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## Substance Use & Hope

The term “hope” can at times feel false for family members. Those who care for loved ones who struggle with substance use can sometimes be in situations that feel despairing or even hopeless. However hope can mean so many things, including survival, resilience, acceptance, art, creativity, and persistence. This issue focuses on how families, communities, and health providers are able to maintain hope in difficult circumstances. We profile a powerful Indigenous singer/songwriter, a Peer Coordinator on the frontlines of the opioid crisis, and learn from the wisdom of the Parents Forever support group founder. You’ll also learn about the concept of “Reasonable Hope,” meet our new team member Andrea Sierralta, and be impressed with recent advocacy by Vancouver’s Family Advisory Committee. Finally, the last 3 pages features resources and support groups for family members. Enjoy!



Sometimes supporting your loved one requires you to acknowledge that you are not able and/or capable of providing them with what they need.

Please remember that if your loved one is at risk to themselves or others, the best resources are your local Emergency Department, and 911. In Vancouver, for non-emergencies please contact the Access and Assessment Center (AAC).

**AAC Contact Information**

Hours: 7:30 am - 11:00 pm 7 days/week; 365 days/year

Phone: 604-675-3700

Address: 803 West 12th Avenue (at Willow between 12th and 10th)

## About us...

This Newsletter is brought to you by Vancouver Coastal Health's Family Support and Involvement Team. We assist families with resources, education, information, support, and with facilitating the inclusion of family in the care of their loved ones. We also work with patient and family partners to ensure that clients and families are involved in planning and decision making across Vancouver Coastal Health's Mental Health and Substance Use Services. You can find our contact information on the front page.

The *Family Connections Newsletter* is available electronically, direct to your email inbox. If you don't already receive *Family Connections* via email and would like to stay up-to-date about programs and services for families who are supporting a loved one with mental illness and/or substance use, sign up at [www.spotlightonmentalhealth.com](http://www.spotlightonmentalhealth.com)

By going to this website and clicking on the [Family](#) tab you can find our [Community Resource Guide for Families](#), Vancouver Coastal Health's [Family Involvement Policy](#) and much more.

Thanks for reading!

**VCH  
would  
like  
your  
input!**



## Recruiting: PATIENTS & VISITORS

### VCH Patient Experience Project

We want to understand your needs as a patient or visitor, and how to serve your non-medical needs through the CIBC Centre for Patients & Families at VGH.

The Centre has served for the past 10 years as a resource centre and a quiet space off the unit for patients & families.

### Request:

- Complete a 15 minute survey
- Visit [tinyurl.com/VGHCentre](http://tinyurl.com/VGHCentre)

OR  
Scan QR code



- Survey closes July 23, 2021

### For more information

Please email VCH Patient Experience:  
[experience@vch.ca](mailto:experience@vch.ca)



## **Expert Talks**

Join us for Zoom meetings in which experts – from GPs to case managers to families – talk about what makes them passionate about family involvement in mental health and substance use. This is followed by ample time for Q&A.

Offered by the Vancouver Coastal Health Family Support and Involvement Team  
Mental Health and Substance Use Services

On second Wednesdays  
Jul 14, 2021; Sep 8, 2021; Nov 10, 2021; Jan 12, 2022; Mar 9, 2022  
1 ½ hours each, 6:00-7:30pm

### **First Session: A Walk Through A Mental Health Team** **What happens at a mental health team?** **Who works there?**

**Presenter: Monica Thwaites, Team Lead/Case Manager**  
**Northeast Mental Health Team**  
July 14, 2021, 6:00-7:30pm

Space is limited, so sign up early  
with Isabella Mori, Family Support and Involvement Coordinator, Community at  
[Isabella.Mori@vch.ca](mailto:Isabella.Mori@vch.ca)

## A VOICE OF HOPE

Leela Gilday, Juno 2021's Indigenous Artist of the Year

By Tao-Yee Lau



As this newsletter comes out, non-Indigenous peoples are still reeling from the news of the 215 children buried in unmarked graves in Kamloops, B.C. Indigenous peoples, however, have known for generations that their children have been taken away and cultures and economies destroyed. In health care, [In Plain Sight: Addressing Indigenous-specific Racism and Discrimination in B.C. Health Care](#) report was released 2020, detailing the pervasiveness of anti-Indigenous racism in BC's health care system.

Finally, the overdose crisis that has gripped B.C. in recent years and escalated over the COVID-19 pandemic has had disproportionate effects on Indigenous peoples. The increasingly toxic drug supply coupled with the harms of colonialism has led to Indigenous peoples dying from toxic drugs at 5.6 times the rate of other BC residents (First Nations Health Authority, 2021).

Amidst these times, Leela Gilday —passionate singer/songwriter and performer, member of the Dene nation in the Northwest Territories, and multiple Juno winner—recently performed an intimate concert for the clients and staff of VCH's Tertiary Mental Health and Substance Use program at Willow Pavilion. Willow clients receive specialized longer-term treatment and it was a treat for all to hear Leela sing.

Leela addressed these themes during her concert: *"While there is tragedy, and let's not forget about the tragedy - let's never forget the absolute miracle of Indigenous people's survival and resilience. It is miraculous we are here today. Our resilience and strength is the true story."*

Not only does Leela inspire us with her words, her voice is a miraculous, big-hearted, stop you in your tracks full throated siren song that hits you in the heart and brings tears to your eye. Willow Pavilion's Peer Support Worker and Leela's friend, Trevor Flynn, had this to say about her:

*Leela Gilday is 2021's Juno Award winning Indigenous Artist of the year. She joins us from her home territory Denedeh, colonially known as Yellowknife.*

*Through her music, Leela is saving lives. Her music has brought and continues to bring a sense of home, belonging and healing through some of the darkest times for people including my own.*

*She uses her incredible gift to share stories and bring awareness to the injustices Indigenous peoples have faced and still face in our world today. Her music shines an even bigger brighter light on the beauty, love, and compassion of Indigenous people and this incredible land.*

*Listen to  
Leela  
here:  
[https://  
www.leela  
gilday.com  
/music](https://www.leela<br/>gilday.com<br/>/music)*

*Find her  
on  
Spotify,  
Apple  
Music,  
Google  
Play,  
Amazon,  
Deezer,  
Youtube*

*NEW  
ALBUM  
North Star  
Calling*

# THE VOICE OF PEOPLE WHO USE DRUGS

## Interview with Wendy Stevens

**Peer Operations Coordinator, VCH Overdose Emergency Response**

### By Isabella Mori

Wendy is often seen around VCH speaking about incorporating peers into health care, and the voices of people who use drugs into our services. For family members new to the language, peers are those with lived experience of receiving services which uniquely qualifies them for employment providing support to others living with similar issues. Wendy was so kind to take some time out of her day to give us a picture of her work. Here's what she had to say:



*What do you do at Vancouver Coastal Health?*

Wendy: My job is varied. I educate health care providers on stigma, trauma informed care, how to work with people who use substances, how language matters, cultural safety, de-escalation. I assist organizations or teams that want to start a peer program and consult with them on how to bring peers in successfully. What to expect with peers, the unique values that people with lived experience can bring, what to do and what not to do, how to be low barrier for peers. I support the teams and the peers themselves after they've been hired.

I teach the Street Degree for peers in the Downtown Eastside. The Street Degree program was launched in 2017 to ensure that peers working at overdose prevention sites and other harm reduction services could boost their lived experience with formal training in areas such as overdose response, pain management, community resources and managing extreme situations. To date more than 300 peers from 19 organizations have attended Street Degree courses.

When new clinics are opened, I talk with them about how to engage people who use substances, and the kinds of things relevant from their perspective, which can be quite different from the perspective of health care providers.

I check in with the Overdose Prevention sites, to keep up to date because the signs and effects of overdoses are always changing. What are new trends? Are there new kinds of overdose? During the height of COVID I worked with pop-up clinics on a street corner or an alley, going around recruiting people to get their vaccinations, vaccinating people in the alley if that was the best way to go about it.

*How would you describe your work with the opioid crisis?*

I am part of a team that is developing a new clinic that offers fentanyl, making sure that people with lived experience keep giving reality checks: what's actually helpful, as opposed to what health care providers think? For example, I remind the team that in addiction, the drug itself plays only one part;

*What's relevant from perspective of people who use substances can be quite different from perspective of health care providers*

*I hope people can start really listening and valuing the people who are losing the most in this crisis. Listen for what they need.*

it's also about other things like the rituals of using. My voice is in a place where I can represent people who use drugs.

*Can you give an example of an impactful story?*

I was conducting a major training with a team that provides services similar to a longer term care facility. They had severely restricted people's access to many things during the height of COVID, and kept doing so even after people got vaccinated. Even when they finally allowed people to leave for a short time, they often chose not to have conversations with people on safe use of drugs, thinking that if they did, they would encourage people to use, and they would then overdose. After our presentation, we received positive feedback from staff who now understood that people who want to use drugs will do that no matter what, and that having an open conversation about safe use actually prevents overdoses.

*What are your hopes?*

I hope that people in charge of decision-making will understand that giving substitutes is not enough. People who use drugs need to have what they need to have. So they still overdose. E.G., it's better to give them safe crystal meth, not substitutes. We have no control over people using drugs but if we give them safe fentanyl or safe heroin we have control over the quality. We need to come across with what people need, not what is deemed acceptable.

*How do you keep up hope?*

It can be really hard. Every week I hear about someone who I thought would be around forever who we have lost. About an advocate who also uses drugs and now they died. Everyone is shocked and upset—how can this happen? And then the shock subsides and it happens again.

I hope people can keep making connections with other people and hopefully start really listening and valuing the people who are losing the most in this crisis. Listen for what they need.

What helps is keeping my head down, being involved in as many things as I can, to make sure the voices of people who use drugs are heard. "Nothing about us without us" is an important motto! And if they can't be there, then I can try to be their voice. Just keep doing the work, hoping for the best.

**How to recognize an overdose & what to do**

**If you think someone is having an overdose: CALL 911 IMMEDIATELY!**

**Just a few seconds can make a big difference in saving someone's life.**

**Anyone can call 911.** Police will not arrest you for calling.

**Wait with the person until help arrives.**



**Cannot be woken up or not moving**



**Discolouration of lips and nails**



**Breathing slow or absent**



**Choking or coughing, gurgling, or snoring sounds**



**Dizziness and disorientation**



**Cold or clammy skin**



**Pupils extremely small**




6

## “PARENTS FOREVER”: HOPE, FAMILY RESILIENCY, AND A 20-YEAR JOURNEY

An interview with Frances Kenny, who is the driving force behind the B.C. support group “Parents Forever,” which supports families of adults living with addiction. Remarkably, Parents Forever just recently celebrated their 20th Anniversary!



Frances' collection of “Hope” items —visual indicator of Frances' personality and values!

*Tao-Yee: First of all, Congratulations! Can you please tell me how “Parents Forever” came about and grew to 20 years strong?*

Frances: When my son was 15 and having trouble, a RCMP officer recommended a support group for families experiencing challenges with their teen’s behaviour. That group was called “Parents Together” (run by Boys and Girls Clubs) and for four years I benefited from its support. Unfortunately my son at 18 became heavily involved with substance use and because he was no longer a teenager Parents Together could no longer offer me the support I needed.

I discovered that there were no groups for parents/family members of adult children struggling with substance use, and the idea for Parents Forever was born.

The Boys and Girls Clubs very generously allowed me to use the Parents Together model. At the same time I heard three parents on the Vicky Gabereau Show talking about their childrens’ serious drug use and the group they had formed called “From Grief to Action.” I contacted them and at one of their meetings we agreed they would take on the advocacy piece and I would do ongoing support.

*What next?*

From Grief to Action hosted a meeting at St. Mary’s Church in 2000 and expected 50 people and 150 showed up. The Mayor Philip Owen and Coroner Larry Campbell were present. I stood up and asked if anyone was interested in ongoing support to meet me in the library. One month later we had our first Parents Forever meeting. This was Aug 2000.

At that time, we were getting 30-35 people at every meeting and for three years no funding except the coffee can. Eventually the Boys and Girls were able to secure some minimum funding to cover expenses and also provided a Mental Health and Substance Use counsellor as a mentor to the group.

Well over 500 parents and family members have received consistent and ongoing emotional support as well as a toolbox of coping skills and strategies.

*A theme for this month’s article is hope; however we know the reality of how parents feel is often the opposite. Tell me how the family members you work with (or yourself) can experience hopelessness at times?*

As a parent with lived experience I know the feeling of hopelessness very well ... and over the 20 years witnessed many Parents Forever folks being in the same place. Rather than feeling like I want-

*I discovered there were no groups for parents/family members of adult children struggling with substance use, and the idea of Parents Forever was born.*

*You never  
give up  
hope on  
your child  
surviving...*

ed to give up, it was the opposite. It fuelled my desire to help folks find a way to keep going—to help them build resiliency and strengths—through the “good” “the bad” and the “ugly” times.

But... it is very important to note that while we do feel hopeless from time-to-time, it is about the situation our loved ones are in... not about who they are as a person. You never give up hope on your child surviving and being the person they are capable of being.

Even accepting the death of your loved one may be an outcome you can't control ... doesn't ever mean giving up hope.

*How do you think the family members you work with maintain hope? And how about you?*

The key ingredient to keeping hope alive in Parents Forever is the mutual support model. Long-time members continue to attend meetings sharing their wisdom and experience with folks new to the experience. Also, over the years, many folks in recovery have spoken to us about their journeys. This is the most powerful message we can ever hope to hear. So many times over the 20 years I have cried at the computer ...looking at a photo of a son or daughter getting married or proudly showing off a newborn baby... or a message letting me know about a loved one's sober life and the family relationship on the mend. “Ever Hopeful... No Expectations” has been our motto for 20 years!

*Any concrete tools you recommend for parents of adult children struggling with substance use?*

Our strategies allow parents to take control of their own lives and maintain loving and supporting connection with their loved ones. When a new member arrives at their first meeting, they are welcomed and accepted. When they are ready, we help them to move to the “practical” side and the first step is to sort out “the muddle of issues” as I like to call it. We use our tried and true method of “The List” process to determine what they can and can't control and the five steps emanating from that. This can be a very empowering step... feeling like you are regaining some agency over your own life and making changes even if your loved one is not ready to do so.

*Any final comments on your journey with Parents Forever?*

There are so many milestones and achievements to be proud of over the 20 years, it's hard to put it all in words. I believe keeping the focus on how parents and family members' lives are being impacted and how to support them “in their own right” has been our greatest strength. Am proud to say the support we offer continues with 20 people joining via Zoom every week! As well the general membership of 200 who receive bi-weekly updates and resources.

I'm thankful because of our wonderful partnership with From Grief to Action we have been the beneficiaries of their tireless advocacy work on behalf of families. I'm also immensely grateful for the ongoing support of Vancouver Coastal Health and the Boys and Girls Clubs of South Coast BC.

*Thank you for sharing the inspiring story of Parents Forever in this interview.*

**Parents Forever** – Support group for families of adults living with addiction. Group meets weekly via Zoom on Friday evenings. [www.parentsforever.ca](http://www.parentsforever.ca)

For more info: Frances Kenny, (604) 524-4230 or [fkenny@uniserve.com](mailto:fkenny@uniserve.com)



## THE PROMISE OF REASONABLE HOPE

By Isabella Mori, adapted from Kaethe Weingarten

The German philosopher Nietzsche wrote: “Hope is the worst of evils because it prolongs the torments of men.” That’s one way of thinking about hope; it’s a sort of wishful thinking. Wishful thinking is not that well connected to reality, and full of expectations that can so easily be dashed. I call it “hope fantasies.”

An antidote to this wishful thinking type of hope is what therapist Kaethe Weingarten calls reasonable hope. Weingarten lives in South Africa and has seen many forms of interpersonal and system violence; she certainly has earned the right to talk about hope in the midst of terrible experiences. Here I paraphrase some thoughts she has about “ordinary” hope vs. reasonable hope:

The classic images of hope -- a butterfly, a rainbow, an undemanding bird that perches in one’s soul -- set up expectations and standards that are without limit. It refers to feelings one may or may not have. Hope’s objective is most often placed in an eagerly awaited future, with the arc of time between the present and the future filled with anticipation. Hopelessness arises from the conviction that nothing that one wants is within reach, whether love or security or health.

On the other hand, reasonable hope

- is both sensible and moderate, directing our attention to what is within reach more than what may be desired but unattainable
- makes sense of what exists now in the belief that this prepares us to meet what lies ahead. With reasonable hope, the present is filled with working not waiting
- is about something we do, preferably with others. It is a verb not a noun
- is a practice that is not only about accomplishing a goal but also about aiming toward it
- sees the future as open, uncertain, influenceable, and full of possibilities. In dire circumstances, for example, oppression, poverty, or in our case, the opioid crisis, it is precisely because we cannot know what the future brings that reasonable hope helps us work toward something better than what we are living now
- reminds us we can join with others. Creative communal synergies can happen and spontaneous actions often arise from collective commitments
- seeks goals and pathways to them. We tend to feel hopeful when the goal is clear, the pathway known, and hopeless when the way is blocked, the goal obscure. Bolstered by reasonable hope, we realize we must define realistic goals and pathways to them. This is not simple. There is often a lot of trial and error. Goals and pathways to them may have to replace each other at a dizzying rate. Also, life deals us circumstances in which we have to select goals and pathways we never thought we could accept. With reasonable hope, we learn to be satisfied with less than what needs to be done in order to ensure that something be done
- functions in a gray zone, where doubt, contradictions and despair co-exist
- accepts the messiness of life

*Reasonable hope is a practice that is not only about accomplishing a goal but also about aiming toward it*

*Believe  
that the  
small is  
not trivial*

Many activities sustain reasonable hope.

**Resist Isolation.** When we are hopeless, even though it may be the last thing we want to do, we need to join with others even if we are uncertain about what we have to offer

**Create a daily practice of awe.** Meditation, yoga, prayer, communing with nature or reflecting in community – all these sustain reasonable hope

**Believe that the small is not trivial.** We can become mesmerized by the enormity of the problems we face. With reasonable hope, we don't search for the perfect solution but consider what may be good enough. Small actions need not be trivial. They may also have ripple effects

**Witness.** We are all witnesses to tragedy on a daily basis, whether we want to or not. Remaining aware and empowered sustains reasonable hope. "Numbing out" may be comforting in the moment, but it does not bring lasting hope

**Welcome joy.** It may seem odd to feel joy, especially amidst terrible conditions. But joy nourishes and does not detract from what needs to be done. Joy is a foundation for alliance and solidarity, qualities that are vital to doing reasonable hope with others

**Enjoy vicarious hope.** Sometimes we cannot help but feel hopeless. Then we can be open to be influenced by the hope that others express and join in on their actions. We accept that we do not have the resources to do reasonable hope and allow ourselves to be buoyed by others

**Accept success substitutes.** We may not be able to solve our issue, but there may be. We can be open to options that may previously have been viewed as too distant from exactly what we have wanted

**Seek inspiration in the arts.** Painters, poets, songwriters, filmmakers and others continually wrestle with life dilemmas and find ways to render them powerfully visible. Drinking in the beauty and excitement of an artist's vision inspires and supports our own creativity and momentum

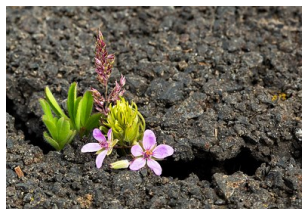
**Use global resources.** Globalization permits conversations across identities and boundaries in thrilling ways. The Internet links us creatively to thinkers everywhere. Take advantage of that

**Look for courage.** Reasonable hope depends on people with the courage to take risks. Doing hope together means that we can all notice, reach out and support other risk takers so that they do not stay out on a limb, but instead are joined there, like birds on a telephone pole

**Stretch the boundaries:** Hardship creates dis-ease. In response, many pull in our heads, turtling. It doesn't help. Instead, take a leap of faith, push your boundaries. Do something radically different. Stretch your boundaries and support others who are stretching theirs

**Embrace Resistance.** It feels good to notice what is unjust and to work for what is just. Grounded in principles, anchored in commitments, resisting can feel like our roots are deep in the ground and are hearts are soaring.

For the whole paper by Kaethe Weingarten, <http://www.witnessingproject.org/our-projects>



*Photo Credit: Sheila Sund, Crack in the Pavement*

## OUR NEW TEAM MEMBER: ANDREA SIERRALTA

We are pleased to introduce our new colleague working in the role of Family & Consumer Support and Involvement Coordinator, Acute.

Andrea supports consumers and families whose loved ones are currently in a short term psychiatric facility. Andrea was good enough to answer some questions.



### *What is your background?*

I am a Registered Clinical Counsellor and I have been working for Vancouver Coastal Health since 2013. I have had the privilege of working in different areas including: Substance Use treatment, Concurrent Disorders in Tertiary Mental Health, and in an outpatient capacity providing group and individual therapy for people experiencing depression, suicidal thoughts, anxiety, trauma and other mental health concerns.

### *What is the Acute Family and Consumer Support and Involvement Coordinator?*

The Coordinator provides support to family members & consumers who are admitted to the Joseph and Rosalie Segal & Family Health Centre at Vancouver General Hospital; helps navigate resources, provides psychoeducation regarding mental health and/or substance use, and information on caregiver burnout and coping strategies. The Coordinator also provides support to frontline staff in understanding and implementing the Family Involvement Policy including group presentations and one on one support; supports the Family Advisory Committee and their subcommittee work; runs the Family Connections Support Groups, helps maintain the family resource list; and much more!

### *What are you looking forward to in this role?*

I am looking forward to the many interactions with families, clients, staff and leadership that may facilitate the family and consumer voices are heard and included in care planning and shaping of mental health services.

### *What else?*

I am originally from Venezuela, so Spanish is my first language! I love trying out new food trucks, travelling, and spending time with family and friends. I also love drinking tea, poetry and art, and sometimes do a bit of painting myself!

### *How can we reach you?*

Email: [andrea.sierralta@vch.ca](mailto:andrea.sierralta@vch.ca) Mobile: 604-290-3817 Hours: Tue, Thu, alternating Fri.

# Vancouver Family Advisory Committee (FAC)

*A Partnership with Vancouver Mental Health & Substance Use Services*



"After my son's first hospitalization, I attended a Family Conference where I learnt about the FAC. Serving on the FAC has given me greater understanding of how MHSU services are structured, and the challenges in managing such a complex system. This understanding has helped me be a more effective advocate for my son."

"I joined the FAC when my daughter saw the invitation flyer at VGH Segal Centre. She felt this would be a good way for me to become involved and help her. My role is to contribute my experience as a parent struggling with the system – to gain a voice with the care team, to improve the system, and help other families achieve a better outcome."

## Join Us! We are always looking for new FAC Members!

### Who is the Vancouver Family Advisory Committee?

We are Vancouver parents, siblings, adult children and friends of those living with mental illness and substance use. We are individuals with lived experience. We are community agency representatives, MHSU professionals, and the VCH Family Support & Involvement team. *Together, we are the FAC, working together to face challenges and press for improvements.*

Wherever you are in your journey navigating these waters, we understand. We are grateful to other Vancouver family members who organized over 20 years ago to urge change in the way families were included in the treatment of our loved ones.

### Spotlight on current FAC projects:

- ⇒ Letter writing campaign to Provincial Leadership (Mental Health Act, Car 87)
- ⇒ Consultation on VCH projects and initiatives (Community services review, Concurrent Disorders strategies, Passes criteria, Experience of Care surveys)
- ⇒ Collaborating with community groups B.C. Schizophrenia Society and Pathways Serious Mental Illness Society
- ⇒ And more!

Want to learn more? <https://www.spotlightonmentalhealth.com/vancouver-family-advisory-committee/>

Want to join us, or get more information? Email: [vancouverfac@vch.ca](mailto:vancouverfac@vch.ca)

*"The achievements of an organization are the results of the combined effort of every individual. People who work together will win, whether it be against complex football defenses, or the problems of modern society. Individual commitment to a group effort – that is what makes a team work, a company work, a society work, a civilization work."*

- Vince Lombardi

## VANCOUVER FAMILY ADVISORY COMMITTEE (FAC-V) ADVOCACY IS HOPE: CAR 87/88 EXPANSION

We finish our newsletter today with an example of how advocacy creates hope, furthers hope, and is often hope itself. It's also an example of what strong well-thought out advocacy the Vancouver FAC does!

Below is an excerpt from FAC-V's recent letter to government and health officials in B.C.:

**March 25, 2021**

### Letter to:

- Premier John Horgan, Province of British Columbia
- The Honourable Sheila Malcolmson, Minister of Mental Health & Addictions
- The Honorable Adrian Dix, Minister of Health
- The Honorable David Eby, Attorney General
- Dr. Penny Ballem, Board Chair, Vancouver Coastal Health
- Major Kennedy Stewart, City of Vancouver

Dear Recipients as listed above:

Re: Car 87/88 aka Car 87 Service for Persons with a Mental Health Crisis

We are an advisory committee, reporting to and working with Vancouver Coastal Health for improving mental health and substance use (MHSU) services in Vancouver. We are family members and persons with lived experience. As family members involved in the care of our loved ones we feel it is our responsibility to raise our concerns over the inadequacy of funding and support for the Car 87 service for persons and families experiencing a serious mental health crisis.

Car 87 service operates in the City of Vancouver as a partnership between the Health Authority and the Vancouver Police Department. Families experiencing a crisis with a loved one suffering from mental health psychosis can call 9-1-1 to request assistance from the Car 87 team which includes a police officer and a psychiatric nurse or social worker trained to assess and assist with de-escalation and transportation of the ill loved one who may be violent, to hospital. Families who have received Car 87 service report a positive experience.

Too frequently, however, families report that the service is busy or not available. It can take up to 72 hours for Car 87 to arrive which is obviously a great concern when threatened with violence or potential violence. Frequently, a police team is dispatched because of the potential that someone can be seriously hurt before Car 87 arrives. While the Vancouver Police are well-trained to deal with persons with mental illness, it is not their primary focus nor responsibility. It is inappropriate for the public to expect the police to assume this function together with their other duties to enforce the law and keep the peace.



*Families  
who have  
received  
Car 87 ser-  
vices re-  
port a pos-  
itive expe-  
rience...*

*Calling on the Vancouver and Provincial Health Authorities to work with the municipalities to expand Car 87 service to the regional level*

Recently, there have been numerous examples of inappropriate police response across North America and the use of excessive force. The public outcry to “de-fund the police” is growing. It is our view that we need to “de-task the police”. Rather than burdening the police with responding alone to a mental health call, we should be improving the funding for psychiatric nurses and social workers to work in teams with the police.

It is our understanding that the Big City Mayors’ Caucus of BC is considering the expansion of the Car 87 Service to the Greater Vancouver Region with a regional dispatch service. This could facilitate more teams to serve the region.

The Family Advisory Committee (MH/SU) to Vancouver Coastal Health Authority calls on the Vancouver and Provincial Health Authorities to work with the municipalities to expand Car 87 service to the regional level, or by adding more cars within Vancouver. The service should be available on a 24 hour, 7 days a week basis. There should be in each region, at least 4 teams for 24/7 coverage and effective response.

Our families tell us:

*“Our family will forever be grateful for the trained, compassionate expertise offered by the social worker and officer in Car 87. When a police officer was unable to find our daughter ill enough to be certified under the Mental Health Act, the psychiatric nurse connected with the team determined she met the criteria for immediate hospital care.” H. Horwood*

*“Car 87 was not available when it was needed. The police officers were considerate and polite but our docile and compliant son was handcuffed ... a traumatic experience. Car 87 staffed with personnel trained in mental health and de-escalation is essential to ensure that individuals who are already frightened and confused are not further traumatized.” P. Parker*

*“Car 87 was busy so the 9-1-1 operator sent a police team. The Case Manager informed the police my daughter needed to be taken to hospital where the completed Form 21 was waiting. The police were polite but because there was a ‘no contact’ order on my delusional and distressed daughter, they took her to jail in handcuffs where she was at risk of hurting herself or others.” S. Chan*

*“When my son is in psychosis he is at risk to himself and others. Car 87 is an essential service and provides appropriate help, but is impossible to access. One often has to wait more than 2 days. Without prompt attention and medical care, irreparable damage is done to my son, family and the medical system. Car 87 needs enough staff and resources to respond to mental health emergencies.” J. Daum*

We look forward to your response to the proposal from the regional municipalities to regionalize the Car 87 service or to the wisdom and experience of the Family Advisory Committee of Vancouver to enhancing the availability and accessibility of the service within Vancouver. Our families deserve to have an effective service to support families in crisis.

Sincerely,

Patti Zane, Chair

On behalf of members of the Family Advisory Committee (FAC-V) to Vancouver MHSU Services

## TIDBITS from the Family Connections Support Group

In this new regular column, we will list selected resources we have discussed in our regular Family Connections Support Group (see next page). Let us know what you think!

### **A bookstore in Vancouver**

[Odin Books](#) (for mental health & educational resources) – 108 E. Broadway @ Quebec, Vancouver

### **Books about interacting with people who have a diagnosis of Borderline Personality Disorder**

Loving Someone with Borderline Personality Disorder <https://www.goodreads.com/book/show/11352031-loving-someone-with-borderline-personality-disorder>

[Stop Walking on Eggshells: Taking Your Life Back When Someone You Care about Has Borderline Personality Disorder](#) (Paul T. Mason, Randi Kreger)

### **An oldie-but-goodie about psychology and communication:**

“Games People Play” by Eric Berne [https://en.wikipedia.org/wiki/Games\\_People\\_Play\\_\(book\)](https://en.wikipedia.org/wiki/Games_People_Play_(book))

**An organization with which we work quite closely** with great information and workshops about schizophrenia but also for any family with a loved one with any mental illness

[BC Schizophrenia Society](#)

**Useful websites** for mental health and substance use for those wanting to explore more psychoeducation:

[CMHA BC \(Canadian Mental Health Association, BC\)](#)

[Here to Help](#)

[CAMH \(Centre for Addiction and Mental Health\)](#) (*great info on common medications!*)

### **Useful information about Vancouver Coastal Health:**

A [journey through the VCH Mental Health System](#)

There are always **opportunities to have your voice heard at VCH**. The Family Support and Involvement Team (Andrea, Tao-Yee and Isabella) assist with that, but there is also a division at Vancouver Coastal Health that focuses specifically on it. It is called CEAN and their web site is here <http://cean.vch.ca/>

**Car 87 (Mental Health Car)** which is a partnership between VPD and VCH. It can be reached via the Access & Assessment Centre at 604-675-3700 or 911: <https://vpd.ca/police/organization/investigation/investigative-support-services/youth-services/community-response.html>

**The strength-based approach to mental health and substance use:** <https://www1.health.gov.au/internet/publications/publishing.nsf/Content/mental-pubs-n-recovgde-toc~mental-pubs-n-recovgde-app~mental-pubs-n-recovgde-app-3~mental-pubs-n-recovgde-app-3-b>

### **Criteria for certification under the B.C. Mental Health Act:**

From a family's perspective: <https://www.bcsm.org/support/bc-mental-health-act-an-introduction/bc-mental-health-act-what-families-need-to-know/>

From a client's perspective: <https://www.bcmhealthrights.ca/>

## The Family Connections Support Group



The **Family Support and Involvement Team** has a support group for family and friends of individuals with mental illness and/or substance use concerns. The group is co-facilitated by a Family Support & Involvement Coordinator and a family member.

We aim to create a welcoming and supportive space in which family members can share their experiences with each other and feel supported and strengthened in their efforts to help their loved ones. The group has a small educational component. Participants also receive twice-monthly emails with the contents of the educational part.

Like many other resources during COVID, we have moved our groups to ZOOM meetings. Family and supporters are free to attend on a regular basis or drop in as needed, like in our regular meetings. If you would like to receive an invite to our Support Group, please contact us and we will happily add you to our invite list!

We meet online on the following days & times:

**DATE:** Every first Thursday and third Monday of the month

**TIME:** 6:00 – 8:00 p.m.

**PLACE:** In the comfort of you own home

*\*We do not meet on STAT holidays.*

*Contact Tao-Yee Lau at [taoyee.lau@vch.ca](mailto:taoyee.lau@vch.ca) or*

*Andrea Sierralta at [andrea.sierralta@vch.ca](mailto:andrea.sierralta@vch.ca) for the Zoom link*

**“Whatever you are struggling with, there are others out there who understand.”**



## MORE FAMILY SUPPORT GROUPS



### PLEASE CALL/EMAIL AHEAD TO CONFIRM DATES AND TIMES

**Parents Forever** – Support group for families of adults living with addiction. Group meets weekly via Zoom on Friday evenings. Contact Frances Kenny, 604-524-4230 or [fkenny@uniserve.com](mailto:fkenny@uniserve.com)

**Holding Hope**— peer led bi-weekly support groups for families affected by their loved one's substance use challenges. Connected to Moms Stop The Harm. Currently held via Zoom.  
Email: canadaholdinghopenational@gmail.com

**SMART** recovery meetings for families are back!. Tuesdays 6:00-7:00pm, <https://smartrecovery.zoom.us/j/91012011101> Meeting ID: 910 1201 1101

**BC Schizophrenia Vancouver Family Support Group** - for family members supporting someone with serious mental illness. Please contact the Vancouver Manager @ 604-787-1814 or [vancoast@bccs.org](mailto:vancoast@bccs.org) for more details on the online group and to register.

**St Paul's Hospital Family Support Group**- Support for families who have a loved one living with mental illness. Groups take place on the last Thursday of every month from 6-7:30 over Zoom.  
Please pre-register at 604-682-2344 local 62403.

**VCH Eating Disorder Program – Family & Friends Support Group** – for friends and family members of individuals living with an eating disorder. Contact Colleen @ 604-675-2531.

**Borderline Talks** - for individuals living with Borderline Personality Disorder (BPD) or Traits, and their loved ones. Zoom group every Wednesday at 7. Check <https://bpdsupportgroup.wordpress.com/finding-help/>

**Pathways Serious Mental Illness** (formerly Northshore Schizophrenia Society) - weekly online support groups, and family to family education sessions. For more information on the next support group: <https://pathwayssmi.org/monthly-support-groups/>.

**Pathways Clubhouse Chinese Family Support Group** – Education sessions for Chinese families who have a loved one living with mental illness. 2nd Saturday of each month via Zoom.  
Contact Elaine Chan at [elaine.chan@pathwaysclubhouse.com](mailto:elaine.chan@pathwaysclubhouse.com) or 604-276-8834 for details