Prevalence and correlates of suicidal ideation in Korean Firefighters: a nationwide study

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Abstract

Background: It is generally known that firefighters are at the increased risk of suicide. However, the prevalence or correlates of suicidal ideation in firefighters have not been thoroughly explained to date. The aim of this study was to measure the 1-year prevalence of suicidal ideation in firefighters and to investigate the correlates of recent suicidal ideation among the demographic, occupational and clinical characteristics. Method: A web-based survey was conducted using a self-reported questionnaire. A total of 45,698 Korean firefighters were included for analysis. Prevalence of suicidal ideation in the past year was calculated and its correlates were elucidated using a multivariable logistic regression analysis. Results: The 1-year prevalence of suicidal ideation was 10.66% in Korean firefighters. Recent traumatic experience, high levels of occupational stress from physical work environment and emotional labor, and the officer as a present job were significant correlates of suicidal ideation in the previous year, even after controlling the effect of PTSD and depressive symptoms. With respect to demographic factors, female gender, and divorced/separated/widowed marital status were associated with suicidal ideation in the previous year in firefighters. Conclusions: More firefighters experienced recent suicidal ideation than the general population and there were risk factors related to the role of firefighters in Korea. Intervention and policies that manage these risk factors are necessary for the prevention of suicide in firefighters.

Background

Suicide and associated behaviors are major public mental health issues around the worlds. Suicide is one of the leading causes of death worldwide for adult individuals; South Korea, in particular, is a country with a markedly high rate of suicide for the past several years [1]. One way to prevent suicide is to identify the risk factors associated with increased
suicidal behaviors including ideation, plan, and attempt, since they have been found to be predictors for completed suicide [2-4]. Especially, suicidal ideation is strongly associated with a variety of psychological difficulties and subsequent suicide attempts [5, 6]. Therefore, factual survey and investigation of suicidal ideation of various populations are needed to prevent suicide.

One occupation group that particularly deserves such attention is firefighters because they frequently experience traumatic events that may increase suicidal ideation. It was recently reported that the number of firefighters who died from suicide was greater than the number who died in line of duty [7]. However, it is markedly less understood about rates of suicide and suicidal behaviors among firefighters as compared to other first responders such as police officers [8]. One previous study reported very high rate of suicidal ideation, plan, and attempt in US firefighters compared with the general population [9]. Since the study, however, has taken on integrated population ranging from volunteer to retired firefighters in US, it is necessary to conduct research on firefighters who are currently working as professional in other countries. In addition, the study employed a retrospective survey on whole career of participants, so it is highly possible that the participants’ perspective on their suicidal behaviors may have been skewed. In order to investigate suicidal ideation related to firefighters’ work, it is important to collect and analyze the most recent data of their suicidal behaviors.

It was revealed that psychiatric symptoms, such as depression, posttraumatic stress disorder (PTSD) symptoms [10, 11], and sleep disturbances [12], are major risk factors associated with suicidal behaviors in firefighters. In addition, lower rank, fewer years of firefighter service, active duty military status, history of professionally responding to suicidal attempt or death cases, and membership in an all-volunteer department were reported as occupational correlates of suicidal ideation among firefighters [9]. However, it
is still uncertain whether and how work-related stress in their occupational environment impacts suicidal ideation in firefighters, despite attempts to identify the predictors for suicidal behaviors in this population. Previous epidemiological studies showed that a potential relationship between occupational stress and suicidal ideation in emergency workers. Specifically, job-related emotional exhaustion and bullying at work were associated with suicidal ideation in Norwegian ambulance personnel [13]. Also, having been harassed at work was associated with suicidal ideation among physicians in academic medicine [14]. Considering these findings, it is possible that occupational stress might be associated with suicidal ideation in such population.

Several occupational stressors unique to firefighters are necessary to be investigated. First, traumatic experience while on duty might be the highest risk factor related to suicidal ideation. Traumatic experiences in firefighters have been widely acknowledged as a major risk factor for various mental disorders. Greater the severity of PTSD symptoms and the sequels of traumatic experience were associated with greater risk of lifetime suicidal ideation and attempts [10]. However, it remains unknown whether and how a recent exposure to traumatic event impacts suicidal ideation in firefighters. Second, occupational stress from risky or hostile environment of workplace might also be a risk factor for suicidal ideation in firefighters. Firefighters routinely suffer from physical danger on duty, outdoor work regardless of the weather, heavy firefighting equipment, and irregular work hours. Investigations are needed determining on whether occupational stress related to the characteristics of the physical work condition is one of the correlates of suicidal ideation in firefighters. In addition, emotional labor might also be one of the occupational stressors, given the emotionally taxing job environment of firefighters. Emotional labor is defined as the process by which workers have to control their feelings in accordance with the organizational demands and occupational role [15-17]. Firefighters
have to hide their own emotions when they face sickness, death, suicide, and violent accidents. Moreover, it has been reported that Korean firefighters usually suffer from emotional labor similar to those in customer-service industry due to the aggressive and/or picky nature of civil petitioners [18]. Considering the previous findings that emotional labor has a negative impact on mental health among workers [19-23], it is needed to investigate whether emotional labor is associated with suicidal ideation in firefighters.

The aim of this study was to measure the 1-year prevalence of suicidal ideation in firefighters and to investigate whether and how various factors related to occupational stress and demographic characteristics impact the recent suicidal ideation in this population.

Methods

Participants

This nationwide cross-sectional study was conducted between February 2018 and March 2018 via a self-reported online survey among Korean firefighters. A total of 45,719 firefighters in South Korea participated in the survey and completed the self-reported questionnaire, including their suicidal ideation in the past year as well as demographic characteristics and occupational factors, such as traumatic experience in the past year, occupational stress, and emotional labor, and clinical factors, including PTSD and depression symptoms. Among the total, 21 were excluded from the final analyses due to a coding error during the survey. Thus, the final analyses included a total of 45,698 firefighters. Survey respondents were apprised of the anonymous and voluntary nature of the self-reported online survey.

Measures

Demographic and occupational characteristics
Demographic and occupational characteristics were obtained using a self-reported questionnaire. Demographic characteristics included age, sex (male or female), marital status (married, never married, or divorced/separated/widowed), and religion (yes or no). Occupational characteristics included length of work (years), and current role. The roles of firefighters include fire suppression, special investigation of the cause of fire, paramedics providing emergency medical care, rescuing people who are trapped or in medical emergencies, training other firefighters, and others [24]. For analysis, the roles were categorized into the following: fire suppression, emergency medical services (EMS: includes paramedics and rescue), and officers (including administrators, special investigators, trainers of firefighters, and communicational and informational system operators).

**Suicidal ideation in the past year**

Suicidal ideation in the previous year was assessed using an item of the Suicidal Behavior Questionnaire-Revised (SBQ-R) [25], which is a brief self-reported questionnaire to measure past suicidal behaviors. The SBQ-R item 2 used to assess suicidal ideation in the past year reads “How often have you thought about killing yourself in the past year?” Respondents responded to this on a 5-point Likert scale: 1-never; 2-rarely (1 time); 3-sometimes (2 times); 4-often (3-4 times), and 5-very often (5 or more times). A score of greater than 2 on item 2 was defined as having suicidal ideation in the past year.

**The presence of recent exposure to traumatic events**

Exposure to traumatic events during the previous year was identified by using the self-reported measure – developed by Beaton et al. – which assessed the duty-related incident stressors [26]. Twenty-two items were selected among the original 33 incident stressors.
We excluded two stressors related to gunshots due to the generally low incidence of gunshot incidents in South Korea. ‘Witness duty-related death of co-worker’ and ‘co-worker firefighter fire fatality (not witnessed)’ were changed to ‘witness duty-related death or suicide of co-worker’ and ‘co-worker death or suicide (not witnessed), respectively. Finally, three additional stressors, ‘remove the body of suicide victim’, ‘remove a severely decayed corpse’, and ‘involved in a safety accident that received public spotlight’ which were reported to be frequently encountered and associated with high level of stress in Korean firefighters were added (Table S1). More than one exposure to traumatic events in the previous year was coded as 1, and none was coded as 0.

*Occupational stress from physical work environment*

Occupational stress from physical work environment was measured using the subscale, ‘Difficult Physical Environment’ of the Korean Occupational Stress Scale (KOSS) [27], which was developed and validated using a nationwide epidemiological study to estimate the job stress of Korean employees. The KOSS was based on the most commonly used job stress questionnaires such as the Job Content Questionnaire [28], National Institute of Occupational Safety and Health job stress questionnaire [29] and Occupational Stress Index [30]. The KOSS has eight subscales (Difficult Physical Environment, High Job Demand, Insufficient Job control, Inadequate Social Support, Job Insecurity, Organizational Injustice, Lack of Reward, and Discomfort in Occupational Climate). The “Difficult Physical Environment’ of the KOSS has three items, each of which was rated on a 4-point Likert scale (1: strongly disagree to 4: strongly agree) and higher scores represented higher levels of occupational stress from physical environment. Table S2 shows each item of the “Difficult Physical Environment” subscale of the KOSS.
Emotional labor

The level of emotional labor was measured by the Korean Emotional Labor Scale (KELS) [31]. KELS was developed to measure the emotional labor of Korean workers, and was validated with a nationwide random sample of 1,042 Korean employees by the Korean Occupational Safety & Health Agency. It was based on the literatures related to emotional labor [15-17, 32], emotional labor scales, such as Emotional Labor Inventory [4], Emotional Labor Scale [33], and Frankfurt Emotion Work Scale [34], as well as a focused group interview. The KELS has five subscales (Effort to Control Emotion, Organizational Monitoring System, Demands of Emotional Labor, Emotional Damage, and Organizational Support System). Each item in the questionnaire was rated on a 4-point Likert scale, from 1 (not at all) to 4 (very much), and higher scores represented higher levels of stress from emotional labor. The current study included only the subscale, “Emotional Damage” which measures the severity of emotional hurt due to emotional labor. We regarded the subscale score as proxies for emotional labor in firefighters, because the “Emotional Damage” is a factor that explained the most variance of the KELS in the results of a factor analysis in the study developing the scale [31]. Table S2 shows each item of the “Emotional Damage” subscale of the KELS.

PTSD symptoms

PTSD symptoms were assessed with the Korean version of PTSD Checklist-for the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (PCL-5). The PCL-5 is a 20-item self-reported measure evaluating the degree to which an individual has been bothered in the past month by DSM-5 (Diagnostic and Statistical Manual of Mental Disorders, 5th edition) PTSD symptoms [35]: intrusions, avoidance, negative alteration in cognition and mood, and alterations in arousal and reactivity. We instructed the
participants to choose and describe the most traumatic event from a list of traumatic events and fill out the PCL-5 with this event in mind. Each item was measured on a 5-point Likert scale (0: not at all to 4: extremely). Higher scores indicated higher severity of PTSD symptoms. Items 1-5 correlated with symptoms within Cluster B (intrusions); items 6-7 with Cluster C (avoidance); items 8-14 with Cluster D (negative alteration in cognition and mood); and items 15-20 with Cluster E (alterations in arousal and reactivity). Participants were considered to be experiencing the symptom when recording a score of 2 or higher (moderately to extremely) in each item. According to an algorithm-derived PTSD diagnosis method, we defined probable PTSD as having the required number of symptoms in each cluster of the DSM-5 criteria: 1 B item, 1 C item, 2 D items, and 2 E items.

**Depression symptoms**

Depression symptoms were assessed using the Korean version of Patient Health Questionnaire-9 (PHQ-9) [36, 37]. Respondents rated 9 items, based on the DSM-IV criteria of major depressive disorder, measured on a 4-point Likert scale (0: not at all to 3: nearly every day) based on their experiences during the past two weeks. The PHQ-9 total score ranged from 0 to 27; higher scores indicated a greater severity of depressive symptoms. The total score of over 15 was defined as probable depression [37].

**Statistical Analysis**

Descriptive statistics were used to analyze the demographic, occupational, and clinical characteristics of participants as well as to calculate the 1-year prevalence of suicidal ideation. Chi-square test and t-test were used to examine whether there were differences in the demographic, occupational, and clinical characteristics between firefighters with and without suicidal ideation in the past year. Multivariable logistic regression analyses
were used to examine the demographic (age, sex, marital status, and religion), occupational (current job position, recent traumatic experience, occupational stress, and emotional labor), and clinical (probable PTSD and depression) characteristics as correlates of suicidal ideation in the previous year. The dependent variable was suicidal ideation in the past year. The results were shown as odds ratios (ORs) and 95% confidential intervals (CIs). The data were analyzed using IBM SPSS Statistics ver. 22.0 software (IBM Corp., Chicago, IL, USA). A two-tailed $p$-value $< 0.001$ was considered statistically significant.

Results

The mean age of all 45,698 participants was 42.51 years (standard deviation, SD = 9.10), and 92.6% of them were males. The average length of work was 13.4 years (SD = 9.43). As a current job position, fire suppression, EMS, and officers were 41.57%, 32.10%, and 26.33% respectively. In the past year, 62.52% of participants experienced traumatic events. A total of 4,871 (10.66%) firefighters had suicidal ideation more than once in the past year. With respect to clinical characteristics, a total of 1,202 firefighters (2.63%) were identified as having probable PTSD using PCL-5, and 561 firefighters (1.23%) were identified as having probable depression using PHQ-9.

The results in Table 1 showed that there were differences in the demographic, occupational, and clinical characteristics between firefighters with and without suicidal ideation in the past year. Participants with suicidal ideation in the past year were older and work longer than those without suicidal ideation. Participants with suicidal ideation in the past year were more female, divorced/separated/widowed, and officer as a current job position than firefighters without suicidal ideation in the past year. Also, participants with suicidal ideation in the past year recently more experienced traumatic events, had higher levels of occupational stress and emotional labor, and had higher rate of probable PTSD as well as depression than firefighters without suicidal ideation in the past year.
The association of suicidal ideation in the previous year with demographic, occupational, and clinical characteristics was investigated by using a multivariable logistic regression model. The results are shown in Table 2. Suicidal ideation in the past year was associated with female (OR = 1.48, 95% CI = 1.33 - 1.66), and being divorced/separated/widowed (OR = 1.72, 95% CI = 1.43 - 2.08). As current job positions, officers were more likely to be related with suicidal ideation in the past year (OR = 1.49, 95% CI = 1.37 - 1.62), compared with fire suppression. The presence of recent trauma (OR = 1.85, 95% CI = 1.71 - 2.00), higher occupational stress (OR = 1.19, 95% CI = 1.16 - 1.22), higher emotional labor (OR = 1.10, 95% CI = 1.09 - 1.10), probable PTSD (OR = 4.01, 95% CI = 3.50 - 4.59), and probable depression (OR = 8.92, 95% CI = 7.20 - 11.04) were also significantly associated with suicidal ideation in the past year.

Discussion

This is, to the best of our knowledge, the first nationwide epidemiological study to investigate the 1-year prevalence of suicidal ideation in firefighters. In this study, we found that 10.66% of Korean firefighters reported having suicidal ideation in the past year, which is higher than in the Korean general population. A nationwide study conducted by the Korean Epidemiologic Catchment Area Study Replication (KECA-R) in 2016 showed that the 1-year prevalence of suicidal ideation in the Korean general population was 2.9% using the Korean version of the Composite International Diagnostic Interview [38]. From this, we may suppose that more firefighters experience suicidal ideation during their active duty period than the general population with other occupations, indicating that there might be risk factors unique to the role of firefighters.

A previous study reported the career prevalence of suicidal behaviors among American firefighters [9]; it reported that the career prevalence of suicidal ideation, plan, and attempt was 46.8%, 19.2%, and 15.5%, respectively. These figures are much higher
compared with our results. This difference might be attributable to several reasons. First, their data was obtained from a relatively small sample – 1,027 firefighters – while our data was obtained from a relatively large sample size of 45,698 firefighters. Second, their study has taken on integrated population ranging from volunteer to retired firefighters, and showed that volunteers were more likely to report suicidal behaviors than full-timers. However, in our study, only full-time firefighters currently working as professionals were analyzed. Third, their study included firefighters with various races and ethnicity residing in the US, while in our study, only Korean – one race and ethnicity – firefighters were enrolled. Stanley et al recruited White, Hispanic, Latino, Native American and Alaska Native firefighters; and being Native American or Alaska Native was a key factor associated with increased risk for suicidal behaviors. Finally, we analyzed firefighters’ suicidal ideation only in the past year, while Stanley et al on the suicidal ideation in whole career years of firefighters.

In this study, we also investigated the correlates of suicidal ideation in the past year among firefighters. Results showed that PTSD and depressive symptoms were most powerful factors to increase the possibility of suicidal ideation in the previous year among demographic, occupational, and clinical characteristics. It is consistent with the previous findings that PTSD and depression were linked to suicidal behaviors [10, 11, 39-42]. Notable finding of this study was that occupational factors were associated with suicidal ideation of firefighters, even after controlling the effect of PTSD and depressive symptoms. First of all, we found that a recent exposure to traumatic event significantly heightened the possibility of developing suicidal ideation in the past year. Traumatic experience is a well-known risk factor for posttraumatic stress disorder (PTSD) and depression. However, the effect of traumatic experiences on suicidal behaviors among firefighters has not been fully investigated. These findings suggest that firefighters who
experienced a recent traumatic event could be at higher risk for developing suicidal ideation, despite the lack of PTSD or depressive symptoms immediately following the traumatic event.

Second, we found a significant association of occupational stress from physical work condition with suicidal ideation in firefighters. There is accumulated evidence that job-related stress is linked to mental health problems in emergency workers as well as general employees [43-46]. Especially, a previous study conducted in four countries – Korea, China, Australia, and Germany – reported that occupational stress, such as job strain, organizational injustice, and effort-reward-imbalance was associated with suicidal ideation [47]. Recently, the association between suicidality and occupational stress such as discrimination, inadequate pay, disruption of sleep, and concern about serious injury was reported among firefighters [48]. However, it has not yet been investigated whether occupational stress from a difficult physical environment of workplace is associated with suicidal ideation in workers. Our findings provide evidence that working in an unsafe environment or suffering from physical danger on duty could heighten the possibility of suicidal ideation in firefighters.

Third, emotional labor as an occupational stress factor had a positive association with suicidal ideation in Korean firefighters. Firefighters have to stay calm and hide their own emotions when they face sickness, death, suicide, and violent accidents. Moreover, it has been reported that Korean firefighters usually suffer from emotional labor due to unreasonable demands from the aggressive or picky civil petitioners, presenting similar experiences with those in customer-service industry [18]. A recent study showed that emotional labor made firefighters vulnerable to mental problem by modulating the effect of traumatic experiences on PTSD symptoms [23]. Based on previous findings, it is possible that the high demand of emotional labor might be a risk factor for suicidal
behaviors alone and by exaggerating the severity of PTSD.

The final occupational factor related to suicidal behaviors was the officer as a present job position among firefighters. Officer positions include administrators, special investigators, and communicational and informational system operators. Though firefighters in officer position may have less chance to be exposed to traumatic experience during work, they may get highly stressed by high administration work load and pressure, less peer support, and lower salary (e.g. lower danger pay) compared with those in fire suppression or EMS.

Among demographic characteristics, we found that female gender was significantly associated with the risk of suicidal ideation in the past year. This finding is consistent with the previous report that the 1-year prevalence of suicidal ideation was greater in females than men [49]. Compared with other OECD countries, there are major gender gaps in earning, labor market participation, and representation in the government of Korea [50]. This gender discrimination in Korean society could partly explain the higher risk of suicidal ideation in female firefighters. Female firefighters may feel relatively more discomfort in the occupational environment with male dominance and patriarchy.

This study has several limitations. First, the cross-sectional design of the study may limit its ability to confirm a causal relationship between suicidal ideation and the demographic, occupational, and clinical factors in firefighters. In the future, longitudinal studies should be conducted to confirm the causal relationship found in this study. Secondly, since the current study collected data from a web-based self-reported questionnaire, response bias may have possibly influenced the results. Standardized interviews would provide a more accurate and detailed information regarding the prevalence and correlates of suicidal ideation in the population of firefighters.

Conclusion

The 1-year prevalence of suicidal ideation was higher in firefighters than those in the
general population. Female gender, divorced/separated/widowed marital status, current position of an officer, recent traumatic experience, and high level of occupational stress and emotional labor were significant correlates of suicidal ideation in the past year even after controlling the effects of PTSD and depression. These findings suggest that intervention and policies to control these risk factors are necessary to prevent suicidal ideation in firefighters.

Abbreviations

PTSD: posttraumatic stress disorder ; EMS: emergency medical services; SBQ-R: Suicidal Behavior Questionnaire-Revised; KOSS: Korean Occupational Stress Scale; KELS: Korean Emotional Labor Scale; PCL-5: PTSD Checklist-for the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders; PHQ-9: Patient Health Questionnaire-9; DSM-5 (Diagnostic and Statistical Manual of Mental Disorders, 5th edition); OR: odds ratio; CI: confidence interval; KECA-R: Korean Epidemiologic Catchment Area Study Replication

Declarations

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Authors’ contributions
JK, HP, and JIK were involved in the conceptualization and implementation of the study. HP and SO analyzed the data. HP and JK drafted the manuscript, and BM reviewed the drafts of the manuscript. All authors read and approved the final manuscript.

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Availability of data and materials
The datasets used and/or analyzed during the current study are available from the Fire Policy Division in Health Management Team from National Fire Agency of Korea on reasonable request.

Ethics approval and consent to participate
Ethical approval was obtained from the Institutional Review Board of Seoul National University Bundang Hospital (IRB No: X-1807-483-907). As all data was entered in completely anonymized forms, consent to participate was not required.

Consent for publication
As completely anonymized observational data was used (see “Ethics approval and consent to participate”), consent for publication was not required.

Competing interests
The authors declare that they have no competing interests.
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Additional Files

**Additional file 1: Table S1.** The list of traumatic events

**Additional file 2: Table S2.** The list of items on the Korean Occupational Stress Scale and the Korean Emotional Labor Scale

Supplementary Files

This is a list of supplementary files associated with the primary manuscript. Click to download.

- Table 1.pdf
- Additional file 2.pdf
- Additional file 1.pdf
- Table 2.pdf