A Pathway to Hope
Progress report

SEPTEMBER 2021
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A Pathway to Hope

On June 26, 2019, the Government of BC launched A Pathway to Hope: A roadmap for making mental health and addictions care better for people in British Columbia.

This roadmap lays out government’s 10-year vision for mental health and addictions care that gets people the services they need to address problems early on and support well-being. At the heart of A Pathway to Hope is a three-year plan to begin transforming mental health and substance use care for children, youth, young adults, adults, families and Indigenous populations to reach them where they are – in their homes, communities and schools.

A Pathway to Hope shows our vision for transforming the mental health and addictions system to ensure every door is the right door, and people can ask once and get help fast. It acknowledges that physical and mental health are equally important for creating thriving and resilient communities.

There is still more to do to achieve the vision set out in A Pathway to Hope. This report details the progress we have made to date.

British Columbians across the province are receiving new mental health and substance use supports through A Pathway to Hope - in their home communities, health settings, workplaces, schools and online.
## MENTAL HEALTH AND ADDICTIONS ROADMAP

All British Columbians experience and maintain physical, spiritual, mental and emotional wellbeing and thrive in the communities in which they live, learn, work, and play.

### Goals

<table>
<thead>
<tr>
<th>1</th>
<th>Wellness Promotion and Prevention</th>
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<tbody>
<tr>
<td>-</td>
<td>British Columbians experience physical, spiritual, mental and emotional wellbeing.</td>
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<td>British Columbians experience resiliency.</td>
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<td>British Columbians who are exhibiting early signs and symptoms of mental health and addictions problems are identified and supported to prevent problems from worsening.</td>
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<td>-</td>
<td>British Columbians experience well-being through health promotion and prevention approaches that support resiliency, and a sense of belonging and purpose.</td>
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<tr>
<th>2</th>
<th>Seamless and Integrated Care</th>
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<tr>
<td>-</td>
<td>British Columbians and their families experience a system of evidence-based services and supports that are flexible and responsive to their needs at any place in time.</td>
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<td>-</td>
<td>British Columbians and their families are at the centre of planning service delivery approaches that enable treatment and recovery.</td>
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<td>Services, supports and policies are co-ordinated across governments and sectors.</td>
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<th>3</th>
<th>Equitable Access to Culturally Safe and Effective Care</th>
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<tr>
<td>-</td>
<td>A full range of evidence-based services, treatments and supports are available when and where they are needed.</td>
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<td>-</td>
<td>People with lived experience inform and are leaders in mental health and addictions policy, planning and delivery of services and supports.</td>
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<td>Services and supports are culturally safe and provided with humility, and are free from stigma and discrimination.</td>
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<td>Services and supports are evidence-based and are delivered using a healing, relational and strength-based approach.</td>
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<th>4</th>
<th>Indigenous Health and Wellness</th>
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<td>-</td>
<td>First Nations, Métis and other Indigenous peoples can access culturally safe and effective services across the entire provincial spectrum of services and are supported to address social determinants of health, build community and personal resilience and foster healthy child and family development.</td>
</tr>
</tbody>
</table>

### Three Year Action Plan 2019/20 – 2021/22

#### Improved Wellness for Children, Youth and Young Adults
- Support for pregnant individuals and parents with substance use challenges
- Promote early childhood social emotional development
- Enhance programming in early childhood centres
- Expand Confident Parents: Thriving Kids
- Expand Foundry centres
- Mental health in schools
- Establish Integrated Child and Youth Teams
- Step up/down: Specialized care home beds and intensive day programs
- Create virtual counselling for post-secondary students

#### Supporting Indigenous-led Solutions
- Implement Tripartite MOU with the FNHC, FHWA and Government of Canada
- Develop 10-Year Strategy to achieve progress on the social determinants of health and wellness
- Embed cultural safety and humility across the provincial system
- Expand First Nations-run treatment centres
- Expand Indigenous Land-based cultural and healing services
- Enhanced capacity for Métis Nation BC for priority setting and planning
- Support First Nations-led primary health care initiatives

#### Substance Use: Better Care, Saving Lives
- Framework for improving substance use system of care
- Ensuring best evidence guides care in B.C.
- Increase access to evidence-based addictions care
- Integrated team-based service delivery to connect people to treatment and support ongoing recovery
- Overdose emergency response, including community-based harm reduction services
- Supportive recovery services
- Provincial Peer Network

#### Improved Access, Better Quality
- Expand access to affordable community counselling
- Team-based primary care (with mental health and substance use professionals) and specialized services
- Enhanced provincial crisis lines network
- Framework and standards to improve care under the Mental Health Act
- Implement peer support co-ordinators
- Develop peer support worker training resources
- Expand Bounce Back
- Mental Health & Wellness Disaster Recovery Guide
- Workplace mental health
- Create a web-based portal (focused on children and youth)
Our progress to date

Over the first two years of A Pathway to Hope implementation, we have worked hard to create partnerships, lay foundations, and drive change – and we are seeing progress. As a result, we are well on our way to building a coordinated and comprehensive system of mental health and addictions care where all people living in British Columbia can get the help and support they need, when they need it.

Dual public health emergencies

In March 2020, British Columbia declared a public health emergency due to the COVID-19 pandemic. This was in addition to the ongoing public health emergency of the illicit drug toxicity crisis.

The pandemic has shone a light on the gaps in the fragmented system of care and highlighted, even more starkly, the need to improve access to a more coordinated and culturally safe mental health and substance use system of care for everyone, particularly for the most vulnerable people living in British Columbia.

New services and supports have been put in place across all priority areas of A Pathway to Hope. More than half the priority actions of the initial three-year roadmap are now implemented, with the remaining actions well underway.

Since the beginning of 2016, 7,596 lives have been lost to an illegal drug supply that is more toxic than it has ever been in British Columbia. Prior to COVID-19, the number of overdose deaths were coming down in BC for the first time since 2012. The measures we put in place were working, and it is estimated that over 6,000 overdose deaths were prevented as a result. But for people who use substances, the intersection of the public health emergencies of overdose and COVID-19 has exacerbated health
inequities, the ongoing risk of overdose, and other harms due to the toxic street drug supply.

The unintended consequences of COVID-19 measures have been particularly hard on people who use drugs. Many are facing isolation and loneliness, disconnection from usual in-person supports, financial strain and mental-health challenges – all contributing to unprecedented levels of stress and pain.

Government moved quickly to stand up services to support people and their mental health during the pandemic. This included funding Foundry Youth Centres, the Canadian Mental Health Association – BC Division (CMHA-BC), Provincial Health Services Authority, the BC Psychological Association, Regional Health Authorities, First Nations Health Authority, and other community partners to deliver new and expanded mental health and addictions services:

- Providing more access to online programs for mental health by expanding the BounceBack and Living Life to the Full programs. BounceBack provides online coaching and the Living Life to the Full program helps people deal with life challenges and learn self-management skills;
- Expanding access to no- and low-cost community counselling programs, including those that serve immigrant and refugee populations, and enabling them to be delivered virtually;
- Increasing access to online peer support and system navigation;
- Providing virtual supports for youth aged 12 to 24 by making Foundry services available around the province through voice, video and chat;
- Providing more online tools and resources to help people assess and manage their own mental health;
- Supporting the workplace mental health of front-line health-care workers through a new online hub and virtual peer support;
- A new online psychological support service for health-care workers;
- A new Lifeguard App, a mobile technology that alerts emergency first responders to a person at risk of an illicit drug overdose;
- Expanding capacity of the Rapid Access Consultative Expertise (RACE) Line that provides clinical advice and consultation immediately to primary care physicians and nurse practitioners across the province;
- Putting in place clinical guidance for Risk Mitigation in the Context of Dual Public Health Emergencies to provide clinical guidance for health care providers to prescribe safer supply for people who use drugs during COVID-19 and the ongoing drug toxicity emergency;
- Launching workplace mental health supports and promotion of psychological health and safety;
- Expanding suicide prevention and life promotion programs;
- Accelerating overdose emergency response measures due to the COVID-19 pandemic, such as increased access to outreach teams and overdose prevention services (including inhalation overdose prevention);
- Providing one-time operational support funding to at-risk services providers in the substance use supportive recovery sector.
Improved wellness for children, youth and young adults

A cornerstone of A Pathway to Hope’s initial three-year action plan is improving mental health and wellness for children, youth and young adults. Over the past two years, we have worked with our partners to lay the foundation for transforming mental health and substance use care for children, youth, young adults and their families by increasing efforts in prevention and early intervention, weaving together the existing fragmented patchwork of services, and filling gaps in services.

By linking together existing services in new ways and investing in new services, government is creating a seamless system of care from mental wellness promotion to highly specialized services. We are working across ministries, with Indigenous partners and service delivery partners to build a culturally safe and effective system of care that benefits young people and their families in communities throughout British Columbia. Activities in this area span life stages from pregnancy through early childhood, school-aged years and into young adulthood.
### Integrated Child and Youth Teams

Integrated Child and Youth (ICY) teams are community-based multidisciplinary teams that deliver wraparound mental health and substance use services and supports for children and youth aged 0 to 19. ICY teams will provide outbound services (that meet children, youth and families where they choose), outreach services, working closely with schools, early years services, and primary care, and will connect children and youth to specialized and higher intensity services when needed. Core team members include child and youth mental health clinicians, youth substance use clinicians, education counsellors, youth and family peer support workers, Indigenous positions, and ICY Program Leaders.

- Implementation of ICY teams is underway in five school districts: Comox, Maple Ridge – Pitt Meadows, Richmond, Coast Mountains, and Okanagan-Similkameen.
- Budget 2021 provides funding to expand ICY teams to 15 additional school districts, for a total of 20 districts across BC by the end of 2023/24.
- Teams will be formed through existing positions in the community as well as new positions. In total, we anticipate that these teams will be staffed by over 410 new FTEs (60+ for the original 5 teams and 350 for the additional 15 teams).

### Early Childhood Intervention Services

This initiative has focused on providing enhanced support to children with social, emotional, and/or developmental challenges through partnership with community-based agencies. This investment has included hiring additional staff such as family support workers, child-parent attachment services, behavioural consultants/analyst services, and infant mental health clinicians and creating formal linkages with the ICY teams.

Budget 2021 invests additional funding to expand Early Intervention Services within the 15 new communities, for a total of 20 by 2023/24.

### Step Up/Step Down Services

These specialized community-based services are for children and youth with severe mental health and/or substance use needs. Step Up/Step Down specialized services include clinical outreach supports that aim to avoid or shorten hospitalization and support transitions back to community-based services after hospitalization.

- Implementation of clinical outreach services is underway in Maple Ridge-Pitt Meadows and Comox Valley, soon to be followed by the Okanagan-Similkameen, Coast Mountain and Richmond school districts.

Budget 2021 invests additional funding for implementation of bed-based services.
### Expanding Foundry Youth Centres

A Pathway to Hope’s three-year action plan committed to expanding the number of Foundry centres to 19 across the province, as well as strengthening partnerships with Indigenous communities to build capacity to deliver culturally appropriate, safe and humble services.

- Foundry centres have opened in eleven communities: Vancouver (Granville), North Vancouver, Prince George, Campbell River, Kelowna, Abbotsford, Ridge Meadows, Victoria, Penticton, Richmond, and Terrace.
- An additional eight Foundry centres are in development in Burns Lake, Comox Valley, Cranbrook (East Kootenay), Langley, Port Hardy, Squamish (Sea to Sky), Surrey, and Williams Lake (Cariboo Chilcotin), for a total of 19 centres province-wide.
- Budget 2021 provides additional investment to open four new Foundry centres, for a total of 23 province-wide by 2025/26.

### Launching Foundry Virtual and the Foundry BC App

Early in the COVID-19 pandemic, the Province funded an accelerated launch of Foundry virtual services. Young people 12-24 and their families can access Foundry Virtual including counselling, peer support, primary care and family support through voice calls, video and chat from anywhere in the province.

The Foundry Virtual App was launched in March 2021. The App incorporates features such as live clinician chat, clinical content (articles, videos and podcasts), goal setting, scheduling and other tools co-designed by clinicians and users.

Budget 2021 invests additional ongoing funding to serve even more young people throughout the province.

### Reaching children, youth and families

- In 2019/20, 10,868 unique youth accessed Foundry services, for a total of 40,974 visits to Foundry.
- In 2020/21, 12,274 unique youth accessed Foundry services, for a total of 51,907 visits. This included access to Foundry Virtual services.
- The launch of the Foundry app in March 2021 facilitated a significant increase in new youth registering for services:
  - 486 new youth registered in March 2021, compared to 147 in February 2021 before the app was launched.
  - In the first two months of the Foundry BC app being available, almost 1,100 youth and families/caregivers registered on the app, and more than 1,400 youth and families/caregivers completed an appointment through the app.
ENHANCING SUPPORTS FOR CHILDREN, YOUTH, YOUNG ADULTS, AND FAMILIES

A Pathway to Hope's three-year action plan committed to supporting children, youth and young adults through various life stages and in various settings. Below are highlights of our progress to date across a broad suite of actions.

| Support for pregnant individuals and parents with substance use challenges | The Provincial Perinatal Substance Use Program, led by BC Women’s Hospital and Health Centre, is advancing provincial capacity and expanding services for pregnant and early parenting individuals with substance use, and their infants. Highlighted progress over two years:
| Support for pregnant individuals and parents with substance use challenges | • Connected 1,190 mothers and babies who were new to receiving perinatal substance use services to wraparound community services and supports (511 in 2019/20 and 679 in 2020/21)
| Support for pregnant individuals and parents with substance use challenges | • 7,134 health professionals trained (1,862 in 2019/20 and 5,272 in 2020/21)

| Promote early childhood social emotional development | A package of initiatives is being implemented to support social and emotional development in the early years of life, through interventions and resources aimed at young children, families, communities and professionals. This includes:
| Promote early childhood social emotional development | • Expanded training and supports provided to foster caregivers
| Promote early childhood social emotional development | • With Child Health BC, developing a new component of Appetite to Play that focuses on fostering social emotional development in early childhood settings
| Promote early childhood social emotional development | • With the Human Early Learning Partnership, expanding the Childhood Experiences Questionnaire (CHEQ) throughout the province to enhance our understanding of the experiences of children and families prior to school system entry and how they impact social and emotional development

| Expand Confident Parents: Thriving Kids | Confident Parents: Thriving Kids is a free, family-focused, phone-based coaching service that helps parents support their children aged three to 12 to manage mild to moderate anxiety or behaviour challenges. Highlighted progress during 2019/20 and 2020/21:
| Expand Confident Parents: Thriving Kids | • The new Anxiety Program launched in Spring 2019
| Expand Confident Parents: Thriving Kids | • 2,215 families participated in the Anxiety program
| Expand Confident Parents: Thriving Kids | • 2,900 families participated in the Behaviour program
| Expand Confident Parents: Thriving Kids | In 2019/20:
| Expand Confident Parents: Thriving Kids | • 96% of families reported that the Anxiety program taught them skills to support their child when they experience anxiety and/or fears that initially led them to seek support.
| Expand Confident Parents: Thriving Kids | • 97% rated the quality of the Behaviour program as excellent or very good.
## Mental Health in Schools

The *Mental Health in Schools Strategy* was launched by the Ministry of Education in September 2020, guided by two provincial strategies: ERASE (Expect Respect and a Safe Education) and A Pathway to Hope. Mental Health in Schools is a new approach to embedding positive mental health in all aspects of the education system, including culture, leadership, curriculum and learning environments. The three core elements of the strategy are: Compassionate Systems Leadership (CSL), Capacity Building, and Mental Health in the Classroom. Budget 2021 provides additional investment for capacity-building grants to school districts.

Ministry of Children and Family Development continues to fund and coordinate the provincial implementation of *Everyday Anxiety Strategies for Educators* (EASE), a collection that includes an educator workshop and classroom resources focused on anxiety prevention, specifically designed for use with students in Grades K-7. These resources have been available to educators at no cost since January 2019 and are now available online and in French in an effort to increase reach to more educators and students. As part of the response to the COVID-19 pandemic, resources were adapted to be suitable for parents and caregivers to help children manage worries and anxiety at home. Development of EASE for students in Grades 8-12 is underway and will become available to BC educators in September 2021.

## 24/7 mental health support for post-secondary students

In April 2020 government launched Here2Talk, a free, and confidential 24/7 mental health counselling and referral service for all post-secondary students registered at public and private post-secondary institutions in BC.

For the first time in BC every student—whether rural, urban, domestic, international, public, private, full-time or part-time, studying at home or abroad—has access to on-demand, single-session 24/7 counselling and community referral services that supplement existing mental health supports on campus and in the community.

- Between April 2020 and May 2021, Here2Talk services were accessed more than 12,000 times.
- Students used the chat feature 75% of the time and the phone feature 25% of the time.

## Youth substance use system of care

The province is implementing a suite of evidence-based and culturally safe services and supports that focus on problematic substance use prevention, early identification and therapeutic care for children, youth, and young adults.

- In August 2020, 20 new youth beds were added in Chilliwack at the Traverse facility.
- Government announced 123 new youth substance use beds across the province, doubling the number of beds available closer to home for youth in BC.
  - 30 beds are currently in the process of implementation, with the remaining 93 beds in planning with the regional health authorities.
  - The Ministry of Mental Health and Addictions is working with the Ministry of Health, health authorities and Indigenous partners to implement the remainder of the beds by March 2022.
Supporting Indigenous-led solutions

Indigenous communities are in the best position to make decisions about the health and wellness of their people. A key focus of A Pathway to Hope is building and evolving our partnerships with Indigenous peoples, as well as collaborating with Indigenous partners for their subject matter expertise in the design, planning and delivery of mental health and substance use services.

A key commitment in A Pathway to Hope is creating a system of mental health and substance use care that is free of all forms of racism, stereotyping and stigma and embraces Indigenous perspectives and traditional wellness and healing practices.

Since the publication of A Pathway to Hope, these commitments have come into clearer focus with the adoption of the Declaration on the Rights of Indigenous Peoples Act (2019), the findings of the In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in BC Health Care report (2020), and the release of the Anti-Racism, Cultural Safety and Humility Framework and Action Plan by the First Nations Health Authority, First Nations Health Council, and First Nations Health Director’s Association (2021).

In particular, the In Plain Sight report presented evidence of widespread prejudice and Indigenous-specific racism throughout the BC healthcare system. While we have made important investments in mental health and wellness, more must be done to address Indigenous-specific racism in mental health and substance use services. We are committed to working with health system partners, including Indigenous partners such as the First Nations Health Authority, Métis Nation BC, and Indigenous-led service organizations, to advance the ongoing work following recommendations in the In Plain Sight report.

Through an agreement between the First Nations Health Council, the Province and Indigenous Services Canada, $20.5 million has been allocated to 41 First Nations-led initiatives with a total of 166 communities participating in the process. This work is facilitating active collaboration among communities and advancing healing, Nation rebuilding and Nation-based approaches to mental health and wellness.
Tripartite Partnership to Improve Mental Health and Wellness Services

The Memorandum of Understanding: Tripartite Partnership to Improve Mental Health and Wellness Services established a new and more flexible funding approach that provides more autonomy to First Nations in the allocation of resources for mental health and wellness services. In 2018, the Province, the Government of Canada, and the First Nations Health Authority (FNHA) each committed $10 million for a total commitment of $30 million over three years. FNHA is responsible for administering this funding on behalf of federal and provincial partners.

A key feature of this new approach has been the ability to provide flexible, multi-year funding based on the needs, capacity, and priorities of First Nations communities. By pooling federal and provincial resources, communities are better able to address the root causes that contribute to poorer mental health and wellness outcomes without the need to make multiple proposals. This new approach has allowed communities to develop new models of care that integrate western and Indigenous approaches to mental health and wellness.

The future focus of this partnership is collaborating with First Nations to plan, design and deliver new mental health and wellness services across a full continuum of care (which includes, but is not limited to, healing from trauma, traditional wellness, health promotion, prevention, capacity building and education, early identification and intervention, wrap-around supports, harm reduction, crisis response, trauma-specific services, treatment services, withdrawal management, and case coordination and care planning).

- As of March 31, 2021, $20.5 million of the $30 million had been allocated to 41 new First Nations-led mental health and wellness initiatives.
- There are a total of 166 communities participating in the process.

The MOU has been extended by the partners until March 31, 2022, to allow more time to demonstrate the benefits of this new way of working together and to look at the long-term mental health and wellness needs of First Nations. An evaluation of the implementation and impact of the MOU is underway.

10-year Strategy on Social Determinants of Health and Wellness

Experiences implementing the MOU are intended to inform the development of a ten-year strategy to address the social determinants of health and wellness for First Nations in BC.

The First Nations Health Council (FNHC) recently launched a province-wide engagement process to build consensus on a long-term strategy to address the social determinants of health.

On June 3, 2021, the FNHA and the Provincial Health Officer jointly released a report on the First Nations Population Health and Wellness Agenda. This report uses a strengths-based approach to focus on wellness and resilience, bringing together both Indigenous and Western ways of knowing. This report reinforces the need for cross-sectoral action to address the social, economic, and political factors that influence health and wellness outcomes for First Nations people. It is anticipated that the Population Health and Wellness Agenda will be supplemented by a new Mental Health and Wellness Reporting Framework that has been developed by the FNHC.
<table>
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<tr>
<th>Cultural Safety and Humility</th>
<th>In 2018, MMHA signed the Declaration of Commitment to Cultural Safety and Humility with the First Nations Health Authority to ensure cultural safety and humility are embedded in all of the work we do. The <em>In Plain Sight</em> report has highlighted the prevalence of Indigenous-specific racism in the health care system and reinforced the urgent need to address it. MMHA is working with Indigenous partners to actively embed anti-racism into all new initiatives by mandating that cultural safety and humility be defined as core attributes and characteristics of mental health and substance use services. As an example, the Integrated Child and Youth Teams are being designed and implemented in close collaboration with First Nation, Metis and urban Indigenous partners and will include new Indigenous-specific resources to ensure Indigenous children, youth and their families feel safe and supported when accessing team-based care.</th>
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| First Nations-Run Treatment Centres | In 2019, the Province and FNHA made a matching capital commitment of $20M each to renovate, replace and build First Nations-run treatment facilities throughout BC. As of June 2021, FNHA has made capital commitments for the replacement of six existing First Nation-run treatment facilities which are at different stages of planning, design and pre-construction. These treatment facilities include:  
- North Wind Wellness Centre, Northern region  
- Carrier Sekani Family Services, Northern region  
- Telmex Awtexw Treatment, Fraser region  
- Namgis Treatment Centre, Vancouver Island region  
- Tsow-Tun-Le-Lum Healing Centre, Vancouver Island region  
- 7 Nations Soaring Eagles, Interior region  
FNHA continues to engage First Nations Leadership and partners in the Fraser and Vancouver Coastal Regions on the opportunity to build two new urban-based treatment facilities. |
| Indigenous Land-Based Cultural and Healing Services | FNHA has provided funding to First Nations in each of the five regions to design and implement new land-based healing initiatives that operate at community, sub-regional and regional levels. The aim is to increase the number of treatment options available to First Nation clients with a focus on land-based, family-based or group-based treatment services. As of June 2021, there are a total of 147 sites delivering land-based services. This includes:  
- Community-based, low-barrier and land-based treatment programs  
- Comprehensive community needs assessment and asset mapping related to mental health and wellness, including capacity and plans to implement and sustain land-based services  
- Traditional practices of harvesting and food preparation |
| Indigenous Land-Based Cultural and Healing Services (CONTINUED) | Knowledge exchange between Elders or Knowledge Keepers and youth  
| | Traditional wellness coordinators to increase the capacity of communities to integrate land-based or traditional healing into mental health and wellness services  
Most communities have modified land-based programming this past year due to the public health restrictions and the need to limit community- and group-based gatherings due to the pandemic. |

| Enhanced Capacity for Métis Nation BC | A Pathway to Hope committed to funding Métis Nation BC (MNBC) to advance Métis-specific priorities in mental health, substance use, and cultural wellness, and to support their participation in the design, planning and implementation of provincial initiatives. This included:  
| | The Métis Youth Mental Health and Wellness Initiative, comprised of 16 members, launched a new publication, Resilient Roots: Métis Mental Health and Wellness Magazine, in April 2020, from content submitted by Métis community members.  
| | MNBC will soon be launching its Métis cultural wellness resources, both in print and digital format, which will be integrated into the Provincial Health Services Authority’s San’yas Indigenous Cultural Safety Training. It will be a valuable resource to guide work to address Métis-specific racism across BC.  
| | MNBC launched a Métis specific harm reduction and anti-stigma campaign that aimed to educate Métis people in BC about safer opioid use, how to prevent overdoses, decrease stigma and isolation of persons who use(d) drugs, and increase knowledge of and accessibility to programs and services.  
This funding is ongoing and together with MNBC we continue to explore a long-term health and wellness partnership that reflects our shared commitment to improving mental health and wellness outcomes for Métis people in BC. |

| First Nations-Led Primary Health Care | First Nations-led Primary Health Care is a component of both A Pathway to Hope and the Ministry of Health’s Primary Care Strategy, which is aimed at creating an integrated system of full-service community-based primary and community care. Through this strategy, FNHA in partnership with government is developing up to 15 First Nations Primary Care Centres (FNPCC) in both urban and rural BC settings over four years. The FNPCC model will enable team-based, culturally safe primary health care for Indigenous peoples. FNPCC models combine both Western and Indigenous approaches to health and wellness, incorporate and promote First Nations’ knowledge, beliefs, values, practices, and employ holistic models of health and wellness.  
| | The first FNPCC under the First Nations-led Primary Health Care Initiative, Lu’ma, received enhancement funding in September 2019 to enable the clinic to support more Indigenous patients, and to offer a broader range of primary care and social services. |
Substance use: better care, saving lives

While continuing to escalate the response to the overdose emergency, we are also taking a province-wide approach to building a system of care where services are always within reach, and people experience seamless and cohesive care.

Through the work of the Overdose Emergency Response Centre (OERC), A Pathway to Hope continues to escalate the response to the overdose emergency and ensure communities have access to life-saving interventions such as take-home naloxone, overdose prevention sites, safer pharmaceutical alternatives, and flexible treatment services and supports.

BUILDING A SYSTEM OF CARE

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<th>Substance Use System of Care Framework</th>
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<td>Building off work already underway to strengthen substance use services and supports, we are creating a new policy framework to improve the system of care and outline a longer-term vision for reorienting the system to one that is integrated, coordinated, and interdisciplinary.</td>
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Progress on the framework is well underway. We are working closely with key partners, including health authorities and people with lived experience, undertaking extensive engagement to ensure that the framework is meaningful and responsive to the current context of substance use challenges in BC. This includes engaging with Indigenous partners, research institutions, clinical experts, community organizations, and partners from communities that have historically not been well-represented but disproportionately experience substance use-related harms, including racialized and migrant communities, trans and gender-diverse communities, and survivors of violence.

These engagements began in Fall 2020 and are expected to continue until the end of Fall 2021.
### Ensuring Best Evidence Guides Care

To establish standards and best practices in the clinical care of substance use disorders, we are working with the BC Centre on Substance Use (BCCSU) to develop and implement evidence-based guidelines for prevention and addiction treatment and recovery, including alcohol and other drug addictions. Over the first two years of A Pathway to Hope implementation, this work has resulted in new clinical education programming, operational guidance, and evaluation of evidence-based guidelines. Highlights include:

- In December 2019, we released a new made-in-BC alcohol guideline to help health care providers connect individuals — both youth ages 12 to 25 and adults — to services and treatment that better suits their needs.
- In September 2020, the BCCSU and Canadian Institute for Substance Use Research published Operational Guidance for Implementation of Managed Alcohol for Vulnerable Populations, which provides guidance for setting up and delivering managed alcohol programs (a form of safer supply) for individuals with severe alcohol use disorder.
- A supplemental guideline to support people who are struggling with alcohol use during pregnancy was released in March 2021.

### Increase access to evidence-based addictions care

This initiative increases rapid access to addictions medicine through enhancements to prescriber services. Over the past two years, we have increased session time for physicians and nurses who provide addictions care, and have increased training opportunities for prescribers, community pharmacists, and clinicians to improve knowledge of addictions medicine and access to medication assisted treatment (opioid agonist treatment, for example), including the implementation of nurse prescribing. Our progress includes:

- Expanding access to first-line medications for opioid use disorder including suboxone, methadone, Metadol-D, compounded methadone and other prescription alternatives
- Training 624 new professionals in addictions medicine
- Improving access to addiction treatment through the implementation of Rapid Access to Addictions Care Clinics in all health regions

### Integrated team-based service delivery: Substance Use Integrated Teams

We are supporting the regional health authorities to implement Substance Use Integrated Teams to put people at the centre of care, helping to engage and retain clients in treatment and recovery services and supporting seamless transitions between services. Teams include a diverse range of professionals, such as nurses, counsellors, social workers, outreach workers, and peers.

Teams have been located based on regional needs. In total, the regional health authorities have established seven new and nine expanded teams. Of these, currently 12 are fully implemented and four will be implemented shortly.
## Integrated team-based service delivery: Substance Use Integrated Teams (CONTINUED)

- The seven new teams are located in: Abbotsford; Hope and Fraser Canyon; Nanaimo; Cowichan; Oceanside; Shuswap North Okanagan; and the South Okanagan.
- The nine expanded teams are located in: the Northeast Health Service Delivery Area (HSDA; North Peace); the Northwest HSDA (Smithers and Houston); Northwest HSDA (Prince Rupert); the Northern Interior HSDA (Prince George); Campbell River; Sea to Sky; Powell River; North Shore; and Vancouver.

In 2020, implementation of this initiative was adapted to better address the needs of people using substances during the COVID-19 pandemic, including supporting people who are particularly vulnerable in temporary housing settings and emergency shelters.

## Treatment and Recovery Services

- Strengthening the quality, consistency and oversight of bed-based supportive recovery services:
  - The Community Care and Assisted Living Act has been amended, and the Assisted Living Regulation has been implemented to increase the regulatory oversight of supportive recovery homes.
  - Resources such as a new website, updated handbook, and training grants were developed to implement these new requirements. $100,933 in training grants was issued to 48 residences to support this work.
  - In October 2019, the per diem for eligible income assistance clients living in registered or licensed residences, including supportive recovery homes, was increased for the first time in 10 years.

- Supporting service providers through COVID-19:
  - Despite experiencing financial pressures due to the pandemic, the majority of bed-based treatment and recovery operators across the province remained open, providing important care during the two public health emergencies. In response, the Province issued approximately $2 million in COVID-19 support grants to 53 eligible operators to help offset these costs and ensure people were able to continue to access the services they needed.

- New Treatment and Recovery Beds:
  - In February 2021, MMHA invested $13 million to support 101 new publicly funded treatment and recovery beds located across 14 organizations around the province. This is in addition to the work to double the number of treatment beds for youth struggling with addictions, announced in August 2020.
  - Budget 2021 provides additional investment in a full spectrum of substance-use treatment and recovery services. This includes supporting the creation of 195 new substance-use treatment and recovery beds throughout the province to help more people access treatment, as well as community-based post-treatment follow-up services and supports to help people stay connected to care on their long-term recovery journey.
OVERDOSE EMERGENCY RESPONSE

After seeing a decline in overdose deaths in 2019, deaths from confirmed or suspected illicit drug toxicity have been increasing since the beginning of the COVID-19 public health emergency in March 2020. The key driver of increased mortality is the growing toxicity and unpredictability of street drugs since late March 2020, likely due to disruptions to the drug supply chain.

The Province’s response to the overdose emergency continues to escalate through the work of the Overdose Emergency Response Centre (OERC) to ensure communities have access to life-saving interventions, such as take-home naloxone, overdose prevention sites, expanded access to safer pharmaceutical alternatives, and flexible treatment services and supports.

Budget 2021 provides increased investment over the next three years to extend and enhance overdose funding with a focus on overdose prevention services, inhalation overdose prevention services, harm reduction supplies, and increased access to nursing care and interdisciplinary outreach teams.

Budget 2021 also funds First Nations Health Authority (FNHA) to scale up the provision of culturally safe substance use care, including harm reduction and treatment services.

Comprehensive progress updates on the Overdose Public Health Emergency are published regularly on the website of the Provincial Health Officer. Overdose Response Indicators reporting is available on the BCCDC website.

Highlights over the past two years (2019/20 and 2020/21):

- 350 new sites where people can access BC Take-Home Naloxone kits
- 535,078 Take-Home Naloxone kits shipped to sites in BC
- 93 new sites where people can access Facility Overdose Response Boxes (Facility Overdose Response Boxes (FORB) containing naloxone and supplies are free for not-for-profit community-based organizations where staff work with clients at risk of illicit drug toxicity events).
- 1.37 million visits to overdose prevention or supervised consumption sites, with 7,082 overdoses survived at these sites, and no overdose fatalities.
- Increased number of people receiving opioid agonist treatment (OAT): more than 24,302 as of March 2021 compared to 22,363 in March 2019.
- Increased number of clinicians prescribing OAT each month: 1,689 in March 2021 compared to 1,238 in March 2019.
- A new Lifeguard App, a mobile technology that alerts emergency first responders to a person at risk of an illicit drug overdose. Since its launch in late May 2020, the app has been used more than 56,000 times by more than 6,000 app users.
- In March 2020, BC enacted interim clinical guidance for healthcare providers to help people at risk of contracting COVID-19 and overdose death access prescribed safe supply to stay safe. There was a 600% increase (557 to 3,899) in the number of people receiving hydromorphone in May 2021 compared to February 2020.
- Over 90 registered nurses and registered psychiatric nurses have enrolled or completed their first round of training to prescribe medication for opioid use disorder.
- Accelerating overdose emergency response measures due to the COVID-19 pandemic, such as increased access to outreach teams and overdose prevention services (including inhalation overdose prevention).
### Prescribed Safer Supply

On July 15, 2021 BC announced a new policy to expand access to Prescribed Safer Supply. BC is the first province in Canada to introduce this public health measure. The policy supports prescribing medication alternatives to illegal drugs to people at risk of overdose and will help reduce drug toxicity injuries and deaths, enhance connections to health and social supports, and create equity access to prescribed safer supply.

The Ministry of Mental Health and Addictions introduced this policy following months of work with partners and stakeholders, including medical doctors, nurses, pharmacists, people with lived and living experience, the First Nations Health Authority and all regional health authorities, and Indigenous-led organizations.

As part of Budget 2021, the Province is directing funding up to $22.6 million to the health authorities over the next three years to lay the foundation for this innovative new approach. The funding will support the planning, phased implementation, monitoring and evaluation of prescribed safer supply services.

This new policy will roll out through a phased approach, beginning with implementing the policy in existing health-authority funded programs that currently prescribe alternatives to illicit drugs (e.g., opioid agonist treatment, oral and injectable tablet programs) and through newly created programs such as service hubs and outreach teams, supported by Budget 2021. Prescribed safer supply services will also be delivered through the federally funded Safer programs. Further phases will expand broader access once the clinical guidance is developed based on findings from the monitoring and evaluation process.

### Reducing stigma

Through the Stop Overdose campaign, we have worked with both private and public sector partners across BC to reach people with important information that can knock down the walls of silence surrounding substance use, change attitudes and perceptions about people who use drugs, and save lives. The StopOverdoseBC campaign has reached people through print, radio, video content, blog posts, sports partnerships, attendance at events, and online ads.

- Over the past two years, there have been over 265,000 website visits to StopOverdoseBC.ca and over 170,000 print materials distributed across the Province.
- Over two years, Community Crisis Innovation Fund grants have funded 13 projects to address substance use stigma in health care settings. This funding has supported activities including the funding of peer coordinator positions in each health authority and the Provincial Health Services Authority, implementation of the Episodic Overdose Prevention Services Protocol, participation of peers in development of stigma reduction training for health care personnel and community members; and delivering stigma reduction training for health care personnel.
- Community Action Teams have been established in 36 high priority communities to address stigma and raise awareness of overdose crisis through organizing and participating in community events, working with local media, and delivering training for first responders and community members.
### Engaging People with Lived and Living Experience of Substance Use

Health authorities are implementing policies and engaging in activities to support the inclusion of peer coordinators, peer participation, and peer perspectives. These activities include:

- Hiring peers and peer coordinators to support peer engagement
- Developing toolkits and other resources for peer inclusion
- Developing peer advisory committees, hosting events by peers for peers
- Engaging Indigenous peers
- Engaging peers in decision-making committees and action tables

A provincial peer network structure has been implemented to increase capacity and strengthen collaboration and information sharing between peer-led organizations. This work is underway, and peer groups or projects are being funded in each health authority through the provincial peer network.

### Advancing Decriminalization

The Ministry is working with Health Canada to obtain a federal exemption from Section 56 of the Controlled Drugs and Substances Act, to decriminalize personal possession of drugs and remove the shame that often prevents people from reaching out for life-saving help.

In 2020 the BC Solicitor General asked police forces in BC to no longer pursue criminal charges for people with personal possession of small amounts of drugs.

### Improved access, better quality

People in every part of the province need to have access to the full spectrum of evidence-based mental health and substance use care. To better meet those needs, the A Pathway to Hope action plan includes several initiatives to improve access to services and supports and advance building a seamless and integrated system where people are connected to care in a timely way.

**Tens of thousands of people are receiving newly available counselling services established through A Pathway to Hope.**
| Expand Access to Affordable Community Counselling | 29 Community Counselling Grants were awarded to non-profit organizations across BC in November 2019, providing annual funding distributed over three years to provide low-or no-cost counselling, focused on individuals or families who are not likely to engage in mainstream services, or who would not typically have access to counselling opportunities.  
- More than 10,000 people have received individual, couples, or family counselling so far through this program.  
- The grant program was expanded in 2020 as part of government’s COVID-19 response, with an additional 20 organizations receiving funding to provide community counselling programs and enable services to be delivered virtually. |
| Team-Based Primary Care | This initiative is a component of the Ministry of Health's Primary Care Strategy, aimed at creating an integrated system of full-service community-based primary and community care that better supports access to mental health and addiction care. Implementation is well underway.  
- 53 Primary Care Networks have been implemented across the province.  
- 24 Urgent Primary and Community Care Centres are operational, with six more in planning.  
- Three new Community Health Centres and two expanded centres are operational, with three more in planning.  
- One First Nations Primary Care Centre has been implemented, with several more expected in the coming year.  
- Three Nurse Practitioner Primary Care Clinics have been implemented. |
| Provincial Crisis Lines | Enhancements to the provincial crisis line network are underway to reduce duplication of services, enhance capacity, and improve quality and consistency. Progress to date has included:  
- implementation of standards across all crisis line centres providing service on the provincial network (1-800-SUICIDE and 310 Mental Health Support)  
- training and upskilling provided to crisis line centre staff  
Call volumes and demand increased in 2020 following the emergence of the COVID-19 pandemic. Ministry of Health provided one-time funding of $690,000 in July 2020 to help respond to this increased demand. |
| **Mental Health Act Framework and Standards** | In 2019, the Ministry of Mental Health and Addictions finalized a quality improvement framework for involuntary admissions, developed to set strategic direction and improve the quality of care provided under the *Mental Health Act*.  
In December 2020, the Ministry of Health released updated *Mental Health Act* standards, focusing on accountability measures, audit and reporting requirements, cultural safety and humility, training and education, protocols with police, disclosures of personal information, and completion of forms.  
Both ministries continue to work together in partnership with the health authorities to identify and act on further opportunities to improve the quality and safety of care. |
| **Peer Support Curriculum** | Through the Peer Support Worker Curriculum and Standards of Practice project, BC Campus worked with peers to create a provincially approved curriculum, standards of practice and program delivery tools for Peer Workers, employers and post-secondary institutions, free of charge. The curriculum was created by peers for peers; throughout the project, more than 200 people with lived and living experience participated in this work – through surveys, interviews, participation on expert working groups, and in review processes. This work integrates the valuable contributions of peer workers in helping people with mental health, prevention and treatment, stigma, harm reduction, and recovery.  
The curriculum project is complete and was launched in July 2021. |
| **Expand BounceBack** | BounceBack is a free online or phone-based cognitive behaviour therapy program, designed to help adults and youth aged 15+ manage low mood, mild to moderate depression, anxiety, stress or worry. Funding provided as part of A Pathway to Hope has helped BounceBack to reach more people throughout BC. An expansion of 2,000 additional BounceBack sessions were funded on a one-time basis as part of the COVID-19 response.  
- In 2019/20, a total of 4,600 adults aged 25+ and a total of 1,208 youth aged 15-24 were referred to BounceBack.  
- In 2020/21, 7,001 adults and 1,632 youth were referred. |
| **Mental Health and Wellness Disaster Recovery Guide** | The *Mental Health and Wellness Disaster Recovery Guide* was developed for partners and agencies to use to plan, develop, co-ordinate and operationalize mental health and wellness disaster recovery supports and services in the event of an emergency.  
This guide was completed in July 2019 and has informed the creation of resources that can be used to support people’s mental health following disasters such as wildfires. |
### Workplace Mental Health

A Pathway to Hope includes a commitment to building on existing training and education programs to increase access and expand the reach of workplace mental health training throughout BC. At the outset of the COVID-19 pandemic in 2020, work on this initiative accelerated to focus on a rapid response to help workers in sectors that were most impacted by the pandemic.

Initially, work has focused on the most urgent workplace setting — long-term and continuing care. New and expanded resources include:

- CareforCaregivers.ca was launched in May 2020. The new website provides tailored content for workers and managers, hosts weekly webinars, and directs users to a range of services to meet diverse needs. The site has received over 86,000 pageviews and continues to host weekly webinars that have had over 2,500 registrants.

- Care to Speak was launched in June 2020. This peer-based text and phone service provides emotional support to healthcare workers and assists with service navigation.

- Mobile Response Team (MRT) - provides psychological first aid to healthcare workers experiencing increased fear, stress, and anxiety due to COVID-19, as well as helping long-term care centres respond to the mental health needs of staff and to plan for the future. Between April 2020 and April 2021, the MRT connected with more than 4,000 individuals and more than 1,000 agencies across the province.

- Building from this work, in April 2021 we launched BC’s new [Workplace Mental Health Hub](#). The Hub provides workshops, webinars and information to support employers and employees, particularly those who work in the tourism, hospitality and community social services sectors that we know have been hit particularly hard by the pandemic. The site will continue to expand to include training and coaching in the coming months.

### WellBeing.gov.bc.ca

A web-based portal to support those looking online for mental health and substance use services and supports, [Wellbeing.gov.bc.ca](#), has been created to remove barriers and improve navigation to existing online government resources. Phase 1 of the site is available, pointing to core government services and commonly searched for mental health and substance use topics. The ministry is working on Phase 2 and building additional content to enhance the site and increase access for people looking for services and supports.
Moving forward

Through Budget 2019, government invested $74 million into building a better system of mental health and substance use care, under A Pathway to Hope. A tremendous amount of progress has been achieved over the past two years of A Pathway to Hope implementation. As we move into the third year of our initial three-year action plan, we will build on our success and continue to drive the change that we have initiated with our partners, including all levels of government, Indigenous partners, service providers, children, youth and families, and people with lived and living experience.

We are also looking ahead to where we need to focus next, as we work to fulfill the ten-year vision of A Pathway to Hope.
**Budget 2021 Funding Summary**

Building on the progress to date under A Pathway to Hope, in 2021 government made a historic investment in mental health and substance use services:

<table>
<thead>
<tr>
<th>A Pathway to Hope Pillar</th>
<th>Budget 2021 Three-Year Investment (to 2023/24)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Improved Wellness for Children, Youth and Young Adults</strong></td>
<td><strong>Total: $96.7M</strong></td>
</tr>
<tr>
<td>Integrated Child and Youth Teams</td>
<td>$40.1M</td>
</tr>
<tr>
<td>Early Childhood Service Expansion</td>
<td>$16.4M</td>
</tr>
<tr>
<td>Step up/Step down</td>
<td>$13.4M</td>
</tr>
<tr>
<td>Mental Health in Schools</td>
<td>$6M</td>
</tr>
<tr>
<td>Foundry Virtual Care Services</td>
<td>$10.2M</td>
</tr>
<tr>
<td>Foundry Youth Transition Support</td>
<td>$5.2M</td>
</tr>
<tr>
<td>Foundry Expansion</td>
<td>$5.4M</td>
</tr>
<tr>
<td><strong>Substance Use: Better Care, Saving Lives</strong></td>
<td><strong>Total: $132.6M</strong></td>
</tr>
<tr>
<td>Withdrawal Management</td>
<td>$34.9M</td>
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<tr>
<td>Transition and Assessment Services</td>
<td>$17.3M</td>
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<tr>
<td>Specialized Treatment and Wraparound Services</td>
<td>$60M</td>
</tr>
<tr>
<td>Aftercare and Psychosocial Supports</td>
<td>$20.4M</td>
</tr>
<tr>
<td><strong>Overdose Response</strong></td>
<td><strong>Total: $219.7M</strong></td>
</tr>
<tr>
<td>Sustain critical investments – Accelerated Overdose Response</td>
<td>$45M</td>
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<tr>
<td>Sustain critical investments - Opioid Use Disorder Treatment</td>
<td>$152.1M</td>
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<tr>
<td>Prescribed Safer Supply*</td>
<td>$22.6M</td>
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<tr>
<td><strong>Improved Access, Better Quality</strong></td>
<td><strong>Total: $73.8M</strong></td>
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<tr>
<td>Eating Disorder Care</td>
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<td>Early Psychosis Intervention</td>
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<tr>
<td>Indigenous-led culturally safe substance use care (FNHA)</td>
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<tr>
<td>Suicide Prevention</td>
<td>$1M</td>
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<tr>
<td>Living Life to the Full Program</td>
<td>$0.2M</td>
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</tbody>
</table>

*notionally approved through contingency vote in 2021/22*