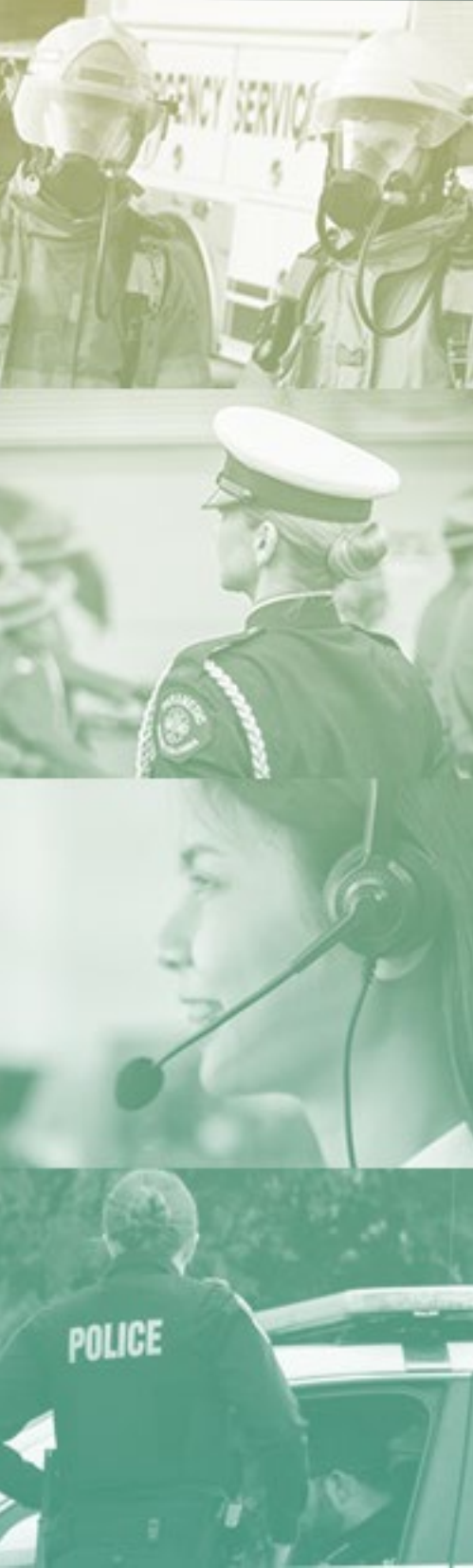


# Research gaps and knowledge needs related to the mental health of public safety personnel and their families



The Atlas Institute for Veterans and Families, in collaboration with the Canadian Institute for Public Safety Research and Treatment (CIPSRT), recently commissioned a project on the state of current evidence about public safety personnel (PSP) and PSP family mental health and well-being. The review aimed to identify research gaps and knowledge needs specific to post-traumatic stress disorder (PTSD) and related mental health conditions among PSP and their families. This resource summarizes the findings of this work, in order to increase awareness, influence research priorities, and support well-being.

## Context

PSP and their family members are frequently exposed to highly stressful, potentially traumatic events that can increase the risk of mental health problems and illnesses, including PTSD.

## Who are the public safety personnel referred to in this resource?

PSP work in a range of professions, including:

- Border services officers
- Correctional officers and correctional workers
- Firefighters (career and volunteer)
- Paramedics
- Police officers and support personnel (including municipal, provincial and RCMP)
- Operational and intelligence personnel
- Public safety communications officials (911 operators, dispatchers)
- Search and rescue personnel
- Emergency managers (including Indigenous emergency managers)

## What did the project involve?

This project was conducted in four phases:

- 1 A thorough literature review to identify research gaps and knowledge needs
- 2 Stakeholder consultations with PSP, families, researchers and service providers to identify and validate research gaps and identify knowledge needs
- 3 An environmental scan to review ongoing research and knowledge products
- 4 Analysis and summary of findings

Through this process, research gaps, knowledge needs, and current knowledge products and research initiatives were identified. A group of PSP and their families were invited to review and verify the findings, and to comment on whether the findings reflected their experiences or circumstances. This feedback was used to form recommendations on research and knowledge-sharing priorities.

## Key findings

*Table 1: Identified research gaps and knowledge needs*

CATEGORY OF INFORMATION	RESEARCH GAPS	KNOWLEDGE NEEDS
<p><b>Screening, assessment and treatment tools</b></p> <p>Specialized services needed for support</p>	<ul style="list-style-type: none"> <li>■ Evaluating the validity, general applicability and ability of current screening tools to assess a PSP's readiness to work after exposure to trauma</li> <li>■ The availability of practice guidelines around screening, assessment and treatment that are specific to PSPs</li> </ul>	<ul style="list-style-type: none"> <li>■ Information about available supports, resources and treatments</li> <li>■ Screening tools that can assist with predicting risk and future problems among recruits</li> </ul>
<p><b>Health services</b></p> <p>Treatment systems and treatment delivery</p>	<ul style="list-style-type: none"> <li>■ Help-seeking and use of services among PSPs and families</li> <li>■ Barriers to accessing and using services</li> <li>■ What inhibits and what facilitates the adoption of evidence-based practice among providers</li> </ul>	<ul style="list-style-type: none"> <li>■ Service navigation (where PSPs and their families can go for services)</li> <li>■ Ways to destigmatize help-seeking among PSPs</li> <li>■ Ways to foster collaboration between service providers</li> <li>■ Methods for providing "whole-person care"</li> </ul>

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CATEGORY OF INFORMATION	RESEARCH GAPS	KNOWLEDGE NEEDS
<p><b>Causes and impacts of PTSD and related mental health conditions</b></p> <p>Physiological, psychological, social and spiritual aspects</p>	<ul style="list-style-type: none"> <li>■ In general, risk factors and protective factors (factors that are associated with minimizing negative outcomes) for PSP are understudied.</li> <li>■ Risks and impacts over time (through longitudinal, qualitative studies) for specific PSP subgroups (e.g. PSPs who are Black, Indigenous and People of Colour [BIPOC], women, men, etc.)</li> <li>■ Impacts of PTSD on families, work performance, career trajectories, recovery, and financial status</li> </ul>	<ul style="list-style-type: none"> <li>■ Specific types of mental health injury resources that can be shared with colleagues</li> <li>■ How risk, resilience, recovery and protective factors affect short- and long-term experiences of PTSD and related mental health conditions</li> </ul>
<p><b>Risk and protective factors of PTSD and related mental health conditions</b></p> <p>Populations of Veterans that are more at-risk and factors that increase risk</p>	<ul style="list-style-type: none"> <li>■ Prevalence of PTSD and related mental health conditions among different PSP populations and subgroups</li> </ul>	<ul style="list-style-type: none"> <li>■ Statistics about the prevalence of PTSD</li> <li>■ Making PTSD prevalence statistics available and providing the information to workplaces and organizations</li> </ul>
<p><b>Prevention, mitigation and early intervention supports</b></p> <p>Supports that avoid or minimize impacts</p>	<ul style="list-style-type: none"> <li>■ Prevention, mitigation and early intervention (e.g. initial treatments and therapies) supports for PSP subgroups</li> <li>■ Evaluation of prevention, mitigation and early intervention programs</li> </ul>	<ul style="list-style-type: none"> <li>■ Development of more prevention, mitigation and early intervention strategies</li> <li>■ The availability of peer support and educational workshops and materials</li> <li>■ Currently available interventions (e.g. treatments and therapies) that are focused on problematic substance use</li> <li>■ The availability of facilitator-led group therapy following a traumatic event (i.e. critical stress debriefing)</li> </ul>
<p><b>Social services and supports</b></p> <p>All other supports needed</p>	<p>Return-to-work supports and programs</p> <p><b>Note:</b> <i>Few research gaps were identified for social services and supports, but this might not mean that the area is sufficiently researched (see “Limitations”)</i></p>	<ul style="list-style-type: none"> <li>■ Availability of employment transition supports and other social supports</li> </ul>

## Recommendations

- More research is needed on specific PSP occupations across all categories.
- More specific attention needs to be paid to research on public safety communication officials, border services officers, operational and intelligence personnel officers, and PSP living in rural communities.
- Research is needed on suicide risk and prevalence across all PSP sectors.
- In general, more knowledge products are needed for specific PSP subgroups (e.g. PSPs who are Black, Indigenous and People of Colour [BIPOC], women, men) and PSP families.
- Knowledge products are needed for certain occupations such as border services personnel.
- Resources should ideally be available in a variety of formats such as toolkits, research inventories, fact sheets, infographics and clinical guidelines.
- There may be value in a central website to share knowledge products among PSP.

## Limitations

- Gaps were identified based on their explicit mention in the reviewed published literature. If other significant gaps were not explicitly stated, they were not included.
- Some gaps identified from older research as part of the systematic literature review may already have been fully or partially filled. The search was also restricted to articles published between 2010 and 2021, and thus excluded research from before 2010.

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**Disclaimer:** Views and opinions expressed are solely those of the Atlas Institute for Veterans and Families and may not reflect the views and opinions of the Government of Canada.