



Time for a wellness check: Looking in on the system, the responder, and the family

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Conducting wellness checks is a regular task for police services, when a community member may call with concerns about a person who they feel may be in distress or require assistance. This is typically followed by a visit from a responder to search for the person and then determine the difficulty the person may be having. During these visits, responders may face a range of situations, including missing persons, medical emergencies, unexpected deaths, and mental health crises. Regardless of the reason civilians call upon responders to conduct wellness checks, this is one way we can check in on one another. However, wellness checks require more than speaking to the individual we are concerned about. In the case of *this* wellness check, the individual is the responder, the health-care worker, the teacher, and the many others who have dedicated their lives to the service of others. While we must create opportunities to check in on them, there must also be a concerted effort to understand the environment in which they live and work. And what happens if no one makes that call for a wellness check?

I come to this editorial from multiple, interconnected perspectives informed by my lived professional and personal experiences. First and foremost, I come from a clinical mental health background, having worked as an occupational therapist for over 20 years with clients and their families. More recently, I have come to the world of research, where my program includes increasing our knowledge of the health experiences of military members, Veterans, public safety personnel, and their families during life changes. Finally, and most importantly, I come to this editorial as a member of a policing family in which my spouse has worked with the largest police service in Canada. My view and experiences of well-being have provided me a unique perspective in understanding what wellness is, while underscoring the need to prioritize it on all fronts.

As an occupational therapist and researcher, my definition of wellness is grounded in a holistic and systemic perspective of functioning. Adapting the work on ecological systems by Bronfenbrenner, it can be said that the wellness of front-line personnel is dependent on the health and well-being of the systems in which they live and work. Most peripheral from the individual is the society and culture which will appear and be experienced differently depending on the

person's profession. However, in the case of policing, for far too long, the social and cultural realm in which the institution exists has needed a wellness check. Current discourse of defunding the police as a direct result of increasing awareness of the need for critical race and gender discussions shines a light on the need to re-examine our society's construction of power. The tension surrounding policing within the greater society has contributed to increasing division in both policing and civilian communities. The call for a systemic overhaul is becoming a regular topic of discussion at all levels of government, in civil rights organizations, and among policy-makers and researchers, and it is needed now more than ever. While I cannot offer a road map to a solution in this editorial, I think it is prudent to recognize the importance of a "healthy system" as it surrounds and affects individual responders.

The unspoken toll of regular and persistent exposure to potentially traumatic events characterizing police and other public safety professions is compounded by the current stress of living through a pandemic. Particularly unique to our current society is the increasing anti-police rhetoric which has no doubt left police officers in need of a wellness check themselves. As a clinician, I am all too aware of the importance of the "check in." It is an opportunity for me to ask the question, "how are you *really* doing?" and more importantly, an opportunity to listen, to validate and to acknowledge someone's lived experiences. Sometimes asking that question may be overwhelming because you don't know how to respond when the reply you get isn't "I'm fine." Giving someone the time, space, and safety to speak maybe all that is needed. Sometimes, not speaking and just sitting with them may be all that is needed. It is only recently that the availability and accessibility of mental health supports has increased, thus beginning to address the burden felt by families when we are afraid to find out how our loved one is *really* doing.

Being a peripheral member of the public safety community, I am witnessing more and more mental health supports for those in uniform at all levels of the system. For example, the website for the Police Association of Ontario (www.pao.ca) has a directory of mental health and wellness programs and services aimed at supporting police personnel. Non-profit organizations such as Wounded Warriors Canada

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(www.woundedwarriors.ca) provide a range of evidence-based mental health programs for public safety personnel and military Veterans, and their families, and continue to expand their offerings. Within individual public safety services, critical incident teams may be dispatched after a significant event to provide debriefing with the responders involved. “In-house” mental health supports are also available from mental health professionals who have public safety cultural competence to inform quality and effective support. Research has shown better health outcomes when there is occupation-specific cultural competence, and there is increasing acknowledgement that service providers need to have some knowledge and understanding of what life is like being “on the job.” It is clear that vital changes are being made, but when we return to the wellness check metaphor, we begin to see the gaps. Individuals in distress don’t often make that call. It is a loved one, a neighbour, a co-worker, a concerned friend, or a case worker who makes that call.

I spent much of my graduate training learning from military members, Veterans, and their families about their health and well-being during and after their service to this country. Persistent exposure to stressful situations and increased risk for physical and mental health injuries have informed the creation of various military-affiliated organizations, programs, and services to support Canadian Armed Forces members and Veterans. However, as I have learned, these organizations do not adequately meet all the needs of all members and all families. Families are tacitly expected to take on the burden of caregiving during and after service of their military family member. Canadian-based research has shown that not only do military and Veteran families need supports as they care for their military/Veteran family member, but military life also affects their own well-being. While families are often identified as the ones who make *the call* for their loved one, who does the wellness check for families and family members, and are there systems in place to support them? And finally, where is the conversation and research on the well-being of families in other professions, such as health care, where we are only now learning the tremendous toll that the current pandemic is taking on their mental health?

The gap in family-centred supports has long been recognized by some of the leading family researchers in

Canada and has informed the creation of the Families Matter Research Group (www.fmrp.ca). This is a multidisciplinary group focused on creating and disseminating research, with a focus on families of military, Veteran, and public safety personnel, including mental health, post-traumatic stress, operational stress, work-family conflict, trauma and resilience. I am fortunate enough to be a part of this group that will contribute to creating mechanisms for wellness checks for families and family members.

Doing a wellness check looks a little different from my perspective as a spouse of a police officer who has been put on the frontlines of the pandemic, with increased hostility from the public because he wears a uniform and is a racialized minority from the Asian diaspora. Admittedly, in my world, asking “how are you *really* doing?” can get complicated as I often wonder whether I’m asking as a therapist or as a family member. Although there is greater access to mental health supports in police services, coupled with decreasing stigma towards those seeking that support, I cannot help but see the incredible gaps in supports and services. Current efforts fall short in addressing intersectionality and what it means to look or be different from a police officer of 50 years ago. I recently had a conversation with a high-ranking naval officer who said that the system, all systems, were created for people like him, a White cisgender male, to succeed. So, what does this mean for people like my spouse? Is there a structure in place for a true wellness check for him? One that offers support for those who are racialized or otherwise minority officers?

The objective of this editorial is not to provide a solution that will guarantee the wellness of the system, responders, front-line personnel, and their families but to begin a conversation about the need for us to collectively pause and conduct a wellness check given the current challenges facing those who put their lives on the line to serve and protect.

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