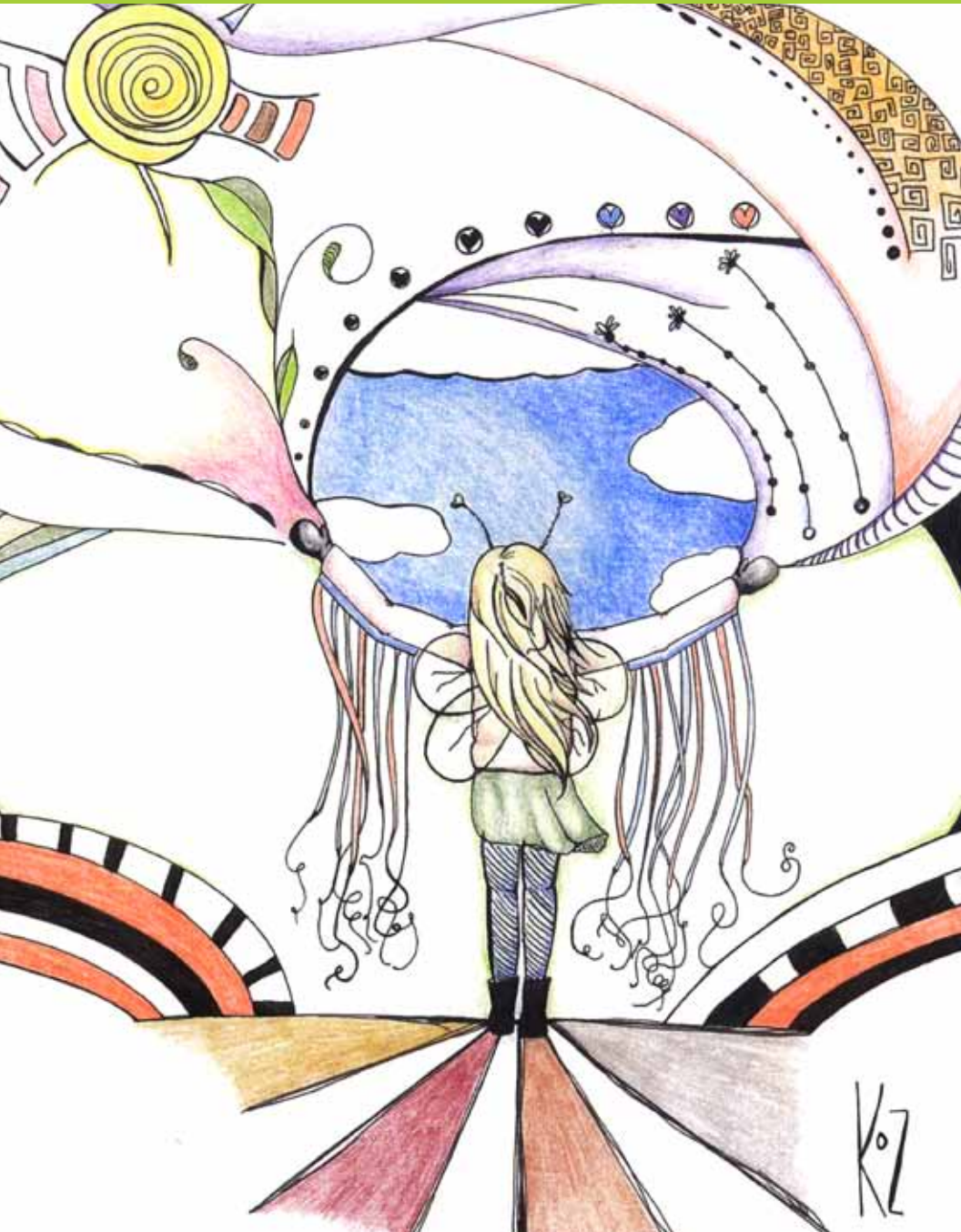


# Orientation to Child, Youth & Family Mental Health And Substance Use Services



# Dedication

This guide was created as a result of the Jury Recommendations to Coroners' Inquest (2011) of Hayden Blair Kozeletski's death. It states "that an information guide equivalent to the Orientation to Child and Youth booklet produced by the Families Organized for Recognition and Care Equality (F.O.R.C.E.), be developed and be made available to family health services Island wide".

This guide is dedicated to Hayden Blair Kozeletski  
(September 15, 1994 to December 19, 2010),  
her family, friends and community.



This resource was created by parents of the F.O.R.C.E. Society for Kids' Mental Health to help support other parents, families, caregivers and all other members of our communities who care for and support our children and youth. This Guide was revised in spring of 2016, in consultation with some local families and service providers.

If you are no longer using this Guide, please consider passing it to another family who may find it useful.

*“As families, we’ve been there.”*

# Acknowledgements

The development of this resource guide was made possible through generous grants from Island Health.



This guide would not have been possible without contributions from our families; First Nation Elders; Island Health; Ministry of Children and Family Development (MCFD); Child and Youth Mental Health (CYMH); several community leaders; and the F.O.R.C.E. Society for Kids' Mental Health.

This publication evolved from Orientation to Child & Youth Mental Health Services: A Guide for Families, originally produced by the F.O.R.C.E. Society for Kids' Mental Health. Our families and youth were major contributors to this guide. We are extremely grateful to them and other community members for sharing their experiences with us. It has been a privilege to listen to their stories, and to learn from the journeys that other families have walked.

*We would like to acknowledge the Kozeletski Family for their thoughtful sharing of Hayden's art work that has graced the many pages of this guide.*



## Where to call in a crisis

Sometimes, when you have a child or youth who is experiencing mental health challenges you may experience a crisis situation. Sometimes these situations are very easy to recognize – for example, perhaps your child or youth starts talking about wanting to harm themselves or others. Other times, it is harder to know whether or not your child or youth is experiencing a crisis. One thing to consider is how your child or youth is coping. Is your child or youth showing behaviours, thoughts or feelings that are dramatically out of the ordinary for their typical mood?

Are these behaviours, thoughts or feelings causing difficulties with their activities of daily living? If your answer is yes, then you could be facing a crisis. *If you are unsure of whether or not you are experiencing a crisis situation, it is best if you call and speak with someone who will be able to help you.* There are a number of things you can do in a crisis situation, and it is a good idea to take some time to think about what plan would work best for you and your family when everyone is calm, so you know what you will do if there is a crisis.

**If you are in a situation that involves immediate risk of harm to your child or youth or others, call 9-1-1,** and let the operator know your child or youth is experiencing a mental health emergency. You can also take your child to the emergency room at your nearest hospital. Hospitals in the Comox Valley and Campbell River areas have access to Crisis Nurses (Crisis Intervention) who may be able to meet with your child or youth and your family.

**If you are in Campbell River -** The Campbell River Crisis Nurse is located in the Campbell River Hospital Emergency Department. You can phone or visit the Crisis Nurse at Campbell River Hospital. Crisis Nurses are available 9:30 am to 9:30 pm, 7 days a week in the Emergency Department (holidays included). The Crisis Nurse provides crisis intervention and stabilization to people of all ages in relation to mental health, psychiatric disorders and substance use. The Crisis Nurse also provides psychiatric nursing assessments, clinical suicide risk assessments and support and strategies for coping. The Crisis Nurse offers consultation and referral for clients to community partners for people presenting in person or by phone to the Emergency Department of Campbell River Hospital.

**Phone number : 250-850-2647 (Campbell River)**

**CRISIS LINES** are available for people who are in crisis or need someone to talk with. They are a good place to call if you are looking for information on local services. Crisis lines will be able to assist you in finding resources and to come up with a plan on how to deal with the situation you are experiencing with your child or youth.

- **Vancouver Island Crisis Line: 1-888-494-3888**  
24 hour crisis line support and resources [www.vicrisis.ca](http://www.vicrisis.ca)
- **Suicide Helpline: 1-800-SUICIDE (1-800-784-2433)**  
24 hour crisis line for children, youth and adults
- **Kids Help Phone: 1-800-668-6868**  
24 hour crisis line for children and teens  
[www.kidshelpphone.ca/Teens/Home.aspx](http://www.kidshelpphone.ca/Teens/Home.aspx)
- **Native Youth Crisis Hotline: 1-877-209-1266**  
24 hour crisis line for First Nations and Aboriginal youth
- **Aboriginal People Crisis Line: 1-800-588-8717**
- **Youth in BC: 1-866-661-3311 (Toll-Free)**  
24 hour crisis line for all youth in B.C. ages 13 – 25 years  
[www.youthinbc.com](http://www.youthinbc.com)

**Call Child and Youth Mental Health** If you have already connected with Child and Youth Mental Health in your area, you can call in and ask to speak with your child's Clinician, or if they are unavailable, ask to speak with someone else in the office. The Clinician will be able to give you guidance on how to best respond to your situation and help you come up with a plan to deal with the situation.

**In Campbell River, phone 250-830-6500**  
**In the Comox Valley, phone 250-334-5820**

## Families Are...

big, small, extended, nuclear, blended, multi-generational, with one parent, two parents and grandparents. We live under one roof or many. A family can be as temporary as a few weeks, as permanent as forever. We become part of a family by birth, fostering, adoption, marriage, or from a desire for mutual support. Together, our families create our neighborhoods and communities (*Pediatric Care Online, 2008*).



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# Introduction

Every family is unique; every child and youth is unique. From the acceptance of uniqueness comes an appreciation for the diversity of family strengths and assets. Being unique means we have many gifts and, like every family, it also means we have many challenges. But sometimes the challenges become too overwhelming for families. When this happens, families must find support, resources and connections to help guide them through their challenges. This is especially true when our children or youth are experiencing mental health challenges.

In this orientation guide, we will introduce you to mental health services that will help guide your family. These resources are categorized by community, culture, provincial resources, and online resources. You can also find a glossary at the back of this guide that will help you understand some terms. To help us fully develop this guide, it is important for us to consult with our families and other community members. Please consider taking a few moments to complete and submit the feedback form at the end of this document.



Graphic developed as part of the Families Matter: A Framework for Family Mental Health in British Columbia (FORCE Society for Kids' Mental Health May 2012)

View Framework at:

[www.forcesociety.org/sites/default/files/23154\\_FAM\\_Framework-3.6-2-LowRes.pdf](http://www.forcesociety.org/sites/default/files/23154_FAM_Framework-3.6-2-LowRes.pdf)

## What is Mental Health?

The World Health Organization describes mental health as “a state of well-being in which the individual realizes his or her own abilities, copes with the normal stresses of life, works productively and contributes to his or her communities. Good mental health is much more than the absence of mental illness – it enables people to experience life as meaningful and to be creative, productive members of society.” (*Ministry of Health Services & MCFD, 2010*).

## What is Mental Illness? What are Mental Health Challenges?

**Mental illness** is an umbrella term that refers to all diagnosable mental disorders. Mental health challenges (sometimes called mental health disorders) are diagnosable health conditions that affect the way a person feels, thinks or acts that are associated with distress and/or impaired functioning. Mental health challenges are the result of interacting biological, developmental, psychological, behavioural and environmental factors. (*Families Matter: A Framework for Family Mental Health in British Columbia, 2012*).

### A few mental health challenges are:

- Anxiety
- Eating disorders
- Psychosis
- Depression
- Attention Deficit Disorder (ADD) or Attention Hyperactivity Disorder (ADHD)
- Bipolar
- Post Traumatic Stress Disorder (PTSD)
- Schizophrenia

**Mental health challenges** are characterized by many different signs and symptoms, and can present themselves in many different forms. They can impact how a person thinks, feels and behaves. Some common symptoms of a mental health challenge include changes in a person’s mood, disturbances in perception, obsessions and fears, and anxiety ([www.keltymentalhealth.ca](http://www.keltymentalhealth.ca)).

Whether it's a family with a new mother struggling with depression, a young child showing signs of anxiety, a sibling feeling overwhelmed by a brother's attention deficit disorder, a lone parent grappling with a teen's emerging psychosis, a youth valiantly caring for a parent living with bipolar, a spouse dealing with the family impact of a partner's deep depression and substance use, an elderly mother worrying for her adult son with schizophrenia, or a grandparent providing respite for an ill grandchild and their exhausted parents...**mental illness affects everyone** (Families Matter Framework, 2012).

## Overview of Some Mental Health and Substance Use Challenges

Please see the sections “Provincial Resources” and “Online Resources” for resources that are specific to each of these mental health or substance use challenges and concurrent disorders.

### Anxiety Disorders

Most, if not all, children and youth experience some episodes of fear and worry in ordinary situations. Typically these concerns are short-lived and disappear as the child matures or learns to master what was once a frightening situation. However, for some children and youth, anxiety continues to interfere in their lives. Anxiety disorders cause children and youth to feel excessively frightened, distressed, and uneasy during situations in which most other children would not experience these types of feelings. If a child is consistently worried about a situation or a future event, and feels there is no hope of dealing with it or preventing it, then high levels of anxiety may result. This may keep them from participating in school and social activities.

Anxiety becomes a problem when it makes the decisions for a child or youth and it interferes with their life and/or causes distress.

Many young people with this disorder are quiet and non-disruptive so it can be easy to miss the signs when a child or youth is struggling with anxiety.

Children or youth may not be able to identify or label their anxious feelings which can make it even more difficult to recognize that anxiety may be the problem.

Students dealing with anxiety are often also dealing with low self-esteem and may not be able to work to their potential in school. An anxious child or youth may lose friends and be left out of social activities.

## Depression

When a child has depression, they may feel very sad and the sad feelings don't go away or sometimes may get progressively worse. All children feel blue or sad at times, but feelings of sadness with great intensity that persist for weeks/months may indicate a more serious depression. Children with depression may have difficulty properly identifying and describing how they are feeling. Instead, a child may act out and be irritable towards others.

“Hayden’s life can’t be for nothing. There are things to be learned from her death. I want to normalize an invisible illness and erase the stigma surrounding it.”

- *Barb Kozeletski*

## Attention Deficit/Hyperactivity Disorder (ADHD)

It is normal for children and youth, at one time or another, to have trouble focusing and behaving. However, in children with ADHD, the symptoms continue, and they can make learning very difficult.

Symptoms vary across different settings which makes diagnosing ADHD difficult. Some children and youth may act out, while others sit quietly (with their attention miles away). Some put too much focus on a task and have trouble shifting it to something else. Others are only mildly inattentive, but are overly impulsive.

It isn't that children and youth with ADHD can't ever pay attention. When they're doing things they enjoy or hearing about topics in which they're

interested, they may have no trouble focusing and staying on task. The challenge is often pulling them away to the next activity. If the child or youth isn't engaged by an activity, the attention of that child or youth will quickly seek out a different activity or something else to think about.

Children and youth with ADHD sometimes are less able to care for themselves, less able to recognize appropriate social behaviour and less able to communicate than children and youth of the same age without ADHD.

## Self-Harm

Self-harm refers to deliberate attempts to physically injure one's self. Young people engage in self-harm as a way of coping with problems and emotional distress. The self-injurer does not intend to die as a result of their acts. Although cutting is the most common type of self-harming, self-harm can also include self-poisoning, burning, scalding, banging, and hair pulling.

### Risk factors include:

- Eating disorders
- Physical, emotional or sexual trauma or abuse
- Depression, paranoia or obsessive-compulsive disorder
- Low self-esteem and self-worth
- Bullying
- Feelings of shame, humiliation and rage may set off incidences of self-harm in a young person

## Bipolar Disorder

In bipolar disorder, episodes of depression alternate with episodes of mania. The depressive episode usually comes first, with the first manic features becoming evident months or even years later. Many of the symptoms are similar to those seen with ADHD. Careful assessment and diagnosis is needed to ensure that the child or youth gets the help they need. These children/youth will most likely, or should be, under the care of a doctor or mental health professional.

## Borderline Personality Disorder

Borderline personality disorder is a mental illness that affects the way one relates to other people and the way one relates to one's self. Their moods might be extreme and change all the time, and they might have a hard time controlling impulses or urges. They may have a hard time trusting others and they may be very scared of being abandoned or alone. BPD is made up of five groups of symptoms: unstable behaviour, unstable emotions, unstable relationships, unstable sense of identity and awareness problems.

## Eating Disorders

Eating disorders centre around a preoccupation with food, weight and personal body image. They include anorexia nervosa and bulimia nervosa. Both are serious mental health disorders that can have life-threatening consequences. Understanding the “warning signs” helps to support early intervention for those at risk of having an eating disorder. Young people who have an eating disorder require medical and emotional support.

### Types of Eating Disorders:

- **Anorexia nervosa** is self-starvation. Young people with this disorder intentionally deprive themselves of food, even though they may be very thin. They have an intense and overpowering fear of body fat and weight gain.
- **Bulimia nervosa** is characterized by cycles of binge eating and purging, either by vomiting or taking laxatives or diuretics (water pills). The young person has a fear of body fat even though their size and weight may be within a normal range for their age and height.
- **Over-exercising** is exercising compulsively for long periods of time as a way to burn calories from food that has just been eaten.



- **Binge eating disorder** means eating large amounts of food in a short period of time, usually alone. The binge eating is often accompanied by feeling out of control and followed by feelings of depression, guilt, or disgust. All of these disorders can have serious and life threatening consequences.

## Psychosis

Psychosis is a serious and treatable medical condition affecting the brain. It affects people's contact with reality through their thoughts, feelings and behaviours. People experiencing psychosis may have hallucinations, delusions (false beliefs), paranoia, disorganized thoughts and/or disorganized speech. The person experiencing psychosis may not realize these thoughts or beliefs are not true

because, to them, they are very real. Psychosis can happen to anyone. Although it is most likely to develop in young adults, it is not restricted to this age group.

Mental illness directly affects 15 percent of Canadian children and youth (*Waddell & Sheppard, 2002*) 4-5 kids in every classroom of 30 across the country struggle to learn, make friends, participate in activities and function in their families. (*Families Matter; A Framework for Family Mental Health in British Columbia*)

**Early signs can occur slowly for up to two years prior to psychosis. Some signs to look for are:**

- Mood changes
- Sleep disturbances
- Loss of interest in things previously enjoyed
- Difficulty concentrating
- Struggling to cope at school
- Attention or memory problems

- Decline in emotional expression
- Deterioration in family relationships
- Diminished personal hygiene

Early recognition, diagnosis and treatment of psychosis are key to successful recovery. For many people, with effective treatment, the first episode may also be the last episode of psychosis.

## Schizophrenia

Schizophrenia causes people to lose touch with reality and sometimes makes it difficult for them to think and speak in an organized way. (This loss of touch with reality is called psychosis. Psychosis is a part of schizophrenia, but may also be seen on its own.) It isn't known exactly what causes schizophrenia, but it's likely a combination of several factors, such as the way your body works, your family history, your environment, and your life experiences.

Schizophrenia affects about 1% of Canadians—that's about 40,000 people in British Columbia. Schizophrenia usually first shows up between the ages of 18 and 25 in men and between 25 and 35 in women. Schizophrenia seems to run in families. If a close family member (like a genetically related parent or sibling) experiences schizophrenia, you may experience an increased risk of schizophrenia. However, it's important to remember that there is much more to schizophrenia than your genes—genes are one of several risk factors.

## Substance Use Disorder

Adolescence is a time that involves exploration and experimentation. It is not unusual for that exploration to include trying alcohol and drugs. This may be done for a variety of reasons including curiosity, recreational use, stress relief, peer pressure and asserting independence. While many young people experiment with alcohol or illegal drugs, most do not go on to develop a serious substance abuse problem. Excessive alcohol or drug use, however, can lead to other complications such as serious injuries and accidents while under the influence, unintended sex, conflicts with family or friends and problems in school.

Substance Use Disorder refers to a regular pattern of alcohol or illegal drug misuse that results in significant problems for the young person. There are many factors that can either increase a youth's risk for substance use issues or that help protect against such behaviours. Protective factors include healthy connections to caring adults, school and community, positive peer relationships and engagement in activities that support a youth's sense of self, of belonging and connectedness. There is growing support for strength-based approaches that foster relationship, resilience, empowerment, connectedness and the ability to understand and make healthy choices. The resources in the following sections provide information on reducing risk factors and fostering resilience in home, community and school settings.

### Concurrent Disorders

For youth who develop a substance use problem, it is common to also find a mental health problem. About 50% of people with either a mental health or substance use disorder have problems in the other domain at some point in their life. The combination of problem substance use and a mental health concern is referred to as a concurrent disorder (formerly called dual-diagnosis). Whether one problem started before the other can be difficult to determine as the two are often intertwined and related. Examples of concurrent disorders are an anxiety disorder and a drinking problem or depression and marijuana use. Integrating treatment for both problems is critical to successful management and recovery.

# First Nations & Aboriginal People's Mental Wellness

## The Story of Half-Person

*Credits: Wedlidi Speck*

In a village not far from here lived a man and his wife. She was pregnant and soon after gave birth to a beautiful child. They loved that child. The community loved that child. The world loved that child.

As the child began to grow, the child experienced things that drew their attention to Self. Now the child could only see the right side of their body. The left half had become invisible. As this child grew, they became angry. This anger was shown in the home, community and to the world, in a number of different ways.



One day an elder came by and the elder said, “I see that you are angry on account of how you are looking at yourself. If you want, I can take you to a place called the wilderness and through struggle you will find peace. Think about it. Should you want peace, come see me and I will lead you to the wilderness.” Then the elder left the youth to think about this invitation.

The youth thought about what the elder had said...and thought to them self, ‘if I struggle, and I will find peace. I do not know what it will be like to live in peace, but it must be better than the way I am living today’. Now the youth sought out the elder.

Together the elder and the young person walked into the wilderness. The elder asked, 'What do you see?' The youth said, 'I see that many have walked this path before me.' 'Yes, said the elder. 'Many have walked this path and have found peace. Remember this, the experiences that have led you to see yourself as half, is energy. This energy is the memories. We will move this energy from your body and mind and you will experience peace.'

Now the two arrived at the river. "You will sit alone. Sometimes I will work with you and sometimes you will work alone. Through this work you will find peace.'

The youth did as told. It didn't take long before those thoughts surfaced. Some were confusing, painful, scary, and sad. The youth let go of these thoughts through yelling, movement and tears. Then a tear made its way down their body and ran down the riverbank into the river. The tear and the river became one. At that moment another half-person was seen walking up the riverbank towards the youth. This was the left half.

They met awkwardly and when they came together they stumbled. They rolled down the riverbank and into the river. Like the tear and the river, the two halves became one. When the youth stood up and looked at the world, they did so in wholeness.

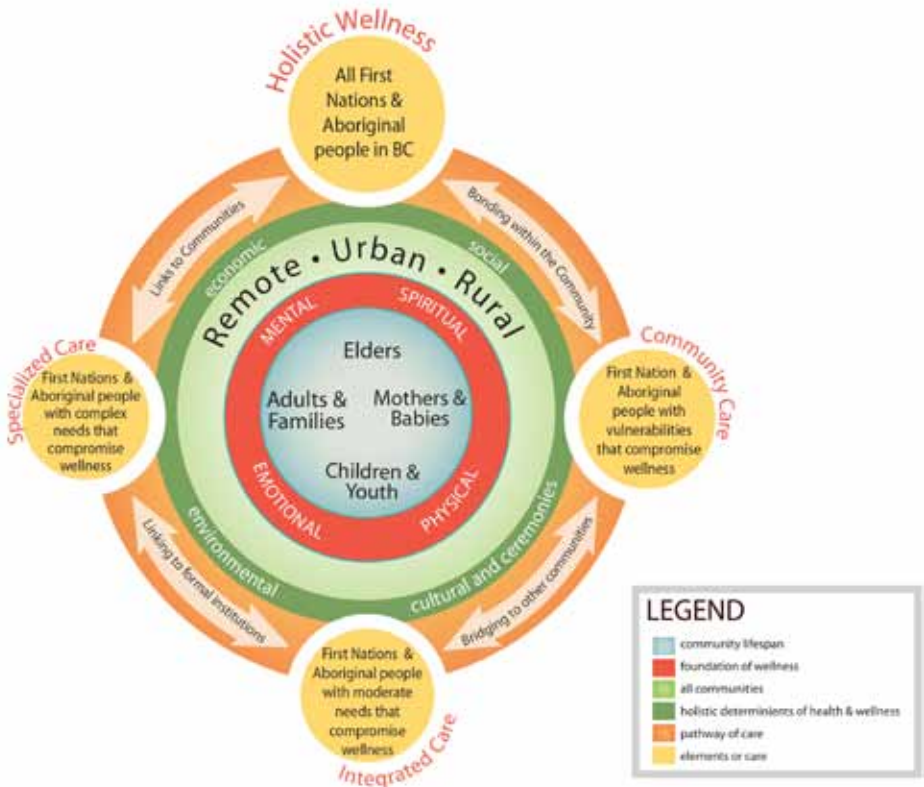
Now, the youth walked out of the river, up the river bank and toward the village. When they reached the edge of the wilderness, the place where the wilderness came to an end and the village began, they saw the elder. "Welcome home," said the elder. "Tonight we will feast, sing, dance and celebrate your discovery of wholeness."

~The End ~The Beginning .

# Circle of Wellness for BC First Nations and Aboriginal People

*A Path Forward: BC First Nations and Aboriginal People's Mental Wellness and Substance Use-10 Year Plan, 2013*

## Circle of Wellness for BC First Nations and Aboriginal People







## Where Families Can Start

When your child/youth is struggling emotionally, contacting your family doctor may be very beneficial as a first step. Your doctor may be able to rule out any physical problems that may be contributing to your child's overall health by doing an assessment to look for medical issues that can mimic a mental health challenge (for example, a thyroid problem or nutritional deficiency). Your doctor can also determine if your child requires other services offered by pediatricians, psychiatrists, Child and Youth Mental Health (CYMH), therapists, or privately registered psychologists. If your child is found to have a mental health challenge and requires medication, your doctor can sometimes work with specialists to monitor your child's medication and make any adjustments that may be needed. Your doctor may also assist your family in safety planning and coping strategies. If you do not have a family doctor, you can access a physician at a walk-in clinic for continuing care.

### How Can You Make the Most of Your Appointments with Your Family Doctor?

- Schedule an appointment for just the mental health issue. If your child also has physical concerns that require your doctor's attention, book a separate appointment for those concerns. Your doctor needs time to address mental health challenges, so letting the office staff know the reason for your visit may allow them to book a longer appointment for you and your child.
- Expect that your doctor may ask to see your child again for several follow-up visits. Sometimes big problems need to be broken down into smaller pieces so that they can be addressed completely and safely.

- Consider booking an appointment for yourself with your child's family physician, without your child, so that you can discuss your concerns openly. Or, you may want to write your thoughts in a private letter to the physician before your scheduled appointment. Consider yourself a partner in your child's recovery. It is helpful for your doctor and others who are supporting your child to hear from you.
- Depending on the age of your child, you may wish to encourage your child to have private time with their doctor. Doctors appreciate being able to ask questions openly with pre-teens and teens about important health issues that may be embarrassing to discuss in front of a parent. Youth are welcome to book their own appointments with their family physicians if they wish. However, doctors have a duty to respect the confidentiality of all patients, unless there is an imminent risk of harm (for example, active plans for suicide, or suspected abuse/neglect). It's important to know that your child's doctor cannot share private information that a child or parent discloses without that person's permission.

**If you don't have a family doctor**, look further into your community for support. Talk to your child's teacher, a school counsellor, or the staff at your local community health clinic for information on mental health resources. Talk to a friend or another parent who knows and cares for your child or contact Child and Youth Mental Health directly.

In Campbell River and the Comox Valley area, you can also contact the **Parent in Residence for the F.O.R.C.E. Society for Kids' Mental Health** by calling **1-855-887-8004**. The F.O.R.C.E. Parent in Residence is a parent in your community who has lived experienced parenting a child or youth with mental health challenges, and they can provide you with resources and support. You can learn more about the F.O.R.C.E. by visiting them online at [www.forcesociety.com](http://www.forcesociety.com) or check out the F.O.R.C.E. Facebook page and the F.O.R.C.E. YouTube channel.

If you do NOT have a **F.O.R.C.E. Parent in Residence** in your community, you can call the Kelty Mental Health Resource Centre at B.C. Children's Hospital and speak directly to a F.O.R.C.E. Parent in Residence and/or a F.O.R.C.E. Youth in Residence at **1-800-665-1822**. The Kelty Mental Health Centre at BC Children's Hospital offers several online resources for parents and other caregivers. For more information visit [www.keltymentalhealth.ca/family](http://www.keltymentalhealth.ca/family)

### Oh No!! The Dreaded Wait List!

You're been told that your child could benefit from having services but there's a long wait list.

What do you do in the meantime? There are some very good documentaries, books, and tip sheets that have been produced over the years for families of children and youth with mental health challenges.  
[www.forcesociety.com](http://www.forcesociety.com)

The Healthy Living section of their website offers several resources, including the **Healthy Living Toolkit**. You can download this toolkit at [www.keltymentalhealth.ca/healthy-living](http://www.keltymentalhealth.ca/healthy-living). It has been created to help your family live a healthy lifestyle by looking at what you are doing already that is contributing to good health and identifying your goals. This toolkit also gives you a chance to hear from other families about strategies they have used to promote healthy living in their family.

As you read further in this guide, you will see that we have included resources and contact information that will assist you in finding support in your community. We have also included resources and online tools that will answer the many questions you likely have about mental health and mental illness. Many circles of support are found in Campbell River and the Comox Valley, but when your child or youth is struggling with a mental health challenge, it is often overwhelming, making it difficult to find or reach out to the support systems.  
**You are not alone.**

## What is the Parent's or Caregiver's Role ?

As a Parent or Caregiver, you have a vital role in your child's care because:

- **You** love your child and you are the expert, you know your child best
- **Your child** will benefit greatly when they know you support them
- **You** can gather support and resources that will help you better understand your child's struggles
- **You** can be a part of developing a care plan for your child. Don't be afraid to ask questions
- **You** are your child's connection to their community and your community is rich with resources
- **You** can provide an important voice for your community by sharing your experiences. Your community is listening and supports you.

When **you** are involved in finding support for your child, **you** will also be supported, making your job as a parent or caregiver more rewarding.

## Support and Self Care for Parents & Caregivers

When someone in the family has a mental health challenge, the whole family needs extra support, not just the person with the mental health challenge. The fatigue and demands of caring for a child in crisis, or any person with a mental health challenge, can be exhausting and overwhelming.



*As families, we've been there.* There are many families around you who have similar experiences, and many community organizations that are available to help and support you. There are parent support groups and services in both Campbell River and the Comox Valley that can be found in this guide. Often, parent-to-parent support can be found in your child's school. By getting to know the parents, families and teachers in your school, you may find a strong and important support system that is easily accessible and mutually beneficial to everyone.

Sometimes, we need someone to listen from their heart. Talking to a friend, another parent, a counsellor, a F.O.R.C.E. Parent in Residence, or someone you trust can provide you with this opportunity. As the parent or caregiver, it's important to find time for yourself to relax, pursue your own interests and maintain a healthy lifestyle.

“Mothers are usually the primary caregivers for their children in crisis—the fatigue and demands of mentoring, empowering, nurturing our kids in crisis all comprise invisible labour of mental illness...”

(F.O.R.C.E. stakeholder)

The F.O.R.C.E. Society for Kids' Mental Health is a partner of the B.C. Partners for Mental Health and Addictions Information, working together to help people better prevent and manage mental health and substance use problems and live a healthier life. The B.C. Partners include: Anxiety B.C., B.C. Schizophrenia Society, Canadian Mental Health Association, University of Victoria: Centre for Addictions Research of B.C., the Institute of Families for Child and Youth Mental Health, DBA the F.O.R.C.E. Society for Kids' Mental Health, Families Services of the North Shore and Mood Disorders Association of B.C. For more information and self care resources, please visit [www.heretohelp.ca](http://www.heretohelp.ca)



## Ministry of Children & Family Development Resources: Child and Youth Mental Health (CYMH)

**Child and Youth Mental Health (CYMH) is a sector of the Ministry of Children and Family Development (MCFD).** When you first make contact with your local Child and Youth Mental Health (CYMH) office, the mental health clinician will ask questions about your child's challenges through a detailed interview with you. This will help them learn more about your child and the difficulties they are facing, and will also provide them with an opportunity to suggest other resources in your community that may also benefit your child and your family. This assessment may include different kinds of psychological tests, interviews with you and your child, and possibly other information from your family doctor, pediatrician, school counsellor or teacher. The assessment will look at both your child's strengths and areas where they are having difficulty.



If CYMH's services are deemed appropriate, they will let you know what type of service they can provide and approximately when you and your child will be seen by a CYMH therapist.

If CYMH determines that your child's difficulties fall outside the range of their services, they will refer you to another community service that is better able to help your child. For example, if your child is dealing with trauma from divorce or domestic violence, they may refer you to an agency that offers programs for children in this specific area.

To reach your local CYMH office, contact your family doctor or call them directly:

**Child & Youth Mental Health - Campbell River: 250-830-6500**

**Child & Youth Mental Health - Comox Valley: 250-334-5820**



## What Services Does CYMH Provide?

Child and Youth Mental Health (CYMH) provides treatment and support to children and youth under 19 years who are affected by serious mental health issues. Whenever possible, families are included and supported in the overall care plan.

**Services offered through CYMH may include the following:**

- Assessment, treatment and consultation
- Referral and liaison with other Mental Health services including child and adolescent psychiatry, paediatrics, Queen Alexandra Centre for Children, St. Joseph's Hospital, Island Health, and Maples Adolescent Treatment Centre. Adult Mental Health and Addictions services may also be included for those over 19 years of age.
- Quick Response/Suicide Prevention Clinician (when staffing permits)
- North Vancouver Island Aboriginal Outreach Program

### **Maples Adolescent Treatment Center:**

The Maples is a provincial Ministry of Children and Family Development (MCFD) mental health facility situated in Burnaby, BC providing assessment and treatment for adolescents in BC. It provides residential and/or outreach services for youth aged 12 to 16 with significant psychiatric and behavioural difficulties. All youth admitted to Maples Programs must go through a referral process. For more information, visit [www.mcf.gov.bc.ca/maples](http://www.mcf.gov.bc.ca/maples) or contact your local Child and Youth Mental Health Services office.

## Child & Youth Mental Health Teams:

Upon acceptance of your child or youth for treatment, the treatment team will determine the clinical services through an initial assessment performed by the therapist and/or team psychiatrist. An individualized treatment plan will be developed and may include a variety of services like cognitive-behavioural therapy (CBT), art or play therapy, individual therapy, family therapy or group therapy. If medication is recommended, the team psychiatrist will explain why and what medication is being recommended so you can be informed when making the choice with your child or youth about taking medication. It is important that this treatment plan is fully explained to you so that you can make an informed decision about how to proceed.

The clinical staff will also connect on an ongoing basis with other people who may be involved with your child or youth's care such as school teachers and counsellors, daycares, Ministry of Children and Family Development, family physicians or foster parents. You may hear the term Case Management, Integrated Case Management or Circle of Support if there are various people involved in supporting your child and family. These terms refer to managing situations where the nature of the problem is complex and therefore, multiple services and professionals are involved.

You may also want to ask your school about psycho-educational testing to rule out any learning disability. Often the waitlist to have this testing done through the school can be quite lengthy, but there are private agencies that provide psycho-educational testing (note: there is a fee for this testing when performed privately).

Some misconceptions about people with mental health challenges are that they are violent, unintelligent and weak-minded. All of these assumptions are untrue. In fact, none of us is immune to mental illness – it can be diagnosed in people of all ages, races and social classes.

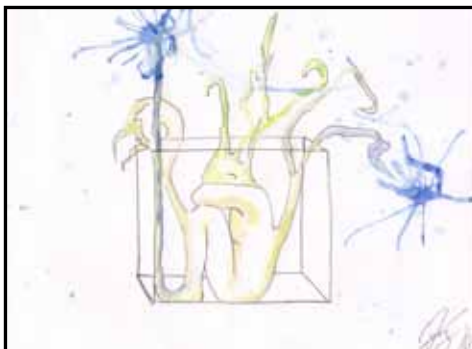
“The Aboriginal worldview highlights concepts of wholeness, balance, the importance of relationships with family, community, ancestors, and the natural environment. An individual’s identity, status, and place in the world are tied to the family, and to one’s ancestors’ traditional territory and the community. Each of these elements has implications for the design and delivery of healing programs ... from a First Nations and Aboriginal perspective, mental wellness is holistic.”

*(A Path Forward - Smye and Mussel 2001)*

## Aboriginal Child/Youth Program:

This service provides assessment and treatment of children and youth from 0 to 19 years of age. Treatment focuses on providing individual treatment for the youth as well as family support.

Outreach counselling is available to provide mental health services in the home, school or community. This service supports the child, youth, caregiver and community in addressing significant emotional and/or behavioural difficulties that may be severely affecting the overall functioning of the child or youth and family.



Aboriginal CYMH provides services to people from several reserves in Campbell River and the islands, the Comox Valley as well as the Métis community and urban aboriginal youth living in the region.

**Aboriginal CYMH - Campbell River: 250-830-6500**

**Aboriginal CYMH - Comox Valley: 250- 334-5820**

## How Will Child and Youth Mental Health Services (CYMH) Help My Family?

CYMH incorporates a care team approach. This means that there may be a number of professionals who work together to develop a plan for helping your child or youth. This also means that you, as a parent, will be an important part of this team. Your involvement is important as it will help you to better understand the nature of your child or youth's difficulties and how you can continue to support your child or youth.

### Who are the Professionals at CYMH?

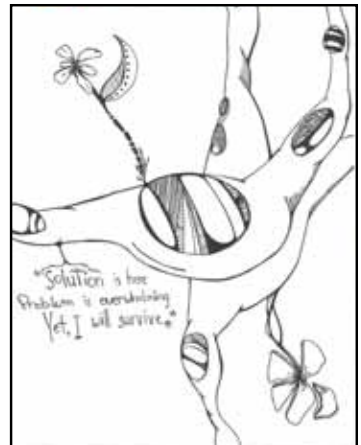
**Intake Clinicians:** These clinicians answer calls that come in and collect information in order to determine how the child, youth and family can be best served.

**Clinicians/Therapists:** These clinicians provide assessments and therapy for individuals, families and groups. They typically have a Masters Degree in Counselling, Psychology or Social Work and may have additional training in certain types of therapy.

**Psychiatrists:** These are medical doctors who have specialized training in childhood mental health disorders. Psychiatrists do assessments and diagnose mental health disorders as well as prescribe medications. They work in conjunction with the rest of the treatment team.

**Psychologists:** Professionals who do assessments and provide therapy. They hold a PhD in clinical psychology.

**Nurse Clinicians/Therapists:** Nurses who have specialized training in psychiatry/mental health in addition to the medical/nursing speciality.



## We Have Our First Appointment at CYMH. What Should I Expect?

When you arrive at your local CYMH office, you will meet with an intake clinician who will greet you and have many questions for you so that they can begin to get to know your child, youth, yourself and your family. You can also contact your local CYMH office to find out when are their drop-in intake appointments. This means that you may not have to phone ahead to book an intake appointment, but can instead show up during their drop-in time.

Prior to starting any treatment, you will be asked to sign consent forms. For example, the clinician may want your permission to gather information on another service your child or youth may be receiving or they may need your signed permission to share the information they gather with other professionals involved. Allowing service providers to share information with one another can be very beneficial for your child or youth and may allow opportunity for your child or youth's support team to grow.

Based on the assessment and information gathered about your child or youth, the clinician will draw up a recommended plan to help your child or youth. It is important that this plan is fully explained to you so that you can make an informed decision about how to proceed. Do not hesitate to ask questions and take notes. At this point, you may wish to begin writing in a journal or find another way to keep track of plans, the services your child or youth receives, your questions as they arise and the progress that is being made.

### The following are examples of possible goals:

- Improved relationships with parents, siblings, teachers and friends
- Better schoolwork
- Improved self-esteem
- Fewer disruptive behaviours

### The goals should be:

- Realistic
- Something your child will be able to do
- Behaviours that you can observe and measure (e.g., with rating scales)

## Treatment Plans

A treatment plan is a written document based on the assessment and will outline the course of action that the clinician believes will help your child or youth. CYMH uses evidence-based treatments, ones that have been shown to work. Treatment may involve the use of medications, a combination of medication and therapy or just therapy. Your child or youth may be involved in individual or group sessions. Medication would be prescribed through your family doctor or a psychiatrist. For example, they may recommend that your child or youth comes in for counselling once a week for three months or they attend group therapy for a certain period of time. The length of time for treatment depends on the difficulties your child is experiencing.

The treatment plan includes your child or youth's needs and goals. These needs and goals are then used to evaluate how well your child or youth is doing and whether any modifications to the treatment plan are needed.

The clinician will review the proposed treatment with you and your child or youth. You do not have to agree to the treatment plan. For example, many parents worry about giving their child medication. For some children, medication may be very beneficial, but there is choice. You can still continue to receive services even if you disagree with the treatment plan.

During the course of treatment, the clinician will re-evaluate your child or youth's progress and if they feel that your child or youth needs less help, they will discuss this with you and your child or youth. Similarly, if your child or youth seems to need a bit more help, they will discuss extending therapy.

If your child or youth is encountering difficulties in school as a result of their mental health challenges, it can be very beneficial to include the school as part of the treatment team. This enables the school to better understand what they need to do in order to help your child or youth do well in school.

## What Types of Therapy Are Provided?

The type of therapy offered will depend on the nature of your child or youth's problems and their age. Below are some of the more common types of therapy that are offered through CYMH:

**Cognitive Behavioural Therapy (CBT):** CBT aims to help people identify unhelpful assumptions, or “automatic thoughts,” and to make connections between these thoughts and the way they act and feel. Cognitive-behavioural therapy is used to treat a variety of problems, including depression, eating disorders, anxiety and panic disorders.

**Art or Play Therapy:** Uses paint or other art materials, puppets and other activities as a way to engage a child to communicate with their therapist about their problems and strengths they have to overcome them. Therapeutic play allows the child to express emotions and problems that might be too difficult for the child to talk about directly with another person. Young children often have a less difficult time expressing themselves through play. Children can learn to practice social skills and master frightening feelings through play.

**Family Therapy:** Helps with issues that affect the whole family. Family therapy can be beneficial in maintaining good relationships within the family while dealing with the pressures of mental health problems. Sessions may involve some or all members of the family. Benefits include opportunities for the family to express their concerns and fears and the family dynamics. Families can also learn new ways of getting along as a family.

**Group Therapy:** Therapeutic counselling in a group format. Children or youth who are dealing with similar problems are brought together in a therapeutic group. These groups are usually run for a specified period of time (e.g., 8 weeks).



**Dialectical Behaviour Therapy (DBT):** Is a comprehensive cognitive behavioural treatment with a strong emphasis on the building of personal skills and of empowerment. It usually entails increasing skills in the four areas of mindfulness, interpersonal effectiveness, management of distress and better regulation of emotions.

**In DBT, there are four behavioural targets:**

1. decrease life-threatening behaviours
2. decrease therapy-disrupting behaviours that may compromise treatment effectiveness
3. decrease behaviours that interfere with quality of life
4. increase coping skills

**Brief or Solution-Focussed Therapy:** Focuses on empowering individuals to find solutions in their life by figuring out what a person's goals are, and supporting them to find ways to achieve those goals.

**Interpersonal Therapy (IPT):** Focuses on relationship-based issues. Clients are helped to look at any difficulties they have in maintaining relationships and in resolving relationship difficulties.

**Motivational Interviewing:** Attempts to increase clients' awareness of the potential problems caused, consequences experienced, and risks faced as a result of the behaviour in question. Therapists help clients envisage a better future. The aim is to work towards enhancing the individual's motivation to change by identifying and resolving ambivalence.

“It took me over a year to get my child the help she needed because I was afraid I would be judged. And afraid my daughter and our family would be stigmatized.”  
(F.O.R.C.E. stakeholder)

## What You Can Expect From Your Child or Youth's Therapy or Treatment:

By going to therapy, your child or youth will have an opportunity to learn a set of skills that can prove useful to them throughout their life.

### In therapy your child may learn about:

- Why they are having difficulties
- Different ways to deal with their difficulties
- How to change negative thinking patterns and how to use healthy problem solving and coping skills
- Situations that can make their symptoms worse and new skills that can help prevent or cope with symptoms
- More appropriate ways of expressing their feelings or learning how to distinguish between different emotions

### You will probably be asked to:

- Participate in therapy sessions, particularly if your child is young (older adolescents and teens generally come for their sessions alone)
- Stay at the office while your child is receiving therapy
- Help with homework assignments to practice newly learned skills at home

## What Kinds of Services Are Available For Children or Youth Who Refuse To See Someone?

It can be very frustrating for a parent when their child or youth refuses to get help for their mental health challenges. Sometimes it requires a great deal of patience and time in order to help a young person to realize that they need help. Ongoing efforts to encourage the child or youth to seek help are often needed.

## Medication

Medication is not necessarily the first line of treatment for a number of mental health challenges. However, for certain kinds of mental health problems, (e.g., ADHD or psychosis), medication may be an important part of the treatment plan. It is important that you learn about the benefits and risks of the medication recommended for your child or youth. Most, if not all medications have side effects. In most cases, these side effects can be effectively managed. Ask for information about any medications your child or youth will be taking. In some cases, medication may be needed to help a child or youth get to the point where they can benefit from therapy. For example, many children and youth with severe anxiety may not benefit from therapy until their anxiety is reduced. Others will simply refuse to talk with a therapist at all. For these children or youth, treatment with medication may be the best option at that time.

### Some Questions to Ask Your Child or Youth's Clinician:

Anytime you need clarification from your child or youth's clinician, it's important for you to ask questions. Sometimes, you may need to ask the same question more than once! When your family is struggling, it is often difficult to know what types of questions to ask. Below are some suggested questions that you may wish to ask over time. Not all of these questions may apply to your situation.

- What kind of help will my child or youth get from you?
- What can you offer?
- What sort of experience/education do you have?
- What are the most effective approaches to helping my child or youth?
- Does my child or youth have to take medication for their illness? Will they have to stay on medication for a long time? What is the purpose of taking the medication ?
- How long will my child or youth receive services from you?

- If all the usual treatments/ approaches to dealing with my child or youth's problem aren't helping enough, then what?
- What can I do to support my child or youth at home?
- How will I be involved in this process? Where do I fit in?
- What other services are available to help and support my child or youth?
- What assistance can I receive as a parent? Where can I go for parent support?
- How will other members of my family be supported?
- What happens if my child turns 19 and still needs help?
- How do I contact you if I have more questions?  
(ask for the clinician's business card)

“This just isn't about Hayden.  
This is about  
everyone's children.”  
- Barb Kozeletski

## Can My Child Be Seen Without My Knowledge and Consent?

BC's Infants Act says that children and youth under 19 have the right to consent to their own health care which includes mental health. They do not need the consent of a parent or guardian, but the child must be mature enough to understand the risks and consequences of the treatment to give their own consent. The law considers them capable if they understand the need for medical treatment, what the treatment involves, the benefits and the risks of getting the treatment and of not getting the treatment. If the doctor or health care provider explains these things and decides that the child or youth understands them, they can treat the child without permission from the parents or guardians. The child or youth might have to sign a consent form.

## Who Will Have Access to My Child's Information?

CYMH will ensure that information about your child or youth will be kept confidential and that before any information is shared, you (or your child or youth) will be asked to sign a consent form indicating that you give permission to have information shared. It is sometimes important for your child or youth's therapist to be able to talk with other professionals about your child or youth in order to ensure there is continuity of care. Other professionals may include your child or youth's doctor or teacher, or other service providers such as a social worker. You and your child or youth have a right to know what information will be shared and why it is important to their care. If you have any concerns, please talk with your child or youth's therapist before you sign a consent form.

## My Spouse and I are Separated/Divorced. Do We Both Have to Consent to Service?

If you and your spouse have joint custody, both of you will be asked to consent. If there is no legal custodial agreement, the parent with whom the child or youth resides can give consent.

## How Can I Find Out How My Child or Youth Is Doing?

Confidentiality also applies to what information is shared with you as a parent. Children and youth also have a right to decide what information will be shared with their parents. Your child or youth's therapist will discuss with your child or youth what information can be shared with you, the parent.

A therapist will provide you with general information about your child or youth's progress and if there are any safety issues of which you should be aware. For the most part, therapists generally will not disclose details of what is talked about in therapy. This is to protect the relationship between therapist and child or youth so that the child or youth feels safe to speak about any issues without fear of anyone else knowing.

Older children and youth can refuse to consent to having any information shared with their parents (including that they are receiving services). In these cases, it can be very upsetting for the parent, who is naturally concerned about their child or youth. Your child or youth's therapist will attempt to work with your child or youth to help them understand the benefits of communicating with you as parents.

## How Long Will My Child or Youth Require Services?

Mental health treatment is a process. Change often takes some time.

It can be difficult to predict how much time is needed to help a young person who is facing mental health challenges. Some may require only a few visits while others may need help over a longer period of time. The frequency and duration of therapy varies and will depend on the type and severity of the mental health challenge your child or youth is experiencing. Other important factors that will impact your child or youth's progress include regular attendance of therapy, parent participation and implementation of therapy activities at home.



Together you, your child or youth and the clinician will develop some short term goals to use as a basis for helping your child or youth. At the end of that time period, together you can evaluate how well your child or youth is doing and whether they would benefit from additional help. In the meantime, it is important that parents and caregivers find support for themselves and practice a lot of self care to reduce their own anxiety and stress level.

## Who Decides That My Child or Youth No Longer Needs Services?

The decision to terminate therapy sessions is based upon the improvement in your child or youth's functioning. Treatment plans typically include goals which can be assessed after a period of time (e.g., 3 months) to see whether your child or youth is making progress. At that time, you, your child or your youth, and their therapist can evaluate how well your child or youth is doing. When it becomes apparent that your child or youth is doing much better, the therapist will begin to prepare your child or youth so that they will no longer need to come for therapy.



## Will We Be Able to Access Services in the Future If My Child or Youth Needs Them?

Should your child or youth experience difficulties after they have finished receiving services, you can always call CYMH to discuss whether it would be helpful to get further services.

## Challenges of Diagnosing Mental Health Disorders in Children and Youth:

A number of mental health challenges have some common symptoms. This can make it difficult to determine the precise diagnosis. For example, bipolar disorder, depression and anxiety disorder can be characterized by irritability as well as sleep and concentration difficulties. Bipolar Disorder and Attention Deficit/Hyperactivity Disorder (ADHD) can include distractibility, physical hyperactivity and talkativeness.

To complicate matters even more, it is not uncommon for children or youth to be dealing with more than one disorder at one time. For example, it is quite common for children or youth who have depression to also have an anxiety disorder. In order to help, it is important to let the clinician know as much as you can about your child or youth and changes in their moods. It may help to keep a journal of your child or youth's moods and symptoms. Or perhaps your child or youth might be able to use a rating scale each day to record their moods throughout the day. This may help you communicate important information back to the clinician.





## Programs and Services Offered Through Island Health

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Through Island Health, Child, Youth and Family Mental Health Services (CYFMHS) offers a range of services from short-term crisis intervention to inpatient assessment and treatment planning which are client centred, trauma-informed, least restrictive and collaborative. Informed by principles of respect, diversity and cultural sensitivity, Child, Youth and Family Mental Health is an interdisciplinary psychiatric service designed to optimize the health and well-being of children, youth and families. Interventions are tailored to meet the unique and complex needs of children, youth and families and their communities.

Services for children, youth and their families living in the Island Health region include: Crisis Services, Inpatient Services at Ledger House and Outpatient Programs through the Anscomb Program. In most cases, before a child or youth is referred to CYFMHS, they will already be working with a community or aboriginal mental health team. A referral to CYFMHS will likely be due to the need for more intensive assessment and service for children and youth with complex mental health problems, whose mental health needs have exceeded their own community's resources.

Services have a strong focus on collaboration with the client, family and community. The goal is to involve all significant members of the child or youth's support system in the process by encouraging frequent communication and participation in care conferences and planning meetings.

### **The Ledger Program (Inpatient):**

The Ledger Program is an island-wide resource that provides acute, inpatient hospital-based psychiatric services for children and youth. The Ledger Program provides stabilization, assessment, treatment planning and short-term interventions for children and youth aged 6 to 16 years.

Admissions are either (1) urgent or (2) planned.

### 1. Urgent Admissions

Special Care Unit (SCU): Clients admitted to this unit generally require urgent service and/or the need for short-term stabilization of the following conditions:

- a. Florid psychosis
- b. Active mania
- c. Suicidal with previous, serious suicide attempts
- d. Requiring intensive 24 hr/day monitoring

OR

### 2. Planned Admissions

Children's and Youth Units: Children and youth admitted to these two units require inpatient, multi-disciplinary, tertiary mental health assessment and treatment planning. Upon admission, clients must have a secure placement and community discharge plan in place.

1. **Children's Unit** - inpatient assessment, intervention and discharge planning for children ages 6-11 years with complex psychiatric problems
2. **Youth Unit** - inpatient assessment, intervention and discharge planning for ages 12-16 years with complex psychiatric problems

Locations Served: The Ledger Program and Anscomb Program serve all Island Health children, youth and families.

## The Anscomb Program (Outpatient)

The Anscomb Program is an island-wide service that provides a multidisciplinary continuum of mental health services including comprehensive and trauma informed assessment, evaluation and evidence-based treatment interventions. The goal is to support families and communities to reduce significant emotional, behavioural, psychological and psychiatric symptoms, and to increase the mental health and functioning of children and youth at home, at school and in their community.

### 1. Mood, Anxiety, and Psychosis Team

**(MAP)** Provides specialized services for children and youth, up to and including age 18, who have difficulty functioning due to complex mood, anxiety and/or psychotic disorders. Examples of those who may be referred are children and youth with complex challenges due to major disorders such as depression, bipolar disorder, generalized anxiety, obsessive compulsive, panic disorder, post-traumatic stress disorder, psychosis or schizophrenia.

### 2. The Neurodevelopment Team

**(NEURO)** Provides specialized services for children and youth, up to and including age 18, who have difficulty functioning due to complex neuro-developmental and associated psychiatric concerns. Examples of those who may be referred are children and youth with psychiatric concerns and ASD, ADHD, learning disabilities, developmental or intellectual delays.



**The North Island Regional Eating Disorder Program** provides direct client services in both the Campbell River and in the Comox Valley. Services are provided through the Comox Valley Nursing Centre and include:

- individual therapy for adults (Campbell River & Comox Valley) and youth (Campbell River) experiencing eating disorders
- support for parents of youth experiencing eating disorders
- education and therapy groups including binge eating group, compulsive eating group and anorexia & bulimia group
- nutrition counselling and support for youth and adults
- community development, early intervention and prevention initiatives

› **Campbell River: 250-850-2620**

› **Comox Valley: 250- 331-8504 (extension 68419)**

**Aboriginal Health Program** (Campbell River & Comox Valley – Island Health) – Working together with First Nations communities to maintain and improve the health of Aboriginal people living on Vancouver Island and surrounding areas. Provides Aboriginal Liaison Nurses who can advocate on your behalf and help you with accessing non-insured health benefits; accessing All Nations’ Healing Room in the Patient Care Centre; Discharge planning and communication with community contacts; hardship parking pass; referrals to community services; referral to Pastoral Care; support for families during hospital stays; assistance in understanding health care issues.

- › **Campbell River: 250-850-2604**
- › **Comox Valley: 250-890-3810 extension 61044**
- › **Website: [www.viha.ca/aboriginal\\_health/](http://www.viha.ca/aboriginal_health/)**

**Adult Mental Health and Addiction Services** - Provides a timely, single point of entry for all adult Mental Health and Addiction Services in the Campbell River area or Comox Valley. Members of the public, community agencies or physicians can call for a consultation or fax a referral to make an appointment for an initial assessment.

- › **Campbell River: 250-850-2620**
- › **Comox Valley: 250-331-8524**
- › **Website: [www.viha.ca/mhas/](http://www.viha.ca/mhas/)**

**Youth and Family Substance Use Services** - Information about Island Health’s regional Youth and Family Substance Use Services is available at:

- › **[www.viha.ca/youth-substance-use/discovery.htm](http://www.viha.ca/youth-substance-use/discovery.htm)**
- › **Email: [discovery@viha.ca](mailto:discovery@viha.ca)**

In the Comox Valley and Campbell River, Island Health funds Substance Use Services for Youth and Families through the John Howard Society North Island (JHSNI) and School District 72. For information contact:

- › **JHSNI Campbell River: 250-286-0611**
- › **Comox Valley: 250-338-7341**
- › **School District 72 Drug Prevention and Early Intervention Program: 250-286-4400 ext 2262**

## How to Access Island Health Programs and Services

Referrals for most of the Child, Youth and Family Mental Health Services must be made by a physician or mental health clinician. To receive a referral program form, discuss a referral, or obtain more information on any of Island Health services, please contact CYFMHS Intake at **250- 519-6794 or 250- 519-6720.**

### Local Programs and Services – Campbell River

This section lists local services in the Campbell River area. Services are listed in alphabetical order and separated into three sections:

- (1) Family Mental Health Resources
- (2) Drug, Alcohol and Concurrent Mental Health/Substance Use Services
- (3) Local Public Education Options

#### (1) Family Mental Health Resources:

**Coming soon to Campbell River – Integrated Youth Services Centre** – At the time of writing this Guide, this service was still being developed. It is expected to open in late Fall or early Winter of 2016. This service will be a one stop shop for youth 12 to 24 years of age and their families to find services for mental health care, substance use services, primary care, social/vocational services and peer support in one location. It will be situated downtown at 140 10th Ave and be open extended hours and provide walk in services. This is a B.C. Integrated Youth Services Initiative ([www.bciysi.ca](http://www.bciysi.ca)) that supports partnerships and wellness for youth and families. Look for more information on [www.jhsni.bc.ca](http://www.jhsni.bc.ca)

› **Campbell River: 250-286-0611**

**Aboriginal Health Program (Island Health)** - Working together with First Nations communities to maintain and improve the health of Aboriginal people living on Vancouver Island and surrounding areas. Provides Aboriginal Liaison Nurses who can advocate on your behalf and help you with accessing non-insured health benefits; accessing All Nations' Healing Room in the Patient Care Centre; Discharge planning and communication with community contacts; hardship parking pass; referrals to community services; referral to Pastoral Care;

support for families during hospital stays; assistance in understanding health care issues.

- › **Campbell River: 250-850-2602**

**Aboriginal Infant Development Program** - Provides culturally sensitive support for Aboriginal families and infants who are at risk or have developmental delays.

- › **Campbell River: 250-286-3430**
- › **Toll-free: 1-877-777-8222**
- › **Web Site: [www.lfls.ca/programs/0-6-programs/aboriginal-infant-development-program](http://www.lfls.ca/programs/0-6-programs/aboriginal-infant-development-program)**

**Campbell River and North Island Schizophrenia Society** - Strengthening Families Together program -10 session education program for family members & friends of those with serious mental illness. Also provides families with local resources.

- › **Campbell River: 250-914-3059**
- › **Email: [crss@shaw.ca](mailto:crss@shaw.ca)**
- › **Website: [www.bcscs.campbellriverbranch.webs.com](http://www.bcscs.campbellriverbranch.webs.com)**

**Campbell River Beacon Club** – Assists those with a chronic mental illness to achieve their potential.

- › **Campbell River: 250-286-8828**

**Campbell River & District Association for Community Living** - The Campbell River and District Association for Community Living provides and advocates for local services to support people of all ages with special needs, their families and caregivers. Helping People Help Themselves.

- › **Campbell River: 250-286-0391**
- › **Web Site: <http://www.cradacl.bc.ca/>**

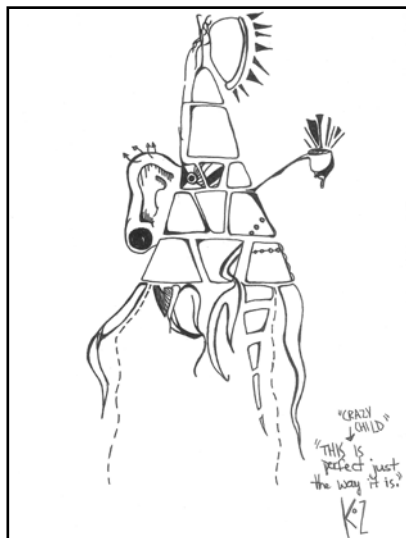
**Campbell River Family Network** – A network of coalitions working together to strengthen the capacity and commitment of the communities in the Campbell River Region to help our young children. We have joined together to promote family friendly communities – neighbourhood by neighbourhood – throughout the region.

- › **Phone: 250-202-0307**
- › **Web Site: <http://crfamilynetwork.ca/>**

## Campbell River Family Services Society (CRFSS) –

Offers the programs listed below:

- › **Contact for all programs: 250-287-2421**
- › **Email: [family.services@crfs.ca](mailto:family.services@crfs.ca)**
- › **Website: [www.crfamilyservices.ca](http://www.crfamilyservices.ca)**
  - **Child & Family Liaison Program** – CRFSS (referrals through Child & Youth Mental Health) – Offers office-based and outreach support and counselling to children with identified social, emotional and behaviour challenges and their parents/caregivers. Also offers the L.I.F.E. (Living In Families Effectively) parenting program, and the Worry Warriors program, an anxiety group for children.
  - **Group Works Program** - CRFSS – Service to groups of children and parents. The groups are designed to increase individual capacity, skills and resiliency. Groups include: Dad's Group, Parenting Solutions, Robron After-School Group.
  - **Child, Youth & Family Development Program** - CRFSS (referrals through Ministry of Children & Family Development) – Offers individualized outreach and in-office support and counselling to children, youth and families who require intensive intervention and support and are receiving direct MCFD services.
  - **Triple P Parenting Program** – A curriculum-based parent education program delivered in group and seminar format, aimed at increasing knowledge and skills in the areas of child development, behaviour management, communication, health, child safety, nurturing, etc.
  - **Early Childhood Behaviour Consultant** - CRFSS (by referral only) – Offers clinical services including assessment, therapeutic intervention, case management and consultation to parents and caregivers of children between the ages of 3 and 10 years who present severe social, emotional or behavioural challenges or have been diagnosed with a mental health disorder.



**Campbell River Hospital** - The Crisis Nurses, available in the hospital's Emergency Department, provide crisis intervention and stabilization in relation to mental health, psychiatric disorders and substance use, to people of all ages. The Crisis Nurses provide psychiatric nursing assessments, clinical suicide risk assessments, and provide support and strategies for coping. The Crisis Nurses also offer consultation and referral for clients to community partners for people presenting in person or by phone to the Emergency Department of Campbell River Hospital. Crisis Nurses are available 9:30 am to 9:30 pm, 7 days a week (holidays included)

› **Campbell River: 250-850-2647**

**Campbell River Youth Clinic** - offers free, confidential drop-in sexual health services for youth. No appointment required and no adult permission needed. **Campbell River: 250-850-2110**

› **Web Site: <http://www.cryouthclinic.ca/>**

**Cortes Community Health Association** - The Cortes Community Health Association (CCHA) operates the Cortes Health Care Centre providing space for a full-time medical doctor, nurse practitioner, and other health care providers; it also supports many other health related services and programs on Cortes. more info

› **Phone: 250-935-6608**

**Early Intervention Programs** - Early Intervention Therapies and the Infant Development Programs at Dogwood Place are committed to working in partnership with families and recognize the family and supporting environment as the most valuable resource in an individual's life. more info

› **Campbell River: 250-286-0955**

› **Web Site: [www.cradacl.bc.ca/programs/early-intervention-programs](http://www.cradacl.bc.ca/programs/early-intervention-programs)**

**FASD Key Worker Program** – Provides parents and caregivers with children from 0-19, diagnoses of FASD, suspected of having FASD, or a similar Complex Behavioural Disorder.

› **[www.cradacl.bc.ca/programs/fetal-alcohol-spectrum-disorder-keyworker-fasd](http://www.cradacl.bc.ca/programs/fetal-alcohol-spectrum-disorder-keyworker-fasd)**

› **Campbell River: 250-286-0955**



**FETCH (For Everything That's Community Health)** - an extensive, detailed online directory of health services and programs in Campbell River.

- › **Web Site:** [www.campbellriver.fetchbc.ca/](http://www.campbellriver.fetchbc.ca/)

**Footholds** - Offers a broad range of assessment and therapeutic services to all people with special needs regardless of their developmental stage. Offers behaviour intervention, social and life skills training, academic support and other services to youth of all ages. Based in the Comox Valley, but welcomes Campbell River families.

- › **Campbell River:** 250-871-0055
- › **Email:** [footholdstherapypc1@me.com](mailto:footholdstherapypc1@me.com)

**F.O.R.C.E. Society for Kids' Mental Health** – A provincial organization that provides families with an opportunity to speak with other families who understand and may be able to offer support or advice on what has worked for them. The F.O.R.C.E. also provides families and professionals with information, tools, and tips on how to support and assist children and youth with mental health challenges. The Parent in Residence (PiR) is a parent with lived experience who assists other parents with support, mentorship and finding resources.

- › **Toll Free:** 1-855-887-8004
- › **Website:** [www.forcesociety.com](http://www.forcesociety.com)

**Infant Development Program** - The Infant Development Program serves any child from birth to three years of age who is delayed in their development or may be at risk for delay in their development.

- › **Campbell River:** (250) 286-0955
- › **Web Site:** [www.cradac1.bc.ca/programs/infant-development-program](http://www.cradac1.bc.ca/programs/infant-development-program)

**John Howard Society North Island** – Promotes safer and healthier communities by providing several programs for children, youth, adults, and families. See below for programs.

- › **Campbell River: 250-286-0611**
- › **Email: [mail@jhsni.bc.ca](mailto:mail@jhsni.bc.ca)**
- › **Website: [www.jhsni.bc.ca](http://www.jhsni.bc.ca)**

- **Caregiver Support Program** Provides consultation and support to foster parents referred by the Ministry of Children and Family Development. There is no charge for this service.
- **KidStart Volunteer Mentoring Program** A mentoring program for vulnerable children and youth ages 6-18, delivered by carefully screened and trained volunteers. There is no charge for this service.
- **Intake Program** – Adult Information, referrals and brief supportive counselling are available to ex-offenders and families who approach the Society.
- **Youth/Parent Mediation Program** Provides mediation, family counselling and conflict resolution to teens and their families. Also provides parenting support. There is no charge for this service.
- **Collaborative Planning Program** An impartial, shared decision-making process for families and youth involved with MCFD. We facilitate Family Group Conferences, Family Case Planning Conferences and Youth Transition Conferences. There is no charge for this service.
- **Supported Independent Living For Youth Program** Helps youth to explore options when they are living away from home. There is no charge for this service.
- **Oasis Program** A six month, full time attendance program designed to meet individual needs of female youth, ages 14–18.
- **180 Degrees Detox and Stabilization Program** Provides service to youth who are in the process of withdrawal from drugs and alcohol.
- **Youth & Family Substance Use Services Alcohol and Drug counselling services for youth.** Assessment; individual, group and family counselling; referral for residential treatment; follow-up support. There is no charge for this service.

- **HeadStart Program** A six month, full time attendance program designed to meet individual needs of male youth ages 14–18.
- **Youth Outreach Program** An outreach service for youth (including after hours). Provides supportive counselling aimed at reducing high risk behaviour. Helps youth connect with services and healthy activities. There is no charge for this service.
- **Gus Papagiannis Bursary Program** Community Alcohol and Drug Action Committee works with our community to create a healthy social environment and strategic community response to prevent harm associated with alcohol and drug use in Campbell River.
- **Adult Forensic Outreach Program** Provides outreach support to offenders with mental health challenges, and those found not criminally responsible, with a goal to decrease risk factors and enhance stabilization in their community.
- **Community Alcohol and Drug Action Committee** C.A.D.A.C. works with our community to create a healthy social environment and strategic community response to prevent harm associated with alcohol and drug use in Campbell River.
- **Intensive Support and Supervision Program** Provides support and supervision to assist high risk youth referred by a Probation Officer.
- **Youth Forensic Services** Assesses and treats youth involved in the criminal justice system, within the context of their family & community, to decrease offending behaviour.
- **Community Living BC Outreach Program** Adult supports include establishing community connections, life skills, home management, relationship building, management of health issues, and personal safety.



**Kwakiutl District Council (KDC) Health** - Provides preventative and health promotion services for member nations on-reserve residents including Mental Health & Addictions Programs for First Nations and an FASD Program. The focus of these prevention services vary from site to site due to diverse community needs. Some primary prevention focuses include: suicide, drugs & alcohol, trauma, grief & loss, mental health, stress, anxiety, depression and parenting/attachment.

- › Campbell River: 250-286-9766
- › Cape Mudge: 250-285.3996
- › K'omoks Valley: 250-339-6591
- › Quinsam: 250-286-8064
- › Website: [www.kdchealth.com](http://www.kdchealth.com) for further contact information.

**Laichwiltach Family Life Society** - To provide holistic services (cultural, mental, emotional, spiritual, physical) to Aboriginal people and families in the Campbell River region and surrounding area and Comox Valley.

- › Campbell River: (250) 286-3430
- › Toll-free: (877) 777-8222
- › Website: [www.lfls.ca/](http://www.lfls.ca/)

**PacificCare Child Care & Resource Referral Program** - The Pacific Child and Family Enrichment Society is a not for profit society that sponsors programs to provide support to parents and caregivers.

- › Campbell River: (250) 203-6022
- › Web Site: [www.pacific-care.bc.ca](http://www.pacific-care.bc.ca)

**RLIFE** – Previously called Imagine Campbell River, RLife offers workshops and programs to promote resiliency in our children, youth and families. Face-to-face workshops are offered in several places on Vancouver Island as well as online webinars that can be accessed from anywhere. This web site includes a blog and youth 'zine and many resources for parents, as well as children and youth.

- › **Campbell River: 250-202-5500**
- › **Email: [mail@jhsni.bc.ca](mailto:mail@jhsni.bc.ca)**
- › **Website: [rlifeproject.ca](http://rlifeproject.ca)**
- › **Campbell River: 250-286-9766**
- › **Cape Mudge: 250-285.3996**
- › **K'omoks Valley: 250-339-6591**
- › **Quinsam: 250-286-8064**
- › **Web site: [www.kdchealth.com](http://www.kdchealth.com) for further contact information.**

**Supported Child Development Program** - This program supports children, from birth to twelve years of age, who have a developmental disability to fully participate in inclusive neighbourhood child care programs.

- › **Phone: 250- 286-0955**
- › **Website: [cradacl.bc.ca/programs/supported-child-development-program](http://cradacl.bc.ca/programs/supported-child-development-program)**
- › **Campbell River: 1-800-667-2188**

### **The Campbell River and North Island Transition Society (Campbell River)**

Provides services to women and children who are dealing with issues of abuse and violence, including the Ann Elmore Transition House and services that include residential recovery from substance addiction. The Campbell River and North Island Transition Society (CRNITS) also operates safe homes, provides ongoing support services, offers open support groups and runs the Stopping the Violence program. CRNITS operates the following two properties in Campbell River:

- › **Website: [www.annelmorehouse.ca](http://www.annelmorehouse.ca)**
- › **Email: [aeh@annelmorehouse.ca](mailto:aeh@annelmorehouse.ca)**

- Ann Elmore Transition House provides emergency shelter and support to women and their children fleeing abuse. Other services include detox, supportive recovery and a stabilization program.  
Campbell River: (250) 286-3666 Toll free: 1-800- 667-2188

- Rose Harbour is a program which includes time limited subsidized housing and specialized services for clients, with or without children, who are impacted by homelessness, abuse, violence, and/or substance misuse. Campbell River: (250) 287-7384

## (2) Drug, Alcohol and Concurrent Mental Health/Substance Use Services – Campbell River

**Addictions Recovery Program** – Laichwiltach Family Life Society provides counselling, assessment, and referrals to persons with alcohol and/or drug addictions.more info

- › **Campbell River: 250-286-3430 ext. 119**
- › **Toll-free: 1-877-777-8222**
- › **Website: [www.lfls.ca/counselling-therapy/addictions-recovery](http://www.lfls.ca/counselling-therapy/addictions-recovery)**

**Al-Anon** - The Al-Anon Groups are a fellowship of relatives and friends of alcoholics who share their experience, strength and hope in order to solve their common problems. Helps families of alcoholics by practicing the Twelve Steps, by welcoming and giving comfort to families of alcoholics, and by giving understanding and encouragement to the alcoholic. Any person who is troubled by another person's drinking can attend Al-Anon meetings.

- › **Campbell River: 250-287-3184 or call the information office in Victoria at 1-250-383-4020 for meeting dates and times in both Campbell River and the Comox Valley.**

**Alano Club** - Offers a supportive place for anyone in the community who wishes to socialize in an alcohol/drug free community.

- › **Campbell River: 250- 287-2911**

**Alateen** - Alateen is part of the Al-Anon Family Groups and is for young people whose lives have been affected by someone else's drinking.

- › **Campbell River: 1-250-383-4020 (call for meeting dates and times)**

**Community Action And Drug Action Committee - C.A.D.A.C.** works with our community to create a healthy social environment and strategic community response to prevent harm associated with alcohol and drug use in Campbell River.

- › Campbell River: 250-286-0611
- › Website: [www.cadac.ca](http://www.cadac.ca)

**Laichwiltach Family Life Society** - Empowering First Nations Youth in Unity: drug and alcohol counselling/education; family therapy; counselling for youth ages 13-25 of Native Ancestry; Addictions Recovery Program. Includes support group meetings.

- › Campbell River: 250-286-3430
- › Toll free: 1-877-777-8222

**Narcotics Anonymous** - A fellowship of men and women for whom substance abuse has become a major problem. Provides regular meetings for support and membership is open to all addicts, regardless of the particular drug or combination of drugs used.

- › Campbell River: 1-877-379-6652 (pager – please leave a message)
- › Website: [www.bcma.ca](http://www.bcma.ca)

### **North Island Alcohol/Drug Information and Education Society (NADIS)**

Provides information and resources to assist in making informed choices regarding the use of alcohol and other drugs. Also provides an extensive library of alcohol, drug and other addiction related print and media material, covering a wide range of topics.

- › Campbell River: 250-287-4771
- › Website: [www.nadis.ca](http://www.nadis.ca)

**North Island Supportive Recovery Society “Second Chance”**– Provides a supportive structure and recovery programs for clients (male ages 18 and over), assists their families, and builds community ties with clients. Includes crisis stabilization beds (referrals by Crisis Nurses at Campbell River Hospital) and includes supportive recovery beds (referrals by Mental Health & Addictions).

- › Campbell River: 250-830-1103

**Substance Abuse Prevention Program, SD72 (Campbell River)** - Provides support & resources to teachers, students, and parents on use and misuse of alcohol, tobacco and drugs. Also provides individual assessments, group work, and classroom presentations. Students are seen on short-term basis for individual interventions. Serves elementary and high schools in School District 72. M-F, Sept to June (partnership w/John Howard Society North Island)

- › **Campbell River: 250- 286-4400 extension 2262 (Student Services, School District 72)**

**Youth and Family Substance Use Program (John Howard Society North Island)** - Provides services for youth, offering assessment, treatment, and individual, group and family counselling. Self-referrals welcome.

- › **Campbell River: 250-286-0611**
- › **Email: mail@jhsni.bc.ca**

**Youth Outreach Support (John Howard Society North Island)** - Provides an outreach service to youth who may be at risk by misusing substances, are vulnerable to sexual exploitation, or need to connect with resources and healthy activities. Offers a safe after hours contact for youth. Referrals can be made by service providers, teachers, counsellors, parents, friends, doctors, RCMP, social workers, or youth can self refer.

- › **Campbell River: 250-286-0611**
- › **Email: mail@jhsni.bc.ca**

**180 Degrees Detox and Stabilization (John Howard Society North Island)** – Provides services to youth who are in the process of withdrawal from drugs and alcohol. Youth reside in John Howard Society family care homes for detox and stabilization.

- › **Campbell River: 250-286-0611**
- › **Email: mail@jhsni.bc.ca**



### (3) Education Options in Campbell River - Some Local Options in Public Education (School District 72)

See School District 72 web site for a list of all schools and current programs.

**Phone: 250-830-2300 Website: [www.sd72.bc.ca](http://www.sd72.bc.ca)**

**Robron Centre** is an alternative school with several programs for students in kindergarten to grade 12 as well as a Continuing Education program for adult learners. **Programs are listed below.** For more information about programs at Robron Centre, please call **250-923-4918**.

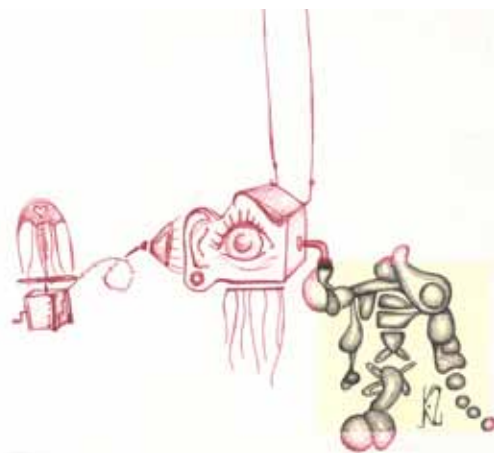
**Equinox** – For students in grades 10-12, this is a full-day program with small class sizes. Credits are earned through activity-based learning, group work, community service and life skills.

**Nexus** – This program is for students in grades 10 to 12 who are 19 years of age or younger. Students work in a quiet and well- supported environment where the focus is on academics, but coursework for cooking, art and physical education and other electives are offered in small groups twice per week.

**eBlend Home Learning** - Kindergarten to grade 12 distributed learning program offers parents and students learning opportunities that are both interesting and relevant. From in-class regular programs to those developed by a teacher with parent and student input, eBlend is dedicated to first class education that meets BC learning outcomes in a manner and style that best benefits the needs of each family.

**Laichwiltach Learning** – This is a full time program for Aboriginal students in grades 10 to 12 that is focused on life skills training, a cultural focus, First Nation language and community service opportunities while pursuing an academic graduation program. Students work and learn from Elders and participate in many outdoor activities. They also have the opportunity to attend Whitecrow Village FASD Society workshops which offer support in community and family stability, addictions recovery, education, interdependent living and employment.

**Matrix** - For students in grades 10 to 12 and under 19 years of age who may be planning to graduate with an Adult Dogwood Diploma, each student attends class for a minimum of two hours, Monday to Friday (8:30 to 10:30 am OR 10:30 am to 12:30 pm). There are weekly opportunities for group activities.



**The Quiet Zone** – This is a half day program for students who have a variety of needs, such as health issues or social/emotional concerns or for those who simply need a less active environment for learning. The Quiet Zone has interesting guest speakers, a cooking program once a week, and informal activities.

**AVID (Advancement via Individual Determination)** – Is dedicated to helping students who are academically ‘in the middle,’ but have test scores which reflect their potential for success. Grade 9 students at École Phoenix Middle School will be selected to participate in the AVID class according to the following criteria:

- They can succeed in rigorous courses with support.
- They have satisfactory attendance, work habits and class behaviour.
- They have college or university aspirations.
- They currently achieve C to B averages.
- They are prepared to give-up an elective each year beginning in Grade 9 and follow a regular homework schedule.
- They will enroll in the most challenging academic courses.

The AVID class occurs during the regular school timetable and will serve as a credit. The class helps students develop skills in reading, writing, listening, speaking, questioning, discussing, studying and learning with others.

## Other Programs in SD72:

**StrongStart** - a free, drop-in program open to all children and their parents and caregivers from birth to kindergarten. Parents need to complete a registration form at the program of their choice so that information such as emergency contact information is on file. Please bring your child's birth certificate with you to register. For more information, including days and times StrongStart Centres are in operation, please contact the respective school office of the StrongStart program you are interested in or contact Nevenka Fair, assistant superintendent at **250-830.2300** or visit **www.sd72.bc.ca**

## Local Programs and Services – Comox Valley

This section lists local services in the Comox Valley area. Services are listed in alphabetical order and separated into three sections:

- (1) **Family Mental Health Resources**
- (2) **Drug, Alcohol & Concurrent Mental Health/Substance Use Services**
- (3) **Local Public Education options**

“Schools are vital to kids’ well-being but... you have to advocate hard when cracks start to show  
- get to know the teachers”  
(F.O.R.C.E. stakeholder)

### (1) Family Mental Health Resources:

**Aboriginal Health Program (Island Health)** – Working together with First Nations communities to maintain and improve the health of Aboriginal people living on Vancouver Island and surrounding areas. Provides Aboriginal Liaison Nurses who can advocate on your behalf and help you with accessing non-insured health benefits; accessing All Nations’ Healing Room in the Patient Care Centre; Discharge planning and communication with community contacts; hardship parking pass; referrals to community services; referral to Pastoral Care; support for families during hospital stays; assistance in understanding health care issues.

- › **Comox Valley: 250-890-3810 extension 61044**

**Boys and Girls Club of Central Vancouver Island** - Offers parenting programs, mentoring programs, youth leadership programs and child care programs. Parenting programs includes: Parents Together; Parents In the Know; Parenting Without Power Struggles

- › **Comox Valley: 250-338-7141**
- › **Email: comoxvalley@bgccvi.com**
- › **Web site: www.bgccvi.com**

**Comox Military Family Resource Centre** - Offers programs, services and resources to meet the unique needs of military families.

- › **Comox Valley: 250-339-8290 or 1-888-246-0222**
- **Counselling Services & Prevention Support & Intervention: 250-339-8211 extension 7128**
- **Comox Valley Family Liaison Officer: 250-339-8286 Web site: www.familyforce.ca**

**Comox Valley Autism Support Group** - Support group for parents/families with autistic children. Meets regularly in Comox Valley.

- › **Comox Valley: 250-338-2981**
- › **Email: comoxvalleyautismparentgroup@gmail.com**

**Comox Valley Child Development Association (CVCDA)** – Offers programs below.

- › **Contact for all programs: 250-338-4288**
- › **Web site: <http://www.cvcda.ca>**
- **The Autistic Program (TAP) - CVCDA:** Offers family-centered services to autistic children and youth from birth to 19 years old, with a special emphasis on preschool children. The Autistic Program (TAP) includes the Tap classroom, an on-site program that provides up to 10 hours per week of intervention for children under 6. Each child and youth has an individual program that includes one to one intensive teaching, natural environment teaching and peer and small group teaching. Also includes small social/recreational groups, integrated social/recreational group and summer camps.

- **Vancouver Island Children's Assessment Network - CVDCA:** Assessments for children and youth with complex developmental behaviour challenges, including Autism Spectrum Disorder (ASD) and Fetal Alcohol Spectrum Disorders (FASD).
- **Grandparents Raising Grandchildren - CVCDA:** Support group for grandparents who are raising grandchildren.

**Comox Valley Family Services Association (CVFSA)**- Non-profit charity that offers a range of services; pregnancy outreach, helping vulnerable children and families, and parent educational groups and therapeutic services.

› **Comox Valley: 250-338-7575 Fax: 250-338-2343**

› **Email: [info@cvfsa.org](mailto:info@cvfsa.org)**

› **Web site: [www.comoxvalleyfamilyservices.com](http://www.comoxvalleyfamilyservices.com)**

- **Child and Youth Mental Health Group-** 'Creating Calm': Therapeutic educational group for children that empowers them to learn coping methods to manage stress. Parent involvement is a key component of the program in order to support the child's progress. Three groups a year: run 7-8 weeks and are separated into two age groups, 7-9 years old and 10-12 years old (not run concurrently). Self and community referral.
- **Collaborative Planning Program:** Coordination and facilitation of child/youth and/or family meetings in conjunction with social workers with Ministry of Children and Family Development (MCFD). Types of conferences/meetings are Family Group Conferencing, Family Case Planning Conferences and Youth Transition Conferences. MCFD referral only.
- **Community Based Victim Services (CBVS):** Provides emotional support, information, risk recognition and safety planning; assistance with understanding the justice system and accompaniment to court. The program helps women, men and self-identified genders who have experienced violence or abuse and also their family members, if needed. Two aspects – domestic violence and sexual assault. Self and community referral.
- **Family Development Program:** Workers provide strategies, skill building, support, and practical suggestions to children, youth and families experiencing short or long term challenges and are determined to be at risk. Ministry of Children and Family Development (MCFD) referral only.

- **Healthy Families Program:** Supports the efforts of parents to give children a strong foundation in life through weekly drop-in groups, access to parent-child resources and opportunities to develop new social connections. Parents can participate in a cooperative environment that promotes learning, well-being and personal growth. Examples include CAP-C Parent Support, Healthy Babies (pregnancy outreach program), and HOP in the Park (summer program), Nobody's Perfect Parenting Group and Farmers Market Nutrition Coupon Program. Self and community referral.
- **Sexual Abuse Intervention Program (SAIP):** Therapeutic and educative service to children and youth aged 3 to 19 years who have experienced sexual abuse, as well as offering support to their families. SAIP also provides assessment and treatment for children aged 12 and under that exhibits sexual behaviour problems. Self and community referral.

**Comox Valley Transition Society** - Provides safe, comfortable shelter for women fleeing abuse (Lilli House), and for their children. Staff are available 24 hours a day to provide information and emotional support in a safe, secure, non-judgmental, confidential environment. Also provides counselling and an addictions recovery program for women and the following programs:

› **Comox Valley: 250-897-0511**

› **Web site: [www.cvts.ca](http://www.cvts.ca)**

- **Comox Valley Girls Group** - CVTS- A supportive venue for pre-teen and adolescent girls to share their experience and to learn skills for healthy living. Discussions include healthy relationships, violence prevention, bullying, media literacy, body image, mental health and self care. Skills are developed in the areas of relationship violence prevention, disordered eating and substance misuse in a safe confidential, non-judgmental atmosphere. Groups are facilitated by an adult facilitator and a trained peer facilitator
- **Children Who Witness Abuse Program** - CVTS - Individual and group counselling services for children and youth aged 3 – 19 years who have been exposed to the abuse of their mothers. Provides support to caregivers of children under 3 years old, groups and workshops for mothers and for grandparents who are raising grandchildren. Also provides school-based education focusing on violence prevention

**Footholds (Comox Valley)** - Offers a broad range of assessment and therapeutic services to all people with special needs, regardless of their developmental stage. Offers behaviour intervention, social and life skills training, academic support, and other services to youth of all ages.

- › **Comox Valley: 250-871-0055**
- › **Email: [footholdstherapypc1@me.com](mailto:footholdstherapypc1@me.com)**

**F.O.R.C.E. Society for Kids' Mental Health** – A provincial organization that provides families with an opportunity to speak with other families who understand and may be able to offer support or advice on what has worked for them. The F.O.R.C.E. also provides families and professionals with information, tools, and tips on how to support and assist children with mental health difficulties. The Parent in Residence (PiR) is a parent with lived experience who assists other parents with support, mentorship and finding resources.

- › **Toll Free: 1-855-887-8004**
- › **Website: [www.forcesociety.com](http://www.forcesociety.com)**

**Hornby & Denman Community Health Care Society** - Provides Youth Outreach & Support Services, free youth support/advocacy, information and education on alcohol/drug use, and connects youth to the community. Programs are listed below. See information on Travel Assistance Program (TAP) in the 'Provincial Resources' section of this Guide.

- › **Phone: 250-335-2885**
- › **Email: [info@hornbydenmanhealth.com](mailto:info@hornbydenmanhealth.com)**
- › **Website: [hornbydenmanhealth.com](http://hornbydenmanhealth.com)**
- **Child, Youth and Family Counselling & Support** - Free confidential help for Denman and Hornby Island families, teens and children. One-on-one and family counselling as well as parent education and support groups. Also offer a comprehensive referral service to a wide variety of community resources.
- **Youth Outreach & Support Services** - Work from a harm reduction model. Free youth support and advocacy, information and education on alcohol/drug use, Party Safe, sexual health, and healthy relationships. Supports for youth who are struggling with school or relationship challenges. Connect youth to community resources and healthy activities. **Phone: 250-218-6521**

**John Howard Society North Island** – Promotes safer and healthier communities by providing several programs for children, youth, adults and families. See below for programs.

› **Comox Valley: 250-338-7341**

› **Email: [mail@jhsni.bc.ca](mailto:mail@jhsni.bc.ca)**

› **Website: [www.jhsni.bc.ca](http://www.jhsni.bc.ca)**

- **Adult Forensic Outreach - JHSNI**- Provides outreach support to offenders with mental health challenges, and those found not criminally responsible, with a goal to decrease risk factors and enhance stabilization in their community.
- **Caregiver Support Program - JHSNI** - Provides behavioural consultation support to foster parents referred by the Ministry of Children and Family Development.
- **Child & Family Mental Health Program - JHSNI** Provides a team based approach to support children, youth and families who are in need of intensive supports, services and interagency coordination due to mental health challenges. The program aims to strengthen and preserve families by providing, for a limited length of time, an intensive family-centered service that employs flexible service modalities.
- **CLBC Community Support - JHSNI** Assists young adults with developmental disabilities and pervasive development disorders, including FASD and the Autism Spectrum to make healthier lifestyle choices through short- and long-term support, advocacy, crisis intervention, life coaching and assessment and referral to other community agencies. Referrals are contract specific through local CLBC office.
- **Intensive Support and Supervision - JHSNI** - Provides support and supervision to assist high-risk youth referred by a Probation Officer. Also assists youth on probation to make healthier lifestyle choices through short or long term individual / family support, assessment and referral to other community agencies, advocacy, crisis intervention, case planning, and management.
- **KidStart Volunteer Mentoring Program - JHSNI** - A mentoring program for vulnerable children and youth ages 6-18 years, delivered by carefully screened and trained volunteers. Mentors provide positive role modelling through a recreationally-based friendship



- **YCJA Family Support - JHSNI** Provides support and counselling to youth and their families referred by local youth Probation Officers. The program assists youth on probation to make healthier lifestyle choices through short and long term support, advocacy, crisis intervention, life coaching and referral to other community agencies
- **Youth and Family Substance Use Services - JHSNI** - Alcohol and Drug counselling services for youth, offering assessment;
- **Youth Forensic Psychiatric Services - JHSNI** - A specialized mental health service within the Ministry of Children and Family Development that focuses on providing assistance to youth who are in conflict with the law and their families. Youth must be referred from the Youth Court, Youth Justice Probation Officers and Youth Custody Centre staff.
- **Youth Justice Beds JHSNI** Provides homes for youth who are required to participate in offence-specific treatment. Youth must be referred by the Youth Probation Officer when there is a need to access and bed and outpatient treatment.
- **Youth Outreach Support JHSNI** – Provides support to youth who may be disengaged from their family and/or community, may be experiencing difficulties accessing basic needs and are at risk.

**Kwakiutl District Council (KDC) Health** - Provides preventative and health promotion services for member nations on-reserve residents including Mental Health & Addictions Programs for First Nations and an FASD Program. The focus of these prevention services vary from site to site due to diverse community needs. Some primary prevention focuses include: suicide, drugs & alcohol, trauma, grief & loss, mental health, stress, anxiety, depression and parenting/attachment.

- › 250-286-9766 (Campbell River)
- › 250-285.3996 (Cape Mudge)
- › 250-339-6591 (K'ómoks Valley)
- › 250-286-8064 (Quinsam)
- › Web site: [www.kdchealth.com](http://www.kdchealth.com) for further contact information.

**Parent/Teen Mediation** – no-cost mediation services for parents and teens of Comox Valley. Parent or teen can self refer.

- › Comox Valley: 250-335-2343

**Rainbows** - Support for grieving children ages 5-11 years; 12 week programs

- › **Comox Valley: 250-339-3966 (Comox United Church – please leave a message)**

**RLIFE** – Previously called Imagine Campbell River, RLife offers workshops and programs to promote resiliency in our children, youth and families. Face-to-face workshops are offered in several places on Vancouver Island as well as online webinars that can be accessed from anywhere. This web site includes a blog and youth 'zine and many resources for parents as well as children and youth.

- › **Comox Valley: 250-202-5500**
- › **Email: RLife@jhsni.bc.ca**
- › **Website: www.rlifeproject.ca**

**St Joseph's General Hospital, Comox:** St. Joseph's Hospital offers an in-patient adult psychiatric unit (the unit does not admit people under the age of 16 years) as well as Crisis Intervention, Substance Intervention, Adult Day Therapy Program, Adolescent Outpatient Service, and a Psychogeriatric Outreach Program.

- Substance Intervention offers assessment, intervention and referral for persons requiring detox. Contact a Substance Abuse Intervention Nurse at: **250-339-1573** or, if after hours, call St Joseph's Hospital main reception at: **250-339-2242 or call: 911**
- The Adolescent Outpatient Services provides continuous intervention for adolescents experiencing serious psychiatric difficulties, such as depression, anxiety disorders, eating disorders, or thought disorders. The service commonly sees adolescents where the psychiatric disorder co-occurs with a medical illness or with substance abuse. Adolescent Outpatient Services accepts referrals for therapy directly from families seeking service. Caregivers or school personnel may also phone to facilitate referrals on behalf of teens and their families. To access a psychiatric assessment, physicians can request a physician referral form. **Phone: 250-339-1525 Website: www.sjghcomox.ca/psychiatry.php**

- St. Joseph's Hospital Adolescent Outreach Counsellor provides
  - 1) urgent response to children and teens identified as at risk for suicide and
  - 2) ongoing outreach counseling for teens with serious, persistent psychiatric disorders that are being treated by the Adolescent Outpatient Service. This is NOT an emergency service. It provides prompt, short term assessment and intervention until the situation is resolved, or other services are in place. Families can contact the Outreach Counsellor directly **Phone: 250-702-6880**.

**Stable Program** - Therapeutic Riding Society assists children with anxiety in this equestrian program. It is designed to serve children 8- 18 who live with anxiety, emotion dysregulation, distress intolerance, and who have not yet developed age appropriate social skills. Often these youth are referred to our program because traditional therapies have not been successful with them. The Stable Program supports children and youth by giving them resources and opportunities to help them improve: self regulation: ability to identify and rectify their anxiety, their non-verbal and verbal communication; body awareness; mindfulness and self concept.

- › **Email:** [cvtrs@telus.net](mailto:cvtrs@telus.net)
- › **Comox Valley:** 250-338-1968 or 250-338-1987

**Upper Island Women of Native Ancestry** – a channel of communication between women of Native Ancestry and other organizations and to meet as many needs as possible of Native Women and their Families.

- › **Comox Valley:** 250-334-9591
- › **Web Site:** <http://uiwona.ca/>

**Wachiay Friendship Centre** - Provides an Aboriginal Employment Unit, FAS/FAE Information and Prevention, Youth Group, and Homelessness Prevention. Also offers referrals and other assistance to persons in crisis and needing advocacy. There are many programs at Wachiay, including those listed below.

- › **Comox Valley:** 250-338-7793
- › **Web site:** [www.wachiay.org](http://www.wachiay.org)
  - **Helping Hands** – (no age or gender restrictions, one time emergency service) To meet the emergent needs of community members, this program provides one-time emergency support. This program has provided such things as medical supplies, baby car seats, food and hydro

- **Raven Back Youth Drop-in Centre** – Daryle Mills, Program Coordinator (age restrictions 12-24 yrs.) Provides a safe, youth friendly, culturally sensitive environment for youth to gather, share ideas, participate in activities and workshops, benefit from peer support and receive mentoring from the UMACC coordinator, youth assistant, elders and community members
- **Wachiay Warriors Hockey Program** (age restrictions 6-18 yrs., must be Aboriginal) 20 Aboriginal youth in the Comox Valley can apply to this program for equipment and support for league fees to participate in hockey. The equipment was donated to the Friendship Centre by the NHL Players Association 4 years ago and they have been delivering this program since then. The Program Director coordinates the registration, hockey equipment and fundraising activities
- **Fetal Alcohol Spectrum Disorders (FASD)** Program for all parents, caregivers and service providers of children and youth 0-18 years. Provides advocacy and support for families of youth and children with confirmed or suspected FASD.

**You Are Not Alone (Y.A.N.A.)** – You Are Not Alone (YANA) is available to all Comox Valley families residing in School District 71 (Comox Valley) who need to travel for the medical care of a child under 19 or a pregnant mother. YANA provides funding to help cover expenses while a local child is out of town and helps with accommodation. YANA's services are quick and easy to access. We have deep respect for the privacy of the families we serve.

Comox Valley: 250-871-0343

- › **Email:** [info@yanacomoxvalley.com](mailto:info@yanacomoxvalley.com)
- › **Website:** [www.yanacomoxvalley.com](http://www.yanacomoxvalley.com)

## (2) Drug, Alcohol and Concurrent Mental Health/Substance Use Services – Comox Valley

**Al-Anon** - The Al-Anon Groups are a fellowship of relatives and friends of alcoholics who share their experience, strength and hope in order to solve their common problems. Helps families of alcoholics by practicing the Twelve Steps by welcoming and giving comfort to families of alcoholics, and by giving understanding and encouragement to the alcoholic. Any person who is troubled by another person's drinking can attend Al-Anon meetings.

- › **Comox Valley: 1-250-383-4020 for meeting dates and times in both Campbell River and Comox Valley.**

**Alano Club** - Offers a supportive place for anyone in the community who wishes to socialize in an alcohol/drug free community.

- › **Comox Valley: 250-338-0041**

**Alateen** - Alateen is part of the Al-Anon Family Groups and is for young people whose lives have been affected by someone else's drinking.

- › **Campbell River & Comox Valley: 1-250-383-4020 for meeting dates and times.**

**Comox Valley Recovery Centre (Comox Valley)** - Provides residential, live-in support and recovery programs for men who have addiction issues (primarily alcohol, drug, gambling and/or sex).

- › **Comox Valley: 250-338-7144 or Toll Free 1-866-708-2872**
- › **Website: [www.comoxvalleyrecoverycentre.com](http://www.comoxvalleyrecoverycentre.com)**

**Dawn to Dawn (Comox Valley)** – A residential housing program that makes transitional housing possible by providing homeless individuals and families with access to housing that gets them (or keeps them) off the streets. Follows a Housing First Model that says it doesn't matter how people became homeless; everyone is better able to move forward in their lives if they are housed. That means providing shelter, and then combining that housing with services in the areas of mental and physical health, substance abuse, education, and employment.

- › **Email: [info@dawntodawn.org](mailto:info@dawntodawn.org)**
- › **Website: <http://dawntodawn.org/>**

**Narcotics Anonymous (Campbell River and Comox Valley)** – A fellowship of men and women for whom substance abuse became a major problem. Provides regular meetings for support and membership is open to all addicts, regardless of the particular drug or combination of drugs used.

- › **Comox Valley: 1-877-379-6652 (pager – please leave a message)**
- › **Website: [www.bcna.ca](http://www.bcna.ca)**

**Substance Abuse Intervention Nurse** - operated from St Joseph's Hospital

- › **Comox. Comox Valley: 250-339-1573**
- › **Afterhours: call St Joseph's Hospital (Comox) at 250-339-2242 or call 911**

**Youth and Family Substance Use Program** - John Howard Society North Island provides services for youth; offering assessment, treatment, and individual, group and family counselling. Self-referrals welcome.

- › **Comox Valley: 250-338-7341**
- › **Email: [cy@jhsni.bc.ca](mailto:cy@jhsni.bc.ca) (Comox Valley)**

**Youth Outreach Support** John Howard Society North Island provides an outreach service to youth who may be at risk by misusing substances, are vulnerable to sexual exploitation and need to connect with resources and healthy activities. Offers a safe after hours contact for youth. Referrals can be made by service providers, teachers, counsellors, parents, friends, doctors, RCMP, social workers or youth can self refer.

- › **Comox Valley: 250-338-7341**
- › **Email: [cy@jhsni.bc.ca](mailto:cy@jhsni.bc.ca) (Comox Valley)**

**180 Degrees Detox and Stabilization (Comox Valley and Campbell River - John Howard Society North Island)** – Provides services to youth who are in the process of withdrawal from drugs and alcohol. Youth reside in John Howard Society family care homes for detox and stabilization.

- › **Comox Valley: 250-338-7341**
- › **Email: [mail@jhsni.bc.ca](mailto:mail@jhsni.bc.ca) (Campbell River)**
- › **Email: [cy@jhsni.bc.ca](mailto:cy@jhsni.bc.ca) (Comox Valley)**

### (3) Education Options in Comox Valley – Some Local Options in Public Education (School District 71)

See School District 71 web site for a list of all schools and current programs.  
**Phone: 250-334-5500 [www.sd71.bc.ca](http://www.sd71.bc.ca)**

**Aboriginal Education** – The Nala’atsi Program assists students to meet secondary school completion requirements through an individualized program of studies or to facilitate re-entry into the mainstream secondary system. Assistance may also be provided to recent graduates requiring upgrading for entry into post-secondary institutions and programs. This is a ten month program offering group and individual instruction from 9:00 am to 3:00 pm Monday to Thursday at the Aboriginal Learning Centre. This program is tailored for each student and focuses on completion of core academic subjects. Planning, work experience opportunities and counselling are available. There is a limited selection of electives available including cooking, art and physical education.

**Glacier View Secondary Centre** – A school that provides alternate educational opportunities and unique programming for School District #71 students in grades 8-12. The school services students who have been out of the education system for a period of time, have fallen behind their peers or have experienced difficulty with a larger school environment. As such, the staff at this school teach, support and guide students. Programs offered at Glacier View Centre are listed below.

- **Bridgeway** – is a district behaviour program designed for students in grades 7 to 9 (under 16 years of age). The Bridgeway Program involves an adapted academic program, as well as life, social skills, work training & applied work opportunities. The goal for students is to work on specific behavioural goals so they can transition back to their home school. Bridgeway runs Monday through Thursday.

- **Connections** – is a unique program designed for grade 10 or 11 students in School District #71. This full time senior program offers Math, PE and English or Communications. Connections provides a unique theme for students who are interested in their environment and the world around them. One of the main beliefs of this program is that there are many valuable learning opportunities that exist outside of the classroom. Sustainable Resources 11 and Outdoor Education 11 are also covered in this program and provide a way for educating students out of the regular classroom. Classes are full days Monday through Thursday and mornings on Fridays.
- **K.E.Y. Program** – is designed to support students in Grades 8 or 9 (under 16 years of age). The ‘Knowledge Empowered Youth’ (KEY) Program is designed for students who have had difficulty adjusting to standard mainstream school schedules and/or student expectations. Academic learning is the primary focus of this program as students receive close teacher and educational assistant support as they work through their own self-paced personal curriculum. Classes are half days, Monday through Thursday.
- **Senior Alternate** - The Senior Alternate Program is designed for students who have difficulty adjusting to standard mainstream school schedules and/or student expectations. Academic learning is the primary focus of this program as students receive close teacher and educational assistant support as they work through their own self-paced personal curriculum. Students can complete their Dogwood Diploma, Adult Grad Diploma or School Leaving Certificate in this program. Classes are half days, Monday through Thursday.
- **Firewood Program** – This is a work experience program that involves the physical activity of cutting, splitting and loading firewood, and then delivering it to customers throughout the Comox Valley. Students travel with the program coordinator to rural locations to source and cut the firewood. Due to the physical requirements of this program, it’s suggested that only gr. 9-12 students apply.



- Step Program** – The Sandwick Technical Education Project (STEP) is designed to provide students with a realistic work environment. Students will cover the following WorkSafe topics: Lifting to save your back; Ladder safety; Fall arrest; WHMIS; Lockout; Employer expectations. The STEP Program is open to all students in gr. 10-12. It is directed toward those who plan to pursue a career in the trades industry. STEP will give students some background skills before entering a trade, and will give them an idea of what a work day will look like. Students must commit to 6 days for this program (1 day a week over 6 weeks). Students are asked to bring a lunch, appropriate dress for work and a positive attitude.

“The human body does not end at the neck.”  
(F.O.R.C.E. stakeholder)

### Navigate Powered by North Island Distance Education School (N.I.D.E.S.)

- Offers Kindergarten to Grade 12 students the opportunity to personalize their learning and take control of their own education through either distributed learning or blended learning programs. Blended learning programs are currently being offered through the Fine Arts eCademy (FAE) and the eCademy of New Technology, Engineering and Robotics (ENTER) and the IClass programs. Also offers adult learners the chance to upgrade or take additional courses and without ever stepping inside a BC high school.

- › For more information, visit [www.navigatenides.com](http://www.navigatenides.com) or call 250-337-5300

### Other Programs in School District 71 (Comox Valley):

**StrongStart** - Supports parents in this important role by providing a free, drop-in early learning program for young children from birth to kindergarten and their parents or caregivers. Under the direction of licensed early childhood educators, parents and children participate in early learning activities, such as story time, music, singing, art and puzzles. Children gain problem-solving skills, and build self-esteem and the social skills that will help them when they enter school.

Parents learn activities that they can do at home to further support their child's learning, nutrition, and make valuable connections with other parents or caregivers. StrongStart is a free, drop-in program open to all children and their parents and caregivers from birth to Kindergarten. However, parents need to complete a registration form at the program of their choice so that such items as emergency contact information is on file. Please bring your child's birth certificate with you to register

- › **For more information on the education options offered by School District 71 (Comox Valley), visit [www.sd72.bc.ca](http://www.sd72.bc.ca) or call 250-334-5500**

## Some Helpful Information to Help Parents Navigate the Public Education System:

This series of “Speaking Up” advocacy manuals, provided by BCCPAC, offers parents details on how the school system works, outlines parent and students rights and responsibilities, provides strategies for advocating for children, and supports student self- advocacy:

**[www.bccpac.bc.ca/resources/speaking](http://www.bccpac.bc.ca/resources/speaking)**

A parent's guide to understanding **Individualized Educational Plans** can also be found at the BCCPAC website: **[www.bccpac.bc.ca/resources/individual-education-plans-guide-parents](http://www.bccpac.bc.ca/resources/individual-education-plans-guide-parents)**

A mental health orientation guide for teachers (Orientation to Child and Youth Mental Health Services: A Guide for Teachers), written by the F.O.R.C.E. Society for Kids' Mental Health can be found here:

**[www.forcesociety.com/sites/default/files/CYMentalHealthGuide\\_Teachers.pdf](http://www.forcesociety.com/sites/default/files/CYMentalHealthGuide_Teachers.pdf)**

**Kelty Mental Health** offers some online articles and resources about mental health and the education system: **[www.keltymentalhealth.ca](http://www.keltymentalhealth.ca)**

The above resources may offer some direction for parents whose children or youth are struggling in school due to their mental health challenges. Building

relationships with your child or youth's school is very important. Get to know your child or youth's teachers, counsellors, administrators and other parents in your school community. Don't wait until you need support to nourish these relationships. Start on the first day of school. Many of these people are true champions for your child or youth, and will help support you, your child, your youth and your family.

Parents can play a vital role in the education of their children by working in partnership with the professionals to develop a plan that maximizes their child or youth's abilities to succeed at school. Below are some tips to assist parents in communicating effectively with their child or youth's school:



- Try to establish regular ongoing contact and not just when a crisis arises. Expect you will have regular contact. Be proactive and let the school know your preferences for how you will communicate with them.
- When you meet with the school to review your child or youth's progress, begin the meeting with things that are going well, as well as the concerns. It is important to look at what has been working. Put together some notes (positive feedback first, then concerns) and bring them to the meeting. This will relieve some anxiety and help you be prepared going into the meeting.
- If you have noticed something in your child or youth's behaviour that is troubling, it is a good idea to contact the school to find out whether their school work or social interaction with the other children or youth is also being affected.

- It is best if you start by contacting your child or youth's teacher as they are the one who may know your child or youth the best at school. The school counsellor is also a good contact and parents can request to meet with them. The school principal is a good resource and may be able to pull together appropriate staff members to talk with you about your child or youth.
- Be aware of everything that is in your child or youth's file. If there is anything you do not have a copy of but would like a copy of, ask the school if they could please provide one. Offer to pick up the copy at a later date, so it can be copied during a quiet part of the day. This is especially important if you would like copies of more than one report or if the reports are long.
- Get to know and understand your rights and all the terms and conditions that apply to the services your child, youth and family uses. Read everything carefully. Be sure you understand and fully agree to everything before you commit to, or sign anything.
- Once a child or youth has involvement with a service provider outside of the school, an integrated case management (ICM) meeting is often required and parents, as well as schools, can request an ICM meeting. These meetings bring together everyone involved in assisting your child or youth.
- It is often very helpful to bring a third party with you to the meeting to be an extra set of ears for you and to take notes. It is recommended that you inform the school ahead of time that you will be bringing an additional person.

**Below are some titles of children's picture books that are based on emotions and general mental health.**

Parents of younger children may want to ask their local library if they have any of these books available to borrow.



**A Bad Case of Stripes** – a book about liking yourself, written by David Shannon Suggested age level: 5-9 years

**How Are You Peeling?** - a book about identifying feelings, written by Saxton Freymann Suggested age level: all ages

**Some Things Are Scary** – a book about fear, written by Florence Heid Suggested age level: 5-9 years

**Wemberly Worried** – a book about anxiety, written by Kevin Henkes Suggested age level: 4 years and up

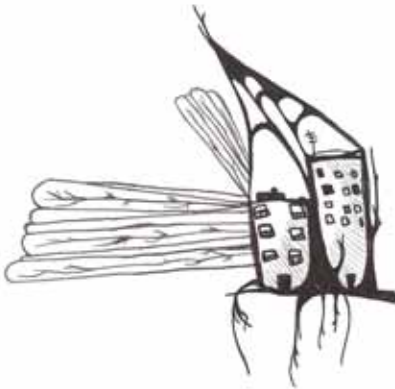
**The Worrywards** – a book about anxiety, written by Pamela Duncan Edwards Suggested age level: 4-6 years

**The Kissing Hand** – a book about separation anxiety, written by Audrey Penn Suggested age level: 5-9 years

**The Invisible String** - a book about separation anxiety, written by Patrice Karst Suggested age level: 3-9 years

**The Red Tree** – a book about depression, written by Shaun Tan Suggested age level: 7 years and up

The Family Support & Resource Centre and Sunny Hill Education Resource Centre – browse and download or borrow over 5,000 health books, pamphlets and videos for patients and families of all ages. They even have children’s books! Check out their website and browse online. You can borrow for up to 30 days and they will ship to you for free, and even give you a return postage stamp to mail them back at no cost! <https://libraries.phsa.ca/fsrc>



Apartment Fly

K2

## Adult Mental Health Services

Sometimes services need to continue into adulthood. That requires transition planning to adult mental health services. These services are similar to those provided for children and youth, but are operated by Island Health.

### Contact Mental Health & Addiction Services:

- › **Campbell River:** 250-850-2620 **Comox Valley:** 250-331-8524
- › **Website:** [www.viha.ca/mhas/services/](http://www.viha.ca/mhas/services/)

### Vancouver Island Crisis Line. 1-888-494-3888. 24-hour crisis line

For people in emotional crisis, including suicide and mental health issues, the Vancouver Island Crisis Line operates a 24-hr crisis line (provides crisis intervention, information, referrals) and Suicide Bereavement Support Group meetings. [www.vicrisis.ca](http://www.vicrisis.ca)

### Aboriginal People Crisis Line: 1-800-588-8717

**If you are in a situation that involves immediate risk of harm to your child or others, call 911** and let the operator know it is a mental health problem. Families can also go to a hospital emergency room.

**In Campbell River**, children, youth and adults should attend the emergency room at Campbell River Hospital 375 Second Avenue, Campbell River. **Phone: 250-850-2141**

**In the Comox Valley**, children, youth and adults should attend the emergency room at St. Joseph's Hospital at 2137 Comox Avenue, Comox. Phone: **250-850-2647** (Crisis Nurse, Emergency Department) or main phone: **250-339-2242**

**Suicide Helpline: 1-800-784-2433**

Many workplaces also offer counselling services through benefit programs like an Employee Assistance Program (EAP) and through extended health coverage. If you're unsure if this applies to you, speak to your employer.

Private counsellors in your area can be found through local directories, and also through the B.C. Association of Clinical Counsellors' online directory: <http://bc-counsellors.org/>

## Some Online Resources For Adult Mental Health Information And Support:

**Anxiety BC** - Increases awareness about anxiety disorders, providing education and increasing access to evidence-based resources and treatments. For information about anxiety disorders and resources for self-help, go to [www.anxietybc.com](http://www.anxietybc.com)

**Campbell River and North Island Schizophrenia Society** - Provides a reason to hope and the means to cope to families which include persons with a serious mental illness, go to [www.bcass.org](http://www.bcass.org)

**Canadian Mental Health Association (CMHA)** – Facilitates access to the resources people require to maintain and improve mental health and community integration, build resilience and to support recovery from mental illness. For more information, visit [www.cmha.bc.ca](http://www.cmha.bc.ca)

**Here to Help** – Working to help people better prevent and manage mental health and substance use problems and live a healthier life. Visit [www.heretohelp.bc.ca](http://www.heretohelp.bc.ca) for mental health resources.

**Mood Disorders Association of BC** - Provides support, education and hope of recovery for those living with a mood disorder or other mental illness. For many resources and information on how to obtain support, go to [www.mdabc.net](http://www.mdabc.net) This section lists local and provincial services and resources for First Nations and Aboriginal families in the Campbell River and Comox Valley areas. Some of these services are duplicated in the Campbell River and Comox Valley sections of this guide.



## First Nations & Aboriginal People's Resources

This section lists local and provincial services and resources for First Nations and Aboriginal families in the Campbell River and Comox Valley areas. Some of these services are duplicated in the Campbell River and Comox Valley sections of this guide.

**Aboriginal Supported Child Development Program (ASCD)** - ASCD is designed to specifically meet the needs of children with special needs. More info

- › **Phone: 250-286-3430 ext. 132**
- › **Toll-free: 1-877-777-8222**
- › **Web Site: [www.lfls.ca/programs/0-6-programs/supported-child-development](http://www.lfls.ca/programs/0-6-programs/supported-child-development)**

**Child and Youth Mental Health** - Aboriginal Child/Youth Program - This service provides assessment and treatment of children and youth from 0 to 19 years of age. Treatment focuses on providing individual treatment for the youth as well as on family support. Outreach counselling is available to provide mental health services in the home, school or community. This service supports the child, youth, caregiver and community in addressing significant emotional and/or behavioural difficulties that may be severely affecting the overall functioning of the child or youth and family.

Aboriginal CYMH provides services to people from several reserves in Campbell River and the islands, the Comox Valley, as well as the Métis community and urban aboriginal youth living in the region.

- › **Aboriginal CYMH - Campbell River: 250-830-6500**
- › **Aboriginal CYMH - Comox Valley: 250-334-5820**

**Aboriginal Health Program (Campbell River & Comox Valley – Island Health)** – Working together with First Nations communities to maintain and improve the health of Aboriginal people living on Vancouver Island and surrounding areas. Provides Aboriginal Liaison Nurses who can advocate on your behalf and help you with accessing non-insured health benefits; accessing All Nations' Healing Room in the Patient Care Centre; Discharge planning

and communication with community contacts; hardship parking pass; referrals to community services; referral to Pastoral Care; support for families during hospital stays; assistance in understanding health care issues.

- › **Campbell River: 250-850-2602**
- › **Comox Valley: 250-890-3810 extension 61044**
- › **Website: [www.viha.ca/aboriginal\\_health/](http://www.viha.ca/aboriginal_health/)**

**Aboriginal People Crisis Line: 1-800-588-8717**

**Native Youth Crisis Hotline: 1-877-209-1266**

**Kwakiutl District Council (KDC) Health** - Provides preventative and health promotion services for member nations on-reserve residents including Mental Health & Addictions Programs for First Nations and an FASD Program. The focus of these prevention services vary from site to site due to diverse community needs. Some primary prevention focuses include: suicide, drugs & alcohol, trauma, grief & loss, mental health, stress, anxiety, depression and parenting/attachment.

- › **Contact: 250-286-9766 (Campbell River)**
- › **Contact: 250-339-6591 (Comox Valley)**
- › **Web site: [www.kdchealth.com](http://www.kdchealth.com)**

**Laichwiltach Family Life Society** - Empowering First Nations Youth in Unity: drug and alcohol counselling/education; family therapy; counselling for youth 13-25 years of age of Native Ancestry; Addictions Recovery Program. Includes support group meetings.

- › **Campbell River: 250-286-3430**
- › **Toll-Free: 1-877-777-8222**

**Wachiay Friendship Centre** - Provides an Aboriginal Employment Unit, FAS/FAE Information and Prevention, Youth Group, Homelessness Prevention. Also offers referrals and other assistance to persons in crisis and needing advocacy. There are many programs at Wachiay, including those listed below.

- › **Contact for all programs: 250-338-7793**
- › **Website: [www.wachiay.org](http://www.wachiay.org)**

- **Helping Hands** – (no age or gender restrictions, one time emergency service) To meet the emergent needs of community members, this program provides one-time emergency support. This program has provided such things as medical supplies, baby car seats, food and hydro
- **Raven Back Youth Drop-in Centre** – Daryle Mills, Program Coordinator (age restrictions 12-24 years) Provides a safe, youth friendly, culturally sensitive environment for youth to gather, share ideas, participate in activities and workshops, benefit from peer support and receive mentoring from the UMAYC coordinator, youth assistant, elders and community members
- **Wachiay Warriors Hockey Program** (age restricted 6-18 years, must be aboriginal) 20 Aboriginal youth in the Comox Valley can apply to this program for equipment and support for league fees to participate in hockey. The equipment was donated to the Friendship Centre by the NHL Players Association 4 years ago and we have been delivering this program since then. Program Director coordinates the registration, hockey equipment and fundraising activities
- **Fetal Alcohol Spectrum Disorders (FASD)** Program for all parents, caregivers and service providers of all children and youth 0-18 years. Provides advocacy and support for families of youth and children with confirmed or suspected FASD.

**Aboriginal Education - The Campbell River School District** is committed to ensuring that Aboriginal students receive a quality education; one that prepares them to lead successful, productive and healthy lives while enhancing their Aboriginal identity through language and culture programs. The district's Aboriginal Education Department is located in Robron Centre at 740 Robron Road.

› For more information on Aboriginal Education, call 250-923-4902.

**Aboriginal Education – The Comox Valley School District** offers the Nala'atsi Program which assists students to meet secondary school completion requirements through an individualized program of studies, or to facilitate re-entry into the mainstream secondary system. Assistance may also be provided to

recent graduates requiring upgrading for entry into post-secondary institutions and programs. This is a ten month program offering group and individual instruction from 9:00 am to 3:00 pm Monday to Thursday at the Aboriginal Learning Centre. This program is tailored for each student and focuses on completion of core academic subjects. Planning, work experience opportunities and counselling are available. There is a limited selection of electives available including cooking, art and physical education.

› **For more information on Aboriginal Education, call 250-331-4040**

“One cannot consider mental wellness without considering the connectedness to all aspects of the mental, physical, emotional, and spiritual. This consideration should not be just centred on the individual but on the family and to the community as a whole.”  
*(A Path Forward: BC First Nations and Aboriginal People's Mental Wellness and Substance Use-10 Year Plan, 2013)*

**BC First Nations and Aboriginal People's Mental Wellness and Substance Use - Ten Year Plan** (developed by First Nations Health Authority, the British Columbia Ministry of Health and Health Canada) :

[http://www.health.gov.bc.ca/library/publications/year/2013/First\\_Nations\\_Aboriginal\\_MWSU\\_plan\\_final.pdf](http://www.health.gov.bc.ca/library/publications/year/2013/First_Nations_Aboriginal_MWSU_plan_final.pdf)

**Here to Help** ([www.heretohelp.bc.ca](http://www.heretohelp.bc.ca)) is a Canadian website that offers many mental health and substance abuse resources and articles relating to the Aboriginal culture, including Canada's Indian Residential School System: Historical trauma and the Aboriginal Healing Foundation written by Wayne K. Spear: [www.heretohelp.bc.ca/visions/aboriginal-people-vol5/canadas-indian-residential-school-system](http://www.heretohelp.bc.ca/visions/aboriginal-people-vol5/canadas-indian-residential-school-system)

**Kelty Mental Health** offers many mental health resources for all families, including recordings from their Pinwheel Education Series that pertain specifically to mental health in Aboriginal families: [www.keltymentalhealth.ca](http://www.keltymentalhealth.ca)

**Common Experience Payment (CEP) Response Centre** - CEP applicants may call the CEP Response Centre for general inquiries, and for assistance regarding their CEP application. This call centre will also answer specific inquiries about the status of an application for reconsideration.

› Call: 1-866-565-4526

**Independent Assessment Process (IAP) Info Line** - The IAP Info Line is able to respond to a broad range of questions related to the IAP as well as provide claimants and counsel with status updates in regards to specific claims.

› Call: 1-877-635-2648

**Indian Residential School Crisis Line** - A National Indian Residential School Crisis Line has been set up to provide support for former Residential School students. You can access emotional and crisis referral services by calling the 24-Hour National Crisis Line:

› Call: 1-866-925-4419

**Indian Residential School Support (Health Canada)** - Many First Nations are eligible for extensive mental health support under Health Canada for Residential School effects, settlement and for Secondary Residential school effects, (i.e. if a person's parent attended a Residential school). Health Canada has counsellors throughout the province and often pays for transportation to appointments.

› Call: 1-800-317-7878

**Indian Residential Schools Settlement Agreement Call Centres "Common Experience Payment" (CEP)** - CEP applicants may call for general inquiries, and for assistance in the completion of applications. This call centre will also answer specific inquiries about the status of an application.

› Call: 1-866-699-1742

**Truth and Reconciliation Commission of Canada (TRC)** - When someone calls this 24 hour crisis line, a very friendly person will assist you. Counsellors are available who are First Nations - both male and female counsellors are available to assist people.

› Truth and Reconciliation Commission of Canada website: [www.trc.ca](http://www.trc.ca)

› Contact: 1-866-925-4419

› General Inquiries: 1-888-872-5554 or [info@trc.ca](mailto:info@trc.ca)

**Aboriginal Affairs and Northern Development Canada (AANDC)** - (formerly INAC) National Allegations and Complaints Enquiries

- › Contact: 1-800-567-9604
- › E-mail: CNAP-NACC@ainc-inac.gc.ca

**Alternative Dispute Resolution (ADR)** - Provides callers with information about the ADR, Litigation, and the National Resolution Framework.

- › Contact: 1-877-635-2648 (Help Desk)

**Canadian Red Cross (CRC) Equipment Loan Programs** - The CRC offers loans of health equipment for short term use (3 months), typically during recovery from injury or surgery to clients who wish to maintain their independence at home. All CRC equipment must be referred by a health care professional (doctor, nurse, occupational therapist or physiotherapist). A second loan program offers loans on more advanced equipment.

- › Please call for more information: 250-382-2043

**First Nations Health Council (FNHC)**

- › Contact: 1-866-913-0033

**First Nations Inuit Health Branch (FNIHB)**

- › Contact: 1-800-317-7878

**Inter-Tribal Health Authority (ITHA)**

- › Contact: 1-877-777-4842

**Gamblers Anonymous**

- › Contact: 1-888-795-6111

**Nuu-Chah-Nulth Community Health & Human Services**

- › Contact: 1-888-407-4888

**Wheels for Wellness**

- › Contact: 250-338-0196

“To live in wellness means striving to be in balance, within self (Body, Mind, Spirit and Emotion), with others (Family & Community), with the Spirit World and with the land (nature). If there is an imbalance in any of these areas there is stress on our overall system.

In time this stress causes illness and it can be physical illness, mental/emotional illness (such as depression), or spiritual illness.”

*(Path Forward; Anonymous Quote. Data Source: Input Request Survey, MW & SU Tripartite Strategy Council, 2012.*

## Provincial Resources

### Alcohol & Drug Information & Referral Service

- › **Contact:** 1-800-663-1441 [www.vcn.bc.ca](http://www.vcn.bc.ca)
- › **Website:** [www.health.gov.bc.ca/navigation/1-800.html](http://www.health.gov.bc.ca/navigation/1-800.html)

**Anxiety BC** - Increases awareness about anxiety disorders, providing education and increasing access to evidence-based resources and treatments. For information about anxiety disorders and resources for self-help, go to [www.anxietybc.com](http://www.anxietybc.com)

**BC Children’s Hospital Child and Youth Mental Health Programs** – BC Children’s Hospital provides mental health assessment and treatment for British Columbia and Yukon children, youth and their families. Both inpatient and outpatient clinical services are available. For some children with severe mental health problems, a hospital stay may be necessary. Children are admitted to the hospital through a referral from a doctor or mental health team. Generally, there is a wait list of several months. The average length of stay is three to four weeks, but this will depend on the needs of your child.

More information about BC Children’s Hospital can be found at <http://www.bccchildrens.ca/Services/ChildYouthMentalHlth/default.htm>

The program compliments community-based mental health centers by providing specialized consultation, outreach and education services. Sunny Hill Health Centre provides specialized services to children with disabilities from birth to age 19. Below are the programs and services offered at BC Children’s Hospital and the Sunny Hill Centre for Children:

- **Adolescent Psychiatry Inpatient Unit (P2):** Inpatient assessment and treatment for youth (12 and over) with serious psychiatric symptoms.
- **Attention Deficit Hyperactivity Disorder Program:** Outpatient assessment and consultation for children, youth and adults with all forms of ADHD.

- **Autism Spectrum Disorders (Sunny Hill Health Centre):** Assessment, diagnosis, education and research for children and youth with autism.
- **Child and Adolescent Psychiatric Emergency Unit (CAPE):** Inpatient crisis intervention unit for children and youth to age 16 years.
- **Child Psychiatry Inpatient Unit (P1):** Inpatient assessment and treatment for children under 12 years of age with complex psychiatric problems.
- **Child Psychiatry Teaching & Consultation Clinic:** Affiliated with the University of BC Faculty of Medicine, providing outpatient psychiatric assessments for children aged 6 to 17 years old.
- **Eating Disorders Program:** A range of outpatient, day treatment and inpatient programs for children and youth with all types of eating disorders.
- **Infant Psychiatry Clinic:** Outpatient assessment and short-term treatment for young children, ages 5 years and under.
- **Mood and Anxiety Disorders Clinic:** Outpatient consultation for children and youth (ages 6 to 19 years) with a mood and/or anxiety disorder.
- **Neuropsychiatry Clinic:** Diagnostic assessments for children and youth (up to age 19 years) with neurodevelopmental conditions in combination with behavioural problems.
- **Urgent Assessment Clinic:** Prompt assessments for children and youth (up to age 16 years) with acute psychiatric symptoms.
- **Youth Substance Use Disorder Clinic:** Outpatient consultations for youth (ages 12-24 years) with substance use disorders, and conditions involving both substance abuse and mental disorders.

## BC Review Board

- › **Contact:** 1-877-305-2277
- › **Website:** [www.bcrb.bc.ca](http://www.bcrb.bc.ca)



### **BC Poison Control**

- › **Contact:** 1-800-567-8911
- › **Website:** <http://dpic.org/>

### **BC Nurses Line**

- › **Contact:** 1-866-215-4700 or 811
- › **Website:** [www.healthlinkbc.ca/](http://www.healthlinkbc.ca/)

**BC Schizophrenia Society** - provides a reason to hope and the means to cope to families which include persons with a serious mental illness, go to [www.bcscs.org](http://www.bcscs.org)

**Canadian Mental Health Association (CMHA)** – facilitates access to the resources people require to maintain and improve mental health and community integration, build resilience and support recovery from mental illness. For more information, visit [www.cmha.bc.ca](http://www.cmha.bc.ca)

**CarBC (Centre for Addictions Research of BC, University of Victoria)** – dedicated to the study of substance use and addiction in support of community-wide efforts to promote health and reduce harm.

- › [www.carbc.ca](http://www.carbc.ca)

### **Crisis Intervention & Suicide Prevention Centre of BC**

- › **Contact:** 1-800-661-3311
- › **Website:** [www.youthinBC.com](http://www.youthinBC.com)

### **Dial-A-Dietician**

- › **Contact:** 1-800-667-3438 or 811
- › **Website:** [www.healthlinkbc.ca/healthyeating/](http://www.healthlinkbc.ca/healthyeating/)

### **Enquiry BC (to contact your local MLA)**

- › **Contact:** 1-800-663-7867
- › **Website:** <http://www.leg.bc.ca/mla/3-1-1.htm>

**The F.O.R.C.E. (Families Organized for Recognition and Care Equality) Society for Kids' Mental Health** – Providing the “lived experience”, the F.O.R.C.E. supports and empower families and works collaboratively with professionals and systems in understanding and meeting the mental health needs of families.

› Visit [www.forcesociety.com](http://www.forcesociety.com)

**F.R.I.E.N.D.S. For Life** - Anxiety prevention and resiliency program for children designed to help them develop skills to effectively cope with difficult situations and worries. F.R.I.E.N.D.S. is currently offered in Grades 4, 5 and 7. FUN F.R.I.E.N.D.S. is offered in Kindergarten and Grade 1 classrooms. In the classroom, teachers guide students through a 12 week series of activities. For more information about the F.R.I.E.N.D.S. program in schools, please contact your child's school or call: 250-387-2829 or email: [mcf.cymhfriends@gov.bc.ca](mailto:mcf.cymhfriends@gov.bc.ca)

For information about the F.R.I.E.N.D.S. online parent program

- › phone 1-855-887-8004
- › email [info@friendsparentprogram.com](mailto:info@friendsparentprogram.com)
- › Website: [www.friendsparentprogram.com](http://www.friendsparentprogram.com)

**Here to Help** – working to help people better prevent and manage mental health and substance use problems and live a healthier life. Visit [www.heretohelp.bc.ca](http://www.heretohelp.bc.ca) for mental health resources.

**Kelty Mental Health Resource Centre** – A provincial resource centre that provides mental health and substance use information, resources, and peer support from FORCE Parents in Residence and Youth in Residence to children, youth and their families from across BC. They also provide peer support to people of all ages with eating disorders. All of our services are free of charge, and you can reach us over the phone, in person, or through email.

- › Toll Free: 1-800-665-1822
- › email: [keltycentre@bcmhs.bc.ca](mailto:keltycentre@bcmhs.bc.ca)
- › [www.keltymentalhealth.ca](http://www.keltymentalhealth.ca)

**Kids Help Phone** -

- › Contact: 1-800-668-6868
- › Website: <http://www.kidshelpphone.ca/teens/home/splash.aspx>

**MindCheck** – a website to assist young people to identify and understand mental distress they may be experiencing and to link them to sources of help that will enable them to learn skills and strategies to manage these problems.

- › Website: [www.mindcheck.ca](http://www.mindcheck.ca)

**Mood Disorders Association** - provides support, education and hope of recovery for those living with a mood disorder or other mental illness. For many resources and information on how to obtain support, go to [www.mdabc.net](http://www.mdabc.net)

### Problem Gambling Information & Referral Service

- › Contact: 1-888-765-6111
- › Website: [www.health.gov.bc.ca/mhd/infoline.html#Gambling](http://www.health.gov.bc.ca/mhd/infoline.html#Gambling)

### Representative for Children & Youth

- › Contact: 1-800-476-3933
- › Website: [www.mcf.gov.bc.ca/complaints/](http://www.mcf.gov.bc.ca/complaints/)

**Travel Assistance Program (TAP)** - The Travel Assistance Program (TAP) may assist you with travel costs. It helps alleviate some of the transportation costs for eligible B.C. residents who must travel within the province for non-emergency medical specialist services not available in their own community. To obtain a TAP form contact your family doctor, nurse practitioner, pediatrician or Island Health. For more information:

- › [www2.gov.bc.ca/gov/content/health/accessing-health-care/tap-bc/travel-assistance-program-tap-bc](http://www2.gov.bc.ca/gov/content/health/accessing-health-care/tap-bc/travel-assistance-program-tap-bc)

### Vancouver Island Crisis Line 24 Hour Line:

- › Contact: 1-888-494-3888
- › Website: [www.vicrisis.ca/](http://www.vicrisis.ca/)

### Victim LINK Information Service

- › Contact: 1-800-563-0808
- › Website: [www.victimlinkbc.ca/](http://www.victimlinkbc.ca/)





## Where To Go For Legal Advice

**Community Legal Assistance Society (CLAS)** - Litigates test cases and seeks reform laws in all areas of law relating to economically, socially, physically, and mentally disadvantaged.

- › Phone: 1-888-685-6222
- › Website: [www.clasbc.net/](http://www.clasbc.net/)

**Mental Health Law Program (part of CLAS)** - Provides free legal representation of patients at review panels under the Mental Health Act and Review Boards under the Criminal Code.

- › Phone: 1-888-685-6222
- › Website: [http://www.clasbc.net/mental\\_health\\_law\\_program.php](http://www.clasbc.net/mental_health_law_program.php)

**Legal Aid** - This Legal Services Society will pay for a lawyer to represent you in court, if you have a legal problem covered by their legal aid guidelines; your income and the value of your property is below a certain limit, you have no other way of getting legal help, and you can pay a contribution to the Legal Services Society.

- › Phone: 1-866-577-2525
- › Website: [www.lss.bc.ca/](http://www.lss.bc.ca/)

**Legal Services Society's Law Line** - Provides general information, education, and referral services (Note: not specific to mental health law issues; line is staffed by librarians, not lawyers). Phone: 1-866-577-2525  
Website: [www.lss.bc.ca/legal\\_aid/FamilyLawLINE.php](http://www.lss.bc.ca/legal_aid/FamilyLawLINE.php)

**Dial-a-Law (Canadian Bar Association)** - Library of pre-recorded messages prepared by lawyers to provide practical information on aspects of law.

- › Phone: 1-800-565-5297

**Island J.A.D.E. (Campbell River)** - North Island Justice Advocacy Dignity Empowerment Society - Provides legal support for people on income assistance.

- › Phone: 250-830-1171

## BC Mental Health Act

The mental health act deals with both voluntary and involuntary treatment.

	<b>Voluntary</b>	<b>Involuntary</b>
<b>What is it?</b>	<p>Person admits themselves into a facility by their own free will</p> <p>Voluntary admission is described in the Act under section 20</p>	<p>Person is admitted, not by their free will, into a facility by a doctor, police officer, or court.</p> <p>Involuntary admission is described in the Act under section 22</p> <p>Rights of the individual are outlined in section 34-34.2</p>
<b>Admission Criteria</b>	<p>If a person has been examined by a doctor and has a mental disorder, the director may admit them if asked by the person, or a parent/guardian on their behalf, if they are under 16 years</p> <p>When a person under 16 years is admitted, they must be examined by a doctor once a month for the first 2 months, then within 3 months after the second exam, then within 6 months of the third exam and every 6 months thereafter.</p>	<p>The director may admit a person for up to 48 hours with 1 Medical Certificate (valid for 14 days following date of examination)</p> <p>Once admitted, the second doctor's examination, and certificate must be issued within 48 hours.</p> <p>A police officer may take a person into custody for a doctor's examination if they believe the person may put at risk their own or someone else's safety</p> <p>Anyone may ask a judge to issue a warrant if they feel a person meets the committal criteria.</p> <p>The facility must send notice of detention to a near relative informing of the patient's admission and treatment.</p>

	<b>Voluntary</b>	<b>Involuntary</b>
<b>Discharge</b>	<p>Most discharges are by the doctor's orders. A patient under 16 years must be discharged if the parent/guardian requests it.</p> <p>If a patient under 16 requests discharge without consent from parents, the request will go to a Review Panel hearing.</p>	<p>A request for discharge will go through a Review Panel hearing Obtain application Form 7 for a Review Panel hearing only after second Medical Certificate is completed</p> <p>A person is entitled to representation at the hearing by a lawyer or person of choice</p>
<b>Consent to Treatment</b>	<p>Patients must consent before treatment is administered.</p> <p>The physician must inform the patient of the nature of their condition and the reasons for and consequences of the treatment.</p>	<p>The Act provides for compulsory treatment of all involuntary patients but patients will still be offered a chance to consent to treatment</p> <p>The patient, or someone on their behalf, may ask for a second opinion on diagnosis</p>
<b>Application to court for discharge</b>	See section, Discharge, above	If the patient or their representative do not agree with the order of admission into a facility, then an application may be made to the court to reverse the involuntary committal certificate.
<b>Access to medical certificates</b>	N/A	All patients are allowed access to their Medical Certificates

*Information table provided by the CMHA Kelowna Branch Consumer Development Project; funding provided by the Ministry of Children and Family Development Interior Region*

## Complaints Process

**Child and Youth Mental Health (CYMH)/ Ministry of Children and Family Development (MCFD):** CYMH strives to provide the highest quality of services. In spite of everyone's efforts, problems may still arise. It is important that you feel confident in the knowledge, skill, and interest of those helping your child or youth. It is important to share information about you, your child or youth to help in determining the most appropriate services for your child or youth.

If you find that you do have problems with the people who are on your child or youth's treatment team, talk with them openly and respectfully, and tell them how you are feeling. You may want to consider bringing someone with you to support you. Perhaps you have a partner, spouse, a friend, a relative or a F.O.R.C.E. Parent in Residence that can assist you and help you have your needs understood and met. Sometimes families have been dealing with mental health challenges for so long, and had to share their information with so many people, it can be exhausting.

Complaints are also accepted from the  
**Representative for Children and Youth (RCY).**

**Representative for Children and Youth** supports children, youth and families who need help in dealing with the child-serving system, provides oversight to the Ministry of Children and Family Development and advocates for improvements to the child-serving system. The Representative serves all British Columbians under the age of 19. The Representative does not work for the government. Rather, the Representative for Children and Youth is an Independent Officer of the Legislature and does not report through a provincial ministry.

The **Representative for Children and Youth (RCYBC)** can be contacted at **250-356-6710** or **1-800-476-3933** or emailed at [rcy@rcybc.ca](mailto:rcy@rcybc.ca). For more information about the Representative for Children and Youth and their complaint process, visit their website at [www.rcybc.ca](http://www.rcybc.ca).



If you feel that you are not being heard, you can ask to speak to a coordinator or supervisor who will try to help you resolve problematic situations.

**If you feel you have been treated unfairly**, you can also contact the regional Complaint Resolution Consultant with the Ministry of Children and Family Development who will assist you in ensuring that your concerns are considered. To file a complaint, contact your local MCFD or **Delegated Aboriginal Agency (DAA)** office and ask to speak to a complaints specialist or call toll-free 1-877-387-7027 to be connected with your local ministry office. You can learn more about the complaints and resolution process by visiting [www.mcf.gov.bc.ca/complaints/](http://www.mcf.gov.bc.ca/complaints/)

According to the Ministry, a complaint is accepted if it is about a decision, act or failure to act related to an MCFD service or a delegated service provided by a Delegated Aboriginal Agency (DAA). The Ministry complaints process is guided by the following principles:

- Everyone has the right to be treated with dignity and respect.
- Openness to all traditions, cultures, values and beliefs.
- The rights, best interests and views of the child or youth will guide the process, regardless of who initiated the complaint.
- There will be no negative consequences to anyone, including children, youth and families, as a result of making a complaint.
- The confidentiality and privacy of individuals and families will be respected.
- Everyone, including children, youth and families, has the right to involve an advocate, relative or friend to support them through the process.
- All complaints will be responded to within established time frames. MCFD or DAA staff will work actively to resolve complaints.

**Island Health** - Island Health is committed to providing the highest quality care. If they have not met your expectations, they are committed to working with you to find a reasonable solution. Complaints are best addressed and resolved at the time and place they occur. If you have a complaint, please first speak with the person who provided the service or to the manager of the area.

Should your complaint remain unresolved after discussing the issue directly with the service area manager, you are encouraged to contact their Patient Care Quality Office. For more information, visit <http://www.viha.ca/patientcarequalityoffice/complaint.htm>

## Online Resources

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### Some Helpful Websites:

- › [www.forcesociety.com](http://www.forcesociety.com)
- › [www.anxietybc.com](http://www.anxietybc.com)
- › [www.heretohelp.bc.ca](http://www.heretohelp.bc.ca)
- › [www.mcf.gov.bc.ca/mental\\_health/publications.htm](http://www.mcf.gov.bc.ca/mental_health/publications.htm)
- › [http://www.mcf.gov.bc.ca/mental\\_health/resources.htm](http://www.mcf.gov.bc.ca/mental_health/resources.htm)
- › [www.viha.ca/mhas/resources/default.htm#infoline](http://www.viha.ca/mhas/resources/default.htm#infoline)
- › [www.familynavigator.ca](http://www.familynavigator.ca) (Canadian Forces families)

### ADHD:

- › [www.aacap.org](http://www.aacap.org)
- › [www.caddac.ca](http://www.caddac.ca)
- › [www.chadd.org](http://www.chadd.org)

### Anxiety:

- › [www.anxietybc.com](http://www.anxietybc.com)
- › <http://www.caringforkids.cps.ca/handouts/behaviour-index>
- › <http://www.friendsparentprogram.com/>

### Bipolar:

- › [www.bipolarchild.com](http://www.bipolarchild.com)
- › <http://www.thebalancedmind.org/>
- › <http://www.thebalancedmind.org/flipswitch>

### Depression:

- › <http://www.ok2bblue.com/>
- › [www.mcf.gov.bc.ca/mental\\_health/teen.htm](http://www.mcf.gov.bc.ca/mental_health/teen.htm)

## Dual Diagnosis – Developmental Disabilities and Mental Disorders:

- › [www.familysupportbc.com](http://www.familysupportbc.com)
- › [www.thenadd.org](http://www.thenadd.org)
- › [www.communityoptions.bc.ca](http://www.communityoptions.bc.ca)

## Eating Disorder

- › <http://jessieslegacy.com/www.anred.com>
- › [www.nlm.nih.gov/medlineplus/eatingdisorders.html](http://www.nlm.nih.gov/medlineplus/eatingdisorders.html)
- › [www.lookingglassbc.com](http://www.lookingglassbc.com)

## Psychosis:

- › [www.psychosissucks.ca](http://www.psychosissucks.ca)
- › [www.hopevancouver.com](http://www.hopevancouver.com)

## Substance Abuse and Concurrent Disorders:

**Recognizing Resilience:** A Workbook for Parents and Caregivers of Teens Involved with Substances. This is a workbook for parents and caregivers who love and worry about a teenager who may be experimenting with or regularly engaged in relationship with alcohol or other drugs.

- › <http://www.viha.ca/NR/rdonlyres/2CC6E168-D562-440B-B906-0DFEB72CE470/0/RecognizingResilienceApril2016.pdf>

**RLif:** Developed by the John Howard Society of North Island, the program is designed to help people learn about the building blocks of resilience. The website has a variety of free tools and resources, including videos, interactive web units, posters, PowerPoint presentations and a curriculum all available to download for not for profit use.

- › <http://rlifeproject.ca/>

**iMinds:** A collection of health education resources that support youth's drug literacy and the knowledge and skills they need to survive and thrive in a world where caffeine, tobacco, alcohol and other drug use is common.

- › <http://www.uvic.ca/research/centres/carbc/publications/helping-schools/iminds/index.php>

**Keeping Youth Connected, Healthy and Learning:** Effective Responses to Substance Use in School Settings

- › <http://www.viha.ca/NR/rdonlyres/D37BC183-1B0E-4F0B-B949-5A8870A6049F/0/keepingyouthconnected.pdf>

**How to Talk to Your Kids About Drugs:** A discussion with Dan Reist with the Centre for Addictions Research BC

- › <http://www.cbc.ca/news/canada/british-columbia/fentanyl-overdoses-how-to-talk-to-your-kids-about-drugs-1.3189206>

**Circle of Courage:** Based on the Medicine Wheel, the model integrates Aboriginal philosophies of child rearing, the heritage of education and youth work, and contemporary resilience research.

- › [http://www.edu.gov.mb.ca/k12/cur/cardev/gr9\\_found/courage\\_poster.pdf](http://www.edu.gov.mb.ca/k12/cur/cardev/gr9_found/courage_poster.pdf) and <http://blogs.ubc.ca/afclc6/2011/04/29/reading-circle-of-courage-framework/>

**Substance Use Disorders:** A presentation on the topic of youth substance use by psychiatrist Dr. Shimi Kang

- › <http://mediasite.phsa.ca/Mediasite/Play/dec65aa5b0b244e4b914ab0686180eb01d?catalog=3ad3fbf8-18b9-469a-bac0-3288faaa4477>

**Provincial Youth Concurrent Disorders Program**

- › <http://www.bcmhsus.ca/programs-and-services/provincial-youth-concurrent-disorders-program/about-concurrent-disorders>

## Other Resources for Families:

**The Explosive Child:** A New Approach for Understanding and Parenting Easily Frustrated, “Chronically Inflexible” Children written by Dr. Ross W. Greene

**Treating Explosive Kids:** The Collaborative Problem Solving Approach written by Ross W. Greene and J. Stuart Ablon

› Visit website: <http://www.livesinthebalance.org/>

**The F.O.R.C.E. Society for Kids’ Mental Health** has created a series of tip sheets on what to expect from professionals working with your child including,

### What to Expect From:

- Your Family Doctor
- Child and Youth Mental Health Services
- Your Child’s School
- These tips sheets are available at [www.forcesociety.com](http://www.forcesociety.com)

**Child Disability Benefit (CDB)** - The Child Disability Benefit (CDB) is a tax-free benefit for families who care for a child under age 18 with a severe and prolonged impairment in mental or physical functions. To be eligible a child must have a severe and prolonged impairment in physical or mental functions. An impairment is prolonged if it has lasted, or is expected to last, for a continuous period of at least 12 months. A qualified practitioner must certify on Form T2201, Disability Tax Credit Certificate, that the child’s impairment meets certain conditions.

For more information, please visit <http://www.cra-arc.gc.ca/E/pbg/tf/t2201/> or contact your local tax services office.

## Glossary of Terms Used in This Guide:

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### *Aboriginal*

Aboriginal is a collective term used to describe the three constitutionally recognized Indigenous populations in Canada – “Indians” (First Nations), Métis and Inuit. While the term Aboriginal is commonly accepted, identifying each of these populations specifically by name is preferable where appropriate. The Plan is inclusive of all First Nations regardless of status or place of residency and all Aboriginal people regardless of their Nation affiliation. See also “Indigenous.”

### *Addiction*

Addiction is defined as a harmful behavioural preoccupation, generally accompanied by a loss of control and a continuation of, or craving for, the behaviour despite negative consequences. Addictions may develop around a range of behaviours, including chronic dependent substance use. Addiction is a complex bio-psychosocial-spiritual phenomenon, which has multiple contributing causal factors that can start early in life and be compounded over the life course. See also “Substance use,” “Problematic substance use,” and “Process addiction.”

### *BCCPAC*

Represents a membership of the Parent Advisory Councils (PAC) and District Parent Advisory Councils (DPAC) of the BC school districts.

### *Blended Learning*

A combination of distributed learning and face-to-face learning (i.e. classroom learning)

### *Child and Youth Mental Health (CYMH)*

A sector of the Ministry of Children and Family Development (MCFD). Child and Youth Mental Health (CYMH) provides treatment and support to children and youth under 19 years who are affected by serious mental health issues.

## *Community*

Community refers to a collectivity with shared identity or interests that has the capacity to act or express itself as a collective. A community may include members from multiple cultural groups. A community may be territorial, organizational or a community of interest. “Territorial communities” have governing bodies exercising local or regional jurisdiction (e.g. members of First Nations, resident on reserve lands). “Organizational communities” have explicit mandates and formal leadership (e.g. a regional Inuit association or a friendship centre serving an urban Aboriginal community). In both territorial and organizational communities, membership is defined and the community has designated leaders. “Communities of interest” may be formed by individuals or organizations who come together for a common purpose or undertaking, such as a commitment to conserving a First Nations language. Communities of interest are informal communities whose boundaries and leadership may be fluid and less well-defined. They may exist temporarily or over the long term, within or outside of territorial or organizational communities. An individual may belong to multiple communities, both Aboriginal and non-Aboriginal (e.g. as a member of a local Métis community, a graduate students’ society and a coalition in support of Aboriginal rights). An individual may acknowledge being of First Nations, Inuit or Métis descent, but not identify with any particular community.

## *Concurrent Disorder*

Substance use disorders and substance dependence are mental health challenges. Where substance use disorders and mental health challenges occur together, they are called concurrent disorders.

## *Counsellor*

Counsellors may have a range of backgrounds and may have master’s or doctoral level degrees from counselling programs. However, individuals may otherwise refer to themselves as a “therapist” or “counsellor”, but may or may not have training in the assessment or treatment of mental health issues. Titles such as “Registered Clinical Counsellor” do not mean that individuals are formally regulated or specifically trained. Counsellors are not regulated under the Health Professions Act. (B.C. Psychological Association)



### *Cultural Competence*

Cultural competence refers to a specific set of values, attitudes, knowledge and skills that sensitize and improve sharing of information and assistance between people of different cultural orientations. Cultural competence enables health and human service providers to be respectful and effective in their interactions with people from different cultural backgrounds, including First Nations and Aboriginal people. In an Indigenous context, cultural competence is informed by the history of colonization, Indian residential schools, Indian Hospitals, the Indian Act, and the ongoing legacy of colonial interference and racism. Becoming culturally competent is a journey, not a destination. It requires improving knowledge about Indigenous issues, engaging in a process of critical reflection, enhancing one's self awareness, and de-colonizing the skills and actions that will lead to positive change. See also "Aboriginal" and "Cultural safety."

### *Cultural Safety*

Cultural safety refers to what is felt or experienced by a patient when a health care provider communicates with the patient in a respectful and inclusive way, empowers the patient in decision-making and builds a health care relationship where the patient and provider work together as a team to ensure maximum effectiveness of care. Culturally safe encounters require that health care providers treat patients with the understanding that not all individuals in a group act the same way or have the same beliefs. See also "Cultural competence."

### *Distributed Learning*

An alternative type of education where students are enrolled in a public or independent school distributed learning program where the majority of the learning takes place at a distance.

### *Family Violence and/or Domestic Violence*

Family violence refers to a broad range of controlling behaviours, commonly of a physical, sexual and/or psychological nature, which typically involve fear, intimidation and emotional deprivation. It occurs within a variety of close interpersonal relationships, such as between partners, parents and children, siblings, and in other relationships where significant others are not part of

the physical household, but are part of the family and/or are fulfilling the function of family. The related term “domestic violence” refers to a pattern of intentionally coercive and violent behaviour toward an individual with whom there is or has been an intimate relationship. These behaviours can be used to establish control of an individual and can include physical and sexual abuse, psychological abuse with verbal intimidation, progressive social isolation, deprivation and economic control.

### *The F.O.R.C.E. (Families Organized for Recognition and Care Equality) Society for Kids’ Mental Health*

Providing the “lived experience”, the F.O.R.C.E. supports and empowers families and works collaboratively with professionals and systems in understanding and meeting the mental health needs of families. Visit [www.forcesociety.com](http://www.forcesociety.com) to learn more about the F.O.R.C.E.

### *Harm Reduction*

Harm reduction refers to policies, programs and practices that aim to reduce the adverse health, social, and economic consequences of psychoactive substance use for people unable or unwilling to stop using immediately. Harm reduction is a pragmatic response that focuses on keeping people immediately safe and minimizing death, disease, and injury from high-risk behaviour. It involves a range of strategies and services to enhance the knowledge, skills, resources and supports for individuals, families and communities to be safer and healthier. See also “Low-Threshold.”

### *Health and Human Services*

Health and Human Services refers to programs or services in the sectors of health care, child and family services, teaching, policing and justice/corrections. These services are provided by a range of professional occupations, including, but not limited to: doctors, nurses, pharmacists, paramedics, occupational therapists, social workers, home support workers, day care workers, counsellors, police officers, parole officers, corrections officers, teachers and early childhood educators.

### *Health Care Providers*

Health Care Providers is a term that refers to a large group of health professionals who provide direct service or act as members of multi-disciplinary teams in hospitals and communities who are involved in the delivery of health care for the identification, evaluation and prevention and treatment of diseases and disorders; dietary and nutrition services; rehabilitation and health systems management, among others. Typically Health Care Providers operate within a professional scope of practice where credentials are established through diploma programs, certificate programs and continuing education.

### *Health Promotion*

Health promotion is defined by the World Health Organization as “the process of enabling people to increase control over their health and its determinants, and thereby to improve their health.” Health promotion activities encourage individuals, families and communities to make healthy lifestyle choices and to take a more active role in their health. According to the Ottawa Charter for Health Promotion, health promotion requires: building healthy public policy, creating supportive environments, strengthening community action, developing personal skills and reorienting health services. Health promotion strategies encompass social marketing, self-help, advocacy, public policy, legislation, community development and health education.

### *Holistic*

Holistic refers to the concept that promoting, protecting or restoring health requires understanding the individual as an integrated system - including their physical, mental, emotional and spiritual aspects - which cannot be reduced to one or more separate parts.

### *Indigenous*

Indigenous refers to peoples or ethnic groups with historical ties to groups that existed in a territory prior to colonization or formation of a nation state. Typically, Indigenous peoples have preserved a degree of cultural and political separation from the mainstream culture and political system of the nation state within the border of which the Indigenous group is located. The political sense of the term defines these groups as particularly vulnerable to exploitation and oppression by nation states. As a result, a special set of

political rights in accordance with international laws have been set forth by international organizations such as the United Nations, the International Labour Organization and the World Bank. The United Nations have issued a Declaration on the Rights of Indigenous Peoples to protect the collective rights of Indigenous peoples to their culture, identity, language, employment, health, education and natural resources. See also “Aboriginal.”

### *Inequity*

Inequity in the health field refers to differences in rates of illness, disease, health outcomes or access to health care across, for example, racial, ethnic, sexual orientation, socioeconomic groups (includes all grounds protected by the BC Human Rights Code).

### *Individualized Education Plan (IEP)*

IEP is an individual education plan designed for a student and includes one or more of the following:

- learning outcomes for a course, subject and grade that are different from, or in addition to, the expected learning outcomes for a course, subject and grade set out in the applicable educational program guide for that course, subject and grade, as the case may be
- a list of support services required for the student to achieve the learning outcomes established for the student
- a list of the adapted materials, instructional or assessment methods required by the student to meet the learning outcomes established for the student in the IEP

### *Integrated Care*

Integrated care refers to the co-ordination of personal support networks, including family and community, with components of the health care system, such as case management. Integrated care may include multi-disciplinary teams of supporters and care providers that can facilitate collaboration among various types or levels of services in a way that provides cultural safety and improves health outcomes.

### *Island Health*

Island Health provides health care to people on Vancouver Island, the islands of the Georgia Strait, and the mainland communities between Powell River and Rivers Inlet. Island Health provides services through a network of hospitals, clinics, centres, health units, and residential facilities.

### *Justice Systems*

Justice systems refer to all activities and agencies that intervene to prevent, divert, prosecute or defend, and mete out penalties for offences against the criminal law. The justice system includes police, crown, prosecutors, defence counsel, courts, correction systems, victim services and other agencies providing services for people in violation (or accused of a violation) of the criminal law.

### *Low-threshold*

Low-threshold refers to health or human services that have few or no barriers to access and make minimal demands on patients or clients, particularly when their life or health circumstances present challenges to engaging standard services. Effective services to prevent or reduce health harms from problematic substance use are often low-threshold, as they do not insist on abstinence from substance use as a condition of access.

### *Ministry of Children and Family Development (MCFD)*

The ministry supports healthy child and family development through its commitment to a collaborative professional practice delivered across a range of quality services that strive to maximize the potential of children and youth through achieving meaningful outcomes for children, youth and families related to their needs. Ministry services are available at no cost. Families may access a combination of services delivered through the following service areas:

- Early Years Services
- Services for Children and Youth with Special Needs
- Child and Youth Mental Health Services
- Child Safety
- Family, Youth and Children in Care Services and Adoption Services
- Youth Justice Services

### *Multi-system*

Multi-system in the context of health policy refers to the variety of organization and policy structures that impact the health outcomes of individuals and populations beyond the formal health care service delivery system. For example; public education, child protection, social assistance, justice, and corrections systems all contribute to factors that influence population health, including individual and community vulnerability. A multi-systems approach to mental wellness and substance use will mobilize resources and activities across not only the health system, but also the other systems that influence people's lives.

### *Policies*

Policies refer to principles or rules designed to guide the decisions and actions of individuals or institutions to achieve a desired outcome. Policies may be formal or informal, may be created by government, private sector organizations, communities and other groups, and may have intended and unintended effects.

### *Post-vention*

Post-vention refers to a strategy or approach that is implemented after a death by suicide has occurred, aimed at supporting families, friends, colleagues and others bereaved by suicide.

### *Prevention*

Prevention refers to measures taken to prevent the onset of illness or disease before it occurs, or to slowing its transmission, progression or effects through early detection and appropriate treatment. Prevention in its broadest sense requires addressing social determinants of health which create conditions of vulnerability for individuals or populations. Prevention efforts can also be targeted to specific populations who may be at greater risk of illness or consequent harms.

### *Primary Care*

Primary care involves the widest scope of health care, including all ages of patients, patients of all socioeconomic and geographic origins, patients seeking

to maintain optimal health and patients with all manner of acute and chronic physical, mental and social health issues, including multiple chronic diseases. Continuity is a key characteristic of primary care, as patients usually prefer to consult the same practitioner for routine check-ups and preventative care, health education, and every time they require an initial consultation about a new health problem. Collaboration among providers is a desirable characteristic of primary care.

### *Problematic Substance Use*

Problematic substance use refers to psychoactive substance use that results in, or increases risks for, physical, psychological, economic, social or other problems for individuals, families/friends, communities or society. The most commonly recognized type of problematic substance use is chronic dependent use, or addiction, but other instances or patterns of use can also be problematic. For example, youth substance use at an early age, substance impaired driving, substance use during pregnancy and using a psychoactive medication other than as prescribed by a physician are all types of problematic use. Problematic substance use is not necessarily dependent on the legal status of the substance used, but rather on the amount used, the pattern of use, the context in which it is used and, ultimately, the potential for harm. See also “Addiction” and “Substance Use.”

### *Process Addiction*

Process addiction refers to the compulsive and persistent engagement in an action that causes serious negative consequences to one’s physical, mental, social, and/or economic well-being. Examples of activities that for some people may become process addictions are gambling, video gaming, work, sex, shopping and internet use. See also “Addiction.”

### *Psychiatrist*

A Psychiatrist has a degree in medicine like your family physician, followed by specialized training in the diagnosis and treatment of mental illness, emotional disorders, and behavioural problems. Their fees are covered by the Medical Services Plan, but there can be long waiting lists to be seen on referral. In British Columbia, they are licensed and regulated by the College of Physicians and Surgeons of B.C

### *Psychologist*

A Psychologist has completed a bachelor's degree and then continued in graduate training in psychology (the study of human development, learning, and behaviour), and may have specialized in the assessment, diagnosis, and treatment of mental illness, emotional disorders, and behavioural problems. Although they may have training in the uses of medication to treat mental illness, they do not prescribe medication. Psychologists work to help people understand the nature of difficulties they may be dealing with, develop insight and skills to minimize and manage the impact of problems, and may coordinate with other health service providers, including physicians. Psychologists are also the only professionals specifically trained and qualified in the development, research, and administration of specialized psychological tests used to assess elements of intelligence or achievement, personality characteristics, mental and emotional disorders, and/or the effects of brain injury. Fees for psychologists' services are covered by private payment, extended medical plans, employee assistance programs, or through government agencies or other special programs. Psychologists in British Columbia are licensed and regulated by the College of Psychologists of British Columbia.

### *Representative for Children and Youth*

A Representative for Child and Youth supports children, youth and families who need help in dealing with the child-serving system, provides oversight to the Ministry of Children and Family Development and advocates for improvements to the child-serving system. The Representative serves all British Columbians under the age of 19. The Representative does not work for the government. Rather, the Representative for Children and Youth is an Independent Officer of the Legislature and does not report through a provincial ministry.

### *Red Road*

The "Red Road" is a term for a universal or pan-Aboriginal concept for a balance in mind, body, spirit and emotion. To say that someone follows the "Red Road" means they have a world-view and/or way of knowing that is based on First Nations/Aboriginal spiritual teachings and beliefs.



### *Rehabilitation*

Rehabilitation, or psychosocial rehabilitation, is the process of restoring (and maintaining) community functioning and wellbeing of an individual who has had a mental health and/or substance use problem. Rehabilitation seeks to effect changes in a person's environment and in their ability to deal with their environment, so as to promote wellness or reduce symptoms of illness, and empower them to achieve full recovery or maximum quality of life. It may combine pharmacological treatment, independent living and social skills training, psychological support to clients and their families, housing, vocational rehabilitation, social support and network enhancement, and access to leisure activities.

### *Social Determinants of Health*

Social determinants of health refer to the range of personal, social, economic and environmental factors that contribute to the health status of individuals or populations. These factors include income and social status, education, employment and working conditions, access to appropriate health services, housing and physical environments. They interact in complex ways and their modification can influence health and vulnerability to illness.

### *Standards*

Standards refer to measurable and achievable statements describing the minimum acceptable level of performance against which actual performance can be measured. Standards are mandatory and are intended to reduce unwarranted variability and to attain and maintain quality service delivery.

### *Stigma*

Stigma in the domain of mental wellness and substance use refers to the beliefs and attitudes about people living with mental illness and/or addictions that lead to the negative stereotyping of, and prejudice against, them and their families. These beliefs are often based on ignorance, misunderstanding and misinformation. A related concept, discrimination, refers to the various ways in which people, organizations, and institutions unfairly treat people living with a mental health challenge or substance use problem, often based on stigmatizing beliefs and attitudes. For First Nations and Aboriginal people with a mental health challenge and/or substance use problem, stigma and discrimination is

compounded by the experience of racism, poverty, cultural assimilation and related systemic discrimination.

### *Substance Use*

Substance use refers to the intentional consumption of a psychoactive substance, legal or illegal, in order to modify or alter consciousness. Psychoactive substances include alcohol, caffeinated beverages, tobacco, certain medications, solvents and glues, and a range of controlled (i.e. illegal) substances such as cannabis, cocaine and heroin. The use of psychoactive substances is an almost universal human cultural behaviour and has been engaged in since the beginning of human history. Substance use can occur for a variety of reasons—including medical, scientific, spiritual or religious, social, pleasurable or habitual—and its effects can range from beneficial to severely problematic, depending on the quantity, frequency, method or context of use. See also “Problematic Substance Use” and “Addiction”.

### *Traditional Knowledge*

Traditional knowledge refers to knowledge, information and wisdom that is created, preserved and dispersed in a community. Traditional knowledge is ‘traditional’ not the sense that it belongs to the past, but in the way it is acquired. This information may be rooted in storytelling, ceremonies, traditions, ideologies, medicines, dances, arts and crafts, or a combination of all of these. A Traditional Knowledge Keeper is one who passes information from generation-to-generation. In some respects, everyone in a community or culture holds traditional knowledge because it is collective. Traditional knowledge is determined by a First Nation’s land, environment, region, culture and language. People such as Elders and healers usually share this knowledge with others in the community.

### *Trauma*

Trauma is defined as an experience that overwhelms an individual’s capacity to cope. Trauma can include events experienced early in life - for example, as a result of child abuse, neglect, disrupted attachment or witnessing violence - or later in life, such as violence, accidents, natural disasters, war, sudden unexpected loss and other life events that are out of one’s control. Trauma can be devastating and can interfere with a person’s sense of safety, self and self-

efficacy, as well as the ability to regulate emotions and navigate relationships. Traumatized people may feel terror, shame, helplessness and powerlessness, and may engage in problematic substance use or other unhealthy behaviours as a way to cope. Understanding the roots and effects of trauma is important for health and human service providers to help establish a sense of safety and connection with patients or clients.

### *Treatment*

Treatment refers to a medical or therapeutic intervention by a professional to address an illness. In the context of mental wellness and substance use, treatment refers to a variety of therapeutic approaches to mental illness and/or addiction.

### *Two-Spirit*

Two-Spirit is an English translation of terms in various languages of First Nations and Aboriginal cultures across North America, referring to individuals who embody both the male and female spirit. Two spirit can include both sexual orientation and/or gender identity or expression. Lesbians, gay men, bisexuals, queer, and heterosexual transgender people of Aboriginal, Metis or Inuit descent may refer to themselves as two-spirit. It is often a spiritual identity, recognized in them by others in their community.

### *Vancouver Island Crisis Society*

The Vancouver Island Crisis Society is contracted by the Island Health to provide the Vancouver Island Crisis Line service to the entire island, the islands of the Georgia Strait, and the mainland communities between Powell River and Rivers Inlet. They are a registered non-profit agency whose services include: 24-hour crisis lines (providing crisis intervention, information, and referrals); Suicide Bereavement Support Group meetings; Applied Suicide Intervention Skills Training workshops, training in schools with youth and teachers; and various workshops and customized training addressing suicide prevention, crisis intervention, and communication skills for individuals and agencies throughout our communities.



## Feedback Form

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Orientation to Child, Youth & Family Mental Health and Substance Use Services:  
A Guide for Families in the Campbell River and Comox Valley Area

This guide has been developed to support and empower Campbell River and Comox Valley families by providing them with resources and services about mental health and substance use. We hope this guide will also help create more awareness about mental health and the mental health challenges that affect so many families.

To help provide us with feedback for further revisions of this guide, your suggestions and comments are needed. We thank you for taking the time to provide your input.

**Please provide us with your feedback by email: [theforce@forcesociety.com](mailto:theforce@forcesociety.com)**

**You can also complete this form and mail it to:  
PO Box #91697, West Vancouver, BC, V7V 3P3**

To assist you in providing us with your feedback,  
please consider the following questions:

**Was there anything missing from the guide that you would like to see included?**

**Was any of the information difficult to understand? If yes, please be specific.**

**Was the information laid out and organized in a manner that made it easy to find resources?**





If you believe that your child is in danger  
of harming themselves or others, you should contact

**Vancouver Island Crisis Line: 1-888-494-3888**

or

**call 911**

or

take your child to the nearest hospital emergency room.

**The F.O.R.C.E.**  
SOCIETY FOR KIDS' MENTAL HEALTH



The Institute of Families  
DBA The F.O.R.C.E. in BC  
**INSTITUTE  
OF FAMILIES**  
for Child and Youth Mental Health

