

2025 Annual Report



**MACDONALD
FRANKLIN
OSI RESEARCH
CENTRE**

Lawson Research Institute

In Memoriam

John Currier Franklin

(1942-2025)

In July 2025, the MacDonald Franklin Operational Stress Injury Research Centre lost one of its greatest champions, and dearest friends. John Currier Franklin passed away peacefully on July 16, 2025, at the age of 82.

John was an accomplished engineer, entrepreneur, philanthropist, and proud Canadian. Together with his wife, Kyle MacDonald, his generosity and vision made possible the creation of the MacDonald Franklin Operational Stress Injury Research Centre, founded on the belief that military members, Veterans, and their families deserve the very best research, care, and hope for recovery.

Inspired by his father, Lieutenant-Colonel William John Franklin, John's deep respect for those who served shaped his lifelong commitment to improving the lives of Canada's military and Veteran community. His



generosity created a lasting home for discovery, collaboration, and innovation that continues to improve care across Canada.

John believed in excellence, integrity, and investing in people. His vision continues to guide our work every day, through the research we conduct, the partnerships we build, the trainees we mentor, and the lives we strive to improve.

We extend our heartfelt condolences to Kyle, John's family, and all who had the privilege of knowing him. We carry forward the legacy that he helped create, ensuring that his commitment to those who serve will continue to shape the future of military and Veteran health for years to come.

Acknowledgements

We thank the Veterans, military members, families, and clinicians who take part in our research. This science exists because of you.

The Centre gratefully acknowledges the funders and partners whose support made this year's work possible, including the generous gift from Kyle MacDonald and the late John Franklin to the St. Joseph's Health Care Foundation.

And the Canadian Institute for Military and Veteran Health Research, The War Amps, True Patriot Love Foundation, the Chronic Pain Centre of Excellence for Canadian Veterans, the Atlas Institute for Veterans and Families, Veterans Affairs Canada, the Department of National Defence, WorkSafe Ontario, and the Lawson Research Institute.

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Director's Statement



2025 was a year of delivery. The research programs we spent years building produced results that are now in journals, in clinics, in training environments, and on policy tables.

This year, our team published the largest meta-analysis of PTSD treatments ever conducted in military and Veteran populations. We reported the first Canadian data on problematic anger in treatment-seeking Veterans. We completed a national study of Veterans living with amputations and the spouses who support them.

We convened researchers, clinicians, and policy makers from Veterans Affairs Canada and the Department of National Defence at our first national Research Impact Summit. And we continued to move evidence into practice, from prescribing decisions in OSI Clinics to how the next generation of service professionals is trained.

None of this happens in isolation. It reflects the work of a team of scientists, clinicians, trainees, and staff, and the trust of the Veterans and families who take part in our research. It also reflects the partners and funders who make this work possible.

Dr. J. Don Richardson, MD, FRCPC,

A handwritten signature in black ink, reading "J. Don Richardson MD, FRCPC". The signature is fluid and cursive, with the letters "MD, FRCPC" written in a more formal, blocky style at the end.

Scientific Director

About the Centre

Partnering with Veterans for Meaningful Engagement



The MacDonald Franklin OSI Research Centre, based at the Lawson Research Institute at St. Joseph's Health Care London, leads research focused on improving the health and wellbeing of military members, Veterans, their families, and other high-risk occupational groups. The Centre works alongside St. Joseph's Operational Stress Injury (OSI) Clinic, connecting research directly to care.

2025 at a Glance

16

**Conference
Presentations and
Invited Talks**

11

**Peer-reviewed Publications
in 2025**

including in the Journal of Clinical
Psychiatry, the Journal of Traumat-
ic Stress, and the Journal of Mili-
tary, Veteran and Family Health

65

**Active Research
Projects**

6

**External Grants
Secured**

**First National Research
Impact Summit,**

hosted September 2025

5

**New team members
welcomed**

New to the Team in 2025



Moayad Alawad, MD **Clinical and Research Fellow**

Dr. Moayad Alawad joined the MFOSIRC in Fall of 2025 as a Clinical and Research Fellow in Posttraumatic Stress Disorder (PTSD) and other Operational Stress Injuries (OSIs) on Tuesday, September 2, 2025. Dr. Alawad completed his psychiatry training in September 2024 and currently serves as Deputy Director of the Mental Health Division at the Saudi Military Medical Services, with a focus on veteran mental health and policy. Outside of work, he enjoys travelling and playing table tennis.

Shamantha J. Lora, MSc **Research Coordinator**

Shamantha Jahan Lora is a clinical researcher with over five years of experience in neuroscience and mental health. She holds an MSc in Neuroscience and an HBSc in Health and Disease from the University of Toronto. Her work at CAMH, in collaboration with DRDC and the CAF, explored the neurological effects of blast exposure in military personnel and the pathophysiology of occupational trauma and PTSD. She is passionate about trauma-informed care, health systems improvement, and advancing equitable access to care.



Alexa Van Rassel **Masters Student**

Alexa joined the MacDonald Franklin OSI Research Centre in the fall of 2024 as a master's student under the supervision of Dr. Paul Frewen (Western University), Dr. Don Richardson, and Dr. Anthony Nazarov. She graduated in the spring of 2024 with a BSc in Developmental Cognitive Neuroscience from Western University and is continuing her journey at Western, currently pursuing a master's degree in Neuroscience. Her research explores the use of guided meditation in virtual reality as a potential intervention for clinical populations with trauma- and mood-related disorders. She is passionate about helping others and supports the team through proofreading and involvement in projects aligned with her research interests.



Sophia Richardson, MA Knowledge Mobilization Officer

Sophia is the Knowledge Mobilization Officer at the MacDonald Franklin OSI Research Centre, focusing on supporting the design and implementation of knowledge exchange and communication products across stakeholders. She is an interdisciplinary scholar, with extensive Knowledge Mobilization experience, co-developing knowledge products across disciplines and mediums. Her own graduate student work centers around supporting Climate Crisis Education in Higher Education.



Team Spotlight: Temitope Osifeso, MSc, PhD

As a postdoctoral researcher at the MacDonald Franklin OSI Research Centre, Dr. Temitope Osifeso brings a research vision grounded in collaboration, equity, and impact. With expertise in work disability, rehabilitation, qualitative methodology, and injury recovery among high-risk occupational groups, her work focuses on improving how systems understand and respond to complex injury experiences among public safety personnel. Dr. Osifeso's research examines the intersection of physical injury, psychological injury, and return-to-work among public safety personnel, including those navigating workers' compensation and rehabilitation systems such as WSIB.

Her work is especially focused on how physical and psychological injuries can emerge, overlap, and shape recovery over time. By examining these trajectories from





the perspectives of injured workers, health-care providers, case managers, employers, and family supports, her research aims to identify where current systems succeed, where they fall short, and how return-to-work pathways can become more coordinated, responsive, and person-centred.

A key part of her work is bridging research, practice, and policy. Through partnerships with stakeholders across compensation, occupational rehabilitation, healthcare, and public safety sectors, Dr. Osifeso is committed to generating evidence that can inform practical improvements in assessment, care coordination, and workplace reintegration.

Her approach emphasizes lived experience, stakeholder collaboration, and knowledge mobilization that translates findings into tools, recommendations, and strategies that are meaningful for workers and the systems that support them.

Beyond her research, Dr. Osifeso brings a strong commitment to mentorship, community-engaged scholarship, and inclusive research practice. She contributes a critical and applied perspective to the Centre's work, helping to advance research that not only describes occupational stress and injury, but also supports actionable change in how public safety personnel are cared for, supported, and returned to work.

Research Stories and Highlights

Bridging Worlds: The 2025 Research Impact Summit

On September 15, 2025, the Centre hosted its first national Research Impact Summit, “Bridging Worlds: Science, Systems and Solutions,” at the St. Joseph’s OSI Clinic Toronto satellite site.



Credit: Sophia Richardson

The Summit brought together nearly 40 of Canada’s leading researchers and clinicians, along with policy makers from Veterans Affairs Canada and the Department of National Defence, in one room, for one day, with one agenda: advancing care, recovery, and long-term wellbeing for those who serve.

Discussion was organized around five themes: integrating treatment and prevention; cross-learning between occupational sectors, including military, public safety, and healthcare communities; supporting

families and long-term wellbeing by recognizing their essential role in recovery; connecting mental and physical health; and fostering collective impact.

During the event, Andrey Andriets, Director of Research Operations at Lawson, shared updates on the major Lawson-led initiative funded by the Workplace Safety and Insurance Board (WSIB) focused on innovation in the treatment of workplace injuries. As a core partner in this initiative, **the Centre is bringing its expertise in occupational trauma and wellbeing to help shape healthier, more resilient workplaces across populations.**

The Summit set a new standard for how the Centre convenes its network. **Planning for the next edition is already underway.**



Credit: Sophia Richardson

Setting the Standard for PTSD Treatment: The Largest Meta-Analysis in Military Populations

In 2025, the Centre published the most comprehensive analysis of PTSD treatments ever conducted in military and Veteran populations, in the Journal of Clinical Psychiatry.

The team synthesized four decades of evidence: 414 studies published between 1980 and 2021, drawing on 834 samples and data from 37,808 participants. The analysis compared psychotherapies, pharmacotherapies, and combination treatments head to head, in the populations where the answers matter most.

The findings challenge current practice. Treatments overall produced strong effects compared with control conditions, but psychotherapy and pharmacotherapy performed comparably — a result that contrasts with the 2023 US Department of Veterans Affairs/Department of Defense guidelines, which prioritize trauma-focused psychotherapy as the initial intervention. The strongest evidence supported combining psychotherapy and

pharmacotherapy, which outperformed either approach alone.

The clinical implication is direct: rigid prioritization of one treatment modality risks limiting care. Treatment plans should be tailored to the individual, drawing on the full range of effective options.

Publications:

Liu, JJW., Nazarov, A., Ein, N., Easterbrook, B., Le, T., Baker, C., Gervasio, J., Auger, E., Balderson, K., Bilodeau, M., Burhan, AM., Enns, MW., Hosseiny, F., Lavoie, V., Mota, N., Roth, M., Wanklyn, SG., & Richardson, JD. (2025). Treating posttraumatic stress disorder in military populations: A meta-analysis. *The Journal of Clinical Psychiatry*, 86(2), 24r15571. <https://doi.org/10.4088/JCP.24r15571>

Liu, JJW., & Kashou, N. (2025). Editorial: Advances in understanding and treating post-traumatic stress disorder. *Frontiers in Human Neuroscience*, 19, 1599415. <https://doi.org/10.3389/fnhum.2025.1599415>

Preparing for the Hardest Decisions: Moral-Ethical Dilemmas in VR Training

Military service can require decisions no training scenario has prepared a person for: decisions made under pressure, with incomplete information, and with moral weight that can last long after the operation ends. **Research at the Centre has consistently shown that these morally conflicting situations are a driver of lasting psychological harm, and that preparation matters.**

In 2025, the Centre laid the groundwork to change how that preparation happens. The team completed an environmental scan and evaluation of training scenarios involving moral-ethical dilemmas for military personnel, prepared for Defence Research and Development Canada. Building on that foundation, **the Centre was awarded federal research funding to design and pilot immersive virtual reality training scenarios for moral-ethical decision-making** in the Canadian Armed Forces, a program of work that launched in November 2025 and runs through 2027.

The project brings together partners at Western University, the University of Toronto, the University of New Brunswick, and the University of Twente, and proceeds in staged phases: mapping the CAF's existing training ecosystem

to identify where immersive methods add unique value; building national expert consensus on the scenario features that matter most, through a Delphi study with approximately 25 CAF training leaders, operational commanders, and clinical and ethics experts; surveying 80-100 CAF members to understand how cognitive traits like mental imagery ability shape who benefits most from immersive training; and **developing and pilot-testing proof-of-concept VR scenarios grounded in real operational dilemmas.**

The goal is prevention through preparation: giving service members structured exposure to complex operational decisions before they face them in the field, and giving the CAF an evidence-based blueprint for building this training at scale. Findings will be delivered directly to the Department of National Defence in 2027.

Select Publications:

Birch, M., Forchuk, C., Ein, N., Hadaschik, J., Nazarov, A., Richardson, JD., Van Rassel, A., Younger, W. (2025). Environmental Scan and Evaluation of Key Attributes of Training Scenarios Involving Moral Ethical Dilemmas for Military Personnel. DRDC Publications. DRDC-RDDC-2025-C102.

From Evidence to Consensus: The PTSD Delphi Study

Treatment guidelines provide clear recommendations for first-line PTSD care. However, **guidance becomes much less clear once first-line treatments have been exhausted and symptoms persist.** Clinicians are then faced with complex decisions about whether previous treatment was adequate, whether care should be optimized or changed, and when more intensive or novel approaches should be considered.

In 2025, the Centre completed three rounds of a modified Delphi study with psychiatrists and prescribing clinicians from Operational Stress Injury Clinics across Canada. **Seventeen clinicians participated in three rounds, identifying and prioritizing the most important areas of uncertainty in the management of chronic military-related PTSD, and translating these priorities into practical clinical guidance.** Throughout the consensus-building, clinicians did not converge on a rigid definition of “treatment-resistant PTSD.” Instead, they reached consensus on a clinical

decision-making process: first establishing whether treatment had been delivered adequately, then assessing treatment response, optimizing care when improvement was partial, re-evaluating the broader clinical picture when progress remained limited, and considering more advanced interventions when meaningful functional impairment persisted despite multiple adequate treatments.

This work is informing an Adaptive PTSD Care Pathway centred on treatment adequacy, response assessment, medication review, symptom-focused care, clinical re-evaluation, and coordinated decision-making. Together with the Centre’s meta-analysis and research on prescribing practices in OSI Clinics, the Delphi study is **helping build practical guidance for the complex treatment decisions that existing clinical guidelines do not fully address,** ultimately supporting more consistent, evidence-informed care for military members and Veterans living with complex PTSD.

Pharmacogenetics: Matching Veterans to the Right Medication, Sooner

Finding the right medication for PTSD can still take months of trial and error, months that cost Veterans momentum in recovery. The Centre’s pharmacogenetics clinical trial is testing whether genetic information can shorten that process by **matching Veterans to medications more likely to work for them, with fewer side effects, from the first prescription.**

In 2025, the trial continued its recruitment and data collection momentum, gathering pharmacogenetics data from 72 Veterans thus far. Working closely with the OSI Clinic, we were successful at creating effective and streamlined referral pathways, including engaging nursing staff at the clinic to facilitate recruitment.

Veterans Living with Amputations

Living with an amputation reaches far beyond physical mobility. In a study funded by the Canadian Institute for Military and Veteran Health Research and The War Amps, **the Centre examined the experiences of Canadian Armed Forces and RCMP Veterans living with amputations, and, for the first time in this line of work, the spouses who support them.**

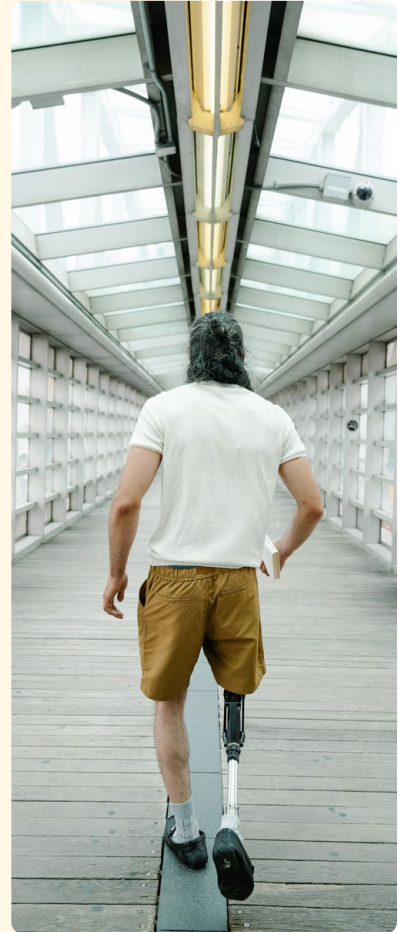
“If I’m not dead, you either quit or you carry on... I’m not going to be defined by losing a leg.”

Participant Quote

Through in-depth interviews with Veterans and their spouses, the study documented **recovery as a lifelong process**. Chronic pain, prosthetic needs, and mobility limitations were constant, but participants spoke just as much about identity, employment, finances,

relationships, and the exhausting work of navigating fragmented healthcare, benefits, and insurance systems while trying to recover. Spouses described taking on caregiving, coordination, and advocacy roles with little preparation or support of their own.

The findings translate directly into service and policy recommendations: dedicated case management from injury through long-term reintegration, family-inclusive supports, sustained access to specialized prosthetic and rehabilitation care, and a deliberate reduction of the administrative burden currently carried by Veterans and their families.



Lara Jameson
From Pexels

Stories that INSPIRE: From Research to National Training Tool

In 2025, the Stories that INSPIRE documentary — co-created with Veterans to bring the realities of military-to-civilian transition forward in their own words — premiered at the Canadian Institute for Military and Veteran Health Research Annual Forum, amplifying Veteran voices on a national stage.

The film is now in active use as a knowledge translation tool, supporting onboarding and training for the next generation of service professionals at Veterans Affairs Canada. What began as a needs assessment of over 300 Veterans is now shaping how the people who serve them are trained.



Cpl Peter Ford
From © 2018
DND-MDN
Canada

What Drives Recovery Through Sport: The Invictus and Adaptive Sports Review

Adaptive sporting events like the Invictus Games and Warrior Games are built on a rehabilitative promise: that **sport can support psychosocial recovery for injured military members and Veterans**. In 2025, the Centre published a systematic review in the Journal of Military, Veteran and Family Health testing what actually drives, and what blocks, that promise.

The team reviewed 156 articles spanning the Invictus Games, Warrior Games, and winter adaptive sports programs, **examining the experiences of competitors and of their families and friends**. For competitors, **camaraderie and social connection emerged as the strongest motivators**, alongside goal attainment and skill mastery. For families, the primary driver was witnessing their loved one grow. The most significant barriers, for both groups, were competitive pressure and limited resources, forces that can pull these events away from their rehabilitative purpose.

The review, conducted with international partners including the Invictus Games' sport technical leadership, Phoenix Australia, and the Atlas Institute for Veterans and Families, gives event organizers and policy makers concrete direction: **design programming around participants' motivations, resource families properly, and protect the rehabilitative ethos that makes these events work**.

Funded by the True Patriot Love-CIMVHR Research Initiative.

Gervasio, J., Ein, N., Liu, JJW., Baker, C., Roberts, LS., Umucu, E., Held, N., Hosseiny, F., Colclough, M., Phelps, A., Abreu, E., Lau, B., Nazarov, A., & Richardson, JD. (2025). Drivers and barriers to experience in adaptive sporting events: A systematic review and call for further research. *Journal of Military, Veteran and Family Health*, 11(4), 107-125. <https://doi.org/10.3138/jmvfh-2024-0096>

When Anger Deserves Care of Its Own: New Canadian Evidence

In military life, anger can be a normal, even protective, response to threat and prolonged stress. For some, though, it persists after service in ways that cause real distress: straining relationships, complicating recovery, and making daily life harder. Until 2025, no Canadian study had examined how often this experience affects military members and Veterans, or what it means for their care.

The Centre's study, published in the *Journal of Traumatic Stress*, looked at 882 Canadian Armed Forces personnel and Veterans who had been referred to the St. Joseph's OSI Clinic. Among this group, people already seeking support, **nearly two-thirds reported anger at levels associated with distress and difficulty functioning.** Those individuals also had higher PTSD, depression, and anxiety symptoms. Importantly, these conditions did not fully account for the anger, which tells clinicians something valuable: **for many patients, anger is not simply a symptom of another diagnosis. It deserves attention in its own right.**

That finding points to a practical gap. When anger goes unassessed, it can quietly undermine treatments aimed at other conditions, and a person can complete care without the thing affecting them most ever being addressed directly. **The recommendation is simple and immediately usable: include a brief anger screening in standard intake assessments.** It takes a few minutes, captures issues related to anger, improves treatment planning, and helps ensure that people receive care for what they are actually experiencing.

Select Publications:

Roth, ML., Wanklyn, SG., Bird, BM., Collins, E., Gargala, D., Houle, SA., Forbes, D., Nazarov, A., & Richardson, JD. (2025). Problematic anger in a treatment-seeking Canadian veteran population: Prevalence, assessment, and treatment implications. *Journal of Traumatic Stress*, 38(4), 720-730. <https://doi.org/10.1002/jts.23160>

Families Matter

When a Veteran serves, their family serves right alongside them. They handle the relocations, juggle demands at home, and often shoulder the heavy lifting of finding help.

Throughout 2025 and 2026, the Centre focused on two specific challenges: the struggle families face when searching for support, and the burden of being excluded from the care process when Veterans seek treatment.

holds up in the real world.

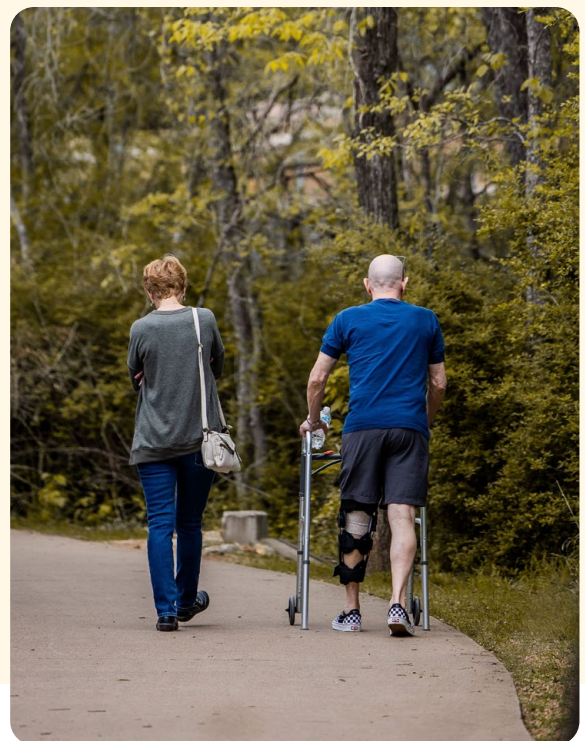
Two major takeaways emerged. While participants trusted the listed resources, they doubted families could easily use the directory in its current state. Another issue is that program details often only reach the Veteran. If they don't pass the information along, spouses and children never find out what help is available to them.

Navigating the Support Maze

The Centre recently scanned the landscape of mental health and wellbeing resources for Canadian Veteran families and found 104 different programs. It seems like the issue isn't always a lack of support, it's that finding it means digging through a confusing web of websites, contradicting information, and complex eligibility rules, usually when families are already exhausted. As our report highlighted, simply navigating the system itself is a much-needed form of support.

To tackle this, **we compiled a Family Services Resource Directory in May 2025 and tested it with the people who actually need it.** Working with the Atlas Institute's Strategic Reference Group, which includes Veterans, family members, clinicians, and service providers, we looked at how well this information

Our December 2025 report laid out a step-by-step plan to turn this directory into a reliable, user-friendly tool. The focus is simple: Is it comfortable to use? Can people find what they need without insider knowledge of the system? And is the information reliable?



Caleb Oquendo
From Pexels

The Care Barrier

This directory project builds on our previous research into what keeps Veterans from getting care. Earlier this year, we published a study in the *Journal of Military, Veteran and Family Health* based on in-depth interviews with Veterans living with PTSD and their spouses. We looked at their entire journey, from the first signs of trouble, through stigma and system barriers, to what actually keeps them in treatment. One theme kept surfacing: **family and social networks often dictate whether a Veteran starts and sticks with treatment.** As one participant put it, the people around him were “like a lifeline.”

Integrating Families into Treatment

That “lifeline” realization is driving our next major project. Backed by funding from the Atlas Institute for Veterans and Families, the Centre is launching the “Integrating Families into Veteran Care Pathways” project. **Family members are routinely excluded from formal care plans.** This leads to lost information and confusion about how or when a family should be involved.

We are interviewing CAF Veterans, family members, and clinicians to understand what family involvement actually looks like on the ground:

When is it helpful?

What are the roadblocks?

What's currently missing?



FaustFoto
From Pexels

The end goal is to create practical guidelines that make care better for the whole family. If a Veteran’s support system is essential to their recovery, the health-care system needs to make a real place for them.

Building the Field, Together

None of this work happens in isolation. **We are proud to partner with Garnet Families**, a community network created by the Families Matter Research Group at Queen's University. Garnet Families provides evidence-based resources, research, and support specifically for the families of military personnel, Veterans, first responders, and public safety personnel.

By addressing the unique lifestyle demands these families face, **the initiative ensures they have a dedicated community that understands their experiences.** Through this partnership, and our continued close collaboration with its director, Dr. Heidi Cramm, the Centre’s findings are feeding into a growing research community driven by a single core belief: **the families of those who serve deserve research, resources, and support in their own right.**

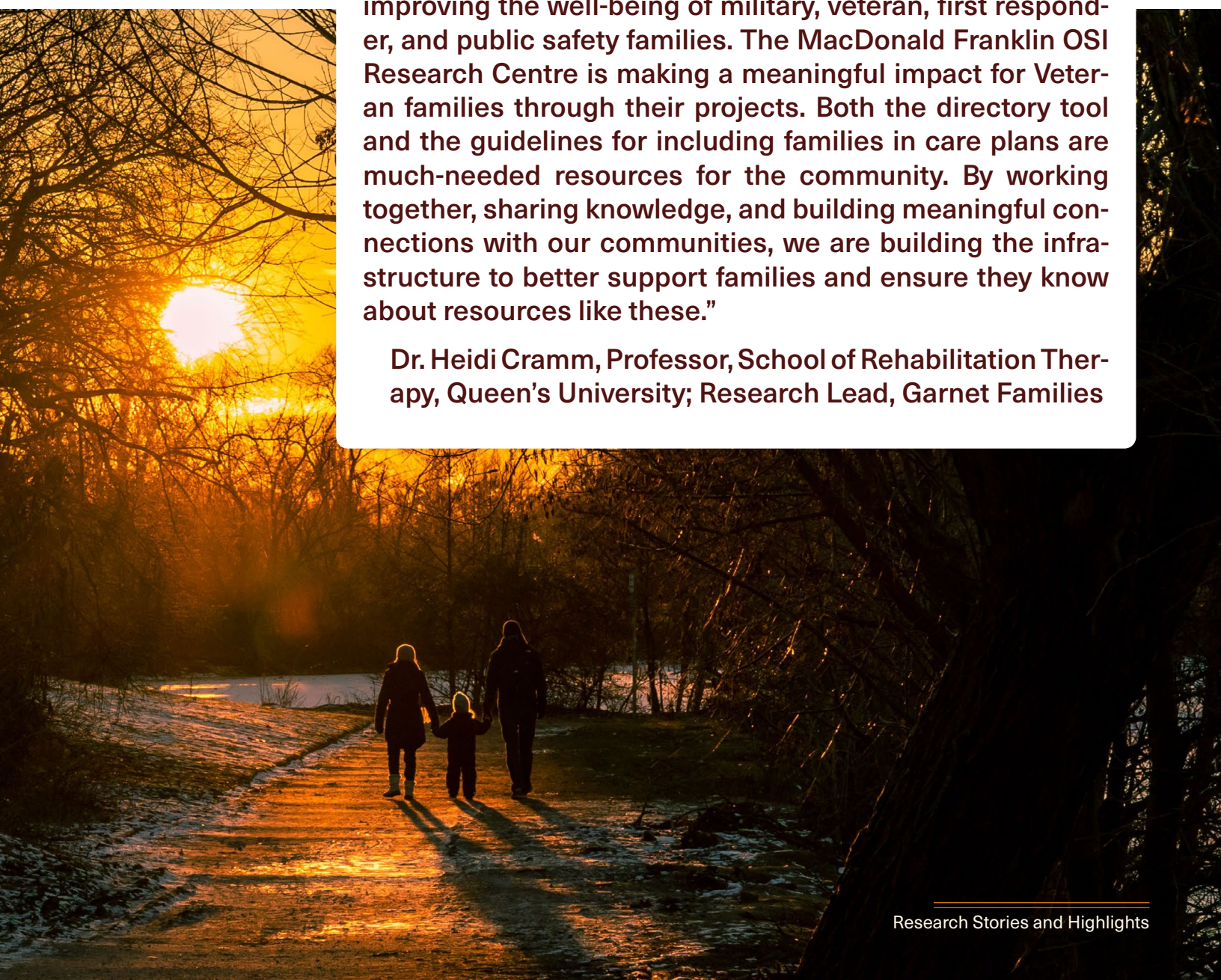
Select Publications:

Soares, V., Deda, E., Houle, SA., St. Cyr, K., Forchuk, CA., Plouffe, RA., Liu, JJW., Cramm, H., Nazarov, A., & Richardson, JD. (2025). Challenges and facilitators to mental health access and treatment from military-related operational stress injuries: A qualitative study. *Journal of Military, Veteran and Family Health*, 11(4), 12-22. <https://utppublishing.com/doi/full/10.3138/jmvfh-2024-0069>

MacDonald Franklin OSI Research Centre. (2025, December). Improving service navigation for Veteran families: Findings from stakeholder consultation and a strategic roadmap for Veteran family service navigation. Delivered to Atlas Institute for Veterans and Families.

“Garnet Families is grateful for the opportunity to collaborate with organizations that share our commitment to improving the well-being of military, veteran, first responder, and public safety families. The MacDonald Franklin OSI Research Centre is making a meaningful impact for Veteran families through their projects. Both the directory tool and the guidelines for including families in care plans are much-needed resources for the community. By working together, sharing knowledge, and building meaningful connections with our communities, we are building the infrastructure to better support families and ensure they know about resources like these.”

Dr. Heidi Cramm, Professor, School of Rehabilitation Therapy, Queen’s University; Research Lead, Garnet Families



More Stories in Improving Care and Treatment through Research

Our research team also captured many other important research areas to improve the care and treatment of military personnel, Veterans, first responders, public safety personnel and their families.

Here, we feature our other 2025 publications and reports from those areas.

Richardson, JD., Liu, JJW., Smith, P., & Nazarov, A. (2025). Implementing REVEL framework: key lessons for healthcare workplace wellbeing. *Occupational Medicine*, 75(6), 292-294. <https://doi.org/10.1093/occmed/kqae114>

Plouffe, RA., Houle, SA., Birch, M., Ein, N., Nazarov, A., & Richardson, JD. (2025). Validation of the Moral Injury Outcome Scale in Canadian health care workers. *Psychological Assessment*, 37(6-7), 309-321. <https://doi.org/10.1037/pas0001386>

Baillie Abidi, C., Patten, S., Reeves, K., Houle, S., Belanger, S., Nazarov, A., & Wells, S. (2025). 'Trying to fix what is broken': Experiences of Encountering Children in Armed Conflict During Military Service. *International Peacekeeping*, 32(5), 1080-1108. <https://doi.org/10.1080/13533312.2025.2521345>

Trahair, C., Forchuk, CA., Plouffe, RA., Hansen, KT., Richardson, JD., & Nazarov, A. (2025). Barriers to mental health support among Canadian Veterans: Complicating factors of confidentiality and moral injury. *Journal of Military, Veteran and Family Health*, 11(3), 3-16. <https://doi.org/10.3138/jmvfh-2024-0004>

Forchuk, CA., Kocha, I., Granek, J., Dempster, KS., Younger, L., Gargala, D., Plouffe, RA., Bailey, S., Guest, K., Richardson, JD., & Nazarov, A. (2025). Optimizing military mental health and stress resilience training through the lens of trainee preferences: A conjoint analysis approach. *Military Psychology*, 37(3), 175-186. <https://doi.org/10.1080/08995605.2024.2324647>

Ein, N., Younger, W., Birch, M., Houle, SA., St. Cyr, K., Soares, V., Campbell Bromhead, R., Dempster, KS., Nazarov, A., & Richardson, JD. (2025). Echoes of service: Understanding Veteran experiences to advise chronic pain policy in Canada. Technical report prepared for the Chronic Pain Centre of Excellence for Canadian Veterans.

Our Team

Leadership



J. Don Richardson
Scientific Director



Anthony Nazarov
**Associate Scientific
Director**



Natalie Ein
**Head of Research
and Implementation**



Jenny Liu
**Head of Scientific
Development and
Knowledge Mobilization**



Kylie Dempster
Head of Operations

2025 Team

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Affiliated Scientists

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Bethany Easterbrook, St. Joseph's OSI Clinic	Rickinder Sethi, University of Toronto
Evgenia (Jane) Milman, Wilfrid Laurier University	Sonya Wanklyn, St. Joseph's OSI Clinic
	Thomas Wasiuta, Department of Defence

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Erin Courtice, Toronto Metropolitan University	Alexa Van Rassel, Western University
	Kathryn Reeves, University of Windsor

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Abigail Fisher

Jacky Li

Biya Wadhawan

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Colette Currin, CCAC, EHN Canada

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LCol (Retd) Alexandra Heber, MD, FRCPC, CCPE, Veterans Affairs Canada

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Col (Retd) Rakesh Jetly, MD, FRCPC

Lisa King, MSc, St. Joseph's OSI Clinic

Laryssa Lamrock, Atlas Institute for Veterans and Families

Polliann Maher, Atlas Institute for Veterans and Families

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David Pedlar, PhD, Queen's University

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