

Recommendations: Victim Advocacy Coalition

Report submitted by the
Canadian Resource Centre for Victims of Crime
and the Canadian Association of Chiefs of Police's
National Working Group - Supporting Victims
of Terrorism, Mass Violence and Mass Casualty

||| MASS
CASUALTY
COMMISSION

Canadian
Resource Centre for
**VICTIMS
OF CRIME**
Dedicated to Justice



Centre canadien de
ressources pour les
**VICTIMES
DE CRIMES**
Au service de la justice



OVERVIEW	2
WHO WE ARE	3
EXECUTIVE SUMMARY	4
CRCVC RECOMMENDATION 1 – Trauma-informed & Victim-centred.....	6
CRCVC RECOMMENDATION 2 – Victims’ Rights	7
CRCVC RECOMMENDATION 3 – Coordinated, long-term, proactive provision of victim support services.....	9
CRCVC RECOMMENDATION 4 – Compensation & Financial Assistance.....	13
CRCVC RECOMMENDATION 5 – Mobilizing, Coordinating & Funding Grassroots Organizations.....	15
CRCVC RECOMMENDATION 6 – GBV/IPV	18
CACP NWG RECOMMENDATIONS.....	20
CACP NWG RECOMMENDATION 1: A Centre for Excellence.....	26
CACP NWG RECOMMENDATION 2: A Victim-centred Framework for Policing	28
CACP NWG RECOMMENDATION 3: Integrated Victim Resources	29
CACP NWG RECOMMENDATION 4: Engagement with federal and provincial Privacy Commissioners	31
CONCLUSION	32

OVERVIEW

We would like to begin by offering our condolences to the victims' families who suffered the loss of a loved one, and acknowledge the survivors, first responders and all those who have been impacted by this tragedy. Much of our work is informed by the voice of victims and survivors, and we rely on your guidance to help identify the support needed to help the community heal. We remember those you lost and are inspired by your courage and strength during this difficult time.

This Commission of Inquiry marks an important opportunity to fully consider the work that has been done and needs to be done by governments, first responders, victim serving agencies and community stakeholders in Canada to prepare for, and respond to, these types of tragedies.

Context

While the Canadian Resource Centre for Victims of Crime and the Canadian Association of Chief of Police's National Working Group – Supporting Victims of Terrorism, Mass Violence and Mass Casualty (CACPNWG) submitted separate applications for individual standing to participate at the Mass Casualty Commission, **both organizations were granted standing as a 'coalition'**. As a result, the recommendations expressed in this document are separated into two sections, the first articulate the views and recommendations the Canadian Resource Centre for Victims of Crime, and the second which articulate the views and recommendations of The Canadian Association of Chiefs of Police's National Working Group – Supporting Victims of Terrorism, Mass Violence and Mass Casualty.

Acknowledgements

We appreciate the opportunity to participate in The Mass Casualty Commission's public inquiry created to examine the April 18-19, 2020, mass casualty tragedy in Nova Scotia.

We cannot overstate the importance of a full and open public inquiry to the victims and survivors when a large-scale tragedy such as this occurs.

Our heartfelt gratitude must be extended to all the family members who shared their personal stories of loss, their endless grief and their continued struggle.

We look forward to the recommendations of the Honourable J. Michael MacDonald, Leanne J. Fitch (Ret. Police Chief, M.O.M.) and Dr. Kim Stanton and appreciate the consideration being given to the victims, survivors, and first responders involved in incidents of mass victimization.

Our organizations are dedicated to public safety. We, along with the families, hope to see the Commission's findings and recommendations implemented promptly by the government in order to ensure effective prevention strategies and response protocols are in place to assist Canadians.

WHO WE ARE

Canadian Resource Centre for Victims of Crime (CRCVC)

The CRCVC is a national not-for-profit organization providing emotional support and advocacy for survivors of violent crimes, including Canadians impacted by terrorism and mass casualties. It grounds its work in trauma-informed care and a victim-centred approach. It has decades of experience and knowledge on best practices, strengths and the weaknesses or gaps in the provision of victim support to Canadians involved in mass casualty/mass fatality incidents.

Our core services are victim advocacy, education and awareness, research, police liaison, survivor outreach, memorial assistance, and networking.

The Canadian Association of Chiefs of Police's National Working Group – Supporting Victims of Terrorism, Mass Violence and Mass Casualty (CACP NWG)

The CACP NWG was established in January 2018 in recognition of the need for, and value of, developing a victim-centred response to terrorism, mass violence, and mass casualty tragedies. It includes representatives from police services across Canada with a common aim to develop frameworks and programs to optimize a victim-centred response to mass violence and terrorist events – before, during, and after they occur. The NWG's work is also informed by educational collaboration with first responder agencies internationally that have been involved in situations of mass fatality. Finally, the CACP NWG has directly engaged with victims of mass violence and terrorism tragedies.

A central focus of our work involves the identification and refinement of trauma-informed models aimed at informing, supporting, and engaging victims, families, survivors, first responders, communities and all those impacted, while also upholding the rights and dignity of all persons.

The vision of the CACP NWG is to improve Canada's capacity to serve victims of mass violence through research, planning, training, technology, and collaboration. Our work focuses on identifying and planning for the needs of victims, families, survivors, and all those impacted by terrorism and mass violence not only in the short term, but also in the medium and long term. A critical piece of our current work is the operationalization of best practices, policy, and research into concrete action.

The CRCVC and CACP NWG share a common dedication to public safety.

The CRCVC provides a perspective focused on civil society and victim services, while the CACP NWG provides the police response viewpoint with a focus on victim support and providing pathways to care and victim services.

While public safety may be perceived from different lenses by our two organizations, both the CRCVC and the CACP NWG have identified the importance of ensuring a victim-centred approach founded upon the fundamental principles of respect, dignity, and equality of all persons. This approach ensures that victims, survivors, families, first responders and all those impacted by these tragedies are treated with the respect, compassion, and dignity they deserve, and that their rights are respected and protected.

The victim-centred approach provides a supportive environment and coordinated services. It ensures that victims have the information they need, have an opportunity to be heard and to participate, and can be assured that their safety and protection is considered at all stages of the response.

Recognizing that each organization brings a different and unique perspective to recommendations, based on their respective roles and responsibilities, this joint submission consists of two sections:

- **Section 1: Recommendations from the Canadian Resource Centre for Victims of Crime:**
 1. **Trauma-Informed and Victim-Centered** - Victim support services following mass casualty events should be provided in a trauma-informed and victim-centred manner.
 2. **Victims' Rights** –Victims' rights, as they presently exist, should be strengthened through legislative amendments. The provision of physical, psychological, and social assistance should be guaranteed. All victims of crime and mass casualty events should be promptly, clearly, and comprehensively informed of their rights as victims.
 3. **Coordinated, long-term, proactive provision of victim support services** – Health services, psychological first aid, needs assessments and information and legal services should be provided both in the immediate and long-term aftermath of a mass casualty event.
 4. **Compensation & Financial Assistance** –Victim compensation should be federally secured and standardized across the country.

5. **Funding, Mobilizing and Coordinating Grassroots Organizations** – Grassroots victim support services assist victims of crime in avoiding repeat victimization and keep victims from becoming future perpetrators. Their funding should be secured.
 6. **GBV & IPV Prevention** – Education, outreach & intervention initiatives should be widely deployed to help avert future mass casualty events.
- **Section 2: Recommendations from the Canadian Association of Chiefs of Police’s National Working Group – Supporting Victims of Terrorism, Mass Violence and Mass Casualty:**
 1. **A Centre for Excellence**
 2. **A Victim-centred Framework for Policing**
 3. **Integrated Victim Resources**
 4. **Engagement with federal and provincial Privacy Commissioners**

CRCVC RECOMMENDATION I – Trauma-informed & Victim-centred

Broadly speaking, **victim support services** following mass casualty events should always be provided in a **trauma-informed** and **victim-centred** manner. **Trauma-informed** means that care providers presume that an individual is more likely than not to have a history of trauma. **Victim-centred** means emphasizing the needs and concerns of the victims of a mass casualty event.

A **trauma-informed** care approach seeks to avoid re-traumatizing already traumatized individuals. This approach recognizes the presence of trauma symptoms and acknowledges the devastating, ongoing impact trauma may visit on a person's life. A trauma-informed approach requires systematic re-education to shift care providers and officials from asking, "what is wrong with this person?" to "what has happened to this person?" This approach intends to provide support services in a way that is accessible and appropriate to those who may have experienced trauma.

Individuals with a pre-existing history of trauma are more likely to suffer long-term negative physical and psychological impacts following a mass casualty event. Such impacts range from PTSD to anxiety and depression, as well as a range of downstream physical health complications.¹

A trauma-informed approach begins with understanding the physical, social, and emotional impact of trauma on an individual, as well as on the professionals who help them. This includes **victim-centred** practices that recognize the prevalence of trauma, the effects of trauma on individuals involved and the appropriate protocols put into practice to respond to trauma.

A **victim-centred** approach emphasizes the needs and concerns of a victim to ensure the compassionate and sensitive delivery of services in a nonjudgmental manner. Service providers seek to minimize re-traumatization by providing accessible services while empowering victims in the process.

Victim support services that are **trauma-informed** and **victim-centred** recognize the signs and symptoms of trauma, respond to trauma's widespread impact and open potential paths for healing. When victim support services are trauma-informed and victim-centred, policies, procedures, practices, and settings can be developed in such a way as to prioritize victims' safety and security, safeguarding against unintentionally re-traumatizing the victims of crime and mass casualty events.

¹ See Grete Dyb, *et al*, "Survivors and the Aftermath of the Terrorist Attack on Utoya Island, Norway: Report from the Mass Casualty Commission" (March 2022) [Utoya Island Commissioned Report].

CRCVC RECOMMENDATION 2 – Victims’ Rights

A key **systemic barrier** to victims of mass casualty events receiving necessary support services arises from the lack of access victims have to legal remedies when their rights are violated. The *Canadian Victim Bill of Rights (CVBR)* contains no provision providing for access to Judicial Review of the administrative decisions that affect the rights of victims in Canada.²

In 2020, the Office of the Federal Ombudsman for Victims of Crime reported several key deficiencies of the *Canadian Victim Bill of Rights* and highlighted the following areas requiring legislative amendment:

- i. The Act lacks recourse to a **legal remedy** for its violation;
- ii. The Act lacks **clearly defined roles and responsibilities**;
- iii. The Act **does not guarantee rights and services**, instead putting the onus on victims to assert their rights; and
- iv. The Act does not provide for **measurable implementation**.³

To date, the *CVBR* remains unamended. We join the Office of the Federal Ombudsman in all of the 15 recommendations in her report. We highlight, however, the following two recommendations as being especially important.

First, we recommend that the *Canadian Victims Bill of Rights*, sections 6, 7 and 8 be amended to guarantee that a **proactive approach** is implemented in informing victims of their rights.⁴ Presently, the *CVBR* places an onus on victims to seek out information about their rights as victims of crime.⁵ The *CVBR* should be amended to ensure that victims of crime and mass casualty events are promptly provided with this information as a matter of course.

² *Canadian Victims Bill of Rights*, SC 2015, c 13, s 2 [CVBR].

³ “Progress Report: The Canadian Victims Bill of Rights,” Office of the Federal Ombudsman for Victims of Crime (November 2020) [Progress Report].

⁴ *Canadian Victims Bill of Rights*, SC 2015, c 13, s 2 [CVBR]. See also Progress Report, *ibid*, at 16-17.

⁵ *CVBR*, *ibid*, ss 6-8.

A simple and efficient means of doing this has been developed and adopted in numerous jurisdictions around the world – that is, to provide victims of crime with a **Victims’ Rights Card** that, in plain language, lists the rights of victims and explains how they can be asserted. We recommend that a national **Victims’ Rights Card** be created and given to first responders and others usually involved in providing victims with support services – i.e., police, fire and ambulance workers, health care providers, social workers, and others.⁶

Second, victims’ rights to support services should be guaranteed by federal statute and their provision subject to legal remedy. In accord with the United Nations *Declaration of Principles of Justice for Victims of Crime*, the *CVBR* should be amended to guarantee victims’ access to medical, psychological, legal, and social assistance.⁷ Further, infringement of the *CVBR* should be subject to legal remedy.⁸ Presently, victims of crime are explicitly denied legal standing to appeal or seek redress for decisions that have violated their rights.⁹

While legislating the Ombudsman’s recommendations would certainly go a long way towards buttressing victims’ rights in Canada and getting them operational, not all recommendations need to wait on legislation to achieve this aim. The victim’s rights card, for example, could be deployed even at the provincial & municipal levels.

⁶ See “Progress Report: The Canadian Victims Bill of Rights,” Office of the Federal Ombudsman for Victims of Crime (November 2020) at 16 [Progress Report].

⁷ *Supra*, note 3, at 16. See also, *Declaration of Principles of Justice for Victims of Crime and Abuse of Power*, 21 November 1985, 40 UNGA 34 at 213 [UN Declaration].

⁸ *Ibid* at 19-20.

⁹ *CVBR*, *supra*, note 2, ss 27-29.

CRCVC RECOMMENDATION 3 – Coordinated, long-term, proactive provision of victim support services

In the wake of a mass casualty event, numerous distinct types of victim support services need to be efficiently and sensitively provided. These include:

- **Health Services/Emergency Response** – The most immediate needs of victims of mass casualty events are often physical – they involve getting to a place of safety and having their physical injuries treated. Despite the urgency of the situation, first responders should be alive to the fact that it can be easy to re-traumatize the victims of mass casualty events.¹⁰ Emergency response should be provided with attention paid to the spiritual and cultural needs of the victims, and with the knowledge that physical injuries correlate strongly to later PTSD.
- **Immediate Support Services & Psychological First Aid** – Counselling and psychological assessment should be freely and accessibly provided as quickly as possible following a mass casualty event. Early-intervention counselling can help stabilize those affected, provide support to prevent maladaptive coping, facilitate a better understanding of what is occurring and determine victims' immediate mental health needs.
- **Needs Assessments & Coordinating the Provision of Services** – Formalized needs assessments can help to identify the type of services a victim requires. The assessment should take into account the unique needs of the victims, including needs relating to age, health, language, and cultural considerations. The coordination of service provision should include, but not necessarily be limited to, transportation and travel, temporary housing assistance, emergency food and clothing, employment considerations, childcare/animal care, etc.
- **Information Services** – Victims and their families have ongoing needs for information about what's happening and why. Regular briefings should be provided directly to the victims of mass casualty events and their loved ones. Information should always come from an official source. Information about casualties should be provided to families directly as soon as it is received and before the media receives it. Official sources should also provide information on missing persons and provide a means for families to be reconnected. As victims' contact with the media following mass casualty events can be re-traumatizing, coping strategies should be suggested. Finally, officials should encourage the media to adopt a no-notoriety policy concerning the perpetrator.

¹⁰ The Utoya Island Attack presented an extreme, though sadly relevant, example of this possibility of re-traumatization: because the perpetrator had disguised himself as a police officer, many victims viewed the arrival of police as a new threat. See Utoya Island Commissioned Report, *supra*, note 1 at 1-2.

- **Legal Services** – Navigating the complex web of criminal procedure, victims’ rights and the patchwork of territorial compensation and financial assistance programs can be difficult, especially in the immediate aftermath of trauma. Legal advice should be freely available to victims following a mass casualty event. This advice should explain the criminal investigation and prosecution process, victims’ legal rights of participation, as well as any compensation and financial entitlements available to them.
- **Memorials** – Physical memorials of remembrance allow survivors, family members, and members of the public to gather and pay tribute. Memorials should be erected as quickly as practicable following the incident. Victims should be included and consulted in the development of permanent memorials

In the early stages, **Survivor Resources Centres** (SRCs) have proven to be a practical and victim-centred means of meeting many of the aforementioned needs in a **coordinated** way. SRCs provide a centralized location that can be utilized as a sort of **victim services hub**.*

The central function of such centres is to provide a place where victims and their loved ones can gather to receive information and access support from relevant agencies without the need for complex referral systems. SRCs can also act as a “home base” for victims and their loved ones who want to visit the scene(s) where the critical incident took place.

SRCs enable a necessary and timely two-way flow of accurate **information** between families and responders. This information flow can alleviate some of the trauma associated with the aftermath of such events. Difficult processes such as identifying bodies or the transportation of remains can be expedited. Families can assemble for daily briefings about the incident: even if not much information is known, ensuring the most accurate information is being regularly provided can ease the psychological burden of not knowing.

*Survivor Resources Centres are known by different names in different places, for example, Family Resources Centres. Similarly, Victim Navigators are often known by other titles.

SRCs should be staffed with **Victim Navigators** – specialized workers who can provide victims with a formalized **needs assessment** – to help victims locate necessary services. Victims’ needs can be varied, ranging from immediate medical care to counselling to financial assistance. Victim navigators serve to help victims quickly and efficiently find the support they need. Relatedly, SRCs should also be prepared to connect victims with transportation and travel services, temporary housing assistance, employment assistance, etc. Terrorist actions or mass casualty events upend victims’ lives and their needs in the aftermath are multitudinous. Dedicated victim navigators can help victims ease some of the stress and trauma associated with trying to re-establish their lives in the wake of a critical incident.

On their own, of course, SRCs will be insufficient to the task of providing victims with the coordinated, proactive outreach necessary to connect them with the victim services they need. Follow-up needs assessments should be conducted in both the medium- and longer-term.

Practically speaking, not all victims of a mass casualty event will reside near the site, and as time passes, survivors are likely to spread out further.

As such, coordinated, proactive outreach regimes should be implemented immediately following a mass casualty incident.

Norway’s National Outreach Program, which followed the Utoya Island Attack, sets a reasonable baseline for what this proactive outreach should look like.¹¹ It relied on three primary principles:

- i. **Proactive, early outreach:** Victims were contacted, assessed, and given information about the outreach program within days of the attack.
- ii. **Continuity:** A single healthcare professional was assigned as the outreach program’s “contact person” for a designated geographical area. This contact person was required to make direct contact with survivors and their families, provide regular standardized psychological assessments, and connect those in need to the victim support services best suited to help.

¹¹ Utoya Island Commissioned Report, *supra*, note 1 at 3-5.

- iii. **Targeted Interventions:** Specialist referrals were available for any survivors who expressed a need for treatment, showed symptoms of PTSD, anxiety, depression, etc., or displayed signs of maladaptive coping.¹²

The Aftermath Study suggests areas where the Outreach Program needs buttressing. For one, outreach should continue for several years, post-incident as the emotional and physical side-effects of intense trauma experiences can be long-lasting.¹³ For another, physical symptoms should be assessed in addition to psychological ones, as physical symptoms like headaches, pain and other functional impairments can be a sign of post-traumatic difficulties maintaining a healthy lifestyle; such physical complaints also correlate to PTSD.¹⁴

As well, outreach programs should extend to survivors' families and caregivers. The Aftermath Study found that members of these secondarily-affected groups continued to experience high levels of emotional distress for years after the event.¹⁵

Particular attention should also be paid to victims of minority backgrounds and young survivors. Efforts should be made to ensure that language and cultural barriers are minimized, as this can often disrupt the efficient provision of necessary services to minority survivors.¹⁶ Young victims can prove particularly vulnerable to a vicious snowball effect as trauma following a mass casualty event can impact academic and social development and, thereafter, future educational and employment prospects.¹⁷

Long-term, proactive, and coordinated outreach also has the ancillary benefit of providing feedback and data to victim service providers. Complaints expose what is not working. Large-scale analysis can hone and inform best practices. The long-term effects of extreme trauma remain an understudied science. Victim service provision is an ever-developing field. The information gathered through long-term, proactive, and coordinated outreach can only serve to make it better.

¹² *Ibid* at 4-5.

¹³ *Ibid* at 12 and 27.

¹⁴ *Ibid* at 13-15.

¹⁵ *Ibid* at 12; 27-28.

¹⁶ *Ibid* at 28.

¹⁷ *Ibid* at 16-17; 28-29.

Victim compensation schemes differ across the provinces and territories. The types of compensation offered, the size of the available awards, and the rules applicable to these awards' dispersal vary widely.¹⁸

Victim compensation should be federally secured and standardized.

Victimization disrupts lives. It results in lost income and increased expenses. These financial stressors can exacerbate the negative mental and physical health impacts of trauma. Often, the simplest and most direct means of helping victims physically and emotionally rebuild their lives is to provide them with the financial means to do so.

The United Nations *Declaration of Basic Principles of Justice for Victims of Crime and Abuse of Power* Articles 12 and 13 calls on national governments to secure and standardize victim compensation funds.¹⁹ Canada's patchwork territorial regime does not meet this standard.

We submit that, rather than relying on surcharges collected from offenders or provincial and territorial funding programs, a system of federal transfer payments be established for victims' services across Canada. A federally-mandated set of minimum standards should be tied to the transfer payment system, in a similar vein to the conditions set out in s. 7 of the *Canada Health Act*.²⁰

Such standards should be **needs-based**, taking a holistic, trauma-informed approach to assessment and compensation. The current crime-centred approach to compensation – compensation is available only where charges have been laid and the offence is violent; compensation usually requires victims to report to the police, and compensation is sometimes unavailable for those with

¹⁸ For comparative tables of the compensation programs available across Canada, see: "Summary of Criminal Injuries Compensation Programs" *Canadian Resource Centre for Victims of Crime* (October 2021); online: <https://crcvc.ca/wp-content/uploads/2021/10/Summary-of-Criminal-Injuries-Compensation-Programs-2021_EN.pdf>; and "Summary of Types of Compensation Offered, by Province" *Canadian Resource Centre for Victims of Crime* (October 2021); online: <https://crcvc.ca/wp-content/uploads/2021/10/Summary-of-Types-of-Compensation-Offered-by-Province-2021_EN.pdf>.

¹⁹ UN Declaration, *supra*, note 7, Articles 12 and 13.

²⁰ *Canada Health Act*, RSC 1985, c. C-6, s 7. The section sets out the minimum criteria provincial healthcare plans must meet in order to be eligible for the Canada Health Transfer.

criminal records²¹ – prioritizes law enforcement objectives and conflicts with the current scientific understanding of multiple victimizations and the cumulative impact of trauma.²²

Compensation schemes should be designed to promote healing and avert repeat victimization. Fundamental to such an approach is a renewed, trauma-informed, needs-based approach to assessing victims' requirements for compensation and financial assistance. Rather than trying to single out the financial consequences of one particular offence or event, compensation schemes should attempt to address victims' basic physical and emotional needs – this means adequate health and mental health care, but it also means adequate food, shelter and safety.²³

Following a traumatic event, people need the basic necessities of life first and foremost. In many tragedies, responders have found people unwilling to attend counselling or even talk about psychological and mental issues if they do not have the primary necessities. Only once victims are secure in their basic needs can they begin to think about their mental health and any invisible injuries they may be experiencing.

Financial assistance should also be provided to cover unexpected, non-medical expenses related to victimization: e.g., funeral expenses, lost income, travel, etc.

Finally, victims who receive compensation or financial assistance should also be provided with advice on how to manage the money, so that it is not an additional emotional stressor.²⁴

²¹ For more on the crime-centered vs victim-centered approach to compensation, see: Jo-Anne Wemmers, *Compensating Crime Victims: Report Prepared for the Office of the Federal Ombudsman for Victims of Crime* (March 2021); online: <<https://victimsfirst.gc.ca/res/cor/CCV-CCV/Report%20-%20Compensating%20Crime%20Victims%20-%20EN.pdf>>.

²² *Ibid* at 36.

²³ *Ibid* at 36-37.

²⁴ Utoya Island Commissioned Report, *supra*, note 1 at 18.

CRCVC RECOMMENDATION 5 – Mobilizing, Coordinating & Funding Grassroots Organizations

In the wake of mass casualty events, organizations with the in-built knowledge to provide services in a victim-centred and trauma-informed way need to be mobilized and integrated into the emergency response from the outset.

These organizations serve two vital functions: **First**, they help survivors process trauma and loss and help them rebuild their lives to avoid repeat victimization. **Second**, they help to keep present-day victims from becoming future perpetrators.

One-time victims are more likely than the general population to become repeat victims.²⁵ Victimization is particularly prevalent among younger people and members of minority groups.²⁶ Childhood mistreatment, particularly, correlates with a greater likelihood of being victimized as an adult.²⁷ Adverse childhood experiences have lasting, negative impacts on health, general well-being, education, and job potential. They raise the long-term risk for injury, sexually-transmitted infection, teen pregnancy and pregnancy complications, involvement in sex-trafficking, and numerous chronic diseases. Toxic stress from these experiences often manifests later in life in a difficulty in forming healthy relationships, securing stable employment and mental well-being.²⁸

Taken altogether, what this means is that a vicious cycle of victimhood affects a marginalized group of Canadians.

What's more, when this cycle becomes established, these victims often lash out and become perpetrators themselves.

²⁵ Alexandrine Lussier, Jo-Anne Wemmers & Katie Cyr, "Polyvictimization: What Is It and How Does It Affect Intervention?" Centre International de Criminologie Comparée (October 2016) at 2; online: <https://www.cicc-iccc.org/public/media/files/prod/onglet_files/8/RIB_polyvictimisation_Final_ANG2S.pdf>.

²⁶ Adam Cotter, *Criminal Victimization in Canada, 2019*, Canadian Centre for Justice and Community Safety Statistics (August 2021); online: <<https://www150.statcan.gc.ca/n1/pub/85-002-x/2021001/article/00014-eng.htm>>.

²⁷ *Ibid.*

²⁸ Fast Facts: Preventing Adverse Childhood Experiences, *Centres for Disease Control and Prevention* (last updated 6 April 2022); online: <<https://www.cdc.gov/violenceprevention/aces/fastfact.html>>. See also: Nadine Burke Harris, *The Deepest Well: The Long-Term Effects of Childhood Adversity*, (Boston: Mariner Books, 2018).

Of particular concern is a sub-group of victims, polyvictims. These victims experience not only more incidents of victimization, but also different types of victimization. Polyvictims are significantly more likely to experience more serious incidents of victimization, i.e., involving weapons, injuries, and sexual victimization.²⁹ Polyvictimization correlates strongly with PTSD and other significant mental health issues, like anger and grievance.³⁰

Insofar as networks of grassroots victim services organizations can interrupt this cycle, they perform an invaluable public service and need to be securely funded.

An example of this type of network can be examined in Ottawa's Post-Incident Neighbourhood Support (PINS) Program.³¹ Funded by Crime Prevention Ottawa and led by the Rideau-Rockcliffe Community Resource Centre, the PINS Framework Project brings together community health and resource centres, social and victims service agencies, community housing, city government and Ottawa Police to coordinate community responses to traumatic events.

Such networks are critical to the coordinated response to mass casualty events. But they are just as, if not more, important in their day-to-day functioning. In the short term, they provide victims of crime with the support necessary to avoid repeat victimization. In the longer term, they build communities of support and keep victims from becoming future perpetrators.

Polyvictimization also correlates strongly with criminality, particularly among young polyvictims.³² There is evidence, too, that the causative flow runs from victimization to delinquency, as opposed to vice versa.³³

²⁹ Lussier, Wemmers & Cyr, *supra*, note 25 at 3.

³⁰ *Ibid* at 7.

³¹ "Post-Incident Neighbourhood Support: A Decade of Building Resilience in Ottawa Communities" Rideau-Rockcliffe Community Resource Centre (August 2022); online: <<https://drive.google.com/file/d/1FGKNCfLQAGB7fVcQP2o21E6WiX43FKC6/view>>. See also: "Post-Incident Neighbourhood Support Networks: A Framework for Implementation", Crime Prevention Ottawa, *et al* (March 2016, rev'd March 2017); online: <<https://www.crimepreventionottawa.ca/wp-content/uploads/2019/02/Post-Incident-Neighbourhood-Support-Network-2016.pdf>>.

³² Jo-Anne Wemmers, *et al*, "From Victimization to Criminalization: General Strain Theory and the Relationship Between Poly-Victimization and Delinquency" (2018) 13:4 *Victims & Offenders* 542; online: <<https://www.tandfonline.com/doi/full/10.1080/15564886.2017.1383958>>.

³³ *Ibid* at 544.

Wemmers, *et al*, find this connection especially evident where anger and grievance are present, as opposed to depression and PTSD.³⁴ Repeat violent or criminal victimizations – i.e., victimizations that seem unjust instead of accidental – appear more likely to provoke negative emotions like anger and grievance, creating pressure for corrective action (i.e., offending).³⁵ The parallels to Hoffman, *et al*'s findings that a preoccupation with grievance is a 'defining motif' among lone-actor gunmen is striking.³⁶

This causal link, though still speculative, seems mirrored in the childhood victimizations of the perpetrator and his actions on April 18-19, 2020.³⁷

Unhappily, no one can predict precisely who will become Canada's next mass murderer. No single personality profile fits all perpetrators.³⁸

In light, however, of an apparent causal chain from victimization to polyvictimization through anger and grievance to criminal action, it seems especially critical that strong and enduring networks of grassroots victim support services be established and maintained across Canada.

Victims of crime need to be connected to services that help them healthily process trauma. They need community support and assistance. They need the tools — psychological, financial, and social — to rebuild their lives and avoid repeat victimization.

The surest route to this goal is through funding, mobilizing, and coordinating the efforts of the grassroots organizations already doing this critical work throughout the country.

³⁴ *Ibid* at 551.

³⁵ *Ibid* at 552.

³⁶ See David C Hoffman, Lorne L Dawson & Willa Greythorne, "Core Definitions of Canadian Mass Casualty Events and Research on the Background Characteristics and Behaviours of Lone-Actor Public Mass Murderers: Submission to the Mass Casualty Commission" (June 2022) [Lone-Actor Commissioned Report]. 52-53.

³⁷ See: *Violence in the Perpetrator's Family of Origin: Foundational Document*, Mass Casualty Commission (7 July 2022).

³⁸ Lone-Actor Commissioned Report, *supra*, note 36 at 46

CRCVC RECOMMENDATION 6 – GBV/IPV

The Commissioned Report prepared by Professors McCulloch and Maher makes evident the link between gender-based violence and a substantial minority of mass casualty attacks.³⁹

It stands to reason that, if we're interested in taking positive steps towards preventing mass casualty attacks before they occur, this observed link suggests two avenues for intervention. **First**, by preventing gender-based violence in the first instance we might also prevent this substantial minority of mass casualty events. **Second**, by positively intervening after the gender-based violence event, but before the mass casualty event, we might disrupt this observed link.

The previous recommendation in this submission — that early, supportive intervention in victims' lives would decrease the incidence of both re-victimization and offence — applies equally well, here. Victims of intimate partner violence (IPV) and gender-based violence (GBV) must be empowered to change their lives, and the lives of their children and families, through well-funded, community-based social services.

We submit that the Commission should strongly consider all of the *Culleton, Kuzyk & Warmerdam Inquest* jury recommendations, but would particularly highlight Recommendations 18 – 22.⁴⁰ IPV and GBV support services must be financed and supported. Victims and children in at-risk environments must be given accessible pathways to safety and security.

We advise providing in-depth training to all stakeholders, including police, social services, victim services, court officials and lawyers on identifying and responding to IPV/GBV, coercive control and all issues pertaining to domestic and intimate partner abuse. Part of such efforts should involve deploying a simple checklist to help police officers identify coercive or abusive behaviours *in situ*.

We also recommend criminalizing repeated and insidious patterns of psychological abuse and control, similar to the provisions put forth in Bill C-247 – an act which sought to update the Criminal Code's understanding of coercive and controlling behaviour.⁴¹ Though the Bill was ultimately not enacted, many of its proposed amendments remain sound.

³⁹ Jude McCulloch & JaneMaree Maher, "Understanding the Links between Gender-Based Violence and Mass Casualty Attacks: 'Private' Violence and Misogyny as Public Risk" Expert Report Prepared for the Mass Casualty Commission (April 2022).

⁴⁰ *Jury Recommendations: Culleton, Kuzyk & Warmerdam Inquest*, Office of the Chief Coroner (28 June 2022) at 3-4.

⁴¹ Bill C-247, *An Act to Amend the Criminal Code*, 2nd Sess, 41st Parl (1st reading 5 October 2020).

All allegations of IPV and GBV must be thoroughly investigated by police, but criminal justice initiatives should also be supported by wider community education programs. These initiatives should include perpetrator intervention programs akin to those recommended by the *Culleton, Kuzyk & Warmerdam Inquest*.⁴²

The McCulloch and Maher Report makes clear the link between misogynistic and domestic violence and mass casualty attacks. GBV and IPV must be met with early, aggressive, and proactive intervention.

⁴² *Supra*, note, 40, Recommendations 32-39.

The Canadian Association of Chiefs of Police's National Working Group – Supporting Victims of Terrorism, Mass Violence and Mass Casualty (CACP NWG) is working to ensure innovative, flexible, and scalable solutions. This includes forward-looking options. The work of the CACP NWG is based on the following 4 pillars:

1. **Research and Development (Planning):** Identification of best practices in preparation for and in responding to incidents of mass victimization which are rooted in evidence-informed models, and build on tools, and lessons learned from the Canadian and international context.
2. **Training for Victim Specialists (Training):** Promoting the professional development and recognition of people working collaboratively to assist and support victims of terrorism and mass violence. Examining existing domestic and international training on the response to incidents of terrorism and mass violence, identified victim specialists training provided by the FBI and the Family Liaison Program in the United Kingdom (UK) as best practices.
3. **Policies and Protocols - Direct Support and Consultation (Operationalization):** Providing direct support to police services and all levels of government in response to mass victimization and/or terrorist incidents, and consulting in the development of policies and plans to ensure victims' needs are considered and planned for in all response frameworks.
4. **Technology:** Maximizing virtual capabilities/using technology to increase the impact and effectiveness of training and evidence-based services, collaboration, information sharing and accessibility, as well as public alerting systems in Canada. The use of technology as a communication tool early on, such as the UK's Major Incident Portal, the FBI's "Seeking Victims page" and the Website set up after MH17 should be considered.

It is important to acknowledge the good work that has been done, and is currently being undertaken by governments, first responders, victim serving agencies, and community stakeholders to prepare for and respond to these types of incidents.

Through our work, we have identified that support for victims of mass violence is complex and requires a flexible approach to adapt to each unique situation, and to each community as they have different organizational structures and capacities.

The key to an effective response is **preplanning**. Major incident response strategies must also include the added layer of capacity to respond to what we have learned in terms of the “predictable challenges”⁴³ faced in a mass casualty incident such as:

- identification of victims
- management of victim/family response
- communication
- resource coordination
- impact on responders and service providers

A common theme that has emerged from the available, collective lessons learned, both internationally and in Canada, is that those responsible for public safety and support must build on current response strategies to ensure that required protocols to effectively manage a mass victimization incident are pre-planned and are in place. These include, but are not limited to, protocols⁴⁴ for:

Victim Witness Identification – Victims lists	Cleaning and return of personal effects
Death Notification	Support services (victims, survivors, responders)
Family/Survivor Assistance Centres	Coordination, collaboration, and partnerships
Liaison between victims and investigation team	Community resiliency and counter narrative
Contact lists	Commemoration and memorials
Communication (tech, social, media, web, etc.)	Access to justice
Volunteer management	Specialized trauma care
Donation management	Evaluation of response and support
Incident Command	Expertise Development
Emergency transportation and travel	Peer Support Groups
Financial support (emergency and compensation)	

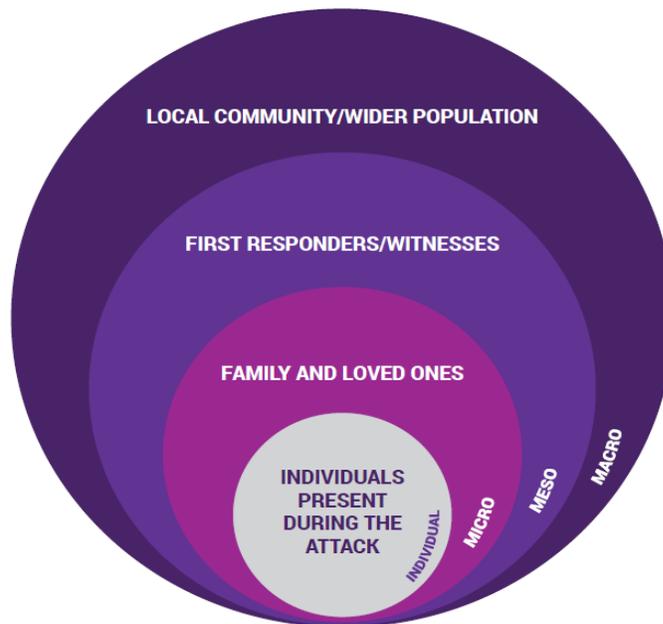
The key to an effective response is ensuring that a victim-centred approach is linked to Incident Command and Major Case Management. Two best practices that incorporate this approach are the FBI’s Rapid Response Teams and the United Kingdom’s (UK) Family Liaison Officer Program. In both programs, a senior person is in the Incident Command and Major Case Management structures. The FBI deploys a Victim Specialist Manager, and the UK deploys a Family Liaison Manager.

⁴³ Presentation to the CACP NWG on June 19, 2018, by FBI Victim Services Division

⁴⁴ INVICTM (2019). Supporting Victims of Terrorism, INVICTM Symposium, Strasbourg, France

Who is a victim?

Although there is a legal definition of victim of crime within the *Criminal Code*⁴⁵ and the *Canadian Victims Bill of Rights*⁴⁶, the CACP and leading victims' support agencies consider preplanning and response strategies with the lens of “circles of impact” when defining who is considered to be a victim.



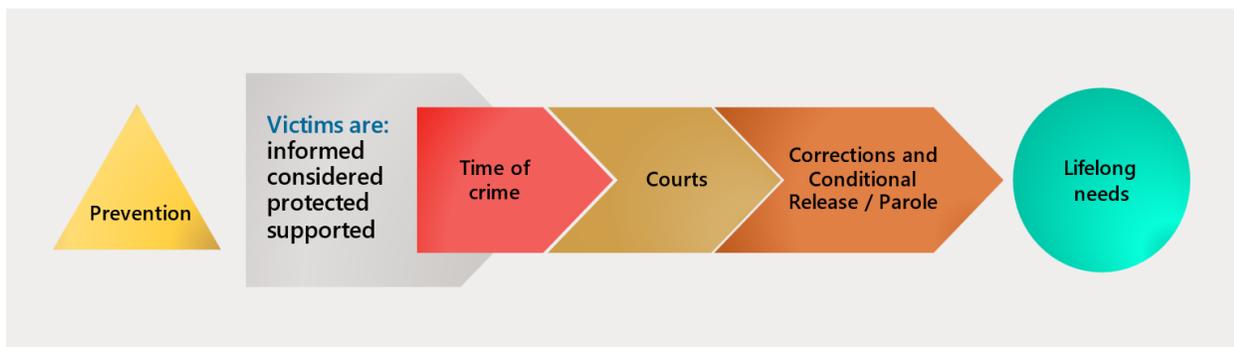
Incidents of terrorism and mass violence impact not only victims (including survivors and witnesses) and their families and loved ones in the traditional sense, but also first responders (e.g., police officers, paramedics, firefighters), other service providers (e.g., victim support services), and the broader community—all of whom are faced with the challenge of coping in the aftermath.⁴⁷

⁴⁵ *Criminal Code of Canada*, R.S., c. C-34, s. 2.

⁴⁶ *Canadian Victims Bill of Rights* (S.C. 2015, c. 13, s. 2)

⁴⁷ Mary Fetchet and Sue O'Sullivan, 'From Tragedy to Advocacy: Lessons Learned in Supporting Victims, Survivors, and Responders', *Police Chief* 88, no. 9 (September 2021): 92-101

Although every victim is unique, there are common themes in terms of victims' needs that must be considered and provided for in the preplanning and collaborative response strategies. The needs of victims, survivors, and families exist along a continuum — **the need to be informed, considered, supported, and protected** — and these needs must be considered within the criminal justice continuum in the short, medium, and long term.⁴⁸



In consultation with victims, we have identified the following as the short-medium-long term impacts and needs of victims of mass casualty tragedies. These were presented orally to The Mass Casualty Commission on August 29, 2022, by Mr. Susheel Gupta, Director of the Air India Flight 182 Victims' Families Association and Senior Strategic Operations Advisor with the Royal Canadian Mounted Police.

Immediate IMPACT on Victims & Victims' Families (Short-term)

- Injury or loss of life, loss of loved ones
- State of shock, disbelief, incapacitation, hysteria, break down
- Scrambling for help & support, state of confusion & stressed
- Grief, fear, loss of faith, helplessness, sense of emptiness, depression, anger, frustration, emotional instability
- Exposure to media publicity and lack of privacy

More information about the circles of impact can be found in the INVICTM 2018 Symposium report: INVICTM, *Support Victims of Terrorism: Report of the INVICTM Symposium in Stockholm 2018*.

⁴⁸ Sue O'Sullivan and Maria McDonald, 'The Victim-centred Approach: A Bridge to Strengthening Public Trust and Enhancing Community Partnerships', *Canadian Police Chief Magazine*, Fall 2021 edition, p. 6; online <https://www.cpcmagazine-digital.com/ccpt/0321_fall_2021/MobilePagedReplica.action?pm=1&folio=6#pg6>

NEEDS of Victims & Victims' Families (Short-term)

- Reliable & timely information & updates
- Rescue, recovery, medical aid
- Emotional counseling & trauma therapy
- Communication with family & friends
- Sensitivity & privacy protection
- Coordinated one-stop help & direction
- On-site assistance from Canadian embassy or Consulate
- Travel and transport assistance
- Socio-cultural support
- Emergency financial assistance-Compensation for medical and mental health costs, lost wages, and funeral expenses.
- Legal assistance: legal procedures, documents, insurance claims

IMPACT on Victims & Victims' Families (Medium to Long-term)

- Breakdown of family & its functioning
- Financial loss and insecurity
- Health problems-physical & mental (emotional scar)
- Fighting for justice in courts (civil & criminal)
- Fighting for improved security & legislative reforms

NEEDS of Victims & Victims' families (Long-term)

- Long-term medical care & emotional rehabilitation
- Personal security
- Socio-cultural support
- Help in networking with other victims & families
- Legal assistance
- Financial assistance and compensation
- Immigration assistance
- Assistance for participation in criminal justice proceedings
- Communication with Government agencies
 - Investigative agency or Justice dept.
 - Foreign affairs
 - Canadian embassy or Consulates
- Investigation into any unresolved questions (such as failure of public safety & judicial system)

IMPACT (HEALING PHASE) on Victims & Victims' Families (Long-term)

- Medical & psychological therapy, rehabilitation
- Reconciliation, resuming life routine, managing mood swings
- Rebuilding life: relationships, occupational & financial
- Reorienting life pursuits with new perspective and closure
- Spiritual insights into life

CACP NWG RECOMMENDATION I: A Centre for Excellence

The Government of Canada must be well prepared to support Canadians affected by mass victimization incidents, whether the incident occurs in Canada or Canadians are victimized abroad.

The United States established the National Mass Violence Victimization Resource Center (NMVVR) in October of 2017 and in 2019 the development of the EU Centre of Expertise for Victims of Terrorism was announced. Canada has no coordinating office for such tragedies.

An office which functions as a center of expertise could assist police services, governments, support agencies, and communities by increasing Canadians preparedness in developing a more consistent standard of victim response across jurisdictions in Canada, while building in flexibility to respond in ways appropriate to the specific community.

Such an office would also create a pool of subject matter experts who could be consulted to ensure that a victim's lens is applied in the development of emergency response frameworks throughout Canada.

More broadly, a victim-centred approach would offer significant benefits for victims and their loved ones in the context of mass victimization as it would allow victims to feel heard and also promote healing and resiliency. In addition, it would reduce the potential for further harm, re-victimization, and post-traumatic stress.⁴⁹ Such an office could also facilitate cross-border referrals of foreign victims, thereby helping to mitigate a lack of access to resources due to language barriers, lack of social networks, lack of awareness of the existence and accessibility of resources, or the lack of familiarity of the justice systems.

An office which functions as a centre of expertise would be consistent with the integrated approach to mass victimization and or terrorist incidents in *Canada's Counter-terrorism Strategy (2013)*⁵⁰ and *Federal Emergency Response Plan (2011)*⁵¹. It would allow for the mandates of all three levels of government to be respected while building capacity across all three levels to pre-plan for and respond effectively to victims in the short, medium, and long term.

⁴⁹ Victim-Centred Considerations for the Development of a National Security Framework, Submission to Public Safety Canada's National Security Consultation, Submitted by Sue O'Sullivan, Federal Ombudsman for Victims of Crime (December 2016), p. 19

⁵⁰ Canada's Counter-terrorism Strategy: Building Resilience Against Terrorism, 2013, Government of Canada; online <<https://www.publicsafety.gc.ca/cnt/rsrscs/pblctns/rslnc-gnst-trrrsm/rslnc-gnst-trrrsm-eng.pdf> >

⁵¹ Federal Emergency Response Plan, 2011, Public Safety Canada; online <<https://www.publicsafety.gc.ca/cnt/rsrscs/pblctns/mrgnc-rspns-pln/mrgnc-rspns-pln-eng.pdf> >

The establishment of an office which functions as a center of expertise will improve Canada's capacity to serve victims of mass violence through research, planning, training, technology, and collaboration which, in turn, would help build public trust and confidence in the governments' response to national security and mass violence incidents. This expertise will also have wide-reaching benefits relevant to other crimes.

In August 2020, the CACP adopted resolution 2020-01: Supporting Victims of Terrorism, Mass Violence and Mass Casualty⁵² calling on the Canadian Government to establish an office that functions as a center of expertise and a coordinating body that connects federal, territorial, regional, and local responses to victims of terrorist, mass violence and mass casualty events. This resolution was also referenced in a report by Special Advisor Ralph Goodale, on the Government of Canada's ongoing response to Iran's shooting-down of Flight PS752.⁵³

A Centre of Expertise committed to improving community preparedness, response strategies and capacity to serve victims, survivors, and families recovering from mass violence through research, planning, training, technology, and collaboration would help build on and complement the current emergency response mechanisms that have already been developed and implemented in communities across the country. Such a centre would be able to provide expert advice on:

- long-term, strategic, and comprehensive planning to consistently meet the needs of Canadian and foreign victims, families, and community members impacted by acts of terrorism, mass violence and mass casualty incidents in Canada,
- information management, coordination, and interoperability between first responders to ensure an effective victim support response immediately following and in the longer term after a mass casualty incident,
- standardized communications, policies, and practices between government, police, emergency management, and local partners,
- ongoing research and development to maximize the impacts of specialized victims support training, collaboration, and accessibility and,
- support to both police and government agencies in times of crisis or during an incident.

⁵² Resolutions adopted at the 115th Annual General Meeting of the Canadian Association of Chiefs of Police, August 2020; online < https://cacp.ca/resolution.html?asst_id=2221 >

⁵³ Flight PS752: The Long Road to Transparency, Accountability and Justice, Report of the Special Advisor to the Prime Minister, December 2020; online < <https://www.international.gc.ca/gac-amc/assets/pdfs/publications/flight-vol-ps752/flight-vol-ps752-en.pdf> >

CACP NWG RECOMMENDATION 2: A Victim-centred Framework for Policing

A framework for a victim-centred approach should be robust, tiered, flexible, and scalable to a mass casualty event.

Police services in Canada should integrate a victim-centred approach into planning, preparation, and response to mass violence incidents. A victim-centred approach needs to be utilized as part of everyday business with the communities that police agencies serve; so that in a crisis environment, in a mass casualty, it is not hard or impossible to achieve.⁵⁴

There are three overarching principles which are essential to ensuring a victim-centred response. These are effective communication, setting clear expectations, and understanding the needs of victims/survivors and family members and the communities the police serve.

For a victim-centred approach to be embraced, it needs to be written, be it a framework or a strategy. The framework must be clear, concise, supported by leadership at all levels, and known to be a fundamental principle/value, at the core of an organization's ethos.

A framework for a victim-centred mass casualty response is only effective if police organizations:

- a. Have a victim-centred mass casualty response integrated with the incident command structure,
- b. Pre-plan to know who to reach out to internally and externally to operationalize a victim-centred mass casualty response,
- c. Know what infrastructure they can utilize, in a timely manner, to support a victim-centred mass casualty response,
- d. Know what relationships they have both internally and externally to support victims/survivors and family members, and
- e. Ensure their members have the knowledge, training, skills, and resources to achieve a victim-centred mass casualty response.

The pillars for a framework for a victim-centred response/an approach to planning and preparation for critical incident response should consider four principles to support items a to e:

1. Assisting and understanding the needs of victims/survivors/family members/ communities,
2. Community partnerships and integrated response models,
3. Resourcing, expertise, knowledge, and training, and
4. Evaluation and evidence-based decision making.

⁵⁴ OPP Victim-Centred Approach

CACP NWG RECOMMENDATION 3: Integrated Victim Resources

Police should consider the integration of dedicated trained and tested resources within their investigative response to support victims/survivors and family members.

Different communities have different needs. International best practice illustrates that dedicated resources from a policing perspective are required to support and meet the needs and rights of victims when a mass casualty incident takes place. Police-based supports for victims can take the form of, for example, a Family Liaison Officer (UK Model) (FLO) and Victim Specialists (civilian) in the FBI (United States). Such dedicated resources support the police's obligations to victims and their rights under the *Canadian Victim Bill of Rights (CVBR)*. In addition, a Victim Liaison role is mandated, for example, in the Ontario Major Case Management Model to support victims during a major case; a role which can either be fulfilled by a civilian or an officer.⁵⁵

One example of an officer-led program can be found at the Toronto Police Service (TPS), where they have implemented a FLO program and the use of officers to support victims/survivors/family members in the immediate aftermath of a mass casualty.

The Ontario Provincial Police (OPP) has created a different solution, based on the civilian model, in keeping with the needs of the communities they serve.

These examples highlight the need for flexibility and confirm that one solution does not fit all because different communities have different needs and capacities. The model chosen by the OPP included creating positions and hiring civilian Victim Specialists to support victims and survivors throughout the investigative process. What began with a pilot in 2021 with the hiring of six Victim Specialists, resulted in great success with the current expansion of the program to five more detachments to support both the front line and victims/survivors/family members.

⁵⁵ [Ontario Regulation 354/04](https://www.ontario.ca/laws/regulation/040354) Major Case Management available at <https://www.ontario.ca/laws/regulation/040354>
See also <https://www.ontario.ca/page/major-case-management>

Since June 2021, the Victim Specialist Program has been proven to:

- reduce officers' workload thereby increasing the time officers can spend investigating (based on feedback from the front line/investigators),
- facilitate the employment of Victim Specialists who can act as a Victim Liaison Officer (VLO), upon request, in keeping with the Major Case Management Model,
- commitment to the VLO function for a longer duration, reducing victims' frustration with the *'revolving door'*,
- support a culture in the OPP that acknowledges the importance of a trauma-informed and victim-centred approach, which forms part of the core function to assist victims under the *Police Services Act*,
- support investigative excellence by understanding individual needs and by building trust, and,
- increase referrals to victim services.

Even if a framework for a victim-centred response exists and there are dedicated resources, preplanning and testing those plans is essential to determine if the plan can truly respond to the *'reasonable worst-case scenario'*. When testing those plans, police organizations need to be objective, rather than subjective. They must be candid about what they can and cannot do. In preplanning and testing plans, police must be accountable not only to themselves, but also to their team, and their communities, as they seek to identify gaps and answer the question *'what could we do better?'*. In other words, police need to test, de-brief whenever possible, re-evaluate what they can do better, and ensure that the changes are actioned and implemented with the appropriate resources and knowledge.

CACP NWG RECOMMENDATION 4: Engagement with federal and provincial Privacy Commissioners

There must be engagement with federal and provincial Privacy Commissioners, within existing structures, to support the sharing of information with relevant SMEs to identify and support victims/survivors in a timely manner in the immediate aftermath of a mass casualty event.

A victim-centred mass casualty response should incorporate relevant subject matter experts (SMEs), including community supports and victim supports, into plans and preparation for a critical incident response/mass casualty event.

A robust victim-centred approach acknowledges that we need and rely on our community partners and our municipal, provincial, and federal agencies to meet all the needs of victims/survivors.

The CACP NWG is aware of challenges that have arisen for victims/survivors, victim-serving agencies, and police when essential information is not shared between relevant subject matter experts (SMEs) in the immediate aftermath of a mass casualty. Challenges can arise in seeking to identify victims/survivors and for the purposes of family reunification due to the lack of sharing of information between agencies, such as hospitals, police et al.

It is recommended that there be engagement with federal and provincial Privacy Commissioners, within existing structures, to support information sharing with relevant SMEs during a mass casualty event. Subject to the outcome of that discussion, there may be a need for legislative change to balance these rights.

While the respect of privacy is essential, greater consideration must be given to increasing the capacity for agencies to be able to share information between one another in order to be able to provide effective and timely support services to victims and family members.

It is recommended that, in the interests of preplanning and the response that will be required to support victims during and after a mass casualty event, that privacy considerations and the sharing of information between agencies be considered to support/victims and family members.

CONCLUSION

The recommendations presented by the CRCVC and the CACP NWG acknowledge the need for change. The way forward must have a victim-centred and human rights approach at its heart if victim serving agencies and police services hope to prevent re-victimization, either directly or indirectly, for those they serve.

The key to a coordinated victim-centred response is preplanning and relationships with key partners established ahead of time and continuously strengthened, in order to collectively ensure victims' rights are protected, the necessary protocols are in place, and victims receive the information and support they need and deserve.

An approach that is fair and provides equal access to justice and provides victims, survivors, and those impacted with a voice and an opportunity to participate, will be important to the future success of our criminal justice system and to building and maintaining healthy and safe communities.⁵⁶

Thank you to the victims, survivors, families, first responders, and all those impacted by crime for your courage and inspiration. To first responders, victim advocates and victims serving agencies, thank you for what you do to make a difference for so many.

The CRCVC and the CACP NWG would also like to thank the Commission for the opportunity to participate and to make recommendations.

⁵⁶ Sue O'Sullivan and Maria McDonald, 'The Victim-centred Approach: A Bridge to Strengthening Public Trust and Enhancing Community Partnerships', *Canadian Police Chief Magazine*, Fall 2021 edition, p. 10; online <https://www.cpcmagazine-digital.com/ccpt/0321_fall_2021/MobilePagedReplica.action?pm=1&folio=10#pg10>