



## POST-EVENT SUMMARY REPORT

2026 Veteran Family Summit  
*January 22-23, 2026*  
*Virtual event*

## ABOUT THE SUMMIT

The Veteran Family Summit is hosted annually by the Atlas Institute for Veterans and Families. This two-day virtual event focuses on the needs and experiences of Canadian Armed Forces (CAF) and Royal Canadian Mounted Police (RCMP) Veteran Families. Created in collaboration with Veteran Families and those who support them, the summit's purpose is to provide Families with access to knowledge, resources and supports specific to their unique needs – right from the comfort of their own home.

Each year, Veteran Family Summit attendees hear from experts in the field who share valuable knowledge and insights on issues crucial to the Families of CAF and RCMP Veterans. Participants also learn from the real-life stories and lived experiences of other Veteran Family members, reminding them that a community of support surrounds them wherever they are.

**Veteran Families have made sacrifices to support and serve alongside their loved ones.** The Veteran Family Summit provides an opportunity to recognize the unsung service of Families and honour their own brand of courage. As they navigate the impacts of their loved one's service, Families deserve a space where their needs and experiences can be truly understood.

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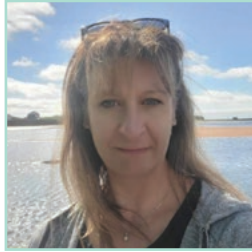
# BIOGRAPHIES

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## HOST BIOGRAPHIES

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LARYSSA  
LAMROCK



**LARYSSA LAMROCK** is the National Strategic Advisor, Families at the Atlas Institute for Veterans and Families. She has a personal understanding of the many challenges facing Veteran Families as the spouse of a CAF Veteran who was medically released with posttraumatic stress disorder and depression, and as a mother who supported four children impacted by the operational stress injury of their loved one. Laryssa draws from these experiences as she advocates passionately for and represents the voices of military and Veteran Family members.

POLLIANN  
MAHER



**POLLIANN MAHER** is the Lived Expertise Lead, Families at the Atlas Institute for Veterans and Families. She is the spouse of a Veteran with posttraumatic stress disorder and brings to her role more than 20 years of lived experience in navigating the mental health system. Polliann is passionate about educating the Veteran community and sharing her knowledge of the resources that are available to them. She is a strong advocate around changes that encompass the Family, which are many times an afterthought or forgotten.

## EMCEE BIOGRAPHY

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GARY  
HOLLENDER



**GARY HOLLENDER** started his service in uniform as a Cadet with the Seaforth Highlanders of Canada at age 12. He went on to serve in the Reserves before becoming a RCMP Auxiliary Constable in 1988. After postings in Manitoba and across Alberta, he retired in July 2021. Gary has volunteered with the Special Tactical Operations Team, as a tactical medic with the RCMP Emergency Response Team and on the Community Liaison Team. The highlight of his career was as an Operational Trainer/Mentor to the Afghan National Police, in Kandahar, from March to December of 2009 while seconded to the CAF and United States Army.

# EVENT SUMMARY

Veteran Family Summit 2026 highlighted the complexity, strength and evolving needs of Families impacted by military and RCMP service. Speakers and panellists emphasized that healing and recovery are not individual journeys, but are strengthened when they include Families, peers, communities and culturally informed health care providers. Ensuring Families are meaningfully included can help with recovery and enhance research and services.

Each year, organizations that provide services, information or supports to Veterans and Families are invited to host a virtual booth on the event platform. Visit the Veteran Family Summit 2026 event page to learn more about the 23 organizations that hosted booths at this year's event: [atlasveterans.ca/veteran-family-summit-2026](https://atlasveterans.ca/veteran-family-summit-2026)

## KEY THEMES

- **FAMILIES ARE CENTRAL TO HEALING AND RECOVERY.** Throughout the summit, presenters emphasized that Families are often the foundation that makes a Veteran's healing possible. Family support plays a critical role in navigating trauma, mental health challenges, addiction, chronic pain and transition from service.
- **LIVED EXPERIENCE IS POWERFUL AND ESSENTIAL.** Personal stories from Veterans and Family members reinforced the value of lived experience. When lived expertise is meaningfully included, it builds trust, relevance and connection, helping others feel seen, understood and less alone.
- **TRAUMA IMPACTS THE WHOLE FAMILY SYSTEM.** Service-related trauma does not affect only one individual. Families adapt to ongoing stress – often at a personal cost – and may experience secondary trauma, changes in roles and long-term impacts on relationships, identity and well-being.
- **RESILIENCE IS REAL AND COMPLEX.** Veteran Families showed resilience through stories of their survival, adaptation and persistence, even when healing is messy. Resilience was framed not as the absence of pain, but as the ability to continue moving forward and reclaim purpose despite adversity.
- **CONNECTION AND PEER SUPPORT REDUCE ISOLATION AND FOSTER HOPE.** Peer support emerged as a vital source of understanding, validation and encouragement. Connecting with others who share similar experiences helps Families and Veterans feel less isolated and more hopeful. Healing happens in relationship, not in isolation.
- **STIGMA AND SILENCE REMAIN BARRIERS TO CARE.** Stigma related to mental health, brain fog, addiction, trauma and non-traditional therapies can prevent open conversations and access to support. The summit highlighted the need for safe spaces where Families and Veterans can speak honestly without fear of judgment or disbelief.
- **RECOVERY REQUIRES CHOICE, TRUST AND INFORMED SUPPORT.** From therapy and peer support to sport-based programs and emerging treatments, recovery paths are not one-size-fits-all. Veterans and Families need accurate information, culturally informed care and systems that respect autonomy and lived experience so that they can make the best decisions for themselves.

## FROM OUR ATTENDEES



**WE ARE NOT ALONE,  
WE ARE NOT BROKEN,  
WE DO NOT HEAL  
IN ISOLATION.**



*“ I walked away with a sense of comfort knowing that peer support is so valued. Highlighting peer support is always important to me. ”*

*“ [I learned] that I might be able to access more help and resources for me to help in my own healing journey and to support my husband dealing with PTSD, but I have also some secondary effects of it, have been living with and around PTSD for more than 33 years. ”*

*“ There was something in every presentation that hit home with me this year. ”*

*“ I appreciated the lived experiences that were shared, the highlights that remind us of community and resilience and our strengths that help us through difficult life experiences. ”*

*“ Your presenters were phenomenal. I was left feeling empowered and inspired! Thank you! ”*

*“ I appreciated the sense of belonging and connecting and not being alone. ”*



**There are more resources available to family members than I had initially thought.**



# REGISTRANTS: BY THE NUMBERS



WHO REGISTERED?



**686**

people formally registered for the 2026 summit

**47.5%**

of registrants indicated they were Family members or friends of a serving member or Veteran of the CAF or RCMP<sup>i</sup>



WHERE ARE REGISTRANTS LOCATED?

Individuals from **every**

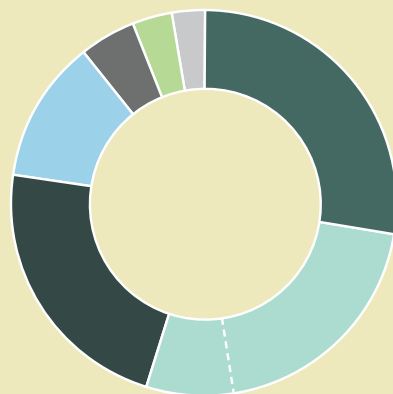
province and territory registered.

The top 5 were:

- Ontario
- Quebec
- Nova Scotia
- Alberta
- British Columbia



ABOUT THE REGISTRANTS



- 24.7% Service providers
- 24.2% Family members or friends of CAF or RCMP Veterans  
72% of the Family members who registered were spouses of Veterans
- 20% CAF or RCMP Veterans
- 10.6% Government employees
- 4.2% Researchers
- 2.9% Still-serving CAF or RCMP members
- 2.4% Family members or friends of still-serving CAF or RCMP members

<sup>i</sup> Based on the percentage of people that indicated they were Family members or friends, even if they chose another option as their primary identity.

## YOUR FUTURE SELF IS COUNTING ON THE HEALED VERSION OF YOU

### PRESENTER BIOGRAPHY

SHERI  
LUX



**SHERI LUX** is the author of *Finding My Fire*, a heartfelt memoir that chronicles her journey through grief, healing and self-discovery. In its pages, she vulnerably shares her experience navigating the quiet weight of codependency, the heartbreak of loss, overcoming transformative surgeries and the courage it takes to reclaim one's voice. She is a former teacher who earned her BA and B.Ed. from the University of Saskatchewan. She was married to a RCMP officer, who tragically lost his battle with posttraumatic stress disorder (PTSD). As a mother, author, teacher, artist and entrepreneur, she embodies resilience in everything she does. Sheri's work serves as a reminder that even in our darkest moments, healing is possible — and that the life we're meant to live awaits us on the other side of our willingness to rise, shine a light on the shadows and reveal the patterns which no longer serve us. Sheri currently lives in Calgary, AB and finds her inspiration in the breathtaking views of the Rocky Mountains.

### PRESENTATION SUMMARY

In this powerful keynote, Sheri Lux shared her personal story and lived experience of trauma, codependency, grief and healing. She explained that she spent many years hiding her pain and struggle while supporting her late husband, an RCMP officer living with PTSD. She would put others first, ignore her own needs and try to “keep the peace” in the home. This led to a loss of identity and self-worth as she became disconnected from herself and her own voice.

“Healing begins the moment we stop hiding.”

— SHERI LUX

By learning more about codependency, Sheri began to understand how her focus on caregiving and people-pleasing stemmed from unmet childhood needs and fear of abandonment. Her strategy of “over-functioning” in her family was a way to cope that unintentionally kept dysfunctional dynamics in place. Sheri explained

that her personal healing began through therapy, journaling and creative expression, which helped her rebuild self-worth and practise self-love. Her hopeful message is that healing can happen when we reclaim our voice and that recovery is both possible and transformative.

### KEY MESSAGES

1. **Codependency can look like caring, but it is a coping mechanism that develops from trauma and instability.** Healing from codependency takes learning that you are not responsible for other people's emotions and that your worth doesn't come from how others treat you, as well as awareness that you cannot save someone else by losing yourself.
2. **Focusing on and taking care of yourself without guilt can help you find your inner strength.** Inner strength can be built through setting boundaries, trusting that you can survive discomfort and choosing yourself even when it feels selfish.
3. **Pain can be transformed through creative and honest expression.** Facing your pain instead of hiding from it or pushing it away can help you reconnect with and trust yourself.

## NAVIGATING BRAIN FOG IN CHRONIC PAIN AND MENTAL HEALTH IN VETERANS

### PRESENTER BIOGRAPHIES

SUSAN  
CLARKE-TIZZARD



**SUSAN CLARKE-TIZZARD** grew up in the military and then served from 1983 until 1994 in the CAF. She received her Bachelor of Arts in Organizational Management, Teaching English as a Second Language I & II and International Community Development. Susan never believed she would leave the military, but ended up leaving on a medical release. In 2012, she had back and spinal surgery due to military injuries and then broke her hip doing Canicross with her dogs in 2017. As a Veteran consultant for research projects, living with chronic pain, she educates researchers, clinicians and others regarding the Veteran mindset and stoicism in regards to chronic pain. Susan's strength is in communicating the uniqueness of military life as a military child and as a military member herself. As a woman Veteran, she also discusses the issues that some women Veterans face in the military and as they transition to life outside of the CAF.

RONESSA  
DASS



**RONESSA DASS** (*she/her*) is a joint rehabilitation sciences and occupational therapy student at McMaster University, supervised by Dr. Tara Packham. Both Ronessa's master's and PhD thesis were supported by a Capacity Building Initiative from the Chronic Pain Centre of Excellence for Canadian Veterans. Ronessa is passionate about improving the accessibility of pain services.

### PRESENTATION SUMMARY

This session discussed what brain fog is and how it can impact Veterans and their Families. The presenters explained that brain fog is common yet often misunderstood among Veterans and Families. Brain fog can include trouble with memory, attention, finding the words, thinking clearly and managing emotions. It's not a personal failing but can happen when the brain's energy is being spent on things that use up a lot of its resources, such as stress, pain, fatigue or trauma. It can have many impacts on daily life, functioning, identity, self-worth and relationships. Because there is stigma about brain fog and it is invisible, Veterans may not

talk openly about their experiences because they fear they will be judged or others won't believe them. The presenters shared common triggers and discussed strategies that can be used to help manage and cope with brain fog. The presenters noted that it's important to talk about brain fog so that Veterans and Families can get support, and that awareness and system-level change can help them access and receive appropriate services.

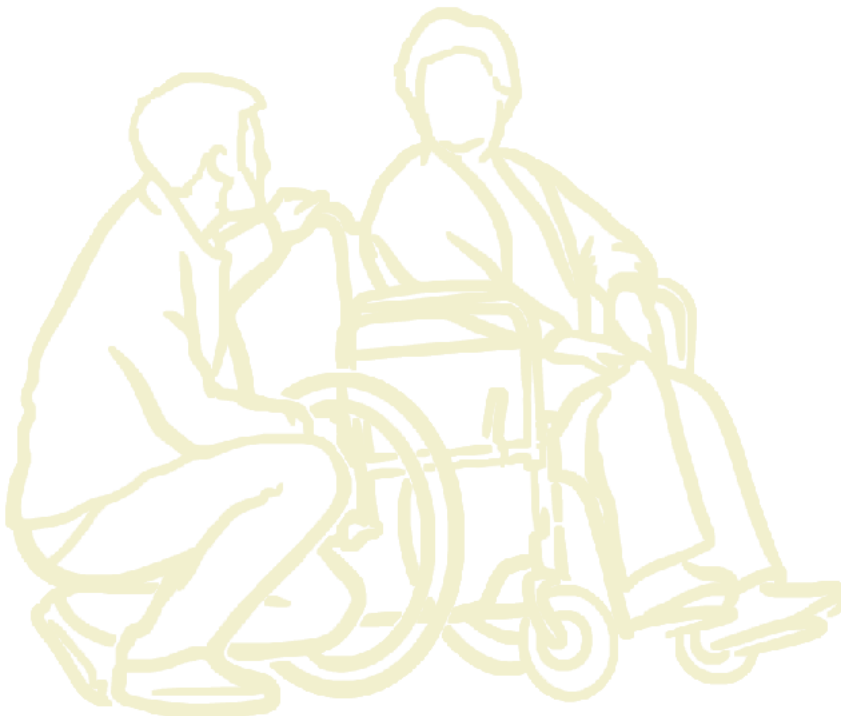
“*Alone, I couldn't do it.  
Alone, I was failing.  
Alone, I didn't want to live.  
But I reached out. And that  
made all the difference  
in my life and in the life  
of my children.*”

– SUSAN CLARKE-TIZZARD

## KEY MESSAGES

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1. **Brain fog is real and common.** It is not a personal weakness and can affect many Veterans living with chronic pain or mental health conditions.
2. **Communication, understanding and support are important** to help manage the impacts of brain fog on both Veterans and Families. Women Veterans can benefit from consideration for the unique ways they are impacted by brain fog, especially when they have a caregiving role.
3. **Help is available** and practical strategies can make daily life easier. These strategies include taking breaks, pacing activities and tasks, setting small goals, using reminders, keeping routines and asking for support. Professional support in the form of occupational therapy can also help.



## WALKING ON EGGSHELLS: THE ROLE OF FAMILY IN ADDICTION

### PRESENTER BIOGRAPHIES

DONNA  
LOW



**DONNA LOW** has more than 18 years of experience in the field of addiction, during which she has been a driving force behind the development and facilitation of some of Canada's leading Family and children's programs. Her work is grounded in a strong academic foundation in child and youth care and complex Family systems, further enriched by mentorship under Neal Berger, a renowned expert in substance use and mental health treatment across North America.

Donna's approach is deeply compassionate and rooted in both professional expertise and personal experience. Having navigated the challenges of generational substance use disorder within her own Family, she brings a rare authenticity and empathy to her work. Her ability to create safe, supportive spaces allows individuals and Families to explore their healing journey with courage and hope. Known for her down-to-earth style and genuine connection with others, Donna delivers recovery tools in a way that is both accessible and impactful.

SONJA  
RIDDLE



**SONJA RIDDLE** is a highly skilled clinician with more than a decade of both personal and professional experience in the field of addiction. Her work spans the full continuum of care, with a strong focus on developing and facilitating Family and children's programming at some of Canada's leading treatment centres. Throughout her career, Sonja has been dedicated to transforming how substance use disorder is understood and approached. Her ability to communicate

complex concepts with clarity and compassion offers meaningful relief and insight to the individuals and families she supports. She creates a space where people feel seen, heard and empowered to heal. Sonja's teaching style is both inspirational and grounded, helping Families make sense of their experiences while fostering connection and hope. Her work continues to make a lasting impact on those navigating the challenges of addiction and recovery.

### PRESENTATION SUMMARY

*Families affected by addiction often show patterns similar to those surviving combat exposure, chronic trauma or disaster situations.*

— SONJA RIDDLE

In this presentation, Donna Low and Sonja Riddle discussed what addiction is, how it impacts Families and how Families adapt to survive. They framed addiction as an illness, not a moral failure or lack of willpower, and explained that loss of control is part of the illness. This loss of control may be painful for Veteran Families who are used to discipline and pushing through hardships. Importantly, the speakers shared that addiction affects not just one person, but the whole Family.

Families may use different strategies to cope with substance use and unconsciously take on new roles to try to stabilize the Family system. While these strategies help the Family survive, they can also contribute to the ongoing cycle of addiction. The presenters outlined the seven stages Families go through to adapt to active addiction:

1. Denial
2. Attempts to control substance use
3. Chaos and disorganization
4. Crisis management
5. Separation
6. Functioning without substance use
7. Recovery

They emphasized that healing begins when even one Family member shifts their focus from reacting to or controlling the person using substances to healing themselves. This can help the whole Family move forward to stability, hope and long-term recovery.

## KEY MESSAGES

1. **Addiction affects and reorganizes the whole Family system** as its members adapt to survive the ongoing trauma. Families adapt in seven stages that are predictable because they are automatic responses to ongoing stress, fear and uncertainty, not a sign of weakness.
2. **The Family's way of adapting to addiction can help them survive.** However, the strategies Families use can unintentionally contribute to the cycle of addiction and lead to generational patterns and trauma.
3. **Recovery is possible.** When one person in the Family pursues their own healing, it can help the whole Family move forward. Families can benefit from breaking their silence and seeking support through specialized groups.



## HOLDING SPACE THROUGH THE STORMS: THE POWER OF PEER SUPPORT

MODERATORS: Laryssa Lamrock and Polliann Maher

### PANELLIST BIOGRAPHIES

JILL  
CARLETON



**JILL CARLETON** is a retired Regular Force Naval Veteran, military spouse and military parent. She has volunteered with multiple non-profit and charitable organizations, mentored through the Mental Health Commission of Canada's SPARK program and is a trained peer supporter through Mental Health Innovations and through the Mood Disorders Society of Ontario. Jill is one of the founders of the Royal Canadian Legion's Operational Stress Injury (OSI) Special Section and currently serves as the Dominion Treasurer of the Legion, as well as Secretary of the Navalis Foundation (formerly known as the Royal Canadian Naval Benevolent Fund). Jill is an ardent believer in peer support and its role within the military and Veteran Family community.

HOWIE  
JOHNSON



**HOWIE JOHNSON** served in the CAF for 28 years, retiring in 2009. After transitioning from military service, he dedicates his time and efforts to peer support work, focusing on Veterans and first responders – groups whose sacrifices and challenges he deeply understands. Howie continues to serve his community through volunteerism with Boots on the Ground and Heroes Mending on the Fly, ensuring that those who serve others are themselves acknowledged and supported.

DANIELLE  
KELLY



**DANIELLE KELLY** has been a Family Peer Support Coordinator for over 17 years, supporting the Families of CAF members and Veterans. Danielle's connection to the military community runs deep. She is the daughter of a now-retired military member and has been posted across Canada and had three postings to Germany. She is a daughter, mother of two amazing adults and grandmother to three grandchildren. She is passionate and dedicated to supporting Families on their journeys of wellness with compassion, empathy and understanding. A strong advocate for helping Families learn to make their own well-being a priority while continuing to care for those they love, Danielle brings both lived experience and heartfelt commitment to her work. She believes it is a privilege and honour to walk beside Families on their incredible journeys of healing and posttraumatic growth. She understands the impacts and challenges of operational stress injuries and reminds Families that they are never alone – that healing happens together, in community.

SOPHIE  
RICHARD



**SOPHIE RICHARD** is a registered social worker with more than 25 years of experience in the fields of bereavement and mental health within the Department of National Defence. For more than 20 years, she has served as the National Program Bereavement Peer Support Manager for the HOPE (Helping Our Peers by Providing Empathy) program. In 2006, Sophie developed the HOPE program, which provides peer support and education on grief. Through this program, she and her team have helped CAF members and Families understand that grief is more than “just” sadness – it impacts one’s actions, emotions, thoughts, spirituality and both physical and mental health. Her compassionate approach and expertise have guided many through the most difficult moments of loss. Sophie’s passion for helping others navigate continues to make a lasting impact on the lives of those she serves and on the culture of care within the CAF community.

GRANT  
WINFIELD



**GRANT WINFIELD** is a military child and the son of two Veterans and has experienced first-hand what it is like to live with a parent with PTSD. As an adult, Grant has found his place in helping other military children understand mental health and not owning your parent’s trauma. As a facilitator with the Wounded Warriors Canada Warrior Kids Camps, Grant guided the children of first responders and Veterans through discussions of mental health and operational stress injuries. Grant also works with a Veterans advocacy group, helping Veterans, RCMP members, and their Families overturn unfavourable disability benefit decisions from Veterans Affairs Canada. Grant hopes that by sharing his experiences, other Veteran Family members will see the importance of peer support, not just for the health of the Veteran, but for themselves as well.

## PANEL SUMMARY

This panel explored the role and impact of peer support within military, first responder, Veteran and Family communities. Peer support means connecting with someone who has similar experiences and truly understands. The panel framed peer support as complementary to clinical care while offering a perspective that not all professionals provide. Panellists shared their experiences with peer support, reflecting that it helped them feel less alone,

““ *The biggest thing about peer support is that you’re not alone. When you know that you’re not alone and somebody understands you, that connection is huge.* ””

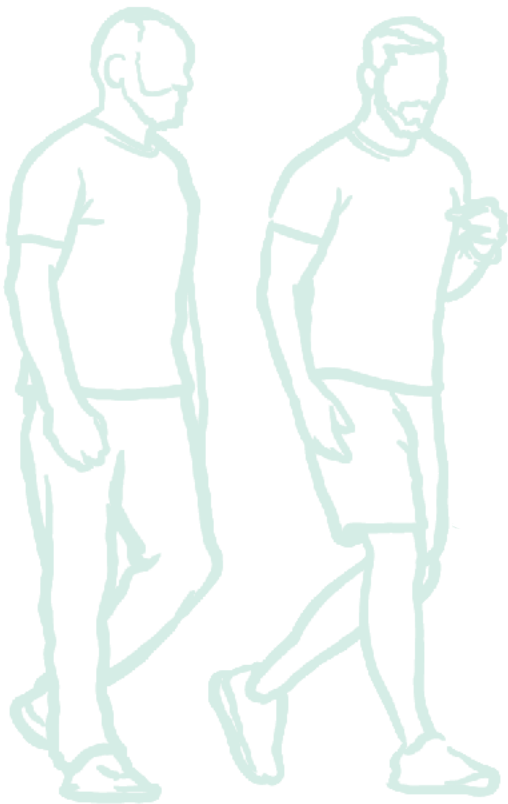
– DANIELLE KELLY

more understood and more hopeful during difficult times. They emphasized that peer support means walking beside someone through adversity and being “the lighthouse” or “flashlight,” not trying to fix them or tell them what to do. The panel reflected on the courage it takes to seek help and support, and that courage can lead to connection, hope and community. Panellists also expressed that peer supporters need to care for themselves too and practice setting boundaries to maintain their well-being.

## KEY MESSAGES

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1. **You are not alone** – there are others who can understand your experiences. Peer support connects people with shared lived experience, which can help a person feel more hopeful and less isolated.
2. **Peer support can help** by showing that there is hope and a way forward. After taking the courageous first step to choose to seek help, peer support can offer guidance and connection that helps a person keep going.
3. Providing **sustainable peer support requires boundaries and self-care** so that a peer supporter doesn't burn out or experience compassion fatigue. Peer supporters can model healthy behaviour by prioritizing their own well-being, showing that healing does not require self-sacrifice, but balance.



## FROM SERVICE TO STRENGTH: MY JOURNEY TO RECOVERY THROUGH SPORT

### PRESENTER BIOGRAPHY

NATACHA  
DUPUIS



**NATACHA DUPUIS** is a retired Master Corporal of the CAF, with more than 16 years of service. During her second tour to Afghanistan, she faced the devastating loss of comrades, leading to a diagnosis of PTSD. Committed to her recovery, Natacha turned to physical fitness as a vital component of her healing journey. With the support of her loved ones and initiatives such as the Soldier On program, she regained strength and resilience through sport, rediscovering both purpose and a sense of community. Her athletic journey took centre stage at the Invictus Games. In 2016, she earned two gold medals in track and a bronze in powerlifting. The following year, she served as Co-Captain, winning three gold medals (100m, 200m, 400m) and a silver in indoor rowing. Originally from Montreal's south side, she now resides in the National Capital Region. She advocates as a mental health ambassador through public speaking engagements. Her story is an inspiration for others to rise beyond adversity and pursue their dreams.

### PRESENTATION SUMMARY

 *Supporting Families is absolutely essential. They are not just part of our story — they are often the reason we are still standing.* 

— NATACHA DUPUIS

Natacha Dupuis shared her moving story of navigating life after service and recovering from trauma. She experienced PTSD after returning home from deployment in Afghanistan and struggled with panic attacks, nightmares and identity loss. While it was difficult for Natacha to seek help due to guilt, isolation and stigma, her Family's support helped her access resources to begin her recovery. Among other programs, Natacha participated in the Army Run and Soldier On, eventually going on to compete in the Invictus Games. She shared that sport played a major role in her healing, helping her realize she

still had strength and capability, rather than seeing herself as "injured." Sport helped her reconnect with others and gave her Family an opportunity to see and celebrate her recovery. Natacha shared a hopeful message that change is possible, even when it feels unimaginable, when you have a purpose for moving forward.

### KEY MESSAGES

1. **You are not your illness or injury.** What you live with does not define who you are and you can still experience dignity, strength and purpose while living with an injury.
2. **Recovery is not an individual sport** — support, especially from Families, makes a difference in a Veteran's healing. Connections with others, whether through sports, peer support, therapy, Family or Veterans services, can be powerful sources of strength and meaning.
3. **Healing is a series of small, manageable steps over time.** Setbacks are part of the process and long-term recovery benefits from patience, self-compassion and persistence.

## PUTTING VETERANS AND FAMILIES AT THE HEART OF SLEEP RESEARCH: A COMMUNITY-DRIVEN APPROACH

### PRESENTER BIOGRAPHIES

TABITHA  
BEYNEN



**TABITHA BEYNEN** served for 10 years in the CAF as a Medical Technician. Her story of her experience with posttraumatic stress disorder (PTSD) highlights the unique struggles related to women's mental health, being in survival mode and learning to live again with feelings and emotions. She also focuses on the unique needs and experiences of single parents struggling with PTSD. She currently serves as Lived Expertise Lead, Veterans at the Atlas Institute for Veterans and Families.

DR. KATE  
HILL MACEACHERN



**DR. KATE HILL MACEACHERN** is a Senior Research Associate at the Atlas Institute for Veterans and Families. Her work is anchored in social determinants of health with a particular interest in how sex- and gender-specific issues relate to mental health and well-being. She is a co-founder of the Athena Project, a community-engaged research initiative dedicated to conducting applied research in support of the mental health and well-being of women Veterans. She received a PhD in psychology from Carleton University.

### PRESENTATION SUMMARY

This session gave insight into the presenters' experiences co-creating a community-engaged research project on the sleep experiences of Veterans and Families. The project leads work together as equal partners, drawing on both learned and lived experience to ensure the research is relevant to the community while having a strong foundation in research practices. Co-creation can be beneficial and also challenging, which the presenters reflected on while sharing how important it was for them to communicate openly and honestly to develop a stronger study. The study was designed to gain insight into Veterans' and Families' sleep experiences and early results suggest that the community experiences several sleep-related

challenges. These include poor sleep quality, nightmares, nighttime vigilance and Family members being particularly affected by concern for their loved one's health or safety. The presenters highlighted that the results demonstrate the need for more research and tailored sleep supports for Veterans and Families.

“Over time, many of us have come to accept poor sleep as an inevitable reality.”

– TABITHA BEYNEN

## KEY MESSAGES

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1. **Research works better when people with lived experience are involved**, because it helps build trust and ensures the research focuses on what truly matters to the community. Open communication and letting go of assumptions can help researchers and people with lived experience work better together.
2. **Families are often overlooked in sleep research**, even though sleep problems affect both Veterans and their Families. Including Families in more research is important for ensuring services and supports reflect the experiences of and help the whole household.
3. **Veterans and Families experience more sleep problems than the general Canadian population**. The community would benefit from more research to understand the unique sleep-related challenges Veterans and Families experience, like discussing how to safely wake up a Veteran to avoid startling them.



# TRAUMA 101 FOR VETERAN FAMILIES: WHY UNDERSTANDING WHAT TRAUMA IS AND WHAT IT ISN'T IS ESSENTIAL FOR RESILIENCY IN TRAUMA-EXPOSED FAMILIES (TExF)

## PRESENTER BIOGRAPHY

DR. TIM  
BLACK



**DR. TIM BLACK** is the National Clinical Director at Wounded Warriors Canada (WWC). A clinician, researcher and program developer, he has been working with trauma-exposed professionals (TEXP) and their trauma-exposed Families (TExF) for his entire career. After more than 20 years as a tenured Associate Professor of Counselling Psychology at one of the top graduate programs in Canada, he left the academic world in 2024 to join WWC as National Clinical Director, where he currently oversees and supervises WWC's education, training and treatment programs for traumatized TEXP and their Families across Canada. Tim co-developed the WWC Trauma Resiliency programs (TRP1 and TRP2), Couples Overcoming PTSD Every Day (COPE) program, the Trauma Resiliency Training (TRT) and TRT for Leaders (TRT-L) programs, which have grown and expanded nationally and are now being delivered in multiple provinces in both official languages.

## PRESENTATION SUMMARY

“One of the biggest myths about trauma is that talking about it always makes it better.”

– DR. TIM BLACK

This presentation explained what TExF are and included information to help Families understand trauma. TExF are Family members of individuals who are chronically and continually exposed to traumatic events as part of their regular work duties. There are different types of traumatic exposure and even though someone may be exposed to traumatic events, they are not necessarily traumatized. The presenter gave an overview of how the brain responds to perceived threats and explained that someone who is traumatized may see everyday stress as life-or-death threats. The part of our brain that focuses on survival – which the presenter referred to as our “lizard brain” – can be injured by trauma, which causes it to react as if danger is always present. Helping Families understand trauma can make it easier to respond to these experiences with compassion.

## KEY MESSAGES

1. **Being exposed to trauma does not always lead to injury.** Exposure to trauma does increase risk, but injury is not inevitable.
2. **Trauma can change how the brain reacts to stress** and everyday situations. The traumatized person's survival system is working overtime, reacting as if danger is everywhere. This can show up as anger, shutting down, avoidance or emotional numbness.
3. **Families are impacted by and exposed to trauma too.** They can experience the effects of their loved one's trauma or feel the impacts of changes in communication, behaviour and close relationships. At the same time, Families can play a powerful role in recovery.

# FROM SHADOWS TO SHARED SPACES: PSYCHEDELICS AND EXPERIENTIAL THERAPIES IN TRAUMA RECOVERY

MODERATORS: Laryssa Lamrock and Polliann Maher

## PANELLIST BIOGRAPHIES

GORDON  
HURLEY



**GORDON HURLEY** (*he/him*) is a CAF Veteran who served 15 years as a light infantry airborne reconnaissance patrolman in the 3rd Battalion, Royal Canadian Regiment (RCR) and later as a special operator and Joint Terminal Attack Controller (JTAC) within Canadian Special Operations Command (CANSOFCOM). Following his medical release, Gordon co-founded All The Way Factory, a Veteran-led creative agency that uses storytelling, design and media to bridge the gap between lived experience and public understanding. As the Producer and Creative Lead of the Advance Force Operations documentary series, Gordon brings a Veteran lens to conversations about trauma, transition and recovery. The series focuses on evidence-based, medically supervised therapies for posttraumatic stress and related injuries, beginning with ketamine-assisted therapy. Gordon's advocacy is rooted in collaboration with clinicians, researchers and Veteran-serving organizations across Canada. He has briefed government and community leaders on topics including operator syndrome and alternative therapies, to improve access, reduce stigma and encourage data-informed dialogue.

BRIAN  
McKENNA



**BRIAN McKENNA** served for 19 years in the Canadian Army, retiring as a Warrant Officer. In that time, he served in Bosnia twice, both as a signaller and then a section commander. He then deployed to Afghanistan twice, once with the Canadian Army and once again as a NATO counter-improvised explosive device instructor. While seeking medical treatment post-release, he joined with other Veterans in petitioning the government for the creation of a centre focused on Veteran and Family mental health issues, resulting in the establishment of the Atlas Institute for Veterans and Families. Brian has incorporated both evidence-based and non-evidence-based practices in his recovery and currently serves as National Strategic Advisor, Veterans, for the Atlas Institute for Veterans and Families.

CANDICE  
MONSON



**CANDICE MONSON** is a Professor of Psychology at Toronto Metropolitan University and founder and CEO of Nellie Health. She is one of the foremost experts on traumatic stress, and specifically individual and conjoint therapies for PTSD and the interpersonal aspects of traumatization and recovery. She has received numerous awards for her clinical, teaching and research contributions, including Fellow status in the Canadian and American psychological associations, Association of Behavioral and Cognitive Therapies and Canadian Association of Cognitive and Behavioural Therapies. In 2025, she won the Canadian Psychological Association Award for Distinguished Contributions to Psychology as a Science. She has published more than 200 publications and co-authored eight books, including the treatment manuals Cognitive Processing Therapy: A Comprehensive Manual and Cognitive-Behavioral Conjoint Therapy for PTSD. She is also well-known for her clinical training and therapy dissemination efforts.

DR. J DON  
RICHARDSON



**DR. J DON RICHARDSON** is a psychiatrist at the Operational Stress Injury (OSI) Clinic in London, Ontario, Professor and Tanna Schulich Chair in Neuroscience at Western University and Director of the MacDonald Franklin OSI Research Centre. He also serves as Medical Advisor to the Atlas Institute for Veterans and Families and is a Fellow of the Canadian Institute for Military and Veteran Health Research. With more than 25 years of experience as a clinician-researcher and more than 100 peer-reviewed publications and book chapters, he is dedicated to advancing mental health care for military personnel and Veterans.

DR. THOMAS  
WASIUTA





**DR. THOMAS WASIUTA** is a psychiatrist primarily treating active-duty members of the CAF, Veterans and RCMP personnel. He has an undergraduate degree in neuroscience from the University of Toronto and completed his medical doctorate at Western University. Following residency training in psychiatry, he pursued additional fellowship training at the OSI Clinic in London, ON, treating PTSD and other OSIs. He has experience in novel therapeutic approaches

to PTSD treatment, having recently incorporated ketamine treatment into his work with CAF Veterans.

## PANEL SUMMARY

This panel discussion focused on the role of psychedelic-assisted therapies alongside conventional mental health treatment in trauma recovery among Veterans. The panellists discussed why some Veterans are exploring psychedelic-assisted therapies after traditional treatments for PTSD and stress injuries have not worked well enough. Throughout the discussions, panellists noted that these therapies are not quick fixes and do not work the

same way for everyone. They stressed that it's important for Veterans to be well-informed and ask questions to understand possible risks and benefits, so that they can make the best decision for themselves. However, many Veterans prefer to rely on advice and personal experiences from their peers because they don't always trust medical institutions. Open communication with health care providers, therapeutic supports and thoughtful preparation along with post-treatment integration were highlighted as important parts of psychedelic-assisted therapy.

 *We have a lot of work to do to gain the trust of Veterans. That's clearly number one — finding a trusted individual that you can speak to and share some of these concerns as you're trying to navigate all the different information you might receive.* 

— DR. J DON RICHARDSON

1. **Psychedelic treatments are not a cure-all and don't work the same for everyone.** They can be challenging and work best with proper support, information and therapy. Psychedelics are just one possible tool among many in a person's healing journey.
2. **Veterans' trust is shaped by lived experience and peer networks.** Veterans could be better supported by health care systems and providers that listen and communicate transparently and are culturally informed.
3. **When Families are informed and involved in recovery and treatment decisions, they can better support the person** going through the treatment while caring for themselves. Healing is stronger when it happens with supportive relationships rather than in isolation.

## VETERAN FAMILIES NEED SUPPORT TOO.

**We see you.  
We are you.  
This is for you.**

## WHAT WE HEARD<sup>ii</sup>

98%

of respondents were somewhat or very satisfied with the event overall.

98%

of respondents agreed or strongly agreed that the summit improved their understanding of Veteran Families' mental health and wellness needs and experiences.

85%

of respondents agreed or strongly agreed that their experiences were reflected in at least one session on Day 1.

89%

of respondents agreed or strongly agreed that their experiences were reflected in at least one session on Day 2.

## KEY FEEDBACK

### WHAT WAS THE MOST IMPORTANT THING YOU LEARNED FROM THIS EVENT?

- **Connection:** "I am not alone with what I am going through."
- **Continued learning:** "How important it is to continue to learn, to listen, and to be armed with resources to share as I don't have all the answers."
- **Resources:** "My Family has resources to help them live with my chronic pains, both mental and physical."
- **Importance of Families:** "Families DO play an important role in our Veterans' recovery."

### WHAT DID YOU ENJOY MOST ABOUT THE SUMMIT?

- Speakers and presentations
- Lived experiences shared
- Range and choice of topics

<sup>ii</sup> Based on 47 responses to the Veteran Family Summit 2026 post-event evaluation survey.