



Mental Health Education Programs for Firefighters: Program Differences, Preferences, and Barriers

We wanted to know: How do different mental health education programs for firefighters compare to each other, and which training preferences and barriers do firefighters have?



What is the problem?

Multiple mental health and resiliency programs are offered to help firefighters deal with critical incidents and mental health. Programs cost time and money, and can have different content. Firefighters have said it can be hard to know how to choose between different programs. Firefighters determine which program is best for their needs and priorities.

How did the team study the problem?

We interviewed a total of 14 people (10 full-time firefighters, 3 volunteer firefighters, and 2 fire organization staff members), across Canada about their experiences with different mental health education programs: Resilient Minds (RM), Road to Mental Readiness (R2MR), and Before Operational Stress (BOS). We asked them about their perceptions on course content, program characteristics (e.g., teaching methods, learning tools/resources), and preferences. We summarized their perceptions and experiences.

What did the team find?

The participants felt that RM, R2MR, and BOS were all useful, and had some similar teaching methods, goals, and skills. However, they believed each course has distinctive features and main focuses. RM is taught by a peer and focuses on teaching practical mental health skills for yourself, peers, and citizens mainly through group activities and role-playing teaching methods. R2MR focuses on recognizing mental health issues among yourself and peers and creating a common language to talk about it, mainly through lecture-style teaching. BOS is taught by a mental health professional and focuses on how stress affects the brain, in a theoretical lecture-style approach. Most firefighters (70%) who took RM and a different course preferred RM because it was “designed by firefighters for firefighters” and taught them relevant skills in an interactive and engaging way. Firefighters identified cost as the largest barrier to mental health training programs. Firefighters thought in-person training was better, but virtual training is more convenient. Many stated that ongoing training was needed.

How can this research be used?

Fire services can use these comparisons when considering what are feasible and best match departmental or individual needs. Providers should be more explicit about the information needed to make choices program content, cost, rationale, supporting evidence, time commitment, learning approaches, delivery model. Ensuring the health benefits are maintained requires decisions about how to layer or refresh different programs over time.

Cautions

The study's findings are based on participant perceptions of the programs and did not measure changes in mental well-being. Additionally, different versions of programs exist, which may affect experiences.

Reference: Stretton SM, MacDermid JC, Lomotan M, Killip SC. (2025). [A comparison of firefighter mental health education programs: A descriptive thematic analysis of firefighter experiences](https://doi.org/10.1016/j.comppsy.2024.152547). *Comprehensive Psychiatry*, 136. <https://doi.org/10.1016/j.comppsy.2024.152547>

Funding Source: This project was supported by the Canadian Institutes for Health Research (FRN: 162539 and 165070).