



Exploring the needs of bereaved families of the Canadian Armed Forces (CAF)

The Helping Our Peers by Providing Empathy (HOPE) program

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IMPORTANT INFORMATIVE STATEMENTS

In conducting the research described in this report, the investigators adhered to the policies and procedures set out in the Tri-Council Policy Statement: Ethical conduct for research involving humans, National Council on Ethics in Human Research, Ottawa, 2014 as issued jointly by the Canadian Institutes of Health Research, the Natural Sciences and Engineering Research Council of Canada and the Social Sciences and Humanities Research Council of Canada.

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Abstract

Helping Our Peers by Providing Empathy (HOPE) is a peer support program for bereaved families of Canadian Armed Forces (CAF) members. Upon request from Director Casualty Support Management (DCSM), this study was conducted to assess whether the HOPE program is meeting the needs of bereaved military families; and to examine families' perceptions of the support provided to them by the CAF. The research consisted of a series of semi-structured interviews with family members who have had experience with the HOPE program, either as a peer who has received support, a volunteer who has provided support, or both. Overall, participants describe the HOPE program as highly effective and of vital importance to bereaved families as they struggle with their loss. In particular, they emphasize the unique nature of the peer support HOPE provides – one-on-one support between peers with a shared experience of the loss of a CAF family member – as having a significant, positive impact on their emotional healing and family well-being. Although family members interviewed strongly support the HOPE program, its limits are also acknowledged. The interview findings suggest that the needs of the bereaved families should be understood more broadly to include a number of other factors, such as: sustained assistance in handling the administrative details that follow the death of a CAF member; when possible, access to official documentation such as incident reports and coroner's reports; and continued recognition of their membership in the broader military community, demonstrated through active communication and inclusion in commemorative events and ceremonies. This report concludes with recommendations for improvement to the support the CAF provides to bereaved military families.

Significance to defence and security

This study was conducted to assess whether the HOPE program is meeting the needs of bereaved military families; and to examine families' perceptions of the support provided to them by the CAF. Analysis of the data provides insight into the experiences and challenges that families face in the aftermath of the loss of a CAF member, and demonstrates the value and importance of the HOPE program in providing much needed support. This report concludes with recommendations that can help improve the support provided to bereaved military families.

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Résumé

Le programme Empathie et soutien par les pairs offrant une invitation au réconfort (ESPOIR) est un programme d'entraide des pairs à l'intention des familles endeuillées des membres des Forces armées canadiennes (FAC). À la demande du Directeur – Gestion du soutien aux blessés (DGSB), la présente étude a été réalisée pour déterminer si le programme ESPOIR répond aux besoins des familles endeuillées des militaires et pour examiner la perception des familles à l'égard du soutien qui leur est offert par les FAC. La recherche consistait en une série d'entrevues semi-dirigées avec les membres de familles ayant bénéficié du programme ESPOIR, que ce soit en tant que pairs ayant reçu un soutien ou à titre de bénévoles ayant fourni un soutien, ou encore les deux. De façon générale, les participants ont décrit le programme ESPOIR comme étant très efficace et d'une importance capitale pour les familles endeuillées qui traversent cette épreuve. Plus particulièrement, ils ont insisté sur le fait que la nature unique du programme ESPOIR, dans le cadre duquel un soutien individuel entre pairs et une expérience partagée de la perte d'un membre de la famille faisant partie des FAC sont offerts, a une incidence positive et importante sur leur guérison émotionnelle, de même que sur le bien-être de leur famille. Bien que les membres des familles interviewées soutiennent fortement le programme ESPOIR, les limites de ce dernier sont aussi reconnues. Les conclusions tirées des entrevues laissent entendre qu'on devrait être plus attentif aux besoins des familles endeuillées et tenir compte d'un certain nombre d'autres facteurs, comme une aide continue pour le traitement des formalités administratives suivant le décès d'un membre des FAC; si c'est possible, l'accès à la documentation officielle, comme les comptes rendus d'incidents et les rapports du coroner, ainsi qu'une reconnaissance constante de leur appartenance à la communauté militaire élargie, par l'entremise d'une communication active et d'une participation aux activités et aux cérémonies commémoratives. En conclusion du présent rapport sont formulées des recommandations qui pourraient permettre d'améliorer le soutien offert par les FAC aux familles endeuillées des militaires.

Importance pour la défense et la sécurité

La présente étude a été réalisée pour déterminer si le programme ESPOIR répond aux besoins des familles endeuillées des militaires et pour examiner la perception des familles à l'égard du soutien qui leur a été offert par les FAC. L'analyse des données fournit un aperçu des expériences et des épreuves vécues par les familles à la suite de la perte d'un membre des FAC et permet de démontrer la valeur et l'importance du programme ESPOIR qui offre un soutien indispensable. En conclusion du présent rapport sont formulées des recommandations qui pourraient permettre d'améliorer le soutien offert aux familles endeuillées des militaires.

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1 Introduction

1.1 HOPE program background¹

In May 2006, a group of young widows and two fathers of fallen soldiers met to attend a focus group. The goal of this meeting was to assess the need for a bereavement group to be created that would provide support to families of fallen Canadian Armed Forces (CAF) members. This meeting and the development of a shared vision led to the creation of the Helping Our Peers by Providing Empathy (HOPE) program.² Prior to the creation of HOPE, the CAF had no mechanism or vehicle in place to provide this level of support to the bereaved military families. It was only through the HOPE program that a structured system was put in place that brought the families together.

Operating under Director Casualty Support Management (DCSM), the mission of HOPE is to: “provide confidential assistance, by supporting peers, to the military families who have lost a loved one in the CAF” (Richard, 2012). The loss can be related to military service or any other type of death. The purpose of HOPE is to provide support to families that are affected by the loss of a loved CAF member. HOPE matches trained volunteers who offer peer support to bereaved families.

The orientation process after the death of a CAF member is as follows:

1. Notification sent through chain of command (normally within 24 hours);
2. DCSM receives notification message and the selection process begins;
3. The Next of Kin (NOK) is notified;
4. The Commanding Officer (CO) appoints the Designated Assistant (DA)³;
5. DCSM sends a memo to the DA with all information about the HOPE program component and referral process to follow; and
6. The DA contacts the bereaved NOK, who provides DCSM with contact information and consent of the bereaved to participate in the HOPE program.

The HOPE program endeavors to match peers with volunteers who share a similar set of circumstances and experiences to the extent possible. More specifically, effort is made to match individuals based on the nature of their relationship with the deceased member (i.e., mother,

¹ All information in this section was drawn from background materials provided by DCSM (i.e., HOPE Program Volunteer Guide; Grenier and Dart, 2006, and Richard, 2012).

² The HOPE program will also be referred to as HOPE in this document.

³ The term “Designated Assistant (DA)” has only recently replaced the term “Assisting Officer (AO)”. As the majority of participants were familiar with “AO”, it is what was generally used during the interviews. To maintain authenticity, all references to the AO were left unchanged in direct statements made by participants that are quoted in this report.

father, spouse), circumstances surrounding the death (e.g., due to combat in Afghanistan, an accident, or illness), and any other factors that may be considered part of providing a shared understanding between them, such as children or a particular age or other family considerations.

It should be noted that usage of the terminology “families of the fallen” in this report is considered to be fully inclusive of the families of all military members who have been lost, regardless of whether their death was due to combat, illness, or accident.

1.1.1 HOPE volunteers

HOPE volunteers understand the grief process as they have been through a similar experience. The role of HOPE volunteers is to support the family with compassion and help them normalize their pain by providing them with hope.

The selection process of volunteers for the program is based on the following criteria:

- Volunteers must have experienced the loss of a loved one in the CAF;
- Volunteers must have completed the medical assessment individual interview process;
- Volunteers must have completed the volunteer training for helper peer and the Applied Suicide Intervention Skills Training (ASIST);
- Volunteers must have a criminal background check; and
- Volunteers must be ready to share their personal experience with others.

There are program related duties that the volunteer must adhere to in their role. For example, the volunteers are to ensure that they make regular contact and keep active with their peer⁴, that they participate actively in conference calls, working groups, and training courses whenever possible and submit their log sheet on a monthly basis, and that they demonstrate loyalty and act with integrity, independence and good faith in relation to the best interests of the program.

1.2 Aim of the study

Director Casualty Support Management (DCSM) requested that Director General Military Personnel Research and Analysis (DGMPRA) examine the HOPE program. The objective of the research study was to explore whether the HOPE program is meeting the needs of families of the fallen; and, more broadly, to examine families’ perceptions of the support provided by the CAF. This report provides DCSM with a summary of the findings and recommendations of the research project on HOPE and on the support provided by the CAF in general.

⁴ In applying language consistent with that used in the HOPE program, “volunteers” will refer to those individuals who act as HOPE volunteers, while “peers” will refer to those individuals who are receiving support from the program.

2 Methodology

2.1 Study overview

The research plan was defined and established in the fall of 2012 and the data collection commenced in March 2013 and concluded in September 2013. Semi-structured interviews with both HOPE peers and volunteers were conducted across Canada to gather data for this study. The majority of interviews were in-person, with some conducted over the telephone. Interviews ranged from 30 minutes to an hour and a half; on average, the interviews were approximately one hour in duration. The interviews were recorded and transcribed, and the data analyzed with the qualitative software program MAXQDA.⁵ In total, interviews were conducted with 39 bereaved family members⁶; 27 were conducted in English and 12 conducted in French.

2.2 Recruitment of participants

Participants were recruited from the HOPE program with the assistance of DCSM. Information about the study was distributed to the target population, outlining the purpose and nature of the research study, data collection methods, and measures taken to protect the participant's confidentiality. Instruction was then given that any individuals who may want to participate were to follow up directly with DCSM and state their potential interest. Individuals who identified themselves were asked to provide their consent to allow the researchers to be given their contact information so that an interview could be scheduled. This recruitment process maintained the confidentiality of the families and ensured voluntary consent.

2.3 Procedure

Ethical approval for the study was given by the Social Science Research Review Board (SSRRB). Prior to the interview, all participants were asked to read and sign a consent form (see Annex A) and permission was asked to audio-record the interview. A semi-structured interview was conducted, with two separate interview guides used based on whether the participant was a peer (Annex B) or a volunteer (Annex C). The audio-recordings of the interviews were transcribed verbatim, and translated where necessary.

2.4 Coding and analysis

The identifying information was removed from the transcripts. Each transcript was reviewed and examined several times to identify and code emerging patterns of responses. The lead researcher

⁵ Version 10; Released in 1989, MAXQDA is a professional software program for qualitative and mixed data analysis produced and distributed by VERBI GmbH and which can be ordered online (www.MAXQDA.com).

⁶ As the categories of “peer” and “volunteer” are not mutually exclusive among participants, with some volunteers having been a peer themselves first and therefore at times discuss their experiences as a member of both groups, the distinction between the two groups was not emphasized in the coding and analysis but identification of separate groups will be made in instances in this report when pertinent.

identified and developed the overall coding scheme, including both the larger themes as well as the sub-themes, and obtained agreement from the secondary researcher. Once consensus and agreement between the researchers was established regarding the coding structure and classification, coding of the interviews was then completed. This process was conducted independently, with the individual researcher responsible for coding the interviews each had personally conducted, and the lead researcher also coding the translated French interviews. All interview data was thereby coded by both researchers into major themes, with several sub-categories included under each broader theme. This process continued until no new themes appeared.

3 Findings – The HOPE program

One of the most important things acknowledged by the participants is that the pain they have experienced from losing a CAF member is profound and overshadows every aspect of their lives. While the HOPE program can provide support and guidance through the grieving process, the point that these families have suffered a terrible loss should not be overlooked. Participants made it clear that, despite the positive impact of HOPE and any support they may have received from their community and/or from the CAF, their grief is always present and that nothing is able to take away the pain of their loss.

“The pain of losing a child will always remain the pain of losing a child. Despite all the programs in the world, it will always still be there...I think that it’s really in learning to live without them in the real world... But that’s it—it’s learning to live without them.”

“The whole idea of giving someone who’s suffered a recent loss some kind of hope and also being honest, saying it hurts and it ain’t going to stop hurting. It will hurt until the day you die but you’ll learn to cope with it and you’ll learn to feel joy again. To me, it’s bittersweet, but you will feel joy again. There’s always an underlying sadness. That just doesn’t go away. Even when you laugh, you’re always a little bit sad.”

3.1 Introduction to the HOPE program

Participants learned about the program in many different ways. These included through their DA, from other bereaved family members in the community, or from their initial contact with a HOPE program volunteer. Many participants noted, however, that their grief greatly affected their short-term memory, concentration, and their ability to focus and retain details. As such, participants were frequently unable to remember how they initially learned about and entered the program.

Many discussed feeling overwhelmed with the quantity of information provided to them. They described the experience of dealing with all of the other administrative details during the immediate aftermath of the death of their family member as extremely challenging. They reflected that it was easy for the details of the HOPE program to become lost or to not register. Participants noted that they were often only processing basic information during the initial grieving period when the program was generally first introduced to them.

“The first year, I find is a total fog of timelines...after my husband passed away...through the fog, I kind of remember sitting across from her with some papers and her telling me all the things that were available and checking things off. I must have said yes along the way somewhere. I don’t remember...you’re just not 100% there.”

“And I do believe [the AO] did tell me about it at the very beginning, but you’re getting inundated with so much information... concentration was a huge issue for me for a long time. So to hand me anything and say “read it”... I couldn’t. So yeah, I think sometimes the presentation of the program is lacking, the information to the person that’s suffered the loss.”

The above comments identify the challenge of introducing the program in a way that enables participants, at the height of their pain and suffering, to understand and retain an awareness of the resources made available to them. Some participants also noted their initial resistance to receiving support from HOPE, identifying another potential challenge in introducing the program. As the experience of one volunteer who initially refused support highlights, it is difficult to determine the appropriate time to reach out to a family member who has suffered a loss, as the best time to establish contact can vary based on each individual and their circumstances.

“I was pretty angry...and I don't think I heard everything she was saying to me. I can't really recall, but I seem to recall that she did say DND in there somewhere, and that would have done it for me. That would have been like – “I don't want anything to do with it. Forget it” ...I don't think I heard or understood what she was trying to tell me and I don't know that I was ready to talk to anybody, because it was pretty early on, and the emotions were really, really intense...So to talk to a virtual stranger where you're always gulping for air because you're crying so much, I couldn't do that. And if she had called me, I don't know how much longer later, I might have been more receptive to it. I don't know. But at the time she called me it was still pretty intense. It was still pretty fresh.”

Several participants acknowledged the difficulty in reaching people and the fine balance in bringing them into the program at the right time. Given the differences in the way each person grieves and copes with loss, it can be hard to determine when the need is greatest and when individuals will be most receptive to HOPE. Reaching out again at a later date to family members who initially displayed reluctance or inability to get involved with the program was suggested as a way to address this challenge.

“But it's hard to know when it is a good time. When do you tell them about it? Because some people might need it right away, and other people like me didn't want to hear about it, didn't want to talk to anybody for a while.”

“And maybe that's something that they revisit. You know, maybe that's something that they offer in the first couple of weeks to a month, and if you say no, maybe it's something that the AO revisits six months later.”

Another suggestion was for direct contact to be established between the DA and HOPE in order to help facilitate the initial connection with the family member. It was noted that it could be helpful if someone contacts the family in advance to inform them that someone from the program will be getting in touch.

“I think we need to rely on that AO. And we've discussed this in HOPE; that it would almost be good for us to be given the AO's name and number so that we could call that person first and say “we want to call your family. Have you told them about us yet? Will you tell them that next week I'm going to call?” I think that would be really helpful for the families.”

3.2 Perception of the HOPE program

3.2.1 Importance of the shared experience

All study participants indicated that they perceived the program to be both an extremely important and a necessary resource for the families of the fallen. Overwhelmingly, the perception among participants is that HOPE is an excellent program that offers much needed support to those who have lost a family member. Participants identified many benefits that they believed contributed to the value of the program. In particular, they saw significant value in the ability of the program to link grieving family members to someone who had suffered a similar loss and who is subsequently able to understand and relate to what they are going through. The importance of this shared experience was a major common theme identified in the interviews, with the perception often voiced that only someone who had also lost a CAF member could truly know what it was like to suffer the pain of their loss and to understand their grieving.

“The HOPE program – it’s for people who’ve been bereaved, who’ve lost a loved one, and I think that’s the priority. Because no one can understand you better than someone who’s been through the same thing, right? That’s the strength of the program...I think that’s the beauty of the HOPE program.”

“If they pair them as well as they paired [me] for every case...if they’re able to do that, it’d be invaluable, especially to someone who’s experienced a similar loss to the person they’re paired with. You really feel alone. While you logically can know other people have gone through all this before but, until you actually talk to someone who has, it’s not a really good feeling. I think the HOPE program would be able to provide that really well. That’s my perception anyway.”

Some participants also noted that, although they had access to other formal sources of support, such as psychologists or grief counsellors, the lack of a shared bereavement experience with these individuals created something of a barrier. The ability to form a connection with others who have suffered a similar loss was identified as one of the greatest strength of the program.

“I know that there is other resources in the community...I had my personal therapist but I didn't connect with her because the only thing I wanted is to reach for other families who have lost a loved one...when I speak to a peer who also has a psychologist or a social worker, they always said – the therapist is good but not as good as you because I can tell you everything, and I know that you're not faking. I know you understand. I know you know what I mean. But if I try to explain something to the therapist, I know that there is a part that he can't understand.”

3.2.2 HOPE eases isolation

Participants shared the perspective that, instead of feeling like they are simply another name on a file of a large organization, the HOPE program establishes a personal connection for them. Participants also highlighted that the volunteers were not being paid by the military but volunteer to do it because they genuinely care and want to help others. Many believed that involvement in HOPE helps prevent people from feeling like they are alone in their grief and that by being

connected to other families of the fallen, it can help to break the isolation that may happen after a loved one has passed away.

“I can’t even imagine the state I’d be in if I didn’t have access to [HOPE]. First of all, I would feel extremely isolated and, if there’s one thing that should never happen in times like this, it’s isolation. It’s the worst thing. I’ve been alone a lot since my husband died. So feeling isolated, all alone in one’s world, without access to services or resources to help us overcome the isolation, it’s unthinkable and scary at the same time. I don’t know how I would have dealt with all that.”

“We are there to bring them support. We are a lighthouse for them, because sometimes they will feel that they are lost or they are in the fog and being [in HOPE] makes them think that they are not alone. And even if they think that they are alone, they are not.”

Additionally, several participants perceived that those around them, such as the family and friends of the fallen CAF member, also struggled to cope. They often felt a need to protect those around them by not sharing their pain or showing the true extent to which they were suffering, thereby creating the potential for further feelings of isolation to develop. This inclination made their interactions with HOPE volunteers that much more important, as they were removed from the participants’ immediate social network and provided them with an outlet with whom they could talk.

“When [my husband] passed away, I would not want to share too much with my family or his family because it would upset them. But having that other person to talk to and to share my memories, it’s so helpful, and you just feel like you form that connection with somebody else who’s shared the same thing and has thought the same thing... you’d be burdening somebody else with...telling that person the same story or sharing another moment...life around you is going on but inside you’re not really going on at first. You’re stuck there and remembering all these things. And I think being able to chat with her and share my memories has helped tremendously.”

Some also felt unable to continue to talk about the fallen member with their friends and family after a period of time. They worried that ‘fatigue’ might have set in with those around them; that those closest to them would become tired of listening to them talk about their loss and the fallen member, and may eventually distance themselves from the bereaved, resulting in further isolation. They believed that HOPE offered them a safe place where they could fully share their grief and linked them to a support network with which they could openly discuss their thoughts and feelings.

“And we are there to listen too...after a while, let’s say after six months, the people around you will get sick of that – of it. And you can’t really see it. They will be “oh, no, here we are again,” but we talk with them, we listen to them and even if they repeat the same story three, four times, I don’t care.”

“All I do is – I’m just that person, if they want to vent, they can vent because I don’t know anyone. I don’t know any of their friends or family. It’s not going to go anywhere beyond me. Sometimes you want to vent. Sometimes you just want to tell your story ten times over. Sometimes you just want to talk about your [loved one]all your friends are

tired of hearing the same story. You can tell us ten times. You can tell us twenty times. It's okay. We want to hear it."

3.2.3 HOPE focuses expectations

Another perceived benefit to the program identified by participants is that it helps provide grieving members with realistic and honest expectations of what the future will hold for them. It can also help them to learn how to confront the reality of their loss by connecting them with others who have already gone through the same experience and who have now reached a stage where they are capable of volunteering for the program. HOPE volunteers offer their peers support in figuring out how to move forward and continue on, while acknowledging that their pain and grief will always be present.

"When you say it, they know you mean it because – I know it hurts. Your heart is broken. You validate their feelings and you validate your own too, the two of you talking and also by being honest and saying it's not going to go away. ... "I know what you're suffering because I'm suffering it too but this is where I am and I lost my guy a little over two years ago. Yes, it's very difficult but you live again, you do. There'll always be a hole. You'll always think about him but that's life. That's the reality. There's nothing much you can do about it". I know [HOPE] has said our role is to support and also to give them a glimmer of hope...it's a terrible thing that's happened, but it happened. At some point you'll come out of it. The pain will be there but you'll come out of it to be able to cope with it so you can put it aside and feel some joy and have fun, live your life again. That's what you do. You just put it aside because it's always there."

Overall, participants felt that the program does in fact provide bereaved families with hope, and with a reasonable expectation that they will find a way to learn how to live with their loss. As such, participants felt that the HOPE program is a valuable investment for the military.

"Well, it sounds so cliché because the name of the program is HOPE, but I can't help but drop it. To me, it epitomizes the whole program. That is absolutely the best part of it. I think it really, really does give people hope, just to know that that person on the other end of the phone survived it. Again, that's what I needed. I knew if my helper had survived what she did, I knew that, yeah, no matter what a dark place I was in, that if I just kept putting one foot in front of the other, I would definitely get to that point as well. And to me that's just number one. It's such a valuable service. I really don't think that can be said enough."

3.2.4 Connecting two worlds

One of the somewhat intangible benefits of the program identified was that it provided a way to connect the two worlds that participants found themselves in – military and civilian. While many participants observed that there was access to civilian bereavement support, as a military family they felt the HOPE program was able to provide them with unique support that they could not access anywhere else in the civilian community. In other words, many participants identified strongly as being a military family and felt that the program offered them a way to bridge the gap between their military family identity and their need to cope with their grief within their civilian community.

“The peer helper showed an understanding that I couldn’t get anywhere else because she knew what it meant to go through the grieving process. What it was to be a civilian woman in a military world.”

“But the HOPE program, I still have a personal interest in it because it really fills the gap between the civilian world and the military world. It’s like a whole regiment, it’s a window of understanding because there are people there who understand.”

“I can tell you this firsthand – people don’t get us. It’s a military environment. It’s honour, duty, the whole thing. When our family members signed up, they signed us up too. And people don’t understand that.”

As these participant comments reflect, bereaved military families find themselves in a difficult position. They identify strongly as part of the military community and yet, with the death of their family member, their interaction and engagement with the military community tends to become less frequent and is typically reframed in terms of bereavement. On the other hand, as they try to cope with their loss and carry on with their lives in their civilian community, they find themselves isolated because the circumstances in which their loved ones died are unique relative to civilian experience. Being caught between these two worlds is a significant part of the challenge they face, and the participants attribute their progress to the unique support provided through HOPE.

3.3 Impact of the HOPE program

3.3.1 A Community of support

Overall, the HOPE program was found to have a powerful and significant impact on participants. As was discussed above, many expressed that their experience in the program helped them to feel that they were not isolated or alone in their grief and in their loss. More than just easing feelings of isolation, however, the participants’ experiences in the program allowed them to establish a “community of support”: a close-knit and actively engaged community of families who share a common experience of having lost a family member in military service. The significant value of this shared experience was frequently recognized by participants.

“But not feeling alone is the most important thing we got out of the program...not feeling alone in life, but not feeling alone in this type of ordeal. It was very important. I think it’s one of the needs; that’s what my husband told me when he got the call and when we met the group for grieving parents...he said, “I feel less alone in my grief”. So that meets a very, very big need in my opinion.”

“I said to my husband, “Hey, we’re lucky. From the beginning, we’ve had guidance, help and support, and I’ve never, never felt alone”. At the beginning, I wasn’t left to my own devices. I said to myself, if our [child] had [died] in the civilian world, I might have had some help at the start, but after, I would have found myself alone facing this and you don’t know where to look for help. Especially at the beginning, you’re so crushed, you have no idea where to start...too numb to have an idea of taking the first step.... Right from the start, I was never alone in it, so that makes a difference.”

The impact of the community of support developed through HOPE was also demonstrated in letting families know that their loss had not been forgotten.

“At one point we received a gift box with a number of items to comfort us; I was so touched by that. My husband and I were very moved. We said to ourselves, “we’re not alone. There are people who take the time to send us this...full of little details that remind us that people are thinking of us”. That was very important. It was a concrete example: yes, we’re here for you. There are people who are thinking of us.”

Many attributed the connection to a community of support formed through the program as having had a very positive impact on them. HOPE was found to give participants the opportunity to interact with and receive support from those who could help guide them through the host of emotions and challenges that they face in the aftermath of a death. This community of support was found to be a big part of what helped them in their grieving process and what contributed to their improved well-being.

“My wife came to me. She said, “there is a man on the phone that I think you would like to speak to. His son was killed in Afghanistan”. And that was very powerful. I grabbed the phone...and he said to me, “you are now where I was three months ago”. That was a powerful statement because here was a man that understood how it was - how I was feeling. And I’m sliding back to that moment right now. That’s how raw this pain is. It was a short conversation, actually, but the message was loud and clear – here was a father suffering the same pain I was, and yet was able to pick up the phone and call me and give me his condolences. I suppose basically I’m getting the message that there is hope. You know, he’s survived three months.... I needed to be with people that understand my pain. I need to listen to them. I need to share my pain. So I thought this is where I had to be. And if I wanted to continue on and live with my grief, I needed to learn how to do that.”

Some participants were also found to develop their own communities of support separate from the HOPE program. This suggests that there is a driving need for many to develop these connections and form relationships with others who have suffered a similar loss. Given the finding that this need may exist independently from the program, it demonstrates how the HOPE program can serve as an important gateway for those who may not otherwise have independent access to such a community.

“I get a lot of personal well-being, good feeling in being around other families. For example, there’s a group of us fallen soldier families in [my home region], we get together. We talk back and forth. We know exactly how their sons died. They know how our son died. They know our story. We know their stories. And this little group that we have is not unlike the HOPE group. So without HOPE – it’s helped. Maybe I wouldn’t be quite as far along as I think I am.”

“It’s interesting too, I’m a member of [organized club], and I must have had about four guys come up to me and – I’ve known these guys...I’ve [done activities] with them and stuff – I didn’t realize that they had lost a child. And they would come up and say, “hey, I understand where you’re coming from, I lost my son”. And those are powerful connections.”

3.3.2 Impact on volunteers

Interview participants spoke at length about the range of positive benefits that they had experienced as peers receiving support from the HOPE program. Importantly, the participants also reported that, as HOPE volunteers, they found their involvement in the program continued to provide positive benefit in their own grieving process. Volunteers frequently expressed that their role in the program has also facilitated their ability to process and manage their grief. In some ways, the role of volunteering was found to help give meaning to their pain and mourning, as participants felt that it gave them the opportunity to give back and make a difference to others in need. Participants often indicated that what motivated them to join the program as a volunteer was the knowledge that they were helping someone else and the feeling that they were doing important work.

“Honestly, it helps me through my mourning process....helping others get through their mourning helps me too. It’s not just others who get something out of it. That’s why I do it. It’s just that I get a lot out of it...it’s about what’s inside, about my emotions, about my own experience.”

“Knowing that I’m making a difference in at least one other person’s life. Just listening to them talk, to let them know that they’re not the only ones out there. I think that’s important.”

For those who had first started out as receiving support through the program, the positive difference that HOPE made for them was often a large part of what motivated them to volunteer. It allowed them to help someone else as they had themselves been helped.

“I was just so inspired by this program. Again, I just couldn't explain to you how much my helper was able to lift me up and just make life seem less hopeless. I really felt that she made a significant change in my life.”

HOPE was also seen as a tribute to the fallen members and their families and a mechanism by which they are honoured and remembered.

“When people die, they don't leave. So it's important that they aren't forgotten. And I think this helps with that too... because I know that the reason that HOPE is going is because they want no one to forget that there are people who gave themselves for this country that are now gone. I think it's a tribute to the people who have died. So how could I help but not want to do it?”

Participants were asked to discuss whether they found volunteering with HOPE to be emotionally challenging. While several indicated that they were sometimes affected by the difficult nature of their role, the positive rewards that they received by helping someone in need generally offset the emotional burden. HOPE volunteers are firmly encouraged to routinely monitor their self-care as a preventative tool in helping to ensure a positive mental and emotional state and to help foster resiliency. Participants referenced the importance that HOPE places on one’s self-care as way to ensure that they do not get “burned out” or overloaded by the emotional nature of their volunteer work. Having a certain strength and empathetic nature were noted as being positive characteristics for the individuals who volunteer with HOPE.

“Our role as a peer provider is to listen, to be nonjudgmental, and to be supportive. And sometimes it’s hard. I mean, I’ve had people that have cried on the phone. I cry with them, what the hell.”

“But after every emotional outburst or listening to a peer and I identify with their pain, I feel the pain, and it's unbelievable. What happens after an emotional thing like that's very similar to Remembrance Day. The hardest day of my life is Remembrance Day; the second hardest day may be Christmas, type of thing. When you have these emotional, stressful days, after you've gone through them, I feel stronger. I don't know why. It's hard to explain. But I feel stronger and better. It's a form of relief. So after I'm talking to a peer and I have a difficult time, when I hang up the phone and I walk away, thinking about what they're going through, that's hard...eventually it's fine. It passes. But I'm prepared for that. If you're not able to do that, then you're not ready to be a member of HOPE. I think the only people that are suited for HOPE are the people that really are empathetic, really feel the pain, but are strong enough to be able to go through the type of work we do.”

3.3.3 HOPE will always be needed

The participants regard the HOPE program as highly effective and of crucial importance to families of the fallen during their grieving process. Despite its perceived impact and value, however, participants also expressed concern that the program may potentially discontinue or become less of a priority for the CAF with the end of the Afghanistan combat mission, even though the need would still be there to support the CAF bereaved families.

“I'm glad there is HOPE. I'm glad it got started. I understand it got started because of Afghanistan, but I'm glad that once that part of the military [mission] ended, that they didn't end HOPE there. Hopefully it helps other people.”

“I would say that whatever the powers that be could do to continue the program, they should continue it simply for the benefit of the people I know who've become active within the program as peer supporters. I think it's contributed very much to our own well-being, and just growth. I think the people I know within the program, they keep giving back too as supporters to the Canadian Forces and things like that.”

3.4 Best practices

Participants were asked to identify what they considered to be the best practices in the program. Many again identified the ability of HOPE to offer a community of support as the most effective piece in helping grieving families deal with their loss. Participants discussed the value of being connected to a peer helper who could fully understand and relate to how they were feeling, in a way that others who had not experienced the same loss could not.

“I think it's that we are the ones who are able to reach out to somebody, to be there for them, and to do something at a time when everyone else around them is struggling because there's nothing they can do. So everyone else - all of their families and friends and support system – are all scrambling and trying to think, is there anything that I can

do...we have something that we can offer that essentially nobody else can – which is the sharing of the common experience. So really at a time when nothing helps, we have something to offer them to help them that does help...when it's something that's so specific that you know that the people around them can't offer them, then it's incredibly valuable what gift you're able to give them.”

By being linked with others who have gone through the same loss, participants felt that they were given access to a wider population of individuals with a shared experience, from whom they could learn and get tips or strategies on how to cope based on what others have done. The sense of being part of a group that provides support and information to each other was thought to give individuals strength.

“The best thing about the program is that it helps us realize how bonded we all are in our grief, and it gives us the strength to go on. It keeps us focused, it keeps us together. I mean, if I was out there myself, I'd probably be angry. I'd probably be angry at the military. I know the bitterness I had over the funeral would be continuing on. So how many others in this group would be upset and angry? But bringing us all together, we're just better, we're working as a team. And yeah, I think if you didn't have the HOPE program, things would be different out there.”

“I think as a group we're very strong and very supportive to each other. With such a loss and such a hole, I think we all band together and I think that's really, really great to have that support. I think that's important because we're all trying to do the same kind of helping of others but also if we're all together it makes us stronger.”

Some participants also believed that the peer matching was one of the best practices of the program. Being connected to someone who had not only suffered the death of a CAF family member but, where possible, getting matched with someone with a comparable set of circumstances (e.g., mother to mother, spouse to spouse, similar cause of death), was considered to be a large part of what made HOPE effective.

“She definitely understands. That's the most important thing. Another mother – I don't think there was anyone who could understand me better than a person who went through the same situation. I think that's the goal and that's being achieved, in my opinion. To target the closest possible and, for me, I found that support to be so important – she understood. I found that it was the best support, it's someone who went through the same thing.”

“And I must say it wasn't until I learned that this dad had walked in my footsteps a few years prior to – to our situation, as soon as he said that, everything seemed to open up and we developed a very good relationship because now I was talking to another dad who knew exactly how I was feeling...it made a tremendous difference...another dad who had exactly the same experience – there's an instant connection.”

For the volunteer participants, the strong emphasis that the program places on the importance of maintaining their own self-care was also discussed as a best practice. Many participants discussed how the program greatly helped build their awareness for the value of self-care, with some noting that they found it challenging to apply in practice at times.

“I found self-care was really important. I know [HOPE] used to bug us with the self-care word all the time, until one time it got to me. It was like jeez, I got to slow down. I was going crazy over a couple of situations. Self-care is so important. I’ve never looked at self-care in my life and I’ve always been busy – too busy. So that was one thing I learned a lot in the program.”

“That is something I have been horrible at. I know I’m getting a lot better and I have the awareness in my mind. That’s something they’ve been teaching us about too. That’s a really important part of the program.”

Another aspect of the program identified by many of the participants as a best practice is the monthly teleconference between the HOPE volunteers and DCSM. The teleconferences allow the community of volunteers to remain up to date with the status of the program. It also provides a vehicle through which they can continue to monitor and support each other. Finally, it provides a forum in which they can discuss their roles as volunteers, and seek advice from each other and from DCSM as new challenges arise.

“I think it's good how we keep in contact once a month in terms of our conference calls. I think that's really important and then you hear what's going on across the country, and updates on new stuff. But I think it's good, it's a reminder of where we're going and what we're doing.”

“I see that's how important those conference calls are, and we learn from each other. I think they're crucial. There's no question about it. And if we didn't have those conference calls, there'd be a tendency to lose touch. So it's important that we at least hear each other's voice on a conference call. I think that's crucial.”

Some participants, however, noted that they preferred in-person discussions. They did not feel that the teleconference calls were especially beneficial to them as they found them to be overwhelming. However, given the geographical limitations and challenge in bringing the large group together, it was also recognized that regular in-person meetings are impractical and not feasible.

“The teleconferences, that part I don't enjoy. You can't see who you're talking to, and to me, it's this gaggle of voices. I don't usually say a whole lot.”

Also identified as a valuable component of HOPE are the annual national conferences and educational pieces that are made available to volunteers. Several participants discussed the benefits they have gained through these experiences. Positive feedback was given about the trainers and presenters, all of whom provided participants with a mix of information and knowledge. For example, many referenced the benefits of suicide training as they felt it helped to prepare them to better manage the potential increase in peers coming into the program who have been affected by suicide.

“It’s nice to be able to talk to others and not just my peer group...with some of the extended training programs, we got a chance to meet some of the other people and talk about their coping methods and get information on how we can help our own peers. I found that really good.”

“When you have the conference, I find that the speakers that we've had have been really good, which has been really motivational to me. And I would hope that they would continue on that line. That's the part I appreciated, the topics on different things, like from suicide to difficult cases, and some of the scenarios that they put us through, I think are very good. For instance, we had somebody on grief and somebody on suicide, so those kinds of things that would help us with our peers.”

Positive responses were given by participants when asked about the training they had received to become a volunteer with the HOPE program. The majority of participants indicated that the training not only prepared them for their role as a volunteer but, in addition, also helped them in their own grief and aided them in being able to better understand and process their feelings.

“I knew it was going to be emotionally draining before I went. I knew that because I would have to answer questions myself emotionally and know the answers before I can help somebody else. I knew that was going to be tough and they're going to make me answer tough questions that I hadn't wanted to go there because there's lots of things when you have a loss you choose not to go some places that are really hurtful. They did go through places that I had to go through because if I didn't – if I didn't step through those doors myself – I couldn't ask anyone else to do it. I knew before I went that it was going to be emotionally draining on me. I was mentally prepared to know that and I was exhausted by the end of the course, by the three days. I think I was on information overload....Part of it was because, as I said, I had to answer those questions personally for myself and some of the questions I hadn't crossed the bridge yet. It forced me to go across the bridge, which was a good thing.”

3.5 Suggested improvements

Participants were asked to provide their input on any ways in which they felt that the HOPE program could be improved. In many instances, the response was that no improvement was necessary and that the program was fulfilling the needs of the families of the fallen in the best way possible. Of the suggestions for improvement, one of the most frequently offered was to find a way to bring the family members of the fallen together more often and give them opportunities to meet and spend time together. That is, some participants felt that the HOPE volunteers as a group, and the program more generally (i.e., peers), could benefit from increased frequency of personal interaction and engagement among their community. Moreover, some felt the program's impact could be expanded if more were done to engage with other families who have not participated in HOPE. As well, it was felt that more in-person group meetings for both the volunteers and the peers would create the opportunity for further training and education. However, participants did acknowledge that they felt the likelihood of this happening was not high, given potential budget restrictions and the challenge of the group's geographic dispersion.

“We're improving all the time. This week is a perfect example of it: more education, the psychology of how grief unfolds... the improvements come through. And we could always have more money but, at times like this, it's a dumb question to ask [for]. One of the things that I picked up through the HOPE program is that there's a healing process to everyone's grief when they come together. The military's got to find a role – and we can do it through our HOPE program – to have group sessions across the country. That will

be expensive but that would help. If one of us in the HOPE program could be sent out - I mean, under the organization - out to do a group session, it [would] work well”.

“If somehow the military could bring families together in one setting...that means flying them in, bussing them, that would require a fair bit of money....that would be positive, if that could happen, but I don't see that happening because of budget reasons”.

Another area where it was noted that improvements could be made is in terms of the individuals who are recruited into the program as volunteers. Some participants acknowledged that the changing roles of the military may mean that, rather than the majority being combat-related deaths, there may be more families who lose a member as a consequence of an illness, accident or by suicide. Given the importance of matching peers to a volunteer who has a shared experience, it was noted that there could be a need for more volunteers with a broader range of experience to address this potential need in the future. It was also noted that ensuring there are a sufficient number of volunteers who are Francophone so that family members can receive support in their first official language was also an important consideration. It was recognized by participants, however, that volunteers can only be drawn from those who have suffered the death of a CAF member and who are mentally well enough to be able to serve as a volunteer. As such, recruitment is a potential limitation, particularly as the nature of current military operations continues to change.

“As far as improvement I think as far as I'm concerned I think it's doing well. It's certainly grown... [But] you can only get peer helpers from the peers. That's the pool that you've got... it came out of something extremely tragic, the young men that died in Afghanistan, but now if it can grow more and deal with the needs of spouses and parents of people who have died as I said, of sickness or suicide, an accident, whatever....They're all grieving. The grief is basically the same. It's not any different depending on the method of death. I think just growing more would be really good...”

One area considered by several participants as something of a missing link is that HOPE is not structured to provide similar support to the children of fallen CAF members. As was outlined above, the program is largely limited to providing service to spouses and parents of fallen CAF members. However, as the participants' noted, a death of a family member has a wider impact. Although they recognize that HOPE does not currently have the resources to address this issue, several noted how much they believed such a program would benefit other members of families of the fallen, such as their children.

“It doesn't reach out to the children. There's not a daughter who lost a father talking to a daughter who lost a father type thing but the program is new and it's still evolving. For me, as a spouse to spouse, it's great. I can only relate to the parents saying you know how my children were, it doesn't mean that that's how other children will be.”

Some participants also noted that the program would make a tremendous difference to aid the siblings of the fallen learn how to live with their loss.

“And the [siblings] need a lot of help. That's where the program lacks...that is the only place where I believe this program fails – there is nobody to talk to for [the siblings of the fallen]but the sisters and brothers, they just got kind of lost...in nowhere. And, you

know, that's your brother that you've grown up with your whole life and now is gone, right? And you have no one to talk to."

"I think there is some room for change. We have wives and husbands – spouses, if you want – there are fathers and mothers, but there are also brothers and sisters who may need help...so it might be a good idea to add other elements to the program. I'll give you an example. My son had a brother, he took this hard because the two of them were very close, and I noticed that when we met another family at a ceremony where they too, they had a brother, and my son and that young fellow became close, talked about things together that only they knew as brothers. And that's another element I could see eventually added to the program: a focus on brothers and people like that who have a different experience than father and mothers, the spouses. There are so many people who need help and don't have any."

Again, the pool from which to draw volunteers is limited and significantly more resources would be required to help grow the program by including a greater group of individuals. This challenge was identified by some participants.

"How do we get more peer helpers? The only way we do that is by asking the peers who are being helped if they would like to be part of it afterwards because they've suffered the same loss. It can only grow slowly. It can't grow fast. It wouldn't work."

3.6 Conclusion

All study participants indicated that they perceived the program to be both an extremely important and a necessary resource for the families of the fallen. Overwhelmingly, the perception among participants is that HOPE is an excellent program that offers much needed support to those who have lost a military family member. Participants identified many benefits that they believed contributed to the value of the program. Many expressed that their experience in the program helped them to feel that they were not isolated or alone in their grief and in their loss. More than just easing feelings of isolation, however, the participants' experiences in the program allowed them to establish a "community of support": a close-knit and actively engaged community of families who share a common experience of having lost a family member in military service. The significant value of this shared experience was frequently recognized by participants. Many attributed the connection to a community of support formed through the program as having had a very positive impact on them. HOPE was found to give participants the opportunity to interact with and receive support from those who could help guide them through the host of emotions and challenges that they face in the aftermath of a death. This community of support was found to be a big part of what helped them in their grieving process and what contributed to their improved well-being. Overall, the HOPE program was found to have a powerful and significant impact on participants.

4 Findings – The role of the CAF

Although the primary focus of the study was on the HOPE program, in many ways it was difficult to separate the experiences of the participants in the program from their broader experiences with the CAF. The program does not exist in isolation and can only meet the specific needs of the families in the manner in which it is set out to do. In the aftermath of a death, bereaved families can face many difficulties that are outside the purview of the program and therefore cannot be adequately addressed by HOPE. This section will examine some of the key themes that emerged in the interviews that provide insight into the challenges and issues that the participants faced independent of their experience in the program.

4.1 Provision of support

In the period following their loss, the vast majority of participants reported that they had little knowledge of where, or to whom, they could turn to for support. Many noted that the administrative requirements that they were faced with in this period could be overwhelming for them, particularly as they are faced with a significant emotional shock.

“You’re mourning; you need someone there to support you for the administrative things because – all alone – you won’t get through it. I think that administrative issues are quite important because you are so lost in your emotions, which are so intense that you don’t really know where to go.”

Many participants reported receiving significant practical support from the military in the immediate aftermath of the death. This included assistance with aspects such as dealing with funeral arrangements, information on possible relocations, and support in sorting out necessary administrative requirements. This was often recognized as being something that would not be made available to the same extent in the civilian world.

“I just think I’m really fortunate being part of the Forces, that there’s so much more being offered than if I was in the civilian world. There would not be a HOPE program in the civilian world. There would not be the support that I have been given in the civilian world in comparison to the CF. I really appreciate that.”

Participants noted that it is of great importance for the CAF to meet the immediate needs of the family after a loss. Otherwise, if the families face any major issues or challenges or fall through cracks in the system, it may detract from their ability to focus on grieving and their bereavement.

“I think, as far as we’re looking at a partnership with HOPE working with the military to figure out what the needs are, we can’t be as effective in dealing with the core grief if there are other things that are triggers that are distracting them. So I think that’s really important – that their basic needs of information and things going smoothly needs to be met before they can allow themselves a time to open up and really talk about their emotions and their grief and their feelings.”

In particular, feeling supported by the CAF and having access to services and resources for at least the first year was identified as a critical need of the families. However, some confusion was noted with respect to what services may be available to bereaved families, such as resources like grief counselling or therapy. Ensuring that families can easily find information regarding their entitlements and the availability of services and resources that would assist them was therefore recommended. Participants further suggested that additional funding be made available so families could be offered greater access to services and resources, such as civilian counselling or therapy. Despite the potential extra associated costs that the CAF would incur, it was thought that offering such additional measures to the individuals in need would have a positive impact.

4.1.1 The Designated Assistant (DA)

In many ways, the role of the DA is one of the most crucial components for the bereaved families following the death of a CAF member. In part, this is because they are generally the gateway to introducing HOPE to the families. Additionally, one of the most important roles that they play is to help ease the burden of the administrative requirements placed upon the family after a death. The role of the DA is especially vital if the military world is one the family is not familiar with, which is often the case with the parents of fallen members. However, for all families affected by a loss, it can be overwhelming to navigate the administrative requirements, many of which are immediate and place great demands on the families, for example, in the case of making funeral arrangements. Furthermore, as stated earlier, grief can also result in memory loss and difficulty concentrating, which can make handling the many details overwhelming and confusing. As such, the DA is an important resource made available to the families who can provide them with much needed support and guidance. By easing the administrative burden, the DA can help enable the family to focus on their loss and on processing their emotions.

Many participants credited the DA with helping them to get through the immediate period following the death. They recognized the key value the DA played in providing them with crucial and much needed support during a highly emotional time.

“When you get the knock on the door, you are in total shock. You don’t know which way is up. And thank heavens the military has people who are AO’s and, for the most part, most of them are very effective. We were very fortunate, in fact, to have I think an absolutely super AO. And he practically carried our whole family on his shoulders....had it not been for that AO and the entourage that was supporting him, I’m not sure how in the world we would have ever gotten through it. I think we had an ideal Assisting Officer. He really looked after all the little things...we were strongly supported in all this, and that is a plus because you are so caught up in your emotions, you honestly don’t know where to turn. You think only about your pain and about your son. At any point, over the whole period we were supported by our AO...when it was happening, during the most difficult period, no, we had people there who took care of us. They handled all the paperwork, all the problems, it was the Canadian Army, through our AO, who took charge of all that and we really just had to let ourselves be in mourning.”

Despite the official capacity of the DA to help ease the administrative burden on the family, several participants noted that their DA also provided much emotional support to them. These DAs guided them toward a better understanding of the military and insight into military life. In such cases, the DA filled both a practical and an emotional role for the families.

“The DA was there for administrative support but he was there so much that he gave us more... he explained to us how it worked. We didn’t know much – at that age, they don’t tell us much. So he told us a lot about how things had been and all that, on the inside. So that was a big support for us, to understand that...he explained to us many things we didn’t know about ...and then he became a friend.”

In some cases, the DA was found to serve as something as a link to the CAF for those participants who felt like they had lost their connection to the military community after the death of their family member.

“It’s the disconnect from the military because I lived the military life for so very long. Again it comes down to the AO’s I had that I’m still in touch with – I wouldn’t have any connection at all with the military, apart from the friends we made....that’s the hardest part, I think, is that disconnect.”

In contrast, there were some participants who had a somewhat negative experience with their DA and did not feel they received the support that they needed. One participant, for example, recounted how her DA sent her the bill for the remainder of her son’s rent for the month in which he was killed. The participant attributed this error to the DA’s apparent lack of experience, and reported further frustration in trying to get it resolved.

“And she [AO] was helpful in her way, but...she was thrown into the position and she’d never done it before, so that’s most probably why she didn’t know...but later on, as it went by, I would try phoning her and there’d be no answer and, you know, two weeks go by and I’d phoned the Master Corporal and he said, “Well, ma’am, we do have other jobs to do” ...and she didn’t know what she was doing. As I said, it wasn’t really her fault that she’s telling us one thing and doing another.”

Some participants offered suggestions as to how the role and responsibility of the DA could be improved so that the needs of the families could be better met. For example, it was suggested that the DAs be clearly informed about the potential limitations of the family members to comprehend and retain all of the information being provided to them.

“Don’t forget, you’re in shock and people will tell you things...you don’t retain a whole lot. And one of our big messages to [AO’s] is just because you are there and you tell a family something, please don’t assume that they understood what you said — because they will nod their head yes, they’ve heard you and they understood, but they don’t. They’re in such turmoil that probably only five or ten percent of what we’re being told sinks in. Now, for example, I think maybe some AO’s have this check-off list and they say, “yeah, I’ve informed them of the HOPE program”. Well, that might have been a 30-second blurb and it went right over the person’s head. It’s kind of like drinking from the fire hose. You get everything at once and can’t really make sense of it.”

Some confusion was also found regarding the role of the DA. As the family of a fallen member may include both parents and a spouse, it may sometimes be confusing for them to understand whether the DA provides support to more than just the immediate Next of Kin (NOK). For example, there were questions surrounding whether the DA can also provide assistance to the parents, even though the spouse would be the official NOK.

“Some AO’s...are great. They’ll follow up later on, they’ll call back, or they’ll come visit or whatever. And that’s great because a lot of them [families of the fallen] need it. Now, we didn’t have that because, when [my son] was killed, [my daughter-in-law] had the AO. So in my head, that’s what I thought – he was hers and hers solely. I realize now he was for the whole family...but she was the one he went to all the time and the rest of us were kind of on the outside. When decisions were made, [daughter-in-law] did include me and my husband and we did things together so that didn’t create any problems or anything. But I can see where it would be a problem if the family were devastated, didn’t know much about the military, didn’t know how things worked, or if there was trouble in the family.”

The time frame in which families have access to their DA in an official capacity was mentioned by some participants who generally considered the 90 day window to be rather limiting. Many families continue to have pressing needs and matters that need to be sorted out that extend beyond this time frame (e.g., taxes, pay, or housing issues). Many also commented that they had formed a close and trusting relationship with their DA; although some personal contact often continued beyond the official period of assignment, the end of the DA’s formal engagement generally meant their DA was no longer available to offer the same level of personal support. Participants further acknowledged that they had different needs at various stages, so their immediate needs may be very different than what they would require after a year or several years.

“The AO will remain involved with the family for three months and, after that, he will be discharged. But still, there is paper to fill out. So I think the AO should stay involved more than three month...to still be able to keep in touch with the family. I know the IPSC will take over after that period but, the thing is, when the death occurs, you will create a link with the AO and that link is not created with the IPSC [Integrated Personal Support Centre]. The manager, after the AO, is not involved with the family...he doesn’t have that connection with the family because he wasn’t there right away when the death occurred. So this is the [person] you will trust and I think that will bring lots of changes and we don’t need more changes than we are experiencing. I think three months is too short. I have a peer, she lost her husband and her AO is out of the picture because it’s been three months already...and now she asked me the question about where do I go for my taxes for the year. She didn’t know. There’s a pension...I don’t know what to do and she was totally lost. But if she had still contact with her AO, it will have been much better for him to direct her to the appropriate person.”

It was also found to be stressful for families when they had to deal with changes in the DA assigned to them during this time frame, such as when the DA was posted or was sent on training or assignment.

“And he was posted – he had a course so he was really gone. He left and then [another AO] took over....it was kind of like the Army was cutting me loose, sort of setting me aside...I understand that he had commitments, but when you choose someone, it would be better to take someone who’s going to be there for a good four months, who’s not going to be posted or go on a course in the next few months....we didn’t have enough time before he had to go.”

4.2 Challenges for the families

The families of the fallen often face a host of challenges after the death of a CAF member. These difficulties are generally independent of and outside of the mandate of HOPE, but their impact upon the families can limit their ability to fully engage with the program.

4.2.1 Being informed

One of the key themes that emerged in the interviews was the issue of families wanting to be kept informed and given access to information but experiencing reluctance or pushback from the military in providing this access. Many participants indicated that there is a real need for families to know the details surrounding the death of their loved ones, such as through an investigative report, an incident report, a Military Police report or some other official documentation. Some participants discussed feeling as though they are sometimes cut off. Not being granted access to this information can cause stress and lead to delays in their grieving process. The perspective of participants was generally that the family should be given the choice in terms of what information they receive and when, rather than the decision being left up to the military to make for them.

“For example, asking for the autopsy reports. I had difficulty getting that as well. And when I said I want to get the autopsy report, the question was “Why would you want that?” Well, it doesn’t matter why I want it, I want it...this tells me what happened to my husband. I’m entitled to that. Whether I ever read it is a different story. I want it because I want it and I’m entitled to it. And they didn’t like that.”

“Some people are looking for answers. I was looking for answers...okay, so [my son] got killed. So I asked about six times what happened...there’s nothing that is not clear about that, but what I asked was – “there were other vehicles, right? Who got to him first? Were they dead right away? Did they treat his body with respect like or just throw it in bag and take it away?” Those are the answers you want. I wanted [to be] walked right through the whole thing. They figure families don’t need to know that because they’re not strong yet. That should be left up to the family. If they ask, they should get the right answers.”

A refusal to be given the requested information was often perceived as the military taking too much control away from the families and taking away their decision as to what is right for them.

“This is a really, really personal and graphic example, but I asked at the very beginning... what the state of my husband's body was in at the end, and what did I have of him when I would receive the ashes. I was not given an answer, and I was not given permission to see anything. I was not given permission to understand...and it was exactly what I predicted at the time – they're saying no, but what they're really saying is no at the moment and eventually they're going to slap me with it years down the road. Now is when I want to deal with everything that I'm going to deal with, now is when I'm ready, now is when it's on my mind and I'm braced for it. Sure enough, I found out [worst fear confirmed] years later, after I had asked for it. So that's a really terrible example, but it's a perfect example of how the military is taking way too much control, deciding what it is that family members need to learn and not need to learn, instead of letting each person decide individually. It's not the military's responsibility.”

It can be difficult for the military to navigate between meeting the needs of the families, including their desire for full disclosure of information, and the organizational need to consider matters of security, confidentiality and due process. By not granting families access to the information that they are seeking, it can create some tension between the family and the military. This may lead to feelings of distrust and the perception that the CAF is not acting in the best interests of the family. This was particularly the case for some participants when a Board of Inquiry (BOI) was involved; for organizational requirements, the findings are often confidential and kept from the public, including family members. However, this can result in negative perceptions of the BOI process and the military itself.

“The thing that I think concerns a lot of the people in HOPE is the poor families who have had a suicide in their family or some accident that needs investigation and has to go through a Board of Inquiry. A Board of Inquiry to us civilians is almost like a boogeyman. We don’t understand it. It frustrates the living hell out of us. We can’t understand why it takes so long. You’ve heard the expression “perception is reality” and I would guess that the perception that most non-military families have is Boards of Inquiries are cover-ups. ... There’s an extremely negative perception in people’s mind about they will never hear the truth out of a Board of Inquiry. Because it’s cloaked in secrecy and military jargon and it’s something that we civilians don’t understand. And I don’t think the military understands how confusing this is to civilians. There’s my perception — again, perception — is that there seems to be a big wall of secrecy between the family and the military when there’s a messy kind of a situation.”

Despite their expressed frustration, many participants did give the military the benefit of the doubt. They noted that the CAF is a large organization with many competing priorities.

“I understand more than anybody else that it’s a big process. I definitely thought I would have had answers by now but....my goodness, that’s probably little compared to all that the military has to deal with, I can’t even imagine what every man and woman – all over the world – has to deal with but, to us, it’s important....I always think the Department of National Defence is huge and they have way more important things to do...it was, I assume, my role to call so I just thought I’m not going to bother them.”

As well, they expressed the possibility that the military acts on what it perceives to be their best interests in not disclosing information to the families as a way of trying to protect them. However, the overall concern expressed by participants is that not having access to information may serve to delay their grieving process or healing; that the time and energy required to seek out this organizational awareness becomes an additional burden that may detract from their ability to heal.

4.2.2 Need to self-advocate

A feeling shared by many participants was that they needed to repeatedly advocate on their own behalf to get access to information from the CAF. Many participants noted that it was important that they feel connected to the CAF and for events recognizing the service and sacrifice of the fallen member to be communicated to the families. However, in some instances, they were required to continually seek out this information. Frustration and disappointment was expressed in having to continually follow up because the information is not being provided or made easily accessible to them.

“At some point, out of frustration, we managed to contact somebody. We’re never sure in the big hierarchy of all the boxes we’ve contacted the appropriate people but I managed to speak to somebody. He said our name was not on the list in terms of to contact people and so I said “can you please add it?”, then that person asked “to what extent do you want to be invited? To receive information?” I said, “tick all the boxes for us. We want to receive everything”...we’re constantly searching. We find a little piece of information and we send an e-mail and we do a lot of searching. We connect the dots. We call. It’s been a lot of work... in the end, because we made such efforts, we’ve been part of a lot of events. But because of the frustration we’re constantly missing something, is there something that we’re not aware of?”

The process of tracking down information can be rather confusing for participants who are unclear on the hierarchy or structure of the military. It can also be difficult to determine the appropriate point of contact for their needs. Many participants described a complicated process of trying to get information and subsequently being referred to multiple people and bounced around the organization. As well, some mentioned feeling intimidated about talking to the higher levels of the military chain of command, and were unsure as to when it was appropriate for them to speak up.

“...but then that gentleman retired, so I’m still waiting on all this information that I thought that would come. I called or emailed the person here and she gave me a number to call the person in Ottawa, so I called him in April and he said that it was still on somebody’s desk there in Ottawa and that he would be on holiday, to call in August. So I had on my calendar I was supposed to call last week, but I haven’t called yet, just to see where this report is...I’m just so unfamiliar with talking to the higher up people, it kind of intimidates me a little bit...”

“That was something that was a little bit difficult in the sense of when things went wrong, administrative or otherwise, to know when is it okay for me to speak up and not, and who do I speak up to, and the chain of command. All those sorts of things that you would know as a military member, I didn’t know as a civilian, not having my husband to ask.”

Participants who took an active approach to advocating for greater contact or connection to the CAF often generated a positive outcome. Although their self-advocating paid off, these participants still suggest that the seemingly passive stance that the organization has taken in some cases should be re-examined.

“So when we went to [base], we said to them, “this isn’t right because we’re left out, and we want to be involved” and they said “oh, that’s all we needed was for you to ask to be involved”, and then they have been involving us ever since...but they said “we can’t just go and scoop you up; you have to come to us”. So I’m glad that we did...the people from [base] have been very good to us...I feel sorry for the people who are just left hanging. I knew I was one at one point. And I would have remained that if I hadn’t pushed for it...It was just a matter of going to the office and saying this is – “this sucks”...I have nothing bad to say about how we’ve been treated. So it’s asking but not everybody will do that. Not everybody will just say we’re just going to go to a Command and talk to them.”

Some participants further noted that it can be very difficult for them to take that initiative and reach out to make the first step in establishing contact or to ask for more involvement. The preference is for the military to be more proactive in touching base and ensuring that the needs of the families are met, instead of leaving it up to the families to continually advocate on their own behalf. Participants also noted that many families will not take that step and will subsequently end up feeling alienated and isolated from the military community if active efforts are not made to involve them.

“At the beginning, you have lots of attention, from VAC [Veterans Affairs Canada], from IPSC, AO, but after a while, they think that you're okay, but you're not....I would have liked that, after two years, someone contact me back to make sure that all was done, that I didn't have any issue...I know when you need help, it's always better to grab the phone and call. But sometime we hope that someone will do it because we just don't have the energy to grab the phone, and that someone calls us. I think the family will appreciate that maybe after a year, when everything is done, that someone calls back. Or they receive a letter just to make sure that they don't have any questions, or if they need some support or stuff like that, just to do a little check-in....only the HOPE program will do it.”

4.2.3 Overwhelming administrative process

As previously noted, many participants discussed how overwhelmed they were with the process and administrative requirements in the aftermath of their loss. There could be much confusion in determining their entitlements and in navigating the bureaucracy, such as identifying the appropriate points of contact, deciphering acronyms, and understanding the chain of command.

“I did ask whether our case was still part of the military or am I not part of the military. I asked whether there was any kind of ID card, the resource centre has ID cards for the wives – am I entitled to that? Am I entitled to use the resources? Am I entitled to still take a French course? A lot of people didn't know. I do have the CF appreciation card now. I'm kind of confused as to what I'm entitled to and what I'm not entitled to.”

The challenge for families in sorting out the administrative details is compounded by their emotional state.

“That first year was just a fog. People might have told me things, I don't remember. I don't have paper documentation. I do have a lot of paperwork upstairs, to tell you the truth. I get it out and I just cry and put it away so maybe I do have information up there, I don't know and that's my fault. It's just emotionally it's very hard. It's very daunting, overwhelming. Emotionally you're just not 100 percent there to answer all of the questions.”

“At that time, we were caught up in the grief, in the sadness. So you can imagine how difficult it can be to manage, whether planning the funeral or just filling out forms for the Canadian Armed Forces, listen, – it's beyond words. We weren't mentally or psychologically capable of managing these things. We were in pain. So we really weren't in a position to deal with it. Even with help, I found it extremely difficult, when I had questions – I was at sea, one might say...”

For some Francophone participants, language was identified as something of an issue. They noted that experiences of being overwhelmed by the administrative process could be magnified by feeling that they were unable to get sufficient access in French.

“At one time, I had questions about the severance pay. I didn’t get any answers about it, it wasn’t clear. When I tried to contact someone in Ottawa, sometimes there was no service in French. That sometimes made things more difficult. When asked questions about my finances or about administrative details, I always found it easier in my first language. So when I had to use English to speak about those matters, I always had more difficulty. So, in those cases, there might be some room for improvement. There are some services, yes, when we call a certain number, you can get service in French, but for some other things it’s not that easy. So that would be an area for improvement for Francophones. I couldn’t understand what was going on between the two levels of government with regard to taxes. I was trying to get answers, but I didn’t have access to a Francophone who could give me the answers.”

4.2.4 Relationship to fallen CAF member

Several participants commented on the differences in their experiences due to the nature of their relationship to the fallen CAF member. The role of a spouse as compared to that of a parent was mentioned as being a factor that the CAF needs to take into consideration when providing support to families of the fallen. The nature of the grief of a parent and of a spouse is different and, as such, the needs of a parent are in some ways different than those of a spouse. The participants’ comments illustrate a need to remain sensitive to the specific circumstances of a family, both in terms of administrative details and in maintaining their connection to the military community.

“I tell you, the first thing that I picked up on as I’m sitting with widows, listening to each one’s story – I have a daughter-in-law. My son was married – I have no idea how she’s grieving. But I’m sitting there listening to these widows, it gave me a better perspective and understanding of how my daughter-in-law must be feeling because she’s lost her husband, she’s lost her friend, her support. And yet, she’s probably thinking in her own mind, what do I do with the rest of my life? I’ve got children to raise, I’m on my own. How do I meet somebody again? These thoughts would go through a widow. And listening to these girls tell that story, gives me an appreciation of what my daughter-in-law was going through.”

“Another really difficult thing about it is that, at the one moment in life when I have to deal with the hardest thing that I’ve ever had to deal with, I don’t have my best friend to go through it with me. So that was something I found really difficult. Because it can be two different things for people. For example, watching his parents, the worst thing that could ever happen to them was losing him, from a different angle though, because it was losing their son. But they had each other to support each other through it, and so that’s something they definitely recognized – after many years, realizing that, even though we lost the same person, it’s not the same loss. It’s very different. So that, for me, was difficult because it’s sort of two bad things, and I’m going through the worst thing ever, and I don’t have my best friend to go through it with me. So that was really difficult for me.”

As discussed in Section 3.4, the HOPE program factors in the relationship to the fallen member when matching volunteers to peers. This consideration was appreciated by participants who noted that they may not have felt as understood if connected with someone who did not have a similar relationship. The nature of the relationship also has broader implications for how the CAF defines and responds to the families and in terms of the NOK. In particular, participants noted that parents could often be left out of the process or feel disconnected because they are not kept as involved when there is a spouse as the NOK. Acknowledging all family members was recognized as a complicated endeavour for the military.

It was noted that it would be helpful if the military also kept the lines of communication open with parents to help them feel as though their role is also acknowledged. Some parents commented that they felt invisible and that they did not feel their relationship to the fallen member was appropriately recognized by the CAF. This feeling could become intensified in instances where the parents and the spouse are or become estranged.

“I guess that's one of my biggest problems, and also with a lot of the people that I met who had children who were married – it's like you were never a part of their lives, you've been totally cut off, and everything is through the spouse. And some of the stuff they won't do because you're not the next-of-kin. I understood how abandoned I felt in a lot of ways when I had this boy for 30 years and then all of a sudden nothing... it was like you went home and – he'd never existed. But there were all kinds of events going on and....you don't always get that invitation to things – because that would go to my daughter-in-law. Well, a year after, she had decided we only had contact through the Internet and we would see the children, but that was it. So it was like another loss...then we're cut off not only from her but from all the things that our son was interested in.”

4.3 Maintaining a connection to the CAF

One of the key themes that emerged from the study is the importance of maintaining a connection to the CAF for some participants. There is often a need for the family members to feel that the military has not forgotten them and that they are acknowledged by the organization. While the HOPE program fills an important void and provides a community of support amongst other bereaved families, some participants also wanted to feel a more direct link to the military. Some participants noted that a strong tie to the CAF has helped them. Many participants discussed being touched by gestures that were made in their honour, in recognition of the sacrifices made by the fallen members, or by instances when other military members reached out to them informally. Even among participants surrounded by a strong support network of family and friends, it was found that the military family was an important piece for them as they dealt with their loss.

4.3.1 Still a part of the military family

The desire to feel as though they were part of the military family was not just observed among military spouses but was also found among some of the parents. This included some parents who did not have any previous connection or role in the CAF.

“We did become very attached to the military family. Since we lost our AO so to speak, we had the HOPE program and then got involved as well in volunteering for that

program. So, we became part of the military family. And we're finding it difficult to detach ourselves from it, honestly."

"I can just tell you how much I appreciated the service, the support I received from the Canadian Forces, the kindness of the people who contacted me, not to mention their competency, their sensitivity, their dignity too. We felt the respect, we were really supported, and I will be eternally grateful for that. Listen, there's a real need there for families, and it's a major plus in the healing process to have support like that because it's unthinkable for people to be left by themselves to grieve a loss like that. And the Canadian Armed Forces, it's one big family. The families really, really need support, follow-up and it's especially important to have support in the first two years following the death and to put services in place."

For those participants who felt that they were still strongly connected to the military family, it was found to play a significant role for them. It was identified as something they valued and which helped them in their grief. On the other hand, for those participants who felt that they had either lost or not gained that connection to the military, it was seen as a void and a lost sense of belonging. Many expressed the desire to continue to be contacted by the military and by other CAF members.

"And I must say that, even after all these years, I still get a card from the base. The base still keeps in contact with me, even though there's new COs, and the new CO I've never met, but we still get a Christmas card...things like that, which are really unique when I speak to other people say "hey, we don't get that"...now, they happen to be in another branch of the Forces but [they] have been really good. So there's been a lot of contact, and there still is."

"I wouldn't say after the AO's left, I don't think in the last four and a half years that we've ever really had much contact. I mean, we've gone to a few functions that they send you a letter if you want to go to the changing of command or whatever or a dinner function and we usually go. But nobody's ever phoned and said, "How are you doing? Things going well?" and when [my son] first got killed and after everybody left, it was about say a month or two before I got any phone calls...that's all I wanted, was somebody from the military to phone me and ask how I was doing. And they never did. So that's a little bit of a falling through the cracks right there. I understand they're busy, right? But, I mean, [my son] gave his life."

In general, the perspective shared repeatedly by participants was the notion that the military is a family and, for most, that it is a community with which they want to belong and feel connected after the loss of their military family member.

"When they say the CF is one big family they really meant it and I really saw it. They really came out and helped out. People offered to do all kinds of things. That was the military family. I'm still seeing it. As I said, it's the military friends that keep me here, that were so supportive and have become my family. It's all through the military. I'm fortunate that way."

“For me, the Forces are my family. They’re the ones who saved me. For my whole life I’ll thank the Forces for doing that because if they hadn’t been there, I wouldn’t be here today. They saved me.”

4.3.2 Preserving the military family member identity

Military spouses talked about how they experienced multiple losses with the death of their partner. Not only did they suffer the loss of their loved one but they were also forced to confront the loss of their identity and role as a military spouse, as well as the loss of the future that had been planned together. Some participants commented that, as they had already suffered other significant losses, such as plans for raising a family together or for retirement, they did not want to have to grieve the loss of the CAF family as well. They pointed out that they are not just grieving the person, but they also have to grieve what that person represented to them.

“Because you also have your career, moving from place to place with your husband and it’s not always available for you to continue your career, so the military is your family. All of a sudden you feel cut off. It’s not a choice given as to whether you choose to or not. It was an important part of our lives for 24 years.”

“That’s what the Army is. It’s a family, but the spouses, we’re also there, and people might not see it, but we’re part of the family.... it’s as if I’ve lost that sense of belonging to a family.”

“But the HOPE program – I really appreciated it, but really, what’s missing in all that is maybe meeting other military wives who’ve lost their husbands...the Army is a family, but for me, it was as if I lost the family. It’s strange, because it was my life too.”

Participants who felt included and connected to the CAF often indicated that this experience helped to meet their needs as they continued to process their grief and that it was an important part of their healing. They shared the perspective that the CAF must be aware and sensitive to this need of the families to maintain a connection and for the military to do what it can to best address it in order to better support the families of the fallen.

“It helped me through the grieving. Everybody grieves differently and me keeping busy and the contact with them [CAF], it just kept me like part of the family. It was just like part of my son. I’ve just made contact with many people, and it’s been good for me, and keeps our family busy.”

“Another thing is I think the military family as a whole needs to understand that a lot of the families – in order to have closure – they need to maintain some kind of connection with the military family through their process of grief which may be a year later or two years later. For example, I’m seeing a lot of the parents who have lost a son or a daughter as a soldier in Afghanistan, and then suddenly they want to keep a connection in order to find out information about how the unit is doing...that’s helpful for them in their grief.”

Participants discussed that they often felt a special bond with the other CAF members who served with their family member. They observed that maintaining that relationship helped them feel connected to the military, as well as to their lost loved one.

“So you still need that little bit because you don't want to let go. Because if you let go, that means the person you've lost is completely gone. So you need that little connection – even if it's a phone call – you do. So that's one thing I'm grateful for, that I still have connections, mostly now through my son's buddies, like the crew that were with him when he died. They e-mail me. They're like my boys.”

4.3.3 Commemorative events and ceremonies

One important need of the families identified by participants was a desire to be contacted and kept informed about relevant events, ceremonies or any commemorative act that recognizes fallen CAF members. The sentiment was often shared by participants that they did not feel that they were always kept as informed as they would have wanted.

“I would like to have more on what's going on. I feel as though I'm the last to know.”

Some participants also felt as though, with the passing of time, they were receiving less contact or involvement in events or ceremonies. A great deal of significance was often placed on such events and the way in which it was acknowledged by the military could be something of a source of disappointment for some families who may have had a preference in deciding upon the location or planning of these important and symbolic events. However, this preference can sometimes conflict with how the CAF has chosen to acknowledge the event or ceremony, which can lead to tension for the families.

“[I was told] that every 11th of November they would have a ceremony here but last year, there was nothing. I was very disappointed...for me, it's important to have a celebration here... there were days when I might have needed some guidance to be told sometimes, “Hey, we're still here”... but definitely November 11th is very important to me. That's why I'm really adamant that there should always be a Remembrance Day [celebration] here. I would like everyone, regardless of the weather, to be there every November 11th.”

When asked about the needs of families and how they could be better addressed by the CAF, many participants stated that family members should be kept better informed about the events pertaining to the fallen members, without them having to actively seek out this information themselves. It was found that participants really valued being notified and involved in any events or ceremonies, particularly when a special effort was made to specifically invite or recognize them. Such actions helped to contribute to positive perceptions of the CAF and also helped meet the needs of families.

“We want to learn about events taking place for fallen soldiers...whether it's a monument that's being unveiled, whether it's something happening somewhere, a plaque at a legion or a gift, there's been such wonderful activities. It's all about learning about that ...[we met] the mother of a fallen soldier, she said “have you been invited for the unveiling of a monument at the military base? It's going to be a big monument. It's going to have all the names of all the soldiers. There's going to be a big ceremony. Have you been

invited?” The answer was no, we’ve never heard about this. She had the invitation in her purse and showed it to us. As soon as I got back home I googled it and made sure that we were there for Remembrance Day to attend the event. To me, this is what’s lacking. This is what I personally was looking for.”

Even the CF appreciation, I wasn’t notified, an email saying there’s a CF appreciation going on. I really feel disconnected that way. I don’t know what’s happening...I don’t hear what’s going on. As I say, the CF appreciation day thing...to read it in the newspaper afterwards, thinking ‘oh, I didn’t know’...”

The importance of keeping families better informed and making them feel involved and included was stressed by many of the participants. However, from an organizational point of view, participants did recognize the extent of the challenge for the CAF in ensuring that all those affected by a loss were kept informed, especially given the unique circumstances of each family. Some participants noted that the military has shown improvement in this regard, but reiterated that they must continue to make informing families of the events and ceremonies commemorating fallen members a priority.

“So I guess what I’m trying to say is when a family’s in that first mode of their grief, the military has to be very conscious of the different dynamics that a family is going through. And there’s no easy answers...they have to deal with the spouse, next-of-kin, number one, her wishes. But there’s a mother and father...the dynamics of any family, depending on the circumstances, there’s divorces, you name it. But the military – they’re doing their best now, they’ve improved but they have to be very conscious of the sensitivities of the family members. And I don’t have the answer. It’s just that it’s a learning process...and I hope no other family is treated the way I was treated. But it happens. It’s not an easy task.”

Participants also noted that the CAF has a tendency to make contact with families overly formalized. They suggested that just keeping in touch with families through informal channels can also provide them with that sense that they have not been forgotten and that they are still connected to the CAF.

“I think the military’s come a long way. I think there’s still a big need in terms of how they help people. It’s a whole different world, the military versus civilian life. And I just think they made that move to make it closer but I think there’s still a ways to go...especially the things I hear from certain people, peers that I work with, and my own peers in the HOPE program – is the need of more communication. I think that’s the big thing that has to be addressed....sometimes I think it gets pretty formal, instead of an informal contact and a consistent contact, an e-mail to say we’re going to do this, and then you hear nothing, then you have to keep bugging people...– I wouldn’t give that up for anything. It’s so uplifting.”

4.3.4 The Next of Kin (NOK) trip

Since 2007, the CAF offered opportunities for NOK to visit Afghanistan. Several participants expressed how this experience had great significance for them. Much appreciation was expressed toward the CAF in providing them with this opportunity.

“And another thing too that I will say [about] the next of kin trips: I saw two dads – my husband being one and a dear friend being another – on our next of kin trip, when we landed in Dubai, you could see them – their smiles were coming back. When we landed in Afghanistan and [when] we left Afghanistan, those two guys were like totally different people. They were almost back to normal.”

Although a highly emotional experience, the participants characterized it as an extremely meaningful milestone for their grieving process. Additionally, many participants indicated that their visit to Afghanistan seemed to have an effect on the CAF members and their allies still deployed there, further reinforcing the gesture’s importance to the grieving process of the entire military community.

“...there was a table off to the side and some Afghan National Guards were there. And this really had an impact on me – one of the guys caught my eye and, as I was walking by, he put his hand up to me...and he got up and shook my hand. So that really touched me. I have no idea what his name was, but I really appreciate that gesture he made in respect of our sons. I don't know if he knew my son, but he certainly knew that we were parents of a fallen soldier. Very symbolic. So that's what Afghanistan did for me.”

“Yeah. It was really nice...they put it up on the board or whatever that these families are coming and they’re looking for escorts for the families and one of my son’s really good friends was over and we had kind of lost contact with him...[my son’s fiancée] got an email from him and he said, “Oh, yeah, I’m going to be their escort when they come in”. It was a really, really great experience and someday I’d like to go back.”

4.4 Conclusion

Overall, it was found that there is a clear need amongst families of the fallen for both practical and emotional support to be provided by the CAF. As two of the participants succinctly stated, *“We didn’t sign up. We didn’t volunteer. We got drafted,”* and *“I keep saying it's a life sentence”*, it is clear that the loss of their military member has a profound, life-altering and lasting effect on bereaved families. Many participants recognized the challenges that the CAF faces in providing support to military families, especially given the range of circumstances of each of the families of the fallen. Nonetheless, most participants articulated the significance of their connection to the broader military family as a key source of support. They emphasized the need for open communication, especially as it pertains to information about their fallen family member, as well as remaining informed of commemorative events and ceremonies recognizing the service and sacrifice of all fallen members. It was suggested that the military needs to be proactive in their efforts to make families feel included and informed, and that informal communications such as personal telephone calls or other messages can have an important impact on a family’s healing.

In terms of the administrative processes with which families are faced, the overall feeling shared by participants was that of being overwhelmed. This was especially the case in the immediate aftermath of their family member’s death. The participants characterize their DA as their first line of defence in dealing with the administrative requirements, as well as other details such as funeral arrangements or planning a move. Despite the high importance the participants placed on

the role of the DA, individual experiences with their assigned DA were mixed. Many suggested that additional training for DAs could be considered, particularly as it relates to helping families identify the proper resources as their needs evolve. Several participants also noted the bond that was formed with their DA, but described the 90 day assignment period as too short. Some suggested this limited access to the DA could be experienced as another loss for families, occurring during a critical time in their bereavement.

Finally, the participants clearly articulated the importance of the broader military family; not just as a source of support as they struggle with their loss, but to their own sense of community and identity. For many of the families of the fallen, the most meaningful thing is to continue to feel that they are connected to the larger military community.

5 Discussion and recommendations

The purpose of HOPE is to provide social support assistance to families that are affected by the loss of a CAF member. Overall, the families interviewed through this study agreed that the HOPE program achieves this aim. Tremendous importance was placed on the unique nature of the support provided by the program, with participants identifying significant value on the role of shared experiences and community of support gained through the program. Indeed, many believed that without HOPE they would still be struggling to a much greater extent.

Although the feedback from participants about the HOPE program was overwhelmingly positive, it was found that the needs of the families of the fallen are broader than what HOPE is designed to address. The findings presented here illustrate the experiences and challenges of the families of fallen CAF members, who must struggle with their loss while living in both civilian and military worlds and while dealing with the necessary administrative and organizational details that accompany a CAF member's death. Overall, it was found that there is a clear need among the families for both practical and emotional support to be provided to them by the CAF.

It should be noted that a limitation of this study is that families who are not connected to HOPE or who are far more removed from the military community are not represented. It is therefore difficult to determine whether the experiences and perspectives of these families differ significantly from those of the study participants. Further research that included families of the fallen that are not involved with HOPE would be required in order to assess whether they share the same challenges and experiences.

5.1 Recommendations

Ultimately, the various forms of support provided to families of fallen military members, including the HOPE community and from the military community more broadly, are considered extremely valuable and are much appreciated. However, the participants also had a number of suggestions to address some areas where they felt the support provided could be improved. Recommendations one through five are focused solely on the HOPE program and recommendations six through nine pertain to more general support and the role of the CAF in the bereavement process.

1. The findings demonstrate the difficulty participants experience in recalling and retaining information in the immediate aftermath of their loss. It is recommended that information about the HOPE program be provided to them more frequently, over an appropriate period of time. Additionally, it is recommended that information about the program be made more readily accessible, to ensure that those who have suffered a loss are knowledgeable about it and can easily find a way to get in contact and request involvement.
2. Participants emphasized the importance and value of the training sessions and presentations that they have received as HOPE volunteers, on topics such as mental health, suicide awareness and grief counselling. A common suggestion was to increase the frequency of these types of training sessions, and to offer similar information sessions

to families more broadly (i.e., not just to volunteers), in more locations across the country in order to maximize impact. It was also noted that, if these sessions were offered to a wider audience, this would represent an important potential avenue for reaching more families of the fallen by the HOPE program. It was acknowledged, however, that implicit in this recommendation is the need to increase the resources allocated to the HOPE program.

3. A related suggestion was made to explore the possibility of organizing additional meetings or retreats for families of the fallen, both within and outside of the HOPE program. For gatherings organized within the program, the possibility that it include both volunteers and peers could be explored as the range of participants identified much value in opportunities to connect with other families of the fallen. With respect to outside the program, there are families of the fallen who have not been associated with HOPE. It was noted that, if these families do not get involved with the HOPE program, then they may not have the opportunity to benefit from the type of social support provided. Exploring ways to help connect these families should therefore also be considered, while respecting that there are individual differences in need and desire for social support.
4. The possibility of allocating more resources to expand the HOPE program so that it may also include the siblings and children of fallen CAF members was suggested as an area of consideration.
5. Overall, maintaining strong support of the HOPE program and ensuring that it continues as the need of the families of the fallen will remain in the future was suggested by many participants.
6. Both the peer and volunteer participants regarded the role of the DA as the key to mitigating their administrative burden. However, they noted that the 90 day period of assignment is often insufficient for their longer-term needs. It was recommended that the period of assignment of a DA to a family be re-evaluated. Furthermore, selecting a DA that would continue to be available throughout the duration of the period of assignment would help to maintain consistent support for the families. Additionally, it was suggested that families be given a copy of a checklist that can be used when determining what resources or services the families need. As well, the feasibility of putting the HOPE volunteer in direct contact with the DA could also be explored as it may help to facilitate initial contact with a recently bereaved family, along with the provision of contact information for the available resources and services.
7. An overarching issue that many participants reported having faced after their loss is difficulty getting information from the military. This included access to formal documentation such as incidence reports, coroner's reports and official death certificates. In order to reduce any potential tension or stress developing between the family and the military, it is important that information be communicated to the families on a regular and timely manner. Furthermore, in instances where there are delays or an inability to provide information as requested, greater consideration should be given to ensure this is clearly communicated to the families. Ensuring that sufficient access to information and services is available in both official languages is also recommended.

8. Participants also reported a need to feel as though they are being appropriately notified about and involved in important events and ceremonies commemorating fallen members, and to maintain their sense of belonging to the military community. As such, it was suggested that DND/CAF maintain open, long-term communication with families of the fallen, both formally and informally. This may include re-assessing ease of access to key documentation and services, with clear links to the appropriate organization or department responsible (e.g., MFRC, IPSC/JPSU.); providing detailed information packages outlining organizational processes and key points of contact that they may reference later; and ensuring that families have easy online access to pertinent information and resources. Furthermore, the possibility of establishing individuals who operate as official points of contact across Canada for the families and who serve as a direct gateway for establishing communication between the bereaved families and the CAF and providing the families with access to information that they are requesting could also be considered.
9. An important point made by the participants is that the needs of a spouse of a fallen CAF member are in some ways very different than those of a parent. The CAF should explore ways to tailor their approach so that the support provided to families reflects their specific needs and make effort to consider the role of all family members who have lost a CAF member.

References

Director Casualty Support Management. “HOPE Program Volunteer Guide. Policies and Guidelines”. Department of National Defence, Ottawa, ON.

Grenier, S. and Darte, K., 2006. “Launch of the Bereavement Peer Support Component of the Operational Stress Injury Social Support (OSISS) Program”. Joint Briefing Note to Chief

“Military Personnel (Department of National Defence) and ADM”, Veteran’s Services (Veteran’s Affairs Canada). Department of National Defence, Ottawa, ON.

Richard, S., 2012. “HOPE Program Bereavement Peer Support Training Presentation”. Director Casualty Support Management. Department of National Defence, Ottawa, ON.

Annex A Consent forms

Purpose of the Study

The purpose of the research is to explore the experiences and challenges of bereaved Canadian Forces (CF) families and gain a better understanding of whether their needs are being addressed. During this interview you will be asked questions about your participation, experiences, and perceptions of the Helping Others by Providing Empathy (HOPE) program, about organizational and individual sources of support, and about your perceptions regarding the challenges and needs of bereaved CF families.

SSRRB Coordination Number

This interview has been coordinated through the DGMPRA Social Science Research Review Board (SSRRB), in accordance with CANFORGEN 198/08. Coordination # 1184-12F.

Participation

Your participation is completely voluntary and you may withdraw from the study at any time without any reprisal or affect your access to benefits or services. The interview will be approximately 1 to 1.5 hours in duration. The researcher will keep your responses confidential and will protect your anonymity in any reports or publications.

Risks

Due to the nature of the research, participation in the study will require that you volunteer or share personal experiences and information, which may cause you to experience some slight discomfort. You will not be required to respond to any question that you feel may cause discomfort and, should you choose not to respond, there will be no negative consequences for you. Appropriate measures will be taken to minimize your discomfort and you have been provided a list of referrals for your personal use should you experience a degree of unease during or after the interview.

Information You Provide

The information collected will be kept strictly confidential and your anonymity will be protected in any report or publication and no personal identifying information will be included. You understand that if you agree to have this interview tape-recorded that it is only for the purpose of allowing more accurate transcription of your responses and that your anonymity will be maintained. You are also aware that in order to further safeguard your privacy, your name will not be included on the transcription of the interview. All information derived from any transcription will be securely stored in a locked cabinet that is only accessible by the researcher at 285 Coventry Road in Ottawa, Ontario.

ATIP Considerations

You are aware that under the Access to Information Act, Canadian citizens are entitled to obtain copies of research reports and research information (including the database pertaining to this project) held in Federal government files. Similarly, under the Privacy Act, Canadian citizens are entitled to copies of all information concerning them that is held in Federal government files including research databases. Prior to releasing requested information, the Directorate of Access to Information and Privacy (DAIP) screens the information to ensure that individual identities are not disclosed.

Acceptance

Your signature on this form indicates that you 1) understand to your satisfaction the information provided to you about your participation in this research project, and 2) agree to participate as a research subject.

In no way does this waive your legal rights nor release the researcher, sponsors, or involved institutions from their legal and professional responsibilities. You are free to withdraw from this research project at any time. You should feel free to ask for clarification or new information throughout your participation.

Thank you very much for your assistance with this study.

You agree to have this interview tape-recorded Yes No

Participant’s Name (please print): _____

Participant’s Signature _____ Date : _____

Researcher’s Name (please print): _____

Researcher’s Signature _____ Date : _____

Objet de l'étude

La présente recherche vise à examiner les expériences et les défis des familles affligées des Forces canadiennes (FC) et à mieux déterminer si les besoins de ces familles sont satisfaits. Lors de l'entrevue, on vous posera des questions sur votre participation au programme ESPOIR (Empathie et soutien par des pairs offrant une invitation au réconfort), sur l'expérience que vous avez faite de ce dernier, ainsi que sur vos perceptions à l'égard du programme. Des questions vous seront également posées sur les sources de soutien organisationnelles et individuelles, ainsi que sur vos perceptions en ce qui concerne les défis et les besoins des familles affligées des FC.

Numéro de coordination du CERSS

Cette entrevue a été organisée par l'entremise du Comité d'examen de la recherche en sciences sociales du DGRAPM, en conformité avec le CANFORGEN 198/08. N° de coordination 1184-12F.

Participation

Votre participation est entièrement volontaire et vous pouvez vous retirer de l'étude en tout temps sans représailles ni répercussions quant à votre accès à des avantages ou à des services. L'entrevue durera entre une heure et une heure trente environ. Le sondeur traitera vos réponses en toute confidentialité et protégera votre anonymat dans tout rapport ou toute publication.

Risques

En raison de la nature de la recherche, la participation à l'étude vous obligera à vous porter volontaire ou à partager des expériences et des renseignements de nature personnelle, ce qui pourrait vous causer un certain inconfort. Vous n'êtes obligé de répondre à aucune question qui pourrait vous causer de l'inconfort et, si vous choisissez de ne pas répondre, il n'y aura aucune conséquence négative pour vous. Les mesures appropriées seront prises afin de réduire votre inconfort et on vous a fourni une liste de sources de référence à laquelle vous pourrez avoir recours si vous ressentez un degré d'inconfort pendant ou après l'entrevue.

Renseignements que vous fournissez

Les renseignements recueillis seront traités dans la plus stricte confidentialité, votre anonymat sera protégé dans tout rapport ou toute publication et aucun renseignement personnel permettant de vous identifier ne sera inclus. Vous comprenez que, si vous convenez à l'enregistrement de cette entrevue, celui-ci ne servira qu'à permettre une transcription plus exacte de vos réponses et votre anonymat sera conservé. Vous savez aussi qu'afin de mieux protéger votre confidentialité, votre nom ne sera pas inclus dans la transcription de l'entrevue. Tous les renseignements tirés des transcriptions seront conservés de manière sûre dans un classeur verrouillé accessible uniquement par le sondeur au 285, chemin Coventry à Ottawa (Ontario).

Considérations relatives à l'AIPRP

Vous êtes conscient qu'en vertu de la *Loi sur l'accès à l'information*, les citoyens canadiens ont le droit d'obtenir des copies des rapports de recherche et des résultats de la recherche

(y compris la base de données liée au présent projet) contenus dans les dossiers du gouvernement fédéral. Dans le même ordre d'idée, en vertu de la *Loi sur la protection des renseignements personnels*, les citoyens canadiens ont le droit d'obtenir des copies de tous les renseignements qui les concernent et qui sont contenus dans les dossiers du gouvernement fédéral, y compris les bases de données de recherche. Avant de publier les renseignements demandés, le Directeur – Accès à l'information et protection des renseignements personnels (DAIPRP) filtre les données afin de s'assurer que les identités personnelles ne sont pas dévoilées.

Acceptation

Votre signature sur ce formulaire indique 1) que vous comprenez l'information fournie sur votre participation à ce projet de recherche et 2) que vous acceptez de participer à l'étude à titre de sujet de recherche.

Cette acceptation ne vous prive en aucune manière de vos droits reconnus par la loi, pas plus qu'elle ne libère le chercheur, les responsables de la recherche ou les institutions concernées de leurs obligations juridiques et professionnelles. Vous êtes libre de vous retirer en tout temps de ce projet de recherche. Vous ne devriez pas hésiter à demander plus de précisions ou d'information durant votre participation.

Nous vous remercions de votre aide dans cette étude.

Vous acceptez que cette entrevue soit enregistrée. Oui Non

Nom du participant (veuillez écrire lisiblement) : _____

Signature du participant _____ Date : _____

Nom du sondeur (veuillez écrire lisiblement) : _____

Signature du sondeur _____ Date : _____

Annex B Interview Guides – Peers

BACKGROUND

What was your relationship with the CF member? (Mother, father, spouse)

Was the family member retired or actively serving?

When you first experienced your loss, did you know where to go to get help or support?

Was the HOPE program suggested to you at the time of the death of your loved one? If no, was it in place at the time? If yes, how long after your loss was someone in contact with you?

How were you approached? Who contacted you? (e.g., mother, father, spouse)

PROGRAM SUPPORT

How long have you been receiving support from the HOPE program?

How long was it between the time of your loss and when you began receiving support?

Has the program helped you in your grief journey? Has the support you have received from the HOPE program had an impact on you?

What forms/mechanism/types of support are offered to you through the program?

ACCESS TO SUPPORT

What are your sources of support?

Would you say that you have experienced and/or have access to support from the CF?

If one was appointed, how would you describe the support received from the Designated Assistant (formerly Assisting Officer)?

How would you describe the support received from the CF once the Designated Assistant returned to his or her duties?

What has been the biggest struggle or challenge for you in this journey?

What do you see as the greatest needs families have after a loss and as they go through the grieving process?

What are some of the challenges you see in support being provided to bereaved families?

What has been your experience with the role of the Joint Personnel Support Unit or the local Integrated Personnel Support Centre in providing support?

HOPE EXPERIENCE

How would you describe your experience with the HOPE program?

If you did not have access to the HOPE program, where do you think you would be in your journey?

What is your perception of the HOPE program and process?

Does the HOPE program meet the needs of the families?

Do you think the needs of the families can be better addressed? (short-term/long-term needs, by the CF/HOPE)

How can the program be improved?

Do you see any barriers to families seeking and accessing support from HOPE or the CF after experiencing a loss? If so, what can be done to reduce these barriers?

What do you see as the best things/practices of the program?

What keeps you motivated to stay in the program? What do you see as the advantages/disadvantages?

CONTEXTE

Quel était votre lien par rapport au membre des Forces canadiennes?
(mère, père, conjoint)

Le membre de votre famille était-il à la retraite ou s'il était en service actif?

Au moment du décès, saviez-vous où obtenir de l'aide ou du soutien?

Le programme ESPOIR vous a-t-il été recommandé au moment du décès de votre proche? Si ce n'est pas le cas, le programme était-il en place à ce moment-là? Si oui, combien de temps s'est-il écoulé entre le décès et le moment où quelqu'un a communiqué avec vous?

Comment vous a-t-on abordé? Qui a communiqué avec vous?
(p. ex., mère, père, conjoint)

SOUTIEN DU PROGRAMME

Depuis combien de temps recevez-vous de l'aide du programme ESPOIR?

Combien de temps s'est-il écoulé entre le décès et le moment où vous avez commencé à recevoir de l'aide?

Le programme vous a-t-il soutenu dans votre processus de deuil? Le soutien dont vous avez bénéficié dans le cadre du programme ESPOIR a-t-il eu une incidence sur vous?

Quels sont les mécanismes, les formes et les types de soutien qui vous sont offerts dans le cadre du programme?

ACCÈS AU SOUTIEN

Quelles sont vos sources de soutien?

Diriez-vous que vous avez eu ou que vous avez accès à du soutien de la part des FC?

Le cas échéant, comment décririez-vous le soutien reçu de la part de l'adjoint désigné (anciennement l'officier désigné)?

Comment décririez-vous l'aide reçue des FC après le retour de l'assistant désigné à ses fonctions?

Qu'est-ce qui a été le plus difficile pour vous dans ce processus?

Que considérez-vous être les plus importants besoins des familles après la perte d'un proche et pendant le processus du deuil?

Quels sont, selon vous, quelques-uns des défis dans l'offre de soutien aux familles affligées?

Quelle a été votre expérience dans l'offre de soutien par l'Unité interarmées de soutien du personnel ou par le Centre local intégré de soutien du personnel?

EXPÉRIENCE DU PROGRAMME ESPOIR

Comment décririez-vous votre expérience dans le cadre du programme ESPOIR?

Si vous n'aviez pas eu accès au programme ESPOIR, où en seriez-vous dans votre processus?

Quelle est votre perception du programme ESPOIR et du processus?

Le programme ESPOIR répond-il aux besoins des familles?

Pensez-vous qu'il serait possible de mieux répondre aux besoins des familles? (besoins à court et à long terme, par l'entremise des FC et du programme ESPOIR)

Comment peut-on améliorer le programme?

Selon vous, y a-t-il des obstacles à la recherche de soutien et à l'accès au soutien dans le cadre du programme ESPOIR ou de la part des FC après un décès? Si tel est le cas, que peut-on faire pour atténuer ces obstacles?

Selon vous, quelles sont les forces du programme?

Qu'est-ce qui vous motive à poursuivre le programme? Selon vous, quels sont les avantages et les inconvénients de ce dernier?

Annex C Interview Guides – Volunteers

BACKGROUND

What was your relationship with the CF member? (Mother, father, spouse)

Was the family member retired or actively serving?

When you first experienced your loss, did you know where to go to get help or support?

Was the HOPE program suggested to you at the time of the death of your loved one? If no, was it in place at the time? If yes, how long after your loss was someone in contact with you? How were you approached/contacted? (e.g., parent, spouse)

ACCESS TO SUPPORT

What are your sources of support?

Would you say that you have experienced and/or have access to support from the CF?

What has been the biggest struggle or challenge for you in this journey?

What do you see as the greatest needs families have after a loss and as they go through the grieving process?

What are some the challenges you see in support being provided to bereaved families?

What has been your experience with the role of the Joint Personnel Support Unit or the local Integrated Personnel Support Centre in providing support?

HOPE EXPERIENCE

How would you describe your experience with the HOPE program?

Has the program helped you in your grief journey? Has the support you have received from the HOPE program had an impact on you?

If you did not have access to the HOPE program, where do you think you would be in your journey?

What is your perception of the HOPE program and process?

Does the HOPE program meet the needs of the families?

Do you think the needs of the families can be better addressed? (short-term/long-term needs, by the CF/HOPE)

How can the program be improved?

Do you see any barriers to families seeking and accessing support from HOPE or the CF after experiencing a loss? If so, what can be done to reduce these barriers?

What do you see as the best things/practices of the program?

What keeps you motivated to stay in the program? What do you see as the advantages/disadvantages?

PROGRAM SUPPORT

How long have you been receiving support from the HOPE program?

How long was it between the time of your loss and when you began receiving support?

What forms/mechanism/types of support are offered to you through the program?

Peer Support Role

How long have you been involved as a peer helper with the program? Were you a peer prior to your involvement with the program?

How did you become a peer helper? What motivated you to become one?

How would you rate the training you received to become a volunteer? Is there any way it could be improved?

Has your role as a volunteer helped you in your journey? What do you see as the benefits of being a volunteer?

Do the support sessions offered by the program help you? (e.g., maximize resiliency, develop skills as a peer helper, on a personal level as a bereaved individual)

What support mechanisms do you find helpful to you as a volunteer? (e.g., coaching session, one-on-one support, group teleconference, national teleconference)

Have you received any feedback from families/peers in terms of the support being provided by the program?

How emotionally difficult do you find it being a volunteer? What do you do to help deal with this/self care measures?

Do you feel you get enough support from the program as a volunteer?

What are some of the challenges you face in providing support to the families?

CONTEXTE

Quel était votre lien par rapport au membre des Forces canadiennes (FC)?
(mère, père, conjoint)

Le membre de votre famille était-il à la retraite ou s'il était en service actif?

Au moment du décès, saviez-vous où obtenir de l'aide ou du soutien?

Le programme ESPOIR vous a-t-il été recommandé au moment du décès de votre proche? Si ce n'est pas le cas, le programme était-il en place à ce moment-là? Si oui, combien de temps s'est-il écoulé entre le décès et le moment où quelqu'un a communiqué avec vous? Comment vous a-t-on abordé/a-t-on communiqué avec vous? (p. ex., parent, conjoint)

ACCÈS AU SOUTIEN

Quelles sont vos sources de soutien?

Diriez-vous que vous avez eu ou que vous avez accès à du soutien de la part des FC?

Qu'est-ce qui a été le plus difficile pour vous dans ce processus?

Que considérez-vous être les plus importants besoins des familles après la perte d'un proche et pendant le processus du deuil?

Quels sont, selon vous, quelques-uns des défis dans l'offre de soutien aux familles affligées?

Quelle a été votre expérience dans l'offre de soutien par l'Unité interarmées de soutien du personnel ou par le Centre local intégré de soutien du personnel?

EXPÉRIENCE DU PROGRAMME ESPOIR

Comment décririez-vous votre expérience dans le cadre du programme ESPOIR?

Le programme vous a-t-il soutenu dans votre processus de deuil? Le soutien dont vous avez bénéficié dans le cadre du programme ESPOIR a-t-il eu une incidence sur vous?

Si vous n'aviez pas eu accès au programme ESPOIR, où en seriez-vous dans votre processus?

Quelle est votre perception du programme ESPOIR et du processus?

Le programme ESPOIR répond-il aux besoins des familles?

Pensez-vous qu'il serait possible de mieux répondre aux besoins des familles? (besoins à court et à long terme, par l'entremise des FC et du programme ESPOIR)

Comment peut-on améliorer le programme?

Selon vous, y a-t-il des obstacles à la recherche de soutien et à l'accès au soutien dans le cadre du programme ESPOIR ou de la part des FC après un décès? Si tel est le cas, que peut-on faire pour atténuer ou supprimer ces obstacles?

Selon vous, quelles sont les forces du programme?

Qu'est-ce qui vous motive à poursuivre le programme? Quels sont, selon vous, les avantages et les inconvénients du programme?

SOUTIEN DU PROGRAMME

Depuis combien de temps recevez-vous de l'aide du programme ESPOIR?

Combien de temps s'est-il écoulé entre le décès et le moment où vous avez commencé à recevoir de l'aide?

Quels sont les mécanismes, les formes et les types de soutien qui vous sont offerts dans le cadre du programme?

Rôle de soutien par les pairs

Depuis combien de temps participez-vous au programme à titre de pair aidant? Étiez-vous un pair avant de participer au programme ESPOIR?

Comment êtes-vous devenu un pair aidant? Quelles étaient vos motivations?

Comment évalueriez-vous la formation que vous avez reçue pour devenir bénévole? La formation pourrait-elle être améliorée?

Votre rôle à titre de bénévole vous a-t-il aidé dans votre processus? Selon vous, quels avantages y a-t-il à être bénévole?

Les séances de soutien offertes dans le cadre du programme vous ont-elles aidé? (p. ex., optimisation de la résilience, développement des compétences en tant que pair aidant, aide sur le plan personnel en tant que personne affligée)

Quels mécanismes de soutien trouvez-vous utiles en tant que bénévole? (p. ex., séances d'encadrement, soutien individuel, téléconférences de groupe, téléconférences nationales)

Avez-vous reçu des commentaires de la part de familles ou de pairs concernant le soutien fourni dans le cadre du programme?

Dans quelle mesure trouvez-vous difficile émotionnellement d'être un bénévole? Que faites-vous pour vous aider à cet égard/quelles mesures prenez-vous sur le plan individuel?

À titre de bénévole, avez-vous l'impression de recevoir suffisamment de soutien dans le cadre du programme?

Quels sont quelques-uns des défis auxquels vous devez faire face dans l'offre de soutien aux familles affligées?

List of symbols/abbreviations/acronyms/initialisms

AO	Assisting Officer
ASIST	Applied Suicide Intervention Skills Training
BOI	Board of Inquiry
CAF	Canadian Armed Forces
CF	Canadian Forces
CO	Commanding Officer
DA	Designated Assistant
DCSM	Director Casualty Support Management
DGMPRA	Director General Military Personnel Research and Analysis
DND	Department of National Defence
DRDC	Defence Research and Development Canada
HOPE	Helping Our Peers by Providing Empathy
IPSC	Integrated Personnel Support Centre
JPSU	Joint Personnel Support Unit
MFRC	Military Family Resource Center
NOK	Next of Kin
OSISS	Operational Stress Injury Social Support
SSRRB	Social Science Research and Review Board
VAC	Veterans Affairs Canada

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Helping Our Peers by Providing Empathy (HOPE) is a peer support program for bereaved families of Canadian Armed Forces (CAF) members. Upon request from Director Casualty Support Management (DCSM), this study was conducted to assess whether the HOPE program is meeting the needs of bereaved military families; and to examine families' perceptions of the support provided to them by the CAF. The research consisted of a series of semi-structured interviews with family members who have had experience with the HOPE program, either as a peer who has received support, a volunteer who has provided support, or both. Overall, participants describe the HOPE program as highly effective and of vital importance to bereaved families as they struggle with their loss. In particular, they emphasize the unique nature of the peer support HOPE provides – one-on-one support between peers with a shared experience of the loss of a CAF family member – as having a significant, positive impact on their emotional healing and family well-being. Although family members interviewed strongly support the HOPE program, its limits are also acknowledged. The interview findings suggest that the needs of the bereaved families should be understood more broadly to include a number of other factors, such as: sustained assistance in handling the administrative details that follow the death of a CAF member; when possible, access to official documentation such as incident reports and coroner's reports; and continued recognition of their membership in the broader military community, demonstrated through active communication and inclusion in commemorative events and ceremonies. This report concludes with recommendations for improvement to the support the CAF provides to bereaved military families.

Le programme Empathie et soutien par les pairs offrant une invitation au réconfort (ESPOIR) est un programme d'entraide des pairs à l'intention des familles endeuillées des membres des Forces armées canadiennes (FAC). À la demande du Directeur – Gestion du soutien aux blessés (DGSB), la présente étude a été réalisée pour déterminer si le programme ESPOIR répond aux besoins des familles endeuillées des militaires et pour examiner la perception des familles à l'égard du soutien qui leur est offert par les FAC. La recherche consistait en une série d'entrevues semi-dirigées avec les membres de familles ayant bénéficié du programme ESPOIR, que ce soit en tant que pairs ayant reçu un soutien ou à titre de bénévoles ayant fourni un soutien, ou encore les deux. De façon générale, les participants ont décrit le programme ESPOIR comme étant très efficace et d'une importance capitale pour les familles endeuillées qui traversent cette épreuve. Plus particulièrement, ils ont insisté sur le fait que la nature unique du programme ESPOIR, dans le cadre duquel un soutien individuel entre pairs et une expérience partagée de la perte d'un membre de la famille faisant partie des FAC sont offerts, a une incidence positive et importante sur leur guérison émotionnelle, de même que sur le bien-être de leur famille. Bien que les membres des familles interviewées soutiennent fortement le programme ESPOIR, les limites de ce dernier sont aussi reconnues. Les conclusions tirées des entrevues laissent entendre qu'on devrait être plus attentif aux besoins des familles endeuillées et tenir compte d'un certain nombre d'autres facteurs, comme une aide continue pour le traitement des formalités administratives suivant le décès d'un membre des FAC; si c'est possible, l'accès à la documentation officielle, comme les comptes rendus d'incidents et les rapports du coroner, ainsi qu'une reconnaissance constante de leur appartenance à la

communauté militaire élargie, par l'entremise d'une communication active et d'une participation aux activités et aux cérémonies commémoratives. En conclusion du présent rapport sont formulées des recommandations qui pourraient permettre d'améliorer le soutien offert par les FAC aux familles endeuillées des militaires.

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Families; Organization