

Mood Disorders Society of Canada

La Société Pour **Les Troubles de L'Humeur** du Canada

LEADERSHIP: PTSD/TRAUMA IN CANADA

OCTOBER, 2014

WHY MDSC?

Introduction

About one in 10 people have PTSD/trauma, placing it among the most common mental health problems. The disorder can affect anyone, from serving members of Canada's Armed Forces, our Veterans, members of Police Services across Canada and other Emergency and First Responders, to persons who are involved in serious accidents, who suffer serious sports injuries such as concussions, victims of violent crime, those who are survivors of various forms of abuse and bullying and countless others, including children who have lived through traumatic experiences. Among adults, women are twice as likely as men to develop full-blown PTSD. A particularly vulnerable group is members of armed forces who have participated in stressful missions.

Individuals suffering from PTSD/trauma experience stigma and discrimination within the health care system. Many feel ignored in emergency rooms and treated disrespectfully by some health care practitioners. Moreover, they report that physical health concerns are often disregarded, and their mental health concerns are afforded lower priority. People with mental illness and their families often report that the stigma associated with their diagnosis was more difficult to bear than the actual illness. This stigma compounds the negative impact on the person with the illness, as well as their family. Not surprisingly, stigma has a considerable influence on whether people seek treatment, take prescribed medications, and follow through on treatment plans.

Why the Need for Sustained Leadership in Canada?

Research, education, and training in the science, diagnosis, and treatment of PTSD and stress-related disorders in Canada have been fragmented to say the least. As a result, the demonstrated need to effectively advance the clinical care and social welfare of Canadians and their families who have experienced trauma, or who suffer from PTSD has been lacking.

MDSC's PTSD Leadership to Date

1. Post Traumatic Stress Disorder: Out of Sight, Not out of Mind

On October 26, 2011, over 70 experts, thought leaders and parliamentarians came together to discuss the issue of Post-Traumatic Stress Disorder (PTSD) at a special meeting hosted by the Mood Disorders Society of Canada at the Canadian War Museum in Ottawa. This innovative initiative gathered some of the most experienced and brightest minds in Canada. Particular emphasis was placed on experiences and outcomes for soldiers and veterans. The discussion topics included Enhancing PTSD Research; Family Supports; De-Stigmatizing PTSD; and System

Capacity. The recommendations contained in the ensuing report dated February 2012, were aimed at:

- Reducing, and eventually eliminating, the stigma surrounding PTSD
- Enhancing the knowledge of physicians on the identification and treatment of PTSD, including information on available resources and support networks
- Educating PTSD sufferers and their families on available support networks and resources to improve their accessibility
- Promoting ongoing collaboration and dialogue amongst government and leaders in the field of mental illness specialized in PTSD, including healthcare providers, innovators and researchers
- Improving educational platforms for children with parents suffering with PTSD
- Enhancing research efforts to further understand triggers and optimal treatments of PTSD
- Stigma of Mental Illness including PTSD

The process was deemed a great success and appreciated by all in attendance. The event was opened by the Minister of Veterans Affairs, the Hon. Steven Blaney who participated in the evening's discussions, and posted a news release on the Department's website during the evening.

2. Canadian Depression Research and Intervention Network (CDRIN)

In the 2012 federal budget, the Government of Canada invested \$5 million to seed the development of a national network of patient-focused depression research and intervention centres over the next five years.

Mood Disorders Society of Canada (MDSC) signed a contribution agreement with Health Canada and is working with the Mental Health Commission of Canada, the Royal Ottawa Mental Health Centre and other partners to develop the network. This network will lead to better patient care and an increased understanding of depression.

The network will support more than 80 researchers and clinicians who specialize in depression. In collaboration with other research agencies and governments, these professionals will work towards developing a comprehensive research plan with a special focus on suicide prevention and **Post-Traumatic Stress Disorder (PTSD) early detection and intervention.**

The highly-interactive research will focus on determining the biological and psychosocial determinants of suicide, PTSD and other depression-related issues so that at-risk populations can be identified rapidly and accurately. It will also make more diagnostic tools available, which

will lead to more effective treatments. Clinical trials of innovative pharmacological or cognitive interventions will ensure the results of the research can be translated into clinical practice.

3. A National Anti-stigma Training Program for Canadian Family Physicians, Specialists and Other Healthcare Providers

People, who suffer from mental illness including trauma and PTSD, typically have the extra burden of living with the stigma associated with the illness. Stigmatizing behaviours or attitudes are present among friends, family members, co-workers and health care providers. Research has shown that stigma is the single most significant factor in preventing Canadians with mental illnesses including trauma and PTSD from seeking help and that the most important group to which the anti-stigma message needs to be addressed is physicians and other health care providers.

In 2011/2012 MDSC took a lead role in a national groundbreaking initiative with the development of an accredited continuing medical education module dealing with stigma of mental illness including PTSD, the manner in which the medical profession expresses this stigma, and how the medical profession can better understand mental illnesses and avoid stigmatizing activities when dealing with patients. This continuing medical education (CME) was led by MDSC and undertaken in partnership with the **Canadian Medical Association** and the **Mental Health Commission of Canada**, the **Canadian Psychiatric Association** and **Memorial University**. The CME was accredited by the College and Family Physicians and Surgeons in 2012 and has been made available to all of Canada's 77,000 physicians and specialists along with other Canadian health care providers. The culmination of years of research, this innovative approach leverages the knowledge of a wide range of stakeholders, including persons with lived experience.

4. A National PTSD Training Program for Canadian Family Physicians, Specialists and Other Healthcare Providers

In 2013/2014 MDSC received funding from Health Canada to develop a national PTSD training program for Canada's family physicians and specialists. This represented an exciting opportunity for MDSC and the Canadian Medical Association (CMA) to educate and change the perceptions of family physicians and specialists about persons affected by PTSD and other forms of trauma. The overarching aim of this initiative was to improve the delivery of health

services to individuals and their families suffering from PTSD in Canada. Strategic partners for this initiative include the **Canadian Depression Research and Intervention Network (CDRIN)** and the **Mental Health Commission of Canada**.

Canada has approximately 77,000 family physicians and specialists. 85% of Canadians dealing with mental health problems, including PTSD, approach their family physician first. Unfortunately, many healthcare providers, including physicians, have stigmatizing attitudes towards patients with possible mental health problems including PTSD. Furthermore, physicians have not received appropriate training and education about PTSD and other forms of trauma. The overarching aim of this initiative will be to improve the delivery of health services to individuals and their families suffering from PTSD in Canada

New directions for PTSD training of healthcare professionals include defining the determinants of stigma, providing information and knowledge in an unbiased manner, addressing the unintended propagation of stigmatizing attitudes and behaviours, teaching consumer friendly terminology, and is cemented within the scope of need of health care professionals; from a mental health consumer centred perspective. In 2012, MDSC has established a PTSD Expert Advisory Panel which has representation from; **Native Mental Health Association of Canada, McMaster University (Parkwood Operational Stress Injury Clinic), Wounded Warriors, Canadian Psychological Association, Canadian Forces Health Services Centre, University of Toronto (Women’s College Hospital), Traumatology Institute of Canada and Trauma Centre**. See Schedule “A” for a complete listing of some of the key qualified resources that have been brought to bear on this initiative.

5. A National Anti-Stigma Training Program for Canadian Nurses and other Healthcare Professionals

In 2013/2014, MDSC and the **Canadian Nurses Association** (CNA) collaborated to develop an e-learning program for Canadian nurses aimed at confronting stigma and discrimination in the profession through the provision of a national training initiative dealing specifically with stigma and discrimination.

Stigma and discrimination by association is also very present within the nursing profession and throughout health care. Negative judgments and disrespectful actions within health care professionals exist to a degree that can cause unhealthy working environments and can lead to the deterioration of services and work experiences. Stigma is dangerous because it interferes with understanding, communicating about your illness, obtaining support from friends and family, and it delays getting help (sometimes for years).

Through this national awareness and training anti-stigma campaign, MDSC and its partners which include the CNA along with the Mental Health Commission of Canada, will make a significant and positive impact on the delivery of health services leading to increased well-being of Canadian communities. There is great need for knowledge dissemination and learning.

Persons with mental health issues including PTSD and their families have spoken. They are experiencing stigma and discrimination. Emerging research shows that health care professionals are in dire need of anti-stigma training. New directions for anti-stigma training includes defining the determinants of stigma, providing information and knowledge in an unbiased manner, addresses the unintended propagation of stigmatizing attitudes and behaviours, teaching consumer friendly terminology, and is cemented within the scope of need of health care professionals; from a mental health consumer centred perspective.

**6. Correctional Services of Canada (CSC)
Mental Health Training Program for Front Line Staff**

MDSC has worked closely with **Correctional Services of Canada (CSC)** to develop a mental health training program and associated supports for front line staff of CSC. The purpose of the project was to develop training curriculum to assist parole officers, community mental health professionals and community employment coordinators to identify and find strategies to address the many barriers ex-offenders face when re-integrating back into society. The program offers practical skills-based learning so that staff feel more confident in their ability to assist this group. Work and meaningful daily activity is important to successful community integration for ex-offenders with mental health problems including PTSD and other forms of trauma e.g. abuse post-release. The program assists CSC build upon the knowledge base of front line staff and also impacts their practice in a positive way so that they experience increased success in ex-offenders re-integration into the community. The project also includes a toolkit to support their success.

**7. Building Bridges One and Two
Ensuring that the Canadian Mental Health Care System Responds Appropriately
to the Needs of First Nation, Inuit and Métis people**

In a major effort aimed at ensuring that the Canadian mental health care system responds appropriately to the needs of First Nation, Inuit and Métis people and mental

health consumers, the MDSC—in partnership with the **Native Mental Health Association of Canada** – has collaborated and completed a series of major national initiatives over a four year period. The two national organizations and their national partners have developed a comprehensive framework on cultural safety, relational practice and social inclusion which now allows them to deal more effectively with major systemic issues and barriers facing indigenous and non-indigenous communities such as: labelling and discrimination, colonialism, racism and stigma, and discrimination in a planned and progressive manner in the years ahead. As part of this foundational initiative, the two national organizations along with their national partners and the **First Nations, Inuit and Métis Advisory Committee of the Mental Health Commission of Canada**, have researched and analyzed cultural safety and cultural competence as it presents itself as a strategy to deal with identified inequities in health, education and social services. These initiatives have resulted in the development of a national framework for improving culturally and linguistically competent and safe services in mental health care for mental health consumers and Aboriginal peoples. In addition, these initiatives have served to investigate and determine which cultural and social institutions need to be restored or re-built in order to accommodate cultural safety. Intergenerational trauma associated with abuse at residential schools continues to have a major and lasting impact on these peoples. MDSC has gained considerable knowledge over the years as it relates to PTSD and other forms of trauma with First Nation, Inuit and Métis people. These lessons learned can certainly inform further research and development of PTSD and other forms of trauma.

8. MDSC PTSD Peer Support Program

MDSC has an exceptional team of Special Advisors for Peer Support PTSD Services. Through this, MDSC provides professional Peer Support presentations, training, guidance in the development of a Peer Support program, peer selection, and ongoing support for peer teams for Canadians.

The **MDSC Peer Support Team:**

Staff Sergeant (Ret'd.) Sylvio (Syd) A Gravel, M.O.M.

Syd Gravel, a former Staff Sergeant from the **Ottawa Police Service**, with 31 years' experience, is one of the founding fathers of **Robin's Blue Circle**, a post-shooting trauma team of peers, first established in 1988. Syd is an over 25 year PTSD survivor and has been a peer supporter since 1988. In 2007, he was nominated and inducted by his peers and the **Canadian Association of Chiefs of Police**, for the Order of Merit in Policing, Canada. Since his retirement he has devoted all his time and energy to addressing the development of resilience and resistance to trauma and peer support within the emergency and enforcement environments, including the writing of his two books, "56 Seconds" and "How to Survive PTSD and Build Peer Support".

Staff Sergeant (Ret'd.) Brad McKay

Brad McKay has recently retired after 33 years of service with the **York Regional Police**. He created the **York Region Critical Incident Stress Management Team** in 1996 and the **York Regional Police Peer Support Team** in 2014. He created the Operational Stress Injury Prevention and Response Unit for York Regional Police. As a Certified Trauma Responder, Brad has responded to and coordinated hundreds of interventions for front line responders and their families. Brad sits as a Director at the **Tema Center Memorial Trust** and is an energetic advocate for wellness and peer support.

Kristina Hulton, Health and Wellness Specialist

Kristina Hulton has been promoting wellness for the past 18 years. She has developed strong facilitation skills during her tenure as a professor in the Fitness & Health Promotion Programs at both **Loyalist College** and **St. Lawrence College** as well as acting as a course conductor for the **Canadian Society of Exercise Physiology**. Currently, Kristina is a Workplace Wellness Specialist at St. Lawrence College in the Corporate Learning & Performance Improvement Department. Kristina’s efforts helped St. Lawrence College achieve the “Gold Award” from KFL&A Health Unit for workplace wellness initiatives in 2012 & 2013. Kristina specializes in helping police organizations develop psychological health and wellness programs. Kristina is a trained Co-Active Coach© through Coaches Training Institute and has utilized her coaching skills to develop customized psychological health & safety programs for police organizations. She has developed psychological health and safety management training workshops, front-line officer psychological wellness programs and she is also the Principal Investigator for an applied research project “Developing and implementing a comprehensive management training program that supports and promotes psychological health & safety in policing.”

Dr. Jeff Morley, Registered Psychologist

Dr. Jeff Morley is a Registered Psychologist, and Board Certified Expert in Traumatic Stress. Jeff recently retired from the RCMP as a Staff Sergeant after 23 years of service. In his private psychology practice Jeff works extensively with police, military and emergency responders. Jeff teaches on Psychologically Healthy Workplaces, Trauma & Resilience to organizations and first responders across Canada. Jeff also serves as an Adjunct Professor in the Department of Counselling Psychology at the **University of British Columbia**, where he teaches Trauma Counselling and Group Counselling.

**9. Other Related Significant Accomplishments
and Milestones for MDSC**

• The MDSC has conducted an extensive amount of research, for instance, “National and International Stigma Research Workshops”; “Wait Times for Psychiatric Patients in Hospital Emergency Rooms Across Canada”; in partnership with Health Canada, the development of the first “Report on Mental Illnesses in Canada 2003” and subsequently being the only mental health NGO to collaborate with Health Canada in the publication of “Mental Illnesses in Canada

2006 – The Human Face of Mental Illness” – the first major statistical report published by Health Canada on mental illnesses.

- MDSC is proud to have been invited to join the Neurological Health Charities Canada (NHCC). The NHCC is a collective of organizations that represent people with chronic, often progressive, neurological and/or neuromuscular diseases, disorders, conditions and injuries in Canada. The NHCC's role is to provide leadership, evaluating and advancing new opportunities for collaboration specific to advocacy, education and research projects, related to brain health. MDSC has been accepted to the NHCC with the intentional purpose of being a conduit between the mental health and neurological communities.

- In 2011, MDSC hosted a pan-Canadian public opinion survey on mental health services and supports. The survey was circulated to approximately 10,000 people within the MDSC network. The survey received an impressive response from 3,125 persons. We have completed analyzing the data and have produced the survey report. This report provides a very solid overview of how persons with mental illness including PTSD and other forms of trauma, their families and caregivers view the services they receive from their family doctors, their community, clinics and emergency rooms. This process provided the mental health community with a vehicle to detail their experiences and express their opinions to policy makers and health care service providers. This report was sent to the Federal and all Provincial/ Territorial Ministers of Health.

- MDSC is proud to be a founding member of the Canadian Alliance on Mental Illness and Mental Health (CAMIMH) and supports the work of this alliance. Our Associate National Executive Director is serving as Co-Chair of the Alliance. Established in 1998, CAMIMH is an alliance of national organizations whose activities span the broad continuum of mental health.

- MDSC is collaborating with the Arthritis Society on a groundbreaking three year project that addresses depression and arthritis in the workplace. The project aims to provide more information to both employers and employees on how they can support an environment of inclusion. Overall the initiative will tackle the co-morbidity of mood disorders and chronic disease and will remain national in scope. Work With Us is a new workplace-based program that supports Canadians living with depression and/or arthritis by giving them the tools they need to actively self- manage, lead healthier lives and fully engage in work. It is being developed by a network of people who understand depression and/or arthritis and have found ways of making it work for them. We are working very hard on the project and please stay tuned for more information. Arthritis and depression touch the lives of millions of Canadians. The Arthritis Society and Mood Disorders Society of Canada acknowledge that the majority of these individuals are of working age, and want to remain productive in the workforce. This three year project is funded by the Government of Canada and is exceeding all objectives.

- In 2014/2015 MDSC is developing a Canadian Lawyers Mental Health Program in a proactive and dynamic partnership between MDSC, the Canadian Bar Association and Bell Let's Talk. This is a national self-learning program that will focus on training of lawyers, judges and law

students across Canada to increase knowledge of mood disorders, PTSD/trauma, causes, symptoms and treatment options; how to foster positive prevention strategies; treatment, and recovery strategies of depression, anxiety and stress; how to address and reduce stigmatizing behaviours and attitudes, and offer support and resources for recovery and maintaining wellness within the legal profession. This initiative will serve a twofold purpose. It will provide Canadian lawyers, judges and law students with the tools to cope more effectively with mental illness including PTSD and other forms of trauma. The e-learning program will also serve to educate these important targeted audiences on overall issues related to mental illnesses as it impacts their clients and families.

- The Canadian Collaborative Mental Health Initiative (CCMHI) was a highly successful 2-year Primary Health Transition Fund project. It fulfilled its mandate to develop a compelling case for improving mental health care through interdisciplinary collaboration, including collaboration among health care providers, consumers and caregivers. Additionally, it raised awareness of the benefits of collaborative mental health care and enduring communities of interest committed to further efforts to improve mental health care. It was determined that more work was required to ensure that Canadian people with mental illness and their care providers have access to, and can benefit from, the knowledge generated through CCMHI.

To this end, MDSC was chosen to manage Phase Two. The purpose of this phase was to disseminate its research materials and toolkits to the front line where people are seeking care and to decision-makers who influence mental health policy, health care delivery and professional training. The focus of efforts in this phase was to take the knowledge generated during the PHCTF initiative and transfer it to those who can most benefit from it, seek their confirmation of its relevance and utility for promoting collaborative practice and engage them as active partners for change.

- The MDSC prides itself on providing Canadians with relevant resources that offer important mental health information. Some of our most circulated resources are our mental health booklets: What is Depression? What is Bipolar Disorders? Mental Health Quick Facts, Workplace Mental Health. These publications alone have seen a combined distribution of well over 250,000 hard copies and a hundreds of thousands of electronic downloads.

- The MDSC provides an online discussion forum for people who are experiencing mental health issues and their families to obtain support and information. This provides a safe place for people to share their experiences and concerns. With over 28,000 posts, our forum is one of the most widely accessed in Canada.

10. Canada's Leadership in Building International Partnerships

- In 2012, furthering our PTSD efforts, MDSC attended the Tri-National Military Mental Health Symposium at the Canadian Embassy in Washington, D.C. Attendees including representatives from the United Kingdom, Canada and the U.S. discussed opportunities for increased collaboration to promote awareness of military mental health issues and share research findings. Hosted by the True Patriot Love Foundation, a citizen-led Canadian foundation that supports and honours members of the Canadian Military and their families. The Symposium added significantly to our network.
- MDSC formed a partnership with Praxis Care of Ireland, established as a registered charity in 1983, Praxis Care is a major provider of services for adults and children with a learning disability, mental ill health, acquired brain injury and for older people, including people with dementia in Ireland and the U.K. In 2013, MDSC partnered with Praxis Care to enable our highly successful anti-stigma campaign, Elephant in the Room, to be implemented throughout Ireland and the U.K. through their more than 1,500 office locations

WHY MDSC—CONCLUSION: To continue to build on the exceptional leadership and accomplishments to date in advance of key PTSD priorities

MDSC has a solid track record in collaborating with professional associations, governments, private industry and NGOs who share its goal of improving the lives of Canadians living with or suffering from mental illnesses; as well as the lives of their families and caregivers. All mental health care professional associations and providers are valued collaborators and partners in this regard.

MDSC has a vision and has positioned itself to be the foremost leader in information on PTSD and trauma; information generated internally through our extensive research over the years, and information synthesized from published scientific research and collective clinical experience is ready to be efficiently disseminated to the field. MDSC and its partners are also capable of advancing the clinical care and social welfare of Canadians and their families who have experienced trauma, or who suffer from PTSD, through research, education, and training in the science, diagnosis, and treatment of PTSD and stress-related disorders. Normal stress response, acute stress disorder, uncomplicated PTSD, comorbid PTSD and complex PTSD will be included in the overarching research strategy to be developed.

A collaborative care approach encompassing an evidence-based approach to improving the quality of primary care treatment of PTSD and other forms of trauma will serve as the hallmark for future direction.

About the Mood Disorders Society of Canada (MDSC)

The Mood Disorders Society of Canada, (MDSC) has grown out of the vision and drive of a number of mental health consumer and family leaders from across Canada who, in 1995, saw the need for a broad-based structure to bring consumers/users/patients of mental health services together and who passionately believe that consumer/users/patients have a key role to play with regard to education, supports, program development, anti-stigma campaigns, and advocacy at the national level. In 2001, the MDSC was incorporated as a national, not for profit, consumer driven, voluntary health charity committed to ensuring that the voice of consumers, family members and caregivers is heard on issues relating to mental health and mental illness and in particular with regard to depression, bipolar illness, anxiety and other associated mood disorders.

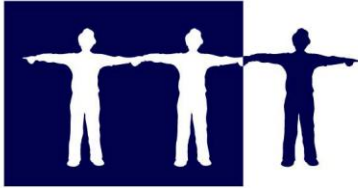
We are committed to working collaboratively with all stakeholders to improve the engagement of mental health consumers in all facets of healthcare in Canada. MDSC has a demonstrated track record in conducting evidenced-based research from both a quantitative and qualitative perspective and serve as an effective bridge between mental health providers and consumers throughout Canada.

The Mood Disorders Society of Canada fulfills its mandate through an active partnership approach that engages like-minded organizations in the public, private and voluntary sectors. The MDSC is engaged on an ongoing basis in a wide range of projects and initiatives designed to support the inclusion of persons with mental illnesses in Canadian society and we have taken a proactive role lead in public policy and program development in many capacities on the national stage. See www.mdsc.ca, for a full description of our services, research and collaborative initiatives with other like-minded national organizations in Canada.

MDSC has emerged as an effective national organization dealing with issues related to PTSD/Trauma in Canada. MDSC has also surfaced as one of the most well-connected organizations in Canada. A review of the resources that MDSC has brought to bear on PTSD over the years is impressive and has received recognition across the country.

MDSC is governed by an experienced Board of Directors and supported by a multi-disciplinary team of professionals. The governing body and staff have a strong representation from persons with lived experience including many board and staff members who have lived experience with PTSD/Trauma.

Since 2012, MDSC has been fortunate to assemble and be supported by a panel of leading experts and stakeholders from the PTSD field throughout Canada. MDSC and its Expert Advisory Panel has also been supported by many physicians, PTSD specialists, mental health leaders and representatives from the Canadian Medical Association, Mental Health Commission of Canada, the Canadian Psychiatric Association and the Canadian Psychological Association. A list of the Board of Directors, staff and the national MDSC PTSD/Trauma Expert Advisory Panel is enclosed as **Schedule "A"**.



Mood Disorders Society of Canada

La Société Pour **Les Troubles de L'Humeur** du Canada

Schedule "A"

MISSION

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MDSC was formally launched and incorporated in 2001 with the overall objective to provide people with mood disorders with a strong, cohesive voice at the national level to improve access to treatment, inform research, shape program development and government policies to improve the quality of life for people affected by mood disorders.

BOARD OF DIRECTORS AND STAFF

Mr. John Starzynski (President), Guelph, Ontario
Dr. Tracey Trudeau, Edmonton, Alberta
Dr. Chris Summerville, Steinbach, Manitoba
Dr. Vicki Smye, Bowen Island, B.C.
Mr. Bill Mussell, Chilliwack, B.C.
Mr. Robert Allen, Edmonton, Alberta
Ms. Cynthia Black, Halifax, Nova Scotia

The Board is supported by:

National Executive Director: Phil Upshall
Associate National Executive Director: Dave Gallson
Executive Assistant: Susan Kopperud
Lead Researcher: Barbara Everett, Ph.D.
Senior Project Manager: Richard Chenier
Program Manager: Jennifer Lee, M.P.P.

Program Manager: Deb Turner, PMP, Cert. APM
Defeat Depression Campaign Coordinator: Pamela Blackmore
Youth Engagement Coordinator: Mariette Lee
Communications Coordinator: Laura Clarke
Special Advisor PTSD/Trauma, Peer Support: Sylvio Gravel
Special Advisor PTSD/Trauma, Peer Support: Brad McKay
Special Advisor PTSD/Trauma, Peer Support: Kristina Hulton
Special Advisor PTSD/Trauma, Peer Support: Dr. Jeff Morley

MDSC EXPERT ADVISORY PANEL PTSD/TRAUMA (Formed in 2012)

Dr. Catherine Classen
Associate Professor, Department of Psychiatry
University of Toronto
Academic Leader, Trauma Therapy Program
Women's College Hospital

Dr. Alexandra Heber MD, FRCPC
Lieutenant-Colonel, Psychiatrist
Clinical Leader Mental Health
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Captain Wayne Johnston
Canadian Armed Forces
Founding Member of Wounded Warriors

Dr. J. Don Richardson, M.D., FRCPC
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McMaster University
Consultant Psychiatrist, Parkwood Operational Stress Injury Clinic

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Staff Sergeant (ret'd.),
Author of: *"56 Seconds"*
"How to Survive PTSD and Build Peer Support"

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