

## Geniřletilmiř zet

### Introduction

First responders are routinely exposed to highly stressful and potentially traumatic situations at a frequency that far exceeds that of other occupational groups. Such exposure enhances their susceptibility to adverse mental health outcomes, including posttraumatic stress disorder (PTSD), burnout, depression, and anxiety. It also increases their risk of using maladaptive coping strategies, particularly harmful or hazardous alcohol use. The current study was undertaken among South African first responders, specifically paramedics and police officers. Prior research on this population group has been limited by small sample sizes, qualitative approaches, or assessments of only a narrow range of indicators. This study expands the existing knowledge base by examining the association of PTSD, depression, anxiety, burnout (measured through the subscales of emotional exhaustion and depersonalization), fatigue, and insomnia with harmful drinking behaviors.

### Materials and Methods

This study used a cross-sectional survey design. The sample comprised of 429 first responders from the Western Cape Province of South Africa, including 309 police officers and 120 paramedics. Participants completed a demographic survey and the Alcohol Use Disorders Identification Test, Patient Health Questionnaire-9, Generalized Anxiety Disorder-7, Posttraumatic Stress Disorder Checklist for DSM-5, Maslach Burnout Inventory, Life Events Checklist, Chalder Fatigue Questionnaire, and Insomnia Severity Index. In addition to descriptive statistics, linear regression was used to identify significant predictors of alcohol use, with alcohol use as the dependent variable and indices of psychological distress as independent variables. Multivariate analysis of variance was used to compare participants who were at risk of harmful drinking with those who were not at risk, as well as those who might be classified as alcohol dependent with those who were not classified as such.

### Results

In contrast to prior studies, PTSD was not a significant predictor of alcohol consumption. First responders who were at risk for harmful alcohol use had higher levels of distress compared to those not at risk. They reported elevated anxiety, depersonalization, depression, emotional exhaustion, insomnia and PTSD. Those classified as alcohol dependent reported higher levels of psychological distress on all indicators compared to those who were not classified as alcohol dependent.

### Discussion

Although PTSD did not emerge as a significant predictor of harmful alcohol consumption, the findings highlight the relationship between mental health challenges and alcohol consumption among this population. It is probable that first responders experiencing adverse mental health outcomes may use alcohol as a form of self-medication to alleviate emotional distress. The temporary relief provided by alcohol may reinforce its use. Subsequent attempts to limit alcohol consumption may lead to intensive symptoms of withdrawal. This can create a cycle that perpetuates distress and reliance on alcohol for coping. These results emphasize the need for integrated interventions that address both psychological distress and harmful drinking behaviors.