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Presentation to the
House of Commons' Standing Committee on Public Safety
and National Security

**Operational Stress Injuries and Post Traumatic
Stress Disorder in Public Safety Officers and First
Responders**

Remarks By:

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Chair - CACP Human Resources & Learning Committee.

Canadian Association of Chiefs of Police

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Members of this committee, the Canadian Association of Chiefs of Police (CACP) express our sincere appreciation to speak here today and contribute to this important discussion. By way of introduction, my name is Steve Schnitzer. I am representing the CACP as the Chair of the CACP Human Resources and Learning Committee. Chief Jennifer Evans from Peel Regional Police is also here with me and will speak to you in a few minutes.

I have worked in policing for 30 years and I retired in 2010 as the Superintendent in charge of Personnel Services at the Vancouver Police Department. My role as Superintendent was to lead the Vancouver Police Human Resources, Training and Professional Standards Sections.

I currently work at the Justice Institute of British Columbia and I am the Director of the Police Academy. The Justice Institute of British Columbia Police Academy is responsible for the training of all municipal, transit and First Nations police recruits in the Province of British Columbia.

As the Chair of the CACP Human Resources & Learning Committee I would like you to know that the mental well-being of police officers and police support staff is very much a central theme of discussion at all of our CACP committee meetings. In fact, we are video-conferencing today from Saskatoon on the second day of a two day Human Resources & Learning Committee Meeting and our discussions have almost entirely focused on wellness for police officers and support staff.

The CACP has for several years worked closely with the Mental Health Commission Canada (MHCC) and we are now collaborating with universities and academia to better understand the mental health issues that first responders face.

Our current president, Chief Clive Weighill, very much regrets that he is unable to appear here today, however, he shares the following:

“The CACP fully recognizes that the dynamics of policing dictates that police personnel, and other first responders, are exposed to a unique and difficult set of job-related

hazards. Furthermore, we also recognize that the policing culture of needing to be strong and brave can reinforce stigma related to mental illness and it is therefore our challenge to change how we collectively treat and think about mental health problems and illnesses. Our focus, as national organization, has been to bring police and mental health professionals together with the goal of shifting attitudes, reduce stigma and find new ways to address psychological health and safety in the workplace. This includes recommendations to all police services across Canada to ensure that each implement a clear and coherent mental wellness strategy." End of quote.

In March 2015, Dr. Terry Coleman, a member of our Human Resources & Learning Committee, testified at the Standing Senate Committee on Social Affairs, Science and Technology regarding Bill S-208 – Establishment of a Canadian Commission on Mental Health and Justice. On behalf of the CACP, Dr. Coleman advised that mental illness represents one of the top five concerns of police agencies throughout Canada.

He also emphasized that police are defacto 24/7 first responders to what we refer to as a mental health crisis occurring in our communities.

I am here today, on behalf of the CACP, to stress to you that to have effective public safety and security in Canada requires healthy and resilient first responders. Unfortunately, police are experiencing increasing rates of mental health issues and the policing community is finding it challenging to put into place mental health support systems that are affective and that look after the needs of our police officers, support staff and their families.

In recognizing the dire need to address the issue of mental health and policing, the CACP has recently partnered with the MHCC to deliver two key national conferences on this issue.

First, in March of 2014, 350 delegates representing criminal justice and mental health leaders, researchers, and people with lived experience of mental illness met under the theme of: *Moving from Crisis to Creating Fundamental Change: Improving Interactions between Police & Persons with Mental*

Illness. They discussed what works, what could be improved, promising practices and sought to find innovative ways to answer the question:

How can we make these interactions safe for the person with mental illness, police personnel, and the communities in which we all live?

The conference highlighted the growing list of promising practices including crisis intervention teams – police and mental health workers forming a joint response most often in larger urban centres, as well as The HUB approach which brings together a wide-range of community services, such as police, health, social services, education, to act collaboratively as early interveners when a person appears to be at risk.

In February 2015, the CACP and MHCC jointly sponsored a 2nd successful conference, with 250 attendees, under the theme of *Mental Readiness-Strategies for Psychological Health and Safety in Police Organizations*. This conference recognized that before we can best serve others, we must also look after

our own. A key outcome was a call to all Canadian police services as well as police governance authorities to ensure that a clear and coherent mental wellness strategy is in place for all personnel.

Since February 2015, the CACP Human Resources & Learning Committee has made it a focus to better understand the problems that we are facing and to engage academia for more “Made in Canada” research in the area of mental wellness in policing. This is being done in collaboration with the CACP Research Foundation, MHCC and research and academic institutions.

In fact, in January of this year I represented the CACP at the National Roundtable on Post-Traumatic Stress Disorder. This Roundtable was organized by Public Safety Canada under the leadership of Minister Goodale, and the CACP is thankful to the Federal Government for taking the initiative to begin this national dialogue on PTSD in first responder occupations. This Roundtable has now resulted in a Tri-Service Working Group that will work on developing a national action plan.

A strategic approach is necessary to make meaningful change. A systems approach is also necessary to support the resources and funding necessary for first responder mental health. Finally, we need to fully understand the issues that face us and provide solutions that are well researched and proven to work.

We thank each of you for raising this important issue. I would now like to introduce the Chief of the Peel Regional Police, Jennifer Evans. Chief Evans is one of the 26 members of the CACP Human Resources & Learning Committee and she would like to highlight some organizational wellness initiatives that Peel Regional Police have recently implemented.

I look forward to responding to your questions.

Thank-you!