# **HANSARD**

### **NOVA SCOTIA HOUSE OF ASSEMBLY**

## **COMMITTEE**

## **ON**

## **VETERANS AFFAIRS**

Tuesday, September 20, 2016

**Legislative Committees Office** 

**Veterans Research** 

Printed and Published by Nova Scotia Hansard Reporting Services

#### **VETERANS AFFAIRS COMMITTEE**

Derek Mombourquette (Chair)
David Wilton (Vice-Chair)
Keith Irving
Patricia Arab
Ben Jessome
Alfie MacLeod
Eddie Orrell
Hon. David Wilson
Hon. Sterling Belliveau

[Derek Mombourquette was replaced by Joachim Stroink.] [David Wilton was replaced by Iain Rankin.]

In Attendance:

Darlene Henry Legislative Committee Clerk

Gordon Hebb Chief Legislative Counsel

#### **WITNESSES**

Maya Eichler, Canada Research Chair in Social Innovation and Community Engagement, Mount St. Vincent University

Dr. Deborah Norris, Associate Professor, Department of Family Studies and Gerontology, Mount St. Vincent University



#### HALIFAX, TUESDAY, SEPTEMBER 20, 2016

#### STANDING COMMITTEE ON VETERANS AFFAIRS

2:00 P.M.

CHAIR Joachim Stroink

VICE-CHAIR
Iain Rankin

DARLENE HENRY: Good afternoon, and welcome all. In the absence of a chairman and a vice-chairman, the committee needs to elect an acting chairman from among the members present for the purpose of this meeting today only. The floor is open for nominations. Ms. Arab.

PATRICIA ARAB: I nominate Mr. Joachim Stroink.

DARLENE HENRY: Further nominations? Hearing none, Mr. Stroink is now the Chair for the meeting today.

[Joachim Stroink assumed the Chair.]

THE CHAIR: Good afternoon. I would like to call this meeting to order. This is the Standing Committee on Veterans Affairs. My name is Joachim Stroink and I'm the MLA for Halifax Chebucto. We'll be receiving a presentation from Dr. Maya Eichler, of Mount Saint Vincent University, regarding veterans research with Dr. Deborah Norris, associate professor Department of Family Studies and Gerontology.

I ask you to make sure that all phones are off. I have a request from the witnesses that they need to leave here by 3:30 p.m. in order to get back to teaching. I will keep a speakers list as we go along.

If I could just start to the right of me with introductions, and we'll go from there.

[The committee members introduced themselves.]

THE CHAIR: I will turn it over to our guests today. I will just ask our guests, before they speak, to be recognized by myself in order for Hansard. I'll turn it over to Dr. Eichler.

DR. MAYA EICHLER: Thank you very much. I want to thank the committee first of all for inviting me and my colleague, Dr. Norris. This is a wonderful opportunity for us to share with you a little bit of the type of research we're conducting at the Mount. As you know, I'm an assistant professor in Political Studies and Women's Studies at the Mount. I also hold the Canada Research Chair in Social Innovation and Community Engagement. Most recently, I opened up a centre at the Mount; it's called the Centre for Social Innovation and Community Engagement in Military Affairs.

The focus of my research is on military and veterans' issues, and there's two main areas that we're conducting research in at the Mount at the moment. The first main area is on veterans policy and the transition from military to civilian life. The second area is on gender integration and sexual misconduct in the Canadian Armed Forces.

My colleague and I are involved in various national and international collaborations, but we're also doing work at the local level. At the local level, I'm particularly interested in thinking about how the community more broadly is impacted by experiences of war, so one of the things I'm trying to do is make some connections between the veterans community and other communities impacted by war, such as the refugee community in Nova Scotia.

Some of the work that we have been doing is contract work with Veterans Affairs Canada. We will talk about that a little bit as well. But we're also doing some independent research, which I'm going to focus on mainly here in my presentation. I want you to keep in mind that this research is still ongoing. I only came to the Mount two years ago, so it's not completed, and it's difficult to generalize. But I can share with you some of the work I'm doing, some of the questions and some of the preliminary insights.

The research I'm doing is very much focused on the new generation of Canadian veterans. These are veterans who have served since the 1990s and have since released from the military. I'm interested in better understanding what particular challenges this generation of veterans faces.

To understand the context in which these veterans are releasing, I think there are two important factors to keep in mind. The first factor is the huge increase in operational tempo that we've seen since the end of the Cold War, which has resulted of course in a greater increase of deployments and therefore a greater burden on serving members. We

see that this new generation is releasing at a younger age and is more likely to be released for medical reasons. Of course, this is very relevant for the military-to-civilian transition.

The other important fact in terms of understanding the context of the transition for the new generation of veterans is the New Veterans Charter, which came into effect in 2006. The New Veterans Charter has, I believe to a certain extent, reshaped the social contract between veterans, the state, and society in Canada. We see, for example, that many more actors are involved in service delivery and in programs. Today the non-profit sector and the private sector also are heavily involved in offering programs for veterans.

What veterans are confronted with is really a very complex field of programs and services to navigate. I would say the new generation of veterans is quite fractured along lines of service experience and deployment, and levels of political engagement. This generation also organizes in new ways, and that's something important to keep in mind for those of us who work with veterans and design policies. The new generation of veterans isn't organizing in the same ways that the older generation did. A lot of organizing is happening online, through social media, and less those traditional forms of organizing such as through the Legion.

Now I've been conducting interviews with veterans and their service providers and family members to better understand some of the experiences and challenges of this new generation. I want to share with you three emerging themes that come out of these interviews that I've been doing and that I think can give us some insight into the experiences of veterans and some of the challenges.

The first aspect I want to talk about is the role of military culture in the transition itself. Veterans often talk to me about the intense period of socialization they go through when joining the military. Of course a lot of veterans join at a very early age, so that is really their period of becoming an adult and becoming a person and developing an identity. Veterans often mention that there is no equivalent preparation for the return to civilian life. There are some programs in place but there's nothing of the same magnitude. That is difficult because the military identity is not easily shed, so in some ways it's challenging to even think of this as a transition from A to B, from the military to civilian life. Rather, the military identity often remains the central identity for veterans transitioning to civilian life, so it is important to keep that in mind.

Veterans also talk about the fact that for the younger generation of veterans, there isn't a clear-cut veteran identity to step into. We often in the public still have this image of World War II veterans or Korea War veterans even as the exemplar veterans, so that can also cause challenges in terms of what is this identity of the new veteran.

The second aspect that has been coming up in the interviews is the gap that veterans identify between military and civilian culture. They'll often talk about it in terms of a cross-cultural encounter almost. They will speak the same language as civilians but they might

use different terminology that creates miscommunications. They also often mention that the military experience has given them, for example, a different work ethic, a different sense of professionalism, which they then find not well reflected in the civilian sector for example.

Military culture itself is often seen as both a benefit and a hindrance. Veterans will say that in some ways they're very well-prepared to enter the civilian workforce because they have, for example, a strong work ethic and good organizational habits, but there are certain aspects of the military experience that also make it more difficult to transition into civilian society. One of those themes that comes up a lot is this issue of a military ethos of strength, or as I called it in my presentation, tough masculinity. There's a certain way in which the training has not made it easy for veterans to ask for help when they need it, because this idea of strength and not showing weakness can enable stigma towards seeking the supports that they need to be seeking.

The final point I want to mention is the New Veterans Charter. As you can imagine, there is a lot of debate and conversation over the New Veterans Charter among the new generation of veterans. Generally, the sense I get from the interviews is that everyone agrees that, yes, we needed new policies to better reflect the needs of the new generation of veterans. At the same time, there is a lot of conversation over how the policy still needs to be improved. Obviously the lump-sum payment is the big issue here, all of you are well aware of that.

Other veterans will argue that the policies are okay, but they're just not being implemented correctly and there's not enough benefit of the doubt given to veterans - for example, when making claims for benefits.

Of course, the struggles over access to benefits - and these are often the case for a veteran who is already medically releasing and has medical injuries is another aggravating factor in the military-to-civilian transition.

Next I want to move on to talk about a different aspect of the transition, one that doesn't get discussed much, and that is gender. As all of you who deal with these questions of military-to-civilian transitions in your daily work, I'm sure you're well aware that the transition is a very complex process. It involves many different factors from employment to health, psychological issues, and it happens at many different levels. It's not just the individual who is involved, but the family, community, and society more broadly.

One aspect that doesn't get a lot of attention that I'm trying to draw more attention to in my research is the question of gender and the role of gender in military-to-civilian transitions. I think gender is important to consider because the military is still a very gendered institution, and therefore it is worth thinking about how the fact of the gendering of what it even means to be a military service person impacts the possibilities for transition.

So I'm very interested in how service-related gendered experiences impact the health and well-being of veterans.

Veterans Affairs Canada is starting to look into this a little bit and I am, but there's really no good research we have yet. One of the things we know from research conducted by Veterans Affairs Canada and from their life-after-service studies is that female veterans, for example, do seem to have a harder time with the transition. We know that they have a harder time securing employment. They have a higher burden of caregiving responsibilities when they leave. They have higher rates of depression and generally report less satisfaction with life after service. Why this is the case we don't know yet, and that's why I'm doing some of this qualitative research based on interviews.

I think the importance of gender has also been highlighted by the release of the Deschamps report that you will all be familiar with. In April 2015, the external review on sexual misconduct in the Canadian Armed Forces was released. I think that report really drew our attention to the fact that we don't know anything about how sexual harassment and assault in the Canadian Armed Forces may be impacting the health and well-being of veterans. That is an area that I've identified as important to look into.

One of the things that I find fascinating about what has happened in this area - and of course there's a lot of dynamism right now around this issue of gender and sexual violence in the Canadian Armed Forces with the release of the Deschamps report, the launching of Operation HONOUR, and there have been two progress reports released since then. So there is a lot happening; a lot of reviewing of policies and a lot of effort being made to address this issue.

One of the interesting things we've seen over the last year is the emergence of the first group of military sexual trauma survivors in Canada to organize. This is an absolute first and it is a very interesting development in the Canadian context that we have military sexual trauma survivors organizing, starting to engage in public advocacy. I think we'll be hearing a lot more from them, and they definitely need to be included in the drafting of policies to address military sexual trauma and the way it impacts the lives of veterans.

The final thing I'm going to say before I hand over to my colleague, Dr. Norris, is I'm going to talk a little bit about the importance of the family perspective and that gender research is not only about women, it is about men as well and about how ideas around masculinity shape the experiences of military members and veterans. I also want to point out that sexual misconduct doesn't only affect women. We know that men are also impacted by sexual harassment and assault in the military. Women are at a higher percentage but nonetheless, it is a problem that impacts everyone, so paying attention to gender and sexual misconduct in the military is really about the health and well-being of all military members and veterans. So, Deborah, I'll give you a few minutes to add.

DR. DEBORAH NORRIS: As Dr. Eichler noted, my focus for all these many years has been on the military family. My background is in family studies, I teach in that area at Mount Saint Vincent and my research program for the last 25 years has focused on Canadian military families, primarily Navy families because my work has been localized, for the most part, to close to my own back door at the Mount.

What I, as well as many of my colleagues, have been able to reveal is what we refer to as the invisible work of military families, primarily military partners, military spouses. There are generally three areas of concern or three areas of stress for military families. They focus on combat, more recently. We know we have a generation of vets and members now who for the first time since the Korean War, have been dealing with the reality of combat. That is managed within the family unit, as is relocation and separation through deployment or some of the other imperatives that are part of the military career.

One of the things that has always been important to me is to render visible the invisible work of military partners - family members overall but military partners. Not to diminish some of the stresses and the seriousness of the negative fallout from their work because there are some serious implications from managing that invisible work. Some of my work is focused on secondary trauma, which is a clinical term from psychology that speaks to the reality of a transfer or a contagent effect from the primary sufferer to the people who are supporting the sufferer, so there's those issues to contend with. My work and the work of others here in Canada and the U.S. has brought that problem into view.

More recently, as Dr. Eichler noted, while my work focused mostly on deployment, more recently through the opportunities we've had of late - thankfully, through Veterans Affairs contracts - we're working with colleagues at Queens and the University of Calgary to emphasize some of the additional stresses that we're now putting forward that focus on the transition from military to civilian life. Again, my work has honed in on how the family is managing that. Essentially what the work emphasizes is a bi-directional relationship between the military family and the stresses of military life, which transcends, moves forward into civilian life as the transition unfolds into the life of being a veteran family, from being a member family, so we focus on that.

We also focus on how the family can make a difference. While my work, and we certainly got well-grounded in all the negative impacts by virtue of a huge piece of work that we did last year, I believe - time flies - where we did a scoping review of international literature around the world. It was somewhat daunting to realize what the literature is revealing are the negative impacts. That being said, there's a handful of literature that also emphasizes the capacity for military families to be strong.

Now "strong" can be used in a somewhat Pollyanna fashion, but I'm convinced, after 25 years, that there are many competencies and capacities within military families that sometimes are able to support the member better and the family in moving forward and managing challenges. But there would be greater opportunity for that to happen if we

had more acute attention paid to some of the programs and policies that can support military family members, particularly spouses, and veteran family members.

We also revealed a number of examples to that effect by virtue of another VAC-funded project we did last year, which was an environmental scan of programs and services that focus on families across the military, disability, and transition. So the ideas are out there. The programs are out there. There's lots of ideas that are germinating, but we need to have more attention paid to growing those ideas because as I've noted, the central principle of our work is revealing this interesting bi-directional relationship between the family and the military member or veteran.

We also need to know more. This would not only inform the work of researchers like me as an applied researcher, and we both consider ourselves to be such - this work is also taken forward into the community and to the policy arena. We also need to know more about the mechanisms that can either exacerbate the problems in the first place and yield all those negative outcomes that we've become so acutely aware of, or on the flipside can make a difference in a positive direction. To this point, we know little about some of the interrupters, some of the mediators or moderators that can shift the balance such that we can see more resilience, more post-traumatic growth. One of my grad students and I right now are focusing on post-traumatic growth as a complement to post-traumatic stress. If we knew more about how that can happen, I think we'd be doing great service to the Canadian men and women in uniform or who formerly wore the uniform.

That's what I would like to say about military and veteran families.

THE CHAIR: Thank you very much. We'll start off with Ms. Arab.

PATRICIA ARAB: I just have a quick question, and I think, Dr. Eichler, you would be the one able to answer it. Your research states that female veterans are under-diagnosed but have a higher risk of PTSD. I'm wondering if you could tell me what your research has shown as to why this may be the case and what supports can be put in place to help us diagnose more regularly, more effectively, and then have the supports in place.

MAYA EICHLER: I'm going to talk here based mostly on the U.S. research because in Canada we don't have a lot of research on this. We do know in Canada's serving military members that women are more likely to suffer from military sexual trauma and suffer PTSD, but that's all we really know.

In the international literature, and that's mostly the U.S. literature, one of the focus areas of study in relation to female veterans has been the connection between military sexual trauma and post-traumatic stress disorder. There seems to be quite a high correlation there. That is something we need to find out more about in the Canadian case.

Why that is under-diagnosed, there are a lot of reasons for that. I would say that one reason that military sexual trauma and its relationship to PTSD is under-diagnosed has to do with some of the problems around reporting in the first place - reporting sexual harassment and sexual assault in the military. That was one of the key problem areas identified in the Duchamp report as something that needs to be worked on much more.

One of the things actually that my colleague Dr. Norris and I have been working on as well in the Atlantic Region is that I co-chair the only military civilian working group on responding to the Duchamp report. We're working with the 5<sup>th</sup> Canadian Division, the army in Atlantic Canada, and practitioners from the community who work on sexual violence prevention. One of the things that we've been developing over the last year in that working group is offering better instructions to superiors on what to do when someone comes with a report. Right now, the problem with reporting is that as soon as someone reports sexual assault in the Canadian Armed Forces an investigation is triggered. That is a disincentive to reporting.

So the first problem is that people can't report, so if you can't report or if you aren't inclined to report because you don't want to trigger an investigation, you are less likely to be able to seek medical help. So we also probably need better training of medical doctors within the military and outside of the military - civilian medical doctors - to be able to treat military sexual trauma and diagnose it appropriately. So those are two of the problems.

Operation HONOUR is starting to address some of those, so they're trying to introduce programs that are more victim-centred or survivor-centred, and that allow for reporting to happen without an investigation. For example, with the new military sexual response centre, they allow for reporting. This is the independent body that was created last year and is still being fully fleshed out. You can now make reports to that sexual response centre without triggering an investigation. I think that's the first thing that needs to happen. We need to be able to allow people to report, and then to be able to be diagnosed.

PATRICIA ARAB: I have a number of questions and I'm just going to focus on one at the moment. You talked about reporting and reporting to senior management. We don't have a lot of women who fill those roles in the Canadian military, is that correct? So there could be an assumption or a working theory that if we had more women who were the ones responsible to be reported to, you would be creating an environment that would make it for female members of the military who had suffered sexualized violence or any sort of - have an issue to report, but feel more comfortable in doing so to a female senior. What has your research found in terms of why women aren't generally in these roles, and what kinds of conditions can we create to encourage that more often?

MAYA EICHLER: I agree with you that one of the key factors to improving the situation for gender integration and for reporting on sexual violence is to have greater representation of women at the leadership level - though I think that's only one part of it. So yes, better representation of women in the leadership - but also then we need the

procedures in place to allow for reporting to happen. So I would say we really do need both.

In terms of why there aren't more women - I think in some ways the Deschamps report talks about that. Her findings show that there is still a gendered and sexualized culture in the Canadian military. The military has a hard time recruiting women and retaining them in part because of that. There might be other reasons as well, so there might be pressures that come from the civilian side of things that women want to - it is difficult, for example, still to have a family, especially if it's a dual service family. We have a lot of dual service military families in Canada. So maybe there are other pressures to leave as well, but certainly I would say that gendered and sexualized culture is one of the determining factors for why it's hard to recruit more women and retain them and get them into leadership positions.

THE CHAIR: Mr. Orrell.

EDDIE ORRELL: Thank you for your presentation. We hear a lot of trauma, post-service PTSD, sexual violence, and all kinds of things that happen to people while they're in the military, and the transition to civilian life is very difficult for them.

In February last year, I was speaking with a gentleman by the name of Medric Cousineau. He formed a group - Paws Fur Thought - that use service dogs to help with that transition. I think by doing that it would bring more people forward to discuss their problems knowing there may be a solution for them in the end.

We proposed to put forth some kind of tax relief for someone who may need a service dog because of the expense and training, maintaining - and if a person is living on just a military pension and trying to do a little bit of here and there to survive, the cost of that is high.

I wonder in your travels have you come across any indication that this tax relief for medical purposes may be something that the federal government, which is a relief that way, would be proposing. If not, is there some way we could maybe encourage that so that people will come forward and seek the help they need and maybe get some of the help they need because of the expenses in claiming it?

MAYA EICHLER: Yes, I think that service dogs in many ways are cheaper than other medical treatment, so in many ways it does make sense and it seems to be working. I think there's ongoing research into its effectiveness as well, but I think what we know so far and anecdotally is definitely encouraging.

I haven't come across proposals for a tax relief for service dogs at the federal level but I might not know about that. I guess it is an interesting question to ask what role the provincial government can play in these issues. It's also interesting for me to come and talk to you, as a provincial level body, because I myself am curious about what are some of the ways in which the province can play a more proactive role here. I think this might be something for you to consider. I would certainly encourage that.

There's not a lot that provinces are doing at the moment so as part of the environmental scan of programs and policies that we conducted, the thickest report you have in your briefing notes, at the end of that there's a whole list of programs and policies that exist. I think there's one province that has tax relief, for example, for low-income veterans under the age of 65 who buy new property. There's tax relief on their property tax, so something like this in a different context does exist. I guess it's B.C. that has the homeowner grant that lowers property tax for low-income veterans under 65, so there are ways to do this at the provincial level, I would say. If you see possibilities for that I would encourage that.

EDDIE ORRELL: The other question I have - first just a statement. I know that having someone to look after some of the veterans who come out who don't have any family members and having someone - by someone, I mean an animal, a dog - does change your life dramatically, so that's just one way we could encourage that.

It's great that we're doing research, it's great that you guys are doing research into that because I have family members who are in the military now, and I have a nephew who just started in the military who's going to face 20 years of whatever, or 30 years hopefully, and come out and have to transition. What are the ultimate goals of your research? When it's all said and done and the research is done, are there going to be suggestions on how we can better treat, recommend where to go, how to go? I guess the ultimate goal of your research is hopefully to benefit all veterans and all military families in the transition to civilian life - male, female, higher level, lower level, whatever - I guess, what is the ultimate goal?

MAYA EICHLER: That's a big question.

EDDIE ORRELL: I'm sorry to ask that question, but it could be answered . . .

MAYA EICHLER: There are many goals, and each research project has some of its own unique goals. With the work that we're doing with Veterans Affairs Canada, we very much focused on doing the kind of research that can help improve policy and programming. We're all sort of playing catch-up, both researchers and policy-makers; we're playing catch-up with the realities of the new generation of veterans. Veterans Affairs Canada, a couple of years ago - it's not very long ago - launched a new research program called the Road to Civilian Life, but this is only maybe two years old or so. So they're playing catch-up and we are sort of also - we just started this research a couple of years ago, so yes, partly the goal is to improve policies and programs.

I guess in my independent research, one of my main goals is for us to pay more attention to the long-term social and human costs of military deployments. I think that does not figure enough into our calculations of how much it costs to deploy troops overseas. So we have a very short-term mind frame and a very short-term memory actually of the costs. I think in my personal research that is one of the things that I want to draw more attention to: we need to think about our military deployments and their impacts over several decades. I don't even think we have seen the high point of the impact of our deployments to Afghanistan yet. That is my personal research goal.

With the more community-engaged research that I do, I want to also help strengthen some of the connections in the local community among different members of the community who are affected by war. That's why in April, I organized that workshop that you saw the report from, called Community Stories of War and Peace. We had veterans and refugees and peace activists and local artists who do work on war come together and try to find commonalities. I think there's also something more beyond the policy world and the research that can be done at the community level because especially in Nova Scotia the community is so heavily impacted by experiences of war. For me, of course, it's a wonderful place to be doing my research because it resonates with a lot of people across the board. I think it's also about the community-building that we can do with our research.

Of course, there's different methodologies in research. Both of us are qualitative researchers, so we do a lot of in-depth interviews; we don't do as many surveys, for example, we do a lot of in-depth interviews. But there's also something called community-engaged research, which is a new way of doing research where you are participating with communities, with members of the community, and they are partly informing what kind of questions you're looking at. I'm also doing some of that research. That takes even more time than the qualitative research because you have more participants, and everyone's involved, and you don't necessarily know in the beginning where this is going and what the questions are going to be. But that's about responding to the needs of the local community.

DEBORAH NORRIS: It is a really provocative question, what are the goals. It's hard to slice and dice it, but I would echo many of the things that Dr. Eichler has said. From my own personal standpoint as a researcher focusing on families, as I noted in my brief presentation, I'm very interested in breaking down some of what we conceptualize right now as linear relationships between military service and outcomes for families. There's got to be something in between that straight line that we have been drawing for decades nownot just in Canada because really, if I may say, research on military experience including military family experience is underdeveloped in this country. As Dr. Eichler noted, we're playing catch-up.

To the extent that we have good-quality research, it's still formative. We're not at a place yet where we really understand some mechanisms that can make a difference. Mechanisms that either, as I noted earlier, make things more complicated and complex for

families and the member veterans or, on the alternate side, support the member veteran and/or his or her family in managing the realities of contemporary military experience, including family experience, or support the member and family in moving forward through that transition in the best possible way.

So we need to get more sophisticated, complex models that will enable us to dig deeper into some really key questions so that if we are going to explicate some of the social costs of deployment and war - which is where Dr. Eichler's research lands, on the family side - we need to have models that are going to help us do a better job of figuring that out.

We are researchers, and researchers very rightly sometimes get branded as just doing research, but we're applied researchers. We're really interested in transferring this knowledge out into places where it can make a difference.

THE CHAIR: Mr. Wilson.

HON. DAVID WILSON: Thank you for your presentation. I have a couple of questions on your contract with Veterans Affairs Canada; I think I heard you've had a couple of contracts. Is it for a length of time? If it is, how long is it? Do you have to go back to the government on an annual basis and ask, is the money going to continue to be there? Are you spending time ensuring that that's still there, or is it, here's a pot of money, and the length of the contract is over how long?

MAYA EICHLER: We have had full contracts over the last two years. These really started when I came to the Mount and that coincided with the fact that now in Canada there is something called the Canadian Institute for Military and Veteran Health Research, which is an organization that tries to promote veterans research, and that links different universities across the country.

The Canadian Institute for Military and Veteran Health Research, which is located in Kingston at Queen's University brings together - it's at least 40 partner universities in the country. The emergence of that organization also coincided with Veterans Affairs Canada doing more research on the new generation of veterans and so the contracts go through the Canadian Institute for Military and Veteran Health Research. It manages those contracts. We usually apply to them for those grants.

Dr. Norris was the principal investigator on three of those, so I'll let her talk about those in a second. I will just talk about the one that I am now principal investigator on and that is just beginning now. Actually, that's where I have to be at 4:00 p.m., which is why I requested to leave at 3:30 p.m. We're having our first meeting.

That is a very interesting study and that is the longest one that we will be doing. It is over four years. It is really the flagship study in this new research program of VAC called the Road to Civilian Life. This research study is a longitudinal study on the mental health

and well-being of veterans undergoing military to civilian transitions. Longitudinal means the research is going to be conducted over several years and we're going to be going back and interviewing the same veterans at three points.

No such study has ever been done in Canada to follow people through what is the called the peri-release period, so a couple of months before they're released, and then maybe six months after, and then again to really track that process of military to civilian transitions.

That is a really big study and that involves not just the Mount, but the other principal researchers, principal investigators at Queen's University and at the Université du Québec. We also have an international partner at King's College London who is giving us some advice on how to conduct the study because they have done a similar large study in the U.K.

So that contract is a long one, over four years. I'll let Dr. Norris talk about the other one. Some of them are quite short.

THE CHAIR: Dr. Norris.

DEBORAH NORRIS: The other contracts, I have been a co-principal investigator on along with my colleagues - one colleague at Queen's, Dr. Heidi Cramm, and more recently with Dr. Kelly Schwartz at the University of Calgary.

The first of those projects involved Dr. Cramm and I directly as leaders on that project - I refer to it as a foundational study. It was the study I mentioned in my remarks that focused on a scoping review of the Canadian and international literature that examines the impact of operational stress injuries, most notably PTSD on military and veteran families. That was our first project.

The second project - and I think from VAC's perspective, they see these as part of a cohesive whole that are embodied within their larger program that Dr. Eichler noted earlier - the Road to Civilian Life program - trying to get a base line of knowledge. So complementing the scholarly review, the scoping review, was this environmental scan that we also did, and I was the co-principal investigator on that one as well with my colleagues - although Dr. Eichler was involved - which was looking at all of the programs, services and policies federally, provincially and at the community level that support military and veteran families through the MCT, military to civilian transition period or what we refer to as the peri-release period.

Interestingly, out of the larger scoping review - just to show how these programs of research kind of feed each other - we recommended in our recommendations coming out of the scoping review that there be a longitudinal study that Dr. Eichler is now leading with her colleagues, and that there be an in-depth qualitative study that would examine the

impact of service on the mental health and well-being of Canadian military families through the MCT process, but also would examine how families can support the member and the veteran - getting back to that bi-directionality that I referred to earlier.

Again, that project is looking at the family members' perceptions of services. Now we're not doing any formal evaluations, we're just asking them through our in-depth interviewing what kinds of programs and policies are you accessing? Are they helping or not? Then we're asking them to do a blue sky kind of analysis for us and imagine, if they will, if everything was available to them, what would be the best possible suite of services and programs that would help them through the MCT period.

Those three projects have kind of grown out of each other, leading now to these two longer projects - the project I'm leading and the project that Dr. Eichler is leading.

To your question, we don't really know. The contracts get announced through CIMVHR - the Canadian Institute for Military Veterans Health Research - that Dr. Eichler noted. We're a pretty small community of Canadian military researchers so we kind of know about these and we apply for them. They are competitive so we've applied, we've received them, and sometimes not, and we wait and see what happens after we get this work done.

MR. DAVID WILSON: I know you indicated your hope is to see improvements to programming and policies. Is there an opportunity for recommendations to government so that after the research I know the data will be there, they can look at it? I would assume that those in the positions in government would say okay, let's address these issues that have been found through some of the research. Are you making recommendations or is that something that will be left to others to look at your final kind of document and say okay, we should be tackling some of the issues that you brought up?

MAYA EICHLER: In the conclusions to reports there's usually some recommendations. I guess in terms of our other research there are no formal channels to give recommendations but there's a way that one can contact the right people and send them one's recommendations. So I guess in terms of the contract work we do with VAC, certainly there's a place to make some recommendations at the end of reports and our conclusions.

Otherwise, I mean, I think there's a lot more openness to hear from researchers these days so there's definitely forums where we can go and present our work, including the annual forum of the Canadian Institute for Military and Veteran Health Research. That might be one of the places where we share our recommendations.

THE CHAIR: Mr. MacLeod.

HON. ALFIE MACLEOD: Thank you both for your presentation. This year the province released the Sexual Violence Strategy. I'm curious, because of the large number of Armed Forces people who are in and around our province, if, indeed, you were consulted with regard to the implications that violence has on those who are serving in the Armed Forces?

MAYA EICHLER: No, I don't believe that either of us were part of that. I guess I'll say two things; one is there is another interesting initiative at the Mount that just emerged this past year, which is called the Sexual Violence Prevention Network. That's the only network that involves university researchers. It involves the Nova Scotia Advisory Council on the Status of Women and it involves community groups working on sexual violence prevention. That is an emerging network that we're both part of and we are sort of the ones trying to bring the topic of military-specific sexual violence into discussions there.

As an offshoot of that project, there is that working group that I co-chair and that Dr. Norris is part of with the 5<sup>th</sup> Canadian Division. That is an interesting development because the 5<sup>th</sup> Canadian Division came to the Mount last year and said that they would appreciate some advice on how to respond to the findings of the Duchamp report, so this is really a very unique civilian/military working group that is trying to come up with resources and recommendations for how to address sexual misconduct or as the military now calls it, harmful and inappropriate sexual behaviour - in the military that's the new term they use.

To get back to your answer, we were not consulted on that provincial strategy, but I think that obviously it would be very relevant to the veteran and military community in town and in the province.

MR. MACLEOD: I would think that when you think of the makeup of the military and the population that is around our city, it would have been nice to be part of that.

THE CHAIR: Mr. Irving.

MR. KEITH IRVING: Thank you very much for the presentation. I think you're doing some important work and I think what I've learned from this is the gaps have really grown as our military has changed and the environment has changed.

My question may be a little off base, but things have changed around mental health in the last 20 years as well. We're understanding and we're de-stigmatizing it. Do we have any sense of that playing a part in PTSD, that people are now at least talking about it a bit more, or on the flipside, no, things have changed so much around that and there is no connection or there is competing things preventing it from coming out in terms of military culture that you refer to?

Is there an impact in that our society has changed towards recognizing mental illness and talking about it, or are you identifying that it is still kind of hidden away?

MAYA EICHLER: I'll begin and then I think Dr. Norris has something to add. I think that there is a parallel process going on in the military and in particular with some of the efforts of - Roméo Dallaire for example who publicly spoke about his post-traumatic stress disorder. There have definitely been efforts over the last couple of years to destigmatize mental health problems and PTSD in the Canadian Armed Forces.

That being said, I think there is still a long way to go. I do think that it is being talked about much more and that some of the stigma has been reduced, but it is still an issue and it so much of an issue because the way we define what it means to be a good and professional military member is still so much tied to not showing weakness, and being strong. So there is almost an internal contradiction in military culture. We want people to report and to go get help, but there are also real disincentives to do so, so it is a really difficult issue to address for the military.

It will require something more than changing policy. It will require something that looks more like cultural change in the military. That's where the gender piece comes in because I think it's actually quite related - the gender piece around sexual misconduct and the whole culture around mental health. We need to address both of those together because they're quite inter-related.

KEITH IRVING: I have a second question on a similar but slightly different track. It's for Dr. Norris, your work around family and family support and the impacts on family. It's conjuring thoughts of impacts of residential schools and impacts on children. Has there been much research in terms of the impacts on children in families where mom or dad has come home in a mental mess and the impacts on that family? Are we creating multigenerational effects? Are there any studies on that? Recognizing and understanding the impacts on the family would obviously be part of the difficult decisions to take a career in the military.

DEBORAH NORRIS: Yes, in fact, we're very fortunate on many levels to be working with our colleague from Queen's, Dr. Heidi Cramm. Dr. Cramm's work focuses primarily on the impact of operational imperatives on children in military families and veteran families in particular. She's positioned in such a way that she has been able to coalesce a lot of the research findings, again, through another scoping review.

Plus, she has done some primary research that points to two things. One is internalizing behaviour. There's some intrapsychic, if you will, fallout from the experience, particularly around operational stress injury, most notably PTSD and other combat-related issues. But there are also externalizing behaviours as well, behaviours that get manifest in terms of school performance and relationships with peers and the sense of efficacy or capacity to do well in life.

While it may appear at face value that with the impacts of military-related operational stress, that children are kind of on the outer rung of the circles of impact, there really is evidence to suggest - formative as it is at this point - that there is an intergenerational transmission effect. That's the lingo that they're using in the literature to denote that. Again, we need to know what are the mediating and moderating factors that cause that to happen, but also what is the potential for certain things getting in the way of making that happen so that children grow up with different outcomes related to operational stress?

KEITH IRVING: Obviously you're saying that this has been recognized. Is this an area where we still have substantial gaps in terms of support? We have a multitude of issues here. We have the military member who is obviously dealing with this. Then you have the spouse and then you have the children - all probably needing different kinds of support. Is it fair to say that the research is now identifying those gaps, but there's still a lot of work to go to identifying the programs and the supports? Is that a fair statement?

DEBORAH NORRIS: Yes, it is a fair statement. We've identified the problem, but military family research overall is underdeveloped in Canada. The phrase that was used by Dr. Eichler earlier is "catching up." We've had kind of a dry spell where we're really not up to speed with our colleagues around the world. Interestingly, when we did our scoping review of operational stress injuries and the impacts on families - I'm not sure in terms of the number of pages, but the number of pages devoted to Canadian research was minimal by far compared to what's going on in the U.S. primarily but also the United Kingdom and Australia and Israel. Israel, interestingly, has done a lot of work on spousal research but also a little bit on children. So yes, to answer your question succinctly, we know what the problems are, but we need to do a lot more work to resolve the issues.

THE CHAIR: With no more questions, I think we'll turn it over to you guys for some closing remarks.

MAYA EICHLER: Thank you for all of your questions and for having us here today. We really appreciate the opportunity. There are two things I want to say in closing. The first has already come up, but I'll say it again. Research and policy-making is very much playing catch-up with the realities of the new generation of Canadian veterans.

There are a couple of important things that I want to underscore here. First of all, what is needed - and that's why we're doing this research - is a better understanding of the long-term social and human costs of military deployments, as I've said. At the same time, I think it is important to think about the diversity of experiences and needs as the face of the modern-day Canadian veteran is changing. We need to know more, but we also need a more complex picture of what is going on.

Of course, as I've already said, we need to pay more attention to the issue of gender and sexual misconduct in the Canadian Armed Forces and how that impacts the health and

well-being of veterans. One of the important avenues that I think we need to choose in improving research and policy is to bring in more of the voices of veterans and their families. In some ways that is happening, some of the research is taking place. We are doing some of this qualitative research where we're actually interviewing veterans and trying to capture their stories.

We also see at the policy level, for example we have those six advisory groups now at Veterans Affairs Canada. Some of them include veterans, some don't. I think it's too early to say what the outcome is but I think there's a recognition that we need the people who are impacted by these policies to be involved in the design of the policies.

I would also underscore that point in relation to military sexual trauma survivors. They need to actually be included when we're trying to design policy for them.

Other ways in which we're paying more attention to the voices of veterans is through some of the projects we're doing at the Mount, in terms of the community-engaged research and bringing together different members of the community impacted by war.

Now the second point I want to make in conclusion here is that I think it's worth thinking about what opportunities there are for the province to play a role. I have a couple of points here; one of my questions is, what provincial level of services are veterans using and how can those services better respond to the needs of veterans. This will include health services but also may be specialized services for sexual trauma survivors.

The second opportunity might be to think about the ways in which we can bridge the gap between military and civilian spheres in the province, what are some of the educational programs that we can design so civilians have a better understanding of the military experience and military life. What are the ways we can find to enable veterans to participate in their communities in meaningful ways?

The third opportunity I think is to think about how to create social spaces for dialogue between veterans, civilians, policy makers and service providers at the provincial level because we don't actually have that. Your committee might be the only forum where there can be dialogue between veteran service providers and policy makers.

I think it's also worth thinking about what family programs already exist and how they can be better connected to the provincial level programs. One of the things I'm interested in and that I'm happy to follow up with any of you on is what specifically provincial level research would be of interest to you on veterans? Most of the research we're doing is very nationally focused, it's a federal issue, but what is some of the research that would be of interest for a committee like yours that is trying to study these questions around veterans? What kind of research would be useful to you at the provincial level?

The final thing I'll say is that as a follow-up to the community stories of one piece workshop, I will be participating in the Prismatic Arts Festival and I'm only mentioning this because it's an innovative way of thinking about dialogue. I will be doing a performance piece with a female veteran on the question of dialogue and how to engage in dialogue about these difficult experiences of military service, so you are all invited to the Halifax Central Library on Thursday at 12:30 p.m. to 2:30 p.m. The piece is called The Weight We Share, and we start off talking about our different experiences and then find commonalities in our experiences across military and civilian lines. Thank you for your attention.

THE CHAIR: Excellent, thank you very much. We will just call a five-minute recess so you guys can clear out and then we can do some committee business and we'll go from there. Thank you.

[3:04 p.m. The committee recessed.]

[3:08 p.m. The committee reconvened.]

THE CHAIR: All right, if we can call this meeting back to order, that would be great. (Interruptions) We're just going to follow up on the correspondence that we received from the Nova Scotia Health Authority on July 5<sup>th</sup> regarding VAC long-term care beds. Is everybody okay with that? Is there anything we need to do to follow up? Hearing nothing, we'll move on.

There was correspondence from the Pictou County Military Museum for donations to assist with the museum. Are there any comments on that? Mr. Wilson.

MR. DAVID WILSON: Maybe just a response to them that each member has received the letter and it is up to individual MLAs to sponsor, if possible, but the committee is not in a position to sponsor.

THE CHAIR: Thank you very much - good idea. The next meeting is October 18<sup>th</sup>. This will be during the House sitting so my recommendation is we don't meet when the House is in session. The next really available date would be January 17<sup>th</sup>. The earlier date would be December 20<sup>th</sup>, but I don't think that's appropriate. We still might be here so I'm recommending that January 17<sup>th</sup> be the next committee meeting.

Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is carried.

With that, I bring the meeting to adjournment.

[The committee adjourned at 3:11 p.m.]