



GENDER-BASED ANALYSIS PLUS (GBA+)

Comprehensive Military Family Plan

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Original version in French

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Comprehensive Military Family Plan
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Acknowledgments

Thank you to Carley Robb-Jackson (MFS) and Mai Ngo (Global Affairs Canada) for their sound advice.

Suggested Citation

Chartier, A. (2019). *Gender-Based Analysis Plus (GBA+): Comprehensive Military Family Plan*. Ottawa, ON: Canadian Forces Morale and Welfare Services.

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LIST OF ABBREVIATIONS, INITIALS AND ACRONYMS

B/W	Base(s) or Wing(s)
CAF	Canadian Armed Forces
CBIs	Compensation and Benefits Instructions
CFMWS	Canadian Forces Morale and Welfare Services
CMFP	Comprehensive Military Family Plan
FIL	Family Information Line
GBA+	Gender-Based Analysis Plus
MFRC	Military Family Resource Centre
MFSP	Military Family Services Program
OSI	Operational Stress Injury
R2MR	Road to Mental Readiness

1. INTRODUCTION

The Comprehensive Military Family Plan (CMFP) is one of the many initiatives of Canada’s defence policy *Strong, Secure, Engaged*. Initiative 24 “to develop a comprehensive military family plan” aims to further stabilize family life for Canadian Armed Forces members and their families who are required to relocate frequently.

At first glance, military families may appear to enjoy an enviable status, but on top of facing the same challenges as other Canadian families, they also face a set of challenges that are inherent in the military lifestyle.

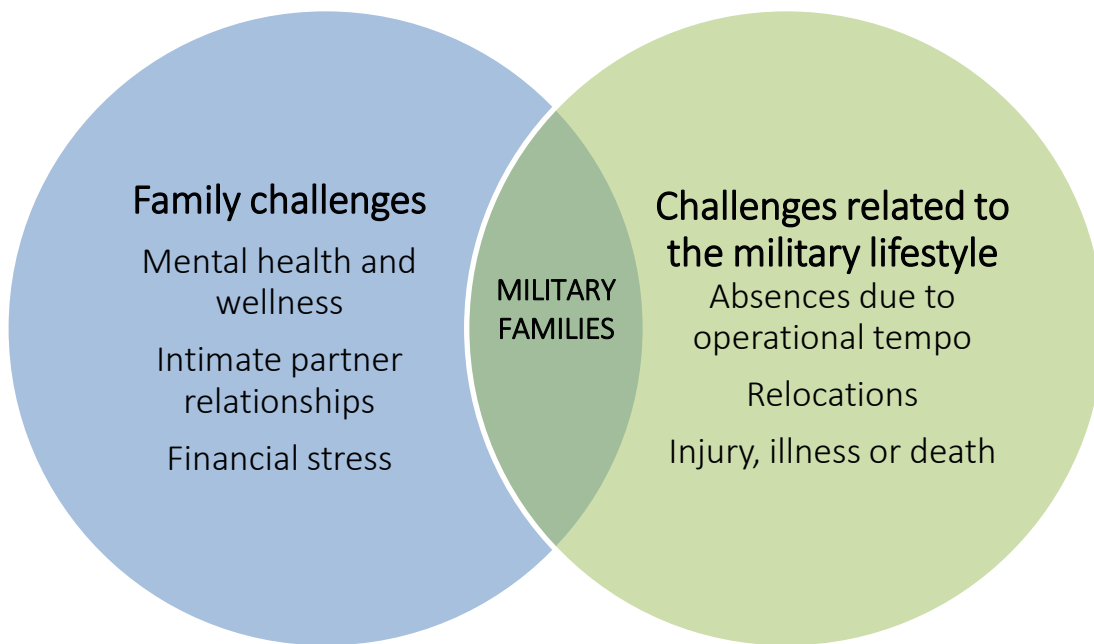


Figure 1. Family and Military Lifestyle Challenges

Along with other organizational, jurisdictional or cultural factors, the combination of these two lifestyles can lead to the emergence or maintenance of certain inequalities for civilian members of military families, which are related to “unequal access to key factors that influence health like income, education, employment and social supports” (Government of Canada, 2008, p. 5).

The Comprehensive Military Family Plan was thus developed by considering the different types of families and their intersectional identity factors, combined to other factors related to systems and programs.

By addressing all stakeholders invested in the welfare of military families, the CMFP aims to inform research, mass media, the development and delivery of future programs and services to, on the one hand, better support military families in their diversity, and on the other, minimize unintended negative effects.

This document briefly introduces the approach used in developing the CMFP (Figure 2) and how Gender-Based Analysis Plus (GBA+) was interwoven into every step of its creation. It particularly explains how different positions and identity factors intersect and influence individual and family military experiences, how “structural factors interact to produce specific health outcomes in individuals” (Morrison, 2014, p. 3), and which measures will allow us to remedy them.

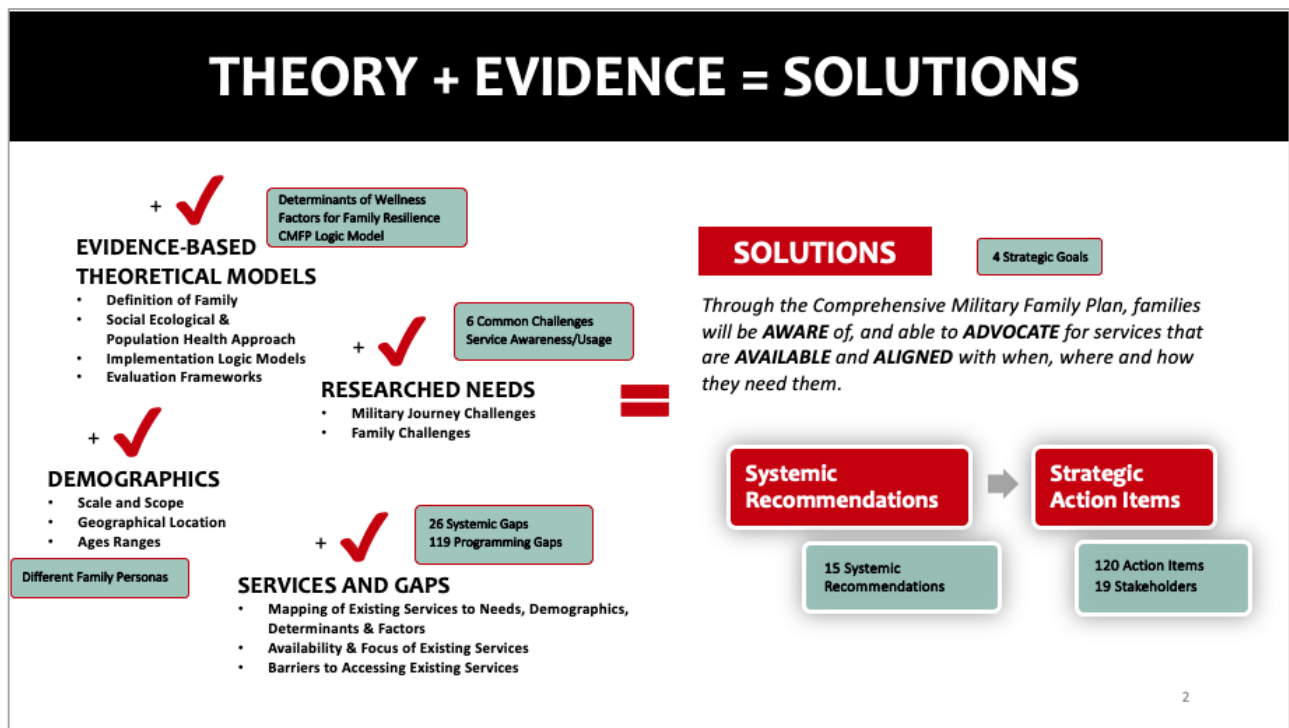


Figure 2. The CMFP Approach

2. COLLECT FACTS THROUGH RESEARCH AND CONSULTATIONS

2.1 PRELIMINARY RESEARCH

Generally speaking, research conducted prior to developing the strategy (Table 1) gave us a broader understanding of family composition, family experiences with regard to military lifestyle and family challenges, and how families use CAF services. More specifically, the various research activities (literature review, surveys, empirical studies, environmental scans) have facilitated the study of identity factors and their potential interaction with certain characteristics of living environments and the systems in which they evolve (Figure 3).

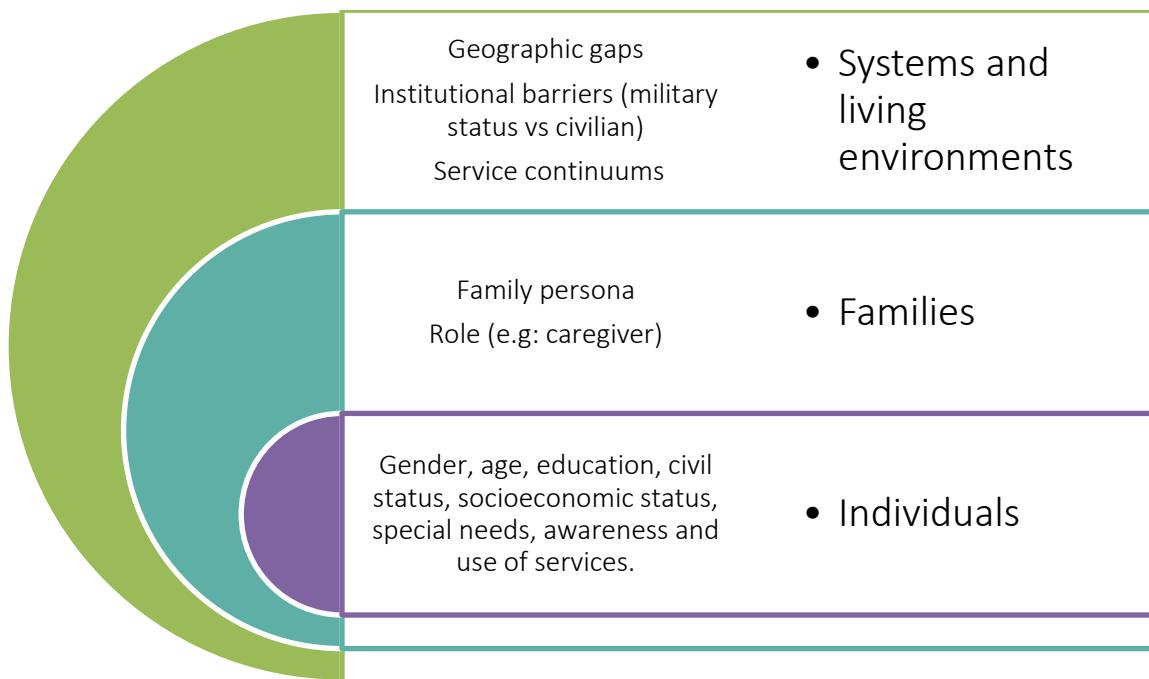


Figure 3. The Identity Factors Studied

Table 1. Research Conducted and Completed by the CMFP

RESEARCH CONDUCTED AND COMPLETED BY THE CMFP:	
1.	Profile of Military Families in Canada: 2017 Regular Force Demographics (CFMWS & DCSAS)*
2.	The Relocation Experiences of Military Families (CFMWS)*
3.	The State of Military Families in Canada: Issues Facing Regular Force Members and Their Families (CFMWS)*
4.	The Experiences of Parents of CAF Personnel (CFMWS)*
5.	The Experiences of CAF Families Caring for Elderly Parents (CFMWS)*
6.	Canadian Military Family Resilience Model (CFMWS, CIMVHR)
7.	Dual Service Couples (DGMPPRA)
8.	SME Survey on Mental Health Specific to Relationship Counselling and Child/Youth Mental Health (CFMWS)*
9.	Final Report: Understanding the health of Canadian military families: Special priorities for development of the Comprehensive Military Family Plan (Mahar, Chen, et al., 2018)
10.	The Mapping and Gaps Analysis of 200+ CAF Services for Military Families (CFMWS)
11.	The Comprehensive Military Family Plan Logic Models and Evaluation Framework (CFMWS)
12.	CAF Community Needs Assessment – Unique Family Persona Profiles (CFMWS)

The studies consulted (83 studies) and produced as part of the CMFP (Table 1) were mainly conducted by the Director General Military Personnel Research and Analysis, the Canadian Institute for Military and Veteran Health Research (CIMVHR), and the Canadian Forces Morale and Welfare Services (CFMWS), who all focus on the Canadian military experience.

Additionally, demographic data was compiled in collaboration with the Director Capability and Structure Analysis Support (DCSAS), which provided detailed information on 63,269 Regular Force members residing in Canada and their 94,279 family members (34,906 spouses, 57,639 children and 1,734 other dependants).

2.1.1 CONCEPTUAL FRAMEWORK

“When the military journey and the family journey combine, at times these transitional challenges can compound or even collide, impacting the family more intensely. And depending on the family (where they are on their journey, what their composition is, what state their collective resiliency is at, etc.), each transitional challenge will be experienced and reacted to differently” (Government of Canada, 2019, p. 29).

Based exclusively on research, the creation of a conceptual framework (Figure 4) guided the strategy development process. It also enabled the integration of military and family journeys, social institutions and family needs by demonstrating the complexity of the forces at play and the potential intersections that influence the well-being and resilience of CAF members and their families.

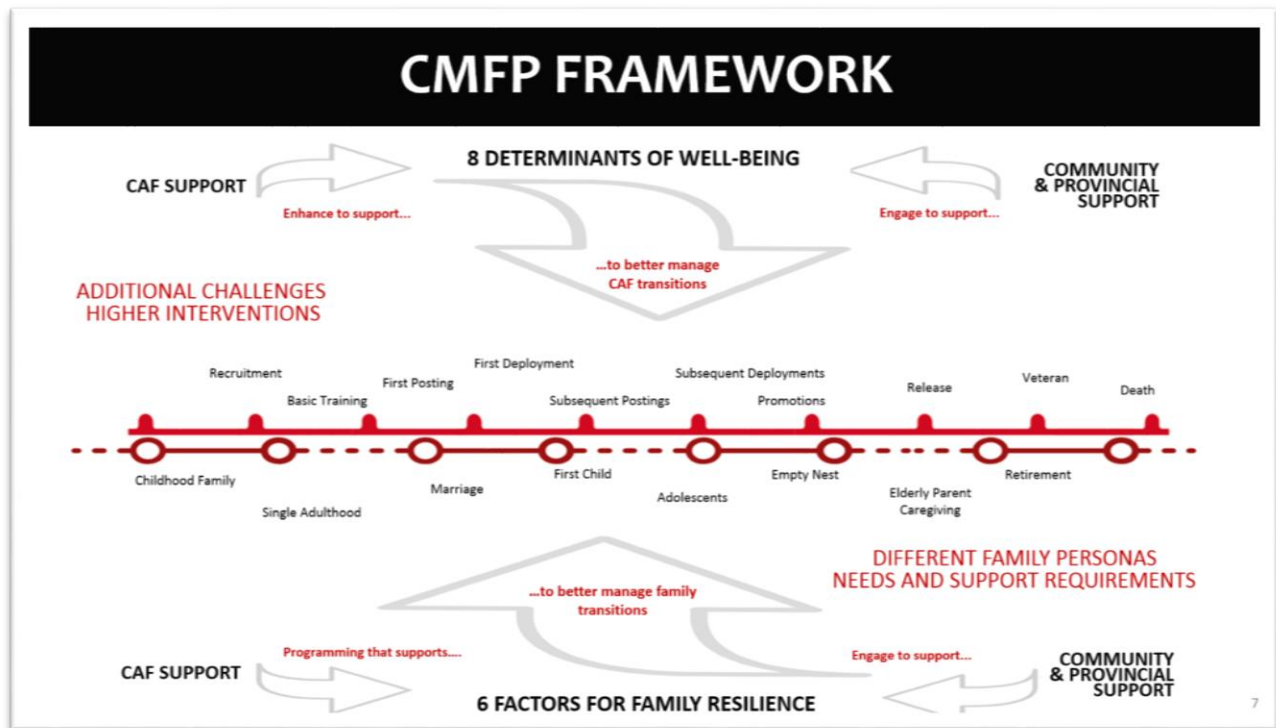


Figure 4. CMFP Conceptual Framework

2.2 ANALYSIS OF PROGRAM AND SERVICE GAPS

The inventory, mapping, and analysis of CAF program and service gaps (Chartier, 2019a) made it possible to identify 145 gaps affecting the availability and alignment, family awareness and use of these programs and services (Figure 5). Of the 145 gaps identified, 26 are systemic gaps and 119 are program gaps.

Combined with the data collected during the literature review, our approach has helped us to better understand how program and service availability and alignment are prone to producing

positive or negative environments and conditions for different types of families¹ or for certain population segments² needing more attention. It has also helped us identify measures that have the potential to minimize the risks of intersection.

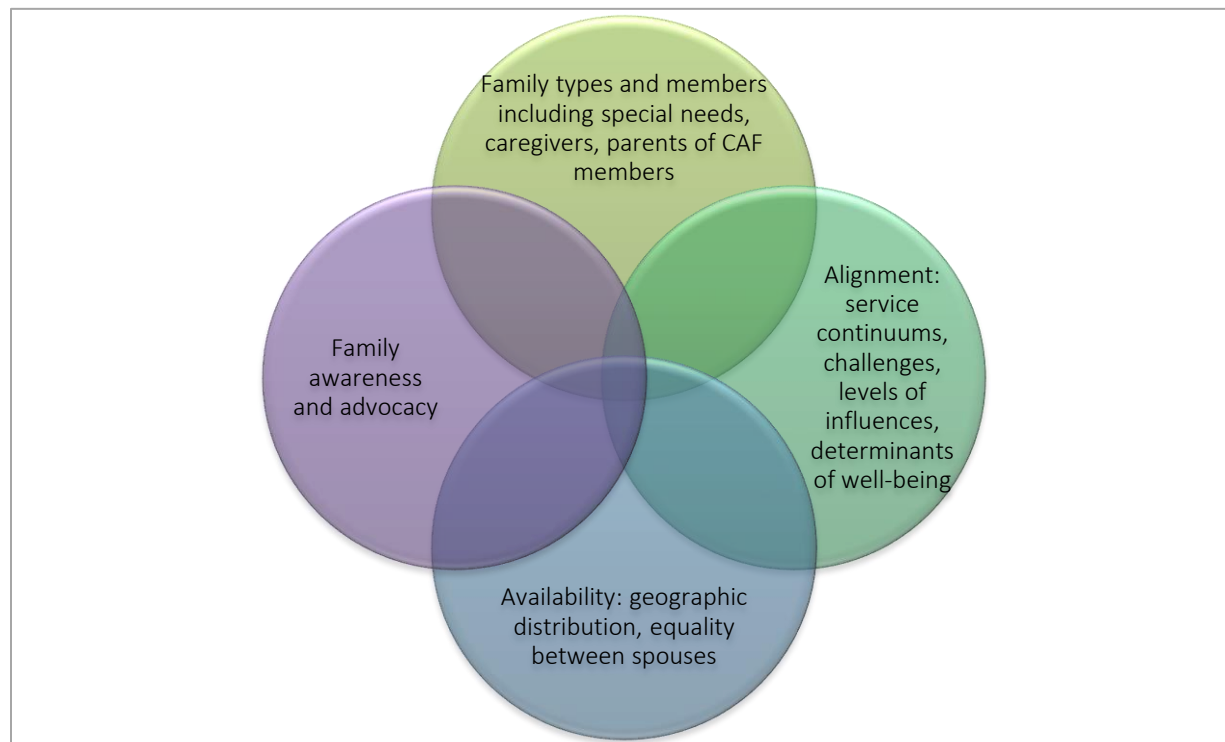


Figure 5. Analysis of Program and Service Gaps

2.3 STAKEHOLDER SOCIALIZATION AND INVOLVEMENT

From the beginning and throughout the entire process, stakeholders and commands were involved in strategy development³ (Figure 6). Of the 41 groups informed and consulted, 19 were able to participate on at least three occasions, 11 on two occasions and the other 11 on one occasion.

¹Family types: single CAF members and their original family, new families with young children, young families with elementary school-aged children, mature families with young adults, childless couples or couples whose children have left the nest, families in transition from military to post-service life, single-parent families, dual service couples, same-sex couples, families with special need dependants, CAF members caring for elderly person, dislocated family.

²Caregivers, children with special needs, parents of CAF members, families caring for their parents, etc.

³For a list of stakeholders informed and consulted, see the CMFP Strategy.

Of the people consulted including senior management committees, the total man-woman ratio is 1.5 to 1. If we exclude presentations to senior management committees (e.g. CFPMC: 3 men, 1 woman; B/W Commander Forum: 8 men, 1 woman), the ratio is 1 to 1.2.

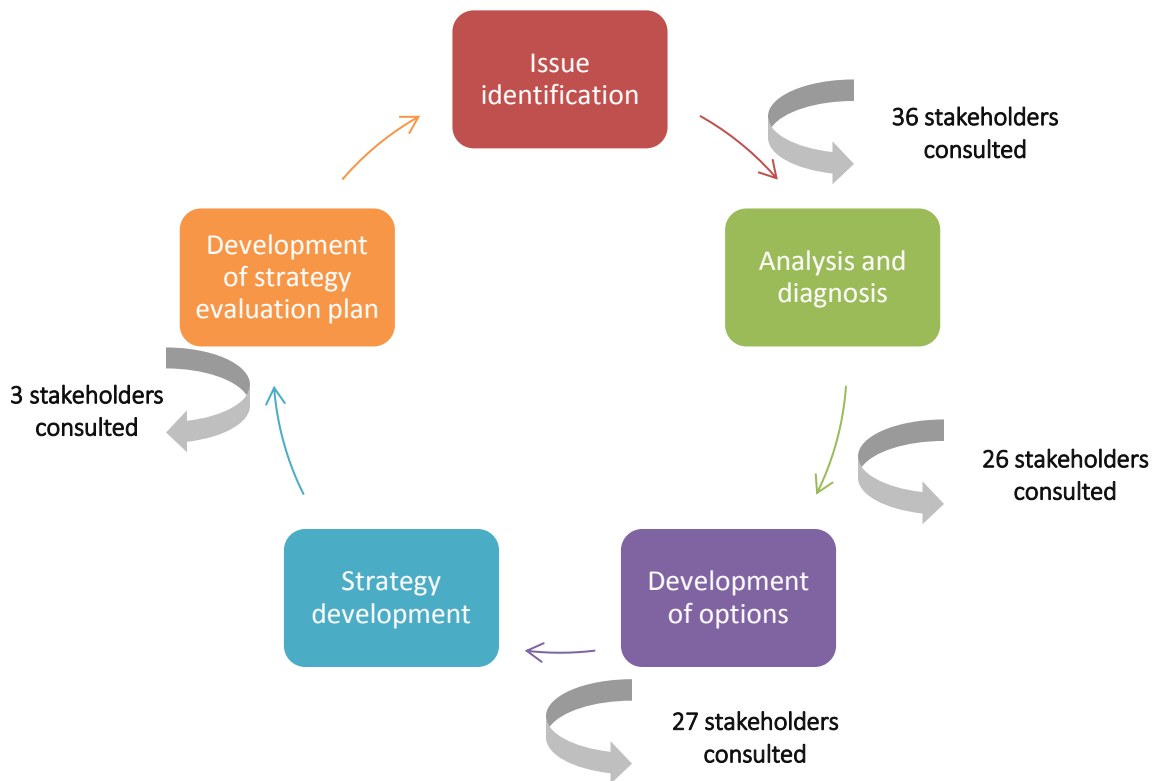


Figure 6. Consultations Throughout the CMFP Development Cycle

With regard to families, their voices were heard through the numerous studies conducted to date and will continue to be heard in upcoming studies. In fact, the studies consulted represent 100,000 families, 60% of whom are CAF members and 40% civilian family members (Government of Canada, 2019). An estimate of total ratios shows us that among CAF members, about 9,000 are women and 51,000 are men; among spouses and children, about 36,000 are women/girls and 4,000 are men/boys; and among the 150 service providers, about 75% are women.

This approach, which aims to mobilize families through research, was chosen for its scientific methodological rigour, rather than collecting anecdotes, comments and contributions by certain people at specific moments in time.

The different stakeholders and groups involved in strategy development were granted a leading role as this strategy will impact the process they use to align, communicate and make their programs and services available. As they have approved all 15 systemic recommendations and strategic action items, it is now up to them to implement these recommendations and continue to dialogue with the families they serve.

Recommendation 13 (Appendix 1), which includes implementing general guidelines for user satisfaction, performance measurement, and program and impact evaluation, will allow us to pursue the dialogue with families in a continuous and systematic manner. This dialogue, which also involves groups and stakeholders, will eventually be coordinated by a national CAF Family Covenant committee and local committees (Recommendation 11, Appendix 1).

2.4 FUTURE RESEARCH

More research has already been planned to:

- a) Deepen knowledge of certain segments of the population:
 - Dependants with special needs
 - Single parents
 - Childless couples
 - Caregivers' responsibilities and realities
 - Same sex couples
 - Blended families
 - Families of Reserve Force members
- b) Increase needs monitoring for communities where CAF members and their families live:
 - CAF Community Needs Assessment 2019 — in Canada and abroad
- c) Define the distribution of programs and services available abroad and for reservists.
 - Map and analyze program and service gaps.

3. CHALLENGE ASSUMPTIONS

Research conducted for the CMFP enabled us to identify certain beliefs that have at times guided research or program development and delivery up until now (Table 2).

The results urge researchers, policy makers and program developers to see families as unique entities and as having a stake in their living environments, systems and contexts (socioecological model), as well as reconsidering how resources are distributed throughout all Canadian B/W.

Table 2. Challenging Assumptions

Belief	Fact	Comment
Military families make up a single entity.	Military families are unique and diverse.	“Despite the fact that most of the existing research and demographics focus on the military family as a single entity (e.g. examined as a common unit), families are not a single distinct entity. Military families come in all different sizes and shapes, each with different needs and strengths. Different supports will be required by each of these different family types or ‘personas’.” (Manser, 2018a).
Each department or division should have their own definition of “family”.	This diversity of definitions impacts a military family’s eligibility and accessibility to different services and benefits.	<p>“Canadian military families have changed [...] Traditional family structures have given way to more complex and transitional arrangements.” (Ombudsman, 2013, p. 2).</p> <p>It is recommended that the CF establish a single definition of military family and apply it consistently throughout the DND/CF. (Ombudsman, 2013, p. 10).</p> <p>This definition should reflect the diversity of military families today and tomorrow.</p>
Military families face numerous challenges and risk factors. They need a lot of support.	Numerous protective factors allow military families to be resilient in spite of the challenges they face.	“Research is needed to better understand the protective factors at play that seem to be inherently contributing to the high rate of military

Belief	Fact	Comment
		family resilience without systemic interventions or supports.” (Manser, 2018, p. 98).
Military families exist as independent units.	Military families evolve within different living environments, systems and contexts.	“Research is also needed on the interaction of various factors, rather than simple questions on primary challenges.” (Manser, 2018, p. 98). “Research needs to be conducted acknowledging the ecological framework in which families exist, looking not only at the individual or the family unit, but also the communities they are part of, the provinces they live in, and the CAF itself as an institution and a culture.” (Manser, 2018, p. 98).
Resources should be allocated according to the size of the B/W.	The CAF and non-CAF programs and services offered are often proportional to the size of the B/W. Consequently, larger B/W located in urban environments, are better equipped with regard to CAF and non-CAF programs and services, compared to small B/W in rural environments.	Depending on where they live, military families do not have access to the same resources. This situation may compromise their well-being in relation to their particular personas and needs.

4. DEVELOP OPTIONS AND MAKE RECOMMENDATIONS

The approach to developing solutions relied on evidence-based theoretical models, the current needs of military families, their sociodemographic personas, the analysis of CAF program and service gaps, and on consultations with groups and stakeholders.

This process led to 15 systemic recommendations (Appendix 1) and 120 strategic action items (Government of Canada, 2019). The recommendations focus mainly on systems, communities, and groups and stakeholders as a whole. The action items mostly concern programs and services, individuals, and specific groups and stakeholders.

Examined from another angle, the systemic recommendations and strategic action items have the potential to mitigate inequities and influence one or more of the CMFP's four strategic goals: alignment, availability and awareness of programs and services, and family advocacy.

As such, these measures aim to influence research, policy development and review, mass media, and program and service development and delivery to, on the one hand, better support military families in their diversity, and on the other, minimize unintended negative effects.

The CMFP, by aiming to stabilize family life for CAF members and their families despite the challenges inherent in military and family journeys, hopes to reduce program and service gaps and inequalities for different segments of the population. In other words, the strategy aims to meet the needs of different family personas and military family members, regardless of their circumstances or the communities in which they evolve.

Tables 3 to 7 demonstrate how through strategic action items, and their relationship to the systemic recommendations and strategic goals, the CMFP responds directly and at times indirectly to the intersections identified by research.

Table 3. Access to Resources and Support for Caregivers

<p><i>While only 15% of Regular Force members are women, a higher proportion of these women are single parents (24% versus 76%), caregivers for a child with special needs (28% versus 72%) or an elderly parent (24% versus 76%) compared to the total proportional male/female Regular Force ratio (Government of Canada, 2019).</i></p>		
Strategic Action Item	Systemic Recommendation	Link to Strategic Goal
Increase support for female CAF personnel, which includes a high number of caregivers, especially regarding deployment and relocation.	5, 6, 7, 8, 9, 10, 12	Alignment Availability
Apply all family policies and service delivery standards to ensure that all family members and all family types receive the support they need. Ensure compliance of MFRC and all third-party service providers with the MFSP family policies and national strategies and campaigns.	9, 10	Alignment Availability Awareness Advocacy
Create a communications strategy and educational tools that promote the power of asking for help to enhance the resilience of individuals, families and communities. Continually promote programs and services offered to families.	5	Awareness Advocacy
Establish and manage a virtual space of support resources for caregivers.	1, 6, 7	Awareness Advocacy
Validate and implement resources and services for families caring for an elderly parent (CAFconnection.ca and MFSP).	1, 6, 7	Alignment Availability Awareness
Validate and update virtual resources for families who are caring for a person with special needs (CAFconnection.ca and MFSP services).	1, 6, 7	Alignment Availability Awareness
Develop support mechanisms for caregivers (caring for an elderly parent, a child with special needs or a CAF member with a physical or mental injury, etc.).	6, 7	Alignment Availability

Table 4. Equal Access to Employment Opportunities

<p><i>More than half of Regular Force members are in a relationship, and 84% of spouses are women. Throughout all of Canada, women face barriers to their well-being: they are more likely to earn lower wages, work part-time or in an unstable job, take on caregiver responsibilities, and thus have to rely on a partner for financial support (Government of Canada, 2019).</i></p> <p><i>Additionally, access to professional development and job assistance services and to education are not equal between the military and civilian spouse, with the military spouse having access to close three times more options (Chartier, 2019 a).</i></p>		
Strategic Action Item	Systemic Recommendation	Link to Strategic Goal
Promote all benefits that support the education of spouses (e.g. CBI 208.9963).	1	Awareness Advocacy
Explore the possibility of allowing spouses to attend courses at the Learning and Career Centre when space is available, and provide learning opportunities equivalent to those provided to CAF members by sharing course content currently offered on the Defence Learning Network (DLN) and the Canada School of Public Service to the CFMWS's E-Learning platform.	6, 9	Availability
Promote the Royal Military College's online continuing education program with spouses.	1	Awareness
Expand the reach of the professional counselling program to spouses.	6, 7	Availability
Create a network of choice employers for spouses.	6, 9	Availability
Explore the possibility of creating a program similar to the Compensation for Employers of Reservists Program (CERP) for spouses.	6, 9	Availability
Evaluate whether the current services to learn a second language are effective for spouses. If they are not, explore other options and implement validated strategies.	13	Alignment
Explore the possibility of spouses being able to register for the same language training in bases and wings as CAF members.	6, 7	Availability

Table 5. Youth and Military Lifestyle

<p><i>It would seem that children of Regular Force members use mental health services more than other Canadian children (Mahar, Chen et al. 2018):</i></p> <ul style="list-style-type: none"> • <i>Military children and youth are 10% more likely to consult a physician for mental health issues, regardless of the reason. Risks varied between girls and boys and by age group.</i> • <i>Boys in CAF families were more likely to have at least one mental health-related physician visit compared to boys from the general population, while girls in CAF families were just as likely as other Canadian girls to have at least one mental health-related physician visit.</i> • <i>Reasons why children from CAF families made at least one mental health-related physician visit differ from those of the general population. Children and youth from CAF families were a lot more likely to consult a professional for child psychosis (e.g. autism), a hyperkinetic disorder (e.g. ADHD) and non-psychotic disorders (e.g. depression, anxiety).</i> <p><i>Furthermore, children (0–5 years) are especially affected by deployments and absences due to operational tempo (e.g. emergency childcare, attachment), while older children (6–12 years) and teenagers (13–25 years) have more difficulty adapting socially and academically following a relocation (Manser, 2018).</i></p>		
Strategic Action Item	Systemic Recommendation	Link to Strategic Goal
Evaluate the possibility of establishing a minimum five-year service standard before authorizing the relocation of a family to a new place, except in extraordinary circumstances.	8, 10	Alignment
Coordinate joint family strategies, including strategies for injured members and their families, early childhood, childhood and youth, mental health and underserved segments of the population (e.g. parents of CAF members, caregivers).	10, 12	Alignment
Plan and adopt alternative delivery modes for certain programs if they have been evaluated as effective in meeting the current needs of Canadian military families, particularly the R2MR, Kids Have Stress Too, FOCUS, ISTEP, YPET, and E = MC3 workshops.	7, 10	Availability Alignment
Evaluate existing mental health interventions and ensure adherence to the MFSP’s mental health framework in the delivery of psychological services.	13	Availability Alignment
Evaluate, modify and promote the Emergency Childcare and Family Services Policy for military families.	1, 6, 8, 10	Awareness Alignment
Implement interventions on mental health issues currently experienced by children from military families using evidence-based practices that are aligned with joint strategies.	6, 7, 9	Availability Alignment

Develop and implement a national program (coaching, education and counselling) to help teenagers fit into their new community following relocation.	6, 7, 9	Availability Alignment
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Table 6. Equal Access to Programs and Program Information

<p><i>Access to information about benefits, programs and services and access to these programs is not the same for CAF members and for civilian members of their family (Chartier, 2019 a, b).</i></p> <p><i>Most of the information on benefits and services is only accessible from a DND computer hooked up to the Defence network. While this problem affects all families, it is possible that families where the spouse is deployed or deceased, or families that are victims of domestic violence, are more vulnerable compared to families where the military spouse is present and able to provide the information they need.</i></p> <p><i>The definition of “family” varies from one service provider to another, which has the potential to lead to increased vulnerability for certain people. Parents of single CAF members, single-parent CAF members, children with special needs or dual service couples have been refused the services they need, either because they are not eligible, or because the program is not geared toward the segment of the population to which they belong. Furthermore, dislocated families (legal status in transition, custody problems) also have difficulty accessing services or benefits because of the inconsistent definition of “family”.</i></p> <p><i>Based on anecdotal evidence, certain populations may experience difficulty accessing services due to their identity as these services are intended for a population that does not reflect who they are (male spouse or same-sex spouse).</i></p>		
Strategic Activity	Systemic Recommendation	Link to Strategic Goal
Implement a people-centred approach to standardize how program and service information is communicated and ensure that a centralized digital family communication strategy includes information on all CAF programs and services available to families.	1, 5	Awareness Advocacy
Use the main public communication channels to reach all family types.	1, 9	Awareness Advocacy
Continue to promote the FIL with families.	1, 3, 5	Awareness Advocacy
Regularly use all divisions as a means of communication to cross-promote information about all services.	1, 2, 3	Awareness Advocacy

Ensure that personnel have received training on all CAF services offered to families and on the family “coach” philosophy. ⁴	2, 4	Awareness Advocacy
Establish a permanent national committee on CAF commitment to families to improve service awareness and communications, and collaborative evaluation strategies.	8, 9, 10, 11, 12, 15	Alignment
Facilitate the implementation of permanent local committees in all B/W to improve service awareness and communications, and collaborative evaluation strategies.	8, 9, 10, 11, 12, 15	Alignment
Evaluate the feasibility of implementing a family sponsor program in all B/W.	6, 10	Awareness Advocacy
Establish a federal-provincial-territorial working group to provide homogenous services to concerned members of military families in new communities.	9	Alignment
Plan to make recommended modifications to certain policies and services and ensure families are informed (e.g. website outside of DWAN, through CAFconnexion.ca).	10	Alignment

Table 7. Equal Access to a Family Physician

<p><i>Access to certain types of services is not equal within the military family. For example, 100% of CAF members have access to a full healthcare plan, including a doctor, compared to 76% of civilian spouses and 83% of children (Manser, 2018).</i></p> <p><i>It is the responsibility of the CAF to provide healthcare services to CAF members while their families must rely on provincial services. Frequent relocations and the lack of doctors on certain territories (e.g. Kingston, Halifax, Cold Lake) are the main reasons for these inequalities.</i></p>		
Strategic Action Item	Systemic Recommendation	Link to Strategic Goal
Implement a national program of home-based telemedicine services for communities where there is a documented lack of primary healthcare services.	6, 7, 9	Availability Alignment
Evaluate the possibility of establishing a minimum five-year service standard before authorizing the relocation of a family to a new place, except in extraordinary circumstances.	8, 10	Alignment

⁴ Corresponding to Recommendation 4 (Appendix 1), this strategic action item requires managers to let their personnel attend trainings (upcoming) that aim to change the customer service paradigm, going from a service-delivery perspective to one based on the needs of people and referrals to other services.

5. AVENUES TO EXPLORE AND LIMITATIONS

The intersection of identity factors (e.g. language, gender, race) combined with institutional barriers (e.g. stigma, language of service delivery) can affect how people ask for help (Hankivsky & Cormier, 2009). Consequently, it is important to explore this avenue as it can shed light on how Recommendation 5 (Appendix 1) will be achieved and the strategic action items that stem from it. Omitting this aspect could prevent individuals and families from getting the help they need to improve or maintain their health, their relationships, their careers or an optimal level of resilience.

Very little information is available on male civilian spouses. Considering that men have their own challenges with regard to health and asking for help (Gouvernement du Québec, 2017), it would be relevant to see how family and military lifestyle challenges, as well as the current services available (e.g. MFRC) influence their health and well-being.

Furthermore, there is little information on other sub-populations. Better understanding on these sub-populations would enable us to adapt our programs and services to their realities.

- Single CAF members and their parents or original families
- CAF members transitioning from military to civilian life
- Dual service couples
- Bereaved families

Additionally, as language was an identity factor that received little consideration in the research carried out for the CMFP, it represents important limitations and it would be beneficial to include it in future studies. In fact, the language spoken has the potential to intersect with several other factors and produce inequalities (Hankivsky & Cormier, 2009) by, for example, influencing access to programs and services, community integration and the socioeconomic status of families, whose civilian portion is largely female. However, the gaps analysis revealed that access to resources for learning a second language were not the same between military and civilian spouses. As such, strategic action items⁵ have been integrated into the plan to improve access and the quality of the training for spouses.

⁵Strategic action item 67: evaluate if current language services are adequate enough for spouses to learn a second language. If they are not, evaluate other options and implement validated strategies.

Strategic action item 68: explore the possibility for spouses to follow the same language training on B/W as CAF members.

6. MONITOR AND EVALUATE

The CMFP's evaluation framework (Chartier, 2019b) includes a set of indicators that are meant to provide a true portrait of the implementation of 120 strategic action items and the strategy's effectiveness in achieving its objectives for the 10 years following its launch. In addition, the annual sociodemographic profile of Regular and Reserve Force members and their families living in Canada and abroad will enable us to monitor all new trends and decision-making processes in a continuous and long-term manner.

On the one hand, the evaluation framework's logic models demonstrate how the different recommendations can, with certain cultural changes in the organization (e.g. Recommendations 4 and 11) and the implementation of strategic measures (e.g. Recommendations 1 to 8), facilitate how people use programs and ask for help. They also enable us to establish the relationship between policies, programs and services and the needs of military members and their families. On the other hand, they show how they should help reduce inequalities regarding program availability and accessibility for the entire family as well as for specific segments of the population.

Recommendation 13 (Appendix 1) and the three strategic action items⁶ put forth the importance for stakeholders to evaluate their programs and services so that they adequately meet the needs and expectations of military members and their families. In this regard, everyone will have five years to implement a program and service evaluation system (user satisfaction, performance measurement, impact evaluation) following the launch of the strategy.

National standards, which will subsequently be communicated to stakeholders, will need to be developed so that any repercussions, whether positive, negative or neutral, on policies, programs or initiatives with regard to family types and members as well as to the main identity factors⁷ can be measured.

⁶ Action item 1) Implement systems in accordance with national guidelines and standards for user satisfaction, performance measurement, program evaluation and impact evaluation (generic for all stakeholders).

Action item 6) Provide the necessary support to all CAF service providers so they can implement systems in accordance with national guidelines and standards for user satisfaction, performance measurement, and program and impact evaluation (CMP to attribute to appropriate OPI).

Action item 16) Develop and implement guidelines and national standards for all CAF family programs and services to evaluate user satisfaction, performance measurement, and program and impact evaluation (CMPC to attribute to the CMFP team).

⁷ Notably gender, age, language, education, socioeconomic status, civil state, sexual orientation, family persona, and geographic area.

CONCLUSION

While studies show that military families are resilient, the Gender-Based Analysis Plus (GBA+) shows how the intersection of military and family journeys, combined with identity and structural factors, can affect their well-being and health, as well as reduce access to personal, social and professional development opportunities, that are comparable to those offered to CAF members.

The CMFP, which is thoroughly research-based, considers each of these aspects. By targeting the organization as a whole, the 15 systemic recommendations aim to influence the culture, collaborations and current and future policy and program development. These recommendations, founded on population-equity and population-health principles, should contribute to reducing the inequalities identified in the research.

The strategic action items, which will be performed by about 20 stakeholders over a period of five years following the launch of the CMFP, specifically aim to reduce gaps and intersections of identity factors identified in the research. A monitoring and evaluation system will allow us to follow the evolution of their implementation and their impact on families. The periodic evaluation of the CMFP will also enable us to remain vigilant and proactive with regard to identifying barriers and trends affecting military families and our capacity as an organization to remedy these inequalities through universal and targeted measures.

Hoping that the theoretical effectiveness of the CMFP will pay off, CAF members and their families will henceforth be able to evolve in a positive environment where they will be able to maintain a stable family life despite the family and lifestyle challenges inherent in the military lifestyle, and regardless of the identity factors that characterize each one of them.

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APPENDIX 1. SYSTEMIC RECOMMENDATIONS

#	RECOMMENDATION
1	Implement a people-centred approach to standardize how program and service information is communicated.
2	Educate service providers on the full suite of programs and services available to CAF members and their families.
3	Develop and coordinate recurring targeted awareness campaigns.
4	Promote an organization cultural change that fosters service delivery from a “family” coach philosophy.
5	Create a communications strategy and educational tools that promote the power of asking for help to enhance the resilience of individuals, communities and organizations.
6	Identify standardized core programs and services that should be available and accessible by all military families regardless of location, all of which are based on current evidenced family needs.
7	Explore new models of delivery for select programs and services.
8	Review and amend select policies that have unintended negative effects for military members and their families.
9	Establish and maintain collaborations with governments and NGOs to increase program and service offerings, vitalize the military community, and facilitate community integration.
10	Ensure policy and programs mutually reinforce social and physical environments that support the well-being of military members and their families.
11	Establish a standing national CAF Family Covenant committee and local committees to increase awareness of services, continuous communications, and the development of collaborative strategies, plans and evaluation systems.
12	Develop collaborative strategies to inform decision-making, program and service development, delivery and evaluation.
13	Develop and implement national guidelines and standards for user satisfaction, performance measurement, program evaluation and impact evaluation.
14	Formalize and increase the applied research capacity to coordinate knowledge generation and mobilization on military family issues, and to guide and evaluate programs and services.
15	Develop and implement a tool that supports decision-making to inform policy and program development, implementation and assessment to operationalize a modernized and enforceable CAF Family Covenant.

APPENDIX 2. DEMYSTIFYING GBA+: JOB AID



Source: https://cfc-swc.gc.ca/gba-acs/course-cours/fra/mod03/mod03_03_02.html