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1. Why This Study is Important

In the realm of public safety, Members of the RCMP play a vital and unique role, bearing the responsibility of upholding the law, protecting communities, and ensuring the well-being of Canadians, through municipal, provincial, and federal policing. Too often, they do so at risk of their own mental health and well-being.

By choosing a life dedicated to the service of others through a career in public safety, they also accept the challenges and adversities inherent to their unique line of duty. Members are confronted daily with a myriad of stressors, risks, and emotionally taxing situations unique to their career which invariably take a toll on their psychological well-being. The very nature of their profession exposes them to violence, trauma, high-pressure situations, and a relentless demand for vigilance. This is compounded by organizational and operational stressors, mental health stigmatization, and a lack of comprehensive and accessible mental health services and supports. Over time, these factors have been shown to accumulate and lead to an array of mental health challenges, including post-traumatic stress disorder (PTSD), depression, anxiety, and a heightened risk of suicidal behavior.

Understanding the mental health challenges faced by Members is a crucial step toward caring for Members and enhancing the overall effectiveness and sustainability of the RCMP. By recognizing and addressing these challenges, we can work towards more resilient, healthier, and better-equipped Members who can continue to serve and protect Canadian communities safely and effectively.

The National Police Federation (NPF) has demonstrated a strong commitment to supporting the mental health and wellbeing of Members of the RCMP. Recognizing the unique challenges and stressors faced by our Members, the NPF has actively engaged in partnerships to research and address mental health issues within the RCMP.

Most recently, the NPF in partnership with the University of Regina and the Canadian Institute for Public Safety Research and Treatment (CIPSRT), funded a survey of serving Members across Canada. The NPF would like to thank all Members who took the significant time and commitment to participate in this survey. Some of the questions were potentially traumatic and tough, but by providing their voice, Members are helping make a difference for current and future Members.
1.1 What We Heard:

RCMP Members Start Healthy; Experience Ongoing, Multiple Traumas Becoming Injured – and the Situation is Worsening

RCMP recruits are typically more mentally healthy and resilient than the general population, which aligns with the substantial responsibilities required of them.

- 6.4% of cadets (RCMP recruits in training) screened positively for any current mental disorders compared to 10.1% for the general population.¹

- Cadets exhibit higher levels of Honesty-Humility Extraversion, Conscientiousness, Gentleness, and Altruism in personality tests than the general population.²

Members, through the function of their service, are exposed to a variety of potentially psychologically traumatic events while experiencing significant organizational and operational stressors.

- Our Members reported lifetime exposure to an average of 13 different types of potentially psychologically traumatic events (PPTEs) which is higher than the average for all public safety personnel (PSP) in 2018 (11) and the general population (2).

- Average operational and organizational stress scores within the study show increased odds for respondents to screen positively for mental health disorders. Some of the highest stressors include negative comments from the public, fatigue, staff shortages, lack of resources, and bureaucratic red tape.

The results of frequent exposure to potentially psychologically traumatic events, unique and challenging stressors, and inadequate mental health supports are a high prevalence of mental health disorders and suicidal behaviour.

- Members are six times more likely to screen positive for any mental health disorder than the general population.

- When compared to a sample of a variety of PSP, Members are almost twice as likely to screen positively for generalized anxiety disorder and major depressive disorder as other PSP, and more than twice as likely to screen positively for PTSD and panic disorder.

- Our Members are more than three times more likely to have contemplated suicide in the past year than the general population and more than five times more likely to have planned a suicide.
1.2 This Study and a Growing Body of Research

The NPF and the University of Regina surveyed a representative sample of actively serving Members of the RCMP between June 2022 to February 2023 to gather information on Members’ mental health, exposure to potentially psychologically traumatic events (PPTEs), awareness of mental health supports, organizational and operational stressors, discrimination and harassment, and mental health training. This survey is a continuation of a similar 2018 survey which was the basis of a report titled “Assessing PTSIs among public safety personnel in Canada” that collected data across a spectrum of Canadian public safety personnel (PSP), including Members of the RCMP, correctional workers, firefighters, paramedics, and other police officers, from September 2016 to January 2017.

This new RCMP-only study allows for several comparisons of post-traumatic stress injury symptoms prevalence and deeper understandings of the state of the psychological well-being of RCMP Members.

The NPF study is part of a collection of research currently being undertaken to assess the current state of RCMP Members’ mental health and address the unique challenges our Members face. The RCMP has also supported research in this vital area. The RCMP Longitudinal Study on PTSD, as an example, has the goal of “developing a skills-based training system for mental health that reduces risk, increases resilience, and enhances treatment efforts.” Additionally, the ideal outcome of the longitudinal study is to develop an evidence-based system that supports Members’ mental health through increasing resilience, mitigating and reducing risks, expanding access to treatment, and facilitating Member navigation through mental health supports. This shows continued efforts in addressing RCMP officers’ mental health through evidence-based research.


As part of the RCMP Longitudinal Study on PTSD, research was conducted, in part, to assess the mental health of RCMP cadets beginning the Cadet Training Program and compare their mental health to the general population. There has only been one sample for this so far, but the same study allows for the contextualization of the mental health of individuals before they embark on their careers as police officers.

Notions have been brought forward that more rigorous mental health screenings during the processing of recruits would help reduce the prevalence of mental health disorders amongst serving Members; however, evidenced-based results indicate that cadets have a lower prevalence of mental health symptoms than the general population of Canadians.

2. New RCMP Members Start Their Career Mentally Healthy and Resilient
These studies support the NPF’s belief that the RCMP typically recruits some of the most mentally healthy and resilient individuals to take on the substantial responsibilities of being a Member of the RCMP.

Through clinical interviews, 6.4% of cadets participating in the study screened positively for any current (last 12 months) mental disorders compared to 10.1% for the general population. Further, 12.4% of cadets screened positively for past mental disorders (i.e., a previous lifetime diagnosis) compared to 33.1% of the public. This is coupled with cadets having a higher lifetime exposure to PPTEs than the general population and lower mental disorder prevalence. Put simply, RCMP cadets have better mental health and resiliency than most other Canadians.

The RCMP Longitudinal Study has also researched personality factors to understand how to best tailor supports for individual performance and psychological resilience among RCMP officers. One such study assessed personality traits amongst cadets to create a baseline to eventually help clarify the relationship between personality profiles and mental health risk and resilience amongst RCMP officers. While the research is still in its infancy, it found that cadets joining the Cadet Training Program exhibited, amongst other personality traits, higher levels of Honesty-Humility, Extraversion, Conscientiousness, Fairness, Modesty, Gentleness, Patience, and Altruism than the general population. The findings suggest that cadets seem to possess personality traits viewed as ideal for modern police officers. In turn, their personality traits also appear indicative with a heightened capacity for emotional resiliency among individuals joining the RCMP.
3. Police Face An Increased Risk of Developing Mental Health Disorders

Posttraumatic stress injury (PTSI) is a term used to broadly describe several mental disorder diagnoses such as posttraumatic stress disorder [PTSD], generalized anxiety disorder [GAD], major depressive disorder [MDD], social anxiety disorder [SAD], and panic disorder [PD]. Research found exposure to potentially psychologically traumatic events (PPTEs) and occupational stressors is associated with an increased risk for PTSIs. While exposure to PPTEs and other occupational stressors are not the only factors in the development of PTSIs, both factors are a way to measure the heightened risk associated with specific professions.3 PSP, including the RCMP, are asked, through the function of their service, to expose themselves to various PPTEs and unique stressors that many in the general population rarely experience.

3.1 Members’ High Exposure to Potential Traumatic Events Increases Odds of Developing Post Traumatic Stress Injuries

RCMP Members are often exposed to PPTEs as a function of their service. PPTEs are broadly divided into 17 various types of events, including sudden violent death, assault with a weapon, and sexual assault. The ways a person can be exposed to such events include events happening to the individual, the individual witnessing or learning about the event, or it being part of their job.

Members of the RCMP in the NPF survey reported lifetime exposure to about 13 different PPTEs, an increase from the 2018 RCMP sample (around 11). This is also significantly higher than the average number of different PPTEs experienced by the general population (2).

Research on PSP has shown that PPTE exposures are associated with increased risks for the development of mental health disorders. The report also analyzed the relationship between any exposure to various PPTEs and the increased odds of screening positively for a specific mental health disorder. Table 1 presents the number of different PPTEs (out of 17) that each, based on the NPF Study, result in a higher probability of an individual screening positively for a specific mental health disorder. As an example, the table below shows that exposure to 11 out of the 17 different PPTE types (such as physical assault, assault with a weapon, combat, severe human suffering, serious injury, and harm, or death you caused to someone else) resulted in a higher chance of a respondent screening positive for PTSD.

<table>
<thead>
<tr>
<th>Mental Health Disorder</th>
<th>Number of different types of PPTE exposures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Post-Traumatic Stress</td>
<td>11 out of 17</td>
</tr>
<tr>
<td>Generalized Anxiety</td>
<td>15</td>
</tr>
<tr>
<td>Major Depressive</td>
<td>14</td>
</tr>
<tr>
<td>Social Anxiety</td>
<td>7</td>
</tr>
<tr>
<td>Panic</td>
<td>12</td>
</tr>
</tbody>
</table>

These numbers confirm what we already knew: our Members are being exposed to many and various types of potential traumatic events which in turn increases the odds of them developing PTSIs, simply by performing the duties of their job.
3.2 Operational and Organizational Stressors Add to Risk and Injuries

The study analyzed a variety of occupational stressors (i.e., operational and organizational stressors). In terms of operational stressors, negative comments from the public, fatigue, finding time for physical activity, and operational-related health issues represented some of the highest identified stressors. For organizational stressors, staff shortages, lack of resources, bureaucratic red tape, and inconsistent leadership represented the highest identified stressors. The total level of organizational and operational stress was associated with increased odds of screening positive for PTSD, MDD, GAD, SAD, and PD.

Due to the characteristics of the RCMP, much like other PSP, a variety of factors such as location of work can help contextualize data results. As an example, participants working in small, medium, and remote locations reported higher indicators related to shift work, overtime demands, work-related activities on days off, working alone at night, risk of being injured on the job, and friends/family feeling the effects of the stigma associated with their job than participants in large population centers.

The unique aspects of the career of a police officer, specifically within the RCMP, cause specific stressors that need to be further researched to help diminish the negative effects on an officer’s mental health.

What the study made clear was an independent association between RCMP occupational stressors and an increased risk of mental health disorders. The study controlled for the number of PPTEs (that are unavoidable) and found an independent association which suggests that efforts toward reducing occupational stressors could mitigate the risks of increased mental disorders.
4. Comparing Post-traumatic Stress Injury Symptoms Between Members of the RCMP, PSP, and the General Public

Individuals joining the RCMP generally start as relatively mentally healthy and possess possible positive traits that could reduce the impacts of psychologically traumatic and stressful factors. They are then, as part of their profession, put in situations that increase the odds of PTSIs while experiencing significant operational and organizational stressors. The following section uses findings from the study to assess the state of Members’ mental health and compare it to PSP in general, as well as the general population.
4.1 RCMP Members Six Times More Likely to Screen Positive For Mental Health Disorders Than General Public

This study found that Members of the RCMP have a higher prevalence of positive screens for mental health disorders than the previous PSP sample and the general population. High PPTE exposure, coupled with other factors, could help explain this trend. Table 2 outlines the percentage of respondents who screened positively for current (last 12 months) mental health disorders.

Table 2: Prevalence of Positive Mental Health Disorder Screens

<table>
<thead>
<tr>
<th>Mental Health Disorder</th>
<th>2023 RCMP Sample</th>
<th>2018 PSP Sample</th>
<th>General Pop</th>
</tr>
</thead>
<tbody>
<tr>
<td>Post Traumatic Stress</td>
<td>47.7%</td>
<td>23.3%</td>
<td>1.7%</td>
</tr>
<tr>
<td>Generalized Anxiety</td>
<td>33.5%</td>
<td>18.8%</td>
<td>5.9%</td>
</tr>
<tr>
<td>Major Depressive</td>
<td>44.6%</td>
<td>26.4%</td>
<td>2.2%</td>
</tr>
<tr>
<td>Social Anxiety</td>
<td>24.1%</td>
<td>15.2%</td>
<td>3.2%</td>
</tr>
<tr>
<td>Panic</td>
<td>21.3%</td>
<td>8.9%</td>
<td>1.5%</td>
</tr>
<tr>
<td>Any</td>
<td>64.7%</td>
<td>44.5%</td>
<td>10.1%</td>
</tr>
</tbody>
</table>

The 2018 PSP Sample collected information on personnel from various public safety sectors, including the RCMP. The information provided in column three (2018 PSP Sample) is representative of the entire sample, not just the RCMP. The 2023 RCMP sample information presented in the second column stems from the University of Regina study of the NPF sponsored survey. Information on the general population in column four was gathered through various studies including data from Statistics Canada.

*Members are six times more likely to screen positive for any mental health disorder than the general population.* Additionally, when compared to the sample of a variety of PSP, Members of the RCMP are almost twice as likely to screen positively for GAD, MDD, and SAD as PSP, and more than twice as likely to screen positively for PTSD and PD.
4.2 RCMP Members Have Higher Prevalence of Suicidal Behaviors

The current study collected data on suicidal ideation, planning, and attempts among serving Members of the RCMP and compared the data to the previous study PSP sample and the general population. Table 3 outlines findings surrounding ideation of suicide (contemplating) and planning a suicide attempt. It is important to note, as with many statistics about suicidal behaviors, that the following numbers do not necessarily capture all individuals who are struggling the most due to Members being on leave or too symptomatic to respond to a lengthy and emotionally triggering survey. Also, anyone who died by suicide would obviously not have been able to be included in the current self-reported numbers.

Table 3: Prevalence of Suicidal Behaviours Amongst RCMP, PSP, and General Pop

<table>
<thead>
<tr>
<th></th>
<th>2023 RCMP Sample</th>
<th>2018 PSP Sample</th>
<th>2023 General Pop</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contemplated Suicide (Lifetime)</td>
<td>34.1%</td>
<td>27.8%</td>
<td>~12%</td>
</tr>
<tr>
<td>Contemplated Suicide (Past Year)</td>
<td>11.4%</td>
<td>10.1%</td>
<td>2.7%</td>
</tr>
<tr>
<td>Planned Suicide (Lifetime)</td>
<td>15.9%</td>
<td>13.3%</td>
<td>~4.1%</td>
</tr>
<tr>
<td>Planned Suicide (Past Year)</td>
<td>4.6%</td>
<td>4.1%</td>
<td>0.8%</td>
</tr>
</tbody>
</table>

The study found that there were statistically significant associations between positive screens for many mental disorders and lifetime suicidal ideation/planning. Based on the findings, there are also increased odds of lifetime suicidal planning in remote locations (i.e., at least 80km away from rural or urban settings). Participants working in medium population centres were statistically less likely than those working in small population centers to report lifetime suicidal planning. This showcases the need to consider the unique characteristics of remote and small population centre policing including access to mental health resources when introducing and expanding supports.

These findings demonstrate the urgency needed to find solutions to protect the mental health of those who are frequently exposed to potentially psychologically traumatic events due to their service to Canadians.
5. Declining Mental Health and Increased Organizational Stressors Among Members

The state of mental health among Members of the RCMP compared to the general population and other PSP is concerning. Of continued concern is the overall indicators of the state of mental health of RCMP officers in 2023 compared to previously gathered data in 2018. This section will review the trends within mental health disorders based on and comparing the RCMP sample of the 2018 survey and the current 2023 survey. It should be noted that although the 2018 sample of RCMP respondents is smaller than the 2023 sample, the sociodemographic distribution of the current 2023 sample aligns with the sociodemographic distribution of the RCMP workforce and is therefore likely representative of the entire RCMP workforce, allowing for the contextualization of the declining state of mental health among Members. Additionally, it will review the changes within organizational and operational stressors.
5.1 Prevalence of RCMP Member Mental Health Disorders Increased Since 2018

Based on self-report measures, the study found that the prevalence of current (last 12 months) positive screens for PTSD, MDD, GAD, SAD, and PD were significantly higher than the previous RCMP sample of the 2018 report. Table 4 presents the prevalence of mental health disorders in the RCMP sample of the 2018 study, the current study, and the percentage increase. Additionally, the prevalence of any mental disorder increased by nearly 15 percentage points going from 50.2% in 2018 to 64.7% in 2023.

Table 4 – Mental Disorder Prevalence in the Last 12 Months

<table>
<thead>
<tr>
<th>Mental Health Disorder</th>
<th>2018 RCMP Sample</th>
<th>2023 RCMP Sample</th>
<th>% Point Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>Post Traumatic Stress</td>
<td>30%</td>
<td>47.7%</td>
<td>17.7%</td>
</tr>
<tr>
<td>Generalized Anxiety</td>
<td>23.3%</td>
<td>33.5%</td>
<td>10.2%</td>
</tr>
<tr>
<td>Major Depressive</td>
<td>31.7%</td>
<td>44.6%</td>
<td>12.9%</td>
</tr>
<tr>
<td>Social Anxiety</td>
<td>18.7%</td>
<td>24.1%</td>
<td>4.4%</td>
</tr>
<tr>
<td>Panic</td>
<td>12%</td>
<td>21.3%</td>
<td>9.3%</td>
</tr>
<tr>
<td>Any</td>
<td>50.2%</td>
<td>64.7%</td>
<td>14.5%</td>
</tr>
</tbody>
</table>

5.2 Operational and Organizational Stressors

The study found that participants reported statistically significantly higher average organizational and operational stress scores than the previous RCMP sample of the 2018 study. When analyzing specific organizational and operational stress scores, participants in the current study reported statistically significantly higher average stress scores for almost all organizational stressors (19 of the 20) and operational stressors (18 of the 20).

Addressing operational and organizational stressors is crucial, not only for the well-being of our Members but for the overall effectiveness of the RCMP. The ability of the RCMP to carry out its critical responsibilities can be negatively impacted by mental health concerns as these concerns evidently affect job performance and Canadian public safety.
6. Addressing Current Gaps in RCMP Mental Health Supports

Unfortunately, the current state of mental health of Members as well as occupational and organizational stressors is worsening, outlining the immediate need for investment in comprehensive, accessible, and evidence-based mental health supports.
The RCMP has engaged in patchwork solutions addressing the mental health of its Members, it released an RCMP Employee Well-Being Strategy for 2021 to 2024 which puts forward several promising initiatives; however, the RCMP should also address immediate and long-term solutions within the plan and offer a step-by-step approach to address the current reality Members face. This plan ought to be transparent and the RCMP should update on its progress regularly.

In 2014, the RCMP put forward a five-year Mental Health Strategy to “contribute to a psychologically healthy and safe workplace, and to provide greater support to its employees”. In 2017, the office of the Auditor General performed an audit on the Strategy and found, amongst other things, that the RCMP did not commit the human and financial resources needed for the Strategy’s full and effective implementation and did not adequately meet its Members’ mental health needs.

As the recent Well-Being Strategy is nearing its end, the Office of the Auditor General should perform and publish an audit of the current Strategy while also receiving an update on the recommendations it put forward for the previous strategy.

Recommendation 1:
The RCMP ensure the full implementation of its Employee Well-being Strategy and apply it consistently across all Divisions. This strategy ought to consider early identification, preventative measures, as well as treatment options and should be available publicly.
6.1 Screening and Early Identification Measures Critical to Well-being

Early identification of a PTSI or potential PTSI symptoms is an important tool for preventive mental health support. The RCMP should facilitate the availability and access of such programs and tools to Members and their families.

**Recommendation 2:**
Immediately address financial and logistical barriers to the full implementation of the RCMP Periodic Psychological Health Screenings (PHS) program.

**Recommendation 3:**
Once the PHS is fully implemented and all Members have received a screening, require Members to get a yearly PHS.

One tool of early identification and screening is the PHS, an initiative that the RCMP began in 2018. PHS is now mandatory for every Member who currently receives a Periodic Health Assessment which helps combat the stigmatization of seeking help.

This screening is not treatment or counseling, but acts as an important, potentially preventative tool through early identification of PTSIs, therein protecting the health and safety of Members. The NPF supports the PHS Program, however, is concerned with the progress and sustainability of the program without immediate resources, attention, and innovative solutions.

Since its inception, the program has administered screenings in most Divisions. Approximately 10% of Members have received a PHS and this number will continue to grow as the program is fully implemented. Administering these screenings becomes difficult when faced with significant barriers in hiring personnel. Addressing vacancies of the lead psychologist for each Division is paramount, however, expanding the options available for administrating a PHS must also be considered to increase the effectiveness of the program.
As such, the NPF recommends allowing RCMP-approved private practitioners to administer the PHS. This would result in more Members getting regular screenings.

Further, the NPF is encouraged by the RCMP’s efforts to administer screenings through telehealth when in-person appointments are not possible. This is of extreme value for our Members, especially those living in rural and remote areas. Expanding this service is vital and the RCMP ought to explore all possible means to confirm and expand this capacity.

**Recommendation 4:**
Continue to support, prioritize, and expand the RCMP Longitudinal Study of Operation Stress and implement its findings on treatment and prevention of injuries caused by traumatic events.

While still in its infancy, this study is already providing valuable insights into the state of Members’ mental health. It also allows Members to continuously assess their mental health by answering related questions. This study allows for a baseline with cadets and will help understand the progression of a Member’s mental health through their years of service. Using similar early identification methods must be expanded to current Members.
6.2 Further Expansion of Mental Health Treatments Needed

The RCMP has made significant strides in offering and supporting programs aimed at restorative mental health support and treatment as well as offering a variety of benefits with regards to occupational injuries, including PTSIs, and supplementary mental health benefits.

**Recommendation 5:**
Immediately fully staff all occupational health services offices while continuing to fully implement the Support for Operational Stress Injury Program.

Services such as Occupational Health Services play a vital role in restorative supports of mental health when a Member is injured and requires care. Staff shortages or limited availability of services to Members leave many Members waiting far too long before receiving the help they need. The RCMP must immediately address these staff shortages.

**Recommendation 6:**
Develop and implement a national policy that supports The National Reintegration Program which explicitly states the program be administered nationally and includes mandatory administrative leave for 14 days and impacted Member access to professional psychological outreach as soon as practical but no later than three days after the critical incident.

Programs such as The National Reintegration Program help treat Members who have recently been exposed to a traumatic event. Many Members may not realize the effects of such an event during or shortly after it occurs. Having an immediate and mandatory intervention helps mitigate the potential for long-term PTSIs while ensuring that Members take the appropriate time off before re-entering the workforce; potentially causing significant injury or damage to themselves or their colleagues. The program has shown great success so far having 93% of Members who participated remain or return to operational duties. Strengthening the program, through national consistently applied policies, will help ensure its continued success.
6.3 Mental Health Guidance and Increased Education and Training Expansion

The RCMP, as well as other PSP organizations, have made significant strides in offering and supporting programs aimed at preventative mental health support and treatment. Navigating the various programs, training, and what coverages Members are entitled to can often lead to Members being overwhelmed and giving up on seeking the help they need.

The mental health impacts of various events have been well documented within various commissions and reports. The RCMP’s response needs to be meaningful, and we have entered a critical time in order to substantially change the way we support our RCMP officers.

Recommendation 7:
Nationally implement the availability of the Edgewood Health Network’s programs for trauma support across all Divisions immediately.

This program has been implemented in “H” Division (Nova Scotia) and offers a service that helps individuals deal with traumatic events. The various services offered depend on the Member’s needs. While this program has been implemented in Nova Scotia, other Divisions do not currently offer this service to Members. The RCMP must be proactive in this implementation to have these services available before a traumatic event occurs rather than being reactive after the fact.

Recommendation 8:
Engage with the NPF, and other relevant service providers, in the creation of a Mental Health and Wellness Framework that is readily available and accessible to all Members and their families, easily navigable and centered around early detection, prevention, and treatment.
The various mental health supports and programs for Members can be difficult to navigate leaving Members overwhelmed and unsupported. Many programs and supports have been established for the treatment of mentally injured Members. While preventative initiatives have occurred, the inefficient facilitation of them has resulted in few programs being used to their full potential. The RCMP and many other private and public agencies offer mental health services. What is evident is that bureaucratic processes, stigmatization, and distrust of the RCMP as a healthcare provider has resulted in an inefficient mental health support system and low access.

Members need the opportunity to explore and discuss the variety of supports available to them without fear of negative career impacts and the NPF believes Members would be more comfortable pursuing this with external sources. The RCMP can easily engage with service providers such as the NPF, Veteran Affairs, TELUS Virtual Health, Edgewood, and the Public Safety Personnel Network, to create a comprehensive and accessible mental health support network that is centered around early detection, prevention, and treatment.

Additionally, this network would, in many aspects, be independent of the RCMP to ensure it is Member and family-centered, and accessible equally across Divisions.

Through the coordination of all service providers, Members would be supported and knowledgeable about the services available to them from the moment they start their service to life after retirement. Through these partnerships, a collaborative relationship between the RCMP, the NPF, and service providers would result in a simplified and efficient framework for Members. Results from these engagements ought to be outlined in the next Employee Wellness Strategy, and the strategy ought to be a unified action plan between the NPF, the RCMP, and service providers. The network would offer holistic mental health support whether a Member is mentally injured, wants information, or guidance for Members and their families. The results of this study show a clear need to urgently drastically improve the current mental health framework to provide Members of the RCMP the support they deserve.
Recommendation 9:
Implement mandatory Member wellness psychological training.

The RCMP offers various mental health training to Members as well as some programs that aid psychological wellness maintenance. However, the NPF survey found that participation is disproportionality low depending on a Member’s location of work. The study asked a set of questions about Critical Incident Stress Management (CISM), Critical Incident Stress Debriefing (CISD), Mental Health First Aid (MHFA), Peer Support, and Road to Mental Readiness (R2MR). Approximately 48% of Members in large urban populations indicated that they had received any form of mental health training. The percentage of Members that received any mental health training falls as the size of the location of work decreases: falling as low as approximately 4% of Members receiving mental health training in remote locations or Indigenous communities.

Importantly, the study found that the prevalence of positive screens for all mental health disorders was lower for participants who received any mental health training than those who received no training.

The RCMP can easily implement the requirement for all mental health related training to be mandatory. Training should be approved by the RCMP and relevant stakeholders such as the NPF and mental health experts before being included. An example of such training is the Emotional Resilience Skills Training that ought to be implemented nationally as part of mandatory wellness training for RCMP Members.
7. Mental Health Supports are Increasingly and Urgently Needed

The urgent need for increased government investment in mental health guidance, training, and treatment programs for police officers, especially within the RCMP, is paramount. The levels of mental health disorders among law enforcement professionals, when compared to the general public, are alarmingly high highlighting a pressing issue that requires and deserves immediate attention. These brave officers confront traumatizing events regularly, making them particularly susceptible to the adverse effects of untreated mental health challenges. Providing adequate mental health support is not just an obligation; it’s a way to honour and protect those who dedicate their lives to protecting our communities.

By investing in comprehensive mental health initiatives, we can create a safer, healthier, and more resilient law enforcement workforce, ensuring they receive the care and guidance they rightfully deserve. In doing so, we contribute to the overall well-being of officers and the effectiveness of policing, which ultimately benefits society. As such, the NPF puts forth several recommendations for the improvement of mental health supports offered by the RCMP. The NPF calls on the RCMP and other organizations to immediately and effectively implement the following short-term recommendations:

1. The RCMP ensure the full implementation of its Employee Well-being Strategy and apply it consistently across all Divisions. This strategy ought to consider early identification, preventative measures, as well as treatment options and should be available publicly.

2. Immediately address financial and logistical barriers to the full implementation of the RCMP PHS program.

3. Continue to support, prioritize, and expand the RCMP Longitudinal Study of Operation Stress and implement its findings on treatment and prevention of injuries caused by traumatic events.
4. Immediately fully staff all occupational health services offices while continuing to fully implement the Support for Operational Stress Injury Program.

5. Develop and implement a National Policy that supports The National Reintegration Program which explicitly states the program be administered nationally and includes mandatory administrative leave for 14 days and impacted.

6. Nationally implement the availability of the Edgewood Health Network’s programs for trauma support across all Divisions immediately.

Additionally, the RCMP and the federal government should increase efforts in the prevention of mental health issues. These initiatives should include considerations of substantial reshaping of resources within the mental health domain. Specifically, efforts should include the following recommendations:

7. Once the PHS is fully implemented and all Members have received a screening, require Members to get a yearly PHS administered.

8. Engage with the NPF and other relevant service providers, in the creation of a Mental Health and Wellness Framework that is readily available and accessible to all Member and their families, easily navigable and centered around early detection, prevention, and treatment.

9. Implement mandatory Member wellness psychological training.