

Some of What We Carry Is Grief

Understanding Professional Grief and Cumulative Loss in the Fire Service

By Rev. Peter Preble, Assistant Chief Chaplain, Massachusetts Corps of Fire Chaplains

Firefighters carry a lot of things through a career. Some are obvious: the weight of the gear, the physical demands of the job, interrupted sleep, difficult calls, and memories of things most people will never see. The fire service has become increasingly willing to talk about the psychological weight of the work as well. We talk about trauma and PTSD, suicide, burnout, compassion fatigue, moral injury, and resilience. Conversations like these are important, and they have undoubtedly saved lives.

But some of what we carry is grief.



That may not be the first word that comes to mind. We often associate grief almost exclusively with death, but grief and bereavement are not the same thing. **Loss is the objective event of losing something. Bereavement is the state created by the death of someone significant. Grief is our internal response to loss, while mourning is the outward expression of that grief.**

The distinction matters because death does not have a monopoly on grief.

A firefighter can grieve the death of a colleague, but also the end of a career, the loss of physical ability after an injury, the breakup of a crew, the retirement of a longtime partner, a changing department, a damaged relationship, or the loss of trust in an organization that once felt like family. We do not have to regret a transition to grieve what is changing.

Firefighters can also grieve people they never knew. A pediatric call may stay with someone for years. There are patients whose names we never learned but whose faces we remember. There are familiar addresses we visit repeatedly until the day the outcome is different. There are families standing in driveways watching everything they own disappear. There are calls where everyone did everything correctly and someone still died.

This is sometimes described as **professional grief**: the natural emotional distress that arises from continuous or cumulative losses encountered through our work. It is different from trauma, although the two can exist together. Trauma may ask, *What happened to me?* Moral injury may ask, *What happened that violated something I deeply believe?* Burnout may ask, *What has prolonged workplace stress done to me?*

Grief asks a different question: *What have I lost?*

Sometimes the answer is a person. Sometimes it is confidence, control, trust, physical ability, a relationship, a sense of safety, or an assumption about how the world works. Sometimes what has been lost is harder to name: the person we were before we saw some of the things we have seen.



When Losses Accumulate

One difficult call does not necessarily overwhelm a firefighter. Neither does every death, retirement, injury, transfer, or disappointment. Human beings are remarkably capable of adapting to loss.

The difficulty comes when losses begin arriving faster than we have an opportunity to process them.

Researchers and grief professionals sometimes describe this as **cumulative grief or grief overload**. A loss does not necessarily disappear because the apparatus is back in quarters and another alarm comes in. The next call may arrive before there has been much opportunity to think about the previous one. Another loss gets added. Then another.

Compartmentalization can be necessary in emergency services. There are moments when emotions have to be placed temporarily in a box because somebody needs us to function. **The question is whether the box ever gets opened again.**

Over twenty or thirty years, firefighters may accumulate losses they never identified as losses. This does not mean every firefighter is walking around with unresolved grief, nor does it mean normal grief should be turned into a diagnosis. Grief is not an illness. It is a normal human response to losing something that matters.

But what we cannot name can be difficult to understand.

The Firehouse as a Place of Mourning

Fortunately, firefighters rarely carry these things entirely alone.

A firehouse is not an ordinary workplace. We eat together, train together, sleep under the same roof, laugh together, argue with each other, and sometimes depend upon one another for our lives. Over years, we learn each other's habits, stories, families, strengths, and weaknesses. That closeness is one of the great strengths of the fire service.

It also shapes how firefighters grieve.

The fire service already has mourning practices, even if we do not call them that. We tell stories. We gather around the kitchen table. We cook for one another. We attend wakes and funerals. We stand honor guards, ring bells, display photographs, remember old members, and tell the new people stories about firefighters they never met. We hold retirement dinners and complain that the retiree's stories get better every year.

Even humor has a place. Dark humor can sound strange to people outside emergency services, but sometimes humor creates enough emotional distance for people to approach something painful together. Like any coping mechanism, it can become avoidance, but humor itself is not evidence that someone does not care.

The firehouse can therefore be both **a place where grief is processed and a place where grief is postponed.**

Sometimes a simple conversation at the kitchen table is exactly what is needed. Sometimes it is not enough.



The Grief Nobody Recognizes

There is another complication. Some grief is never acknowledged as grief at all.

Grief researcher Kenneth Doka uses the term **disenfranchised grief** for grief that is not openly acknowledged, socially validated, or publicly mourned. It can be particularly relevant to professional grief because the relationship between a first responder and the person who died may not be recognized by anyone else as a relationship that gives the responder a reason to grieve.

Nobody sends flowers because you responded to another fatal accident.

There is no bereavement leave because the child you could not save was a stranger.

There is no funeral for the loss of confidence that sometimes follows the call where everything went wrong.

And there may be no ceremony marking the moment when you realize the job has changed something about who you are.

Sometimes firefighters disenfranchise their own grief: *I didn't know them. Other people had it worse. That's the job. I should be used to this by now.*

The firehouse can help counter that. Another firefighter may understand without requiring an explanation. A conversation, a story, or even someone saying, "That was a tough one," can acknowledge that something happened and that it is reasonable to be affected by it.



Culture can give grief permission. It can also take permission away.

Giving Grief Something to Do

Psychologist J. William Worden developed what he called the **Tasks of Mourning** as a way of understanding adaptation following a death. Worden's original framework concerns bereavement, but I believe its underlying insight can be usefully adapted to other significant losses as well.

Grief is not simply something that happens to us. There is work involved in adapting to loss.

First, we have to **acknowledge the reality of what has been lost**. That can be a person, but it might also be physical ability, trust, a relationship, a role, or an assumption about ourselves.

Second, we have to **make room for the emotional response to that loss**. This does not mean everyone needs to process emotion in the same way or on the same timetable. It does mean continually refusing to acknowledge an emotional response is different from working through it.

Third, we have to **adjust to what has changed**. Worden describes external, internal, and worldview adjustments. For a firefighter, that might mean adapting to physical limitations after an injury, figuring out who we are when we can no longer perform the role we once held, or integrating the knowledge that sometimes skill, training, and effort cannot change an outcome.

Finally, we find a way to **carry forward what mattered while continuing to live and work**. We do

this naturally when we tell stories about firefighters who have died or retired. They remain part of the department's story without preventing the department from continuing its own.

These tasks do not happen in a neat sequence. We may revisit them as circumstances change. But they give us useful questions to ask: *What have I lost? Have I acknowledged it? Have I made room for my response to it? What has changed because of it? How do I carry it without allowing it to become everything I carry?*

When the Organization Becomes Part of the Loss

There is one additional form of loss worth recognizing because it can be particularly painful in a close-knit profession.

Fire Captain Benjamin Vernon has written about **administrative betrayal** following critical incidents: the additional harm that can occur when members feel abandoned, unfairly blamed, isolated, or unsupported by the organization at a moment of vulnerability. Psychologist Jennifer Freyd's broader research describes **institutional betrayal** as harm caused when institutions upon which people depend fail to protect or support them in expected ways.

Not every disagreement with administration is betrayal. Investigations, discipline, difficult decisions, and organizational change are sometimes necessary parts of leadership.

But when trust is genuinely broken, something has been lost.

The firefighter may lose confidence in leadership, a sense of belonging, trust in the organization, or the belief that the department will stand behind its members when things become difficult. Those losses can become layered upon whatever the firefighter was already carrying.

The opposite is what Freyd calls **institutional courage**. Departments cannot prevent every tragedy, remove every painful memory, or eliminate grief. But leaders can communicate clearly, act fairly, check on people after the immediate crisis has passed, maintain connection with members who are injured or away from work, create space for appropriate mourning, and make seeking help an ordinary part of taking care of one another.

In a profession built upon belonging, those things matter.

Some of What We Carry

None of this means every difficult call should be labeled grief. Trauma remains trauma. PTSD requires appropriate recognition and treatment. Burnout, depression, moral injury, compassion fatigue, and suicidal thoughts require their own responses. When what we are carrying becomes too much, peer-support teams, chaplains, clinicians, employee-assistance programs, and other behavioral-health resources can help.

But grief deserves a place in that vocabulary too.

Perhaps one of the most useful things we can do after a difficult period—whether for ourselves or for the firefighter sitting across the kitchen table—is ask a question we do not ask often enough: *What have you lost?*

The answer may not require treatment. It may require acknowledgment. It may require a story, a conversation, a ritual, some time, or simply another person willing to sit at the table and recognize that something mattered.

Firefighters will always carry things. It is part of the work. The goal cannot be to come through a career untouched by the people, places, and experiences we encounter.

But we can become better at recognizing what we carry, giving one another permission to name it, and knowing when we need help carrying it.

Because some of what we carry is grief.



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