

# Dawson College Shooting, September 13, 2006: Summary and Recommendations



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**Suggested quotation:**

Guay, S., Lesage, A., Bleau, P., Séguin, M., Boyer, R., Steiner, W., Szkrumelak, N., Gauvin, D., Miquelon, P., Chawky, N., Roy, D. *Dawson College Shooting, Septembre 13, 2006: Summary and Recommendations*. Last of four reports presented to the ministère de la Justice du Québec on the evaluation of the psychological impact and intervention after the shooting at Dawson College on September 13, 2006.

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Library and Archives Canada, 2010

ISBN 978-2-922577-85-3

1st September 2010.

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***Thank you...***

**Telephone Operators:** Dan Jeannotte, Jessica Buraï, Julie Potvin, Ever Yobany Rivas, Frances Moyle, Alexandra Martin, Kang Min Lee, Mélanie Riccio, Maria Garcia, Adam Leiner, Barbara Skerrett, Grace Hlywa Maytan, Robin Wiviott and all others who participated.

**Employees of Dawson:** Richard Filion, Diane Gauvin, Donna Varrica, Paul Rastelli, Shirley Jorgensen, Andrew Mackay, Mary Hlywa, Geoff Kloos, Drago Kresevic and everyone who participated.

**Research Team assistants:** Denise Roy, Nadia Chawky, Paule Miquelon, Jean-François Dupont, Emilie Soulard, Julie Fiset-Laniel, Christian Sauvé, Philippe Lesage, Nicole Guay, France Proulx, Christian Levac and the MultiSpectra team.

**A very special thank you to all those who agreed to participate in remembering these tragic events:** the students, the support staff, the teachers, the professionals, the administrators and the first responders and mental health professionals, the parents, and especially, the family of Anastasia De Sousa.

To the Honourable Jean-Marc Fournier,

Minister of Justice for Quebec

On September 13, 2006, an armed individual burst into Dawson College, killing one person, wounding 19 others, and subsequently killing himself. It was the third tragedy of this kind to occur in Quebec; a tragedy that has left its mark in our collective memory.

It was the hope of Dawson College, in accordance with its teaching mission, that an analysis of the intervention would improve the psychosocial support offered in the event that such an incident were ever to occur again.

It is in this context that the Research Institute of the McGill University Health Centre (MUHC) received funding in 2007 from the Government of Quebec to study the psychological impact of this dramatic event. In order to do so, a dynamic inter-academic collaboration was created with McGill University, the Université de Montréal and the Université du Québec en Outaouais, as well as with Dawson College. In addition to examining the psychological impact of this dramatic event on the population exposed to the event, the study allowed for the evaluation of the existing emergency psychological intervention plan and for the proposal of an intervention plan model for responding to similar situations.

Under the scientific direction of Dr. Alain Lesage, our team, made up of researchers from the Fernand-Seguin Research Centre of Louis-H. Lafontaine Hospital, the McGill Group for Suicide Studies and the Research Institute of the McGill University Health Centre, would like to present to you the following four documents:

- Evaluation of the emergency psychological intervention plan;
- Report on a study conducted with students and staff of Dawson College on the psychological impact of the incident and the search for support;
- SECURE (Support, Evaluation and Coordination United for Recovery and Education): a multi-modal psychological intervention program;
- Summary and recommendations.

By presenting these documents, the associated researchers wish to bring the necessary information to the health, education, justice and public security networks so that they may intervene efficiently in the context of a dramatic event such as the one experienced on September 13, 2006 at Dawson College.

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## SUMMARY AND RECOMMENDATIONS

The shooting of September 13, 2006 at Dawson College required the implementation of an ad hoc emergency psychological intervention plan comprised of three major phases:

- 1) Mobilization of resources and creation of a crisis management team;
- 2) Offer of psychosocial support to the victims; and
- 3) Re-appropriation of the College by the Dawson community.

The psychological repercussions of such an event are not limited to the first days, but can manifest themselves in the weeks, months and possibly years that follow. The evaluation of the different manifestations of impact and psychological interventions that were conducted highlights the fact that needs were not fully met, despite the creation of a crisis management team based at the College and support from the health care and social services network. In the beginning, some rare people were ill served, but many more were hesitant to consult, and as time passed, the corridors of privileged access were fading, so these people faced the same difficulties of acceptability and accessibility to services as their fellow citizens affected by mental health problems. Evaluation studies on the psychological effects of shootings in school communities and on the appropriateness of psychological support interventions conducted after the armed attacks are rare, even more so over periods of two years after the event, and few specific guidelines regarding their application exist.

### Recapitulation Of The Goals Of The Study:

1. Evaluate the efficacy of the psychological intervention plan that was set up immediately after the shooting, including an audit of the services offered and the degree of satisfaction among those who used these services.
2. Conduct a quantitative evaluation of the psychological, pedagogical, professional and social repercussions of the event on the students, teachers and support staff of Dawson College, including an evaluation of the impact on the victims' physical and mental health.
3. Develop an emergency psychological intervention plan in the event of school violence to be used by the four Quebec ministries and their network of services [ministère de la Justice (MJ), ministère de la Santé et des Services Sociaux (MSSS), ministère de l'Éducation, du Loisir et du Sport (MELS) and ministère de la Sécurité publique (MSP)].

The goal of this summary is to make specific recommendations stemming from:

1. Intervention plans in public security as well as social services and healthcare;
2. A summary of the three previous reports (Roy et al., 2010; Boyer et al., 2010; Séguin et al., 2010)<sup>1</sup>
3. Recognized public health principles of secondary and tertiary prevention, i.e. intervening with individuals exposed to the incident to prevent chronicity of after-effects, as well as primary prevention to increase the resilience of people working in a school environment and create healthy work environments in order to reduce the prevalence of mental disorders, substance abuse and aggressive behaviours.

1. ROY, D., LESAGE, A., SÉGUIN, M., CHAWKY, N., BOYER, R., GUAY, S., BLEAU, P., STEINER, W., SZKRUMELAK, N., GAUVIN, D., MIQUELON, P., (2010) *Dawson College Shooting, September 13, 2006: Evaluation of the Emergency Psychological Intervention Plan*. ISBN 978-2-922577-87-7 BOYER, R., LESAGE, A., GUAY, S., BLEAU, P., SÉGUIN, M., STEINER, W., SZKRUMELAK, N., GAUVIN, D., MIQUELON, P., ROY, D., CHAWKY, N., (2010) *Dawson College Shooting, September 13, 2006: Report on a study conducted with the students and employees of Dawson College on the psychological impact and the search for support*. ISBN 978-2-922577-89-1 SÉGUIN, M., CHAWKY, N., GUAY, S., SZKRUMELAK, N., LESAGE, A., BLEAU, P., BOYER, R., STEINER, W., GAUVIN, D., MIQUELON, P., ROY, D. (2010) *Dawson College Shooting, September 13, 2006: SECURE (Support, Evaluation and Coordination United for Recovery and Education): a multimodal psychological intervention plan*. ISBN 978-2-922577-91-4



An appropriate response from the community is crucial when a crisis such as a school shooting takes place. Each recommendation has been formulated to be adapted to the various levels of education (elementary, secondary, college and university) and different living environments (e.g. urban vs. rural).

## Recommendation 1

That the Government of Quebec acknowledge this report and request that the four ministries, ministère de la Justice (MJ), ministère de la Santé et Services sociaux (MSSS), ministère de l'Éducation, du Loisir et du Sport (MELS) and ministère de la Sécurité publique (MSP), consider the recommendations made in these reports.

The Government of Quebec has developed psychosocial intervention plans in public security, health care and social services which can be applied in the event of crises (Martel, 2000; Laurendeau, Labarre & Sénécal, 2007)<sup>2</sup>. However, the summary of these three reports and the recommendations drawn from them indicate the need to develop an emergency intervention plan that is more detailed and effective, in order to minimize the psychosocial after-effects which can stem from such an event. "SECURE", the multimodal psychological intervention program designed to be used following a school shooting, proposes the following, more detailed recommendations.

## Recommendation 2

That the four ministries mandate, oversee and finance an expert committee to validate the multimodal SECURE plan.

This expert committee should conduct a strategic evaluation, gathering input from the various stakeholders both in Quebec and outside the province. This strategic evaluation will lead to the development of a plan that will be integrated with the existing crisis intervention protocols, and include a tool kit adapted to school shootings. This intervention kit must contain the various tools needed to support the individuals affected by the shooting, and provide a training program for responders in case of a crisis or an emergency in schools. This kit is essential for ensuring that responders have the necessary skills to provide psychological intervention in the short and long term in the event of school shootings or other traumatic events.

## Recommendation 3

In order to increase the long-term resilience of individuals in school communities, that MELS and MSSS as well as organizations such as the Institut de recherche Robert-Sauvé en santé et en sécurité du travail (IRSST), the Fonds de la recherche en santé du Québec (FRSQ) and the Fonds québécois de la recherche sur la société et la culture (FQRSC), support the implementation of the *BNQ 9700-800/2008 Prevention, Promotion and Organizational Practices Contributing to Health in the Workplace within educational institutions*<sup>3</sup>. This standard relies upon the organization's of a workplace Health and Safety Committee to identify health problems; to develop activities for the promotion, prevention and access to treatment; ensure the implementation of the BNQ Standard; and evaluate the implementation of these activities.

2. MARTEL C. (2000) Qu'en est-il de l'intervention psychosociale en sécurité civile au Québec? » Santé mentale au Québec, 25 (1), 45-73.

LAURENDEAU, M-C., LABARRE, L., SENÉCAL, G. (2007) The psychosocial dimension of health and social service interventions in emergency situations. *Open Med.* 1(2): e102–e106. Published online 2007 August 20.

3. BNQ. Bureau de normalisation du Québec (2008). Standard BNQ 9700-800/2008. *Prevention, Promotion and Organisational Practices Contributing to Health in the Workplace*. ISBN 978-2-551-23735. (available from <http://www.bnq.qc.ca/en/index.html>)





## Recommendation 4

That, following a school shooting, MSSS and MELS ensure the immediate deployment and funding of a crisis intervention expert to work with the school's crisis management team in the short and long term.

Shootings in school communities are unpredictable, even though they are relatively common occurrences worldwide. It is difficult to mobilize and organize all the resources needed to deal with such a crisis while the school is under siege. On the day of the event, the main priority must be the health and safety of the victims. This requires an integrated medical and psychosocial emergency plan, developed in advance, which relies upon various branches of the health and public safety systems in the community, as well as those provided by the school. The school administration must constitute the core of the crisis management team and include an expert in psychological crisis intervention designated by the regional health and social services board or the MSSS, as well as other team members representing:

- Regional health agency;
- the Crime Victims Assistance Centre (CAVAC);
- the local Health and Social Services Centres (CSSSs);
- Police services;
- Psychological counsellors from the school;
- Workplace Health and Safety Committee (if it has been set up according to Recommendation 3).

The crisis management team in each school, municipality and region of Quebec should be designated in advance by the expert committee cited in Recommendation 2. Moreover, the composition of the team must be adapted to the context of the event. The responsibility for determining the composition of this committee rests with the four ministries, MSSS, MELS, MJ (via Indemnisation and Bureau d'aide aux victimes d'actes criminels, IAVAC and BAVAC) and the MSP.

The crisis management team must establish four cells:

1. Medical and psychological support;
2. Communications;
3. Security / restoration of the premises;
4. Planning the logistics for the return to school as well as psychoeducational activities.

## Recommendation 5

That the MSSS ensures that hospitals have medical and psychosocial emergency plans in place.

This recommendation requires hospitals to integrate a psychosocial intervention plan, as per the model developed at the McGill University Health Centre and in the SECURE plan, into their Code Orange protocol. The implementation of this psychosocial intervention plan would take place in hospitals which are in a position to receive the physical and psychological casualties. The hospitals must be ready to:

- Identify an area to treat victims with minor physical wounds and psychological trauma which is separate from the Emergency Room;
- Designate space(s) to receive the victims' families which is separate from the Emergency Room;
- Create an interdisciplinary team including volunteers and members of pastoral care prepared to support victims as well as their loved ones;
- Provide information as well as support;
- Ensure that the crisis management team, suggested in Recommendation 4, establish contact with the coordinator of the hospital's psychosocial response team and keep him/her informed of the evolution of events in order to coordinate the activities and services offered to the victims seen in the hospital.

It is recommended that the hospital designate a case manager to ensure the coordination of care in the short and long term for victims hospitalized with severe physical and/or psychological injuries, as well as providing support to their families. This case manager should be based in the hospital and supported by a multidisciplinary team to offer immediate and post-event care. Depending on the wants and needs of the victims, this team will work in collaboration with the CAVAC, the CSST, the school and the public health and social services networks, as well as the private sector and the community. The case manager(s) will be in contact with the school's crisis management team (as per Recommendation 4) via the coordinator of the hospital's psychosocial response team.

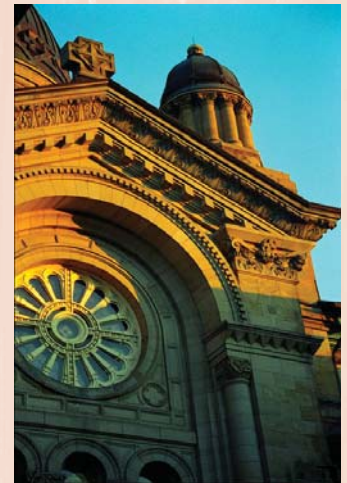
## **Recommendation 6**

That the Government of Quebec ensure accessibility to psychotherapy in the short and long term for all students, employees and private contract schools staff.

The majority of people who experienced mental health problems following the event did not consult with mental health professionals, despite the offer of potentially effective psychological interventions. However, the lack of insurance coverage may render these services inaccessible. We therefore recommend that the Quebec Government cover the fees incurred by the school's students and employees to ensure, in the short, medium and long term, access to fast and efficient psychosocial services.

## **Recommendation 7**

That, the MELS, MSSS, MJ and MSP should develop a protocol to evaluate the implementation of the SECURE plan after a school shooting, in collaboration with the Quebec granting organizations IRSST, FRSQ and FQRSC. We can then learn from our experience and continue to improve the quality of multimodal psychological intervention should such tragic events recur.



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