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## MENTAL HEALTH IN THE RCAF : FILLING THE GAP

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### JCSP 44

#### *Exercise Solo Flight*

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**MENTAL HEALTH IN THE RCAF: FILLING THE GAP**

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## MENTAL HEALTH IN THE RCAF: FILLING THE GAP

*"Aviation in itself is not inherently dangerous. But to an even greater degree than the sea, it is terribly unforgiving of any carelessness, incapacity or neglect."*

— Captain A. G. Lamplugh, British Aviation Insurance Group, London.

The mental health resources and services in the Canadian Forces are comprehensive, but they focus on initial training, post-event or trauma care, on incapacity, or preventing it. There is a significant gap in the middle, the duration of a member's service. The Royal Canadian Air Force (RCAF) is positioned to amend and reduce that gap for their members, ensuring continuity of mental health support from recruitment, through RCAF service, and into retirement. The routine operations and demands of the RCAF differ from those of the Royal Canadian Navy (RCN), Canadian Army (CA) and Canadian Special Operations Forces Command (CANSOFCOM). The RCAF may appear to be the 'easy-go' of the services, but this is deceiving. The mental health services available, while comprehensive and robust, do not sufficiently support RCAF personnel, particularly aircrew, during their flying tours. Fortunately, the existing organization of Squadrons and aircrew is suited to filling this gap. For a minor effort, the thirty-nine flying Squadrons of the RCAF may increase education on mental resilience instead of relying on the cure.

The RCAF environment provides mental challenges no less than other services and, in some cases, are unique. The Strong, Secure and Engaged (SSE) policy references a variety of daily domestic and international operations and highlights the need to support health and resilience, and psychological well-being.<sup>1</sup> This reference is focused on battle

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<sup>1</sup> Department of National Defence, Strong, Secure and Engaged (Ottawa: Canada Communications Group, 2017), 25.

stress and deployment. These include formal Operations, collective exercises, individual and crew training, and vital support to the RCN, CA and CANSOFCOM.<sup>2</sup> In particular cases, select RCAF squadrons have unique demands compared to the other services.

RCAF operations vary considerably, but are daily and worldwide. Only a rare Operation will see the other services operate without air power; helicopter transportation, fighter support, maritime air, strategic or tactical airlift, etc. However, it is not rare to have RCAF operations independent of the other services.<sup>3</sup> Operations CARRIBE, PROJECTION/NEON, BOXTOP, SABOT, IGNITION, REASSURANCE air-policing, NOBLE EAGLE/ACTIVE SKIES, MOBILE, PRESENCE, FREQUENCY, MINUSMA (Mali), OPEN SKIES, Air Task Force-Iceland, NORAD Quick Reaction Alert (QRA), and domestic Search and Rescue (SAR) are all examples of near, or entirely, independent RCAF operations.<sup>4</sup> While other services rotate high-readiness units on stand-by, the RCAF cannot always do this. There are three mental health challenges the RCAF faces outside of combat operations.<sup>5</sup> Long separations from family and home are not just encountered for formal operations. Domestically, the RCAF deploys daily. Within Canada, the RCN helps with floods, the CA with wildfires, but all with the RCAF. The RCAF then independently conducts airlift and evacuation from remote communities due to floods, i.e. the Kashechewan First Nation. SAR, sovereignty patrols, counter-drug

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<sup>2</sup> “Check Six”: An update on the RCAF’s past year. Canada. Department of National Defence. The Maple Leaf, accessed 14 March 2019.

<https://ml-fd.caf-fac.ca/en/2018/07/15614>

<sup>3</sup> RCAF Operations. Canada. Department of National Defence, accessed 14 March 2019.

<http://www.rcaf-arc.forces.gc.ca/en/operations.page>

<sup>4</sup> Current operations list. Canada. Department of National Defence, accessed 18 March 2019.

<https://www.canada.ca/en/department-national-defence/services/operations/military-operations/current-operations/list.html>

<sup>5</sup> Military Mental Health: Understanding the Crisis. United States. Psychology Today, accessed 15 March 2019.

<https://www.psychologytoday.com/ca/blog/when-your-adult-child-breaks-your-heart/201606/military-mental-health>

sorties are but a few of the other domestic, routine missions.<sup>6</sup> The very nature of the military lifestyle reduces the amount of control that an individual has over themselves. Consider a four year posting at a SAR squadron constantly rotating through the duty-aircrew role. The variety and pace of operations, postings and career progression, means constant uncertainty. The RCAF has three primary and twenty-two secondary SAR Squadrons. Primary SAR squadrons are operational every day, all year, in perpetuity.<sup>7</sup> Ultimately, twenty-five RCAF Squadrons may be called out for SAR duty, day or night, seven days a week.<sup>8</sup> Approximately one thousand SAR launches occurred in 2017.<sup>9</sup> SAR Techs have saved thousands of lives, but those lives were imperilled, damaged, or casualties.<sup>10</sup> NORAD QRA CF-188 Hornets are on permanent alert. DND's official website lists nine types of operations. Arguably, three are RCAF independent. Eight need the RCAF. Only one *may* not include the RCAF.<sup>11</sup> These postures and daily operations exacerbate the challenges of maintaining positive mental health.

Positive mental health in the CF is encouraged and strengthened by individual training after recruitment, and treatment after a mental injury. Individual mental resilience training is included in recruitment training, and termed the Road to Mental Readiness (R2MR). The Forces R2MR website details methods and training opportunities to increase members' resilience.<sup>12</sup> It is centered on the Mental Health Continuum Model and

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<sup>6</sup> RCAF Operations...

<sup>7</sup> About Search and Rescue (SAR). Canada. Department of National Defence, accessed 18 March 2019. <https://www.canada.ca/en/department-national-defence/services/operations/military-operations/search-rescue/about.html>

<sup>8</sup> Wings and squadrons. Canada. Department of National Defence, accessed 14 March 2019. <http://www.rcaf-arc.forces.gc.ca/en/wings-squadrons.page>

<sup>9</sup> "Check Six"...

<sup>10</sup> About Search and Rescue...

<sup>11</sup> Types of operations. Canada. Department of National Defence, accessed 14 March 2019. <https://www.canada.ca/en/department-national-defence/services/operations/military-operations/types.html>

<sup>12</sup> "Mental Health in the Canadian Armed Forces" Canada. Department of National Defence, accessed 14 March 2019.

highlights leadership responsibilities in preventing or managing distress in their subordinates (shield, sense, and support). It stresses that significant events may impact mental health (combat operations) but also the accumulation of smaller events, such as sustained SAR operations or NORAD QRA. The training includes skills that improve mental performance and mitigate mental injuries. Stress management provides tips to avoiding accumulation of stress. The site highlights the importance of Buddy Aid. Just as important is the education on barriers to care, such as over-reliance on self-treatment, fear of career consequences, fear of stigma, being too busy to seek help, and confidentiality concerns. Stigma is insidious as injured members perceive it affects their character and worth. Leadership can remind members that “having some psychiatric symptoms is part of the human condition and does not by itself indicate the presence of mental disorder.”<sup>13</sup> This is positive mental health education at the beginning a service member’s career.

Mental health resources are also available after a mental injury. The same website lists a number of resources.<sup>14</sup> These include Chaplain Services, CF Member Assistance Plan help-line, and Military Family Resource Centres. Their mandate involves Personal Development, Children and Parenting Support, Family Separation and Reunion, and Prevention, Support and Intervention. Further member and family support is offered by the Operational Stress Injury Social Support helpline. Mental Health Services are divided into three programs: Psychosocial Services, General Mental Health Program, and the Operational and Trauma Stress Support Centres. However, the Centres are admittedly

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<http://www.forces.gc.ca/en/caf-community-health-services-r2mr-career/index.page>

<sup>13</sup> High Rates of Military Mental Illness Are Wrong. United States. Psychology Today, accessed 20 March 2019.

<https://www.psychologytoday.com/ca/blog/saving-normal/201403/high-rates-military-mental-illness-are-wrong>

<sup>14</sup> Mental Health in the Canadian Armed Forces...

geared toward UN and NATO deployments abroad.<sup>15</sup> The myriad of RCAF missions means that many Operations and deployments do not fall into that priority. Veterans Affairs Canada also offers a number of programs available to retired members and their families.<sup>16</sup> The pre- and post-trauma and resiliency training and recuperation leaves a gap for RCAF members during their years of operational flying, but the RCAF is already situated to help itself.

The very nature of aircrew progression is a methodical stepping-stone approach to take new members to a high professional standard. This is a time-proven way of ensuring our expensive human and aircraft assets are used in the most effective means possible. The RCAF could use this existing methodology to the augment the mental health of aircrew with minimal cost in training time. The aircrew upgrade process is established, effective and may be easily modified to increase resiliency. The established progression in both competency and leadership includes close supervision by senior aircrew. When the mission demands stressful and potentially damaging mental commitment, Squadron supervision is already in place to aid in recuperation.

All aircrew start their careers as junior members at the beginning of their progression. Within each aircraft fleet there is a formal, documented and authorized process tailored to ensure a progressive increase of competency and capability. The 12 Wing Shearwater progression was labelled CUP, Category Upgrade Program. A new Air Combat Systems Operator (ACSO), responsible for a number of tasks on-board the CH124 or CH148 including weapons employment, navigation, communications and

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<sup>15</sup> Ibid,...

<sup>16</sup> Mental Health. Canada. Department of Veterans Affairs, accessed, 14 March 2019. <https://www.veterans.gc.ca/eng/news/vac-responds/just-the-facts/mental-health-facts>

mission planning, would start as a category 2 Tactics Officer (CAT 2 TACCO). From their first day on Squadron, they are provided with a CUP document, detailing a list of requirements to satisfy and ensure competency and knowledge progression. For example, the supervisor must endorse a specified number of Anti-Submarine Warfare flying hours were flown. The junior TACCO must present to the Squadron an aspect of maritime air operations. The template is in place. They will, with time and experience, become CAT 1 TACCO Leads. A Lead will then mentor a CAT 2 TACCO through their upgrade. This progression and supervision is natural to aircrew.

The progression and supervision continues throughout the aircrew career. CAT 1 TACCOs will eventually become Crew Commanders. This graduates responsibility from mentoring ACSOs to the entire crew. Pilots, Airborne Electronic Sensor Operators (AESOps), Loadmasters, SAR Techs, and other aircrew trades undergo a similar progression pattern. This training process is personal, detailed, formal and proven. It is reflective of the aircrew team as part of the weapon-system. The system must be successful for the mission to be successful. Mental health cannot be ignored if the weapon-system is to succeed.<sup>17</sup> Additionally, all aircrew complete a number of open and closed-book proficiency exams every year. 414 EWS Sqn annually completes open exams on Meteorology, Instrument Flight Rules, Aircraft Knowledge, Tactics, and monthly closed-book exams on aircraft emergencies, for example. Few trades face such sustained scrutiny. CUP and testing requirements regarding mental health would improve aircrew

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<sup>17</sup> Eradicating Mental Health Stigma in the Military and Beyond. United States. Psychology Today, accessed 20 March 2019. <https://www.psychologytoday.com/ca/blog/nurturing-self-compassion/201805/eradicating-mental-health-stigma-in-the-military-and-beyond>



mental health awareness.<sup>18</sup> From junior aircrew, to Lead, to element or detachment commanders, to Squadron Operations Officers, to Deputy Commanding Officers, to Squadron Commanding Officers, to Wing Commanders, all can play a role in mental health. Understanding where their subordinates fit within the Mental Health Continuum Model used by the CF and British Columbian First Responders is helpful.<sup>19</sup> The US Marines Corps incorporated an Operational Stress Control and Readiness program into existing operational training.<sup>20</sup> The RCAF can likewise incorporate mental health into existing training.

While research is largely focussed on combat deployments,<sup>21</sup> it can easily translate to frequent and non-combat daily deployments of aircrew and their fleets. This does not excuse the lack of study into ‘non-combat’ operations by our defence scientists.<sup>22</sup> Mental resiliency can be strengthened by leadership promoting balance between work and family, resolving conflicts quickly, and encouraging discussion.<sup>23</sup> This will mitigate effects of mental stressors outside combat operations. It is unacceptable to disregard the mental stressors of a SAR Technician parachuting from a CC-130J Hercules into the dark Canadian Atlantic to rescue a family on a sinking sailboat, only to find corpses. Combat

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<sup>18</sup> Vancouver Police Department, the Department of National Defence, and the Canadian Armed Forces. “Mental Health Continuum Model.” Accessed 20 March 2019, <https://bcfirstrespondersmentalhealth.com/wp-content/uploads/2017/06/MentalHealthContinuumModel.pdf>

<sup>19</sup> See Figure x.

<sup>20</sup> Promoting Psychological Resilience in the U.S. Military. United States. US National Library of Medicine, accessed 14 March 2019. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4945176/>

<sup>21</sup> Statistics Canada, *Mental health of the Canadian Armed Forces*. (Ottawa: Canada Communications Group, 25 Nov 2014).

<sup>22</sup> Research Advancing Canadian Armed Forces Mental Health Care. Canada. Department of National Defence, accessed 15 March 2019. <http://www.forces.gc.ca/en/caf-community-health-services/research-advancing-caf-mental-health-care.page>

<sup>23</sup> Developing Resilience. United Kingdom. mind.org, accessed 20 March 2019. <https://www.mind.org.uk/information-support/types-of-mental-health-problems/stress/developing-resilience/#.XG21Mk2Wyos>

in Afghanistan, in Mali, over Libya and Kosovo, were rotations. Personnel did their time and returned home. Traumatic, to be sure, but some RCAF Squadrons count such trauma as routine events. Mental resiliency involves not just the prevention of mental injury, it facilitates ‘bouncing back’ after mental trauma.<sup>24</sup> The CUP could facilitate this ability. It could be research into trauma therapy, depression, prevention or Buddy Aid. Explicitly addressing the issue, normalizing the notion of mental trauma, would reduce stigma. The CF is well placed to introduce resilience in recruits. It has committed resources to recuperation of mental injuries. In terms of the RCAF, a small effort at the Squadron level may provide the proverbial ounce of prevention to prevent the pound of cure, a notion with clear grounding in research.<sup>25</sup>

Mental health research has demonstrated that a number of activities are positive and effective in strengthening the resiliency of humans. Unit-level factors include a positive command climate, fostering teamwork and promoting unit cohesion.<sup>26</sup> Aircrew aboard a multi-crew aircraft base decision-making on experience and position, regardless of rank. A Captain can be the Crew Commander, with a lieutenant-colonel his co-pilot. This is unique. Crew cohesion is vital to success and can be exploited to incorporate mental health awareness, as crew cohesion minimizes the awkwardness of rank differential. Positive command climate has been identified as the most effective resilience factor.<sup>27</sup> If Squadron command accepts that an injury, broken arm, broken leg, etc., is a temporary condition, then it can accept a mental injury as a temporary condition to be

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<sup>24</sup> Road to Resilience. United States. American Psychological Association, 2019. Accessed 20 March 2019. <https://www.apa.org/helpcenter/road-resilience>

<sup>25</sup> National Centre for Biotechnology Information, “Is prevention better than cure? A systemic review of effectiveness of well-being intervention for military personnel adjusting to civilian life,” dated 2 May 2018, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4142017/>

<sup>26</sup> Promoting Psychological Resilience...

<sup>27</sup> Ibid,...

rehabilitated. Fortunately, the structure of aircrew training is amenable to many aspects of resiliency training; close supervision, small teams, constant progression and education, the trust to perform with expensive assets and weapons in an environment where no assistance is possible.

There is a further step the RCAF can take to assist the mental health of its personnel. Leadership is a soft-skill. Supervision of military personnel is an art, yet vital to mental health. A fighter pilot will return to 4 Wing Cold Lake after being scrambled by NORAD to intercept an Air Canada flight that did not answer the radio, or a Russian bomber, all the while flying an obsolete used Australian F-18.<sup>28</sup> A CC130H Hercules crew will fly in and out of a genocide in Rwanda, and return to 17 Wing Winnipeg the next day. A CC-177 crew will ferry a dozen shattered soldiers from Afghanistan to Landstuhl, Germany, and transit back to 8 Wing Trenton. A CH-148 crew deployed on a routine three week training sail at sea onboard HMCS *Halifax* may conduct a SAR sortie from the ship to recover the bodies of Philippine sailors drowned after their freighter sank in a storm.<sup>29</sup> CH-124 Sea King crews could spend days retrieving bodies from the ocean and never leave 12 Wing Shearwater. They all risk Operational Stress Injury.<sup>30</sup> By the nature of aerospace power, the RCAF excels at reach, flexibility, response, and air power projection. When called upon, the RCAF will employ violence. Violence makes headlines. Mental health is buoyed by public acknowledgement of service, but the nation

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<sup>28</sup> Opinion: The intricacies of indecisiveness show why Canada must prioritize the Air Force. Sakhi Naimpoor. Canada. Hill Times, 6 March 2019. <https://www.hilltimes.com/2019/03/06/the-intricacies-of-indecisiveness-show-why-canada-must-prioritize-the-air-force/190924>

<sup>29</sup> Sinking of the MV Leader L, March 2000.

<sup>30</sup> Allan English. "From Combat Stress to Operational Stress: The CF's Mental Health Lessons from the "Decade of Darkness"," Canadian Military Journal, Vol 12, No. 4: 11. In connection with the crash of SwissAir 111 off the coast of Peggy's Cove, NS, 1998.

does not acknowledge daily routine. Left unchecked, mental health issues will create a casualty as would a roadside IED. Self-medication with alcohol or substances will not be uncommon.<sup>31</sup> Leadership and supervision are required.

Squadron leadership is fully aware of all aircrew missions. Whether the QRA is scrambled from 3 Wing Bagotville for a forecasted Russian Bear sortie, or 442 Squadron locates a crashed Cessna, Squadron leadership is aware. A CP-140 Aurora will return from a mission having only documented a sinking ship and the death of sailors. Squadron leadership should be there upon their return. The near mid-air collision on a training flight in Moose Jaw should be explicitly addressed. Buddy Aid, acknowledgment of danger and risk, discussion of the bodies, should be a priority. Calling the Chaplain next week will not encourage the necessary discussion. Whether a Lead, Crew Commander, Flying Supervisor, Squadron Commander or Wing Commander, they should be waiting in the hangar, on land or at sea, after a mission to provide the Buddy Aid and ounce of prevention so vital to mental health. Military professionals are playfully arrogant and supremely self-confident. Aircrew, however, are 2.6 times more likely to die than their peers in the other environments, even during the war years of Afghanistan.<sup>32</sup> Leaving them to seek assistance voluntarily, as our health services demand, means a risk that they may not. This is not confined to the CF. The UK military also lacks specific mechanisms to monitor the mental health of their members during non-combat operations.<sup>33</sup> The US

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<sup>31</sup> Marc Dauphin, *Combat Doctor: Life and Death Stories from Kandahar's Military Hospital* (Toronto, Canada: Dundurn Press, 2013), 234-235.

<sup>32</sup> Derek Abma, Bradley Bouzane, Canadian soldiers have lower death rate than general public: study. Canada. National Post, 20 June 2011.

<https://nationalpost.com/news/canada/canadian-soldiers-have-lower-death-rate-than-general-public-study>

<sup>33</sup> Why is building psychological resilience relevant to UK Service personnel in order to improve military mental health? United Kingdom. *Journal of the Royal Army Medical Corps*, accessed 20 March 2019. <https://jramc.bmj.com/content/early/2018/05/25/jramc-2018-000962>

military has the “Comprehensive Soldier Fitness” program, but it remains controversial.<sup>34</sup> Squadron leadership is positioned to mitigate possible mental injuries in the absence of a formal program.

There is precedence for such intervention. While government authorities are legally mandated to protect privacy, there are exceptions. For example, certain aircraft require a ‘nude weight’ maximum.<sup>35</sup> This is a practical, safety-oriented directive. An Alpha Jet Martin-Baker ejection seat is engineered for a human with a maximum nude-weight of 209 lbs (life-support equipment adds significant weight). Squadron leadership has responsibility and authority to monitor a member’s weight. Supervisors likewise monitor completion of the FORCE Test. Physical fitness is acknowledged as vital to air operations while assessing mental fitness remains taboo.<sup>36</sup> Individual physical status may seem intrusive to civilians but is justified by the mathematics of engineering and survivability. Flight safety of expensive aircraft and aircrew lives justifies disclosure of some personal information. Similarly, the RCAF has recently introduced the Fatigue Risk Management System, a checklist to consider before a mission.<sup>37</sup> Sleep is a recognized augmentation of mental resiliency and acuity.<sup>38</sup> Supervisors assess the sleep quality of subordinates, another formalized assessment of individual aircrew. If the threshold for

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<sup>34</sup> Coalition for an Ethical Psychology, Does Comprehensive Soldier Fitness Work? CSF Research Fails the Test (Coalition for an Ethical Psychology, Working Paper Number 1, May 2012), 10.

<sup>35</sup> Squadron Orders. Canada. Department of National Defence. 414 Electronic Warfare Support Squadron, accessed 23 May 2019, pg 36.  
[https://collaboration-airforce.forces.mil.ca/sites/414SQN/Operations/20190410-U\\_REL-1600\\_1-414\\_EWS\\_SQN-SQN\\_ORDERS.pdf](https://collaboration-airforce.forces.mil.ca/sites/414SQN/Operations/20190410-U_REL-1600_1-414_EWS_SQN-SQN_ORDERS.pdf)

<sup>36</sup> Why is building psychological resilience...

<sup>37</sup> 1 Canadian Air Division: Flight Operations Manual. Canada. Department of National Defence. 1 Canadian Air Division, section 2.1.3.1, accessed 23 May 2019.  
<http://rcaf.mil.ca/en/1-cad/fom.page?>

<sup>38</sup> Developing Resilience...

crew rest is not met, the mission commander may ground the individual. Leadership is responsible for the health of their personnel.<sup>39</sup>

Mental health, resiliency, and readiness are no different than ensuring individual aircrew are physically able and rested to conduct their duties safely. When aircraft crash, aircrew perish, and missions remain incomplete. Such a loss may directly impact mission completion of the RCN, CA, or CANSOFCOM. Aircrew who are not sufficiently rested will make errors. One that hides a sprained ankle or vision issue may be unable to effect their duties. One that is mentally injured is no different. The days of judgment of ‘lack of moral fibre’ are behind Canadian society.<sup>40</sup> The “Bell: Let’s Talk” campaign is endorsed by DND.<sup>41</sup> Certainly, privacy from medical authorities is vital, it reassures and encourages those who seek help. However, military aviation is unforgiving even when routine. Submarines will blow ballast and crash into the air, maritime aircraft will crash into the sea. Mentally fit aircrew are vital to mission success. A better balance can be struck between aircrew that seek mental health assistance, a clinician, and a supervisor. Admittedly, this is fraught with risk in terms of privacy and perception, but a \$50 million taxpayer-funded helicopter holding four aircrew resting on the ocean floor is worse. This is not hyperbole, as the Cold War demonstrates. The RCAF lost over nine-hundred aircrew in peacetime, more than all CF losses in Korea, the Balkans, Gulf Wars, Afghanistan, and UN peacekeeping, combined.<sup>42</sup> This trend has lessened, but continues,

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<sup>39</sup> English. *From Combat Stress*... 14.

<sup>40</sup> Brian McKenna, and Terence McKenna, *The Valour and the Horror* (Canada: Harper Collins Press, 1991), 64.

<sup>41</sup> Bell Let’s Talk Day: Message from the Ombudsman. Canada. Department of National Defence, 30 January 2019.

<http://www.ombudsman.forces.gc.ca/en/ombudsman-news-events-messages/ombudsman-message-lets-talk-2019.page>

<sup>42</sup> Opinion: Canada’s forgotten Cold Warriors. Paul Manson. Canada. *The Globe and Mail*, updated 22 March 2018.

as aircrew are the most common cause of fatalities, though the risk of mechanical failure is ever-present.<sup>43</sup> A SAR pilot died in Labrador in 2002, a Snowbird in 2004, a pilot in Cold Lake in 2016, and SAR Techs in 2011 in Saskatchewan, and 2017 in the Arctic. Two aircrew died in a CH-124 in New Brunswick in 1994, three more in a CH-148 in 1996. CH-113 Labradors served 40 years, saved thousands of Canadians, but cost seven aircrew lives.<sup>44</sup> Many more have perished during routine peacetime domestic training and operations. Aviation is unforgiving, in peacetime or war. Physical health is vital, but so is mental health and acuity. The challenges of military aviation and operations can damage mental health. The balance between legally mandated privacy and the lives of aircrew is antagonistic, but education and assistance saves lives.

The RCAF and aircrew training are effectively situated to provide this additional layer of education and assistance. Adding mental health resiliency training, associated education, and learning tasks to the upgrade process would mitigate some mental challenges. The CF provides mental preparation, and later, recuperation. The RCAF can fill the gap in-between for its aircrew. Aviation involves risk, military aviation more so. Physical health is monitored and evaluated, but military aviation also depends on mental health, and this is also the responsibility of leadership and supervisors. The RCAF is a team of professional, committed and intelligent aircrew. Improving mental health and

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<https://www.theglobeandmail.com/opinion/canadas-forgotten-cold-warriors/article27200333/>

<sup>43</sup> Why do planes crash? Expert explains five most common reasons for airliner disasters, and only one in ten are caused by terrorism. UK. Daily Mail. Simon Ashley Bennett, 20 May 2016. Accessed 8 May 2019. <https://www.dailymail.co.uk/sciencetech/article-3600784/Why-planes-crash-Expert-explains-five-common-reasons-airliner-disasters-one-ten-caused-terrorism.html>

<sup>44</sup> Search and Rescue: Finding a New Helicopter. Canada. CBC News. Accessed 15 May 2019. [https://www.cbc.ca/news2/background/search\\_rescue/labrador.html](https://www.cbc.ca/news2/background/search_rescue/labrador.html)

resilience need not be difficult, but it will be meaningful and productive. Mentally healthy aircrew are safer and effective. Mentally injured aircrew are not.

*"Airplanes are near perfect, all they lack is the ability to forgive." -- Dick Collins*



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