HANSARD

NOVA SCOTIA HOUSE OF ASSEMBLY

COMMITTEE

ON

VETERANS AFFAIRS

Thursday, May 9, 2013

Red Room, Province House

Mr. James Davis Re: Peer Bereavement Support

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VETERANS AFFAIRS COMMITTEE

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In Attendance:

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WITNESS

Mr. James Davis



HALIFAX, THURSDAY, MAY 9, 2013

STANDING COMMITTEE ON VETERANS AFFAIRS

9:00 A.M.

CHAIR Gary Burrill

VICE-CHAIR Jim Boudreau

THE CHAIR: Good morning, everyone. Welcome to this meeting of the Veterans Affairs Committee. We want to especially welcome our guest, Jim Davis, to speak with us on the matter that is on our agenda. As I was telling you before the meeting started, Mr. Davis, we are used to meeting in a little smaller space so we just have to overcome this feeling that we are speaking from opposite sides of a rink.

Our custom for our friends in Hansard is to just identify ourselves at the beginning of the meeting so I'll ask you to do that, beginning with Mr. Morton.

[The committee members introduced themselves.]

Mr. Davis, what we would have in view is that you could speak to us and then we would take as much time, as seems fitting, to make responses and have whatever conversation flows out of that. We do have a couple of very small things to deal with at the tail end of our meeting but Mr. Davis's presentation is the subject of the meeting today.

We also want to welcome to the meeting Ms. Lenore Zann - this is Jim Davis who is going to be presenting today.

Mr. Davis, the floor is yours.

JAMES DAVIS: Thank you, Gary, and good morning. It is indeed an honour for me to be invited back to speak to this committee. When I appeared before you on February 12, 2009, it had been three years since my son was killed and the pain I was feeling then was very raw and yet my message was that I was feeling strong because of my involvement with the military's bereavement program called HOPE, which stands for Helping Our Peers by providing Empathy.

It has now been seven years since Paul was killed and I'm here to tell you that although the pain of losing him is no better than it was the first time I appeared before you, my coping skills are healthier. I am convinced that the reason for that is not because of the passing of time but because of my continued involvement with the bereavement program. The message I want to convey today is how the whole program definitely made a positive effect in my life and continues to do so. To be effective in doing this, I must take you back to the moment the program was created.

In 1995, Lieutenant Colonel Stéphane Grenier - now retired - came home from a nine month tour in Rwanda. Faced with his own undiagnosed post-traumatic stress disorder, PTSD, he took a special interest in the way Canadian Forces was dealing with the mental health issues. In 2001 he coined the term Operational Stress Injury (OSI) and under his initiative and personal drive, a national peer support program called OSISS - Operational Stress Injury Social Support - was formed to provide confidential peer support and social support to Canadian Forces personnel veterans and their families affected by mental health issues. The key words here are "peer support".

Consequently, the development of the OSISS, where trained peer-support coordinators - who themselves have been injured by operational stress - offer support by listening to those who are suffering, drawing on similar experiences and providing guidance on resources available in DND, Veterans Affairs and their own community.

Sometime in late 2005 and early 2006 - I'm not sure when - Marley Leger, widow of Sgt. Marc Leger, approached Colonel Grenier with a request. Her husband, Marc, had been one of four killed on April 17, 2002 in Afghanistan in what has become known as Canada's friendly fire incident. Marley, knowing that Colonel Grenier was instrumental in forming the program to help soldiers and their families suffering from PTSD asked, what about the widows of the ones who do not come home?

On the morning of March 2, 2006, my life changed forever. That was the day my son Paul was killed in Afghanistan. Of all the phone calls Sharon and I received that day, there is one in particular that I will never forget. I will never forget the voice and the words at the other end, "Mr. Davis, this is Dan Woodfield. I want you to know that you are now where I was three months ago."

I remember when Dan's son Braun was killed and now here he was, a father who had just recently lost his son and yet he was able to still find the strength to reach out and

extend a helping hand. His voice to me signified that there was light at the end of all this darkness that I was feeling.

When I got the invitation to attend a one-day conference in Edmonton to discuss the possibility of forming a peer bereavement group, I jumped at the chance. I have attended a lot of meetings, workshops and conferences over the years but never have I attended one so powerful, so emotional as this one was. The meeting did not take place on a military base and any service member who happened to be in the room at any time during the day did not wear a uniform. I do not recall seeing anything that would remind me that this was a meeting sponsored by the Armed Forces.

In attendance were seven widows, me, and one other father of a fallen soldier. The nine of us became the focus of the meeting. It became very obvious very quickly that this was our meeting and it was here where I first met Lieutenant-Colonel Grenier and Sophie Richard, manager of JPSU (Joint Personnel Service Unit) who works out of DND headquarters in Ottawa. Their initiative is what brought us together. It was obvious that they were the driving force behind what was about to unfold.

After their introduction and brief overview of the OSISS program and how it worked they then told us why we were all brought together. Colonel Grenier told us how Marley Leger, who was now sitting there with us and as one of us, had approached him demanding that something be done to help those who are left behind. Then they proceeded to tell us that the success of this undertaking rests in our hands. We were to take ownership of it, we were to be involved in the development and we were to tell the military how they could help by what needs to be done. At the end of the day, we were to make the decision whether to go forward with it.

On the flight home, I reflected back on the events of that day. I was overwhelmed by what we had accomplished as a group. I was rejuvenated, I felt alive and probably the most important thing of all - I came away from that meeting knowing that eight complete strangers are now a very important part of my life and will affect me on how I deal with my own grief. They taught me a very important lesson: I was not alone. Each one of us had told our story and each one of us had a different story to tell, but we all shared a common theme, we all suffered the pain of losing a loved one to military service and it was this pain that bonded us.

Something very magical happened at that meeting. We were inspired to move forward and form a group that would enable us to reach out and help others who were suffering from the death of a loved one. We began to realize the importance of being with your peers - we were complete strangers and yet we were all one. We had a common denominator, we all lost a loved one to military service. Now we understood what the goal for bringing us together was - to assess the need for the creation of a bereavement peer group to support widows and families of our fallen soldiers.

Our main focus would be to provide support, whatever the cause of death. Colonel Grenier also made us promise that we would include anyone who was suffering grief because of having lost a loved one to suicide. That seemed to be very important to him and now I understand why. As we all know, suicide can be far too often the result of OSI. The bond we felt was simply the knowledge that we understand and feel each other's pain and with this knowledge we can reach out and help others who suffer the same pain. We all agree to become volunteers and are currently supervised and coordinated by Sophie Richard.

Our role as volunteers is to provide peer support service as a non-clinical intervention through active listening and empathy to those who have lost a loved one. Before we began to offer our services, we were brought together in Ottawa in September 2006, for one week's training and to provide input into the development of the program. We were a very diverse group.

Of the widows, there was Belinda, wife of Captain Kevin Naismith, who died in May 2003 after his CF-18 crashed in northeastern Alberta; Deanne, wife of Captain Derek Nichols who was killed when his plane crashed on landing after returning from U.S. exercises; Julie, wife of Captain Miles Selby, a member of Canada's famous Snowbirds who was killed in December 2004, when his plane collided with another jet; Marley Leger, widow of Marc Leger; Heather Dillon whose husband Fergus died of cancer on May 6, 2005, after receiving a medical discharge; Tina Beerenfenger, widow of Corporal Robbie Beerenfenger, killed in Afghanistan in 2003; and finally, Gwen, widow of Lieutenant Chris Saunders, who we all remember that terrible day in October 2004 when he lost his life aboard the HMCS Chicoutimi.

And there was Brian, the other father. Brian was the dad to Mark Isfeld who was killed in Croatia in 1994 trying to clear a minefield. Brian and I were to become very close and over the next two years. He and I would spend countless hours on the phone, he living on the west coast and I on the east coast. In a way, I consider Brian to be my peer support. Unfortunately, on January 20, 2008, Brian lost his battle with cancer. Now I miss him.

We became a program focused on providing bereavement peer support to both the next of kin and families of military members who die in service, and to the next of kin in families of veterans who die. There are two very important aspects that are stressed throughout the volunteers' training: the first being the fact that we are there to provide peer support by providing empathy. We are not there to provide counselling. We are not counsellors; we are listeners, and we are there to provide hope. Consequently, the acronym of our program, HOPE - Helping Our Peers by providing Empathy.

The other very important aspect is the confidentiality part of what we do. We never disclose who our clients are. Even when we are together as a group or during our monthly conference calls, we never refer to our clients by name. The structure of the

program is peer-based and not clinical in its approach. We are a complimentary service, not intended to replace other traditional providers of support.

By our personal experiences, we act as positive role models that will help families through their grief and their recovery journey. By being peers we offer a unique perspective, share experiences, and ultimately end up providing hope. The program must emphasize resiliency and self-care to prevent individual burn-out and this relies on good coaching. The program must be managed by a professional social worker - i.e. Sophie Richard - and there are yearly conferences for the volunteers for professional development. Finally, the support is mainly provided by telephone. Face-to-face contact is rare, but does occur on occasion.

That's the structure; now for the mechanism. Normally within the first 24 hours of death, notification is sent through the chain of command. The Director of Casualty and Support Management will receive the notification message. The padre and the designated officer notify the next of kin. The commanding officer then appoints the assisting officer who will receive, from the Director Casualty Support Assistant, all the information about HOPE. An assistant officer will - when he or she feels the time is right - ask the next of kin if they would like to speak to another next of kin. The assistant officer will then provide the contact information. The HOPE program manager will then select one of us, on the basis of language, proximity and background.

The volunteers' initial contact normally is established within two weeks of the member's death and remains engaged between six to 12 months - the engagement can be shorter or longer, depending on the needs of the peer client. The program manager ensures follow-up with the volunteer and assesses the needs of the peer client and will take any other action that may be required. The program manager holds monthly conference calls with the volunteers and also provides one-on-one coaching sessions and debriefing. These calls enable us to share and solve the various issues that come up from time to time.

Currently there are 40 of us volunteering the service, with plans for more to join. As one of the measures of our program's successes is the fact that most, if not all, of our volunteers are coming from those who were once our peer clients and are now feeling strong enough to reach out and help others. Since the inception of our program in 2006, we have literally served hundreds of peers.

I would now welcome any questions that you may have.

THE CHAIR: I know I speak for our whole committee in expressing our gratitude to you for walking across this ground with us this morning. We will be open to responses to this.

Ms. Zann.

LENORE ZANN: Thank you very much and yes, thank you so much for your presentation.

JAMES DAVIS: You're quite welcome, Ms. Zann.

LENORE ZANN: It's interesting because I also belong to an anonymous organization - for about 16 years now. We operate on very similar terms - anonymity, confidentiality, peers helping peers. What I've discovered in all my research is that it's quite amazing and magical, as you say, how those who have suffered from whatever it is can help others with the same problem - probably more than somebody who has never experienced it. We also use the phone a lot. I talk to people in Los Angeles or the West Coast, right across Canada, people that I've met and we help each other with empathy as well in listening.

There's another program, too, called Nonviolent Communication - NVC - which is another organization which helps people with anger issues, actually. So a lot of people, I find, who have suffered from various different emotional or physical or mental challenges, in some people it will come out in the form of anger - once you peel away some of the other layers, underneath there is a lot of anger. I don't know if you find that with your peer group as well, but of course it stems from fear and insecurity and the sadness that's deep underneath.

NVC - Nonviolent Communication, also specifies empathy as the way to deal with it, just empathizing with the person, feeling and hearing the need that that person is feeling is not being heard or met, and then oftentimes mirroring it back just to show that you've heard their plea, their cry, their pain. That NVC has really helped a lot of people.

I know that the man who started it - I think his name was Marshall Rosenberg or something like that - he's actually been taken to the Middle East in different times and working with various groups there, and also with gangs in Los Angeles, dealing with gangs, trying to make them listen to each other and hear each other's needs in order to understand each other so they can come to more of a moderate stance.

I really believe in this kind of work and it really does give people hope. I think what you are doing is an amazing thing, and thank you so much. Do you have anything that you would like to say?

JAMES DAVIS: Thank you, Ms. Zann. I'm glad you mentioned the bit about anger. Yes, we do come across that - and instead of saying "we", I'm going to reflect on my personal experience and just use "I".

Yes, I do come across that when I'm talking to my peers and my peers are extended across Canada and out West and so forth. When I do encounter somebody who has extreme anger - let me give an example. Say someone has lost a loved one in

Afghanistan. They might be extremely angry that their son was sent to that war. The worst thing I could do is get into a debate or a discussion over the pros and cons of the war. I sit back and I listen to the person unload their anger. I receive it, and I almost agree with the person. That's the whole point of the peer support, as you mentioned - the empathy part of it. I'm somebody they can unload to, whereas somebody else might get into a debate over the pros and cons of our anger.

What I've learned too - I think one of the worst things you can tell somebody who is in grief, is to tell them how they should be grieving. And one of the very first things I do tell a client when I'm speaking to them for the first time is I say, don't ever believe that you will get better because, I said, you won't. Your pain will never go away. And all of a sudden they say, you're right, Jim, because they're so tired of people, friends, and so forth, telling them that time will heal and your pain will eventually get better. They don't want to hear that. All they know is they're in pain right now. But anger can be an issue, so I'm glad you mentioned that.

LENORE ZANN: Yes. Thank you.

THE CHAIR: Jim.

JIM MORTON: Thank you, Mr. Chairman, and thank you, Jim, for your report. I'm a social worker, that's my background, and I spent a few years doing palliative care work, and I actually started and learned a lot about running a bereavement group during that time. As you were talking, I was just reflecting on one woman who came to the group, in fact, I was approached by a nurse in the hospital where the group was run to say that there was a woman wandering in the area of the meeting room who seemed to be disoriented, and would I talk to her. So when I approached her, I realized that she was, in fact, looking for us, but not too sure that she wanted to show up. Her husband had been killed in an accident a few weeks earlier. She was quite distressed and she ultimately agreed to come into the room on the condition that she wouldn't have to say anything.

There were five or six of us in the room, I remember, and she came in, selected a chair, pulled it to the corner, and sat in it facing the wall. I decided to just allow that to happen. Occasionally I asked her a question and once during the group she responded, and we talked a little bit at the end of the meeting. The next week she came back, sat in the corner, but her chair faced the room; the third week she sat in the circle; after probably four or five weeks she was the dominant member of the group; and after a couple of months she left.

You know, what I thought I heard when you were talking is that the power of that human contact. The magical power of it is empathy, in lots of ways, but it's that ability to connect - the importance of human connection during a difficult time in life.

The other thing my social work background, I guess, helped me think that the model you're describing has, as Lenore was pointing out, lots of similarities in other parts of the world. One of those is in the employee assistance program area, where often referral agents who are peer supporters may be trained to provide support and referral advice to people who work in business or in the workplace in one way or another. So I think there's a great deal of evidence that this works.

I guess I am kind of interested in the - I mean this is a big country, and like you said, much of your work happens on the phone. But do you have a sense of what percentage of those people who lose a relative in the line of military duty or through suicide choose to use the program?

JAMES DAVIS: There is a difficulty right now in getting the word out about our program, even within the military itself. Communications, of course, is the biggest problem, and it has improved over the but in my report when I mentioned the assistant officer - the key is the assistant officers who are assigned to a family that suffers the loss of a loved one, and that assistant officer needs to know about our program, needs to know that we exist.

It has been a struggle. I've been invited to many training sessions where assistant officers were being trained - they're also volunteers, I might point out, and choose to help the families. They go through an intensive training process themselves, and I've been invited to some of their training sessions to talk to them about what a family goes through with grief. The key is the assistant officers need to know about our program and when that happens we are available for all deaths, regardless of the reason for the death - we're being used across the board by all deaths in the military.

Afghanistan was very intensive. There were a lot of deaths coming from Afghanistan - hopefully, we won't see any more - but from Afghanistan, unfortunately, there are suicides that are happening. There are also suicides that are occurring from soldiers who have never been in Afghanistan. Wherever our men and women are deployed in this world, they undergo horrible conditions, as we know - it's not just Afghanistan-related.

JIM MORTON: May I ask just one more?

JAMES DAVIS: Certainly. Yes, of course.

JIM MORTON: The other thing that really interests me from a professional point of view is the nature of the support that you, as a peer member of the team, are offered by the program manager. How important is that?

JAMES DAVIS: That's extremely important. The support that we . . .

JIM MORTON: I guess I'm thinking particularly the debriefing aspect.

JAMES DAVIS: I'm glad you raised that because what we do is we have monthly conference calls - and there are so many of us that the conference calls are broken up over three days, so we don't have 40 people on the phone at once. We spend an hour on the phone and we share each other's issues. I might hear where somebody - a peer supporter in Alberta - might have a difficult time trying to deal with a particular family, and I might think, oh, I had a similar situation and I handled it this way, so I can offer. We share with each other.

What also happens is, we are brought together occasionally and spend three or four days on a work site where we go over some more very serious discussions - the psychology of grief, et cetera - and professionals are brought in. Then there's the self-care aspect of it, and self-care is crucial. I said we have monthly conference calls - before I walked into this room I had an e-mail message from Sophie Richard just to say, good luck Jim. That's a powerful message because, of course, I notified her immediately that you had invited me to speak before you. I'm in contact with her almost on a daily basis and so are the other volunteers.

We're a really close-knit family - and I'm going to make myself cry if I get too much into this. There are two gentlemen, Carl Wilson and Don Boland; both their sons died in Afghanistan. Don and I were in Afghanistan together when the military graciously sent us over, and we've become best friends. They don't live here, they are both in Ontario, but Ontario is a big province - but I can't wait to get to sit on Don's verandah and have a nice cold glass of beer with him.

It's incredible. I can't articulate it, the friendships, the bonding that we've formed. When I was reading the names here of our first group, these are young widows - they're like daughters to me, I know them so well. Tears come to my eyes when I think of them. I have a lot of fun with them so it's very powerful.

THE CHAIR: Mr. Gaudet.

HON. WAYNE GAUDET: Thank you, Mr. Chairman, and Jim, thank you very much for coming this morning and sharing your experience with us. Just listening to your stories here this morning, I was thinking, I'm sure everyone who has lost a loved one some of them I'm sure want to be left alone. We can have a peer group trying to support them as much as we want, how do we try to reach out to these folks?

The pain will never go away but at the same time, we recognize everyone needs some type of help or support to try to at least get over the first hump. I'm sure, through your experiences, Jim, you've probably seen or met or heard or spoken with some of these individuals. I'm just curious - how does one go about reaching out to those who want to be left alone?

JAMES DAVIS: I'm glad you raised that, Wayne, because I do come across that. I'll give you an example: Angela Reid, Chris Reid's mom. Chris was killed in Afghanistan and Angela and her husband Tom live in Truro. I wasn't assigned, immediately, to be her peer. I mentioned earlier about the confidentiality of our program but I'm not breaching confidentiality here because Angela is in our group, she's one of the volunteers; we're very good friends and I tease her about this at times, too, because we talk about this in our group discussions.

What happened was, Chris was killed and I was sitting at home - and they lived in Truro - and I said to my wife Sharon, I think I'll go to Truro to the funeral, do you think I should go? This was the same year Paul was killed - Chris died in 2006, in the summer. Sharon said yes, I think you should go. Then I was hesitant, I thought oh, they don't want to see me there, it's their private funeral. I was confused. I didn't know what to do.

Anyway, I got in the car, I drove to Truro and I arrived at the funeral. Somebody in the military recognized me and I was immediately taken in to the - it wasn't a church, the funeral was on the base - they immediately took me in, put me in the front row, laid out the red carpet for me and made me feel like part of the family. It was an unbelievable feeling.

Then, after the funeral, the reception area, they invited me upstairs to the reception area so I could meet Angela and Tom. Well when they walked in, I looked at Tom and I thought, he looks like the way I felt when Paul died, but I looked at Angela and I went to give her a hug. She put her hands on my chest and pushed me away. She said, I don't want to see you and I thought oh, I've made a mistake here, so I immediately backed off.

About a year later, at Camp Gagetown during a memorial service and I'm driving - I think there were four Silver Cross mothers - driving them to Camp Gagetown and Angela is one of them. I can't remember the details now but the bottom line is, Angela decided to join our program and she is now part of the volunteer. She says, Jim, you were the last person I wanted to see at Chris' funeral. Now she's part of our program and has to reach out and make what we call the cold call. The cold call is when you first contact the family and tell them who you are.

So to answer your question more directly, each one is different. What you do is you contact the family, that's important, and tell them who you are and that if you ever need somebody to talk to, feel free to contact me. Then if you sense that they don't want to see you right now, you step aside and let it go. People grieve differently and within a year or two, that person may start to reach out.

There's a lot of other support around within the military, like the padres, for example. Eventually these people will need the whole program but there are some who do not want us first.

WAYNE GAUDET: My next question - does the Department of National Defence or Veterans Affairs assist your peer group in any way? Do you receive any financial assistance? Do you receive training? Do they provide assistance in general to your group?

JAMES DAVIS: The Department of National Defence themselves, do you mean?

WAYNE GAUDET: For the work that you do.

JAMES DAVIS: Yes. I'm not familiar with where the funding comes from. I'm not familiar with the budgets - the different programs that the DND and Veterans Affairs have set up. It's all sponsored; there's no volunteer money in this. The funding all comes from the Department of National Defence, but I don't know what department or where they get it from.

One of my fears is, of course, Wayne, is with all the budget cutbacks today - the federal cutbacks, especially with the Department of National Defence - our program could be cut back, even cancelled.

Sophie Richard - every time I mention it to her - assures me, no, Jim, this will never happen. This program is viable; she's planning another training session for more widows this coming Fall, but I'm a realist so I'm nervous about it because this program is needed and will continue to be needed. If this committee - I'm sure you have influence on our federal government and it certainly would be very helpful if you could keep an eye on our program and if you sense there is a chance of any cutbacks in it, you would exercise your influence and help us out because I think it's crucial.

WAYNE GAUDET: Jim, one final question. With all the good work that you are doing across our country, how are you coping through all of this? I'm sure every time that you speak with a new client, it brings back memories of your son time and time again. I'm just curious - how does one cope with on one hand trying to help those in need, but at the same time, you're in need yourself?

JAMES DAVIS: I know, and that's where this self-care comes in. Sophie Richard is crucial with that. She keeps an eye on me - how many clients are you dealing with now? How much intensity is there with this particular client? At any particular moment, I can say to Sophie, I need a break. That's not an issue because what will happen is my clients will be passed over to another peer supporter, so it's monitored very closely.

It is difficult at times. When I talk to my client, I don't talk about my son Paul - I just listen to their story. It is very draining, but I will say one thing, Wayne. Say I talk to a mother and have been on the phone for a good hour with her. I will leave the house and I have this dog that I have to take for a walk, so I'll take him to the beach - Crescent Beach - and take him for a nice walk. It doesn't matter what day of the year - I dress

accordingly. I feel there's a weight off my shoulders. It's very therapeutic, I think. It helps in a funny way to make you stronger.

I'm a firm believer that some people when they're going through grief, they hold it inside and I think it just builds up. So when I talk to a client, it's an opportunity for me to unload what has been building up. To give you a perfect example, my mother-in-law is 86 and when I married my wife Sharon, her family always told me around Remembrance Day, don't talk about Remembrance Day to her mother because her brother was lost over Italy when he was in northern Italy, shot down when he was 21 years old in the Second World War.

Well, she was never really given the opportunity to grieve, and now that my son was killed I can talk to my mother-in-law about it or she can talk to me, and she's - what is that? Sixty years ago, and I see the tears in her eyes when she talks about her brother. Sixty years and the pain is still there. So I think it's good that I talk to other parents; I think it helps me.

THE CHAIR: Mr. Theriault.

HAROLD THERIAULT: Thank you, Jim, for the presentation. I know I told you before that you have my deepest sympathy, but I'll tell you again you do have my deepest sympathy because I really don't know - I can't say I know what it's like, because I don't. I do know some things and one thing I do know is that my mother - especially my mother - and my father always said, their wish always was that they go before any of their children do.

I thank God my mother and father got that wish, but my sister lost a daughter two years ago to cancer and that was the closest to me that I've lost anybody. I've watched my sister over the past two years and I keep asking her, how are you doing Esther? And she says I'm getting through it. She says I'll never get over, but I'll learn to cope with it. And that's her answer every time.

You just said that after 60 years of your mother-in-law losing her brother she's never gotten over it, and I don't think you ever will. I know I've laid in bed many nights thinking of losing one of my four boys or my daughter and I think probably I'd have to go with them, honest to God. It would be a hard thing, but I can only imagine that. What I do know is you do have my deepest, deepest sympathy.

JAMES DAVIS: Thank you.

HAROLD THERIAULT: Jim, what can we do, I mean we're a provincial committee here and you mentioned - one of the things I picked up that you mentioned is that it's not well known, your association isn't well known even in this province. The media isn't even here today, I don't believe, to help us out.

How can we as a committee help to let the people that this is happening? There's got to be a lot out there who don't know about this. I believe you said that, you spoke to that.

JAMES DAVIS: That is true.

HAROLD THERIAULT: How can we help as a committee, as a provincial committee? Surely we can help you somehow in letting these people know that you are there and you will be there for them.

JAMES DAVIS: That's a very good question, Junior, I don't know if there is an easy answer for it because I see the military itself having a tremendous amount of difficulty getting the word out through its rank and file. Although the Canadian military is a small family compared to say the United States of America, but it's still very diversified and very regimental.

When there is a death in one regiment, that regiment is very good at supporting the family; there are so many different support groups within the military. But they have, and I'm trying to think of the terminology for it now, it's a speakers' group where - that's not the proper word. I just can't think of it now but there is a speakers' group that the military has and what they do is they are travelling around to the different bases and trying to educate about this program, amongst other things. But that's not an easy answer because I don't know the answer to that.

It's discouraging because I think it's highly important to get the word out. There are 12 families here in Nova Scotia that have lost somebody in Afghanistan. I think there are 12 or 13, and we've all become friends ourselves; we've all become a group outside of this HOPE program. It's a national phenomenon because of how we met, we've been going to funerals and unfortunately each time there was another funeral, you would see the parents at that funeral; you'd see more of them all the time attending. Our group was getting larger, unfortunately.

I just don't know, other than I do know one thing I just mentioned. If the federal government were ever to think about cutting the funding of our program, that's where your committee could really help, I think, but I'm being assured that that's not going to be an issue. So I don't know, Junior; it's a frustrating experience.

MR THERIAULT: I think it's something this committee could think about, how we could help in that way. I mean we're here to help the veterans. I think we could even do it here in Nova Scotia, get this word out for you and your association, somehow, we can probably work on that anyway. Thank you, Jim.

THE CHAIR: One thing we could think about, if you thought it would be helpful. We quite often are drafting letters criticizing different things related to Veterans Affairs.

It might be in order to write a letter from the committee, expressing our respect and regard for this work and following on this discussion, underlining our appreciation of its importance.

JAMES DAVIS: Oh I think that would be very nice, that would be very powerful.

THE CHAIR: Well, I wonder if one of us would care - Chuck.

CHUCK PORTER: Thank you, Mr. Chairman, and I would so move a motion to do just that, to the federal government, expressing our thanks for the work they are doing with Jim and his committee and to ensure that the importance of that funding does stay in place to meet the needs that are out there. I had it actually written down here, it's interesting that you bring that up, Gary, so thank you.

THE CHAIR: Okay, we have a pair of seconders, great.

Is there any discussion about this motion?

Did you want to say something, Lenore?

LENORE ZANN: I was just going to say that we were just discussing that we think that would be the best solution and also, is there a Web site or something like that that we can give out to people as well, to let them know about this?

JAMES DAVIS: There are Web sites and they keep changing on me. I, myself, get lost now in some of these Web sites. We were part of the OSISS program - I mentioned OSISS in my opening - and now we're not on that OSISS Web site because they've changed the structure so we come under this JPSU, Joint Personnel Service Unit. I know if I were to look for the Web site that I would just Google Canada Military HOPE Program; it is a bereavement program. Eventually you do get linked into it, there is one there.

It's too bad. I should have brought some pamphlets. We have pamphlets on the program. I should have brought them in today; my error. I hadn't thought of it but I should have brought in some pamphlets.

THE CHAIR: It would be possible to have them distributed through the committee through the Clerk, if you just send them to the Committees Office. We could arrange for that.

JAMES DAVIS: Okay, I can have some send from Ottawa. I'll have some material sent from Ottawa to this office, I'll do that.

THE CHAIR: Is there other discussion about this motion? Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

Mr. Gary Ramey, please.

GARY RAMEY: Thank you, Mr. Chairman and obviously thank you, Jim. Jim is a constituent of mine, as I think I mentioned earlier on. I really appreciated the presentation, Jim.

Families are your solar plexus, I guess, if you're a parent who loves their children and most parents do. Most of us are parents and we often find it hard, even in the House, to talk about family. What I was wondering, Jim - when you get together with your peers, do you get a chance to talk about and evaluate the program?

JAMES DAVIS: Yes, we do.

GARY RAMEY: How often does that happen?

JAMES DAVIS: That's been happening quite often for myself. I've been no less than once a year and some years it has been twice a year, every six months. There are three things that are happening. One, there's a training session when we bring in new people and when they come into the program, a couple of the regular volunteers obviously are invited to come to help orientate the new ones. Those are very intensive meetings. Then we have our professional upgrading ourselves where 10 or 15 of us will be taken to a resort for another week's training. They're very intensive programs.

Then once a year we have a retreat. When I hear the word "retreat", I say this is going to be great, we won't be working, it won't be stressful and we'll have some fun. But we always end up turning those retreats into workshops. We do get together and we do get into some very serious discussions. After those retreats are over, I basically come home and I'm drained. They are good, they are helpful.

GARY RAMEY: Are they national? Do you meet regionally?

JAMES DAVIS: They're national. We're not regional yet. We've discussed that -should we be broken off regionally? Should I and a couple of others be looking after the Maritimes? I have clients that are in British Columbia and so forth but we're still national and our contact is by telephone.

I will give you an example of the type of thing we do when we get together; we do the workshops during the day and then in the evenings it's social. We just had a retreat at Oak Island Inn, I think it was two months ago, and they came from across Canada and

it was cheaper to bring them all across Canada to Nova Scotia than it was to take the Maritimers out; I was looking for the latter (Laughter). So we had one at Oak Island Inn and in the evening we would sit around and we have supper and relax and enjoy it. I wanted to make a point, to give you an example of the type of atmosphere that takes place.

At that supper, Don Bolland, the gentleman I mentioned earlier whose son also died in Afghanistan, Don's son was killed in the incident that Shaun Fevens was in. Shaun appeared before this committee when we were here before and Shaun was the lone survivor - I believe six soldiers were killed and Don's son was one of them.

As you know, we just lost five fishermen in Woods Harbour and that hit Don hard - he could relate to that incident - so at our supper, Don gave a very formal toast. Every time we have a supper, we always give a toast to our boys. We raise our glasses and give a nice toast. Don did the toast that night and he named the five fishermen who were lost off Woods Harbour so we toasted the families of those boys.

GARY RAMEY: I think there are two other things too, as well as the motion that we have - which is great - obviously we're going to do that. I will be taking back what I've heard today, I'll mention it to the Premier. I think the Premier is the person who is responsible for Veterans Affairs in the province now. He was a captain in the Navy, as you probably know. I will be sharing with him. I also see an opportunity when we're speaking - often we do make speeches for various causes and if there's some kind of a tie-in or relationship, it's also possible in a speech to mention your organization.

We've been talking a lot about cyberbullying lately in the House and passing legislation - I know you know about the Rehtaeh Parsons case. One of the reports I heard the other day when I was listening to - I can't remember if it was CNN or if it was something here in Canada, but it was a report talking about head injuries. I know post-traumatic stress disorder is a big problem in relation to suicide, but they're now saying that even minor concussions - no matter how they've been caused - also seem to be a contributing factor toward suicides as well.

JAMES DAVIS: Yes.

GARY RAMEY: It's a serious problem not only in the military, but it's a serious problem in sport and we're finding that out from a lot of others, too. I know there are a lot of reasons going forward that people who are in the military and who may look perfectly healthy - I think there was an interview with a captain who looked perfectly healthy and had no outward signs of disability, but he had several head injuries and was a person who had attempted suicide on a number of occasions as well. There are a lot of things to think about there.

JAMES DAVIS: Yes, there are. Suicide has become a major issue. My personal experience with the HOPE program is that we have to be very conscious with the survivors committing suicide. As I mentioned earlier, we're not clinicians and we don't provide counselling, but we receive training so that if we sense that we recognize somebody as suicidal, then what would happen is - if I was talking, say, to a mother and I thought she was suicidal over her son's death, I immediately give Sophie Richard a call and then more qualified people take over and intervene. Unfortunately, it does happen.

That's where the OSISS program deals with a lot of suicide prevention; that's the whole point of that - one of the major points of the OSISS program. It helps soldiers who are suffering with post-traumatic stress. It is a huge issue and that's why our program is, unfortunately, going to be needed, too.

I was watching Senator Roméo Dallaire talking on television on a CBC documentary, *Broken Heroes*. I was stunned when he made the comment that the United States of America lost 55,000 soldiers in Vietnam, but another 120,000 to suicide and he made an interesting comment. He said post-traumatic stress - the suicide aspect of it may not show up maybe for many years later. The danger of that never goes away. And when he was saying that, I know he was talking about himself.

GARY RAMEY: Part of what has made life different, I think, in the military is the fact that he was so willing to explain his own personal difficulties and what he went through - not only when he was in Rwanda, but when he came back.

My final point relates to something Mr. Gaudet said, and I think it's an important point. I think what Wayne asked you was, how are you doing yourself? It relates to that. You mentioned early on when you were speaking about the group, about the chap who was your good friend from B.C. - I think it was the other end of the country you mentioned or somewhere out West - who was your brother, passed away. I was just wondering, within your own group when that sort of thing happens, what is the care that you get? Obviously those bonds, I'm sure, are deeper than just regular bonds.

JAMES DAVIS: I'll tell you, my eyes are getting watery as I speak because . . .

GARY RAMEY: Well I don't want to make you . . .

JAMES DAVIS: That's all right - that's why I'm here.

Brian Isfeld - it's amazing how close he and I became. His son died in Croatia, long before the Afghanistan conflict and as I mentioned, the first time I met Brian was at the first meeting of this HOPE program. Brian had been in the Air Force himself. He lives in Comox, British Columbia. When I met Brian he had a briefcase in front of him and he opened his briefcase at the meeting and there was doll inside his briefcase. I didn't know anybody at this meeting, it was all new. Anyway, I looked at Brian and I said,

Brian, what does a man have a doll in his briefcase for? He looked at me and said, you don't know what that is? I said no, Brian, I don't, what is it? He said that's an Izzy doll. I said, what's an Izzy doll?

I quickly found out. When his son Mark died in Croatia, Mark had been sending pictures home to his mother. He took a picture of a broken doll in the wreck of this building, this home that was bombed. It's an incredible picture. He sent that picture home to his mom and he said, can you make me some dolls, I want to pass them out to the children. When Mark was killed, his comrades in the military decided to keep the practice up, so now the Izzy doll is phenomenal. They're literally making thousands of them and they're being sent around the world.

This broke the ice with Brian and I and we became good friends. Well Carol, his wife, who was the one who pushed these Izzy dolls, died of cancer. I'm trying to bring back my memory - there was a peacekeeping weekend in Calgary where they have Peacekeepers Park and Brian called me and said I had to come out in August to the Peacekeepers Weekend because they were unveiling this monument. I said Brian, I don't know if I can justify the expense of flying out to Calgary. I know your son's name is going to be on the wall but I said I really can't justify flying out. He gets annoyed at me and says Jim, for Pete's sake, your son's name is going to be on the wall. I said, my son, why would that be on the wall? He said because they're going to put the Afghanistan fallen on this wall also.

To make a long story short, I go out to the event, I'm there for the weekend, it's a wonderful weekend, and Carol dies; his wife dies of cancer. So I come back home - she died the day after I came back home. I knew there would be a funeral and I told Brian I didn't think I could come to Carol's funeral. No problem, Jim, he says you have to be out here in B.C. in September, right, for a fundraising dinner? I said, yes. He said that's when we'll do the service. I said you're going to hold off Carol's funeral until I come out? He said no problem, and that's what he did. I don't think it was just because of me - it was an opportunity for other people to come. So it was quite a funeral.

Anyway, then Brian gets sick and he's dying of cancer. You asked me earlier where the funding comes from, the military. I said I don't know the logistics of where all the budget money is, but I know there is some fund put aside to help families. Anyway, I get a phone call - the military sent me so I could say goodbye to Brian. I flew out to British Columbia and said good-bye to Brian, and two days later he passed away. That was incredible for the military, I think, to have done that for me.

GARY RAMEY: That's why the funding should continue, yes, for sure. Thanks, Jim.

THE CHAIR: Mr. Porter.

CHUCK PORTER: Thank you, Gary. I just wanted to say quickly, thank you very much for the presentation today and keep up the great work that you're doing. We look forward to getting that letter off to the feds to try to keep that going.

Something to Junior's point, he mentioned about if there is something we can do, after you leave here and it's two months away and something comes to mind that we can do to help promote this in any way, contact this committee, please, and we'll see what we can do to help you.

JAMES DAVIS: Thank you, Chuck.

THE CHAIR: Is there anything else that we wanted? Jim.

JIM MORTON: Just one thought, actually. I'm not a regular member of this committee but a thought occurs to me. I don't know if there is any practice here in doing such a thing, but because Jim is here to promote such a particular program, one tool he might use is a press release that would mention Jim's presentation to the committee and name HOPE, and perhaps provide a phone number and a Web site contact which might get used by some of the media and some of us could use in our local ways in distributing information. That would be a least a practical way of helping to get some word out, if the capacity is there.

THE CHAIR: You want to make that suggestion Jim?

JIM MORTON: I will make that a motion that we prepare an appropriate press release to help let Nova Scotians know about Jim's presentation to the committee and about HOPE.

HAROLD THERIAULT: I'll second that.

THE CHAIR: So we would do this through the committee's office.

JIM MORTON: Yes.

THE CHAIR: Is there any other discussion about this motion? Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

Are there other responses to what Jim has explained to us. If not then Jim, just to make sure, did you have anything else that you wanted to say to us?

JAMES DAVIS: In my final closing remarks I would like to say how appreciative I am to be invited back for a second time to speak before you. It's been seven years since

my son died and I do get invited to do some presentations, like I mentioned earlier, I help out sometimes at the assistant officers training and so forth.

When I received the phone call from Kim being invited back here, I thought to myself, my goodness it's been seven years and I'm still being asked to speak. Does it ever end? I thought, no, I don't want it to end because it's very therapeutic for me to do this. I will walk out of here and on my drive home this morning and all of a sudden I will feel better and so I want to thank you for that.

I certainly appreciate the opportunity for you people to listen to what I had to say. I'm so very proud of the whole program and I think anything you could help out with would be tremendous because I do see the benefits of it. We help a lot of people and I thank you for that.

THE CHAIR: Well the benefits for sure are obvious as you explain it, and I know I'm speaking for us all in saying it's very meaningful for us to have this presented and for you to share the work that you and your friends are doing through this program.

I think that we'll conclude our discussion for this morning. We are glad to be able to write this letter and issue this press release and we hope that this will be useful.

Why don't we then take five minutes to move into another part of the meeting where we will deal with the organizational matters, so we'll just take a little break. Thank you again.

[The committee recessed at 10:08 a.m.]

[The committee reconvened at 10:19 a.m.]

THE CHAIR: So returning to the agenda, there are just a couple of simple matters about correspondence. We have this letter from the HMCS Sackville people, following up on the committee's visit there. Is there anything to do with this except receive it for information?

Do we agree to do that?

It is agreed.

The second is a letter from the Minister of Veterans Affairs and the package of correspondence below that is just what has been sent and returned - the context for that letter from Steven Blaney, which I guess is probably in the same category. Is there anything to do with this, other than receive it for information?

Is it agreed to receive it for information?

It is agreed.

Then the date of the next meeting - June 13^{th} - all square for that - there is no reason why we shouldn't be proceeding with that.

Is there anything else that should come before the meeting? Are we agreed then to adjourn?

It is agreed.

[The committee adjourned at 10:20 a.m.]