SURVIVOR SUPPORT CONSULTATION GROUP: SUMMARY REPORT

Schedule N Canadian Armed Forces (CAF)/Department of National Defence (DND) Sexual Misconduct Class Action Settlement

October 2021

List of Acronyms and Abbreviations	
A/CDS	Acting Chief of the Defence Staff
ADR	Alternative Dispute Resolution
2SLGBTQ+	Two-spirit, lesbian, gay, bisexual, transgender, queer, questioning, intersex, pansexual, androgynous, asexual, non-binary and other gender identities
BIPOC	Black, Indigenous, and People of Colour
CAF	Canadian Armed Forces
CAF/DND	Canadian Armed Forces/Department of National Defence
CAF TG	CAF Transition Group
CDS	Chief of the Defence Staff
CF	Canadian Forces
CF MP Gp	Canadian Forces Military Police Group
CFHS	Canadian Forces Health Services
CFNIS	Canadian Forces National Investigation Service
CMPS	Canadian Military Prosecution Service
СоР	Community of Practice
CSRT-SM	CAF Strategic Response Team on Sexual Misconduct (former name of DPMC)
CVBR	Canadian Victims Bill of Rights
DAAG	Defence Aboriginal Advisory Group
DAG	Defence Advisory Group
DAGPWD	Defence Advisory Group for Persons with Disabilities
DAOD	Defence Administrative Orders and Directives
DGMPRA	Director General Military Personnel Research and Analysis
DM	Deputy Minister
DND	Department of National Defence
DND/CAF	Department of National Defence/Canadian Armed Forces
DPMC	Directorate Professional Military Conduct
DPMC-OpH	Directorate Professional Military Conduct – Operation HONOUR
DVMAG	Defence Visible Minority Advisory Group
DWAO	Defence Women's Advisory Organization
EAC	External Advisory Council on Sexual Misconduct
ERA	External Review Authority
FEWO	House of Commons Standing Committee on the Status of Women
FSA	Final Settlement Agreement

GBA+	Gender-based Analysis Plus
IACG	Indigenous Advisor to the Chaplain General
ICCM	Integrated Conflict and Complaint Management
IJ700	It's Just 700
INJ700	It's Not Just 700
MMIWG	The National Inquiry into Missing and Murdered Indigenous Women and Girls
MND	Minister of National Defence
MST	Military Sexual Trauma
NCM	Non-Commissioned Member
NCO	Non-Commissioned Officer
NDDN	House of Commons Standing Committee on National Defence
OAG	Office of the Auditor General
OJAG	Office of the Judge Advocate General
QR&O	Queen's Regulations and Orders
RCChS	Royal Canadian Chaplain Service
RS Coordinator	Response and Support Coordinator (SMRC)
RSC	Response and Support Coordination
SAEK	Sexual Assault Examination Kits
SGM	Sexual and gender minorities
SMART	Sexual Misconduct Action Response Team
SME	Subject Matter Expert
SMRC	Sexual Misconduct Response Centre
SNPF	Staff of the Non-Public Funds, Canadian Forces
SORT	Sexual Offence Response Team
SSCG	Survivor Support Consultation Group
SSE	Strong, Secure, Engaged: Canada's Defence Policy
SSMCAF	Survey on Sexual Misconduct in the Canadian Armed Forces
The Path	The Path to Dignity and Respect: The Canadian Armed Forces Sexual Misconduct Response Strategy
TRC	Truth and Reconciliation Commission of Canada
VAC	Veterans Affairs Canada
VLO	Victim Liaison Officer
VSC	Victim Service Coordinators (CFNIS)

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Executive Summary

On November 25, 2019, the Federal Court of Canada approved a Final Settlement Agreement (FSA) that provides compensation to current and former members the Canadian Armed Forces (CAF) and current and former employees of the Department of National Defence (DND) and Staff of the Non-Public Funds (SNPF), Canadian Forces, who experienced sexual misconduct.

This Summary Report is one of the final outputs from the consultation mandated by the Survivor Support Consultations policy measure ('Schedule N') of the FSA.

Schedule N originated from the class members' wish to see the DND/CAF commit to enhancements to support to survivors of sexual misconduct within the CAF. The objective is to ensure that those who are affected by sexual misconduct can, through their class representatives, directly influence the institution's policies, programs, and services to respond to sexual misconduct and to support survivors.

Schedule N commits to a series of engagements with Class Member Representatives in order to provide them with presentations on initiatives put in place since Operation HONOUR in 2015, as well as new initiatives that are being planned, and then to formally consult with them on other enhancements or priorities that should be considered.

The Schedule also requires participation around the table by DND/CAF representatives, and provides for the contracting of subject matter experts to assist the consultation group in its deliberations. It allows for the work of the consultation group to inform a Survivor Support Strategy for CAF members affected by sexual misconduct, as well as a plan for ongoing engagement with survivor stakeholders moving forward.

The consultation began in winter 2020 and involved:

- A desk review of literature on sexual misconduct, with a focus on survivor support
- A series of meetings held by three Class Member Representatives, three members of the Defence Team, and three external Subject Matter Experts (SMEs) who formed the Survivor Support Consultation Group (SSCG)
- Consultation with representatives of the DND/CAF through a series of informational briefs and presentations held between 19 August and 10 December 2020, as well as follow-up correspondence and outreach

The literature review, briefings, and meetings allowed us to identify barriers to access and gaps within current supports for CAF members affected by sexual misconduct. We noted multiple, mutually reinforcing institutional and structural barriers, making access to comprehensive, holistic, well-coordinated, tailored, timely, trauma-informed, and survivor-centred support extremely challenging.

As such, work around prevention and culture change was seen by all participants as vital in, and as inextricably connected to, an overall approach to survivor support. Further, a key element identified by all participants was the crucial need for DND/CAF organizations to undertake meaningful, ongoing, dedicated engagement with diverse survivors of sexual misconduct, as well as the need to engage, partner, and collaborate with experts and agencies across voluntary,

community, and other sectors to design approaches to support – including responses tailored to survivors with distinct needs such as women, men, Indigenous, 2SLGBTQ+ survivors, and others. This Summary Report describes the work of the SSCG, outlines the key learning from the consultation process, and sets out our findings and recommendations. The report:

- Provides an overview of the broader context of work, reviews, and recommendations aimed at enhancing support for those affected by sexual misconduct in the CAF
- Provides an analysis of what we observed about support gaps and needs
- Considers the experiences of diverse groups of affected members, including those with distinct needs
- Highlights principles, key themes, goals, and recommendations identified during our work
 that provide a basis for further engagement on a way forward for the development of a
 Survivor Support Strategy and implementation plan

Based on our work together, we identified three core principles as foundational for the development of a Survivor Support Strategy:

- cultural humility
- trauma-informed
- survivor-centred

We further identified five key themes around which to organize our proposed goals and recommendations:

- engagement, partnerships, and research
- support, especially to address service gaps
- training
- communication and information
- accountability

The SSCG's 45 recommendations are reproduced below.

List of Recommendations Theme: Engagement, Partnerships, and Research Goal: Elevate engagement, collaboration, and partnerships Recommendation 1 Develop and implement an ongoing, consistent engagement and collaboration mechanism/process that centers the expertise of survivors of sexual misconduct within the CAF, such as an Advisory Council or Community of Practice (CoP). The mechanism must permit the DND/CAF to hear directly from a diverse array of survivors about their experiences, needs, and recommendations for improving support. It should be involved in all aspects of the development, implementation, monitoring, and evaluation of policies, procedures, and initiatives to support affected members and address sexual misconduct in the CAF.

Survivor members should represent a diverse range of backgrounds, experiences, and include distinct groups (e.g. women, men, 2SLGBTQ+, Indigenous peoples, Reservists). The DND/CAF can begin the process of engaging the survivor community by reaching out to organizations that advocate for those affected by military sexual misconduct and MST in the CAF such as It's Not Just 700 (INJ700) and the Survivor Perspectives Consulting Group that facilitate survivors taking on leadership roles to determine the most appropriate structure. Survivors, whether through a sub-committee of the Advisory Council/CoP or another mechanism, should be represented on the Seamless Transition Task Force – Transition Process implementation team, under the governance of the joint steering committee, to ensure their involvement in the development of programs and services related to transition. Recommendation 2 Develop a broader stakeholder engagement strategy that prioritizes survivor engagement to hear directly from survivors about their experiences, needs, and recommendations for improving support, as well as from other stakeholders. Refine and expand the CAF's network of civilian partners and stakeholder agencies. Ensure that all engagement initiatives with a sexual misconduct nexus include a diverse array of survivors and external advocates representing a variety of backgrounds, identities, and experiences. Ensure that engagement with survivors and external advocates is designed or co-designed, and led or co-led, by an experienced, external facilitator rather than being designed and facilitated by internal staff. Recommendation 3 Work to address any potential gaps in the membership of the SMRC's External Advisory Council (EAC) on Sexual Misconduct (e.g. to include representation by those who engage and support male victims of sexual misconduct, those with expertise on Indigenous survivor issues, and/or others). Recommendation 4 Invest in projects that promote collaboration, relationship-building, survivor leadership development, and community capacity building. Recommendation 5 Build CoPs on CAF bases and wings. As part of this work, consider how to reach and engage all CAF members, including those in junior ranks, non-commissioned Members (NCMs), Reservists, and those in smaller units. Consideration should be given to initiatives that are already underway or being developed, such as a working group with NCMs, an expansion of the SMRC to the regional level, and implementation of the VLO role (i.e. through implementation of Bill C-77). Recommendation 6 Build relationships, partnerships, and collaborate with organizational staff, other relevant health and social service organizations, and key external stakeholders in the development of strategies and practices to

promote the three core principles (i.e. trauma-informed, cultural humility, and survivor-centred).

- Define the terms 'trauma-informed', 'cultural humility', and 'survivorcentred'; apply a consistent definition across units within the DND/CAF.
- Seek DND staff and CAF member feedback on the mainstreaming of such principles; promote collaboration to make organizational improvements as needed.

Goal: Address data-related issues and continue to build the evidence base

Recommendation 7 Deepen the evidence-based understanding of the diverse experiences of CAF members who experience sexual misconduct and the context around sexual misconduct. Research should: be developed in collaboration with allied community-based organizations and others with expertise in research focusing on experiences of diverse populations collect disaggregated data on various identity factors Recommendation 8 Establish a formal method to capture DND/CAF best practices and lessons learned related to supporting persons affected by sexual misconduct, and identify key barriers and strategies for bridging the gap between research and practice. Recommendation 9 Continue work amongst internal partners to inventory and coordinate available data assets and systems that are currently used across DND/CAF to capture and manage files related to systemic misconduct, which includes sexual misconduct. Recommendation 10 Leverage partnerships to standardize and use consistent definitions and terminology related to sexual misconduct, ensuring that definitions and terminology are applied consistently in the context of data, research, and knowledge translation and dissemination strategies. Moving forward, there should be greater precision and consistency in the use of language in reports and in the dissemination of data (e.g. the differences between incidents, reports, investigations, charges,

Theme: Support

misrepresentation or misinterpretation of results.

Goal: Create a well-coordinated, seamless, and accessible model of support

Recommendation 11

With funding from Budget 2021, improve access and direct support by expanding the SMRC's Response and Support Coordination (RSC) program, putting in place regional coordinators at bases, units, and wings.

Further, data sources should be clearly identified and limitations of

the data should be clearly noted in reports as to avoid any

RS Coordinators must be allowed to escort survivors to any meetings they have and must be available to assist the chain of command in helping to develop a safe work environment should the survivor wish to remain in that work environment.

Recommendation 12

Undertake a comprehensive analysis/study of current support services across the DND/CAF, with a focus on identifying specific support gaps and barriers and ensuring consistent application of approaches that are trauma-informed, survivor-centred, and that promote cultural humility.

- Fully examine governance, recruitment, policies, and application of policies.
- Fully map vulnerability points within the DND/CAF that impede victims'/survivors' access to support and/or create risks for "falling through the cracks".
- As part of the analysis, place emphasis on workplace accommodation and transition-related gaps, along with solutions for addressing them that prioritize survivor choice.
- Undertake a detailed analysis of how trauma survivors are served by Health Services (e.g. Is there universal screening of all issues of trauma as a matter of procedure? What is the standard of training of mental health professionals at Health Services? For contracted external services? What qualities of best-practice care, including best practices for various specific populations, are implemented?)
- Ensure that issues of trauma are included in the assessment screening tool in the military career transition process.

Recommendation 13

Ensure equal access to services for all CAF survivors regardless of where they are located in Canada, and/or CAF survivors who require support while serving outside of Canada.

 As part of this, undertake scenario-based facilitated discussions such as real-time tabletop exercises amongst DND/CAF organizations to map out the support landscape and find ways to continuously improve service delivery for deployed CAF members.

Goal: Customize approaches to address the needs of specific groups of survivors

Recommendation 14

Develop a male-centred framework of services, and overall approach to understanding sexual misconduct, that reflect and meet men's specific service needs.

Recommendation 15

In order to address the needs of male-identified members, consider the development of male-specific strategies such as a portal, which could:

- Include a "menu" of options, such as reporting, accessing online survivor support services, and/or bridging to dedicated resources of Health Services or allied services not normally associated with a Survivor Support Strategy (e.g. services for domestic violence perpetration, sexually compulsive behaviours).
- Help men connect to dedicated and allied services and bridge to mental health services for men regardless of their base or mission or transfer. By doing so, the services offered could meet national standards of care, offer greater access and privacy, increase the timeliness of support, and not be dependent on the size or scope of local community resources.
- Be labelled as a "men's wellness" initiative or comparable term (i.e. avoiding any victim-identified or offender-identified language), in

Recommendation 16	recognition that men are reluctant to engage with sexual assault centres or other traditionally "female-defined" spaces. Be organized by language, culture, and/or other factors. Increase support options for men by working with service providers with demonstrated competency in supporting male survivors through initiatives such as the SMRC's Transfer Payment Program and other initiatives. Community sexual assault services or other community agencies that are not able to develop or sustain dedicated male-centred services should not be utilized as civilian partners for the CAF to serve male
	survivors.
Recommendation 17	 Adopt an intersectional approach to all aspects of the development and implementation of supports for SGM survivors that centres their experiences and expertise. An 'intersectional approach', analysis, and orientation to addressing sexual misconduct considers how gender, gender identity and expression, sexual orientation, race, language, ability, Indigeneity, and other identity factors intersect with various structures, systems, and forms of discrimination within and outside of the CAF.
Recommendation 18	Develop and foster SGM-specific understandings of, and responses to,
	trauma and violence including to:
	 Develop and adopt a trauma-informed framework for supporting survivors that is inclusive of the additional and distinct forms of trauma experienced by SGMs that go beyond sexual misconduct. Ensure that supports are built upon recognition of the continuum of sexual and other forms of harm that disproportionately impact SGMs, and reflect an understanding of the additional and distinct forms of violence and tactics of power and control used to commit violence against SGMs. Promote a wrap-around service delivery model capable of
	responding to the distinct and varied mental health and health care needs of SGMs.
Recommendation 19	Identify the specific barriers that Indigenous survivors face to accessing supports as well as the type of supports that best help Indigenous survivors through their healing process.
Recommendation 20	Work to address the gaps and barriers noted in the Report to the SSCG provided by Myrna McCallum. Specific recommendations in the Report apply to each of: the Royal Canadian Chaplain Service (RCChS)/IACG; the Canadian Forces Health Services; the Canadian Forces National Investigation Service (CFNIS); Canadian Military Prosecution Service (CMPS); Office of the Judge Advocate General (OJAG); Integrated Conflict and Complaint Management (ICCM); Defence Aboriginal Advisory Group (DAAG); and Army Reserves.
Recommendation 21	Prioritize recruitment and retention of self-identifying Indigenous and Two Spirit judges, lawyers, prosecutors, VLOs, Elders and cultural leaders to reflect the diversity among Indigenous peoples and to communicate a

	message of transformation, commitment to representation (e.g. race, culture, gender identity, and values), and to inspire credibility and trust.
Recommendation 22	Any departments, offices, or leaders developing strategies to support Indigenous members who experience sexual misconduct in the CAF must first address the realities and failures set out by Anna McAlpine in her thesis, An Intersectional Analysis of Sexual Misconduct in the Canadian Armed Forces: Indigenous Servicewomen, dated 9 April 2021.
Recommendation 23	Consider revising the terms of service for Reservists to enhance entitlements to care, particularly for sexual misconduct they experience during military service.
Recommendation 24	 Improve the clarity and administration of the Reservists' entitlement and eligibility for support in relation to sexual misconduct. Develop a strategy to better reach Reservists in order to increase awareness of available support. A coordinating function should be considered as part of the strategy.
Recommendation 25	 Explore options to modernize Reserve Force practices so that survivors can more easily access services. Since members of the Primary Reserve can be as young as 16 years of age, there is a need for the Reserve Force to think about supporting survivors who are under the age of 18.
	Goal: Reduce stigma and break isolation at all levels
Recommendation 26	 With funding announced in Budget 2021, reduce stigma and break isolation by implementing a professionally co-facilitated online and inperson peer support program for CAF members and Veterans who have experienced sexual misconduct during their service in the CAF. Involve those affected by sexual misconduct as co-developers of the program. Ensure that in-person peer support group meetings are held regularly and during work hours (e.g. during physical training). This will help promote a sense of relationship building, encourage maximum participation, and reduce the potential for disrupting the survivor's time spent with their regular support networks or external therapy treatments.
Recommendation 27	Partner with national technical assistance providers to enhance knowledge around the use of technology to reach more survivors. This will create a long-term network of experts to whom service providers and survivors can turn to for advice on best practices and advances in the field of virtual advocacy and support. Further, the network could be explored in relation to training for providers on best practices in virtual advocacy and safe technology for survivors, including survivors in underserved populations, young CAF members, and Reservists. • As part of this work, the DND/CAF should explore the feasibility of building chat and text components into the functionality of survivor support services.

Professional standards for use of technologies should be assessed, along with any reviews previously done of technology in relation to survivor support. Recommendation 15 (online portal for men) should be considered in the context of this work. Recommendation 28 Acknowledge and document the pervasive problem of reprisals and other forms of secondary wounding experienced by CAF survivors following disclosures of sexual misconduct. This may include, but is not limited to: Undertaking further investigation of: the various types of reprisals and secondary wounding already identified by CAF survivors; changes in treatment by unit members; job relocation or changes; career interruptions or endings; and lack of trauma-informed responses from those in helping positions, as well as from investigators or others involved in investigation and prosecution related to sexual misconduct. Ensuring that analyses document how reprisals and secondary wounding are embedded in the gendered and sexualized military culture, and how certain groups, such as women, men, 2SLGBTQ+, and Indigenous members are distinctly impacted. Recommendation 29 Ensure that support and services for survivors are designed to address the significant psychological, physical, economic, spiritual, and employment impacts of sustained reprisals and secondary wounding as an additional component of military sexual misconduct and MST. Goal: Modernize reporting options Recommendation 30 Establish an explicit exemption for victims/survivors, as well as designated health and support professionals who provide support to victims/survivors, from prosecution for failing to report sexual misconduct, with limitations for such cases as risk of imminent harm, harm to children, national security, etc. Recommendation 31 Enhance supports to survivors of sexual misconduct in Canada's military justice system by providing access to alternative reporting options external to the chain of command. Recommendation 32 With funding from Budget 2021, put in place a pilot project to provide independent legal advice to those affected by sexual misconduct whose cases are proceeding in the military justice system. Theme: Training Goal: Enhance support provider capacity and competency Recommendation 33 Enhance the subject matter expertise of those who provide support to CAF members affected by sexual misconduct, including education and training on trauma-informed approaches, cultural humility, and vicarious trauma (i.e. resilience training). This includes:

- Providing service providers with the tools to appropriately respond to reports and/or disclosures of sexual misconduct.
- Developing and implementing role-based certification and training, standards of training and certification, professional standards for service providers, and quality assurance systems.
- Ensuring that support providers have the training, supervision, monitoring and oversight commensurate with their responsibility.
- Providing adequate staff support for training.
- Developing protocols and policies to encourage support providers to enhance their skills and knowledge relating to sexual misconduct, including with respect to vicarious trauma.
- Promoting a culture of commitment to ongoing training through annual refreshers and foundational courses.

Recommendation 34

Explore options for seeking accreditation of certain services by a recognized accrediting body, where appropriate.

Recommendation 35

Implement mandatory and continuous CAF-wide education and training on preventing sexual misconduct and responding to disclosures of sexual misconduct that is developed, facilitated, and evaluated in partnership with external SMEs and trainers. In general, training and education initiatives on sexual misconduct should be:

- Conducted by trauma-informed professionals and not the chain of command.
- Developed and delivered in collaboration with external advocates/experts and in keeping with evidence-based best practices in sexual violence prevention and response training protocols.
- Backed by national standards (e.g. language, messaging).
- Include content on consent, being an effective bystander, understanding the distinct experiences of sexual misconduct for various groups, the intersection of sexual misconduct and colonialism, transphobia, racism, sexism and misogyny, and address the distinct ways in which the history and culture of the military create conditions in which sexual misconduct happens.
- Repeated regularly throughout an individual's career as opposed to being limited to a single training.
- Engage learners and leaders in meaningful and difficult conversations, and require demonstration of a competent understanding of key concepts and skills introduced in the training.
- Tailored to reflect the distinct responsibilities and roles of different organizations and positions. This will require the development and delivery of additional specialized, unit and department-specific training to CAF leadership, health services personnel, the CFNIS, Chaplains, SMRC counsellors/staff, and others who occupy distinct roles within the CAF.
- Subject to external monitoring, evaluation, and revision as needed.

Recommendation 36

Ensure that the development and delivery of Indigenous-specific content to those who work to serve Indigenous survivors and complainants is delivered by Indigenous experts and includes an emphasis on the following:

- Trauma-informed engagement strategies
- Cultural humility
- Implicit bias awareness and safeguard strategies
- Stereotypes, myths, and stigmas targeting Black, Indigenous, and People of Colour (BIPOC) and Two Spirit survivors of sexual misconduct
- The TRC Calls to Action
- The National Inquiry into Missing and Murdered Indigenous Women and Girls (MMIWG) Calls for Justice

Goal: Form leaders with relational skills

Recommendation 37

As an intrinsic part of character-based leadership initiatives in the CAF, develop a plan to foster leadership tools that focus on emotional intelligence, compassion, responsiveness, approachability, and cultural humility. The application of these core interpersonal skills will go beyond the focus on individuals and extend to understanding structural power imbalances and the ways in which this understanding is essential for those in leadership roles. The CAF's historical institutional structures of oppression should be part of the analysis, while fostering ongoing self-reflections about leadership's own privilege and responsibility.

- Avoid use of the term "soft skills" in relation to these training initiatives, as such terminology will not resonate and will marginalize the value of these critical leadership competencies and perspectives; instead, link to a "people first" approach.
- Develop a plan for each of: Non-Commissioned Members (NCMs), Non-Commissioned Officers (NCOs), and Officers.
 - Ensure that middle leadership is included.
 - Ensure that the NCM core is included; such skills should be reflected in the NCM Leadership Course, in recognition that NCM leadership is critical to solutions.
 - Explore models that include civilian or former military members co-facilitating leadership training with the military.

Theme: Communication and Information

Goal: Improve the quality and accessibility of information

Recommendation 38

Ensure that timely, accurate, up-to-date, and clear/plain language information about services and how to access them is widely available to all CAF members, their families, and the public, such as through a centralized online portal.

Recommendation 39

Establish an information package for victims/survivors on their rights, the impacts of victimization and on the support services which exist in the CAF, along with external and/or partner organizations.

Recommendation 40	Materials created for survivors need to be carefully examined. Survivors should receive a debriefing package that highlights what they can expect, and who they can contact; however, information should be provided in such a way so as to avoid overloading a survivor with too many materials too soon.
Recommendation 41	Add information on available services for MST to CAF retirement/release processes.
	 Offer a retirement/release package that includes information on MST and services as well as a screening service for all CAF Regular Force and Reserve Force personnel.
	Theme: Accountability
Goal: En	nbed governance structures, accountability, and commitment
Recommendation 42	Issue a directive to establish a Working Group to fully analyze recommendations in this Summary Report and the SSCG's SMEs' recommendations.
	 The Working Group should attach both a timeline and an appropriate lead organization or organizations to ensure the recommendations get turned into implementable action items across DND/CAF organizations through development of an implementation plan.
Recommendation 43	Develop and implement a performance measurement framework for the Survivor Support Strategy and implementation plan to measure, monitor, and report on progress across the continuum of services. • Adopt a results-based and lessons learned-oriented approach to performance measurement — one that promotes continuous improvement.
Recommendation 44	Performance indicators that reflect initiatives and their outcomes must be tracked with regard to support for sexual misconduct survivors; leaders at all levels must be monitored, and incentivized to participate.
Recommendation 45	Commit to trauma-informed, survivor-centred principles, and cultural humility principles, practices, policies, and procedures across the DND/CAF, including at the individual, group, and institutional or systems level.
	 Define the terms 'trauma-informed', 'survivor-centred' and 'cultural humility'; apply a consistent definition across units within the DND/CAF.
	 Integrate these core principles into organizational policies, procedures, and practices.
	 Ensure that diverse cultural factors are reflected (e.g., race, gender, sexuality, disability).
	 Build relationships, partnerships, and collaborate with organizational staff, other relevant health and social service organizations, and key external stakeholders in the development of the principles and their application.

- Seek DND staff and CAF member feedback on the implementation of the principles and their application; promote collaboration to make organizational improvements as needed.
- Cultivate an environment for all members and staff that reflects the principles.
- Be aware that trauma can impact anyone. Promote an environment of self-care/wellness and take organizational measures to prevent vicarious trauma.
- Expand the area of concern from "sexual misconduct" to all forms of trauma for service members, while continuing to recognize the specific and distinct dynamics of sexual misconduct as a source of trauma.

A Note about Language

This Summary Report uses the term 'sexual misconduct', which in the CAF is used to refer to incidents ranging from inappropriate behaviours such as sexualized jokes or innuendos to acts that meet the *Criminal Code* definition of sexual assault (see **Box 1**, "CAF Definition of Sexual Misconduct").

Box 1 - CAF Definition of Sexual Misconduct

Sexual misconduct is conduct of a sexual nature that can cause or causes harm to others. Sexual misconduct includes:

- Actions or words that devalue a person or group of persons on the basis of their sex, sexuality, sexual orientation, or gender identity or expression
- Jokes of a sexual nature, sexual remarks, advances of a sexual nature or verbal abuse of a sexual nature in the workplace
- Harassment (DAOD 5012-0) of a sexual nature, including initiation rites of a sexual nature
- Viewing, accessing, distributing or displaying sexually explicit material in the workplace, and
- Any Criminal Code offence of a sexual nature such as:
 - (1) Surreptitiously observing or recording a person in a place where the person could expose his or her genital organs or anal region or her breasts or could be engaged in explicit sexual activity, or distributing such a recording (voyeurism: s. 162)
 - (2) Publishing, distributing, transmitting, selling or making available an intimate image of another person i.e., a visual recording in which the person depicted is nude, exposing genital organs, anal region or breasts, or engaged in explicit sexual activity without their consent (publication of an intimate image without consent: s. 162.1)
 - (3) Engaging in any kind of sexual activity with another person without their consent (sexual assault: s. 271)
 - (4) Engaging in any kind of sexual activity with another person who is incapable of consenting, for example due to intoxication (sexual assault: s. 271) and
 - (5) Engaging in any kind of sexual activity with another person by inducing that person to agree to the sexual activity through abuse of a position of trust, power or authority by virtue of rank or position (sexual assault: s. 271)

The workplace is the physical work location and the greater work environment where work-related functions and other activities take place and work relationships exist. In the CAF context, the workplace includes places such as messes, on base clubs, quarters, dining halls, gyms, and sanctioned events such as holiday gatherings and course parties as well as office spaces, classrooms, garrisons, ships, hangars, vehicles, aircraft, online forums, etc. CAF members do not simply work for the CAF, but work, socialize and often live within institutional and social structures established by the military.

Defence Administrative Orders and Directives (DAOD) 9005-1, Sexual Misconduct Response (2020-11-18)

In addition to the term 'sexual misconduct', this Summary Report uses the terms 'affected member' or 'survivor' to refer to CAF members who have experienced sexual misconduct. Occasionally, the term 'victim' is used, particularly in recognition of its legal implications within justice processes and systems.

We recognize that not everybody who has experienced sexual misconduct identifies as a 'survivor'. It has been used here for consistency. Some people may prefer other terms in relation to their experiences, such as 'military sexual misconduct', and when referring to the impacts of those experiences, such as 'military sexual trauma'. These terms are also included at times in this document.

Others may not wish to label themselves at all based on their experience. We honour survivors' agency to use the terms that fit best for them.

Language was one of the most challenging issues that the SSCG faced throughout its work. Language is important; it is a gateway to understanding, one that guides how we think and respond. We approach this Summary Report with an understanding that efforts to clearly define terms, and make them as inclusive as possible, must be a central part of the work to further develop a Survivor Support Strategy and implementation plan.



Introduction

This Summary Report shares the work, insights, and recommendations of the Survivor Support Consultation Group (SSCG) in fulfilment of its role.

The SSCG was formed in 2020 as one of the key commitments of the Canadian Armed Forces (CAF)—Department of National Defence (DND) Sexual Misconduct Class Action Settlement. Through Schedule N of the Class Action, the parties agreed to a process and mandate to guide development of a comprehensive Survivor Support Strategy Framework and Implementation Plan, as well as a plan for ongoing survivor stakeholder engagement, while ensuring that subject matter expertise is integrated.

The SSCG brought together three class member representatives and three representatives of the DND/CAF. Our work was supported by three external subject matter experts (SMEs) with expertise on issues central to supporting survivors.

Despite the wide variety of backgrounds and perspectives amongst SSCG members and SMEs, we all came from a place of shared desire for, and commitment to, fostering real and transformative change with and for survivors, and an openness to reimagining support systems in order to advance that aim. As well, all came to the table with an openness to exploring the gendered and cultural dimensions of sexual misconduct, along with the way in which some populations within the CAF are at a greater risk of experiencing sexual misconduct and responses that do not adequately meet their needs.

In meeting our mandate, we strove to be evidence-informed, and to consider recommendations and advice from survivors, external SMEs, formal reviews, along with surveys and other research. We explored promising practices related to sexual misconduct and survivor support from Canada's military allies and from other Canadian jurisdictions.

Over the course of its work, the SSCG held meetings that focused on reviewing relevant policies, procedures, and training through a series of informational presentations from key members and units of the DND/CAF community. These briefings from the DND/CAF provided opportunities to ask questions and reflect upon the CAF's current approaches to providing support. The SSCG members shared their observations, experiences, and perspectives during spirited discussions, together with the three SMEs through their active participation and contributions to dialogue, the presentations they gave, and written reports they submitted.

A Rapidly Evolving Landscape

Pre-planning for the work of the SSCG envisioned that the group would meet in person, as possible, and hold in-person engagements with other key stakeholders. Owing to the COVID-19 pandemic, the SSCG had to adapt its plans and timelines, and met virtually throughout 2020-21.

Beyond the pandemic, the landscape around the SSCG continued to shift in significant ways. On 2 February 2021, Global News reported allegations of sexual misconduct against the recently retired Chief of the Defence Staff (CDS). This news created shock waves and profound impacts

¹ Mercedes Stephenson, Marc-André Cossette and Amanda Connolly, "Former top soldier Gen.

throughout the CAF, as evidenced, for example, by the increased calls for support placed to the Sexual Misconduct Response Centre (SMRC). Just three weeks later came further news that the current CDS was stepping aside after media inquiries confirmed that he was the subject of a sexual misconduct-related investigation.² On 31 March 2021, the Chief of Military Personnel likewise stepped aside amid allegations of sexual assault.³

With such serious allegations surfacing, two separate House of Commons committees undertook studies on sexual misconduct in the CAF. The Standing Committee on National Defence (NDDN)⁴ began its study on 19 February 2021, and the Standing Committee on the Status of Women (FEWO)⁵ on 23 March 2021. Although the two committees interviewed many of the same witnesses, NDDN focused more on the allegations from a political and accountability perspective, while FEWO focused on the experiences of those in the CAF who are survivors of sexual misconduct, particularly women.

Another notable development arose on 24 March 2021, when the CAF announced through a letter to all members that Operation HONOUR was coming to an end:

Operation HONOUR has culminated, and thus we will close it out, harvest what has worked, learn from what hasn't, and develop a deliberate plan to go forward. We will better align the organizations and processes focused on culture change to achieve better effect.⁶

The letter further signaled that the CAF was ready to explore external review and recommendations, as well as an independent reporting chain in order to deal with sexual misconduct and other problems.

Approximately one month later, on 19 April 2021, Budget 2021 included major announcements related to sexual misconduct in the CAF. It outlined investments of \$236.2 million over five years, starting in 2021-22, and \$33.5 million per year ongoing to the DND and Veterans Affairs Canada (VAC), including \$158.5 million over 5 years and \$29.9 million per year ongoing funded from existing resources to expand work on military sexual misconduct. Specific announcements related to survivor support included to:

• "strengthen accountability mechanisms, promote culture change in the military, and provide a safe place for survivors to report misconduct and access the services they need"

Jonathan Vance facing allegations of inappropriate behaviour with female subordinates: sources" in Global News (2 February 2021), https://globalnews.ca/news/7614063/jonathan-vance-sexual-misconduct-operation-honour/.

² See, e.g., The Canadian Press, "Admiral Art McDonald steps aside as defence chief amid investigation" in The Toronto Star (24 February 2021), https://www.thestar.com/politics/2021/02/25/admiral-art-mcdonald-steps-aside-as-defence-chief-amid-investigation.html.

³ See, e.g., Sean Boynton, "Head of military personnel on indefinite leave amid sexual assault investigation" in Global News (31 March 2021), https://globalnews.ca/news/7732816/military-edmundson-sexual-assault/.

⁴ Further information about the NDDN's study is available online: https://www.ourcommons.ca/Committees/en/NDDN/StudyActivity?studyActivityId=11126874.

⁵ More information about the FEWO's study is available online: https://www.ourcommons.ca/Committees/en/FEWO/StudyActivity?studyActivityId=11191061.

^{6 &}quot;March 24: Letter from the Acting Chief of the Defence Staff (A/CDS)", https://www.canada.ca/en/department-national-defence/maple-leaf/defence/2021/03/march-24-acting-cds-letter.html.

- "implement new external oversight mechanisms to bring greater independence to the processes of reporting and adjudicating sexual misconduct within the military"
- "enhance internal support services to victims, including access to free, independent legal advice and enabling military members to access services without making a formal complaint"
- expand the existing sexual assault contribution program to provide support to communitybased sexual assault service providers outside major urban military centres
- increase the reach of the SMRC's Response and Support Coordination (RSC) Program to additional locations across Canada
- pilot online and in-person peer support groups for CAF members and veterans who experienced sexual misconduct during their service, tailored to military experience⁷

On 29 April 2021, the Minister of National Defence (MND) announced the launch of an independent external comprehensive review of current policies, procedures, programs, practices, and culture within the DND/CAF, with the aim of examining harassment and sexual misconduct, identifying barriers to reporting, and assessing the adequacy of the response when reports are made.⁸ The Review is being conducted by Madame Louise Arbour, whose mandate includes to provide recommendations aimed at preventing and eradicating harassment and sexual misconduct, through interim assessments and recommendations as well as a final report.⁹

As we were preparing this Summary Report, the Third Independent Review Authority concluded; the MND tabled the report in Parliament on 1 June 2021. In the report, the Honourable Morris J. Fish provides the MND with 107 recommendations, a majority of which pertain to the military justice system, including how issues of sexual misconduct are addressed. Chapter 2 of the report is devoted to the issue of sexual misconduct, and sets out three priority areas for recommendations: removing the present duty of those affected by sexual misconduct to report their experience to the chain of command; providing free and independent legal advice to those affected by sexual misconduct; and implementing as quickly as possible the Declaration of Victims Rights provided for in Bill C-77.

Finally, on 17 June 2021, FEWO tabled its report¹² in the House of Commons. The report provides 21 recommendations for the Defence Team to address sexual misconduct in the CAF,

⁷ Her Majesty the Queen in Right of Canada, Budget 2021 – A Recovery Plan for Jobs, Growth and Resilience (April 19, 2021), https://www.budget.gc.ca/2021/pdf/budget-2021-en.pdf, 288-289.

⁸ National Defence, "Backgrounder: Launch of an Independent External Comprehensive Review of the Department of National Defence and the Canadian Armed Forces" (29 April 2021), https://www.canada.ca/en/department-of-national-defence-and-the-canadian-armed-forces.html.

⁹ National Defence, "Terms of Reference – Independent External Comprehensive Review of the Department of National Defence and the Canadian Armed Forces", https://www.canada.ca/en/department-national-defence/campaigns/external-review-terms-of-reference.html.

¹⁰ Report of the Third Independent Review Authority to the Minister of National Defence (1 June 2021); see e.g. News Release, https://www.canada.ca/en/department-national-defence/news/2021/06/defence-minister-releases-results-of-the-third-independent-review-of-the-national-defence-act-and-begins-implementation-of-recommendations.html.

¹¹ Bill C-77, An Act to amend the National Defence Act and to make related and consequential amendments to other Acts, received Royal Assent on 21 June 2019. It adds a new section, called the "Declaration of Victims Rights," to the Code of Service Discipline, giving victims of service offences certain rights to information, protection, participation, and restitution, https://www.parl.ca/Legislnfo/BillDetails.aspx?billld=9847536&Language=E.

¹² FEWO, Report 10 – Eliminating Sexual Misconduct Within the Canadian Armed Forces, 17 June 2021, https://www.ourcommons.ca/DocumentViewer/en/43-2/FEWO/report-10.

which focus on: addressing reports of sexual misconduct in the CAF; holding senior leadership accountable; and creating a safe and inclusive workplace. While the NDDN likewise worked to draft a report, it ultimately did not finalize and table it before the committee rose for the summer break.

Moving Forward

Collectively, these recent watershed developments present an important opportunity to reach more survivors and close the service gaps that far too many experience. One of the key challenges is how to build on the momentum created through these events and continue to expand and enhance support services to reach all survivors of sexual misconduct – but to do so in a way that is attuned to, and driven by, the wishes of survivors themselves.

The deeply troubling allegations that have been emerging anew are adding to uncertainty and lack of trust with regard to the DND/CAF's commitment, resolve, and ability to undertake transformative change. It is quite likely – in fact, almost certain – that the distrust we have seen amongst CAF members, former and current, and others, including amongst the SSCG and its SMEs from time to time, will continue.

Concern regarding the DND/CAF's culture, policies, and procedures around sexual misconduct is not a new development. We can expect that it will continue as the Defence Team works to rebuild trust and enhance survivor support.

The SSCG and its SMEs held a meeting on 4 March 2021 to reflect on the recent media disclosures and allegations. We are particularly concerned about the possibility that the current quickly evolving landscape could lead to uncertainty and have the unintended consequence of discouraging survivors from seeking support. CAF members who have experienced sexual misconduct must continue to be encouraged to seek confidential support from the SMRC or another qualified resource.

In our view – having spent many hours over the last several months listening, discussing, and debating about these issues and challenges – the CAF community is at an important point of inflection. In one direction on the curve, the DND/CAF can institutionalize recent changes announced this year, such as through significant investments promised in Budget 2021, but insufficiently address the culture and, in all likelihood, continue to face a crisis of confidence and leave sexual misconduct as an ongoing problem with survivors unable to access the kind of support they need and deserve. Or, in the other direction, we can embrace together the opportunity to make significant and lasting progress.

Our position is that the approach we have set forth in this Summary Report – one that emphasizes the need to undertake broader, more holistic, inclusive, and collaborative engagement – is an important step towards building better support for survivors. We acknowledge, however, that the opportunity could easily be lost if appropriate leadership is not exercised, if deep dialogue and listening do not happen, and if the community as a whole fails to both expect and fully mobilize real and transformative culture change.

If the opportunity is lost, the consequence will be more testimonials like the many we have heard in public fora such as in the news, on social media, in Parliamentary Committee meetings, and in private conversations with survivors this year. Testimonials of CAF members, current and former, and others who have directly experienced sexual misconduct. Testimonials of harm, fear, fractured trust, trauma, moral injury, institutional betrayal, spiritual wounding, secondary victimization through unsupportive responses and retaliation, and truncated careers. Testimonials that bear little resemblance to the expressed values of the CAF.

Guiding Principles

The SSCG believes that there is a need to apply three core principles to the development of a Survivor Support Strategy. They are:

- cultural humility
- trauma-informed
- survivor-centred

These three principles should be understood as cutting across all of the key themes and recommendations identified in this Summary Report. For example, a key next step is to undertake engagement with diverse survivors and stakeholders to fine tune details of a Survivor Support Strategy and implementation plan. That process, and all other engagement processes related to addressing sexual misconduct in the CAF, should use the above three principles as a cornerstone and guide.

Key Themes, Goals, and Recommendations

In the course of our work together, the SSCG heard about gaps and barriers that stand in the way of CAF members who have experienced sexual misconduct from being fully supported. Based on meetings, presentations, discussions, and analysis of research on promising practices in supporting survivors, we share, in this Summary Report: our overarching observations; identified priority areas of action (i.e. goals); and recommendations.

Generally, the goals and recommendations provided in this Summary Report can be thought of as addressing five key themes and, as such, are organized that way. The key themes include:

- engagement, partnerships, and research
- support, especially to address service gaps
- training
- communication and information
- accountability

The goals included here must be discussed and tested in conversation with many others through a holistic engagement process that includes the experiences and expertise from diverse survivors, advocates, SMEs, and CAF members from all ranks.

As well, the goals and recommendations outlined in this Summary Report are not meant to be exhaustive. The SSCG explored numerous topics and issues; these have been noted for follow up in further work to develop a Survivor Support Strategy.

Some issues raised during the consultation process were seen in different ways by group members. As such, our Summary Report does not necessarily represent unanimity of opinion among all members on all points. The issues and challenges presented by sexual misconduct in the

military are difficult and complex, and so it is to be expected that there are multiple perspectives on how to intervene.

We also approach these recommendations with the knowledge that recent events have been incredibly challenging and difficult for so many members of the CAF community, but in particular survivors of sexual misconduct. While we have sought to address some of the concerns in our recommendations, we also recognize that the discussion continues to evolve around us as we conclude our work.

Overall, our recommendations are intended as a foundation from which to build and move ahead with further work to develop a Survivor Support Strategy and implementation plan for CAF members affected by sexual misconduct.

The Need to Ground Efforts in Culture Change

As alluded to already, a central observation of the SSCG's work and resulting recommendations is that efforts to enhance survivor support are inextricably linked to, and cannot be compartmentalized from, the DND/CAF's broader initiatives focused on awareness and prevention, organizational culture change, increasing the diversity of the CAF, and addressing hateful conduct. All of these share a common moral imperative to move toward compassion, respect, dignity, and inclusivity for all, and a need to recognize that the ultimate goal must be to prevent sexual misconduct and other forms of harm from happening in the first place. Indeed, a central observation and finding of the SSCG is that work to develop a Survivor Support Strategy must be framed by, and linked to, prevention and culture change initiatives, and vice versa. There is no real support without prevention and culture change. And adopting holistic approaches to support is a cornerstone of prevention and culture change. Thus, all of these initiatives must be joined up to the greatest extent possible.

Survivor Support Consultation Group

Context

Experiences of sexual misconduct in the CAF were publicly brought forward in 1998, and again in 2014, through national reporting in the media. Those reports came with calls for changes to the overall CAF culture, and for improved response and support for those affected.

Deeper insight into the need for improved support was gained through the External Review into Sexual Misconduct and Sexual Harassment in the CAF.¹³ The Review examined CAF policies, procedures, and programs related to sexual misconduct, including their effectiveness. Based on extensive interviews and focus groups through which it heard from over 700 individuals, and through a review of relevant CAF policies, programs, and procedures, the resulting final report by the **External Review Authority (ERA)** [Deschamps Report]¹⁴, released in March 2015, emphasized the need for dedicated resources, policies, and strategies to support affected members. The Deschamps Report:

- provided ten recommendations, which continue to play a guiding role today
- concluded that sexual misconduct in the CAF is a serious problem
- emphasized the need for dedicated resources, policies, and strategies to support those affected by sexual misconduct
- underscored that support must be complemented by ongoing measures focused on culture change, coordination and monitoring, accountability, training and awareness, prevention, and research and data

A central finding of the ERA was that there is an underlying sexualized culture in the CAF – one that is conducive to more serious incidents of sexual harassment and assault, and particularly hostile to women and 2SLGBTQ+ people. The Deschamps Report affirmed the importance of strengthening support to members affected by sexual misconduct, for example, by: creating a centre independent from the CAF to receive reports of sexual misconduct and provide support; simplifying and streamlining reporting processes; and improving investigation processes and overall response to those affected.

The CAF's initial response to the Review, the April 2015 CAF Action Plan¹⁵, included supporting members affected by sexual misconduct as one of four interconnected lines of effort, along with understanding sexual misconduct in the CAF, responding effectively to incidents of sexual misconduct, and preventing incidents.

Related efforts in 2015 to reinforce support included the establishment of:

 Operation HONOUR – An Operation Order that set out the CAF's mission to eliminate sexual misconduct. Reporting to the Vice Chief of the Defence Staff, the Directorate Professional Military Conduct – Operation HONOUR (DPMC-OpH)¹⁶ served as the CAF Office of Primary Interest for Operation HONOUR, and was tasked with putting in place

¹³ An independent review commissioned in 2014 by the Chief of the Defence Staff and led by the Honourable Marie Deschamps, retired Supreme Court justice.

¹⁴ The Honourable Marie Deschamps, <u>External Review into Sexual Misconduct and Sexual Harassment in the Canadian Armed Forces</u>, 27 March 2015.

¹⁵ Canadian Armed Forces Strategic Response Team on Sexual Misconduct, 30 April 2015, <u>Canadian Armed Forces</u>
<u>Action Plan on Inappropriate Sexual Behaviour: Addressing the External Review Authority Report's Recommendations.</u>

¹⁶ Formerly the CAF Strategic Response Team on Sexual Misconduct (CSRT-SM); name changed in summer 2019.

institutional change efforts to address sexual misconduct and promote a culture of respect and dignity for all. Operation HONOUR included enhancing support to affected members as its main effort.

The SMRC – An independent centre reporting to the DM of National Defence that
provides confidential support services to CAF members affected by sexual misconduct, as
well as guidance and recommendations to the DND/CAF on related policies and
programs.

Since the Deschamps Report, the message that support must be enhanced has consistently been reaffirmed in reports and reviews, validated by the available research and data, and – most importantly – made abundantly clear by survivors of sexual misconduct themselves.

In 2016, the DPMC-OpH¹⁷, in cooperation with the SMRC, along with various internal and external stakeholders, examined existing services and undertook a comparative **Victim Needs Analysis** with services provided by others (e.g. Allied nations, the Canadian public and private sector), to identify key service provision gaps. The analysis identified several gaps with respect to support for those affected by sexual misconduct in the CAF, such as:

- Limited capacity in providing specialized support that is responsive to the specific needs of men and 2SLGBTQ+ people
- Inconsistencies and a lack of standardization in the level of specialized care and support
 available across organizations and regions across Canada, as well as in the context of
 deployed operations and in postings or assignments outside Canada (OUTCAN), including
 a lack uniformity in standards and availability of Sexual Assault Examination Kits (SAEKs)
- Limited options for seeking support within the chain of command without triggering an investigation, in the context of the duty to report
- Lack of alternative reporting options such as restricted reporting through third party organizations
- Limited continuity of service across providers, particularly once members leave the CAF
- Lack of CAF-supported access to legal assistance and/or legal advice
- Lack of structured options for peer support within the CAF

In 2017, the DND/CAF released **Strong**, **Secure**, **Engaged: Canada's Defence Policy (SSE)** which, in acknowledgment of ongoing gaps and challenges, included as one of its priorities to: "Provide a full range of victim and survivor support services to [CAF] members." ¹⁸

And in 2018, a further call to commitment was articulated in the Office of the Auditor General Review of the CAF's Response to Inappropriate Sexual Behaviour (OAG Review)¹⁹ which examined the progress made by the CAF in taking action to respond to, understand, and prevent sexual misconduct, and to support those affected by it. The audit scope included Regular and Reserve Force members of the CAF. While acknowledging improvements made so far, the Review concluded that the CAF had not yet fully accomplished what it had intended in responding to and

¹⁸ National Defence, Strong, Secure, Engaged, 2017, 28.

¹⁷ Ibid

¹⁹ Office of the Auditor General (OAG), Report 5 - Inappropriate Sexual Behaviour - CAF, November 2018.

supporting those affected, and that some members still do not feel safe and/or supported (see **Box 2**, "2018 OAG Review"). Key gaps were identified in relation to:

- <u>Awareness</u> No single, consistent list of services; and less awareness of services outside the National Capital Region
- <u>Coordination</u> Fragmented approach to support; lack of coordination and information sharing between services; uncertainty about the role of specific services (e.g. whether a support service or formal reporting body); and those affected having to consult more than one source before finding the support needed
- Availability and access Limited hours of operation for some services; reduced services based on location; no in-person support at the SMRC; and CAF mobile apps are not always available on international operations
- <u>Subject matter expertise</u> Not all service providers had enough specialized training to respond to those affected by sexual misconduct

Box 2 – 2018 OAG Review

The OAG's main recommendation regarding support was that the CAF:

"...establish an integrated, national approach to victim support to ensure it fully addresses the needs of any member who is affected by [sexual misconduct]. The approach should ensure that members have access to a consistent level of service and specialized support regardless of where they are serving."

OAG Report 5 – Inappropriate Sexual Behaviour – CAF, November 2018 (recommendation 5.41)

Subsequent to the OAG review, as part of a broader research program to support Operation HONOUR, the Director General Military Personnel Research and Analysis (DGMPRA) conducted a **Victim Support Study** on behalf of the DPMC-OpH to better understand the experiences of people who sought and/or received support after being affected by sexual misconduct while serving in the CAF. The research project began in 2017 and was completed in mid-2018. As part of that research, 67 serving and retired members of the Regular and Reserve Forces were interviewed to explore their lived experiences in relation to: the types of help they had sought, both formal and informal; the quality of care received; and challenges and gaps in available services. While the majority of participants felt supported by at least one CAF representative after being affected by sexual misconduct, most participants reported numerous negative experiences while seeking support and felt some degree of dissatisfaction with the CAF response

to these incidents, and with the level of care and/or support they received overall.²⁰ Challenges were particularly noted in relation to workplace support and accommodation. Many of the limitations identified in the study supported the findings previously reported elsewhere.

This broad context and history is important to understanding the work of the SSCG.

Since the time of the Deschamps Report, changes have been made to improve the way in which:

- the chain of command responds to incidents
- military police and legal authorities treat affected members and their cases
- specific support services are provided
- data are collected and trends are monitored

A number of orders, policies, directives, and other foundational documents have also been developed to improve the overall response to sexual misconduct.

However, important support-related gaps and barriers have remained despite the numerous recommendations made in these previous reports and initiatives to tackle the gendered and sexualized culture within the CAF. How to close these gaps to better support survivors of sexual misconduct, and how to effectively bring in the perspectives of key stakeholders while doing so, is the central focus of the work of the SSCG.

²⁰ Defence Research and Development Canada, Scientific Letter, "Experiences of CAF members affected by sexual misconduct: Perceptions of support" (February 2020) https://www.canada.ca/content/dam/dnd-mdn/documents/op-honour/drdc-rddc-2020-l046-scientific-letter-en.pdf

PART II

About the Work of the Survivor Support Consultation Group

Background: Schedule N, Survivor Support Consultations

In 2016 and 2017, seven former members of the CAF initiated class action lawsuits against the Government of Canada related to people who experienced sexual assault, sexual harassment, or discrimination based on gender, sex, gender identity, or sexual orientation while serving in the CAF, working for the DND, or for the Staff of the Non-Public Funds, Canadian Forces (SNPF).

In July 2019, the parties involved in the class action signed a proposed Final Settlement Agreement (FSA). The FSA for the **CAF-DND Sexual Misconduct Class Action Settlement** was approved by the Federal Court of Canada on 25 November, 2019.²¹

The FSA provides for financial compensation for former and current CAF members, DND employees and staff of SNPF affected by sexual misconduct, along with a suite of policy measures and change initiatives to promote positive organizational culture and address sexual misconduct in the CAF, such as the option to participate in a Restorative Engagement program.

A great deal was learned from those who came forward during the settlement approval process and hearings to share their experiences. These lessons, along with outcomes from the class action and settlement, underscored the need to transform the ways in which those affected by sexual misconduct are supported and engaged.

Schedule N to the FSA, titled "Survivor Support Consultations" (see Annex 1, "Schedule N"), outlines a requirement to form a Survivor Support Consultation Group (hereafter "SSCG"). Schedule N:

- Requires representation around the table by DND/CAF and class member representatives and provides for the contracting of subject matter experts to assist the SSCG in its deliberations
- Originates from class members' wish to see the DND/CAF commit to enhancements to support survivors of sexual misconduct within the CAF
- Commits to sharing information and presentations with class member representatives on initiatives put in place since Operation HONOUR in 2015, as well as new initiatives being planned, and formally consulting class member representatives on other enhancements or priorities that should be considered
- Articulates a process by which those who are affected by sexual misconduct can, through their class representatives, directly influence the institution's policies, programs and services to respond to sexual misconduct and to support survivors
- Includes, as its main focus, discussion and recommendations pertaining to the content of a Survivor Support Strategy for CAF members affected by sexual misconduct, and a framework for engaging survivors and related key stakeholders moving forward.

Mandate

The overall objective of the Survivor Support Consultations was to obtain input on DND/CAF's plans to enhance resources and support programs for CAF survivors of sexual misconduct, and to

²¹ To learn more about the approved settlement, visit the class action website at https://www.caf-dndsexualmisconductclassaction.ca/ or call 1-888-626-2611.

ensure that plans to enhance support services for survivors reflect and integrate subject matter expertise.

Specifically, the consultations were to relate to:

- development of a comprehensive Survivor Support Strategy framework and implementation plan
- overall DND/CAF plans to enhance services for survivors and efforts to ensure that subject matter expertise is integrated
- the DND/CAF's strategy and plan for ongoing engagement with survivor stakeholders

Participants

Schedule N outlined a requirement for representation on the SSCG to include:

- up to three representative class action plaintiffs ("Class Member Representatives")
- the Executive Director of the Sexual Misconduct Response Centre (SMRC)
- the Director General of the Directorate of Professional Military Conduct (DPMC)
- other representatives from the DND/CAF with responsibilities related to support to survivors of sexual misconduct

Schedule N also identified a requirement for the work of the SSCG to be supported by up to three subject matter experts (SMEs).

Participants included:

- The Reverend Sue Beare (Class Member Representative)
- Larry Beattie (Class Member Representative)
- Cassandra Elliott (Class Member Representative)
- **Dr. Denise Preston** (Executive Director, SMRC)
- Rear-Admiral Rebecca Patterson (Commander CF Health Services, formerly Director General, Professional Military Conduct)
- Captain(N) (ret'd) Marie France Langlois (Policy Manager, CAF Transition Group)
- Rick Goodwin (SME)
- Myrna McCallum (SME)
- Dr. Erin Whitmore (SME)

Secretariat Support

As lead coordinating body for the SSCG and broader Survivor Support Strategy, Secretariat support was provided by the SMRC. Staff members scheduled and facilitated meetings, coordinated presentations by DND/CAF representatives and SMEs, prepared Records of Meetings and other documents for review by the SSCG, responded to questions, and provided background information such as a preliminary draft Survivor Support Strategy prepared by the SMRC for consultation by the SSCG (see **Annex 2**, "Draft Sexual Misconduct Support Strategy Framework for Consultation with the SSCG"), and updates about policies on sexual misconduct as this information became available [e.g. **The Path to Dignity and Respect: The CAF Sexual**

Misconduct Response Strategy (The Path), released 28 October 2020, and the Defence Administrative Orders and Directives (DAOD) 9005-1, Sexual Misconduct Response, released 18 November 2020].

Linkages to Key DND/CAF Commitments

The Schedule N work is a key cornerstone of work to guide the DND/CAF's broader efforts to put in place a robust approach to support for CAF members affected by sexual misconduct, along with a stakeholder engagement framework.

Commitments to undertake such actions were reflected in **Strong**, **Secure**, **Engaged**: **Canada's Defence Policy** (2017) priorities, specifically:

- <u>Initiative 18</u>: Complete the full implementation of the 10 recommendations of the Deschamps Report through Operation HONOUR.
- <u>Initiative 19</u>: Provide a full range of victim and survivor support services to CAF members.
- <u>Initiative 21</u>: Be open and transparent with Canadians and members of the CAF in communicating progress on this important issue.

The development of a Survivor Support Strategy and implementation plan was recommended in the **2018 OAG Review**²² and committed to in the DND response. Specifically, the DND/CAF committed to establishing "an integrated, national approach to victim support," which would ensure that members have access to a consistent level of service and specialized support regardless of where they are serving. The DND affirmed that the strategy would:

- be developed in partnership with Forces stakeholders and through consultation with SMEs and key external stakeholders, and that its implementation plan will identify a minimum level of service to be provided, and by whom, whether through internal or external service providers
- specify the credentials and training requirements of all victim service providers, as well as quality assurance, evaluation, and complaint mechanisms
- be informed by an intersectional gender-based analysis (GBA+) and tailored so that the
 unique needs of deployed members are considered and addressed as well as those of
 groups with distinct needs, such as: women; members of sexual and gender minority
 (SGM) communities; visible minorities; persons with disabilities; and Indigenous members

The DND is required to report to the Public Accounts Committee of Parliament and to the Defence Audit Committee on progress against these commitments.

A direct linkage to the development of the Support Strategy and Implementation Plan were included in Schedule N because it aligned specifically with the class member request to be consulted on enhancements to CAF supports to military members affected by sexual misconduct.

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²² Supra note 19.

More recently, further commitments related to support were outlined in **The Path** $(2020)^{23}$ – in particular, through:

- Strategic Objective 2.1: Improve support for affected persons (main effort)
 - o S3. Access to civilian sexual assault centres for support funded
 - S6. Integrated approach to affected person support implemented
 - o S7. Trauma-Informed training implemented
- Strategic Objective 2.2: Optimize the accessibility and integration of support services
 - o S8. Independent legal advice from civilian lawyer expert to victims available
 - o R6. Options for Enhanced Reporting protocols investigated
- Strategic Objective 3.1: Improve leadership response to incidents of sexual misconduct (affected persons)

²³ Released by the CAF's Directorate of Professional Military Conduct – Operation HONOUR (DPMC-OpH), "The Path" is a culture change strategy designed to prevent and address sexual misconduct in the CAF.

Process and Approach

The work of the SSCG must be understood to reflect only the specific timeframe during which the consultation occurred; it reflects existing practices, policies, and initiatives in place at the time. Changes made or contemplated as a result of recommendations made by reviews led by Justice Fish or Mme. Arbour will not be reflected here as these were not within the timeframe of the consultation period.

Start-up Meeting (26-27 February 2020)

A first formal meeting of the SSCG was held in winter 2020 in Ottawa. At that time, two of the three Class Member Representatives and two of the three Defence Team members who would form the consultation group had been identified. One Class Member attended in person and another by videoconference. Likewise, one Defence Team Representative attended in person and one by videoconference. Three support staff from the SMRC also attended the meeting, one of whom gave a presentation on the services provided by the SMRC.

The initial meeting focused on identifying preferences with respect to the selection of the remaining members of the Group, potential internal and/or external SMEs to support the work of the group, and priority areas of focus. A list of key guiding questions was provided in advance and is attached to this Summary Report (see **Annex 3**, "Initial Questions to Guide the Work of the SSCG").

Planning

In March 2020, due to the effects of the novel coronavirus (COVID-19) pandemic, and resultant direction from national, provincial, and local health authorities, all mass gatherings that put people in close contact were suspended. This new reality required parties to negotiate changes to the original Schedule N timelines and logistics for the SSCG. Going virtual meant that instead of meeting at in-person events, the work of the group shifted to a series of live virtual meetings and presentations using the online Zoom platform.

On 28 May 2020, the SSCG met to identify potential SMEs, as per the Schedule N requirement for the DND/CAF to present a list of no more than five SMEs and, using that list, for the SSCG to jointly select at least one, and up to three, SMEs to support these consultations. Based on the input received at the SSCG's first meeting, the SMRC looked for experts who would have a wide range of skills and expertise, and could bring a unique perspective to support the SSCG to consider how the CAF might enhance its supports to survivors. The SSCG agreed upon the selection of the three SMEs to support the Group's work: Rick Goodwin, Myrna McCallum, and Dr. Erin Whitmore (see Annex 4, "Subject Matter Expert Biographies".

On 11 June 2020, a work planning meeting was held. The SMRC presented its preliminary work to develop a draft framework for the Survivor Support Strategy as a starting point around which SSCG dialogue could potentially be based. The draft outlined a preliminary framework for consultative purposes built around four strategic priorities, eight core goals, and an overall vision (see **Annex 2**, "Draft Sexual Misconduct Support Strategy Framework for Consultation with the SSCG"). SSCG members discussed potential priority areas around which to focus its work

together; prioritized a list of DND/CAF organizations from which to receive informational briefings²⁴; and came to an agreement about a bi-weekly meeting schedule for the summer.

At its 8 July 2020 meeting, the SSCG finalized its priority areas of focus for future meetings and work, to include exploration of the following:

- Continuity of care and support during CAF transitions
- Training on trauma-informed approaches, including in relation to investigations and responding to disclosures
- The need for specific resources, such as:
 - o specialized sexual misconduct response teams at the regional level
 - a structured reporting/complaint mechanism and survivor support function tailored for helping professionals within the CAF to address abuse by and amongst helping professionals
- While recognizing women as a specific population of survivors of sexual misconduct and the importance of talking about women's distinct experiences of sexual misconduct in the CAF, finding ways to additionally address the needs of other specific groups of survivors in the CAF, such as:
 - Men
 - Indigenous peoples
 - 2SLGBTQ+
 - Reserve Force members and Canadian Rangers

At the same time, preliminary discussion was held on how best to engage and use the services of the three SMEs whose contracts were finalized and signed in early July. A schedule of informational briefings by CAF organizations to the SSCG and its SMEs was finalized.

At its 5 August 2020 meeting, SSCG members met with the three SMEs to hear about their respective areas of expertise and how their knowledge could be leveraged to address the group's priorities. Each SME gave an overview of their respective expertise and experience in relation to identified priority areas.²⁵

- Rick Goodwin: expertise on male sexual assault and abuse survivors
- Myrna McCallum: expertise on human rights law and education on trauma informed advocacy, cultural humility, vicarious trauma and resilience as well as Indigenous intergenerational trauma
- Dr. Erin Whitmore: expertise on advocacy against gender-based violence, research, policy analysis, program development and stakeholder engagement on issues related to sexual violence.

A workplan for each SME, along with a timeline setting out key milestones and deliverables consistent with the requirements of the FSA, were subsequently developed.

²⁴ One external department (Veterans Affairs Canada) provided a presentation.

 $^{^{25}}$ The SSCG also heard from Dr. Stacey Silins, Research Psychologist with the DND, who gave an overview of her expertise and research in community psychology and victim/survivor support, within the context of the DND/CAF, and offered to give a future briefing.

Informational Briefings (19 August – 10 December 2020)

The SSCG met for a series of informational briefings. **Table 1** provides the full list of briefings, by date.

Table 1 — List of Informational Briefings to the SSCG, by date		
27 February 2020/ 19 August 2020	Sexual Misconduct Response Centre (SMRC)	
19 August 2020	Directorate Professional Military Conduct (DPMC)	
2 September 2020	Royal Canadian Chaplain Service (RCChS)	
2 September 2020	Canadian Forces Health Services (CFHS)	
1 October 2020	CAF Transition Group (CAF TG)	
1 October 2020	Veterans Affairs Canada (VAC)	
15 October 2020	Integrated Conflict and Complaint Management (ICCM)	
15 October 2020	Director General Military Personnel Research and Analysis (DGMPRA); presentation on findings from the 2019 Victim Support Study	
29 October 2020	Canadian Military Prosecution Service (CMPS)	
29 October 2020	Canadian Forces National Investigation Service (CFNIS)	
29 October 2020	Canadian Forces Military Police Group (CF MP Gp)	
29 October 2020	Office of the Judge Advocate General (OJAG), Directorate of Law/ Military Justice – Policy	
12 November 2020	 Defence Advisory Groups: Defence Visible Minority Advisory Group (DVMAG) Defence Aboriginal Advisory Group (DAAG) Defence Women's Advisory Organization (DWAO) Defence Advisory Group for Persons with Disabilities (DAGPWD) Defence Team Pride Network 	
26 November 2020	Indigenous Advisor to the Chaplain General (IACG)	
26 November 2020	Advisor to the Chaplain General for LGBTQ2+ Issues	
10 December 2020	Reserves: Army Reserves and Canadian Rangers Naval Reserve Health Services Reserve	

The informational briefings were three hours each in duration. They were organized and facilitated by the SMRC and featured presentations by representatives of various CAF departments, services, and advisory committees. The presentations covered the structure of these entities and their responses to sexual misconduct. This format was used as a mechanism for reviewing the support services currently offered by the DND/CAF to CAF members affected by sexual misconduct and any planned enhancements.

Each presenter was given a list of standard questions to guide its informational briefing; these included top of mind questions related to the work of the SSCG (see **Annex 5**, "Standard Questions Provided to DND/CAF Organizations to Guide Informational Briefings Provided to the SSCG").

Staff of the SMRC attended and took notes. The Agendas for the informational briefings may be consulted at **Annex 6**.

In addition to providing informational briefings, several speakers sent written correspondence to respond to follow-up questions posed by SSCG members. Further, some organizations participated in follow-up discussions by phone or videoconference.

SME Presentations and Reports (February – June 2021)

Each SME provided a presentation to the SSCG. One presentation was scheduled per meeting to allow sufficient time for discussion. The presentations occurred following completion of all briefings by the DND/CAF and other invited guest speakers.

During their presentations, the SMEs addressed questions specific to some of their key areas of expertise. To ensure that the presentations would meet the needs of and respond to questions of central importance to the SSCG, SMEs were provided in advance with a list of 10 guiding questions that the SSCG wished SMEs to reflect upon and/or address when developing their presentations (see **Annex 7**, "Standard Questions Provided to SMEs to Guide Development of Presentations to the SSCG").

Additionally, the subject matter experts provided reports outlining considerations and recommendations related to support and engagement on key priority areas as identified by the SSCG (see **Table 2**, "SME Presentations and Reports"). The full reports of the SMEs are provided at **Annex 8**.

Table 2 — SME Presentations and Reports			
Expert	Presentation Topics	Report	
Myrna McCallum	What types of approaches and practices are necessary to ensure that military justice processes are trauma-informed with respect to: reporting; investigations; and trials? (11 February 2021)	"SME Report and Recommendations (Indigenous Survivor Focused)" (2 June 2021)	
Rick Goodwin	How does gender affect experiences of male victimization and the expression of trauma? How could such considerations be included when designing or	"Final Report to the SSCG" (26 May 2021)	

	enhancing supports for male- identified survivors of sexual violence in the military? What could be done to help address barriers to help-seeking and reporting for male-identified survivors? (18 February 2021)	
Dr. Erin Whitmore	What are some best practices in supporting gender and sexual minorities who are survivors of sexual violence? What best practices should be considered for all survivors? (22 April 2021)	"Supporting Survivors of Sexual Misconduct in the Canadian Armed Forces: Recommendations to Inform the Development of the Survivor Support Strategy" (28 May 2021)

Next Steps

This report is not the final step in the approach for the development of a Survivor Support strategy. There are additional steps that must be taken in order to ensure that it is a comprehensive approach and considers all factors.

Bring together all organizations in the DND/CAF who provide support to survivors and their families. The SSCG had to prioritize briefings; it did not hear from the complete range of service providers across the DND/CAF. Currently, there are many potential "doors in" for CAF members affected by sexual misconduct who are seeking support, and a range of service providers with whom an affected member may interact. Some services and resources have an explicit focus related to sexual misconduct as reflected, for example, in their role, specialized expertise, and/or training. Others are more general in nature; while not specifically focused on sexual misconduct, they form part of the broader landscape of support that CAF members can access to meet a variety of needs.

Definition and consistent use of terms. Language at times created barriers or took energy and focus from other issues – specifically, the lack of agreed-upon definitions for terms such as "trauma-informed" or "intersectional". That is why the SSCG's recommendations include a call for collaborative work – within the DND/CAF and with other stakeholders – to precisely define terms that will form part of the Survivor Support Strategy and Implementation Plan and to consistently use these to the greatest extent possible.

Conduct broader consultations. The SSCG followed the consultation process that was agreed to in Schedule N of the Final Settlement Agreement. Schedule N provided for up to three SMEs; at times, the SSCG felt that it may have been beneficial to have a fuller range and complement of SMEs, both to provide additional bases of expertise upon which to draw and to minimize the burden on individual SMEs to "speak for" the needs of specific groups. The same holds true for the participating class members, as Schedule N provided for up to three class members but a broader range and complement here could likewise have opened up additional perspectives and dialogue. The SSCG recognizes that broader engagement is a necessary and critical next step as part of refining and implementing the recommendations.

Logic Model

Logic models are used as visual depictions of the ways in which an initiative achieves its intended outcomes. 26 The logic model for the Schedule N Survivor Support Consultation is provided at **Annex 9** ("Logic Model – Schedule N – Victim/Survivor Support Consultations"). It outlines the assumptions, activities, outputs, as well as the immediate, intermediate, and ultimate outcomes of the Schedule N work.

Timelines and Deliverables

As per Schedule N, the SSCG was tasked to provide a Summary Report on its work, including any resulting recommendations, to the CDS and DM of National Defence by 25 June 2021.²⁷ Following receipt of a formal response by the DND/CAF to the SSCG's recommendations by 23 July 2021, the SSCG is to deliver its Final Report to the CDS and DM by 24 September 2021. The SSCG's Final Report must include any formal recommendations made and the DND/CAF's response; the report is to be translated and made public by 23 November 2021. See **Figure 1**, "Visual Timeline".

Figure 1, Visual Timeline, Work of the SSCG

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July-Dec 2020	Jan-May 2021	June-July 2021	Aug 2021
Engagement with DND/CAF groups providing services/programs to survivors	SME briefings on respective expertise Development of Consultation Group Summary Report	Consultation Group provides an initial Summary Report to DND/CAF +30 days DND/CAF to provide a formal response	Consultation Group delivers final Summary Report on to DM/CDS +60 days, report translated and made public

²⁶ For more Government of Canada guidance on Logic Models and Performance Measurement: https://www.canada.ca/en/treasury-board-secretariat/services/audit-evaluation/centre-excellence-evaluation/guide-developing-performance-measurement-strategies.html#LogicModel/

 $^{^{27}}$ Due to the COVID-19 pandemic, the Class Council/Federal Court of Canada authorized the DND/CAF to delay the original Schedule N deadlines.

PART III

General Observations of the SSCG

General Observations

While not meant to be exhaustive, the SSCG offers the following general observations which emerged over the course of our work together and served as a backdrop against which we formed our recommendations.

The military context, structure, and culture give rise to unique challenges and impacts

Experiences such as sexual harassment and sexual assault are not new in the military, nor are they unique to the CAF. However, there is a uniqueness to sexual misconduct in the CAF given the nature of military organizations as "total institutions" where "members of the military live, work, train and socialize together within a closely regulated environment".²⁸

Some aspects of military service that would not typically apply in the civilian context include, for example, the:

- acceptance of unlimited liability by all CAF members²⁹
- principle of serving Canada before self³⁰
- realities associated with universality of service³¹
- possibility of remote assignments and deployments abroad, and associated realities of
 postings and deployments (e.g. physical separation from normal support persons and
 systems; close living proximity with non-familial individuals; and inability to separate work
 and personal realms)
- command system, with its gendered, hierarchical rank structure, and inherent power imbalances which reflect and reinforce patriarchal, colonialist, heteronormative, and ableist systems and ways of organizing
- dominance of a hyper-masculine 'warrior' ideal
- preparation, through training, to be exposed to, and commit, violence
- existence of a separate and distinct justice system
- reality that trust and group cohesion are so critical to mission success
- high degree of inter-connectedness of social networks
- barriers to changing occupations
- policies regarding living arrangements
- policies regarding expected conduct and consequences of not complying

²⁸ The Honourable Marie Deschamps, External Review into Sexual Misconduct and Sexual Harassment in the Canadian Armed Forces, 27 March 2015, 13.

²⁹ Unlimited liability is about accepting the risks to health and life of performing hazardous duties and being lawfully ordered into harm's way; Duty with Honour: The Profession of Arms in Canada (2009), 10, 27.

³⁰ The mantra of "service before self" or "Mission, own troops, self", as articulated in Ibid (2009), 10, 32, and the ethical principle to "serve Canada before self", as stated in the DND and CF Code of Values and Ethics (2012), 9, are predicated on one's needs being subordinate to those of the nation and assigned mission, which can create barriers to seeking support.

³¹ This policy requires that all members of the CAF "must at all times and under any circumstances perform any functions that they may be required to perform" (*Canadian Human Rights Act*, s.15(9); it requires that members be mentally and physically fit, employable, and able to deploy in operational theatres.

duty to report³²

This context creates particular challenges with respect to reporting incidents of sexual misconduct and seeking and accessing support.

Both within and outside the military, sexual misconduct can have physical, psychological, familial, emotional, spiritual, social, career, and financial impacts that can be immediate and/or persist longer term. However, some aspects of the military context lend additional complexity and can serve to amplify impacts in specific ways. Consider, for example, that:

- The affected person can have repeated contact with and/or be in very close proximity to the person(s) who harmed them
- The affected person may have limited contact with family and their support network, or face challenges in accessing support services, increasing their vulnerability
- Experiences can be overlaid with a profound sense of betrayal not only by the person(s) who harmed them but also the institution (i.e. "institutional betrayal"), particularly if the incident is mishandled by the institution and its representatives³³
- Relatedly, experiences of sexual misconduct may result in "moral injury" and/or "spiritual wounding" in their contradiction to deeply held moral beliefs, values, and expectations
- The cultural emphasis on team cohesion adds social pressure to refrain from reporting and to accept the behaviours as the cost of belonging and collective unity
- The affected person may live in fear of potential career implications (e.g. reprisal, getting sent home from deployment, damage to reputation, disrupted career advancement, loss of privacy)

There are also unique logistical considerations when it comes to developing a robust system of support for the CAF

A support system for CAF members affected by sexual misconduct must take into account specific operational realities. Some examples include the:

- Location of members who are at units on bases and wings around the world; in Primary Reserve and Canadian Ranger Units not co-located with CAF bases or wings, and who may need to undertake significant travel to access support; in remote locations (e.g. ships, austere locations, Canadian Embassies, and NATO and foreign learning institutions); and serving in various time zones
- Potential for inconsistent or limited access to services and communication systems, for example, in the context of: operational deployments; taskings overseas and Special Forces deployments to undisclosed locations; reliance on military allies or host nation countries with varying support services and standards of care, different languages and

³² An analysis of the duty to report, as it relates to sexual misconduct, is included later. Generally, it pertains to requirements and expectations around CAF members reporting infringement of pertinent statutes, regulations, rules, orders and instructions to the proper authority.

³³ Ryan Holliday and Lindsey L. Monteith, <u>Seeking help for the health sequelea of military sexual trauma: a theory-driven model of the role of institutional betrayal</u>, *Journal of Trauma & Dissociation*, 20(3), 4 February 2019; FJ Andresen et al, <u>Institutional betrayal following military sexual trauma is associated with more severe depression and specific posttraumatic stress disorder symptom clusters</u>, *J Clin Psychol*, 75(7), July 2019:1305-1319.

cultural beliefs; or reliance, amongst Canadian Rangers, on remote northern communities with limited support services

 Existence of variations in entitlements to benefits and support between Regular Force and Reserve Force members, and across Reservists, based on the type of service under which an individual serves (i.e. Class A, B, or C)

A 'one-size-fits all' approach to support does not work

Every affected member's journey is different – from their lived experiences, to the types of support they want and need, and length of time during which support is needed. A member's experience is uniquely shaped by factors such as, but not limited to, their personal history (including history of trauma), gender, race, age, rank, culture, and community.

Tailored approaches are needed.

The CAF must learn to "lean in" to listen to best practices and lessons learned elsewhere

While there is no 'one size fits all' approach to survivor support, there are acknowledged best practices when it comes to designing effective support systems.

Collectively, what we have learned from those affected by sexual misconduct and from the broader knowledge base, including in the civilian context, is that there are some fairly common support needs, such as to:

- receive clear, timely, and accurate information about options, resources, and processes
- be treated with compassion, fairness, dignity, and respect
- have choice, voice, and control in decision making, to the greatest extent possible
- be able to access a comprehensive, seamless, continuum of care and support in a timely way

Likewise, there is a need to have in place key elements, such as:

- a framework that takes into account the social and structural context, and systemic barriers – one that does not over-medicalize the individual but instead is grounded in an understanding of existing power imbalances
- collaborative relationships between and amongst those who provide support, both with internal and external partners
- programs that are well-integrated and well-coordinated
- high quality, competent support, including specialized support (e.g. support that is responsive to gender, culture, race, language, and other factors)
- access to a comprehensive "menu" or range of support (e.g. transition-related, family-related, informational, emotional, spiritual, practical, legal, as well as peer support)
- an approach to support that is evidence-informed, and yet flexible enough to continue to evolve as we learn more about effective responses

Many individuals and organizations both within and outside the DND/CAF have perspectives, experiences, best practices and lessons learned to contribute to the development of a holistic

Survivor Support Strategy. Broad engagement efforts are needed to bring in their voices. Effective partnerships are vital to success.

There are several persistent gaps and barriers that need to be addressed

Through a series of informational briefings by the DND/CAF, the SSCG heard about several key gaps, including but not limited to:

- the absence of specific programs and supports such as: professionally-facilitated peer support; independent legal advice for sexual assault survivors; and Response and Support Coordinators (RS Coordinators) in every region to provide direct support and help survivors navigate complex systems and processes (noting, however, that Budget 2021 announced funding for all three of these initiatives during the course of the SSCG's work)
- the absence of third party or alternative reporting options
- trauma-informed responses to disclosures and reports
- knowledge and expertise within the chain of command in responding to incidents
- alternatives to investigations by the chain of command where necessary
- lack of understanding amongst CAF leaders that addressing incidents of sexual misconduct does not solely involve focusing on the behaviours that were wrong but also includes sharing information with, supporting, and accommodating the survivor
- support in making transitions to civilian services
- challenges survivors face in obtaining job-related support and accommodations after reporting sexual misconduct to the chain of command
- support for those who are on deployments/operations (e.g. who may not have ready access to services and/or may fear being sent home or facing other career impacts)
- well-coordinated and well-resourced collaboration and engagement with survivors, external subject matter experts, and others
- supports tailored to meet distinct needs (e.g. women, men, BIPOC, 2SLGBTQ+, and others)
- gaps in support for Reservists due to: differential entitlements to benefits; remote locations
 of service; and lack of clarity regarding support entitlements for Reservists, including
 among Reservists, Reserve administrators, and at the institutional level

The DND/CAF has the opportunity to transform its approach to how it supports survivors.

This moment demands flexibility, deep listening, innovative thinking, and a willingness to move beyond the status quo. All work to develop a Survivor Support Strategy and implementation plan must ultimately be grounded in an overarching framework that emphasizes culture change.

PART IV

Overarching Framework and Guiding Principles

Overarching Framework

The SSCG firmly believes that:

All survivor support-related initiatives must be grounded in broader efforts to change culture.

The need for transformative institutional and culture change has now been widely cited in numerous reports and recommendations, and must be understood as fundamental to creating effective support for survivors both individually and collectively. A recurring theme in the work of the SSCG was that a Survivor Support Strategy ought to reinforce the link between support for survivors at the individual level and support for survivors through institutional culture change. This is necessary so as to contextualize understanding of the causes and impacts of sexual misconduct in the CAF's structure and culture.

As summed up by Dr. Erin Whitmore, SME:

"Ensuring support is available to individual CAF members and their families is essential. However, approaching the tasks necessary to create and provide support cannot be limited only to improving individual services. Rather, supporting survivors of sexual [misconduct] requires concrete action aimed at undoing the power dynamics and mechanisms that allow sexual [misconduct] to happen in the first place. This includes developing an analysis and understanding of the gendered and sexualized culture of the CAF... It also requires confronting how misogyny, hypermasculinity, homophobia, transphobia, racism, ableism, and other forms of discrimination are historically built into the very structure and values of the CAF.

...[T]he Survivor Support Strategy and the subsequent work of supporting survivors and their families who have experienced sexual misconduct within the CAF must be rooted in actions that work toward systemic and institutional culture change.

...Supporting survivors means not only creating accessible individual services that ensure survivors have their safety, health, emotional, financial, and spiritual needs met in the aftermath of violence. Supporting survivors also involves the ongoing work of positioning sexual misconduct as the inevitable consequence of colonial, patriarchal, ableist, racist, and heteronormative systems that create the conditions within which violence against those with the least power in these systems has been and continues to be ignored, accepted, and in some cases encouraged within the CAF. As such, the mechanisms of support available to address the individual needs of survivors are only [as] good as the efforts being made to change the system that has created and continues to foster a culture that allows sexual violence to happen in the first place."³⁴

This overarching framework, or structural analysis, must be the foundation from which all other work takes place; it must be built into all individual services and support efforts.

³⁴ Dr. Erin Whitmore, 24 May 2021, Supporting Survivors of Sexual Misconduct in the Canadian Armed Forces: Recommendations to Inform the Development of the Survivor Support Strategy, 3.

Guiding Principles

Along with the above overarching framework, the SSCG also identified **three principles** to guide survivor engagement initiatives and development of a Survivor Support Strategy and implementation plan:

- trauma-informed
- cultural humility
- survivor-centred

These three principles are intended to serve as a compass in all work at each of the micro (individual), mezzo (group) and macro (organizational or institutional) levels.

A CAF culture that is firmly grounded in trauma-informed and survivor-centred approaches and cultural humility is our aspiration — one that cannot be achieved by disparate, disconnected, under-resourced, or uncoordinated processes or enhancements in multiple areas of the DND/CAF, nor by "tweaks" to individual programs.

Each principle is described below.

Trauma-informed

Trauma-informed approaches recognize that each person's reaction to their experience of sexual misconduct is unique, including how they self-appraise their experience.³⁵ Being "trauma-informed" means being aware of, and taking into consideration, the broad range of potential impacts of sexual misconduct, and building support that is responsive to those impacts. This includes adopting decolonizing approaches to trauma, which further recognize the ways in which multiple aspects of a person's identity can shape and affect the person and their community's experiences and understanding of trauma and approaches to healing and well-being.

In its broadest sense, trauma-informed approaches and practices are those that:

- prioritize the survivor's needs for safety, security, choice, voice, trust, and control
- adopt an approach that is compassionate, sensitive, non-judgmental, empathetic, patient, consistent, transparent, and reliable
- ensure that services, and the policies that guide them, are based on an understanding of trauma, trauma responses, and the effects of trauma (e.g. impacts on memory, behaviour, coping, ability to connect to support services)
- are guided by the principle of doing no harm and preventing against the potential for secondary victimization, or re-traumatization of people, to be perpetuated by individuals, service providers, institutions, and systems through practice, procedures, and policies, including during formal processes such as complaints and investigations
- recognize the importance of preventing and addressing secondary (vicarious) trauma as an occupational hazard

³⁵ Lonsway, K.A., Hopper, J., Archambault, J. (2020). Becoming Trauma-Informed: Understanding and Appropriately Applying the Neurobiology of Trauma. End Violence Against Women International, https://evawintl.org/wp-content/uploads/2019-12 TB-Becoming-Trauma-Informed-Trauma-to-Victim-Interviews.pdf

However, specific analyses of trauma should be developed for 2SLGBTQ+ survivors, Indigenous survivors, and others. For Indigenous survivors, such an analysis must reflect impacts of colonialism, and all aspects of cultural and intergenerational trauma. For 2SLGBTQ+ survivors, it must include ongoing, meaningful institutional acknowledgement of the CAF's history of structural violence and discrimination against SGMs – a process and acknowledgement that should be guided by, and occur in collaboration with, members of the 2SLGBTQ+ community within the CAF.

Relatedly, SSCG discussions highlighted that "sexual misconduct" represents only a limited portion of what can be defined as the "trauma load" of CAF personnel. To ensure a healthy workforce, and as a necessary secondary prevention strategy to eliminate sexual misconduct from the CAF, all aspects of trauma ultimately need to be better understood and addressed:

"There are many categories of trauma to be considered: developmental trauma, shock trauma, relational trauma, community-based traumatic stress, generational/historic trauma, cultural trauma, traumatic embodiment, secondary trauma, vicarious trauma, and ecological grief are all examples. Military sexual misconduct can be identified in many of these subsets." 36

Service providers should not expect nor need a disclosure of sexual misconduct to work in a trauma-informed manner. Embedding trauma-informed approaches into all aspects of policy, practices, and processes reduces harm and provides positive support for all personnel. Service providers do not need to know a person's trauma history to provide trauma-informed support; by using trauma-informed approaches, service providers can offer emotionally safe support, even when a member does not disclose their trauma history.

Becoming trauma-informed is an important part of the desired shift within the CAF – not only at the level of the individual service provider but also at the broader institutional level. In a trauma-informed institution:

- Affected members have the opportunity to take back control by having their choices and decisions respected (e.g. by being able to seek services and support without triggering a formal investigation before they are ready)
- A safe environment is created wherein individuals do not experience further harm or trauma in the process of disclosing incidents or receiving services and support (e.g. as may occur when individuals engage in practices that are harmful, or not sensitive to the impacts of trauma and how it manifests)
- Leadership fosters a positive chain of command climate in which it is consistently possible
 for those affected by sexual misconduct to report incidents and/or seek services and
 support without fear of retaliation, reputational harm, retribution, ostracism, and/or
 negative career impacts

An important caveat was that language matters. It will therefore be necessary to very precisely and clearly define the term "trauma-informed" in its various applications moving forward, and to do so in consultation with diverse groups of stakeholders. For example, there is a need to define how trauma-informed approaches are distinct from "survivor-centred", "victim-centred", "trauma aware", "violence-informed", "trauma competent", or "person-centred" approaches.

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³⁶ Rick Goodwin, SME, 26 May 2021 Report to the SSCG, 1.

Cultural humility

Cultural humility relates to social justice and equity, and is very important in relation to sexual misconduct which is fraught with myths and stereotypes. It surpasses "cultural competence" and "unconscious bias" approaches, owing to its emphasis on relationships, self-awareness, and dedication to ensuring that one is not acting on bias. The definition of cultural humility considered by the SSCG³⁷ was based on the work of Tervalon & Murray-Garcia (1998), who first developed the concept in relation to disparities and institutional inequities in the field of public health care in the US:

"Cultural humility is a lifelong process of self-reflection, self-critique and commitment to understanding and respecting different points of view, while engaging with others humbly, authentically and from a place of learning." ³⁸

In Tervalon & Murray-Garcia's framework, three factors are understood as guiding us toward cultural humility:

- a lifelong commitment to self-evaluation and self-critique
- a desire to fix power imbalances where none ought to exist
- development of partnerships with people and groups who advocate for others

To this definition, Myrna McCallum, SME³⁹, added:

"Cultural humility is a framework for moving us toward equity. It is an approach that recognizes the role of power and privilege, as well as the imbalances inherent within systems and organizations... Cultural humility asks us that we meet each person where they are, by suspending judgment and resisting the need to impose personal values, beliefs, and notions of wrong or right. In doing so, we reduce the harm of prejudice and oppression and present opportunities of equity."

Benefits to the DND/CAF of committing to approaches that are rooted in both trauma-informed practice and cultural humility include that such approaches:

- encourage culture change within an organization
- promote a culture of safety and empowerment
- build trust, transparency, and empathy
- offer opportunities for peer support
- promote collaborative engagement
- improve relational skill-building⁴⁰

³⁷ 11 February 2021 presentation to the SSCG by Myrna McCallum.

³⁸ Tervalon, Melanie & Murray-Garcia, Jann. (1998). "Cultural humility versus cultural competence: A critical distinction in defining physician training outcomes in multicultural education". *Journal of Health Care for the Poor and Undeserved*, 9, 117-125.

³⁹ Supra note 37.

⁴⁰ Supra note 37.

Survivor-centred

A **survivor-centred** approach is one that:

- prioritizes and promotes respect, dignity, diversity, and equality of the affected member
- treats people with dignity, compassion, and respect
- applies a needs-based or needs-led approach, one that tailors and makes responses more flexible to meet the member's specific needs
- provides holistic and personalized support
- prioritizes the needs, rights, and involvement of the person
- applies an inclusive lens [i.e. a gender-based analysis plus (GBA+) approach to support, in recognition that people's experiences and needs are uniquely shaped by their personal history, identity, context, culture, and community (see **Box 3**, "GBA+")].

An important part of a survivor-centred approach is being aware of differences amongst people, social groups, and institutions – for example, recognizing the range of ways in which sexual misconduct impacts different identities, groups, and communities. That entails making services accessible in relation to, example, gender, culture, language, religion, geography, sexual orientation, gender identity, gender expression, and/or disability, but without presumptively assuming what a person's needs may be. It includes promoting engagement with the support system by diverse groups, and ensuring that support services are inclusive with respect to meeting diverse needs (e.g. women, men, BIPOC, and 2SLGBTQ+ people).

Box 3 - GBA+

GBA+ is an analytical tool that helps to build diversity and inclusion considerations into policies and programs at every stage of development, implementation, and delivery. It acknowledges that people have multiple identity factors that make them who they are. As applied to sexual misconduct support, GBA+ requires us to: consider how multiple identity factors (e.g. gender, race, Indigenous status, religion, cultural customs and preferences, disability, age, gender identity, and sexual orientation) interact with life experiences to impact experiences of sexual misconduct; be responsive to the specific support needs a person has; and identify and address support gaps, as well as systemic and social barriers for diverse groups.

Survivor-centred practices that demonstrate positive outcomes for survivors not only benefit survivors, but also their families, the DND/CAF as a whole, and Canadians by virtue of having a military that fully supports those who live in service to others and, in turn, has increased wellness and hence operational readiness.

PART V

Key Themes, Goals & Recommendations

Overview of Key Themes, Goals, and Recommendations

The key themes and goals presented in this section have been summarized and categorized to align, to the greatest extent possible, with the priority areas of focus that the SSCG approved at the outset. The analysis also includes additional themes and comments that arose during the meetings and that were meaningful to the group. The key themes, goals, and recommendations and their discussion are by no means meant to be interpreted as being exhaustive. Several other recommendations are outlined in the SME reports, which have been annexed to this Summary Report (see **Annex 8**) in anticipation of their full and due consideration by the DND/CAF.

Further, key themes, goals, and recommendations identified here are not mean to be interpreted as mutually exclusive. There is interplay between and amongst them. For example, there is a theme pertaining to engagement, partnerships, and research, and a separate theme dedicated to training; yet, it must be understood that development of training initiatives should be informed by, and reflect, what is learned through engagement, partnerships, and research. Likewise, some recommendations do not distinctly nor neatly fit solely within one category and share applicability to other key themes and goals.

The following are the **five key themes** identified by the SSCG:

- Engagement, partnerships, and research
- Support, especially to address service gaps
- Training
- Communication and information
- Accountability

Goals and recommendations presented alongside the five key themes are working goals and recommendations that require additional engagement. Further review should be done in conversation with CAF members, survivors, and external advocates/organizations, including those with specialization in working with distinct groups.

Finally, all information in this section must be framed within the overarching framework and guiding principles set out in Part IV of this Summary Report — meaning that all actions must be grounded in a commitment to broader culture change, and guided by the three principles: trauma-informed; cultural humility; and survivor-centred.

Table 3 provides a summary of goals mapped to each of the five key themes.

Table 3 – Goals by Key Theme		
Key Theme	Goals	
Engagement, Partnerships, and Research	 Elevate engagement, collaboration, and partnerships Address data-related issues and continue to build the evidence base 	
Support	Create a well-coordinated, seamless, and accessible model of support	

	 Customize approaches to address the needs of distinct groups of survivors Reduce stigma and break isolation at all levels Modernize reporting options
Training	 Enhance support provider capacity and competency Form leaders with relational skills
Communication and Information	 Improve the quality, accessibility, and timeliness of information
Accountability	Embed governance structures, accountability, and commitment

Engagement, Partnerships, and Research

Elevate engagement, collaboration, and partnerships

Prioritize survivor engagement

A key part of the SSCG's mandate was to consider how best to engage survivors moving forward.

The SSCG heard about the types of engagement processes that have been undertaken by the DND/CAF with survivors of sexual misconduct up to now, particularly in relation to support. These engagement efforts have typically been time-limited or specific, such as: to consult on a particular initiative; collect information on a specific proposed change through surveys, focus groups, or online feedback forms; by having bilateral discussions with leaders of community-based organizations representing survivors of military sexual trauma (e.g. It's Not Just 700, the Survivor Perspectives Consulting Group, the former It's Just 700); or by holding meetings with survivors in the context of a formal review.

The SSCG firmly believes that a deeper and more consistent model of engagement is needed. Continuing on from the work of the SSCG, more inclusive and participatory models of stakeholder engagement must be implemented. To build a robust and responsive Support Strategy that will meet the needs of those it is intended to serve, there is a necessary shift that must happen – a shift to an approach that is relational as opposed to transactional. Such an approach moves engagement beyond simple "consultation" to developing meaningful relationships with CAF members affected by sexual misconduct; relationships characterized by more in-depth inclusion, feedback, and influence in the decision-making process.

In doing so, it will be important to continually ask whose voices and perspectives may be missing or under-represented from the discussion (e.g. specific groups or communities) and therefore must be brought to the forefront.

An effective model for engagement regarding support for members affected by sexual misconduct will ultimately be one that is survivor-centred, focusing on the needs of survivors, and putting those needs first rather than the roles, expectations, or desires of the individual and/or organization(s) doing the engagement.

The approach should additionally be 'survivor-led', which refers to an approach that equips, empowers, and builds the capacity of survivors to take a leadership role and have a voice. Survivor-led approaches strive to ensure that the experiences and expertise of survivors help to guide development and implementation of programs. Such approaches create environments in which survivors can participate in whatever way they feel comfortable.

Simply put, survivors should be at the heart of engagement. Survivor engagement is essential to crafting the right policies, programs, services, practices, and laws. Now more than ever, there is a need to build trust and increase transparency. It is critically important to incorporate survivor perspectives at all stages – including the earliest possible stages – in developing policies, procedures, and programs on sexual misconduct. Survivor engagement is a key aspect of

establishing effective responses aimed at changing the culture and improving support, while upholding key core principles (i.e. trauma-informed, cultural humility, and survivor-centred).

Inclusive, participatory models of engagement would help to ensure that survivors are where they ought to be: at the center of things. Such models are important not solely in the context of developing a Survivor Support Strategy and implementation plan, but also in relation to other issues, programs, policies, laws, and initiatives that have a nexus with sexual misconduct.

Build community-based collaborations and partnerships

Along with engaging with survivors in a more relational, participatory, inclusive, empowering, and meaningful way, the SSCG also discussed the need to facilitate strong engagement and relationships with community stakeholders. This includes, for example:

- Strengthening partnerships amongst support organizations and between those organizations and the CAF
- Developing referral mechanisms, founded on secure communication channels, which can be used between support organizations and/or between the CAF and those organizations
- Augmenting CAF service providers' ability to collaborate with an expanded network of civilian partners and stakeholders agencies
- Proactively seeking out opportunities to work in partnership within and external to the CAF
- Adopting joined-up approaches and working together toward common goals
- Developing networks to share good practice and learning
- Undertaking outreach in ways that reflects a commitment to cultural humility

Engagement should include organizations with expertise in providing services to specific populations, and expand beyond traditional partnerships and service provision norms to craft comprehensive approaches to respond to survivors' needs.

Recommendation 1: Develop and implement an ongoing, consistent engagement and collaboration mechanism/process that centers the expertise of survivors of sexual misconduct within the CAF, such as an Advisory Council or Community of Practice (CoP).

- The mechanism must permit the DND/CAF to hear directly from a diverse array of survivors about their experiences, needs, and recommendations for improving support.
- It should be involved in all aspects of the development, implementation, monitoring, and evaluation of policies, procedures, and initiatives to support affected members and address sexual misconduct in the CAF.
- Survivor members should represent a diverse range of backgrounds, experiences, and include distinct groups (e.g. women, men, 2SLGBTQ+, and Indigenous peoples, Reservists).
- The DND/CAF can begin the process of engaging the survivor community by reaching out to organizations that advocate for those affected by military sexual misconduct and MST in the CAF such as It's Not Just 700 (INJ700) and the Survivor Perspectives Consulting Group that facilitate survivors taking on leadership roles to determine the most appropriate structure.

 Survivors, whether through a sub-committee of the Advisory Council/CoP or another mechanism, should be represented on the Seamless Transition Task Force – Transition Process implementation team, under the governance of the joint steering committee, to ensure their involvement in the development of programs and services related to transition.

<u>Recommendation 2</u>: Develop a broader stakeholder engagement strategy that prioritizes survivor engagement to hear directly from survivors about their experiences, needs, and recommendations for improving support, as well as from other stakeholders.

- Refine and expand the CAF's network of civilian partners and stakeholder agencies.
- Ensure that all engagement initiatives with a sexual misconduct nexus include a
 diverse array of survivors and external advocates representing a variety of
 backgrounds, identities, and experiences.
- Ensure that engagement with survivors and external advocates is designed or codesigned, and led or co-led, by an experienced, external facilitator rather than being designed and facilitated by internal staff.

<u>Recommendation 3</u>: Work to address any potential gaps in the membership of the SMRC's External Advisory Council (EAC) on Sexual Misconduct (e.g. to include representation by those who engage and support male victims of sexual misconduct, those with expertise on Indigenous survivor issues, and/or others).

Recommendation 4: Invest in projects that promote collaboration, relationship-building, survivor leadership development, and community capacity building.

Recommendation 5: Build CoPs on CAF bases and wings.

 As part of this work, consider how to reach and engage all CAF members, including those in junior ranks, non-commissioned Members (NCMs), Reservists, and those in smaller units. Consideration should be given to initiatives that are already underway or being developed, such as a working group with NCMs, an expansion of the SMRC to the regional level, and implementation of the VLO role (i.e. through implementation of Bill C-77).

Recommendation 6: Build relationships, partnerships, and collaborate with organizational staff, other relevant health and social service organizations, and key external stakeholders in the development of strategies and practices to promote the three core principles (i.e. trauma-informed, cultural humility, and survivor-centred).

- Define the terms 'trauma-informed', 'cultural humility', and 'survivor-centred'; apply a consistent definition across units within the DND/CAF.
- Seek DND staff and CAF member feedback on the mainstreaming of such principles; promote collaboration to make organizational improvements as needed.

Address data-related issues and continue to build the evidence base

Another central element of partnerships and collaboration is research. Survivor-informed research and effective research-related partnerships amongst data holders and with internal and external research communities and service providers are needed to ensure that the CAF's approach to support is:

- evergreen and continues to evolve
- nimble and responsive in addressing support gaps so as to develop policies, programs, and services that reflect and meet the needs of diverse CAF members affected by sexual misconduct

While the CAF now has a better understanding of the general prevalence of sexual misconduct, thanks in part to information obtained from confidential, anonymous surveys such as the SSMCAF, data gaps remain. For example, there is much less information available about the contexts, risk and vulnerability factors, organizational responses, and outcomes and impacts of reporting. Additionally, there is a limited amount of data on incidents of unreported sexual misconduct.

The CAF's ability to fully understand the nature, complexity and severity of its sexual misconduct problem has thus far been impaired by a number of data-related issues.41 This gap in knowledge has implications for the development of evidence-based support, response, and prevention programs.

For example, there are many entities with a role in preventing or responding to sexual misconduct and they have a need to maintain their own databases. This means that there are multiple information management and data source systems within the CAF, and each one records and reports different information. Moving forward, there is a need to focus on enhancing individual databases to attempt to capture the range of information identified as important, and to design these through an institutional data analytics lens. Ultimately, a centralized repository of this information should be created to facilitate centralized organizational reporting, program development, and research.

Research that focuses on better understanding the lived experiences of sexual misconduct must also continue to be prioritized. The SSCG received a presentation on the **Victim Support Study** undertaken by the DGMPRA. Dr. Silins presented the first in a series of Scientific Letters (February 2020) to the SSCG on 15 October 2020; the findings related to "perceptions of support". Dr. Silins noted that 67 serving and retired members of the Regular and Reserve Forces shared their lived experiences in relation to: the types of help they had sought, both formal and informal; the quality of care received; and challenges and gaps in available services. Future reports will examine these findings and additional themes in greater detail; what is learned should be reflected in the Survivor Support Strategy. Dr. Silins noted that other scientific letters are planned that will describe these findings in more detail, and a final report will include additional findings regarding first disclosures, impacts, and special considerations for various sub-groups. Planned studies (delayed by COVID-19) include focus groups with service providers. Moving ahead, this body of research will be invaluable to the work to develop and continually improve the Survivor Support Strategy.

⁴¹ Dr. Denise Preston, Executive Director, SMRC. Recommendations to Enhance Understanding and Reporting of Sexual Misconduct in the CAF. (6 January 2020).

The Survivor Support Strategy must draw, as well, on the wider evidence and research base which includes, for example, Canadian and international research on military sexual trauma, promising approaches to support, and lessons shared by partner defence institutions (i.e. United States, United Kingdom, Australia, and New Zealand).

It must additionally be informed by observations and recommendations gleaned through surveys, reviews, pilot projects, stakeholder engagement initiatives, service provider experiences, and new programs such as the DND/CAF's Restorative Engagement Program, which will include participatory research. Collectively, that knowledge base will help expand understanding of issues, gaps, needs, and opportunities for further change.

Finally – and importantly – is ensuring that CAF members affected by sexual misconduct are actively involved as co-creators and participants in research and performance measurement processes.

This goal focuses on:

- Identifying research gaps and systems gaps; and where there is no research available, developing a research plan
- Breaking down barriers to data access
- Actively monitoring and sharing key trends
- Fostering and participating in fora and spaces to share lessons learned, promising practices, and emerging practices, such as research-focused CoPs
- Learning from, and contributing to, the international knowledge base on sexual misconduct in military forces, as well as dialogue to influence global policy and service delivery (e.g. NATO and United Nations peacekeeping policies)
- Actively integrating the best available research based on the experiences of CAF members affected by sexual misconduct, community input, professional expertise, academic research, and other sources – to guide services
- Ensuring that services for CAF members affected by sexual misconduct are consistent with promising practices
- Supporting new research and pilot projects, including to further explore promising and emerging practices

<u>Recommendation 7</u>: Deepen the evidence-based understanding of the diverse experiences of CAF members who experience sexual misconduct and the context around sexual misconduct. Research should:

- be developed in collaboration with allied community-based organizations and others with expertise in research focusing on experiences of diverse populations
- collect disaggregated data on various identity factors

Recommendation 8: Establish a formal method to capture DND/CAF best practices and lessons learned related to supporting persons affected by sexual misconduct, and identify key barriers and strategies for bridging the gap between research and practice.

Recommendation 9: Continue work amongst internal partners to inventory and coordinate available data assets and systems that are currently used across DND/CAF to capture and manage files related to systemic misconduct, which includes sexual misconduct.

<u>Recommendation 10</u>: Leverage partnerships to standardize and use consistent definitions and terminology related to sexual misconduct, ensuring that definitions and terminology are applied consistently in the context of data, research, and knowledge translation and dissemination strategies.

- Moving forward, there should be greater precision and consistency in the use of language in reports and in the dissemination of data (e.g. the differences between incidents, reports, investigations, charges, etc.).
- Further, data sources should be clearly identified and limitations of the data should be clearly noted in reports as to avoid any misrepresentation or misinterpretation of results.

Support

Create a well-coordinated, seamless, and accessible model of support

The 2018 OAG Report recommended that all CAF members affected by sexual misconduct (i.e. no matter their stage of career, rank, geographical location, gender, culture, race, religion, language, gender identity, sexual orientation, age, or status as a Regular Force member or Reservist) should be able to access an integrated system of support.

The SSCG observed that approaches to sexual misconduct support currently vary from program to program and organization to organization in the DND/CAF. It is very challenging to identify a common approach to sexual misconduct support. This reality, in and of itself, is a powerful barrier. Much work needs to be done to build a common base of understanding between and across programs and organizations of the DND/CAF. Increased clarity and transparency around training, program eligibility, as well as policies and practices – and how policies and practices are being interpreted and applied – is needed.

The SSCG notes the importance of establishing a well-coordinated, holistic, comprehensive system of programs and services that meets members' specific needs. Every affected member ought to be able to enter the system through any point — essentially, through any service provider or military authority — and be assisted to access, connect with, and receive the tailored support they want and need. Further, every affected member should be able to access a full suite or range of support as needed, from immediate and practical assistance, to mental health support, safety planning, clear and timely information and referrals, case management and navigation, career-related and transition-related support, and longer-term therapeutic intervention as applicable.

A well-coordinated model requires identifying and addressing gaps in service, and ensuring that clear and consistent policies and practices are in place, along with clearly defined roles. Confusion about roles and responsibilities can inadvertently deny procedural fairness and lead to a range of other negative outcomes for survivors.

Coordination also involves creating a system wherein there is **no wrong door** and **no single track**. This means ensuring that survivors have multiple "doors in" to support but, once in, all of the pieces link so that survivors have seamless care.

The SSCG heard about multiple areas of the CAF where there are inconsistencies, gaps, or where roles and responsibilities need to be further clarified. The following are some examples:

• Roles and responsibilities amongst people providing direct service to victims in the context of the military justice system must be clear. The various roles across the DND/CAF that provide services to victims of sexual misconduct must work together to avoid overlap and confusion. CFNIS Victim Service Coordinators (VSCs), SMRC Response and Support Case Coordinators (RS Coordinators), and the forthcoming military justice system's Victim Liaison Officers (VLOs) will need to work out a coordinated approach so that victims do not feel overwhelmed or burdened with having to figure out the different supports provided by each role. Continuity of care as a case transitions through the military justice system is important. Currently, both CFNIS VSCs and SMRC RS Coordinators can support a victim from complaint through to case completion. While the roles and responsibilities of the VLO

are still being developed, it is an opportune time to ensure that continuity of care issues are addressed.

- Currently, each DAG addresses sexual misconduct differently, including how to handle disclosures, and this, too, should be addressed.
- There is a lack of consistent screening for MST at the point of transition from the CAF. Some members have encountered difficulties when they are seeking medical release due to MST because of how the CDS Directive Retention of CAF Members Affected by Harmful and Inappropriate Sexual Behaviour is being interpreted and applied. While retention is part of overall CAF Transition Group services, there are currently no built-in policies that address medical releases due to MST. This appears as both an inconsistency and a gap.

Another key component of a well-coordinated system involves creating a supportive referral culture across and within the support community, so that those affected by sexual misconduct will not have to negotiate access to, and deal with, multiple services on their own. As part of a broader support system, each service must be able to offer appropriate and assisted referrals to other services that can best support the affected member, if required.

Creating a well-coordinated, seamless, and accessible model of support means:

- Increasing coordination and connections between, and reducing horizontal and vertical silos amongst, programs and services that support those affected by sexual misconduct
- Providing assistance in navigating and accessing various levels and types of support eliminating the "ping pong" effect of being referred from provider to provider
- Expanding case coordination and navigation support, including by having SMRC Counsellors located in the regions
- Improving consistency within and across services
- Eliminating gatekeeping as a barrier to accessing support
- Identifying and addressing service gaps
- Creating choice and autonomy in choosing and accessing support; providing flexible programs that are best suited for each person
- Expanding the range or "menu" of holistic services the member can access
- Augmenting survivor choice and options, such as by:
 - Facilitating well-coordinated, respectful, barrier-free, and seamless transition to appropriate support systems outside the CAF
 - Exploring innovative, compassionate, and fair employment options in collaboration with affected members to facilitate continuation of or return to work, if they so choose

Recommendation 11: With funding from Budget 2021, improve access and direct support by expanding the SMRC's Response and Support Coordination (RSC) program⁴², putting in place regional coordinators at bases, units, and wings.

 $^{^{42}}$ The SMRC's RSC program provides an assigned, dedicated coordinator for CAF members who have experienced sexual misconduct.

 RS Coordinators must be allowed to escort survivors to any meetings they have and must be available to assist the chain of command in helping to develop a safe work environment should the survivor wish to remain in that work environment.

<u>Recommendation 12</u>: Undertake a comprehensive analysis/study of current support services across the DND/CAF, with a focus on identifying specific support gaps and barriers and ensuring consistent application of approaches that are trauma-informed, survivor-centred, and that promote cultural humility.

- Fully examine governance, recruitment, policies, and application of policies.
- Fully map vulnerability points within the DND/CAF that impede victims'/survivors' access to support and/or create risks for "falling through the cracks".
- As part of the analysis, place emphasis on workplace accommodation and transition-related gaps, along with solutions for addressing them that prioritize survivor choice.
- Undertake a detailed analysis of how trauma survivors are served by Health Services (e.g. Is there universal screening of all issues of trauma as a matter of procedure? What is the standard of training of mental health professionals at Health Services? For contracted external services? What qualities of best-practice care, including best practices for various specific populations, are implemented?)
- Ensure that issues of trauma are included in the assessment screening tool in the military career transition process.

<u>Recommendation 13</u>: Ensure equal access to services for all CAF survivors regardless of where they are located in Canada, and/or CAF survivors who require support while serving outside of Canada.

 As part of this, undertake scenario-based facilitated discussions such as real-time tabletop exercises amongst DND/CAF organizations to map out the support landscape and find ways to continuously improve service delivery for deployed CAF members.

Customize approaches to address the needs of specific groups of survivors

This goal focuses on how to enhance support in relation to specific groups, with the understanding that:

- the groups addressed are not the only ones requiring consideration for tailored services
- survivors' needs are often informed by multiple identity factors and not just one; all parts
 of identity overlap and intersect with one another to shape experiences, needs, and
 trauma
- the SSCG agreed that findings from engagement with diverse stakeholders, as discussed under the theme of "Engagement, Partnerships, and Research", must be applied to further inform holistic approaches to survivor support for under-served groups

Male survivors

Gender affects experiences of victimization and the expression of trauma; this reality must be reflected in supports for male survivors. There is a need to provide support to men in a manner that supports their masculinity⁴³, as they define it; this may require the use of different or tailored approaches and language.

There are internalized barriers to recognizing abuse or assault, and reporting abuse or assault, due to social stereotypes about men, masculinity, and sexuality. For these and other reasons, CAF support services and programs may be underserving male survivors of sexual misconduct. As well, it is important to recognize, when referring men to external support services, that most sexual assault centres historically only serve women and do not typically serve men; as such, referrals to, community-based sexual assault services should ensure that these services have the demonstrated capacity and ability to work with male survivors.

For the CAF to meaningfully support male survivors of sexual misconduct, it must first consistently acknowledge and recognize male victimization. The same cultural and socialization processes that produce men who are violent toward women also produce men who verbally, physically, and sexually assault men. At the same time, the CAF must recognize that women can also be perpetrators of sexual misconduct.

The needs of male survivors must be considered:

- Many male members may not wish to officially report their experiences of trauma, including sexual misconduct, and thus may only engage with a service that features anonymity
- Males who have had sexual misconduct experiences are less likely to disclose them, overall – including less likely to disclose them than are females – and are also less likely to disclose them to police
- Men do not engage in reporting with the chain of command on issues of sexual misconduct
 and other traumas for many reasons, including: the constraints of conventional masculinity;
 shame; the perception that support services are for females; the perception that a male
 will be considered the offending gender; a fear of lack of advancement; fears of
 retaliation; and the lack of dedicated male-centred services
- Men are reluctant to engage with sexual assault centres or other traditionally femaledefined spaces.

Disclosure about sexual misconduct can come out in the context of other presenting issues (e.g. combat trauma, substance use); if men receive a net positive and supportive response, it may encourage them to disclose lived experiences of sexual misconduct. However, the available supports to men are minimal even if they do disclose.

These realities highlight the need for trauma-informed services that understand and can competently and affirmatively support male survivors. There is also a need to apply a broader trauma lens beyond sexual misconduct. In mental health work with men, most case presentations involve more than one form of trauma (e.g. abuse or exposure to abuse; the normative

⁴³ In his 18 February 2020 presentation to the SSCG, Rick Goodwin, SME, noted that we need to consider "masculinities" as there are many forms of masculinity, including dominant cultural expressions, but masculinity is ultimately variable.

developmental and ritual traumas within male socialization). For example, in Canada, researchers found that about half of Canada's soldiers have a history of abuse or exposure to it; the likelihood of having had any childhood abuse experience was higher for members of Regular Forces (47.7 per cent) and even higher among Reservists (49.4 per cent) compared to 33.1 per cent in the general population.⁴⁴ In the US, researchers found that men with military service had twice the odds of reporting forced sex before the age of 18 years.⁴⁵ When it comes to survivor support, it is therefore necessary to take a more holistic approach, one that centers trauma, while also recognizing that some traumas are more common in one sex than another, and that sex role socialization affects how trauma is experienced and presented.⁴⁶

<u>Recommendation 14</u>: Develop a male-centred framework of services, and overall approach to understanding sexual misconduct, that reflect and meet men's specific service needs.

Recommendation 15: In order to address the needs of male-identified members, consider the development of male-specific strategies such as a portal, which could:

- Include a "menu" of options, such as reporting, accessing online survivor support services, and/or bridging to dedicated resources of Health Services or allied services not normally associated with a Survivor Support Strategy (e.g. services for domestic violence perpetration, sexually compulsive behaviours).
- Help men connect to dedicated and allied services and bridge to mental health services for men regardless of their base or mission or transfer. By doing so, the services offered could meet national standards of care, offer greater access and privacy, increase the timeliness of support, and not be dependent on the size or scope of local community resources.
- Be labelled as a "men's wellness" initiative or comparable term (i.e. avoiding any
 victim-identified or offender-identified language), in recognition that men are
 reluctant to engage with sexual assault centres or other traditionally "femaledefined" spaces.
- Be organized by language, culture, and/or other factors.

<u>Recommendation 16</u>: Increase support options for men by working with service providers with demonstrated competency in supporting male survivors through initiatives such as the SMRC's Transfer Payment Program and other initiatives.

 Community sexual assault services or other community agencies that are not able to develop or sustain dedicated male-centred services should not be utilized as civilian partners for the CAF to serve male survivors.

⁴⁴ Afifi, T.O., Taillieu, T., Zamorski, M.A., Turner, S., Cheung, K., & Sareen, J. (2016). Child abuse victimization and suicidal ideation, plans, and attempts in Canada. A military personnel and general population comparison. *JAMA Psychiatry*, 73, 229-238.

⁴⁵ Blosnich, John R., Dichter, M.E., Cerulli, C. (2014). Disparities in adverse childhood experiences among individuals with a history of military service. *JAMA Psychiatry*, 71(9), 1041-1048.

⁴⁶ Briere, J., & Scott, C. (2006). Principles of Trauma Therapy: A Guide to Symptoms, Evaluation, and Treatment. New York: Sage Publications.

2SLGBTQ+ / SGM survivors

Addressing the distinct needs of 2SLGBTQ+ survivors of sexual misconduct within the CAF was identified as a priority by the class action members of the SSCG. It has also been raised in numerous reports and reviews. 2SLGBTQ+ members of the CAF are more at risk for experiencing sexual misconduct in all its forms.

2SLGBTQ+ survivors experience additional forms of discrimination and violence when seeking support, and often feel invalidated accessing services due to inappropriate language, assumptions, microaggressions, and lack of understanding. The majority of SGMs anticipate not receiving fair treatment from the police and legal systems if sexually assaulted; this is particularly true for racialized 2SLGBTQ+ people. Such experiences are relevant to, and impact, help seeking and reporting.

2SLGBTQ+ competent, trauma-informed care is needed to build trust and safety, in recognition of experiences of interpersonal and systemic oppression, and the fact that some institutions and professions have a history of pathologizing and/or criminalizing 2SLGBTQ+ identities.⁴⁷

Compounding this, 2SLGBTQ+ people have faced structural discrimination within communities, including the CAF (e.g. the 2SLGBTQ+ Purge within the CAF), with deep and lasting impacts.

When it comes to addressing the distinct needs of 2SLGBTQ+ members, there appear to be significant gaps in understanding the prevalence and nature of experiences of sexual misconduct, and limited information available about the steps being taken to ensure that 2SLGBTQ+ survivors of sexual misconduct in the CAF have access to specialized services that respond to their diverse and distinct needs. There is also a need for more information about best practices in supporting 2SLGBTQ+ members who are affected by sexual misconduct in the CAF. Despite the increased prevalence of sexual violence that SGMs experience, they often face additional barriers in accessing support. Understanding the nature of these barriers within the CAF is important to providing effective services.

Recommendation 17: Adopt an intersectional approach to all aspects of the development and implementation of supports for SGM survivors that centres their experiences and expertise.

An 'intersectional approach', analysis, and orientation to addressing sexual
misconduct considers how gender, gender identity and expression, sexual
orientation, race, language, ability, Indigeneity, and other identity factors intersect
with various structures, systems, and forms of discrimination within and outside of
the CAF.

<u>Recommendation 18</u>: Develop and foster SGM-specific understandings of, and responses to, trauma and violence including to:

 Develop and adopt a trauma-informed framework for supporting survivors that is inclusive of the additional and distinct forms of trauma experienced by SGMs that go beyond sexual misconduct.

⁴⁷ Building Competence and Capacity. (April 2021). 2SLGBTQ+ Competent Trauma-Informed Care. http://buildingcompetence.ca/docs/Module6HandoutPutting2SLGBTQCompetentTraumaInformedCareIntoPracticeFINAL.pdf

- Ensure that supports are built upon recognition of the continuum of sexual and other forms of harm that disproportionately impact SGMs, and reflect an understanding of the additional and distinct forms of violence and tactics of power and control used to commit violence against SGMs.
- Promote a wrap-around service delivery model capable of responding to the distinct and varied mental health and health care needs of SGMs.

Indigenous survivors

Informational briefings provided to the SSCG highlighted "a significant lack of Indigenous-specific or culturally responsive services for Indigenous survivors of sexual misconduct" in the CAF. Key gaps were identified in relation to Indigenous survivors of sexual misconduct across several organizations of the DND/CAF. It is imperative that these gaps be addressed.

In a 26 November 2020 presentation to the SSCG, the Indigenous Advisor to the Chaplain General (IACG) identified a lack of awareness of Indigenous history and culture as the biggest challenge to integrating Indigenous-specific support within the Chaplaincy. Efforts to increase awareness of the intergenerational impacts of colonialism, genocide, and residential schools must be increased across the CAF as an institution.

There must be truth and reconciliation for Indigenous members of the CAF. It is insufficient to have employment equity-oriented groups comprised of volunteers, such as DAGs in place; it is clear from the SSCG's 12 November 2020 briefing on the DAGs, which included information on the Defence Aboriginal Advisory Group (DAAG), that these important groups are under-resourced and face governance challenges.

Further, there is a need to implement efforts much more along the lines of the Truth and Reconciliation Commission of Canada (TRC) by putting resources and people to that effect. To be clear, a commitment to reconciliation must be understood as inseparable from efforts to support Indigenous survivors of sexual misconduct in the CAF.

Both through her presentation and report, Myrna McCallum, SME to the SSCG, has articulated recommendations that would help to put in place a framework of support for Indigenous survivors of sexual misconduct in the CAF rooted in core principles of trauma-informed practice and cultural humility.

<u>Recommendation 19</u>: Identify the specific barriers that Indigenous survivors face to accessing supports as well as the type of supports that best help Indigenous survivors through their healing process.

Recommendation 20: Work to address the gaps and barriers noted in the Report to the SSCG provided by Myrna McCallum. Specific recommendations in the Report apply to each of: the Royal Canadian Chaplain Service (RCChS)/IACG; the Canadian Forces Health Services; the Canadian Forces National Investigation Service (CFNIS); Canadian Military Prosecution Service (CMPS); Office of the Judge Advocate General (OJAG);

⁴⁸ Report by Myrna McCallum, SME to the SSCG, 2 June 2021, 2.

Integrated Conflict and Complaint Management (ICCM); Defence Aboriginal Advisory Group (DAAG); and Army Reserves.

<u>Recommendation 21</u>: Prioritize recruitment and retention of self-identifying Indigenous and Two Spirit judges, lawyers, prosecutors, VLOs, Elders and cultural leaders to reflect the diversity among Indigenous peoples and to communicate a message of transformation, commitment to representation (e.g. race, culture, gender identity, and values), and to inspire credibility and trust.

Recommendation 22: Any departments, offices, or leaders developing strategies to support Indigenous members who experience sexual misconduct in the CAF must first address the realities and failures set out by Anna McAlpine in her thesis, An Intersectional Analysis of Sexual Misconduct in the Canadian Armed Forces: Indigenous Servicewomen, dated 9 April 2021.⁴⁹

Reservists

The 2016 and 2018 iterations of the Statistics Canada Survey on Sexual Misconduct in the CAF (SSMCAF)⁵⁰ have revealed that the prevalence of sexual assault is higher among Primary Reserve members than it is among Regular Force members. This could be because there is a higher proportion of younger Reserve Force members than Regular Force members. It could also be that a significant proportion of Reservists, particularly the Canadian Rangers (although Rangers were not part of the SSMCAF sample), are Indigenous, also a population with higher sexual misconduct prevalence rates.

Overall, support does not seem to be as robust for Reserve Force members compared to Regular Force members. This is primarily due to differential entitlements to benefits and support for Reservists than for Regular Force members. It is also related to their often remote locations of service, and their part-time status. These unique working conditions for Reservists mean that they face unique challenges in accessing support as follows:

- receiving adequate training about sexual misconduct
- accessing services and support
- knowing where to go or who to contact for support; many Reservists leave within their first
 five years a time when they are most vulnerable to experience sexual misconduct –
 without a good understanding of the CAF and what supports may be available to them

A key barrier is the Reserve Force administration and compensation plan, which the SSCG heard is complex, cumbersome, and not well understood, and which results in Reservists not having the same entitlements to care and support as Regular Force members. Another persistent issue is confusion about what type of support is provided when a member is transitioning between classes of services. Misinterpretation of policies, along with the fear of stigma and of jeopardizing future employment, could dissuade a Reservist from disclosing sexual misconduct to their chain of command.⁵¹

⁴⁹ The thesis was sponsored by the DND/CAF Mobilizing Insights in Defence and Security (MINDS) program.

⁵⁰ A survey that is conducted by Statistics Canada on behalf of the CAF.

⁵¹ While focused on Operational Stress Injury specifically, many insights from the May 2016 report of the DND-CAF Ombudsman would also apply to the issue of survivor support: Part-Time Soldiers with Full-Time Injuries: A Systemic

Leaders often find themselves in a position where the timeliness and accuracy of information and advice matters, yet they do not have the knowledge to provide either. At the same time, senior leaders acknowledged the challenges in communicating information within and to the Reserve Force given that most Reservists serve part-time, and may miss training sessions at the unit. Given the voluntary nature of service in the Reserve Force, commanding officers have little visibility into the day-to-day activities of Reservists. For example, they cannot compel Reservists to complete post-deployment follow-up activities, to continue to participate with the unit, or to seek support post-deployment. During the meeting, Reserve unit leadership noted this dynamic as a challenge.

One upcoming support mechanism will focus on Reserve Force members being supported by the CAF Transition Group (CAF TG) during their transition out of the military, which will take away the administrative burden on reserve units. However, actions needed to support sexual misconduct survivors in the Reserve Force include looking not only at access to external supports, but also support for survivors within their own units; there is a need to strengthen the responsiveness within Reserve Force units. Often, survivors in the Reserve Force do not know where to go or who to call, and some are being advised to release from the CAF after disclosing experiences of sexual misconduct.

<u>Recommendation 23</u>: Consider revising the terms of service for Reservists to enhance entitlements to care, particularly for sexual misconduct they experience during military service.

Recommendation 24: Improve the clarity and administration of the Reservists' entitlement and eligibility for support in relation to sexual misconduct.⁵²

 Develop a strategy to better reach Reservists in order to increase awareness of available support. A coordinating function should be considered as part of the strategy.

<u>Recommendation 25</u>: Explore options to modernize Reserve Force practices so that survivors can more easily access services.

Since members of the Primary Reserve can be as young as 16 years of age, there
is a need for the Reserve Force to think about supporting survivors who are under
the age of 18.

Reduce stigma and break isolation at all levels

Shame, stigma, silencing, and isolation are integral to sexual misconduct. They are profoundly damaging and act as powerful barriers to seeking or accessing support and reaching out to others, thus compounding the impacts of sexual misconduct, and must be addressed at several levels:

institutional⁵³

Review of Canada's Primary Reserve Force and Operational Stress Injuries. Online at: http://ombudsman.forces.gc.ca/en/ombudsman-reports-stats-investigations-rf-osi/reserve-force-operational-stress-injury.page

⁵² This recommendation is similar to one in the DND-CAF Ombudsman's 2016 report, cited at Ibid.

⁵³ For example, policies, processes, practices, or systems that are not culturally humble trauma-informed.

- social
- chain of command
- unit

The institutional level is distinct in some ways as it relates to things like policies, processes, practices, or systems that are not sufficiently trauma-informed, survivor-centred, or informed by cultural humility. The two other levels cover a range of negative experiences such as: blaming and shaming; not being believed or properly supported; being marginalized, sidelined, or gaslighted; institutional betrayal; and retaliation, retribution, and reprisals.

This goal was identified by, and originated from, Marie-Claude Gagnon, Founder of It's Just 700, when consulted on the Survivor Support Strategy in the context of her former work with the EAC on Sexual Misconduct. It was affirmed as a goal by class member representatives who attended the inaugural meeting of the SSCG in February 2020.

This goal is ultimately about:

- Challenging the silence, stigma, isolation, and barriers faced by those affected by sexual misconduct at all levels (social, institutional, chain of command, unit)
- Promoting awareness and understanding of affected members' needs
- Building policies, responses, spaces, and environments that promote support and empowerment

Implement peer support

Military sexual misconduct survivors have long advocated for the need for funded, sustainable, high quality, professionally co-facilitated peer support initiatives tailored to the needs of those affected by sexual misconduct. Connecting with other survivors who have also experienced sexual misconduct is acknowledged to have several tangible and intangible benefits, including to reduce stigma and isolation, while also increasing empowerment and resilience.

<u>Recommendation 26:</u> With funding announced in Budget 2021, reduce stigma and break isolation by implementing a professionally co-facilitated online and in-person peer support program for CAF members and Veterans who have experienced sexual misconduct during their service in the CAF.

- Involve those affected by sexual misconduct as co-developers of the program.
- Ensure that in-person peer support group meetings are held regularly and during
 work hours (e.g. during physical training). This will help promote a sense of
 relationship building, encourage maximum participation, and reduce the potential
 for disrupting the survivor's time spent with their regular support networks or
 external therapy treatments.

Explore innovative technology options to facilitate reaching survivors

Ultimately, a Support Strategy must be able to reach everyone, everywhere; failing to do so adds to isolation. The SSCG discussed the need to leverage technology to the extent possible. As so many different interactions move to online and mobile platforms in people's day to day lives,

exploring technology options is also central to ensuring the DND/CAF can meet survivors' desires to interact with service providers and other professionals via mobile devices from wherever is safest and most convenient for them. However, one caveat is that use of technology should be understood as a choice or option, not an obligation.

Recommendation 27: Partner with national technical assistance providers to enhance knowledge around the use of technology to reach more survivors. This will create a long-term network of experts to whom service providers and survivors can turn to for advice on best practices and advances in the field of virtual advocacy and support. Further, the network could be explored in relation to training for providers on best practices in virtual advocacy and safe technology for survivors, including survivors in underserved populations, young CAF members, and Reservists.

- As part of this work, the DND/CAF should explore the feasibility of building chat and text components into the functionality of survivor support services.
- Professional standards for use of technologies should be assessed, along with any reviews previously done of technology in relation to survivor support.
- Recommendation 15 (online portal for men) should be considered in the context of this work.

Address retaliation, retribution, and reprisals

A 'code of silence' prevails because many personnel will not raise a complaint or report sexual misconduct as they fear repercussions and do not trust the processes and systems. The culture of military discipline and command makes it difficult for members to raise concerns or speak out. A chilling effect is also created by witnessing or hearing about reprisals and negative outcomes experienced by other survivors, especially in cases where perpetrators hold more power (e.g. are in leadership positions) and act with impunity.

According to the results of the SSMCAF for 2016 and 2018, fear of negative consequences (such as being removed from one's unit, or repercussions for career progression) are amongst the top reasons why those affected by sexual misconduct do not report incidents.⁵⁴

<u>Recommendation 28</u>: Acknowledge and document the pervasive problem of reprisals and other forms of secondary wounding experienced by CAF survivors following disclosures of sexual misconduct. This may include, but is not limited to:

- Undertaking further investigation of:
 - the various types of reprisals and secondary wounding already identified by CAF survivors;
 - changes in treatment by unit members;
 - job relocation or changes;
 - career interruptions or endings; and
 - lack of trauma-informed responses from those in helping positions, as well as from investigators or others involved in investigation and prosecution related to sexual misconduct.

⁵⁴ Cotter, A. 2019. Sexual misconduct in the Canadian Armed Forces Regular Force, 2018, *Juristat*; Burczycka, M. 2019. Sexual misconduct in the Canadian Armed Forces Primary Reserve, 2018, *Juristat*.

 Ensuring that analyses document how reprisals and secondary wounding are embedded in the gendered and sexualized military culture, and how certain groups, such as women, men, 2SLGBTQ+, and Indigenous members are distinctly impacted.

Recommendation 29: Ensure that support and services for survivors are designed to address the significant psychological, physical, economic, spiritual, and employment impacts of sustained reprisals and secondary wounding as an additional component of military sexual misconduct and MST.

Modernize reporting options

The SSCG discussed in depth the need to transform the current reporting policies and options. Doing so would help to center the safety and empowerment of survivors.

Duty to Report

The duty to report was a recurring topic of concern for the SSCG. Currently, all CAF members are bound by a regulatory duty to report all misconduct, including sexual misconduct. The SSCG identified several areas of concern for survivors in relation to the duty to report incidents of sexual misconduct, building upon issues outlined by the 2018 OAG Report and recommendations by survivor groups such as the former IJ700. Of particular concern is how the duty to report sexual misconduct impacts a survivor's autonomy over whether, when, and how to report their experiences, and whether and how to seek support following an incident.

In accordance with the Queen's Regulations and Orders (QR&O), article 4.02, General Responsibilities of Officers, and QR&O article 5.01, General Responsibilities of Non-Commissioned Members, all CAF members must "report to the proper authority any infringement of the pertinent statutes, regulations, rules, orders and instructions governing the conduct of any person subject to the Code of Service Discipline."55 Officers who can "deal adequately" with a sexual misconduct incident are not required to report.56 If an officer determines that they cannot deal adequately with a matter, they must report it to the proper authority. However, there has been long-standing ambiguity regarding what it means to "deal adequately" with sexual misconduct. As well, there is ambiguity regarding the specific rank or level of authority an officer must have to be able to "deal adequately" with sexual misconduct.

Duty to Report

⁵⁵ The relevant extracts from the QR&O are as follows:

^{4.02 (1)(}e) An officer shall: "report to the proper authority any infringement of the pertinent statues, regulations, rules, orders and instructions governing the conduct of any person subject to the Code of Service Discipline when the officer cannot deal adequately with the matter."

^{5.01} A non-commissioned member shall: "...report to the proper authority any infringement of the pertinent statues, regulations, rules, orders and instructions governing the conduct of any person subject to the Code of Service Discipline."

⁵⁶ This excludes non-commissioned members who do not have this discretion and must report.

In the Departmental Response to the 2018 OAG Report, the CAF made a commitment to clarify CAF members' obligations in relation to reporting incidents of sexual misconduct. A recently updated directive on sexual misconduct, DAOD 9005-1, provides clarification on reporting, including guidance on determining whether an officer can "deal adequately" with sexual misconduct, without having to report. Ultimately, however, the determination of whether an officer can deal adequately with a sexual misconduct matter involves an exercise of discretion. Thus, there is still the potential for third party reporting of sexual misconduct in instances where the survivor is not ready or does not wish to do so. Furthermore, survivors are still technically required to report their victimization to a "proper authority" even if they do not want to – a policy that is not at all survivor-centred. It is a service offence for any CAF member not to report misconduct to the proper authority who can "deal adequately" with the matter.

There are still uncertainties in many situations regarding duty to report within the health care context, particularly for those who are required to comply with confidentiality standards of their professional governing bodies, which contradict the duty to report regulations. This has a number of impacts. It puts these professionals in an ethical and legal bind, contributes to inconsistent practices across health care professionals, and results in different legal requirements between the uniformed and civilian professionals who provide health care services to CAF victims.

There is also a great deal of uncertainty regarding Chaplains and their ability to provide confidential support to survivors. Currently, only Catholic priests are legally protected from disclosing information revealed to them under the seal of the confessional, and it is not common for Chaplains to receive disclosures exclusively in such a formalized context. This also results in inconsistent practices across Chaplains. It was suggested to the SSCG that clarification is needed on official policies regarding confidentiality and duty to report so that more survivors feel confident in seeking chaplaincy support, and so that there is consistency in how Chaplains themselves understand their obligations.

Taken together, the ambiguity and inconsistencies in health care and Chaplaincy add to the vulnerability of survivors at a critical time. DAOD 9005-1 states that "regardless of whether or not a sexual misconduct incident has been reported, those affected by sexual misconduct may access support and medical treatment as needed." While Canadian Forces Health Services and the Royal Canadian Chaplain Service are supports that a survivor may want to access, if CAF members working within these groups are still bound by the duty to report, survivors may be reluctant to seek the support that they need.

Survivors need to be able to choose if, when and where they feel safe to report. In the CAF context in which investigations are not conducted by independent authorities, the ability of victims to choose and to receive support without reporting is essential.

It is clear that the duty to report provides an important safeguard within the CAF to maintain discipline and safety. Recent changes to the directive on sexual misconduct are a step in the right direction, but still do not provide the requisite flexibility to fully address concerns regarding duty to report and its impacts on the needs of survivors. It is also inconsistent with the intent of the Declaration of Victims Rights which is to empower survivors.

In actual practice, judgment is exercised every day with respect to the duty to report, even without the explicit allowance in the QR&O language. The same discretion should be permitted to

survivors of sexual misconduct to protect them from being re-victimized and to enable them to safely seek support from professionals and support persons in uniform.

DAOD 9005-1, issued on November 18, 2020, improves the situation by providing more reporting options to victims. However, all reporting authorities remain within the CAF, except for the civilian police. This does not address the problem of mistrust in the institution identified in the Deschamps Report and the fear of reprisals or other negative consequences resulting from a report.

The recent announcement signaling the end to Operation HONOUR and a shift from a duty to report to duty to respond has led to confusion; in the absence of clear updated guidance in place, SMRC and others are being contacted by members who are unsure how to proceed.

As we prepared this Summary Report and recommendations, the Third Independent Review Authority of the Military Justice System concluded. As part of his review, Justice Fish recommended to create exceptions to the duty to report for victims of sexual misconduct, their confidants, and the health and support professionals consulted by them, noting that victims who wish to report must be provided the support they need to do so "without fear of harm to their well-being, careers or personal lives." He further recommended the establishment of a working group to consider exceptions to the duty to report for witnesses of sexual misconduct.

<u>Recommendation 30</u>: Establish an explicit exemption for victims/survivors, as well as designated health and support professionals who provide support to victims/survivors, from prosecution for failing to report sexual misconduct, with limitations for such cases as risk of imminent harm, harm to children, national security, etc.

Alternative Reporting

CAF members who are survivors of sexual misconduct have limited autonomy over how and to whom they can report, and which authority will oversee the conduct of the investigation.

The ERA Report, submitted by Madame Justice Deschamps in 2015, highlighted the difficulties experienced by victims who have limited reporting options and significant mistrust in their chain of command's involvement in investigations.

The complexities around the obligatory reporting and investigating of sexual misconduct were also noted in the 2018 OAG Report, which flagged a number of unintended and negative consequences of the duty to report. The Auditor General noted that, given duty to report and duty to investigate, formal reports and investigations move forward regardless of the survivor's preference, which ultimately discourages some survivors from reporting at all.

Furthermore, the 2016 and 2018 SSMCAF identified that CAF members perceive other barriers to reporting incidents of sexual misconduct, such as being afraid of negative consequences, not believing reporting would make a difference, and having concerns about the formal complaint process. They point to ongoing lack of trust in the institution to appropriately handle incidents of sexual misconduct and to effectively support victims.

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⁵⁷ Supra note 10, at 213.

The restrictive requirements and processes for reporting (QR&O 4.02 and 5.01) and investigating (QR&O 106.02 and 106.03) sexual misconduct in the CAF often trigger formal administrative and justice processes that are outside of a survivor's control, leaving them fearful of reporting at all. Furthermore, some survivors may want to report, but may not be comfortable doing so to their own chain of command, which they may not trust to take the complaint seriously or to conduct a proper investigation.

Clarification on reporting authorities was provided in the recently revised DAOD 9005-1, providing a non-exhaustive list of proper authorities who can receive reports of sexual misconduct and allowing survivors (or others) to report to any person or organization they may choose without having to go through their supervisor. However, survivors may also not feel comfortable reporting to others in the list as outlined in DAOD 9005-1, particularly if the survivor is of junior rank. All reporting authorities are within the CAF, leaving survivors without the option of reporting to an independent authority.

Establishing an alternative reporting mechanism would enable survivors to receive services and supports such as medical treatment, legal assistance, and counselling services, and to disclose – instead of officially report – sexual misconduct without triggering an official investigation. An alternative reporting mechanism would:

- increase the survivor's agency and control over what happens to them after an incident and hence be more consistent with trauma-informed practices
- enhance survivors' access to justice
- balance the need to protect the overall safety of the CAF as an organization with the need to support individual survivors
- likely lead to an increase in reporting of sexual misconduct, providing a more accurate understanding of the nature of the issue across the CAF

Other armed forces have recognized the benefits of providing survivors of sexual misconduct with different reporting options. The United States Department of Defense's Restricted (Confidential) Reporting Policy allows reporting of sexual assault to specified individuals (Sexual Assault Response Coordinator; Sexual Assault Prevention and Response Victim Advocate; or health care personnel) for military personnel of the US Armed Forces (and their adult dependents). This ensures that the survivor can receive healthcare (medical and mental), advocacy services and legal advice without notifying command or law enforcement officials. As a consideration for organizational safety, the relevant commander is notified that "an assault" has occurred but is provided with very limited details; the survivor's identity is never disclosed.

The armed forces of Australia and New Zealand have adopted similar systems, with the Australian system also receiving disclosures of sexual harassment. In addition, the Netherlands Armed Forces has two separate independent channels to report sexual harassment, with one being independent of the chain of command but localized within each of the service branches, as well as an external reporting mechanism. The system also uses "confidants" – other military members who volunteer – to assist survivors in the complaint process and who are exempt from the duty to report. The French military created the Cellule Thémis, to receive reports of sexual harassment outside of the chain of command.

Increasing the pathways for reporting through such mechanisms as Third Party Reporting and online reporting options can be useful in giving back control to survivors. **Recommendation 31**: Enhance supports to survivors of sexual misconduct in Canada's military justice system by providing access to alternative reporting options external to the chain of command.

Independent Legal Advice

Over the past few years, there has been recognition that the provision of free independent legal advice is an important mechanism that assists survivors of sexual assault to navigate various justice processes, make informed decisions about reporting, and prepare for investigations and proceedings, thereby increasing their access to justice and ability to exercise their rights.⁵⁸ The 2016 Victim Support Needs Analysis conducted by the DPMC-OpH identified lack of CAF-supported access to legal assistance as a service provision gap. This gap has been identified as an ongoing issue whenever the needs of survivors of sexual misconduct in the military justice system are discussed.

In the civilian criminal justice system, it was raised in a 2018 Report of the Coordinating Committee of Senior Officials Working Group on Access to Justice for Adult Victims of Sexual Assault.⁵⁹ As well, the Minister of Justice and Attorney General of Canada has been instructed by the Prime Minister to "work with provinces and territories to provide free legal advice and support to survivors of sexual assault and intimate partner violence." ⁶⁰

Several Canadian jurisdictions (e.g. Quebec, Ontario, Nova Scotia, British Columbia, Saskatchewan, and Alberta) currently provide independent legal advice programs to survivors of sexual violence. These are generally vouchers for two to four hours to receive advice from an independent lawyer, usually on a roster.

In the US Armed Forces, there is a confidential legal support function for victims of sexual assault, called the Victims' Legal Counsel (or Special Victims' Counsel), who are employed directly by the Armed Forces. A survivor can access free legal guidance and advice, as well as representation, regardless of whether or not they have reported the incident or how they have reported (e.g. restricted vs unrestricted reporting).

Survivors would benefit greatly from independent legal advice to help them navigate the intricacies of the military justice system, particularly as their rights under Bill C-77 come into effect in the next few years. Access to legal advice would empower survivors to make informed choices both in the aftermath of their victimization, including regarding reporting, and throughout military justice processes.

⁵⁸ See, e.g., Federal-Provincial-Territorial Meeting of Ministers Responsible for Justice and Public Safety (2018), 'Reporting, Investigating and Prosecuting Sexual Assaults Committed Against Adults – Challenges and Promising Practices in Enhancing Access to Justice for Victims', https://scics.ca/en/product-produit/reporting-investigating-and-prosecuting-sexual-assaults-committed-against-adults-challenges-and-promising-practices-in-enhancing-access-to-justice-for-victims/.

⁵⁹ Ibid.

⁶⁰ Minister of Justice and Attorney General of Canada Mandate Letter, https://pm.gc.ca/en/mandate-letter. letters/2019/12/13/minister-justice-and-attorney-general-canada-mandate-letter.

One of the commitments made by the Department of National Defence during the parliamentary debates on Bill C-77, was to develop a program that provides victims of sexual violence in the military justice system with access to legal advice. Further, in 2018, the concept of providing independent legal advice was approved by the Deputy Minister and Chief of the Defence Staff at a Defence Executive Policy Committee meeting.

<u>Recommendation 32</u>: With funding from Budget 2021, put in place a pilot project to provide independent legal advice to those affected by sexual misconduct whose cases are proceeding in the military justice system.

Training

Enhance support provider capacity and competency

This goal focuses on ensuring that support to affected members is of a consistently high quality by implementing role-based certification and training, trauma-informed standards for service providers, and a quality assurance system. Promoting and developing expertise by advancing internal professional knowledge and skills will help the CAF improve its response and support in the context of sexual misconduct. It will also help to ensure a consistent standard of care and support, so that all CAF members affected by sexual misconduct, no matter where they are, can access both basic and specialized support.⁶¹

The need for training on sexual misconduct that focuses on the unique dynamics of sexual violence and that is trauma-informed, survivor-centred and grounded in cultural humility for all service providers (including Military Police, health care providers, Chaplains, and others) recurred throughout the consultation process. A key focal point was on the need to provide ongoing training and education to the chain of command on how to respond to disclosures and conduct investigations in a trauma-informed way.

An important distinction was made that trauma-informed training must be role appropriate. The personnel leading and managing programs and/or providing direct support to members affected by sexual misconduct should develop and maintain role-based competencies through learning activities, such as online training and webinars, conferences, workshops, and other professional development opportunities offered internal and external to the CAF. At the same time, external partners can also benefit from additional training to understand the needs of military survivors, including the needs of specific groups of military survivors.

<u>Recommendation 33</u>: Enhance the subject matter expertise of those who provide support to CAF members affected by sexual misconduct, including education and training on trauma-informed approaches, cultural humility, and vicarious trauma (i.e. resilience training). This includes:

- Providing service providers with the tools to appropriately respond to reports and/or disclosures of sexual misconduct.
- Developing and implementing role-based certification and training, standards of training and certification, professional standards for service providers, and quality assurance systems.
- Ensuring that support providers have the training, supervision, monitoring and oversight commensurate with their responsibility.
- Providing adequate staff support for training.
- Developing protocols and policies to encourage support providers to enhance their skills and knowledge relating to sexual misconduct, including with respect to vicarious trauma.

⁶¹ For example, in the United States: the federal Office for Victims of Crime has created <u>Model Standards for Serving Victims and Survivors of Crime</u>, which provide guidelines to victim-serving agencies, across all levels of government, to promote high-quality and consistent responses to victims of crime; and the Department of Defense has issued an <u>Instruction</u> on Standards for Victim Assistance Services in the Military Community, which sets out standards of competence and service requirements for personnel, policy, and responsibilities.

 Promoting a culture of commitment to ongoing training through annual refreshers and foundational courses.

Recommendation 34: Explore options for seeking accreditation of certain services by a recognized accrediting body, where appropriate.

Recommendation 35: Implement mandatory and continuous CAF-wide education and training on preventing sexual misconduct and responding to disclosures of sexual misconduct that is developed, facilitated, and evaluated in partnership with external SMEs and trainers. In general, training and education initiatives on sexual misconduct should be:

- Conducted by trauma-informed professionals and not the chain of command.
- Developed and delivered in collaboration with external advocates/experts and in keeping with evidence-based best practices in sexual violence prevention and response training protocols.
- Backed by national standards (e.g. language, messaging).
- Include content on consent, being an effective bystander, understanding the distinct experiences of sexual misconduct for various groups, the intersection of sexual misconduct and colonialism, transphobia, racism, sexism and misogyny, and address the distinct ways in which the history and culture of the military create conditions in which sexual misconduct happens.
- Repeated regularly throughout an individual's career as opposed to being limited to a single training.
- Engage learners and leaders in meaningful and difficult conversations, and require demonstration of a competent understanding of key concepts and skills introduced in the training.
- Tailored to reflect the distinct responsibilities and roles of different organizations and positions. This will require the development and delivery of additional specialized, unit and department-specific training to CAF leadership, health services personnel, the CFNIS, Chaplains, SMRC counsellors/staff, and others who occupy distinct roles within the CAF.
- Subject to external monitoring, evaluation, and revision as needed.

Recommendation 36: Ensure that the development and delivery of Indigenous-specific content to those who work to serve Indigenous survivors and complainants is delivered by Indigenous experts and includes an emphasis on the following:

- Trauma-informed engagement strategies
- Cultural humility

Implicit bias awareness and safeguard strategies

- Stereotypes, myths, and stigmas targeting Black, Indigenous, and People of Colour (BIPOC) and Two Spirit survivors of sexual misconduct
- The TRC Calls to Action⁶²
- The MMIWG Calls for Justice⁶³

⁶² Truth and Reconciliation Commission, Calls to Action (2015), http://trc.ca/assets/pdf/Calls to Action English2.pdf.

⁶³ National Inquiry into Missing and Murdered Indigenous Women and Girls (MMIWG), "Calls for Justice," in Reclaiming Power and Place: The Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls (2019), 67-218, https://www.mmiwg-ffada.ca/wp-content/uploads/2019/06/Calls for Justice.pdf.

Form leaders with relational skills

The role of an engaged and informed leadership is pivotal. Leadership includes the ability to lead, guide, direct, inspire, influence, and empower people. It also includes thinking through the organization's mission, defining it, then clearly and visibly using organizational resources to accomplish it. The organizational leader clearly sets goals and priorities and defines and maintains standards. In the context of survivor support, leaders must model and integrate trauma-informed, cultural humility, and survivor-centred principles.

Although the role leadership plays in addressing sexual violence or harassment is under-researched, the available research evidence consistently suggests that satisfaction with the reporting experience is associated with positive outcomes, including organizational commitment, post-incident well-being/functioning, decreased distress, and increased intention to remain in duty.⁶⁴ In contrast, negative experiences with reporting sexual victimization have been associated with impairments in job performance, satisfaction, commitment, and a reduction in willingness to seek help for future issues.⁶⁵

Given the important role leadership plays in shaping a culture tolerant or intolerant to sexual violence and harassment, leaders – at all levels – should be equipped with appropriate training to foster effective strategies and responses, as well as to be able to engage in, and apply, a critical, structural analysis of the CAF's culture.

Recommendation 37: As an intrinsic part of character-based leadership initiatives in the CAF, develop a plan to foster leadership tools that focus on emotional intelligence, compassion, responsiveness, approachability, and cultural humility. The application of these core interpersonal skills will go beyond the focus on individuals and extend to understanding structural power imbalances and the ways in which this understanding is essential for those in leadership roles. The CAF's historical institutional structures of oppression should be part of the analysis, while fostering ongoing self-reflections about leadership's own privilege and responsibility.

- Avoid use of the term "soft skills" in relation to these training initiatives, as such terminology will not resonate and will marginalize the value of these critical leadership competencies and perspectives; instead, link to a "people first" approach.
- Develop a plan for each of: Non-Commissioned Members (NCMs), Non-Commissioned Officers (NCOs), and Officers.
 - Ensure that middle leadership is included.
 - Ensure that the NCM core is included; such skills should be reflected in the NCM Leadership Course, in recognition that NCM leadership is critical to solutions.
 - Explore models that include civilian or former military members co-facilitating leadership training with the military.

 ⁶⁴ Bell, M. E., Street, A. E., & Stafford, J. (2014). Victim's psychosocial well-being after reporting sexual harassment in the military. *Journal of Trauma & Dissociation*, 15, 133–152. https://doi:10.1080/15299732.2014.867563.
 ⁶⁵ Cortina, L. M., & Magley, V. J. (2003). Raising voice, risking retaliation: Events following interpersonal mistreatment in the workplace. Journal of Occupational Health Psychology, 8, 247–265. https://doi:10.1037/1076-8998.8.4.247.

Communication and Information

Improve the quality and accessibility of information

Finding relevant information can be frustrating at the best of times, but when dealing with experiences of sexual misconduct, can be insurmountable. Robust trauma-informed and survivor-oriented communications and information approaches are needed as part of an overall approach to survivor support.

The SSCG noted that, at this time, information regarding available types of support for those affected by sexual misconduct has not been systematized nor made accessible via a single database.

Access to relevant information, documentation, and policies must be addressed internally and externally to be supportive. Relevant documents, policies, procedures and forms must be easily accessible on the Internet, and information must be kept current.

While clear policies are imperative for fairness, having knowledge of those policies is just as important. Governing documents, such as those clarifying entitlements to support, should be easy to find and written in plain language. Any policy updates should also be clearly communicated.

The need for information is clear as the SSCG heard that, despite years of raising awareness through Operation HONOUR and other channels, survivors said more needs to be done to raise/improve awareness of where and how survivors can get support. In results from the 2016 and 2018 SSMCAF, low awareness of specific programs was identified as a reason why the majority of sexual assault victims in both the Regular Force and Primary Reserve did not consult services.⁶⁶

Information should be available in as many locations as possible. Survivors should have high quality information so that they know more about what to expect from different agencies. This should include clear information about their rights as they navigate the military justice system, and when it comes to reporting.

Other key aspects of this strategic goal include ensuring that affected members are provided with information about potential referrals to other support services, including to external support services, as appropriate; and that they are able to access information and updates in relation to their complaint or case (e.g. status of investigations, outcomes of their case, and opportunities for participation in processes, as applicable).

The SSCG and its subject matter experts comprise a group of people with varying degrees of experience working for or with the CAF — whether through current or past work, or as a CAF member, civilian, or expert contracted for service. All came to SSCG meetings with many questions about the current landscape of support; many of these questions remain unanswered even as the Consultation Group provides its Summary Report.

⁶⁶ Cotter, A. 2019. Sexual misconduct in the Canadian Armed Forces Regular Force, 2018, *Juristat*; Burczycka, M. 2019. Sexual misconduct in the Canadian Armed Forces Primary Reserve, 2018, *Juristat*.

The DND/CAF organizational landscape is complex, especially to an outsider/civilian. The SSCG was challenged to understand current support protocols and limitations, even with the benefit of a series of DND/CAF informational briefings and follow up questions directed to the DND/CAF.

As noted previously, in order to move ahead with the development of the Support Strategy, it will be necessary to do a complete and thorough mapping or audit to identify organizational gaps and opportunities within the support system. That knowledge base is essential to being able to systematically identify and address gaps.

Most external advocates and CAF members will not have prior knowledge of how the CAF support system works nor the support that is available within it. Without a very clear and readily explainable picture of the support within the DND/CAF and its gaps and limitations, the ability of the DND/CAF to meaningfully engage and collaborate with external partners around support will be compromised. Affected members' ability to seek support and to make informed choices and decisions will likely be compromised. Clear, high quality, and accessible information about the available support options and their parameters is a key building block of access to support.

The SSCG considered the needs of younger members of the CAF and those new to the CAF, including Reserve Force members who face different levels of entitlements to benefits, and discussed how important it is that information about sexual misconduct and available support be made proactively and readily available from the earliest point in a person's career, including at military educational facilities. Information about the support options that are in place and how to access them should also be available to family members and the public. External advocates should have an opportunity to review the information and provide feedback on it.

<u>Recommendation 38</u>: Ensure that timely, accurate, up-to-date, and clear/plain language information about services and how to access them is widely available to all CAF members, their families, and the public, such as through a centralized online portal.

<u>Recommendation 39</u>: Establish an information package for victims/survivors on their rights, the impacts of victimization and on the support services which exist in the CAF, along with external and/or partner organizations.

Recommendation 40: Materials created for survivors need to be carefully examined. Survivors should receive a debriefing package that highlights what they can expect, and who they can contact; however, information should be provided in such a way so as to avoid overloading a survivor with too many materials too soon.

<u>Recommendation 41</u>: Add information on available services for MST to CAF retirement/release processes.

 Offer a retirement/release package that includes information on MST and services as well as a screening service for all CAF Regular Force and Reserve Force personnel.

Accountability

Embed governance structures, accountability, and commitment

Recognizing that any strategic framework is only as strong as its implementation and application in practice, the Survivor Support Strategy must be supported by an implementation plan that sets out the details of a five-year approach and specific actions to be taken – when, how, and by whom.

The implementation plan must have commitment at the highest institutional level, clearly identify roles and responsibilities, and be supported by strong accountability measures in order to track progress, measure outcomes, promote understanding, and assess the impact of the Support Strategy.

Further, returning to the SSCG's guidance that support initiatives are inseparable from the need for broader culture, structural, and systemic change, there is a need – at the highest levels but also mainstreamed throughout the DND/CAF – "to change the system that has created and continues to foster a culture that allows sexual violence to happen in the first place" by committing to the three key principles identified by the SSCG: trauma-informed (which includes adopting a more expansive understanding of "trauma", one which also recognizes additional forms of trauma); survivor-centred; and cultural humility.

Recommendation 42: Issue a directive to establish a Working Group to fully analyze recommendations in this Summary Report and the SSCG's SMEs' recommendations.

 The Working Group should attach both a timeline and an appropriate lead organization or organizations to ensure the recommendations get turned into implementable action items across DND/CAF organizations through development of an implementation plan.

<u>Recommendation 43</u>: Develop and implement a performance measurement framework for the Survivor Support Strategy and implementation plan to measure, monitor, and report on progress across the continuum of services.

 Adopt a results-based and lessons learned-oriented approach to performance measurement – one that promotes continuous improvement.

<u>Recommendation 44</u>: Performance indicators that reflect initiatives and their outcomes must be tracked with regard to support for sexual misconduct survivors; leaders at all levels must be monitored, and incentivized to participate.

<u>Recommendation 45</u>: Commit to trauma-informed, survivor-centred principles, and cultural humility principles, practices, policies, and procedures across the DND/CAF, including at the individual, group, and institutional or systems level.

• Define the terms 'trauma-informed', 'survivor-centred' and 'cultural humility'; apply a consistent definition across units within the DND/CAF.

⁶⁷ Dr. Erin Whitmore, 24 May 2021, Supporting Survivors of Sexual Misconduct in the Canadian Armed Forces: Recommendations to Inform the Development of the Survivor Support Strategy, 3.

- Integrate these core principles into organizational policies, procedures, and practices.
- Ensure that diverse cultural factors are reflected (e.g., race, gender, sexuality, disability).
- Build relationships, partnerships, and collaborate with organizational staff, other relevant health and social service organizations, and key external stakeholders in the development of the principles and their application.
- Seek DND staff and CAF member feedback on the implementation of the principles and their application; promote collaboration to make organizational improvements as needed.
- Cultivate an environment for all members and staff that reflects the principles.
- Be aware that trauma can impact anyone. Promote an environment of self-care/wellness and take organizational measures to prevent vicarious trauma.
- Expand the area of concern from "sexual misconduct" to all forms of trauma for service members, while continuing to recognize the specific and distinct dynamics of sexual misconduct as a source of trauma.

List of Annexes

- Annex 1: Schedule N
- Annex 2: Draft Sexual Misconduct Support Strategy Framework for Consultation with the SSCG
- Annex 3: Initial Questions to Guide the Work of the SSCG
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- **Annex 5:** Standard Questions Provided to DND/CAF Organizations to Guide Informational Briefings Provided to the SSCG
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Annex 1 - Schedule "N" - Survivor Support Consultations 68

1. This document sets out a proposed consultation approach and schedule. Should circumstances require it, the process, schedule or representatives may be amended or changed by the agreement of the parties to address challenges and facilitate the objective of the consultation.

Consultation Group

- 2. The lead representatives in respect of the consultations will be:
- (a) Department of National Defence ("DND")/CAF Representatives
- i) Executive Director, Sexual Misconduct Response Centre
- ii) Director General, CAF Strategic Response Team Sexual Misconduct
- iii) One additional designate from one of the following: Canadian Forces Health Services, Canadian Forces Provost Marshall, Judge Advocate General, Chaplain General or other DND/CAF representative with responsibilities related to survivors of Sexual Misconduct, as determined by Canada

(b) Class Member Representatives

Within thirty (30) days of the FSA being approved, Class counsel will select three (3) representative plaintiffs or Class Members.

Objective

- 3. The objective of the consultations is to obtain input from Class Member Representatives with respect to the DND/CAF efforts towards enhancing its resources and support programs for CAF victims/survivors of Sexual Misconduct. Specifically, the consultations will relate to:
- (a) the National Victim/Survivor Support Strategy Framework and Implementation Plan ("NVSS");
- (b) Overall DND/CAF plans to enhance services for victims/survivors and efforts to ensure that subject matter expertise is integrated; and
- (c) The DND/CAF strategy and plan for engagement of victim/survivor stakeholders on an ongoing basis.

Process

4. Within sixty (60) days of approval of the FSA, the Consultation Group parties will hold one or two initial meetings. The objective of these meetings is to establish an informational foundation and context to understand current DND/CAF services, expertise and initiatives and identify areas where the input of the Class Member Representatives could be best employed. The Consultation Group will agree on:

⁶⁸ CAF-DND Sexual Misconduct Class Action Settlement, Final Settlement Agreement, at pages 226-228.

- (a) scheduling and meeting dates for the remainder of the Process, based on the process set out below;
- (b) any other representation from services and programs within the DND/CAF; and
- (c) any additional subject matter expertise that may be needed to support the work of the Consultation Group.
- 5. Class Member Representatives will not be paid for their time or their advice. Canada shall be responsible for reasonable expenses incurred by the Class Member Representatives in the course of carrying out their obligations under this Schedule. Reasonable expenses may include meals, travel and accommodation in accordance with the Government of Canada National Joint Council Travel Directive. Class Member Representatives may be asked to sign an agreement with DND in order to facilitate the reimbursement of these expenses, in accordance with Government of Canada policies and procedures.
- 6. Administrative support required for the work of the Consultation Group will be provided through the SMRC.
- 7. In order to facilitate the work of the Consultation Group, DND/CAF will, at minimum, share information concerning the following:
- (a) the status and current draft of the NVSS;
- (b) the services and programs available to victims/survivors of sexual misconduct, as well as the planned enhancements;
- (c) the current availability of and allocation of subject matter expertise providing advice on Sexual Misconduct in the CAF, including an update briefing on the SMRC's mandate to provide such independent expertise and its ongoing efforts to do so. This could include, but is not limited to, providing the Class Member Representatives with the opportunity to meet with members of the External Advisory Council on Sexual Misconduct, as well as with additional SMEs from the DND/CAF, such as SMRC staff and advisors; and
- (d) the structure and creation of ongoing formal mechanisms of consultation with victim/survivors, including the implementation of the SMRC's Victim/Survivor Stakeholder Engagement Strategy.
- 8. DND/CAF will present a list of no more than five (5) Subject Matter Experts (SMEs) within thirty (30) days of the Initial Meeting(s). From this list, the Consultation Group will jointly select at least one (1), and up to three, (3) SMEs to support these consultations.
- 9. If necessary, DND/CAF will then arrange and establish any needed SME contracts (or other mechanisms) in accordance with government contracting rules and guidelines and Consultation Group objectives.
- 10. Once the SME(s) have been identified, the Consultation Group will hold one or two formal meetings of representatives and SMEs. Further communications or meetings may be scheduled as required.

Reports and Recommendations

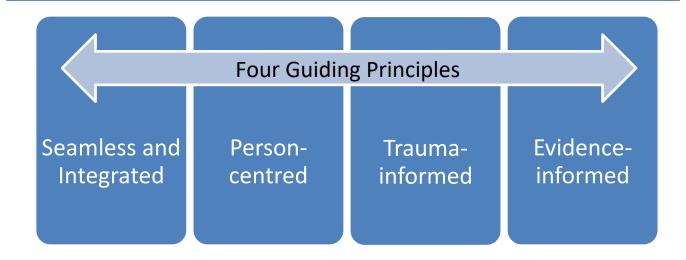
- 11. Within one hundred and eighty (180) days following the approval of the FSA, the Consultation Group will prepare an initial summary report of its work for delivery to DND/CAF. If the report contains any formal recommendations, DND/CAF will provide a formal response within thirty (30) days of receipt of those recommendations.
- 12. Within nine (9) months following the approval of the FSA, the Consultation Group will deliver its final report on its work, including any formal recommendations made and the DND/CAF's response. This report will be provided to the Chief of Defence Staff and the Deputy Minister of National Defence. DND/CAF will translate the report and make it available publically within sixty (60) days of the report's finalization. DND/CAF may also release a response to the report.

Annex 2 - Draft Sexual Misconduct Support Strategy Framework for Consultation with the SSCG (March 2020)

Vision

A system of support for CAF members affected by sexual misconduct that:

- is seamless and integrated, person-centred, trauma-informed, and evidence-informed
- > treats all affected members with dignity and respect
- ensures information about, and access to, support no matter where one is serving and whether or not an incident has been reported
- provides high quality, competent support, including specialized support for specific populations (e.g. culturally-responsive and gender-sensitive support)
- includes a holistic and comprehensive "menu" of support (e.g. career-related, spiritual, family-related, informational, emotional, practical)
- recognizes the importance of working together and in collaboration



Eight Goals

- 1. Establish a seamless and integrated continuum of support
- 2. Reduce stigma and break isolation at all levels (social, institutional, chain of command, unit)
- 3. Increase collaboration, engagement, and commitment
- 4. Improve the quality and accessibility of information
- 5. Embed person-centred and trauma-informed responses
- 6. Enhance support provider capacity and competency
- 7. Form leaders with relational skills
- 8. Continue to build the evidence base

Annex 3 - Initial Questions to Guide the Work of the SSCG

- What do you see as some of the top gaps, challenges, and barriers that the Support Strategy must address?
- What major thematic areas/groupings can we identify in relation to identified supportrelated gaps, challenges, and barriers?
- Thinking about the support-related gaps, challenges, and barriers, what specific gaps or special topics might external subject matter experts need to help the SSCG with?
- What types of SMEs do we need to involve (external and/or internal to the CAF) to help inform development of the Support Strategy (e.g. specific skills, expertise, or perspectives)?
- What criteria should be used for selecting and agreeing upon SMEs?
- What are your views on the best potential fit for the additional DND/CAF member to form part of the consultation group?
- What presentations would you like to see covered at future meetings, including presentations on specific DND/CAF services or programs?
- What are your overall thoughts on the current working draft of the Strategy? What changes or additions are needed, generally? (e.g. language, tone, structure, content)?
- What are your views on the current vision, guiding principles, and goals? What is missing or should be changed?
- What engagement has been done so far and is being planned?
- How best to engage survivors on the Strategy?
- Who else needs to be brought into the dialogue and how (including any groups you feel have been missing from support-related dialogue up to now)?

Annex 4 - Subject Matter Expert Biographies

Rick Goodwin, MSW, RSW: Clinical Director, Men & Healing: Psychotherapy for Men. Rick is a clinician and trainer on issues concerning men's mental health. Much of his work over the past twenty years has focused on male sexual trauma — managing both regional and national initiatives in Canada. He currently directs Men & Healing: Psychotherapy for Men, a collaborative mental health practice in Ottawa, and oversees the online support group programming delivered by Men & Healing. In the US, he is the clinical and training consultant for 1 in6, Inc., a non-profit organization that addresses male sexual trauma and recovery. He has been the primary trainer on clinical and first responder issues and has provided training to all branches of service with the US military.

Myrna McCallum: Miyo Pimatisiwin Legal Services, http://traumainformedlegal.ca/
Myrna is a former prosecutor and Indian Residential School adjudicator who encourages other lawyers to become Indigenous inter-generational trauma-informed as their personal act of reconciliation. She educates leaders, lawyers, law schools, legal advocates, and judges on trauma-informed advocacy, cultural humility, vicarious trauma, resilience, and Indigenous intergenerational trauma through keynotes, training sessions, and lunch and learn lectures. She practices in the area of human rights law and conducts workplace investigations into sexual misconduct, human rights, and bullying & harassment complaints while also serving as an advisor to organizational leaders on how to address gender-based violence in the workplace through trauma-informed policies and procedures. Myrna is a former residential school student (Lebret IRS), mother and kokom (grandmother) to three sweet babies. She is from the historical Métis village of Green Lake and Waterhen Lake First Nation in Treaty Six territory.

Dr. Erin Whitmore: Executive Director, Ending Violence Association of Canada (EVA Canada). Dr. Whitmore is a committed gender-based violence advocate with almost ten years of combined experience in direct service provision to survivors of sexual violence, as well as in research and policy analysis, program development, and stakeholder engagement on issues related to sexual violence. As the Executive Director of EVA Canada, Dr. Whitmore leads a national organization that works to address and respond to all forms of gender-based violence, and to strengthen collaboration among national, provincial, and territorial organizations and advocate at the national level. In addition to her experience working in the anti-violence sector, Dr. Whitmore completed a clinical social work internship at the Veterans Affairs Canada Operational Stress Injury (OSI) Clinic in Fredericton, New Brunswick. Through working primarily with the family members of Canadian Armed Forces (CAF) members, Veterans, and RCMP members who were living with an OSI, Dr. Whitmore developed an understanding of the CAF's institutional structure and culture, including the distinct challenges survivors of sexual violence may face within the CAF.

<u>Annex 5 – Standard Questions Provided to DND/CAF Organizations to Guide</u> <u>Informational Briefings Provided to the SSCG</u>

- What is the mandate of your organization and how does it intersect with CAF members affected by sexual misconduct?
- What specific resources and supports does your organization provide to victims/survivors of sexual misconduct? Does your organization have presence at the regional level? How do victims/survivors access your resources and supports?
- To what extent are those in your organization (including both leaders and front-line personnel) trained on responding in a trauma-informed way to victims/survivors?
- What are some potential areas of vulnerability for experiencing further harm or for "falling through the cracks" for victims/survivors in interacting with your services/programs?
- What protocols or policies are in place in your organization to respond to incidents of sexual misconduct by and/or amongst your own personnel?
- To what extent does your organization employ gender and/or culturally sensitive practices?
- Are specific practices applied in order to meet the needs of any of the specific groups that have been identified as facing distinct barriers to reporting and help-seeking?
- What supports are in place for your own personnel who have a role in responding to incidents (e.g. secondary trauma and burnout prevention)?
- Are there differences in access to services for Regular Force, Primary Reserve or Rangers?
 What are some potential risk or vulnerability areas for survivors who are Reservists or Rangers, in accessing your services or programs?
- How does your organization work in collaboration with other victim/survivor support services across the DND/CAF? Do you see gaps or areas for improvement?
- Are there currently any additional victim/survivor resources or supports being considered or in development?

Annex 6 - Meeting Agendas - Informational Briefings by DND/CAF Representatives

AGENDA SURVIVOR SUPPORT CONSULTATION GROUP 19 August 2020 1300 – 1600

1300 – 1305	Participants log on to 0365		
1305 – 1320	Welcome, Introductions, and Opening Remarks		
	Welcome, overview of agendaRoundtable of introductions	SMRC	
1320 – 1420	Directorate Professional Military Conduct (DPMC)		
	 40 minutes – Overview of the DPMC's purpose and mandate, Operation HONOUR 20 minutes – Questions/Discussion 	Rear-Admiral Rebecca Patterson	
1420 – 1430	Health Break		
1430 – 1530	Sexual Misconduct Response Centre (SMRC)		
	 40 minutes – Overview of the SMRC's mandate, role within DND, services and programs 20 minutes – Questions/Discussion 	Elizabeth Cyr, A/Director	
1530 – 1600	1530 – 1600 Wrap Up and Adjournment		
	Forward agendaReview of current status	SMRC/AII	

AGENDA SURVIVOR SUPPORT CONSULTATION GROUP 2 September 2020 1300 – 1600

1300 – 1305	Participants sign on to Zoom	
1305 – 1320	Welcome, Introductions, and Opening Remarks	
	Welcome, overview of agendaRoundtable of introductions	SMRC
1320 – 1420	1320 – 1420 Royal Canadian Chaplain Service (RCChS)	
	 40 minutes – Overview of the RCChS mandate and its intersection with victims/survivors of sexual misconduct 20 minutes – Questions/Discussion 	Major General Guy Chapdelaine
1420 – 1430	Health Break	
1430 – 1530	Canadian Forces Health Services (CFHS)	
	 40 minutes – Overview of the CFHS mandate and its intersection with victims/survivors of sexual misconduct 20 minutes – Questions/Discussion 	Rear-Admiral Rebecca Patterson
1530 – 1600	Wrap Up and Adjournment	
	 Schedule "N" timelines and deliverables New day/time for meetings Next meeting 	SMRC/AII

AGENDA SURVIVOR SUPPORT CONSULTATION GROUP 1 October 2020 1200 – 1500

1200 – 1205	Participants sign on to Zoom		
1205 – 1220	Welcome, Introductions, and Opening Remarks		
	Welcome, overview of agendaRoundtable of introductions	SMRC	
1220 – 1320	Canadian Armed Forces Transition Group (CAF TG)		
	 40 minutes – Overview of the CAF TG and the types of supports provided to members during all types of CAF transitions, including active duty to post-military life 20 minutes – Questions/Discussion 	Colonel Kevin Cameron, Director, Transition Services and Policy	
1320 – 1330	Health Break		
1330 – 1430	Veterans Affairs Canada (VAC)		
	 40 minutes – Overview of the supports and services provided by VAC 20 minutes – Questions/Discussion 	Mitch Freeman, Director General, Service Delivery and Program Management	
1430 – 1500	Wrap Up and Adjournment		
	 Special request to attend the 12 Nov meeting as an observer Next meeting 	SMRC/AII	

AGENDA SURVIVOR SUPPORT CONSULTATION GROUP 15 October 2020 1200 – 1500

1200 – 1205	Participants sign on to Zoom		
1205 – 1220	Welcome, Introductions, and Opening Remarks		
	Welcome, overview of agendaRoundtable of introductions	SMRC	
1220 – 1320	- 1320 Integrated Conflict and Complaint Management (ICCM)		
	 40 minutes – Overview of ICCM and the types of services provided to CAF members 20 minutes – Questions/Discussion 	Alain Gauthier, Director General, ICCM	
1320 – 1330 Health Break			
1330 – 1430	- 1430 Director General Military Personnel Research and Analysis (DGMPRA)		
	 40 minutes – Presentation on Scientific Letter, Experiences of CAF members affected by sexual misconduct: Perceptions of support 20 minutes – Questions/Discussion 	Dr. Stacey Silins, Defence Researcher, DGMPRA	
1430 – 1500	1430 – 1500 Wrap Up and Adjournment		
	Next meeting	SMRC/AII	

AGENDA SURVIVOR SUPPORT CONSULTATION GROUP 29 October 2020 1200 – 1500

1200 – 1205	Participants sign on to Zoom		
1205 – 1220	Welcome, Introductions, and Opening Remarks		
	Welcome, overview of agendaRoundtable of introductions	SMRC	
1220 – 1300 Canadian Forces National Investigation Service (CFNIS) and Canadian Force Police Group (CF MP Gp)			
	 20 minutes – Current programs and supports for victims/survivors and future improvements to program delivery 20 minutes – Questions/Discussion 	LCol Eric Leblanc & Maj Phillip Casswell	
1300 – 1340	- 1340 Directorate of Law/Military Justice Policy		
	 20 minutes – Victims' rights in the military justice system 20 minutes – Questions/Discussion 	LCol Marie-Ève Tremblay & Major Roseline Fernet	
1340 – 1350	Health Break		
1350 – 1430	Canadian Military Prosecution Service (CMPS)		
	 20 minutes – Role of CMPS & engaging with victims 20 minutes – Questions/Discussion 	LCol Maureen Pecknold	
1430 – 1500	1430 – 1500 Wrap Up and Adjournment		
	 Questions/Comments Next meeting	SMRC/AII	

AGENDA SURVIVOR SUPPORT CONSULTATION GROUP 12 November 2020 1200 – 1400

1200 – 1205	Participants sign on to Zoom		
1205 – 1220	Welcome, Introductions, and Opening Remarks		
	Welcome, overview of agendaRoundtable of introductions	SMRC	
1220 – 1300	Directorate of Human Rights and Diversity (DHRD), Military Person	nel Command	
	 20 minutes – Role of DHRD and a briefing on the scope, mandate and terms of reference of the Defence Advisory Groups 20 minutes – Questions/Discussion 	Maj Nicholas Soontiens, DHRD	
1300 – 1340	0 Defence Advisory Groups (DAGs) and Networks		
	 40 minutes – Open Discussion/Questions Discussion prompt questions: Are there protocols in place if a victim/survivor approaches a DAG representative to disclose sexual misconduct? In this regard, how is duty to report interpreted and applied? Do you find that CAF members are approaching the civilian members of the DAG to avoid triggering the duty to report? What type of feedback do DAG co-chairs receive from the bases and regions? Is sexual misconduct an issue that comes up? Are there any trends or issues about sexual misconduct that you're hearing that you can speak to? Have there been considerations regarding how the systemic inequalities faced by CAF members belonging to employment equity groups intersect with sexual misconduct victimization, and how this may affect employment advancement opportunities? 	Lieutenant-Colonel Tania Maurice Kirk/Kaiya Hamilton Major André Jean Lisa deWit Chief Warrant Officer Suzanne McAdam Lana Costello Matthew Raniowski All	
1340 – 1400	Wrap Up and Adjournment		
	 Questions/Comments Next meeting	SMRC/AII	

AGENDA SURVIVOR SUPPORT CONSULTATION GROUP 26 November 2020 1200 – 1500

1200 – 1205	Participants sign on to Zoom	
1205 – 1220	1220 Welcome, Introductions, and Opening Remarks	
	Welcome, overview of agendaRoundtable of introductions	SMRC
1220 – 1300	Indigenous Advisor to the Chaplain General (IACG)	
	 20 minutes – Role within the Royal Canadian Chaplain Service 20 minutes – Questions/Discussion 	Master-Warrant-Officer Moogly Tetrault-Hamel
1300 – 1340	Advisor to the Chaplain General for LGBTQ2+ Issues	
	 20 minutes – Role within the Royal Canadian Chaplain Service 20 minutes – Questions/Discussion 	Major (Padre) Ian Easter
1340 – 1350	Health Break	
1350 – 1450	Open Discussion	
	 How does your role intersect with CAF members affected by sexual misconduct? What specific resources and supports does your role/office provide to victims/survivors of sexual misconduct? To what extent are you trained on responding to survivors in a trauma-informed way? Do you have presence/support to your role at the regional level? 	Master-Warrant-Officer Moogly Tetrault-Hamel Major (Padre) Ian Easter All
1450 – 1500	Wrap Up and Adjournment	
	Questions/CommentsNext meeting	SMRC/AII

AGENDA SURVIVOR SUPPORT CONSULTATION GROUP 10 December 2020 1200 – 1500

1200 – 1205	Participants sign on to Zoom		
1205 – 1220	Welcome, Introductions, and Opening Remarks		
	Welcome, overview of agendaRoundtable of introductions	SMRC	
1220 – 1300	Army Reserve and Canadian Rangers		
	 20 minutes – Presentation 20 minutes – Questions/Discussion 	Brigadier-General Nic Stanton, Director General, Army Reserve	
1300 – 1340	Naval Reserve		
	 20 minutes – Presentation 20 minutes – Questions/Discussion 	Commodore Mike Hopper, Commander, Naval Reserve	
1340 – 1350	Health Break		
1350 – 1430	Health Services Reserve		
	 20 minutes – Presentation 20 minutes – Questions/Discussion 	Colonel Roger Scott, Director, Health Services Reserve	
1430 – 1500	Wrap Up and Adjournment		
	Questions/Comments	SMRC/AII	

Annex 7 – Standard Questions Provided to Subject Matter Experts to Guide Development of Presentations to the SSCG

- Q1 In June 2020, Consultation Group members developed a list of potential priority areas for consideration during the Consultation Group process. Looking at the list (below), are there any other areas that you feel have emerged from the briefings? If so, please explain.
 - Continuity of care and support during CAF transitions
 - Need for specialized sexual misconduct response teams at the regional level
 - Chain of command training on trauma-informed approaches, responding to disclosures and trauma-informed investigations
 - Throughout the briefing process, this area of focus has grown to include training not only
 for the chain of command but for anyone providing support to survivors and all actors in
 the military justice system; and not only basic training on trauma-informed approaches but
 also specialized training specific to a person's role
 - Abuse of power by people in positions of trust or authority
 - Addressing the needs of specific survivor groups (e.g., male, Indigenous, 2SLGBTQ+ survivors)
- **Q2** Based on what you have learned in your work, what does "a victim-centred and trauma-informed approach" mean to you?
- What key elements make for an overall good approach to survivor support in order to be meaningful, impactful, and effective?
- **Q4** "Support" is a broad term and can encompass non-specialist or more 'generic' (non-specialist, providing support in relation to many issues beyond sexual misconduct) and specialist services (providing support tailored to survivors of sexual misconduct, specifically). Based on the organizational briefings you have attended so far during this process:
 - What would you change about 'generic' service provision if you could?
 - How could specialist support services be improved in the future?
- Q5 Is there a type of support that you would like to see in place but that does not seem to currently exist (e.g. independent legal advice, peer support, other)?
- **Q6** What are your thoughts on how to balance a desire for regional/local services (including Hub or one stop services) with recommendations for specialist services tailored to diverse client groups and identities?
- Q7 Survivor support providers, including those with a justice orientation, often have partnerships and collaborations with communities. What opportunities do you see for CAF-based survivor support providers to collaborate with community-based survivor supports?
- **Q8** Based on your experience, what are some promising approaches and/or lessons learned about engaging survivors (i.e. engagement processes to include and involve survivors in the design of support initiatives to ensure that they reflect and meet their needs) that could be adapted to the military context?

- Q9 Are there any new/emerging conversations that the Support Strategy should be paying close attention to? (e.g. emerging work on coercive control and how coercive control plays a role in survivors' ability to seek and access support; others?)
- **Q10** Are there any international promising/best practices that you think are particularly relevant to work to develop a Support Strategy for the CAF?

Annex 8 - SME Reports

Supporting Survivors of Sexual Misconduct in the Canadian Armed Forces: Recommendations to Inform the Development of the Survivor Support Strategy

Submitted to: Survivor Support Consultation Group (SSCG) May 24, 2021



About the Ending Violence Association of Canada

The Ending Violence Association of Canada (EVA Canada) is a national organization that works to address and respond to gender-based violence. EVA Canada strives to strengthen collaboration among national, provincial, and territorial organizations to build understanding about gender-based violence and advocate at the national level.

This report was prepared by Dr. Erin Whitmore, Executive Director, Ending Violence Association of Canada.

The scope of this report

This report has been produced in accordance with the requirements set out in Schedule "N" of the CAF/DND Class Action on Sexual Misconduct Final Settlement Agreement for the Department of National Defense. This report reflects the scope identified by Sexual Misconduct Response Centre (SMRC) to provide recommendations to inform the development of the National Victim/Survivor Support Strategy Framework and Implementation Plan focused on the following areas:

- supporting survivors of sexual misconduct in general
- supporting sexual and gender minority survivors of sexual misconduct

This report is divided into four sections:

- Overview of the Survivor Support Consultation Working Group (SSCG) process
- Context for recommendations
- Recommendations for supporting survivors in general
- Recommendations for supporting sexual and gender minorities

Overview of the Survivor Support Consultation Working Group (SSCG) Process

The recommendations presented in this report respond to information shared through a series of meetings of the Survivor Support Consultation Group (SSCG) between June 2020 and May 2021. These meetings were organized and facilitated by the Sexual Misconduct Response Centre (SMRC) and featured presentations by a variety of Canadian Armed Forces (CAF) departments, services, and advisory committees.

As defined in Schedule "N," the purpose of the SSCG is "to obtain input on CAF/DND efforts towards enhancing its resources and support programs for CAF victims/survivors of sexual misconduct." The presentations delivered by representatives of various CAF departments, services, and advisory committees provided some preliminary information about the structure of these various entities and their responses to sexual misconduct. However, there are a number of ways that this process could be improved to facilitate a more survivor-centred, comprehensive, and collaborative approach to understanding the needs of CAF survivors of sexual misconduct and the current barriers to services.

These include:

- Creating a process to hear directly from a diverse array of survivors about their experiences, needs, and recommendations for improving support
- Creating a process to facilitate conversation about the experiences of Indigenous and 2SLGBTQ+ CAF members and to discuss the distinct recommendations for support that would best support these members
- Improved dialogue and collaboration with CAF members from a variety of ranks and
 positions about the sexualized and gendered culture of the CAF, and how they understand
 this culture to create challenges for addressing sexual misconduct and providing support to
 survivors
- Less emphasis and focus on explaining the organizational structure of various CAF departments and more focus on explaining the specific challenges and barriers these structures create for survivors seeking services
- Opportunities to meet with CAF representatives for follow-up consultation sessions
- Increased access to information about the specific strategies, protocols, training programs and modalities used by various units and departments to address and respond to sexual misconduct
- Opportunities to engage with diverse external advocates and experts, including Veterans
 of the CAF, to explore components of the proposed Survivor Support Strategy

In acknowledgment of the limitations of the SSCG process, this report is presented as a starting point for further conversation and collaboration that should include diverse survivors, external advocates, and CAF/DND members and Veterans in identifying strategies for supporting CAF survivors of sexual misconduct. Prior to the submission of the Survivor Support Strategy to the CAF/DND it would be beneficial for the SMRC to undertake additional effort to deepen the level of consultation and review to ensure that this important strategy reflects the true needs of those it is intended to serve.

Context for Recommendations

The stated goal of the draft Survivor Support Strategy presented to the SSCG is to create a "seamless and integrated, person-centred, trauma-informed, and evidence-informed, collaborative, and specialized approach to support" for CAF members affected by sexual misconduct. Ensuring support is available to individual CAF members and their families is essential. However, approaching the tasks necessary to create and provide support cannot be limited only to improving individual services. Rather, supporting survivors of sexual violence requires concrete action aimed at undoing the power dynamics and mechanisms that allow sexual violence to happen in the first place. This includes developing an analysis and understanding of the gendered and sexualized culture of the CAF, and the way that the beliefs, attitudes, practices, and ways of organizing within that culture perpetuate a rape-supportive culture. It also requires confronting how misogyny, hypermasculinity, homophobia, transphobia, racism, ableism, and other forms of discrimination are historically built into the very structure and values of the CAF.

The recommendations presented in this report reflect the position that the Survivor Support Strategy and the subsequent work of supporting survivors and their families who have experienced sexual misconduct within the CAF must be rooted in actions that work toward systemic and institutional culture change. The call for institutional and culture change has now been widely cited in numerous reports and recommendations, and it is a vital and fundamental first step in creating effective support for survivors both individually and collectively.

In keeping with these previous findings and recommendations, this report approaches the work of supporting survivors through an intersectional, feminist, and structural analysis of the problem of sexual misconduct. In doing so, it formulates actions for support in ways that aim to challenge and resist individualizing or pathologizing survivors or decontextualizing understandings of the causes and impacts of sexual violence from their basis in the CAF's structure and culture.

In this approach, supporting survivors means not only creating accessible individual services that ensure survivors have their safety, health, emotional, financial, and spiritual needs met in the aftermath of violence. Supporting survivors also involves the ongoing work of positioning sexual misconduct as the inevitable consequence of colonial, patriarchal, ableist, racist, and heteronormative systems that create the conditions within which violence against those with the least power in these systems has been and continues to be ignored, accepted, and in some cases encouraged within the CAF. As such, the mechanisms of support available to address the individual needs of survivors are only so good as the efforts being made to change the system that has created and continues to foster a culture that allows sexual violence to happen in the first place.^{A2}

Al Working together for a better future: Support Strategy for Canadian Armed Forces Members Affected by Sexual Misconduct, Internal Draft.

As Dr. Maya Eichler observed during testimony provided to the House of Commons Standing Committee on the Status of Women (April 20, 2021), "'this would require a redesign of the military workplace to allow for a more inclusive understanding of what it means to be a member of the Canadian Armed Forces" (https://www.ourcommons.ca/DocumentViewer/en/43-2/FEWO/meeting-27/evidence). For more about the need for this fundamental cultural shift, see Eichler, M. (2016). Learning from the Deschamps Report: Why military and Veteran researchers out to pay attention to gender. *Journal of Military, Veteran, and Family Health* 2(1), 5-8; Kovitz, M. (2018). Sexual (mis)conduct in the Canadian forces. *Critical Military Studies* 7(1), 77-99.

The recommendations that follow offer potential routes through which to use the Survivor Support Strategy to reinforce the link between support for survivors at the individual level and support for survivors through institutional and culture change.

Recommendations for survivors in general

The following recommendations relate to survivors in general as this was defined by the SMRC. This means that these recommendations are meant to address strategies for strengthening services and supports within an ongoing institutional change effort that could benefit all survivors of sexual misconduct.

Recommendation 1: Develop and implement an ongoing consultation process that involves and centres the expertise of survivors within the CAF, Veterans, and external sexual violence advocates in all aspects of the development, implementation, monitoring, and evaluation of policies and initiatives to support survivors and address sexual misconduct in the CAF. More specifically:

- The SMRC/CAF/DND should review its practices and process for consultation and engagement with survivors and external advocates in collaboration with these groups to ensure a consistent, inclusive, mechanism for collaboration and consultation.
- The SMRC/CAF/DND should ensure that all consultation initiatives include a diverse array
 of survivors and external advocates representing a variety of backgrounds, identities, and
 experiences with special attention to groups who have historically and continue to be
 marginalized within the CAF, including women, Indigenous, 2SLGBTQ+, and male survivors
 of sexual violence.
- Consultation with survivors and external advocates should be led or co-led by an experienced, external facilitator rather than being designed and facilitated by internal SMRC/CAF/DND staff.
- Any CAF member/survivor who participates in consultation initiatives should be financially compensated for their time and effort above their regular salary. Resources should also be made available to survivors engaged in consultation work should their participation in such consultations trigger the need for additional emotional or other forms of support. Likewise, all external consultants should be financially compensated for their time and effort.
- Consultation and stakeholder engagement should be ongoing and not limited only to the
 development phase of policies, strategies and other initiatives. Survivor-centred and
 external advocate consultation must be a key practice incorporated into the
 implementation, monitoring, and evaluation of all efforts to address sexual misconduct and
 survivor support services within the CAF.
- Prior to its submission to the CAF/DND, the Survivor Support Strategy should undergo a comprehensive review in addition to the review being done by the SSCG. This consultation process should be led by a facilitator external to the SMRC/CAF, and should ensure adequate opportunity for input from survivor-led groups who have expressed interest in being involved in the development of these policies, A3 as well as a more diverse array of external organizations and advocates with experience in supporting survivors of sexual violence.

A3 For example, It's Just 700 and the Survivor Perspectives Consultation Group.

Recommendation 2: Establish a framework for understanding and addressing sexual violence in the CAF that is applied consistently across the CAF, including in the provision of individual supports. This framework should reflect an intersectional, systemic analysis and understanding of sexual violence. It should aim to promote trauma-informed, violence-specific responses; honour the strength and resilience of survivors; and be committed to identifying and exploring alternatives that exist external to the chain of the command and the CAF with a focus on enhancing options for survivors.

Recommendation 3: Identify, acknowledge, and address the pervasive problem of reprisals and other forms of secondary victimization experienced by CAF survivors following disclosures of sexual violence by:

- Conducting research and consultation with affected members to document the types of reprisals and secondary victimization experienced by CAF survivors, and the levers through which these occur. This may include but is not limited to further investigation of the various types of reprisals and secondary wounding already identified by CAF survivors: changes in treatment by unit members; job relocation or changes; career interruptions or endings; lack of specialized or trauma-informed responses from those in helping positions; lack of specialized training or trauma-informed responses by investigators or other representatives involved in the investigation and prosecution of sexual violence.
- Conducting research and consultation with affected members to document how reprisals and secondary victimization are embedded in the gendered and sexualized military culture, and how certain groups, including women, 2SLGBTQ+ members, Indigenous members, and male survivors are distinctly impacted.
- Ensuring that support and services for survivors are designed to address the significant psychological, physical, economic, spiritual, and employment impacts of sustained reprisals and secondary victimization as an additional component of military sexual trauma and military sexual misconduct.
- Engaging with external, community-based advocates with expertise in developing and
 delivering training on secondary victimization to create and deliver education and training
 focused on raising awareness about secondary victimization, its impacts, and strategies for
 avoiding it as one part of a broader, comprehensive education and training program on
 sexual misconduct and violence.

Recommendation 4: Implement mandatory and continuous CAF-wide education and training on preventing sexual violence and responding to disclosures of sexual violence that is developed, facilitated, and evaluated in partnership with external subject matter experts and trainers.

In general, training and education initiatives on sexual violence should:

- be developed and delivered in collaboration with external advocates/experts and in keeping with evidence-based best practices in sexual violence prevention and response training protocols.
- include content on consent, rape supportive attitudes and beliefs, being an effective bystander, understanding the distinct experiences of sexual violence for different groups, the intersection of sexual violence and colonialism, transphobia, racism, sexism and misogyny, and address the distinct ways in which the history and culture of the military create conditions in which sexual violence happens.
- not be limited to a single training but repeated regularly throughout an individual's career

- engage learners and leaders in meaningful and difficult conversations, and require demonstration of a competent understanding of key concepts and skills introduced in the training.
- be tailored to reflect the distinct responsibilities and roles of different departments and positions. This will require the development and delivery of additional specialized, unit and department-specific training to CAF leadership, health services, Canadian Forces National Investigation Service, Chaplain services, Veteran's Affairs, SMRC counsellors/staff, and others who occupy distinct roles within the CAF.
- be subject to external monitoring, evaluation, and revision as needed.

Recommendation 5: Continue to develop and strengthen a centralized and integrated process for accessing all forms of support that is responsive to current barriers to services as these are identified by survivors and relevant service providers.

Consideration may be given to the following:

- Further developing CAF-wide understanding about how and where to direct those in need of support related to sexual misconduct
- Enhancing the capacity of the SMRC and other relevant departments to provide information about options for support that are external to the CAF, and to make connections with these external supports and services
- Further developing a sexual misconduct systems navigator position(s) to serve as a consistent, ongoing point of contact as an individual navigates all aspects of seeking support, reporting, and other needs
- Developing easily accessible and clearly articulated information that fairly reflects the
 process for reporting sexual misconduct; the potential challenges in reporting; the
 expected length of time for action related to reporting; and any other information
 deemed important by survivors that is necessary to make an informed decision about
 reporting sexual misconduct
- Ensuring equal access to services for all CAF survivors regardless of where they are located in Canada, and/or CAF survivors who require support while serving outside of Canada
- Ensuring equal access to services for all CAF members, including Veterans, civilians who
 interact with the CAF, and other members currently not serving^{A4}

Recommendation 6: Ensure timely access to specialized crisis and long-term sexual violence individual and group counselling for all survivors. The following should be considered in the ongoing development, review, and delivery of specialized sexual violence counselling services:

- Ensuring that sexual violence counselling services are provided by individuals with specialized training and understanding of sexual violence who are equipped to offer a variety of approaches and interventions to meet the distinct needs of different survivors
- Recognizing the limitations imposed by what is considered 'evidence-based' treatments in the CAF. Provide options for survivors to receive treatment where and how they want that are not limited to medicalized treatments and CBT, PE, and EMDR

A4 For specific recommendations for extending equal access to services for all CAF members, see Recommendation #7 in Care for Military Sexual Trauma Survivors of the Canadian Armed Forces: Facilitating access to adequate care and benefits.

- Ensuring that sexual violence counselling services are equipped to provide a broad range
 of supports to address needs beyond the psychological and mental health impacts of
 sexual violence. Supports identified as important by members of the SSGC as especially
 important include those that will provide support related to spiritual well-being
- Reflecting the need for counselling services identified by survivors, such as on-line peer support counselling and inclusion of military sexual trauma at Operational Stress Injury clinics. These services would also be made available in ways that address the distinct needs for crisis and on-going therapeutic support for CAF members based in locations where in-person counselling may not be available or feasible
- Supporting peer-led initiatives by asking them what they need to continue doing their work^{A5}
- Including options for counselling services external to the CAF/SMRC that are equipped to provide specialized sexual violence-specific support

Recommendation 7: Identify and implement measures to continue to develop and strengthen options for support external to the CAF/DND/SMRC, such as those offered through the SMRC's Response and Support Coordination Program, including:

- Engaging in a review and consultation process with participating community-based sexual assault centres (SACs) and other service providers involved in the Coordination Program to date to determine strengths and weaknesses in this program.
- In consultation with participating organizations, adapt the terms and requirements of the Coordination Program in ways that speak to the realities of SACs and other community-based service providers, including strategies that ensure the Coordination Program reflects the ongoing challenges in human and financial resources experienced by these organizations. This includes recognizing that SACs can be rich sources of information, and are also precariously funded, which sets up the possibility that knowledgeable counsellors may need to find time to fit this important collaborative work into their client work. Dedicated space for MST/CAF consultations on counsellor schedules is an important consideration.
- Create opportunities for the provision of specialized training in military sexual trauma, military culture, services, and other forms of professional development to further equip external service providers with information necessary to respond to the distinct needs of CAF survivors.

Recommendation 8: Continue to foster mechanisms for reporting sexual misconduct external to the chain of command, and review and strengthen all aspects of the reporting and investigation process for responding to sexual misconduct. These include:

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A5 One example of these types of initiatives is the Veterans Farm Project in Nova Scotia.

- Providing safe reporting options outside of the chain of command
 - Ensure reports of sexual misconduct are received, investigated and prosecuted by a fully independent, autonomous entity, external to the CAF, and separate from the SMRC^{A6}
 - Increase pathways for reporting, including exploring options for on-line reporting^{A7}
 - Provide the option for survivors of a sexual criminal offence to choose to have their case handled by the civilian justice system
- Improving the reporting and prosecution processes for survivors to feel empowered and to reduce revictimization, including:
 - Access to female investigators when requested
 - Options for emotional support during the reporting process (i.e. support person/animal)
 - Trauma-informed interviewing carried out with empathy and understanding
 - Confidentiality policy that ensures anonymity by leaving out the squadron/unit of the survivor
 - Reporting options and processes adapted to the unique needs/circumstances of the realities on the ground, for all survivors to have access to the similar levels of options, supports and confidentiality (i.e. in contained or remote spaces such as navy ships, foreign ports, etc.)
 - Ensure that all survivors of sexual violence have access to a formal and thorough investigation process no matter their location (and not replaced by informal unit disciplinary investigations)
 - Ensure mechanisms in place to ensure the ongoing safety of survivors once they have reported
 - Ensure investigators, prosecutors and judges understand interlocking systems of oppression, including sexism, homophobia, gender-based violence, misogyny, ableism and how sexual violence fits into the sexualized and gendered culture context of the CAF
 - Ensure that complainants in the military justice system have the same rights and protections as civilian complainants^{A8}

A6 This point was emphasized by MJ Batek, Representative of the Survivor Perspective Consulting Group in testimony to the House of Commons Standing Committee on the Status of Women (April 20, 2021): "The only way to make survivors feel safe is to ensure they are able to report to a system that is not bound by the chain of command and is not in the construct of the Canadian Armed Forces. It needs to be in its own area to be perfectly safe." https://www.ourcommons.ca/DocumentViewer/en/43-2/FEWO/meeting-27/evidence

 $^{^{\}rm A7}$ For example, $\underline{\rm REES}$ is one platform for online reporting of sexual violence.

^{A8} Craig, E. (2020). An examination of how the Canadian military's legal system responds to sexual assault. Dalhousie Law Journal 43(1), 63-101.

Recommendations for supporting sexual and gender minorities who have experienced sexual misconduct in the CAF

Addressing the distinct needs of sexual and gender minority (SGM) survivors of sexual misconduct within the CAF has been identified as a priority by the class action members of the SSGC.^{A9}

When it comes to addressing the distinct needs of 2SLGBTQ+ CAF members, there appears to be significant gaps in understanding the prevalence and nature of experiences of sexual violence, and limited information available about the steps being taken to ensure that 2SLGBTQ+ survivors of sexual misconduct in the CAF have access to specialized services that respond to their diverse and distinct needs. Data on the prevalence and nature of sexual violence in the Canadian population more broadly show that individuals belonging to a sexual and gender minority experience higher rates of various forms of sexualized violence than cis- gender, heterosexual Canadians. For instance, recent Statistics Canada data shows that excluding violence committed by an intimate partner, sexual minority Canadians were more likely (59%) to have experienced physical or sexual assault both since the age of 15 and in the past 12 months than heterosexual Canadians (37%) and that violence was more likely to result in injuries.^{A10} Of particular importance to addressing sexual misconduct within the CAF are findings from Canada-wide data showing the increased exposure to sexualized violence and harm within the workplace experienced by those identifying as a sexual and/or gender minority. For example, Statistics Canada data shows that transgender Canadians were more likely to be the target of unwanted comments about sex, gender, sexual orientation or assumed sexual orientation, and also unwanted sexual attention than their cisgender counterparts, and sexual minority Canadians were twice as likely to experience unwanted sexual behaviour at work.^{A11} Despite the extent of sexual violence, sexual and gender minorities often face additional barriers in accessing support. Understanding the nature of these barriers within the CAF is important to providing effective services.

Sexual misconduct directed against 2SLGBTQ+ CAF members is rooted in the gendered and sexualized culture that exists within the CAF that upholds and rewards hetero-normative masculinity. Providing individual services and support that reflect the distinct experiences of 2SLGBTQ+ CAF members is one part of ensuring that the CAF addresses sexual misconduct against 2SLGBTQ+ members. Equally important is the need to ensure that efforts directed toward institutional and culture change address the specific ways in which the gendered and sexualized culture of the CAF perpetuates homophobic, biphobic, transphobic, and other forms of structural and systemic violence against 2SLGBTQ+ CAF members.

A9 Sexual Misconduct Response Centre. Consultation Group Priorities. [PowerPoint].

A10 Jaffray, B. (9 September 2020). Experiences of violent victimization and unwanted sexual behaviours among gay, lesbian, bisexual, and other sexual minority people, and the transgender population, in Canada, 2018. Canadian Centre for Justice and Community Safety Statistics. Statistics Canada. https://www150.statcan.gc.ca/n1/pub/85-002-x/2020001/article/00009-eng.htm

All Jaffray, B. (9 September 2020). Experiences of violent victimization and unwanted sexual behaviours among gay, lesbian, bisexual, and other sexual minority people, and the transgender population, in Canada, 2018. Canadian Centre for Justice and Community Safety Statistics. Statistics Canada. https://www150.statcan.gc.ca/n1/pub/85-002-x/2020001/article/00009-eng.htm

A12 Taber, N. (2018). After Deschamps: Men, masculinities, and the Canadian Armed Forces. Journal of Military, Veteran and Family Health. 4(1), 100-107.

The following recommendations offer starting points for improving the CAF's response to sexual misconduct experienced by 2SLGBTQ+ CAF members. Further review of these recommendations should be done in conversation with a diverse group of 2SLGBTQ+ CAF members/survivors and external advocates/organizations specializing in 2SLGBTQ+ issues.

Recommendation 1: Adopt an intersectional, distinctions-based approach to all aspects of the development and implementation of supports for sexual and gender minority survivors that centres their experiences and expertise. Sexual violence effects different CAF members in different ways. Sexual misconduct requires a diversity of responses that reflect an intersectional understanding of experiences of power and oppression within the institutional system and culture of the CAF rather than a one-size fits-all response. An intersectional analysis and orientation to addressing sexual misconduct considers how gender, gender identity and expression, sexual orientation, race, language, ability, Indigeneity, and other identity factors intersect with various structures, systems, and forms of discrimination within and outside of the CAF. This requires the CAF to not only address sexism and misogyny but also racism, homophobia/transphobia, ableism, and other forms of discrimination within its efforts to support survivors and address sexual misconduct.

Recommendation 2: As part of its broader efforts at institutional and culture change, the CAF should continue ongoing, meaningful institutional acknowledgement of CAF's history of structural violence and discrimination against sexual and gender minorities. This process and acknowledgement should be guided by and occur in collaboration with members of the 2SLGBTQ+ community within the CAF.

Recommendation 3: Deepen the evidence-based understanding of the diverse experiences of sexual and gender minorities within the CAF that includes but is not limited to experiences of sexual misconduct. Research should:

- collect disaggregated data on different sexual and gender minority identities and other identity factors
- be developed in collaboration with allied community-based organizations and others with expertise in research focusing on sexual and gender minority experiences
- include an institutional audit to identify the barriers to services that are specific to a sexual and gender minority CAF members

Recommendation 4: Mandatory ongoing training for all CAF members in all positions on sexual and gender minorities specific to sexual violence and trauma response and prevention. This training should:

- Promote an intersectional, distinctions-based analysis of violence
- Include modules on rape-supportive culture and beliefs distinct to sexual and gender minorities
- Be developed in collaboration with allied advocates and/or those with lived experience within the CAF
- Be delivered by advocates or others with expertise specific to the experiences of sexual and gender minorities
- Require in-person participation and engagement (i.e. not an online training that can be taken alone) and demonstration of competent understanding of training content
- Be subject to evaluation, monitoring and reviewed at regular intervals

Recommendation 5: Develop or enhance prevention, education, and awareness campaigns that include and acknowledge specific forms of violence against sexual and gender minorities.

Recommendation 6: Develop and foster sexual and gender minority-specific understandings of and responses to trauma and violence within the SMRC and throughout the CAF including:

- Developing and adopting a trauma-informed framework for supporting survivors that is
 inclusive of the additional and distinct forms of trauma experienced by sexual and gender
 minorities that goes beyond sexual misconduct.
- Ensuring that violence-specific supports are built upon recognition of the continuum of sexual and other forms of harm, including verbal and sexual harassment and other types of inappropriate behaviours that disproportionately impact sexual and gender minorities. This should also reflect an understanding of the additional and distinct forms of violence and tactics of power and control used to commit violence against sexual and gender minorities
- Promoting a wrap-around service delivery model capable of responding to the distinct and varied mental health and healthcare needs of sexual and gender minorities

Recommendation 7: Support professional development for counsellors within the SMRC and other relevant programs (i.e. health services) for specialized training in supporting sexual and gender minority survivors of sexual violence.

Recommendation 8: Identify and foster relationships with allied service providers and advocates outside of the CAF with specializations in serving sexual and gender minority survivors and communities.

Recommendation 9: Establish some form of independent oversight and accountability body to monitor and report back on the development and implementation of supports for sexual and gender minority survivors and related recommendations.

Recommendation 10: Foster opportunities for meaningful involvement of sexual and gender minority CAF survivors and allied advocates to provide ongoing input on the development and implementation of the Survivor Support Strategy and other CAF initiatives to address sexual misconduct, improve supports, and foster institutional culture change.

Working Together for a Better Future: Support Strategy for Canadian Armed Forces (CAF) Members Affected by Sexual Misconduct (the Support Strategy)

Subject Matter Expert (SME) Report and Recommendations (Indigenous Survivor Focused) by Myrna L. McCallum

This short report intends to provide recommendations and priorities which respond to the questions provided in the SME's Work Plan Proposal dated September 2, 2020, as follows:

- Report (5 pages max.) on specific barriers that Indigenous victims/survivors of sexual violence face to accessing supports as well as best practices in addressing the needs of and providing support to Indigenous victims/survivors, with a particular focus on:
 - How to incorporate culturally responsive considerations more effectively in the draft Working Together for a Better Future: Support Strategy for Canadian Armed Forces Members Affected by Sexual Misconduct (the Support Strategy); and
 - Priorities, specific to Indigenous victims/survivors, to consider when developing the accompanying implementation plan for the Support Strategy.

The recommendations in this report are informed by the Briefings provided at the Survivor Support Consultation Group Meetings and an independent review of additional documents related to the CAF, Operation Honour, related research reports, and other survivor support strategies. It is noteworthy that despite the Briefing meetings offered to the SMEs, many questions specific to Indigenous survivor experiences remain unanswered by unit leaders and/or their subordinates.

A Note on Indigenous People: Cultural and Intergenerational Trauma

When the Truth and Reconciliation Commission (TRC) was launched, the entire country had the opportunity to learn about the horrific abuses and acts of torture experienced by Indigenous children who were forcibly removed from their communities and placed in Indian Residential Schools. When the schools were established across all provinces and territories, the work of forcibly removing children from their families and communities was undertaken by priests, nuns, Indian Agents and the RCMP. Since the recent discovery of the remains of 215 Indigenous children at Kamloops Indian Residential School, many Canadians are now recognizing the reality, known by Indigenous people for generations, that these institutions were vehicles of genocide, an intention to exterminate Indigenous people.

Following the slow removal of priests and nuns from the residential school system, when the kidnapping of Indigenous child was no longer supported by law and policy, social workers used child welfare legislation to continue the practice of forced removal of Indigenous children from their families and communities. Some were adopted by white families, while others were placed in these schools. To be clear, these institutions were not schools at all, they were damaging and destructive environments where sexual abuse, physical abuse, torture, and neglect was often the norm.

Given this context, Indigenous people are experiencing a cultural and collective trauma rooted in sexual abuse, violence and exploitation which has been passed down from generation to generation. Many, quite reasonably argue, that the disturbing trend of missing and murdered

Indigenous women and girls (MMIWG) began at residential schools. The Canadian government and the Church are to blame for the intergenerational traumas Indigenous people and communities continue to experience, which may present as addiction, mental health issues, high suicide rates and offending behaviours including predatory conduct. As Indigenous Nations and communities contend with the devastating effects of the Indian residential school system, many of their members are returning to their teachings, cultures, and spiritual practices as a source of healing, resilience, and recovery.

Barriers and Best Practices

Based upon the information provided at the Briefing meetings, and further to the points highlighted in my presentation on February 11, 2021, I note a significant lack of Indigenous-specific or culturally responsive services for Indigenous survivors of sexual misconduct. The barriers are identified within the various units, separated below:

A. Chaplaincy Service / Indigenous Advisor to the Chaplain General

- **A1.** The mission statement of the Chaplaincy commits to offer spiritual care and support to all members of the Defence Community while respecting freedom of conscience and the religion of each person. With respect to Indigenous members, the Chaplaincy Service has developed a document titled, "Direction and Guidance on Support for Indigenous Spiritual Practices".
- **R1.** The SME Recommends that the Chaplaincy amend their mission statement to include the spiritual cultural practices of the diverse Indigenous people of Canada, many of whom do not practice a religion and are returning to their traditional practices as a pathway to healing the intergenerational traumas which originated with the actions of the Church and government.
- **R2.** The SME recommends that the Chaplaincy develop a reconciliation plan to respond to the Calls to Action in the Truth and Reconciliation Commission Report which replaces their current "Direction and Guidance" document.
- **R3.** The SME recommends that the Chaplaincy review the Calls for Justice in the Missing and Murdered Indigenous Women and Girls Inquiry Report which clearly identifies the roots of sexual exploitation and current risk factors for Indigenous women and Two Spirit people and formulate an intersectional response to one or more of those Calls which should then be reflected in any Indigenous-specific training or service delivery.
 - **A2.** The Chaplaincy has yet to develop a trauma-informed approach training program for front-line caregivers.
- **R1.** The SME recommends that the Chaplaincy define 'trauma-informed', and the definition should be consistent with other units within the CAF.
- **R2.** The SME recommends that the Chaplaincy design and develop a training program for all front-line caregivers which aligns with the trauma-informed principles and practices of the Sexual Misconduct Response Centre.

- **A3**. There is one Indigenous Advisor to the Chaplain General, a position which was created to bring Indigenous people into the Chaplaincy which includes building a network with Indigenous spiritual practitioners. The Advisor was appointed in 2016.
- **R1.** The SME recommends that the Indigenous Advisor role to the Chaplain should be driven by developing a response to one or more Calls for Justice (MMIWG) and one or more Calls to Action (TRC) rather than a general intention to 'bring Indigenous people' to the Chaplaincy, since that language alone could be quite triggering and create anxieties for Indigenous members.
- **R2.** The SME recommends that several spiritual Elders, representative of the diverse Indigenous Nations, some of whom should be Two Spirit, must be hired to work in tandem with the Indigenous Advisor to reflect the spiritual and healing practices of Indigenous people, as a complement to the "front-line caregiving" work the Chaplaincy currently offers. Tasking the Advisor with the responsibility to build a network with Indigenous spiritual practitioners is too vague and does not demonstrate a meaningful commitment to recruit, retain and respond to the unique cultural and spiritual needs of Indigenous CAF members.
 - **A4.** The "Guidance and Directions" document states that the Chaplaincy is committed to supporting and assisting Indigenous CAF members in celebrating their rich spiritual heritage and practising their ancestral ceremonies, and further itemizes sacred Indigenous items/objects/medicines used by Indigenous people.
- **R1.** THE SME recommends that if the "Guidance and Directions" document shall remain rather than be replaced by a comprehensive document which reflects a response to the Calls to Action and Calls for Justice, this portion should be removed or amended, to include language which reflects the historical harm the Church has caused Indigenous people and the reasonable expectation that Indigenous people may be less likely to access services from the Chaplaincy due to this historical relationship. Furthermore, there is significant healing and reconciliation value in the Chaplaincy offering their own apology for the Church's role in the Indian Residential School system.
- **R2**. The SME recommends that item 11(e) in the "Directions and Guidance" document which lists and commits to purchasing sacred objects/items/medicines be removed as the entire statement is disrespectful and wholly offensive. Purchasing 'sacred items' is not in alignment with any Indigenous cultural practice. Furthermore, not all items listed are sacred or ceremonial but instead further entrench existing stereotypes about Indigenous people and their practices.

B. Health Services Unit

- **B1.** A single annual workshop is offered each year to members of the Health Services Unit which promotes increased understanding of sexual misconduct and how to respond effectively to incidents of sexual misconduct.
- **R1.** The SME recommends that the Health Services Unit develop and deliver training which is specific to working with Indigenous survivors of sexual misconduct which is rooted in cultural humility. The training program should be created in partnership with Indigenous experts and must

reflect the reality that anti-Indigenous biases, Two Spirit discrimination and systemic racism is prevalent in the health care field which has resulted in low quality care for Indigenous people.

C. Canadian Forces Military Group

- **C1.** SORT investigators receive in-depth and extensive training on how to interact with victims of sexual misconduct and front- line police officers, who are often the first line of response and the first point of contact for victims, only receive basic generic training on how to respond to calls for service. There is no training on trauma-informed approaches.
- **R1.** The SME recommends that SORT investigators receive in-depth training on trauma-informed interview techniques, implicit bias, cultural humility, victim-blaming and sexual assault myths, and stereotypes. This training should also include a significant intersectional component which focuses on the sexual exploitation of Indigenous women, girls, and Two Spirit people.

D. Military Prosecutions (MP) & Judge Advocate General (JAG)

- **D1**. SMART consists of specialized and trauma-informed trained prosecutors who prosecute sexual misconduct matters, while the JAG is focusing on Victim's Rights plus working with a Victim Liaison Officer (VLO) to ensure continuity of care, access to supports and stream-lining support services.
- **R1.** The SME recommends that both the MP and the JAG define "trauma-informed", "trauma-informed prosecutions", and "trauma-informed care" because there is no clarity on what these terms mean or what, if any, metric is used to measure the success or lack of success in bringing a trauma-informed approach to a prosecution or trial process which are commonly experienced as traumatic and/or triggering experiences for complainants.
- **R2.** The SME recommends that any training offered for special prosecutors and VLOs include content specific to implicit bias, victim-blaming plus rape myths, and the unique risks and stereotypes targeting people of colour, Indigenous women, and Two Spirit people. This training must include a focus on Indigenous trauma stemming from the pervasive sexual abuse and exploitation of Indigenous children which occurred at residential schools.
- **R3.** The SME recommends that any training developed for special prosecutors and VLOs specific to Black, Indigenous or people of colour (BIPOC) must be delivered by BIPOC and Two Spirit subject matter experts.
- **R4.** The SME recommends that if no BIPOC and Two Spirit judges, prosecutors or VLOs exist in the CAF then their recruitment and retention must be prioritized to offer culturally specific support, rebuild credibility in the CAF, and deliver a message of commitment to transformation and safety for complainants who have lost confidence in the MP and JAG offices.
 - **D2.** Where there is no reasonable likelihood of conviction or prosecuting a matter is not in the public interest, the prosecutor will instruct the investigator to ask the

complainant if they would like a meeting with the prosecutor to discuss their decision to not proceed.

R1. The SME recommends that the prosecutor communicate their decision to not proceed directly to the complainant since direct engagement inspires accountability, credibility, trust, and transparency which is essential to trauma-informed applications because it is not unusual for complainants to decline the offer for a meeting if asked due to their trauma, disappointment and/or their own speculations about why their matter did not proceed.

E. Integrated Conflict and Complaint Management (ICCM)

- **E1.** ICCM has not established clear processes to mitigate against the risks of engaging in Alternative Dispute Resolution (ADR) with victims/survivors of sexual misconduct and little is known about how often acts of reprisal are targeting victims/survivors.
- **R1.** The SME recommends that the ICCM must create clear processes and protocols which address when specific ADR applications can be applied to sexual misconduct matters which are led by the complainant, require the complainant's consent, and pose zero physical or reputational risk to the complainant.
- **R2.** The SME recommends that the ICCM establish clear criteria which excludes certain matters from qualifying for an ADR resolution including but not limited to an actual or perceived power imbalance, incidents involving use of force, rape, and matters where the respondent refuses to take any responsibility.
- **R3.** The SME recommends that the ICCM clearly communicate that mediation is never an option for resolving sexual misconduct matters since sexually offensive or harassing behaviours cannot be compared to a conflict or a dispute between two parties.

F. Defence Aboriginal Advisory Group (DAAG)

- **F1**. The DAAG represents both military and civilian personnel. Their membership is made up of volunteers, guided by local champions at the base/wing/unit level, led by national military and civilian Co-Chairs, and supported by a CAF/DND "Champion".
- **R1.** The SME recommends that to be effective, highly regarded, and committed sources of advice, all members of the DAAG should be compensated for their advice to the DND/CAF leadership.
- **R2.** The SME recommends that Indigenous Advisors serving on this group must be diverse and reflect the different regions or Nations in Canada.
- **R3.** The SME recommends that all members of the DAAG be required to meet specific qualifications to serve and be provided a mandate once selected. Moreover, there should be clear expectations and communications about how any advice provided will be shared up the chain of command and reflected in reports or projects designed to support Indigenous CAF members.

G. Army Reserves

- **G1.** Remote and isolated areas within which the Canadian Rangers operate means that access to physical and mental health resources (both CAF and civilian) is limited and Indigenous people make up a large majority of many Canadian Ranger Patrols.
- **R1.** The SME recommends that CAF members who are selected to serve in isolated locations occupied primarily by Indigenous people must receive training which educates them on the experiences of the Indigenous people whose traditional territories they are going to be working in. Any educational or cultural training should be delivered by recognized Indigenous leaders who are representative of the different regions the Rangers are serving in.
 - **G2.** Canadian Forces Member Assistance Program requires sexual misconduct victims/survivors prove that sexual trauma is directly linked to CAF service to access services.
- **R1.** The SME recommends that the direct link include the reasonable likelihood that current experiences of sexual trauma including being a witness to an act of sexual misconduct no matter how minor, may aggravate or spontaneously reveal historical and unrelated experiences of sexual misconduct which could serve as a catalyst for new and significant adverse mental health impacts all of which should meet the test for eligibility or an established "direct link".
 - **G3.** Part-time and remote nature of reserve work are barriers to both members receiving adequate training about sexual misconduct and members who are victims/survivors accessing services and support, especially for those members under 18 who do not have a parent or guardian's consent to access support.
- **R1.** The SME recommends that online training should be developed and accessible to all members who are working in remote locations which reflect some Indigenous historical context informed by the TRC and the MMIWG Inquiry. For members under the age of 18, access to training and general support services or information should be created in collaboration with civilian youth agencies who are experts in sexual exploitation or abuse as experienced by youth.
 - **G4**. It is unknown how many reservists leave the force because of sexual misconduct.
- **R1.** The SME recommends that the CAF create and maintain surveys, statistical reports or other data collections which reflect the reasons why self-identifying Indigenous members decide to leave the CAF. One of the possible reasons available should cite experiences of sexual harassment, other forms of sexual misconduct and a lack of support or response to sexual misconduct.

Recommendation on Identifying Priorities

The recommendations provided should equally be received as high priority items. However, if the SME is limited to selecting one, two or three priorities which could be emphasized in the Support Strategy then they are identified below.

- 1. It is a priority that the development and delivery of Indigenous-specific content to those who work to serve Indigenous survivors and complainants must be delivered by Indigenous experts and include an emphasis on the following:
 - Trauma-informed engagement strategies
 - Cultural humility
 - Implicit bias awareness and safeguard strategies
 - Stereotypes, myth, and stigmas targeting BIPOC and Two Spirit survivors of sexual misconduct; and
 - The TRC Calls to Action and the MMIWG Calls for Justice.
- 2. It is a priority that the CAF, namely the Chaplaincy, the JAG and the MP Office recruit and retain self-identifying Indigenous and Two Spirit judges, lawyers, prosecutors, VLOs, Elders and cultural leaders to reflect the diversity among Indigenous people and to communicate a message of transformation, commitment to representation (race, culture, gender identity and values), and to inspire credibility and trust where none currently exists.
- 3. It is a priority that any departments, offices, or leaders developing education, training, implementation, or other strategies to support Indigenous members who experience sexual misconduct in the CAF, first address the realities and failures set out by Anna McAlpine in her thesis, An Intersectional Analysis of Sexual Misconduct in the Canadian Armed Forces: Indigenous Servicewomen, dated April 9, 2021.

Myrna L. McCallum June 2, 2021

Final Report to the Survivor Support Consultation Group

by Rick Goodwin, MSM, MSW, RSW Subject Matter Expert May 26, 2021 rick@menandhealing.ca

Preamble:

The following are my final recommendations to the Survivor Support Consultation Group (SSCG). I was brought on as a Subject Matter Expert (SME) given my role as the Founder and Clinical Director of Men & Healing: Psychotherapy for Men — one of Canada's few mental health clinics that focuses on men's mental health. As well, over the past 20+ years, I have served as a trainer on clinical and first-responder issues concerning male sexual trauma and recovery in communities across Canada, a variety of international efforts, and specific initiatives within all branches of the U.S. military.

Before outlining my recommendations, it is important to highlight the following limitations of the report:

- This report requires the reader to have a knowledge base of male sexual trauma a topic that has been seemingly historically unaddressed in CAF. Male sexual victimization is "common, underreported, under-recognized, and undertreated" (Holmes and Slap, 1998). A summary on this topic is attached as an Appendix. This summary was created from my presentation to the SSCG on February 18, 2021 and should be considered required reading.
- The consultation process was truncated. There was insufficient time to gather needed information from all aspects of DND services to fully understand and analyze the mandate set before the SSCG. In almost all cases, there was only one presentation per area of service, which was to serve as both the backgrounder as well as a place for dialogue to delve deeper into analyzing service protocol and limitations.
- The Consultation SMEs were relatively under-resourced for this activity. Given the relative complexity of DND structure and services, the SMEs would have benefitted from a dedicated information broker to help guide the information-seeking process. More time allotted for the review process would have been beneficial, as major aspects of CAF response was insufficiently covered. See Part III as an example of this insufficiency.
- Key language and terminology were not defined in this process. From "trauma-informed" to "gender-based violence," the lack of clear language distracted from the work of the SSCG. At times, this absence was counter-productive to the work of the group as a whole, as competing definitions could be interpreted at cross-purposes. Without such clarification, it is unclear how some of the recommendations discussed in the SSCG could be clearly understood or acted upon.
- The focus of SSCG discussion vacillated at times from its mandated purpose of "Resources and Supports for Victims/Survivors of Sexual Misconduct" to creating resources for all members who have experienced trauma. The distinction is both necessary (i.e., as a liability which led to the FSA) and arbitrary (i.e., as it pertains to support services, including Health Services). It needs to be stated that the term "sexual misconduct", or the affiliated term "military sexual trauma" has little utility in terms of psychotherapeutic

engagement. As my expertise focuses on issues of support and treatment, I will be emphasizing the latter.

Trauma is a broad term to describe the psychological injury of harm to an individual. There are many categories of trauma to be considered: developmental trauma, shock trauma, relational trauma, community-based traumatic stress, generational/historic trauma, cultural trauma, traumatic embodiment, secondary trauma, vicarious trauma, and ecological grief are all examples. Military sexual misconduct can be identified in many of these subsets.

Just like the Canadian population, it should be assumed that members may carry multiple subsets of trauma (probably more so – See Appendix). To put it another way, "sexual misconduct" represents only a limited portion of what can be defined as the "trauma load" of DND personnel. For a healthy workforce, to ensure "full deployment", and as a necessary secondary prevention strategy to eliminate sexual misconduct from DND, all aspects of trauma need to be understood and addressed.

This report consists of three sections:

- Considerations for Designing Supports for Male-Identified Survivors
- II. Addressing Barriers to Help-Seeking and Reporting for Male-Identified Survivors
- III. Health Services & Male-Identified Survivors

I will utilize the term "survivor" as a preferred term to describe those members who have experienced abuse, assault or other traumatic experiences. However, the word "victim" may at times be more appropriate to the context of conversation. It should be recognized that these terms may not reflect the subjective experience or the language choice to those members so affected.

I. CONSIDERATIONS FOR DESIGNING SUPPORTS FOR MALE-IDENTIFIED SURVIVORS

To address the institutional barriers to trauma care and engagement of male members will require a multi-pronged effort. A courageous effort to re-think much of what is currently being offered is required to shift the perceived dominant culture of trauma-avoidance and trauma-denial within DND. A broader, more encompassing notion of both the subject of trauma is required in order to engage effectively with those with lived experience. This will benefit all members of the military, regardless of their gender or other identifiers.

Six core recommendations are presented:

1. Expand the area of concern from "sexual misconduct" to all forms of trauma for service members.

A healthy workforce suggests that *all* health issues be addressed. While there are issues of immediacy, legality, potential criminality and workplace safety when the trauma focus is on sexual misconduct, this narrower lens suggests that the larger, pre-existing proportion of membership that carries unaddressed trauma will not be well attended to.

This narrowed focus of sexual misconduct may address workplace safety, but it does not necessarily address worker well-being. The partitioning of trauma response would be

inconceivable in other aspects of health care. For example, suggesting that a service member's heart disease is attributed (or not) to experiences in the career of said service member would be preposterous to consider. Yet, in mental health care, the organizational response mimics hierarchy in its assessment of who warrants support and engagement. The focused attention to "sexual misconduct" (much like operational stress injuries), seemingly minimizes other traumas within membership, akin to seeing these other traumas as a "pre-existing condition" – a term much used in the insurance industry to deny coverage.

The definition of sexual misconduct limits the number of members who experience this form of post-trauma distress, require formal reporting to be identified, and will no doubt be primarily women-identified. As the *Appendix* research summary shows, males are much less likely to publicly disclose victimization as compared to women, and the available supports to them are minimal even if they did disclose. The reality is that most survivors, regardless of gender or other identifiers, experience "poly-victimization" – multiple not singular types of traumatic experiences. For example, the victim of sexual misconduct may well have childhood trauma as well, all of which will need to be attended to through engagement and intervention. These traumas cannot and should not be delineated in treatment and care.

2. Define key terms. Move away from "victim" identification and other gendered terminology in engagement strategies.

Language is the gateway to understanding. It is imperative that core terminology in addressing sexual misconduct and other traumas within membership be defined and used consistently. As mentioned, the terms "trauma-informed" as well as "gender-based violence" (GBV) have been used widely within the discussions of SSCG yet have no apparent definition. Similarly, "intersectionality" has been used in broader analysis, yet without definition, and this language can be used to maintain a "violence against women" (VAW) framework of service and thus service exclusion to males as survivors. These challenges of language, and how they can impact service inclusion, has yet to be rectified in Canadian culture – DND is no exception to this.

In terms of survivor engagement and supports including Health Services, consideration need to be given to shifting engagement language from "sexual misconduct", "abuse", "assault" or "victimization" to "trauma." Trauma is a more of a gender-neutral term, while the word "victim" is an anathema for men in general. Although language in itself will not address the systemic under-reporting by male service members, it is the most likely policy area to start.

3. Regional sexual assault centres (SACs) should not be utilized as civilian partners to serve male survivors.

There is historical as well as current bias against seeing males as anything but perpetrators throughout victim services sector. While understood from a historical perspective (sexual assault centres were a key expression of the second wave of feminism that occurred in the late 1970's/early 1980's in Canada), there has yet to be a systemic change in service provision to people of all genders (and, in particular, men). Victim services such as SACs remain one of the outposts of systemic gender discrimination that still exist in Canada.

For SACs to be of service to male survivors, they should arguably hold an 'integrated model" of service provision for men. This not only pertains to access to all services generally offered by SACs, but also to be able to serve men throughout the range of male trauma expression. This may include aspects not only of male-centred trauma recovery work but engagement on issues of anger, rage and violence (e.g., domestic violence), trauma-informed addiction services, and other attendant service provision. The SAC sector has not historically provided this leadership or service programming.

While these may seem to be high standards of care, a sound argument can be made that male survivor services cannot be "tacked on" to existing SAC services. A more robust and inclusive model of care is required.

4. Ensure dedicated, male-specific engagement and trauma training is provided throughout DND.

Since its inception in 2015, Men & Healing has provided training on male-centred service provision for male survivors of sexual trauma to staff of the SMRC. To our knowledge, apart from this work, no other training and engagement strategies have been presented to the broader military community.

In Men & Healing's past work with the U.S. Department of Defence, through our partner agency 1 in6, Inc., a model for training and engagement was targeted at the base level, not just command. While it varied depending on the branch of service as well as the particular needs of each base, dedicated training on this topic was customized to address specific populations: Service Members, First Responders, Behavioural Health personnel, and Leadership. This multitiered approach helped to engage the broader base community. In these tours of bases, it was critical that leadership was present and actively involved in every event for greater buy-in — in many cases, presence of leadership was the key variable that impacted the success of the engagement.

5. Dedicate men's trauma as an area requiring specific research and inclusion.

Despite research suggesting the greater numbers of males sexual victimized in a military context (as compared to females), a question of implicit may be raised in the avoidance to see males as a unique population that requires specific engagement and care. This bias may show in its exclusion of male-centred research within CAF (as noted in the SSCG), of male representation of committee work (e.g., confusion of the VAW-oriented White Ribbon Campaign with male survivor representation) and of a broader discounting of male trauma. The recent high-profile media cases involving female survivors only underline this bias. Victim services in the civilian world often reflect this bias as well.

While there are other sub-populations of sexual trauma survivors that require dedicated attention as well (e.g., Indigenous members, GLBTI members) it is hard to envision progress in terms of more unified CAF response to the unmet needs of the broader military community without tackling this core topic of men's inclusion.

II. ADDRESSING BARRIERS TO HELP-SEEKING AND REPORTING FOR MALE-IDENTIFIED SURVIVORS

Six recommendations are presented improve men's engagement in help-seeking and reporting:

1. Construct a single portal entry system for men seeking services.

A dedicated approach that welcomes males could assist in drawing men into engaging with such services. Just like the notion of "one-stop shopping," this entry would eliminate confusion or (mis)perception of engaging with a supposed women-identified service (there could be merit in surveying membership in their perception of SMRC, Health Services, and other resources). Just as men are reluctant to engage in sexual assault centres or other traditionally female-defined space, this portal could be labelled as a "men's wellness" initiative or comparable term (i.e., avoiding any victim-identified or offender-identified language).

From this point of entry, members could choose from a "menu" of options – such as reporting, accessing online survivor support services, and/or bridging to dedicated resources of Health Services or allied services not normally associated with a victim support strategy (e.g., services for domestic violence perpetration, sexually compulsive behaviours).

2. Build a national platform for men concerning support, engagement and bridging to mental health services.

As mentioned previously, partnership with civilian-run SACs or other community agencies may not be able to develop or sustain dedicated male-centred services as outlined above. OTSSCs have a focused yet limited mission concerning operational trauma. Health Services have a focused mandate as per its title. Still, many male members may not wish to officially report their experiences of trauma, including sexual misconduct, and thus may only engage in a service that features anonymity. In order to address the needs of male-identified members, a national engagement strategy that can be accessed through a specific portal, providing a menu of dedicated and allied services for men regardless of their base or mission or transfer. By doing so, the services offered could meet national standards of care, offer greater access and privacy, provide male-specific services and not be dependent on the size or scope of local community resources.

3. Create robust online engagement and support resources.

One thing the pandemic has revealed is that "bricks and mortar" are not required to provide robust therapeutic services. From education to psychotherapy, online service provision is now recognized as a valid means of support, engagement and service provision. Online support resources can include both individual and group psycho-educational trauma recovery (i.e., Phase 1 engagement) as well as Phase 2 type psychotherapy, let alone "support group" type functions. These members could be served regardless of availability of local services, and allow them to access resources regardless of their postings, time zone differences, or local variables like transportation and location.

4. Develop "Online Support Groups" (OSG) as both a resource and as an entry to formal service engagement.

OSG service development and delivery can bridge the gap between members with untreated trauma who are isolated and who are comfortable with more formal means of care and treatment. Much like the platform designed by the American DoD "HelpRoom" and implemented by RAINN and its partner agencies (i.e., 1 in6, Inc.), OSG services are facilitated by a mental-health professional, co-managed by a non-clinical moderator, and are accessed anonymously by members through a text service. The focus of each program can be contoured around the participants' gender, language, or other identifier.

OSG serves can serve as a stepping stone to therapy, as well as an adjunct to individual psychotherapy. Given the scarcity of group therapy resources for men, this virtual service could help move trauma recovery closer to a "best practice" model of tri-phasic care (see section below). While OSG services have been established as a text platform, additional features could include video feed of the facilitator along with PDF side-stream features to allow for greater engagement and psycho-educational learning opportunities around trauma recovery.

I am heartened to hear that the proposal for such services has recently been accepted by CAF and look forward to reviewing its design and implementation strategy.

5. Utilize a "Spectrum Engagement Strategy" for men seeking services.

Trauma and its expression is a complex behaviour and shows in many facets of men's lives. Typically, trauma understanding is limited, and care and support is subsumed under general provision of mental health care and supports. Trauma recovery service provision needs to be guided by two tenets of best practice care: the first is that services should be structured with a "tri-phasic engagement" (three separate yet inter-linked phases of learning and support that follow the changing needs of participants in the recovery process). Secondly, a combination of individual and group therapy is considered the ideal model of structuring trauma recovery. None of the resources mentioned in the SSCG presentations referred to these best practice models.

A menu of service options are required to address the unique expressions of men's trauma. Apart from elements of tri-phasic care and the combination of both individual and group modalities, other presenting issues would include: trauma-informed addiction services, services that address anger, rage and violence, emotional and relational awareness and skill teaching, sexually dysregulated behaviours and the like.

6. Ascertain ways to allow for "arm's length" engagement by service members.

Men do not engage in reporting with chain of command on issues of sexual misconduct and other traumas for many reasons, including: the constraints of conventional masculinity (The Male Code – see *Appendix*), shame, the perception that support services are for females, the perception that a male will be considered the offending gender, a fear of lack of advancement, fears of retaliation, and, the lack of dedicated male-centred services.

Dedicated research would help to determine these barriers to reporting, and would be a wise step to ascertain outreach and intervention strategies. More avenues of contact, education, support and intervention, will encourage this under-served population to seek support.

III. HEALTH SERVICES & ENGAGEMENT WITH MALE-IDENTIFED SURVIVORS

As noted in the Preamble, there was significant limitation to the presentations made to the SSCG to understand, let alone assess, the provision of existing services to membership, including the scope of Health Services. As psycho-social and affiliated medical care is seen as a basic and essential service to provide trauma survivors, it is crucial to tackle this area of review. The size and scope of Health Services cannot be quickly summarized. Despite the one presentation received from Health Services in the Consultation process, and subsequent efforts to receive further information and study, a dedicated review of Health Services is recommended as being a critical next step.

Some pertinent questions could include:

- Is there universal screening of all issues of trauma as a matter of procedure?
- Are there imbalances of care within Health Services, given the type of trauma members may be experiencing?
- What aspects of gender or other identifiers may skew the type, quality and accessibility of care members receive?
- What qualities of best-practice care (see above section) are implemented?
- What is the standard of training of mental health professionals at Health Services? For contracted external services?

To reiterate, the terms "sexual misconduct" or "military sexual trauma" hold no particular meaning in terms of member care and treatment. Many males will not self-identify with these terms either. As types of trauma cannot be parceled out in terms of intervention, we need to allow for the broadest understanding of trauma if we wish to develop and deliver the most effective engagement strategies to membership.

It is hoped that the above recommendations will support all members who have experienced sexual misconduct as well as other traumas – and males specifically. From improving the health and well-being of membership, to curtailing problematic social issues within CAF that may stem from unresolved trauma, and to achieve greater proximity to a "full deployment" workforce, these recommendations may well strengthen DND for the road ahead.

Appendix:

The Context of Men & Sexual Trauma within the Military

By Rick Goodwin, SME

This summary was created from the presentation by SME Rick Goodwin to the SSCG on February 18, 2021. It should be considered pre-requisite reading to the Recommendations presented.

Before we understand men's experience of trauma, we need to examine the social construction of masculinity to ascertain how the male experience of victimization is encoded.

The inherent values of conventional masculinity within dominant culture include the following male codes: "The Rugged Individual" (inflated sense of autonomy, diminished connectedness to others, inhibited help seeking), the "Big Man" (drawn to positions of dominance through hierarchy, displays of power, sexual prowess, wielding of privilege), "Give'em Hell" (a role of dominance, aggression, violence), and "No Sissy Stuff" (adherence to the rejection of socially-perceived values associated with femininity and homosexuality, which may then allow a subsequent value-based narrative of misogyny and homophobia).

This dynamic lends to itself of men holding onto a belief that the code word for masculinity is invulnerability. This dominant narrative seems impervious to significant change, despite such troubling aspects concerning men's health and well-being, let alone the myriad of social costs attached to this value set. It could be construed that military culture holds these values of conventional masculinity even higher than the general population.

We know men struggle with a variety of mental and physical issues, and male-identified members are not immune to these social forces. Gender Role Strain refers to the negative effect of traditional gender socialization on individual males. This includes the inherent distress by failing to live up to internalized standards of idealized manhood, the inherent trauma associated with many painful rites of passage for boys and young men (e.g., hazing, etc.) and role-repetition of mirroring male role models or other archetypes of masculine behaviour that invariably are dysfunctional or anti-social in nature. All of this produces a background of shame in men – a core emotion that many men try to evade, repress or succumb to.

What intertwines with this sense of shame is the notion of men's grandiosity – the coding or core beliefs that boys are entitled, by gender dictates alone, have their needs first as compared to the lives of non-males (e.g., girls, women, and other "un-masculine" male-identified others including those who may identify as gay, bisexual), as well as those who are Two-Spirited, transgendered or non-binary. While expressions of male grandiosity dominate the news cycle of the Canadian military, the interplay of men's shame with grandiosity is critical to understanding the crisis in DND, as well as envisioning the avenues of potential change by using this lens.

As mentioned, post-traumatic expressions can come from a variety of sources. While not all those who experienced childhood abuse or violence express of post-traumatic stress behaviour as adults, we do need to understand the core post-traumatic experiences in many men's lives. While some traumas are more common in one sex than the other, men are affected by the following: contact sexual abuse as children (one in six boys), significant childhood physical abuse (one in four boys), childhood emotional abuse and/or neglect (unclear), bullying (unclear), sexual assault as adults (one in eight men) in terms of its conventional definition, possibly equal numbers of sexual assault with women in an expanded definition, intimate partner violence (unclear), relational

traumas (e.g., witnessing family violence) (unclear). Given men's documented under-reporting of all traumas experienced, all of these numbers may well be under-estimates.

Certain sub-populations of males have higher rates of sexual trauma than the general population: gay and bisexual males, transgendered folks, disabled males and Indigenous males are some of the major subpopulations documented. Here is another sub-population: about half of Canadian soldiers have a history of child abuse (Afifi et al, 2016). This matches to an American study that states that men with military service have twice the odds of reported forced sex before the age of 18 as compared with men without military service (Blosnich et al, 2014).

Based on these studies, we may conclude that 50% or more of male service members have singular or poly trauma in their backgrounds prior to enlistment. This background of trauma in the lives of these men will be further compounded by issues of adult-onset trauma (e.g., sexual assault, domestic violence), patterns of re-victimization (including traumatic re-enactment, risk-taking), as well as occupational trauma (e.g., operational stress injuries, sexual misconduct). It is hard to think of a Canadian workplace that is more impacted by such distress, suffering, and the array of post-traumatic stress behaviours in its membership.

It was 2012 that the American Department of Defence concluded that more male service members have experienced "unwanted sexual assault" than women. As with the Canadian military, these survey findings are reflective of the greater percentage of members who are male versus female. Still, this statistical reality seems to be at odds given the broader social narrative that sexual misconduct is essentially "violence against women" — a gendered bias shaped by social misperceptions as well as reinforced by institutional barriers, government policy, and media — all of which the Canadian military is not exempt from.

While this report will not detail the research of the post-traumatic sequellae that affects males, it is critical to state the obvious: that unaddressed trauma will present itself in a myriad of ways, not only in terms of poor mental health outcomes (PTSD, depression, anxiety), health-risk behaviours (alcohol and drug abuse, self-injury), health problems (inflammation, heart disease, cancer), suicide, social problems (domestic violence, problematic alcohol/drug abuse, and criminality), and, ultimately, early death.

Given the inherent bias against seeing males as victims (instead, seeing them as impervious to abuse/assault, co-conspirators, equal participants, homosexually acting out, or just less prone to trauma) the dominant narrative is still one of the "feminization of victimhood" which denies the realities of men's trauma. Unfortunately, there is a both a human and institutional cost of this bias, of which needs to be addressed by DND to ensure that "no one is left behind."

Annex 9 - Logic Model: Schedule N, Victim/Survivor Support Consultations

Ultimate Outcome

Improved support to victims/survivors

Intermediate Outcomes

Increased resources for CAF members who are victims/survivors of sexual misconduct Improved support programs and services for CAF members who are victims/survivors of sexual misconduct

Immediate Outcome

Increased knowledge from subject matter experts to ensure appropriate and effective programs and services for victims/survivors of sexual misconduct

Outputs

Recommendations on how to enhance the Victim/Survivor Support Strategy Framework and Implementation Plan A written report on how to enhance DND/CAF support programs and services for CAF members who are victims/survivors of sexual misconduct Ongoing communication and relationships with consultation members and SMEs

Activities

Hold consultation meetings Invite SMEs for consultation meetings

Document recommendations

Engage in ongoing communication with consultation members

Assumptions

Adequate interest for involvement from SMEs

Adequate resources
(e.g. funds, people) to conduct
the above activities