor, Richard Gist, Frank Leto, and Victor Stagnaro. Please take time to subscribe, like comment on the podcast over on iTunes or your favorite podcast audio app by searching for checking in, share it across social media with your friends, family, and coworkers, because everyone can benefit from the series. And we sincerely hope everyone goes home. If you have any questions or comments regarding the program, you can email [info@everyonegoeshome.com](mailto:info@everyonegoeshome.com). And please remember, if you or someone you know is in need of immediate support, please call the National Suicide Prevention Lifeline at 1-800-273-TALK. That's 1-800-273-8255. I have been your host, Craig Luecke. Will see you on the next checking in. Stay safe, everyone.