

Mark McDonough

Burlington Fire Department

Lieutenant

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Testimony for Senate Bill S.243

In 2017 a handful of members from the Burlington Fire Department attended a lecture at Vermont Technical College that discussed the Peer Support Program the International Association of Firefighters created. What is supposed to be a 16 hour class presented over the course of two day, was condensed down to a 3 hour synopsis of how peers can help peers in their times of need. It was the first time I had heard another firefighter openly talk about seeking and needing help after traumatic events or when the stressors of the job and/or life become too much to bear. It was a transcendent moment for me as I believed there was a critical need to provide mental health services to our members, but I was unaware of what resources existed to make this a reality and I had been brought up to think that asking for help was not okay.

For the remainder of 2017 and into 2018 a group of Burlington Firefighters worked to educate themselves, our chief, and the Human Resource department for the City of Burlington on what Peer Support is and what a behavioral health program should look like. During this time four of our members attended that 16 hour IAFF Peer Support Training providing us with the knowledge of how to truly support each other in our times of need. It also gave us an opportunity to network with other firefighters whose departments had robust behavioral health programs in place which

provided us with a framework to build off of. And possibly the most important thing to happen during this period was when a coworker asked me if we were creating a behavioral health program. I was skeptical to answer him as he is the stereotypical big, tall, tough firefighter. Luckily I did share with him that we were working to create a program and provide resources to our members, because he handed me a business card for a mental health clinician and said, “Call her, she saved my life and you need her to be a part of your team.” That chance encounter was how we connected with Beth Jacobs and she became our Department’s clinician.

On September 11, 2018 the Burlington Fire Department’s Behavioral Health Program went live. We met with every member of the Department and educated them on the resources that were now available to them: Peer Support, a Department Clinician, Department Clergy, education on mental health subjects, suicide prevention, and a wellness program. Leading up to this day we discussed how the program would be received and wondered if any of our members would utilize the resources available. That question was immediately answered when one of our members approached us at the end of our presentation. He shared that he was tired of having the image of the child he could not save seared into his memory, and through tears asked how soon he could make an appointment to meet with our clinician. A couple of weeks later a member called the Peer Support Team in crisis not knowing who to turn to or what to do. Then a critical event occurred in the city and our team responded and provided support. What soon occurred to me was the need and desire for peer support and mental health services had always been there, our members just didn’t know what to ask for or think that it was okay to do so. Now they have someone to call and ask for help and, most importantly, they are understanding that it is okay to do so. In the first ten months of the Peer Support Teams existence we were utilized at least 45

different times and our department clinician, Beth Jacobs, has worked or is still working with 17% of the department.

As it became more obvious how much our members were utilizing these new resources I began to feel a strong sense of guilt. Why is it that the members of the Burlington Fire Department have rapid and easy access to these resources, but the vast majority of the emergency service providers in Vermont do not? In a state that seems to pride itself on the equity of services provided to its citizens this does not seem right. In a state that relies so heavily on the incredible generosity of our volunteer emergency service providers do we not have an obligation to provide them with mental health resources? They are exposed to the same traumatic calls and the same stressors as the members of the Burlington Fire Department. Why is it that they don't have a Peer Support Team to call or a clinician to work with?

The creation of the Emergency Service Provider Wellness Commission would allow for these questions to be answered and recommendations made on how to create and provide these resources to all of Vermont's emergency service providers. I strongly urge you to support S.243 and in doing so support all of Vermont's emergency service providers.