



Honouring Her Service: Women's Forum

Rendre hommage à leur service : Forum des femmes

March 6-7, 2025



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Executive Summary

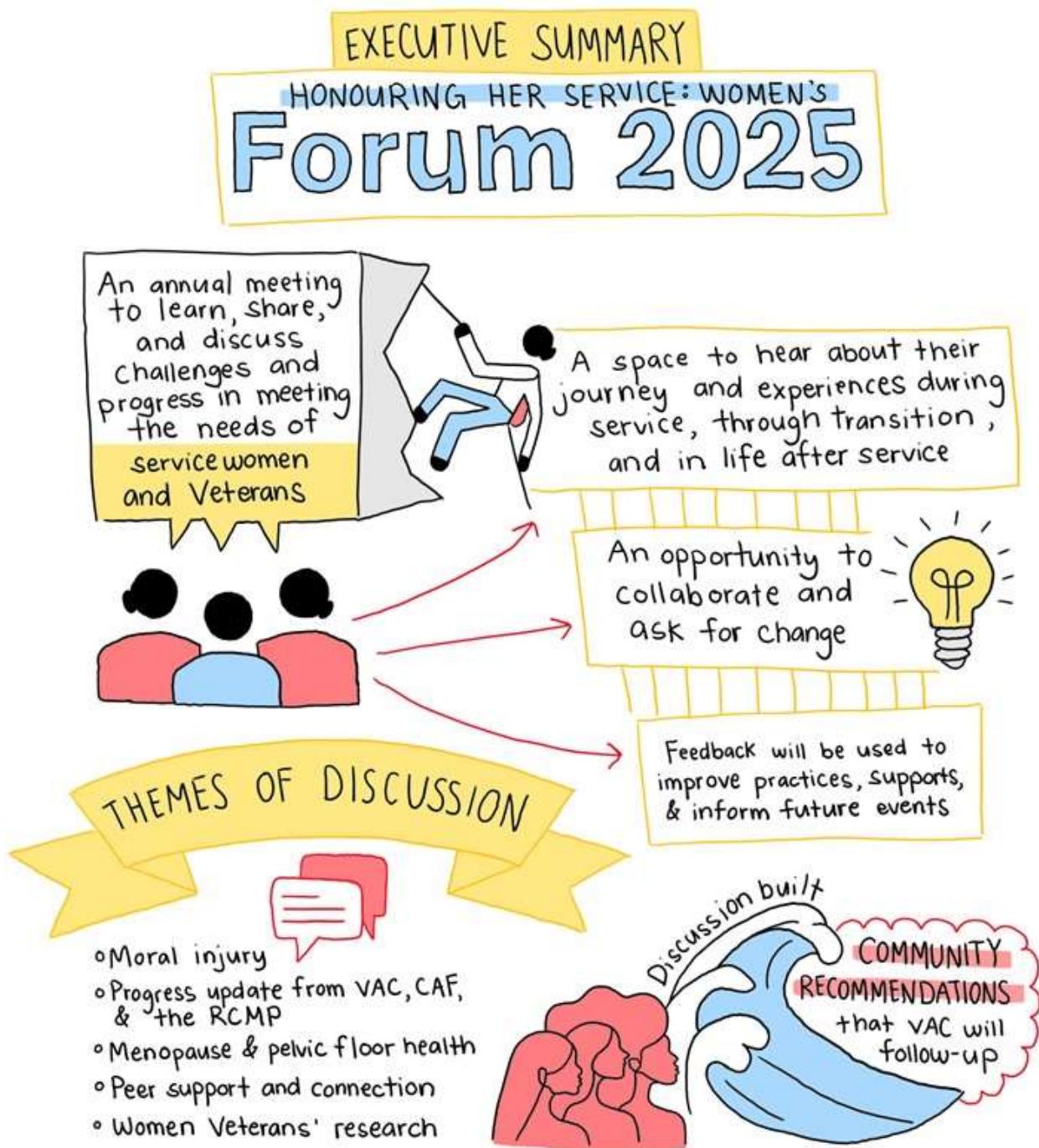


Figure 1. Graphic visualization summarizing the key aspects covered in this report



Introduction

Veterans Affairs Canada (VAC) would like to start by acknowledging and thanking all Veterans and their families, across Canada, for their service to this country.

From coast to coast to coast, we acknowledge the ancestral and unceded territory of all the Inuit, Métis, and First Nations people that call this land home.

We acknowledge the harms and mistakes of the past. We all have a responsibility to consider how we can, in our own way, move forward in a spirit of reconciliation and collaboration. We reaffirm our commitment to improving relationships between nations and improving our own understanding of Indigenous peoples and their cultures.



VAC acknowledges the adversity that women Veterans have faced, and continue to encounter, in their service and would like to reaffirm its commitment to listen and enact change.

The Women Veterans Council

In early 2025, the first [Women Veterans Council](#) was stood up to offer the Minister of Veterans Affairs and Associate Minister of National Defence insight into the unique points of view and lived/living experiences of women (still-serving and Veterans).

The mandate of this work is to identify systemic barriers, sources of discrimination and provide advice and recommendations to the Minister on a wide variety of issues, including but not limited to:

- Transition supports for CAF and RCMP women (in-service and Veterans);
- Equitable access to all benefits administered by VAC for women; and,



- The identification of research priorities to ensure VAC funded research with respect to health equity, data equity, economic equity, outreach and recognition.

The Women Veterans Council played a key role in the planning and delivering of the *Honouring Her Service: 2025 Women's Forum*.



Notes to the reader

- The “*Honouring Her Service: 2025 Women's Forum*” will be referred to throughout the rest of the report as “the Forum”. All acronyms will be spelled out the first time they are introduced.
- Digital artwork was created by an artist/analyst in real time during the event and refined for presentation in the report.
- Quotes featured throughout this report highlight anonymous and open discussion that occurred throughout the event, not to be attributed to individuals in the photos included.



Event structure

The Forum was a two-day event, with optional activities for in-person participants on March 6, 2025 and main event discussions on March 7, 2025.

Optional activities included: trauma-informed yoga, a meeting with VAC representatives to assist with benefits and services, an exhibit hall with 18 community organization exhibits sharing resources available to women Veterans, a therapeutic horticulture activity, an education session on peer support, and a sharing circle with Grandmother Irene Compton.



The main event included two sessions where speakers addressed the entire group (**group discussions**), and three sessions delivered to smaller groups three times (**breakout sessions**) – intent being that each participant had the chance to listen to every speaker.

Participant questions were managed using an online platform (Slido) to support audience interaction. They could submit questions anonymously at any time during

the main group discussions. Questions were read out loud and many were answered. Unanswered questions were collected and answers will be shared by Veterans Affairs Canada. Questions asked in the breakout sessions were all answered in real time during those sessions.

Built by the community - 2025 Women's Forum Consultation

A core part of planning this event was engaging with women Veterans, women serving in the Canadian Armed Forces (CAF), and women serving in the Royal Canadian Mounted Police (RCMP), to hear what topics they would like to see





on the agenda. An online questionnaire ran from October 28 to November 20, 2024, gathering 499 responses from primarily English-speaking women with diverse service backgrounds. The findings were shared with the Women Veterans Council, who collaborated to create an agenda that aimed to address the diverse interests of the community and facilitate meaningful discussions on their most pressing areas of interest.

Discussion topics

- **Group discussion:** Understanding and addressing moral injury (RCMP focus)
- **Group discussion:** *Invisible No More*: Progress update from VAC, CAF, and RCMP
- **Breakout session 1:** Menopause and pelvic floor health
- **Breakout session 2:** The power of connection for women experiencing isolation
- **Breakout session 3:** Workshop on the Women Veterans' Research Plan

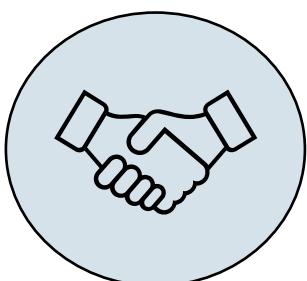
Forum participants

VAC extended invitations to a diverse group of Veterans and community partners, with the majority of participants being women. There were 66 participants in-person and an additional 173 were invited to participate online among all the different discussions. There were 39 additional attendees from the exhibitor organizations, many of whom were Veterans.



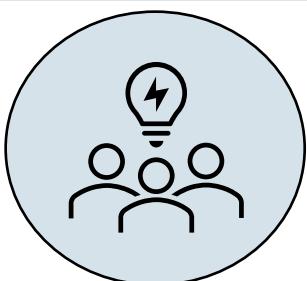


Forum objectives



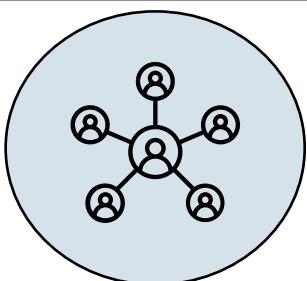
Objective 1

Meaningful engagement with women Veterans and the stakeholder community



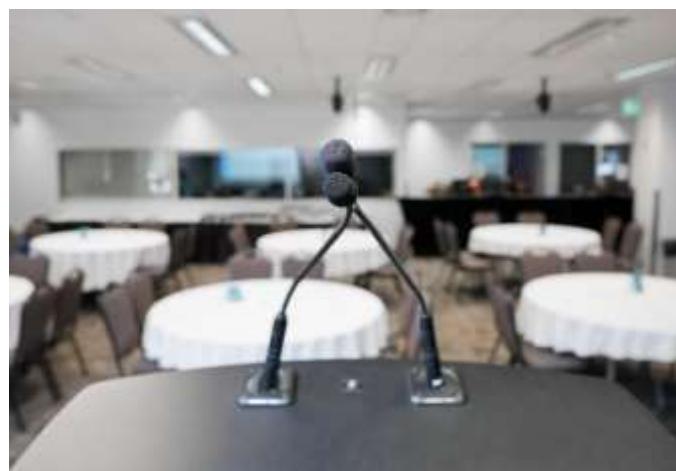
Objective 2

Learn, share, and discuss challenges and progress in meeting the individual needs of women Veterans



Objective 3

Develop community-based solutions to drive change and achieve equity





Minister's welcome

The Honourable Darren Fisher, Minister of Veterans Affairs and Associate Minister of National Defence, opened the Forum. The Minister started by sharing a clear intention for the event: to have crucial dialogue, to collaborate, and to make progress towards equitable outcomes for women Veterans. The importance of these Forums to progress this, which has been sought by women for decades, was emphasized, as was the immense effort and resiliency that has been required of them along the way.

The Minister highlighted key progress milestones since last year ([2024 Forum](#)), including the launch of the Women Veterans Council at Veterans Affairs Canada (VAC) and the release of the report from the Standing Committee on Veterans Affairs (ACVA) – [Invisible no more: the Experiences of Canadian Women Veterans](#). The Minister concluded by saying that work is far from over and asked that women continue to use their voice to shape a policy legacy.



Figure 2. Graphic visualization of the Minister's opening remarks at the Forum



Group discussion: Understanding and addressing moral injury (RCMP focus)

This session took place as part of the optional activities on the first day of the Forum.

Overview of presentation

Researchers spoke about what moral injury is, how it develops, and options for treatment. Many RCMP members and first responders who have experienced moral injury describe it as feelings of guilt, anger, and deep sorrow. It was highlighted that while public safety personnel are at an increased risk of moral injury, it is not limited to just the military, RCMP, and others who rush to danger.

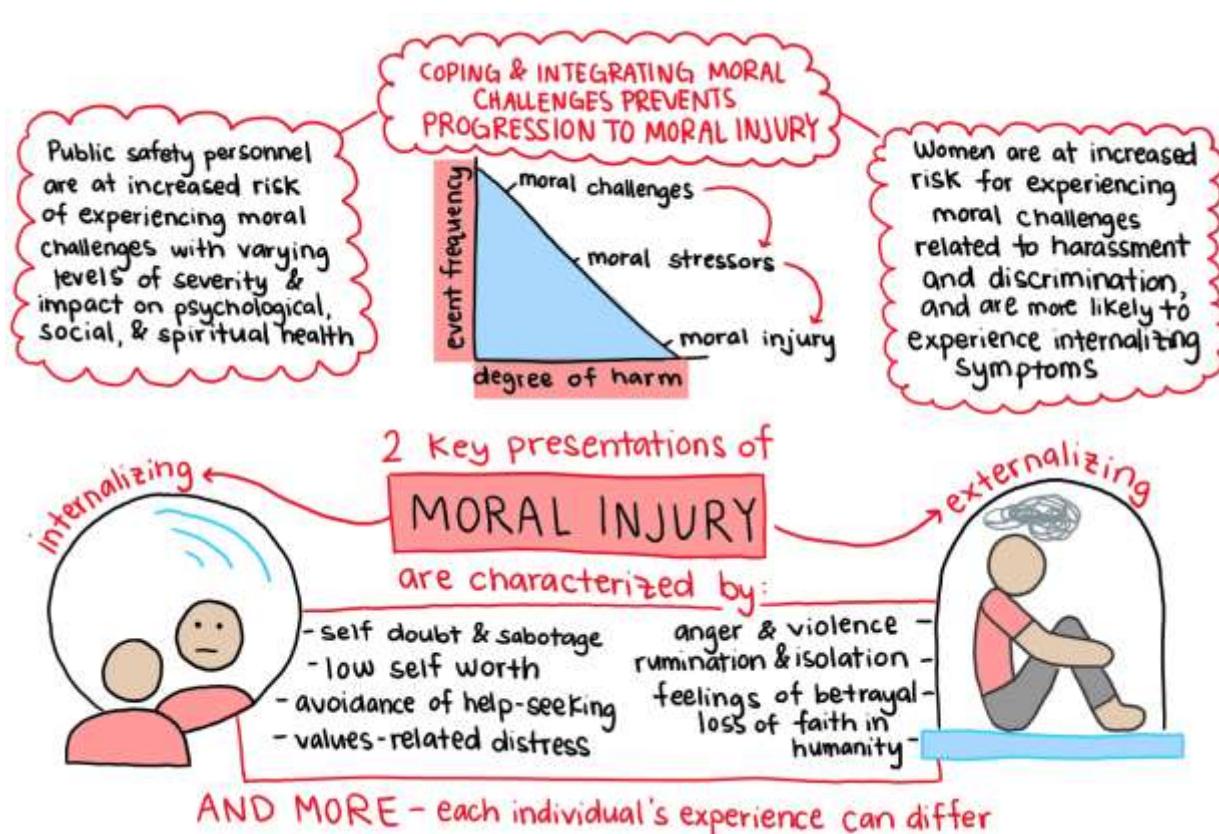


Figure 3. Graphic visualization of the group discussion: understanding and addressing moral injury at the Forum



Moral injury presents differently depending on identity factors such as sex and gender, with a well-studied difference existing between men and women. Women were cited as being at increased risk for moral injury due to harassment and discrimination.

Researchers also pointed out that while often associated with PTSD, moral injury can be an independent condition – and one that is associated with twice the risk of suicide.

Key takeaways from discussion

- The importance of community connection and belonging are crucial supports for public safety personnel who are at increased risk for moral injury.
- Moral injury supports will be unique to the experiences of each individual, with particular consideration for gender and other identity-based differences.
- Preventive measures exist to curb distress and prevent moral injury, such as proactively providing resources, listening and validating concerns when they are raised.
- Resources available to Canadian serving members and former members to treat moral injury include the national [Operational Stress Injury Clinic Network](#), a [free online](#)





[self-forgiveness workbook](#), and a free resource for guided Mantram repetition exercise.

Group discussion: Invisible No More: Progress update from VAC, CAF, and the RCMP

This group discussion brought together representatives from the Canadian Armed Forces (CAF), Royal Canadian Mounted Police (RCMP), and Veterans Affairs Canada (VAC) to share progress made since the 2024 Forum in support of servicewomen, Veterans, and former RCMP members.

Overview of presentation

All three representatives provided an update on changes being made in their respective organizations to support service women, members and Veterans.

The Canadian Armed Forces

The CAF is focused on identifying service women who are facing disproportionate challenges in service and creating innovative solutions to improve retention and supports during their military careers. For women transitioning out of the Armed Forces, the new transition approach includes:

- Holistic assessment across the [seven domains](#) of Veteran health and well-being;
- Integration with VAC services;
- Dedicated family transition advisors at [transition centres](#); and,
- Standardization across provinces and territories.



The recently created [National Resource Directory](#), recommends specific, verified services available to servicemembers and Veterans at low or no cost in their own community.



Royal Canadian Mounted Police

Currently, the RCMP is working to address the gaps that exist with their transition processes. Progress has been made with the creation of a specialist team that works with retirees to support them throughout transition. Recent initiatives to support women serving in the RCMP include:

- New fitness assessments and kit;
- A mobile app to direct RCMP Veterans and families to wellness services; and
- Cadet programs that promote diversity, inclusion, equity, and accessibility in the recruitment process.

Veterans Affairs Canada

Recent initiatives to support service women and Veterans include:

- An updated women specific [research website](#);
- Increased recognition of women's service and lived/living experiences; and,
- Updates to the [Table of Disabilities](#) and [Entitlement Eligibility Guidelines](#) as part of a full review of these policies through a lens of [gender-based analysis plus \(GBA+\)](#).



Specifically, the definition of trauma was updated, and new sections were added for cervical, urinary, and breast conditions. Overall, VAC's policies were emphasized as becoming more trauma-informed and holistic to include all aspects of women Veterans' experiences, beyond biological and anatomical differences.

The importance of research, trust-building, engagement, recognition, and awareness was emphasized as we progress towards equitable health and well-being outcomes for women who have served.



Figure 4. Graphic visualization of the group discussion: *Invisible No More: Progress update from VAC, CAF, and RCMP at the Forum*

Key takeaways from discussion

- The ACVA report, [Invisible no More: the Experiences of Canadian Women Veterans](#) was cited as a catalyst and culmination of advocacy efforts, leading to significant change for servicewomen – both CAF and RCMP.
- There is need for more specific research into RCMP member's well-being. Consulting this evidence will be pivotal in the creation of a new national transition framework (underway) and other needed supports.

"Since 2014, we've had... 1,600-ish female RCMP officers retire. And I can tell you that about half of that, over that decade, was due to medical retirement."



- Initiatives to educate civilian providers about treating Veterans and navigating transition are ongoing.
- Career services, peer support, and targeted supports for single Veterans are important for successful transition and continued well-being.
- Sustained support to military sexual trauma survivors.





Breakout session 1: Menopause and pelvic floor health

This breakout session was designed to educate participants regarding two critical aspects of women's health: menopause and pelvic floor health.

Overview of presentation

Pelvic floor health

The muscles and connective tissues that hold the pelvic floor in place are responsible for coordinating important functions such as urination, defecation, menstruation, and childbirth. Pelvic floor disorders fall into one of four categories – urinary symptoms; prolapse symptoms; bowel symptoms; and pelvic pain. Due to the unique anatomy of a woman's pelvic floor, women are at higher risk of pelvic floor disorders. Risk factors include genetics, aging, pregnancy, high body weight, smoking, and strenuous physical activity.



Menopause

Symptoms associated with the onset of menopause include: 12 months without a period and other physical and psychological symptoms (including hot flushes, night sweats, insomnia, difficulty concentrating, mood changes, vaginal dryness, and pain with intercourse).

Menopause hormonal therapy is safe and effective for treating these symptoms and is an evidence-based treatment shown to reduce the risk of coronary heart disease and osteoporosis. While there are some risks, including stroke, blood clots, and breast cancer, each were observed in less than 1 per 1,000 women taking the medication per year. Non-hormonal therapies are also available to treat menopause symptoms.



Menopause isn't something that is "wrong with women" or something they simply have to "just go through". It is important for all women to self-advocate and leverage primary care providers and physiotherapists to help find a treatment that works best for them.

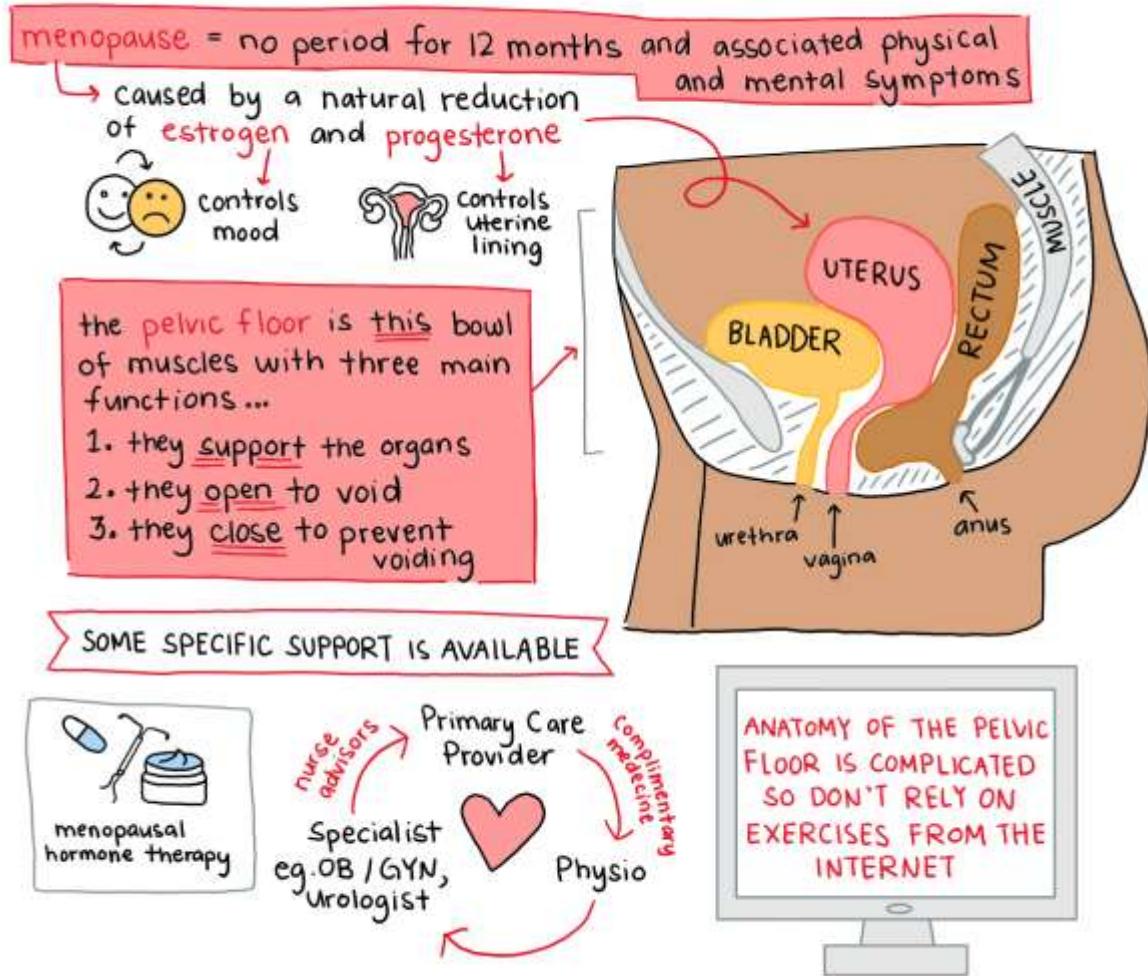


Figure 5. Graphic visualization of the breakout session: Menopause and pelvic floor health: empowering women through education



Key takeaways from discussion

- Pelvic floor disorders and symptoms of menopause affect women's overall well-being.
- Servicewomen do show higher rates of certain pelvic floor disorders and mental health conditions than their civilian counterparts.
- VAC offers support for pelvic floor disorders that are attributable to service.
- Safe and effective hormonal and non-hormonal treatments are available to all women in Canada experiencing menopausal symptoms.
- Women need to self-advocate and be empowered to find a treatment that works best for them.

"We do know that women in the CAF, for example, are more likely to have PTSD compared to a civilian population and are also more likely to have pelvic organ prolapse and urinary incontinence, depending on their trade."





Breakout session 2: The power of connection for women experiencing isolation

This breakout session focused on creating and sustaining peer support networks for women who have served.

Overview of presentation

A speaker from Boston University Medical Campus' [Women Veterans Network \(WoVeN\)](#) provided a brief history of this unique peer support program and lessons learned from creating such a network in the United States (US). WoVeN started as a grassroots initiative, supporting local women Veterans with their mental health and feelings of loneliness and isolation. Guided by the principle that women-specific peer support fosters a sense of community, trust, and understanding, the program quickly grew through word of mouth and online presence.



At the time of the presentation, the organization had connected over 5,000 women across the US in-person and online, trained over 400 peer leaders, and partnered with over 100 other community-based organizations that support women Veterans across all domains of their well-being. Scientific evaluation of WoVeN programming showed health benefits for women experiencing PTSD and depression.



Key takeaways from discussion

- Servicewomen and Veterans regardless of where they served are at high risk for feelings of isolation, lack of belonging and recognition, and pulling back from their Veteran identity (particularly during their transition).
- Peer support networks for Veterans are understudied but have shown overwhelmingly positive impacts on Veteran health and well-being, with the feeling of belonging and purpose that these types of connections provide being central to the healing journey.

"There are various [peer support networks] happening in Canada, they just aren't 'woven' together yet."

- While some peer programming exists in Canada, more are required.
- Real growth for peer support networks seems to come from word of mouth and networking.

- Past successful peer support network models have included:
 - A variety of engagement methods (online, in-person, hybrid, formal/structured, and informal)
 - Flexible and inclusive participation policies
 - Collaboration among governmental and non-governmental stakeholders
 - Inclusion of grassroots initiatives and activists
 - It is important to reinforce acceptance of gender expression, sexuality, culture, and other identity factors



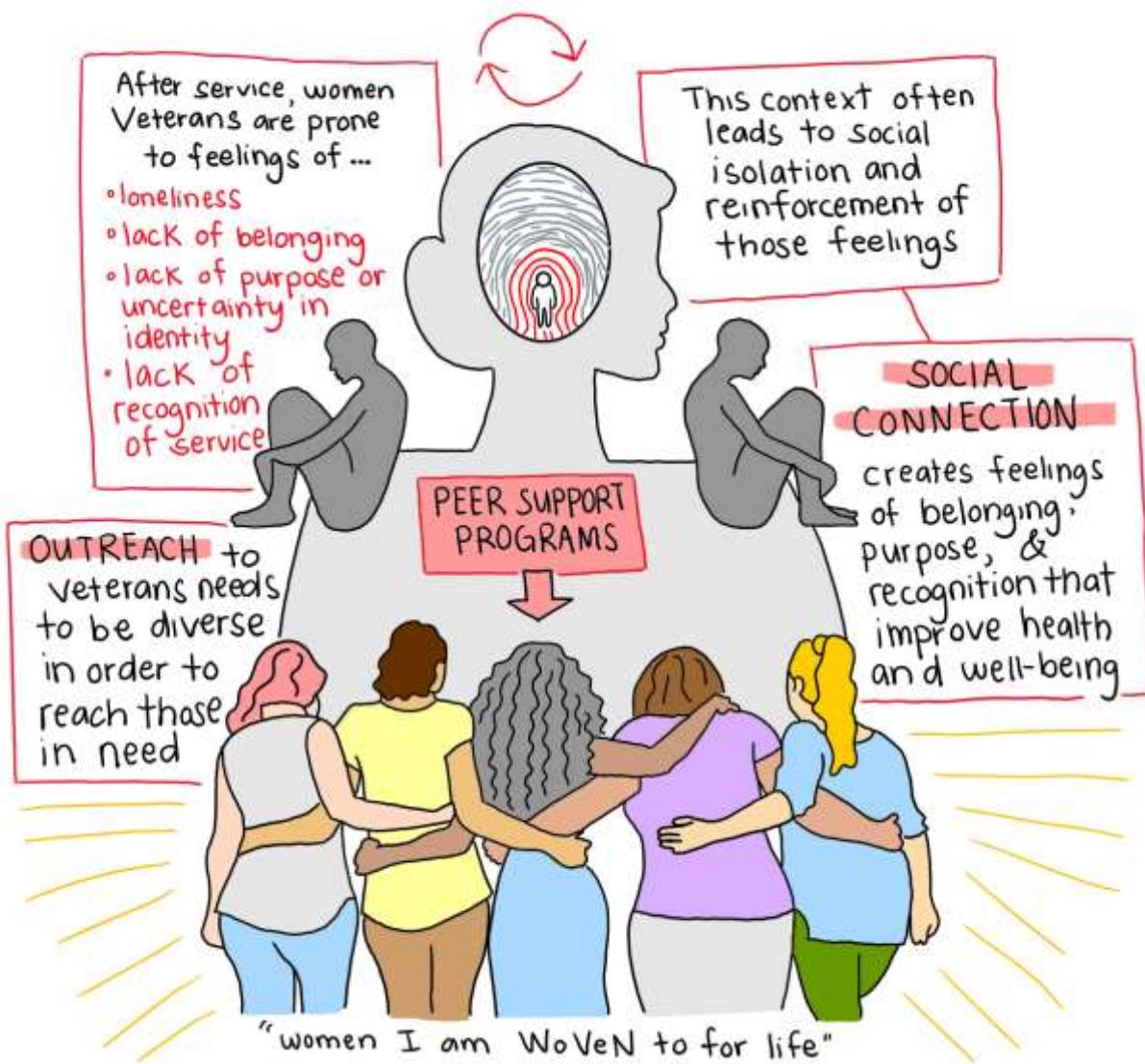


Figure 6. Graphic visualization of the breakout session: The power of connection for women experiencing isolation



Breakout session 3: collaborative workshop on the Women Veterans' Research Plan

In this breakout session, participants were asked to brainstorm around the following questions verbally, via sticky note, or online chat:

- How might we **raise awareness** about women Veterans research?
- How would you like to **participate** in women Veterans research?
- How might we **better apply** women Veterans research findings?



Through this exercise, attendees defined opportunities, proposals, concerns, and priorities for engagement, knowledge translation, and implementation of women Veterans' research projects.

Key takeaways from discussion

- It is important to engage with all equity-deserving groups in the promotion of research, using plain language and novel engagement strategies that reach coast-to-coast-to-coast.
- Research projects about servicewomen and Veterans should always include their intersectionality, opinions, and perspectives in the planning process.
- Women Veterans may be reluctant to participate in research due to past experiences, and reaching them through local Veteran organizations may be most successful.

“Ensure all Veterans know they are Veterans, then you will reach further.”



- Women Veterans have concerns about their ethical inclusion in research and asked that VAC officially adopt an adapted version of the [Tri-Council Policy Statement \(2022\)](#) as part of all research.

“A code of “ethics” for those researching Veterans [is needed] – many are turned off from past experiences.”

- Groups including racialized women Veterans, RCMP, reservists, and rangers felt more research is needed to better understand their experiences, the friction points they encounter with the system, and solutions.

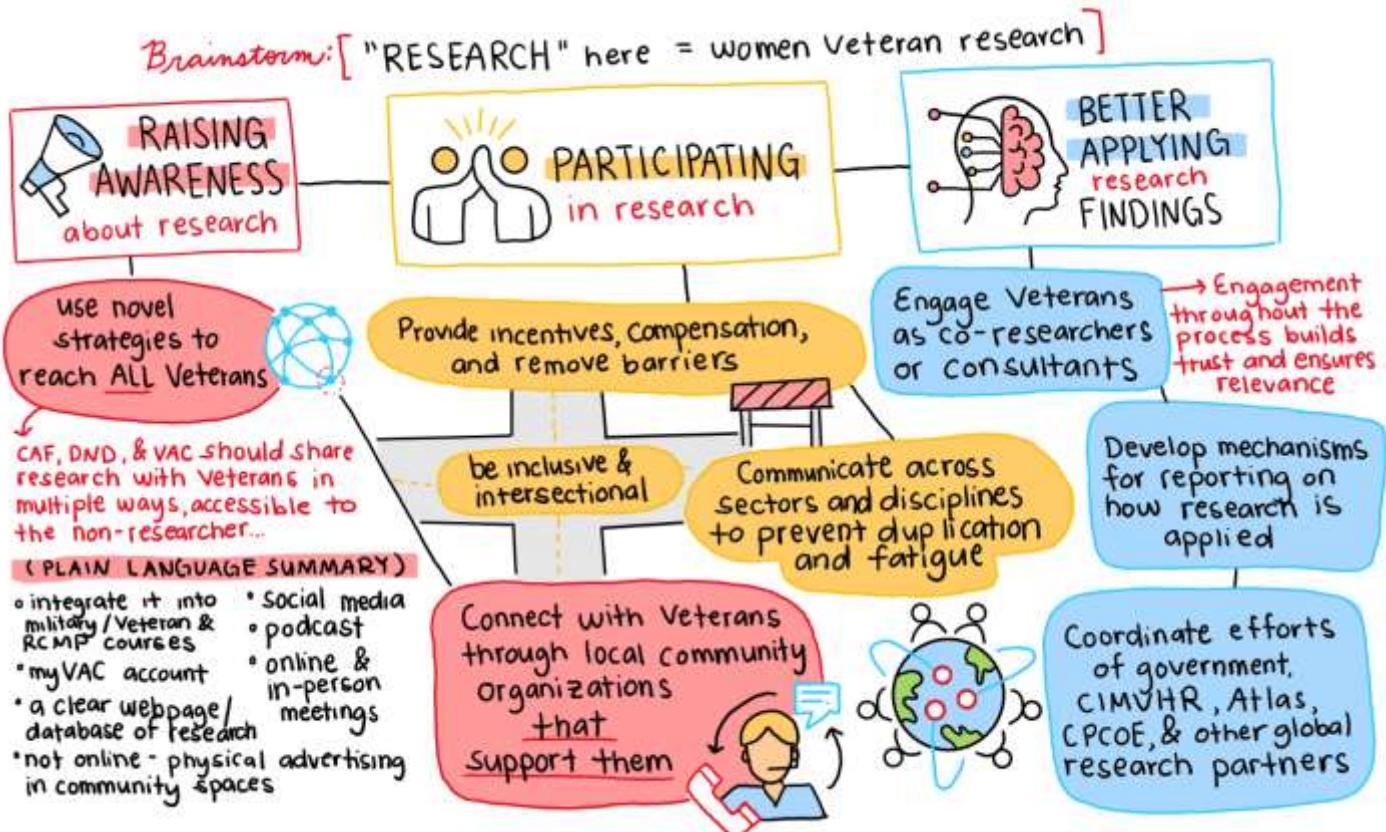


Figure 7. Graphic visualization of the breakout session: Collaborative workshop on the Women Veterans' Research Plan



Community recommendations

- The Women Veterans Forum generated valuable recommendations to enhance support for servicewomen and Veterans, and VAC commits to reviewing these recommendations and sharing an update on our progress at the next Forum. This list is not exhaustive, and our efforts to support servicewomen and Veterans will continue to evolve.
- Approximate timeline from March 2025:
- Short term < 12 months
- Medium term: 12 – 24 months

Community Recommendation	Short Term	Medium Term
Promote resources available to Canadian serving members and former members to treat moral injury.	✓	
Investigate targeted transition supports for single Veterans leaving the Canadian Armed Forces and Royal Canadian Mounted Police.		✓
Continue to provide needed supports and resources to survivors of military sexual trauma.	✓	
Collaborate with the RCMP on the development of a national transition framework.		✓
Improve availability, coordination, and awareness of women Veteran-specific peer support programs.	✓	
Develop and consistently apply best practices and principles regarding the engagement of women Veterans in research, and ethical review of VAC led, funded and supported research projects.	✓	
For VAC led, funded and supported research, develop a mechanism to: <ol style="list-style-type: none"> Identify research gaps Report on research funding 		✓



c. Disseminate research findings – including knowledge transfer activities		
Share with the community available VAC led, funded, and supported research around the experiences of the following underrepresented equity-deserving Veteran subgroups: a. Racialized Veterans b. RCMP Veterans c. Reservists d. Rangers		✓





Appendix A: Forum feedback

As is standard procedure after an event, VAC sent participants an online questionnaire to provide feedback about the event. Questions asked offered Veterans the opportunity to share their opinion on the format and content of the Forum, as well as provide suggestions for improvement in future years. Of respondents to the questionnaire, 59% attended in-person and 41% attended virtually. Key results are reviewed in this section and all 69 responses have been retained.

Statement	Respondents that agree or strongly agree
→ I had sufficient opportunity to network	78%
→ Participating met my expectations	76%
→ I found the content relevant and informative	77%
→ The panelists and speakers were engaging and knowledgeable	85%
→ The content was well-structured and organized	76%
→ Participating increased my understanding of the support for Veterans and their families	69%

- Many respondents shared positive feedback, describing the event as well-organized, informative, and a notable improvement from the previous year.
- Some respondents commended the efforts of the organizing team, highlighting the value of incorporating past feedback, creating meaningful engagement opportunities, and fostering a welcoming environment.
- While many respondents found the sessions informative, some emphasized the need for stronger, clearer connections to military service and the lived



experiences of Veterans, as well as deeper exploration of links to service-related injuries, mental health impacts, and available VAC supports.

- Some respondents expressed a preference for content that prioritizes Canadian Veteran perspectives rather than relying on international examples, highlighting the significant differences in experiences and available services between countries.
- 85% of respondents visited the community organization exhibits, with 88% finding them very or extremely valuable.
- Respondents shared various potential topics for future Forums, including: women's health and well-being, networking and community supports, VAC benefits, and policy updates.

This detailed feedback provided by respondents will be incorporated in the planning of the 2026 Women's Forum, including the valuable recommendations for future events that were outlined.



Appendix B: Forum agenda

Honouring Her Service: Women's Forum **Rendre hommage à leur service : Forum des femmes**

6 March 2025	
Time	Description
9:00	Trauma Informed Yoga at the Lord Elgin Hotel, Ontario Room
13:00	Registration
	Exhibit Hall
	Veterans Affairs Canada Services Room
	Therapeutic Horticulture and Informal Peer Support
	Discover Creative Coping: Peer Support Activity
	Sharing Circle with Grandmother Irene Compton
14:00	Therapeutic Horticulture and Informal Peer Support
	Understanding and Addressing Moral Injury in Former Members (RCMP focus)
18:00	Minister Reception



7 March 2025	
Time	Description
8:30	Coffee and registration
9:00	Indigenous Blessing
9:30	Welcome
9:45	<p>Panel: Invisible No More: progress update from VAC, CAF and the RCMP</p> <p>Panelists:</p> <ul style="list-style-type: none"> • Amy Meunier, Assistant Deputy Minister, Commemoration and Public Affairs, Veterans Affairs Canada • Commodore Daniel Bouchard, Commander, Canadian Armed Forces Transition Group • Deputy Commissioner DeAnna Hill, Royal Canadian Mounted Police
10:45	Break
11:00	Breakout Sessions
<p>Participants will attend three breakout sessions, which will run simultaneously throughout the day. Each session will be presented three times, allowing everyone the opportunity to attend all discussions.</p>	
#1 Confederation Room	<p>Menopause and Pelvic Floor Health: Empowering women through education</p> <p>Participants:</p> <ul style="list-style-type: none"> • Dr. Linda McLean, University of Ottawa Professor and Researcher, Pelvic Floor Physiotherapist • Dr. Jennifer McCall, Fellow in Minimally Invasive Gynecologic Surgery, University of Ottawa • Dr. Cyd Courchesne, Chief Medical Officer, Women and 2SLGBTQI+ Health Champion, Veterans Affairs Canada • Colonel Helen Wright, Director Women and Diversity Health, Canadian Armed Forces



#2 Fuller Room	The Power of Connection: Women experiencing isolation Participants: <ul style="list-style-type: none">• Tara Galovski, Director, Women Veterans Network WoVen VA Boston Healthcare System• Pamela Harrison, Director General, Community Engagement Division, Veterans Affairs Canada
#3 Freiman/Guigues Room	Shaping the Future: A Collaborative Workshop on VAC's Women Veterans Research Plan Participants: <ul style="list-style-type: none">• Dr. Lisa Garland-Baird, Senior Researcher, Research Directorate, Veterans Affairs Canada• Kim Bethke, Public Health Research Analyst, Research Directorate, Veterans Affairs Canada• Shelley Colter, Veteran, Registered Psychotherapist, Clinical Traumatologist
15:15	Break
15:30	Plenary discussion
16:00	Conclusion