

CMHA BC Division ** STRATEGIC PLAN 2021-2025

Supporting better mental health and substance use outcomes for all British Columbians

A MESSAGE FROM LEADERSHIP

CMHA's BC Division was founded in 1952 and has earned a spot as a respected thought leader and advocate for mental health and substance use care across the province. As the organization has grown, and its unique strengths have shone, the need for a strategic plan to steer our journey forward is clear.

This plan is the result of work led by the CMHA BC Board and reflects the voices and input of CMHA BC's team members, colleagues, partners, and stakeholders from across the province. Thank you to everyone whose thoughtful conversations and insights helped shape this plan—your input has been instrumental in helping to define where we are, where we're going, and why.

In building the Strategic Plan, we sought to model strength-based advocacy, apply an intersectional lens, and ensure we leveraged the strengths of branches and non-profit partners. With those guiding principles in mind, three strategic priorities for CMHA BC emerged: reach, uplift, and advance.

It is our hope that everyone involved in CMHA BC will see the work they do reflected in those priorities. Together, these priorities set a course for the next five years and solidify the organization as a leader in advancing mental health and substance use outcomes in British Columbia.

The goals outlined in this plan are only possible through a collaboration of skilled and passionate people—thank you to everyone who contributes to the impact CMHA BC has in communities across the province. We look forward to taking this journey with you.

David DeLong, Chair, CMHA BC Board of Directors
Canon Fung, Chair, Strategic Planning Committee; CMHA Board of Directors
Jonny Morris, CEO, CMHA BC

WHAT WE STAND FOR

CMHA BC is part of one of Canada's most enduring and recognized charitable organizations, working towards a vision of Canada where everyone can realize their human right to their best possible mental health.

CMHA is BC's leading mental health non-profit organization. We promote everyone's right to their best possible mental health, and support the resilience of people living with mental illness and/or substance use disorder.

There are five values that we consistently stand for in the work we do: we are inclusive, proactive, compassionate, steadfast and collaborative. These values guide how we show up to support British Columbians and their access to mental health and substance use care.

GUIDING PRINCIPLES OF THIS PLAN

We will model strengths-based advocacy. Strengths-based advocacy means we will build on the strengths of people living with mental illness and/or substance use rather than focusing on their symptoms or problems. We will empower people with lived and living experience by involving them in decision-making and planning—this will help us build programs and shape systems to meet their needs.

We will apply an intersectional lens to all policies and programs. Applying an intersectional lens means recognizing people's unique identity to let us step beyond our assumptions that people have a common lived experience. Our race, class, gender identity, sexual orientation, religion and other identity markers overlap to impact complex prejudices we face. Understanding and remembering those differences will help us create more effective and impactful policies and programs.

We will leverage others' strengths. This means using the different expertise, strengths and opportunities of CMHA branches and non-profit partners to better meet people's mental health and substance use needs. We will work to bring those strengths together to provide the best possible care and support.

WHAT WE STAND FOR

Compassionate

We lead with the heart.
We are compassionate,
empathetic and caring.
We approach our mission
with love and kindness.

Inclusive

We want all people in British Columbia to see themselves represented and served by CMHA. We value the voices of those who have experienced mental illness. We recognize a diverse range of mental health approaches.

Proactive

We are leaders. We value action over talk.
We will innovate and think ahead to continue to address and improve mental health in British Columbia.

Steadfast

We have long fought to improve the state of mental health in British Columbia, but our work is not done.

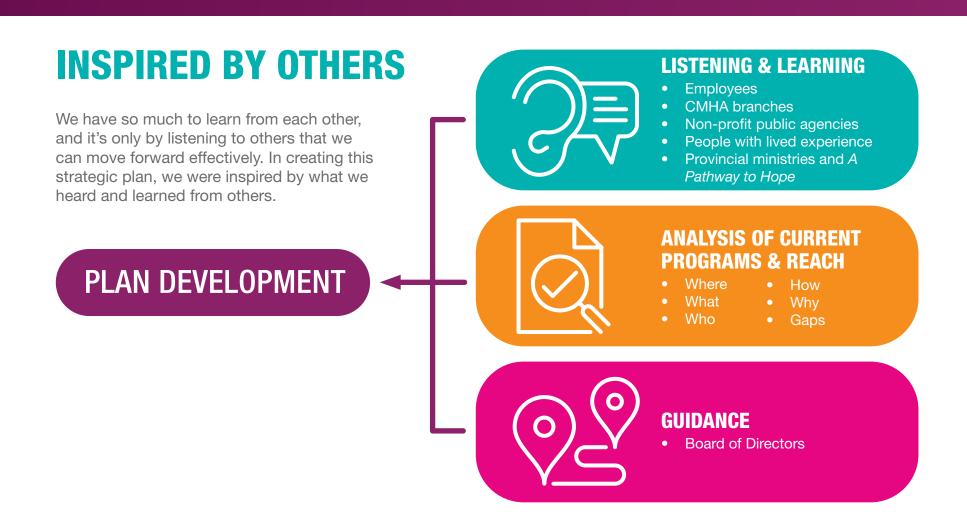
We are champions of social justice.

We are champions of social justice.
We remain as committed as ever to our task.

Collaborative

We mobilize resources, partners and people to come together to realize necessary changes in our communities and in the mental health system in British Columbia.

CMHA BC advocates for changes to legislation and policy affecting people with a mental illness and/or substance use disorder.



OUR THREE STRATEGIC PRIORITIES

With our values, the input from our thought partners, and our guiding principles in mind, we identified three strategic priorities: reach, uplift and advance.



REACH all British Columbians throughout their lifespan to promote mental wellness and provide mental illness and substance use care by leveraging strengths.



UPLIFT the voices of BC's nonprofit organizations and people with lived and living experience to create positive change in our public and community-based systems of care.



ADVANCE our human right to our best possible mental health by calling for a comprehensive system of care that protects and promotes our rights to adequate housing, education, employment, community inclusion and health.

WHY REACH?

- We have a valuable network of branches across the province that are community-centered and recognized for their expertise in supporting people living with mental illness and substance use to live meaningful, full lives.
- Our offerings vary across the province and the people we reach today share many of the same cultural and socio-economic characteristics, with limited diversity. There is a need to fill gaps to better support more British Columbians.
- We have work to do to reach more diverse British Columbians, regardless of age, race, socioeconomic background, sexual orientation, gender identify, and lived experience. Our stakeholders specifically called out children, youth (especially Indigenous youth), and seniors as being underserved through our current offerings.

OUR GOALS FOR REACH

PRIORITY 1: Reach all British Columbians throughout their lifespan to promote mental wellness and provide mental illness and substance use care by leveraging strengths.

In order to make the change we desire for British Columbians, by 2025 we will:

 Leverage the strengths of CMHA branches and non-profit partners and empower them to offer programs where there are opportunities to do so. This will help to extend coverage to communities across BC and better reach underrepresented or underserved British Columbians.

- 2. With Indigenous-led partners, co-design suicide and self-harm prevention and early intervention services for Indigenous youth.
- 3. Develop additional mental health promotion, prevention and early intervention programs that branches can offer to seniors.
- 4. Support branches and partners with incorporating more digital mental health services and support. Part of this will involve improving data collection and finding efficiencies.

WHY UPLIFT?

- The Provincial Government has become increasingly agile with policy changes related to mental health and substance use care and support.
- We are recognized as having a universal mental health and substance use care mandate, established relationships in the social services community, and a track record for solution-oriented dialogue.
- CMHA BC can bring together branches, non-profit organizations, public agencies, and people with lived and living experience. This helps ensure policy is informed by the right experts and accelerates decisions that make mental health and substance use care better for British Columbians.



OUR GOALS FOR UPLIFT

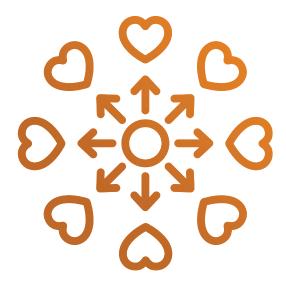
PRIORITY 2: Uplift the voices of BC's non-profit organizations and people with lived and living experience to create positive change in our public and community-based systems of care.

In order to make the change we desire for **British Columbians by 2025, we will:**

- 1. Invest in the capabilities to partner with intersecting and diverse communities.
- 2. Bring together non-profit organizations and public agencies to co-design policy recommendations on: community-based crisis care, suicide prevention, access to psychological therapies, and mental health in schools and workplaces.
- **3.** Clarify the roles of government, public agencies, and non-profit organizations in providing support to at least one subset of British Columbians in greatest need of mental health and/or substance use care.

WHY ADVANCE?

- CMHA BC is well-known and respected. It has demonstrated the potential for cross-sector leadership by facilitating respectful, constructive dialogue with government and other partners.
- What gets measured gets managed. By expanding and leaning on its measurement strategy, CMHA BC can use data to highlight the interdependence of factors to support everyone's right to their best possible mental health. These measures shed light on levers for change.
- CMHA BC recognizes the expertise and roles of others. Governments, agencies and other nonprofit organizations have explicit mandates for housing, employment and income, mental health care provision and harm reduction. By advocating for improved access to mental health and substance use treatment, CMHA BC can leverage its strengths effectively without overlap.



OUR GOALS FOR ADVANCE

PRIORITY 3: Advance our human right to our best possible mental health by calling for a comprehensive system of care that protects and promotes our rights to adequate housing, education, employment, community inclusion and health.

In order to make the change we desire for British Columbians by 2025, we will:

1. Drive improvement through an annual measurement strategy with an integrated view of mental health and substance use outcomes.

2. Engage our partners, employees, branches, members, volunteers, and persons with lived and living experience to measure access to community-based mental health and substance use supports.

