



WHAT TO KNOW ABOUT

First Responder PTSD and Mental Health Groups

These groups serve police, firefighters, paramedics, EMTs, search and rescue, and other emergency workers who face routine exposure to potentially traumatic events. First responders have markedly elevated rates of PTSD, depression, substance use, and burnout, driven by cumulative occupational trauma and by professional cultures that valorized toughness and treated help-seeking as weakness. That cultural context means support has to be designed for it: delivered in ways that are credible within emergency services, ideally by or in partnership with people who have done the job. They come in two forms: peer support from trained responders, and clinician-led trauma therapy groups.

WHO IT'S FOR, AND WHO IT'S NOT

- A fit for those more likely to engage with peer or profession-specific help.
- Confidentiality protections matter and are worth asking about up front.
- Acute crisis or suicidal ideation needs immediate crisis resources too.

What it's for

Active and retired first responders, and sometimes their families.

For PTSD, cumulative trauma, burnout, substance use, and moral injury.

Peer support, or clinician-led CPT, Prolonged Exposure, and MBSR groups.

WHAT TO EXPECT

1 Peer meetings follow a confidential discussion format within agency programs.

2 Clinical groups are structured, often 12 to 16 sessions with homework.

3 Often via EAPs, union programs, or specialty first responder clinics.

Psychological interventions help, though the research base is still growing.

- A meta-analysis of 15 studies found interventions produced **significant PTSD reductions** (SMD 0.86) plus gains in depression and anxiety.¹
- A meta-analysis of 22 trials found group trauma-focused therapy produced **large PTSD reductions** across occupational and other trauma.²

MAKING THE MOST OF IT

Credibility from inside. Peers who've run the same calls carry trust outsiders can't.

A collective act. Seeking help together lowers the stigma of doing it alone.

The culture is understood. The dark humor and stoicism need no explaining.

QUESTIONS TO ASK BEFORE YOU JOIN

- 1** Is it peer support or a clinician-led trauma therapy group?
- 2** What are the confidentiality protections, and any career implications?
- 3** Are facilitators familiar with emergency services culture?

Ready to find a group?

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If you're in crisis, call or text 988.

The Group Guide is a directory, not a clinic. This handout is general education, not medical or mental health advice. Listings are written by group leaders and are not endorsements. Confirm details, cost, and fit with any group you contact. Sources on page 2.



Sources

First Responder PTSD and Mental Health Groups · references keyed to the numbers on page 1.

- 1 Alshahrani, K. M., Johnson, J., Prudenzi, A., & O'Connor, D. B. The effectiveness of psychological interventions for reducing PTSD and psychological distress in first responders: a systematic review and meta-analysis. PLOS ONE (2022), 17(8), Article e0272732.
- 2 Schwartze, D., Barkowski, S., Strauss, B., Knaevelsrud, C., & Rosendahl, J. Efficacy of group psychotherapy for posttraumatic stress disorder: systematic review and meta-analysis of randomized controlled trials. Psychotherapy Research (2019), 29(4), 415–431.

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