Canadian Mental Health Association
South Cariboo
Mental health for all



CMHA South Cariboo is an accredited organization through Imagine Canada's Standards Program

Agency Profile: Canadian Mental Health Association, South Cariboo Branch, is an autonomous, non-profit, charitable organization with ethical and legal responsibilities to the National and BC Divisions of CMHA. Our mandate emphasizes the importance of people with lived experience of mental illness being involved in the delivery of service and governance wherever possible.

Our Vision: "Mentally Healthy People in a Healthy Society"

Our Mission: "To ensure that all people in Canada experience good mental health and well-being."

CMHA South Cariboo Branch Values:

- Social justice
- Individual and collective responsibility
- Access to appropriate and adequate resources and supports
- Self-determination
- Maximum community inclusion
- Collaborating with our community partners

Geographic Catchment area:

The South Cariboo is a sub-region of the Cariboo Regional District in the interior of British Columbia. Its main population center is the Municipality of 100 Mile House, a community of approximately 2,000 residents. An additional 18,000 people live in the South Cariboo. The South Cariboo boundaries are described as 70 Mile House in the South, to Lac la Hache in the North, the Fraser River to the West, and Lac des Roches and Mahood Lake to the East. The region includes 100 Mile House and many smaller communities such as Forest Grove, Buffalo Creek, Lac la Hache, 108 Mile Ranch, Lone Butte, Sheridan Lake, Bridge Lake, Watch Lake and Green Lake.



Board Chair Report

Another year has passed already. Looking forward to the next. We would like to give thanks to all the dedication of the staff who support their boss. Our new ED, Marnie, she has been a champ. A fantastic job this year. We are very proud of you. You will always have our support. Thank you.

For my Board Colleagues, thank you for staying on as team members. Appreciate you. Nice to have a great team. B.C. Housing project is still going through. Should start the 22-unit project this fall. Still working towards purchasing a newer van, a continued project. Looking forward to another year of fundraising and raising our profile in the community.

Thank you again to Marnie and her awesome staff. Proud to be a part of it all.

Cheers- Kit Cadrin, Board Chair.

Executive Director Reporter

It is my privilege to present this Executive Director's Report to the Annual General Meeting. This past year-my first in this role, has been one of continued service, relationship-building, and steady progress for the Canadian Mental Health Association South Cariboo Branch. Our work has remained grounded in compassion, dignity, inclusion, and practical support for people experiencing mental health challenges, housing insecurity, social isolation, poverty, and other barriers to wellness.

As a community-based organization, our strength comes from the people we serve, the staff who show up every day, the Board of Directors who provide governance and guidance, and the many partners who work alongside us. Together, we have continued to respond to complex community needs while also strengthening the foundation of our organization for the future.

The 2025–2026 year brought both opportunities and challenges. We continued to see increased demand for mental health supports, housing-related assistance, outreach services, advocacy, and connection to basic needs. Many individuals and families in the South Cariboo are navigating overlapping pressures, including affordability, access to health care, transportation barriers, substance use impacts, and limited housing options.

In response, our branch focused on being accessible, responsive, and collaborative. We worked to meet people where they are, connect them with appropriate services, and reduce barriers wherever possible. We also continued to advocate for systems that better reflect the realities faced by people in rural and remote communities.

I would like to extend my sincere gratitude to our staff, who bring commitment, compassion, and resilience to their work every day. I also thank our Board of Directors for their governance, guidance, and support throughout the year. To our funders, community partners, donors, and supporters, thank you for believing in this work and for helping us serve the South Cariboo.

Most importantly, I want to acknowledge the individuals and families who trust us during difficult moments in their lives. Your strength, honesty, and perseverance continue to guide our work.

Marnie Jensen
Executive Director

History of the Canadian Mental Health Association

Canada's Oldest National Mental Health Charity

The Canadian Mental Health Association (CMHA) is one of the oldest national, charitable organizations in Canada and the oldest national mental health charity. Each year, CMHA divisions and branches across Canada provide service to people across Canada through the combined efforts of more than 11,000 volunteers and staff in locally run organizations. Visit CMHA National's website for more information.

CMHA was founded in 1918 by Dr. Clarence M. Hincks, Dr. Charles K. Clarke and Clifford W. Beers as the Canadian National Committee for Mental Hygiene. The original goals of the organization centered on war recruits, mental examination of post-war immigrants, prevention, and support for adequate facilities and care for the treatment of mental illness.

CMHA is uniquely positioned in Canada as a charity that brings together community-based experience and expertise on the prevention of mental illness and community supports for the mental well-being of all Canadians.

CMHA South Cariboo Branch

CMHA South Cariboo was started by a group of concerned individuals in the late 1980s. The group's early meetings took place in the Rosewood Building on Birch Avenue in 100 Mile House, and included individuals living with mental illness, their friends and family members, mental health service providers and local physicians. As mental health support services in the South Cariboo at that time were very limited, the initial goal for members was to develop resources and a network of support - both for individuals living with a mental illness, and to those who were part of their lives. The branch was incorporated in 1993. The branch's early goals were to be actively involved in the development of

psychiatric services to our community, and to find funds to develop a clubhouse or drop-in center where people who live with mental illness could congregate, socialize, and receive the help needed to live successfully in their homes and community. Since its inception, CMHA South Cariboo Branch has grown from a one staff office to a multi-program system. We continue to take pride in our identity as a grassroots organization that adapts to serve the needs of the people of our region.

Prevention is fundamental to all of the services we provide and is reflected through the work of the branch during Mental Health Week, Mental Illness Awareness Week and at various community events throughout the year. It is also reflected in the services we provide to individuals who live with a serious and persistent mental illness. The South Cariboo Branch is proud to be among the branches that make up Canadian Mental Health Association, BC Division, and part of our nation-wide federation.

The Framework for Support

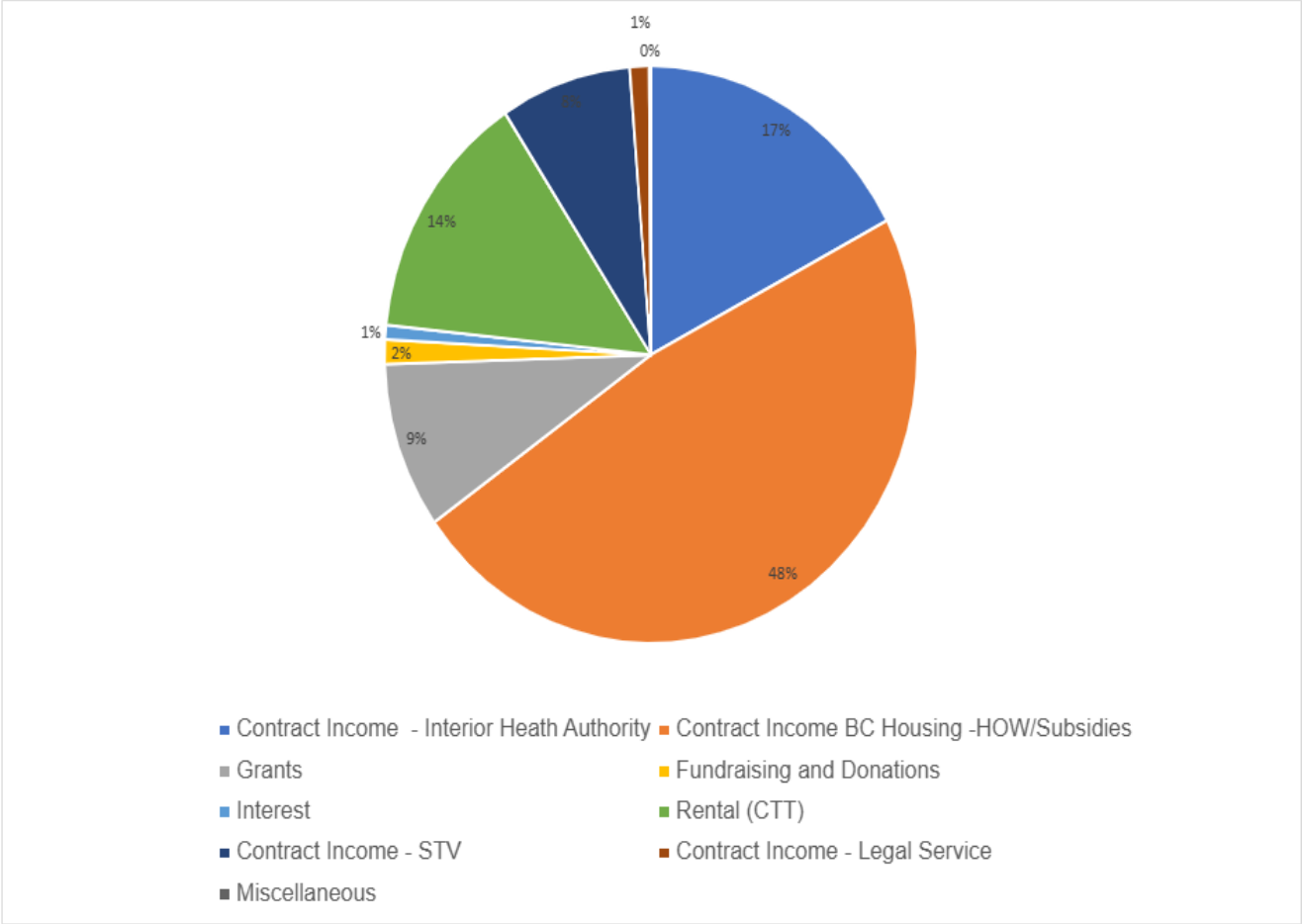
The Framework is the central philosophy guiding the activities of CMHA. This philosophy holds that the person experiencing mental illness is at the center of any supportive mental health system.

The Community Resource Base outlines a range of possible resources in addition to the formal mental health system which can provide support to a person with mental illness. Housing, income, work, and education represent four basic elements of citizenship.

The goal of the Framework is to ensure that people with serious mental health problems live fulfilling lives in the community. The Framework for Support is referred to as the most comprehensive model for mental health planning by federal and provincial governments, as well as by the Centre for Community Change in the US, and the Government of Ireland.

Scholarship Report

We provide a $500 Scholarship to help a local student pursue a career related to mental health (such as psychiatry or Community Mental Health Worker) when we receive applications that meet this criterion. The scholarship was awarded this year.



Revenue (unaudited):

Contract Income - Interior Heath Authority	$265,967.48
Contract Income BC Housing-HOW/Subsidies	$734,701.71
Grants	$143,627.74
Fundraising and Donations	$20,887.61
Interest	$12,337.21
Rental (CTT)	$217,079.00
Contract Income - STV	$122,003.95
Contract Income - Legal Service	$18,181.56
Miscellaneous	$1,512.00
Total	$1,536,298.26

Program Reports

Supported Independent Living Program (Funded by Interior Health Authority) -2026

Program Overview

The Supported Independent Living (SIL) Program empowers clients to live independently in the community by offering emotional support, encouragement, and practical life-skills coaching. Support focuses on key areas such as budgeting, nutrition, self-care, wellness, and daily living. All clients are referred through Interior Health Mental Health and Substance Use Services.

Each participant works with their Health Team—which may include their TSR (Treatment, Support, Recovery) worker, physician, psychiatrist, CMHA SIL worker, and other health professionals—to create a personalized care plan. These plans are flexible, realistic, and built around the client's unique needs and goals. The SIL worker collaborates closely with each client, helping them build confidence and gradually master the skills needed for independent living. A life skills group has been added this year to give support to those requiring these skills.

During SIL visits, clients may receive advocacy at medical appointments, support with shopping, or transportation to the hospital for lab work or medication injections. SIL workers also encourage physical activity and overall wellness through activities such as nature walks, hiking, and yoga. A focus on healthy minds and healthy bodies remains central to the program. Weekly food bank hampers are delivered to clients who need them.

Work Incentive Program (W.I.P.)

The SIL program also offers the Work Incentive Program, which provides clients with opportunities for job training and skill development through partnerships with local businesses and community groups. Clients participate for 10 hours each month and receive a fair volunteer wage funded by Interior Health. This program continues to be highly valued by those who take part.

SIL can also provide essential financial subsidies to help clients manage rent and utility costs when needed.

Community Engagement & Program Highlights

This year, SIL clients enthusiastically planted and cared for the gardens at CMHA. One client, through the W.I.P., maintained the flower gardens at the front of the building and

watered the vegetable garden throughout the season—work he takes great pride in. This client also manages the CMHA garden plot at the Community Garden, growing produce to help feed the community.

We also partnered with the Clubhouse program to host a FireSmart representative, who provided education on wildfire preparedness. Emergency contact information for all clients has been updated to support safety planning in the event of a natural disaster.

As we move into 2026, the SIL program remains committed to providing a safe, healthy, and supportive environment for all participants.

Kathy Provost SIL Outreach Worker

The Stopping the Violence Counselling (STV) Program (funded by the Ministry of Public Safety and Solicitor General)

The STV Counselling program offers scheduled, unscheduled, emergency, follow-up, and group services for women who have experienced violence and/or abuse.

Trends related to the program mandate have been: fleeing abuse and safety planning, addictions and lifestyle change, historical power and control behaviours, divorce and potential escalation, sexual exploitation, sexual assault, cognitive impairment, multi-racial and cultural sensitivity, RCMP interventions leading to referral, multiple lethal threats, queer related issues, mental health and physical health related to client experiences, brain injury from violence.

The interpretation of these stats between individual sessions and follow-up support reflects a lot of external stressors in the client's life.

Service	2025-2026	2024-2025	Change
Contacts	666	617	Increase 49
Individual scheduled	272	286	Decrease 14
Group	23	29	Decrease 6
Support/follow up	300	218	Increase 82

STV Counselling Assistant

The STV Counselling Assistant Worker offers intake support with reception services to women who experienced violence and abuse, childhood abuse and sexual assault.

Trends related to program mandate during intake and group workshop are divorce, safety issues, threats, emotional activations during intake, brain injury from violence

Service	2025-2026	2024-2025	Change
Intakes	69	61	Increase 8
Group support contacts	25	23	Increased 2

STV OUTREACH

Service	2025-2026			
Contacts	228			
Support/Client	70			

Kalika Moody - STV Counsellor and Tshidi Machete - STV Counselling Assistant

Receptionist/Scheduler (various funders)

Role Overview

The receptionist is the first voice and the first face the public sees when accessing our services. The role requires professionalism, calm communication, and consistent support for clients and staff throughout the day.

Key Responsibilities:

- Receive visitors
- Provide information and support in crisis situations by connecting people to appropriate staff
- Act as a safety check-in person for staff working in the community
- Answer the telephone, take messages, or direct calls to an appropriate program
- Create documents, reports, and minutes
- Receive rent payments and issue receipts

- Update the staff Outlook calendar
- Maintain records and prepare summary reports
- Schedule shift coverage
- Perform other duties as assigned

Operational Impact

In addition to front-line reception duties, this role supports staff during challenging moments and helps maintain a calm, supportive environment for everyone accessing services. Between April 1, 2025, and March 31, 2026, approximately 1731 front desk calls were received, and the door was answered 2167 times. We saw an increase of 521 contacts over last year.

Natesha Hayes / Wendy DeLuca – Receptionist/Schedulers

Cariboo Trail Terrace
Funded by BC Housing
Lisa Higgins – Housing Caretaker

Cariboo Trail Terrace is our subsidized housing complex at 910 Cariboo Trail. We've got 25 units total and right now every single one is full.

How things are going-

Overall, things are running well. We've got good tenants who take pride in their units and look after their homes. The housing crisis in 100 Mile House hasn't let up, and we're still getting applications daily.

Upgrades & repairs this year-

We put up a new privacy fence around the complex, which has been a big plus for families. We also had a leak from an upstairs patio into one of the 1-bedroom units. Rather than just patch it, we went ahead and replaced all 4 patio decks, so we won't have the same issue down the road.

Ongoing challenges-

Hard water in the area is still an ongoing headache for plumbing and appliances. And like any property, general upkeep is continuous — there's always something to paint, fix, or maintain.

Big thanks to BC Housing for their support, and to our tenants for making Cariboo Trail Terrace a community, not just a building.

Clubhouse/Activity Program Update
Funded by Interior Health Authority
Lisa Higgins – Clubhouse/Activity Worker

The Clubhouse is open Monday to Friday, 12:00 pm – 3:45 pm, and it's a space where people living with mental illness can come together, connect, and support each other.

What we do-

The heart of the program is doing things together. Members help plan, cook, and clean up our shared lunches. They also choose our outings, help with the garden, and decide what activities we do. It's their program, and you can see the pride when they take the lead.

Food & holidays-

We make a point of celebrating holidays like Thanksgiving, Easter, and Christmas with a proper hot meal. This year our Christmas luncheon fed over 35 people. The best part? We grew the potatoes, carrots, brussels sprouts and peas ourselves in the CMHA garden. Turkeys were donated by folks in the community.

For a lot of members, our clubhouse lunch it's their only "real" meal of the day.

Who's coming through the door-

Interior Health sends us new referrals, mostly people dealing with social isolation and anxiety. Lately we've seen more folks in their early 20s joining us. It's been amazing to watch them open up — they're often first in the door and last to leave. The challenge is that grocery prices keep climbing, and budgeting for meals is getting tougher.

Outings & fun-

We keep busy. This year we did trips to Desert Hills in Cache Creek, coffee and ice cream runs to Clinton, Walmart trips to Williams Lake, arts & crafts, and scenic drives. In spring we fish every other Friday at the local lakes and the van is usually packed. We also put on community BBQs that everyone looks forward to.
Thanks to Interior Health for funding this program, and to everyone who donates food and time. It really does make a difference.

Community Navigator Program (Funded by BC Gaming Commission)
Legal Aid BC Community Partner (Funded by Legal Aid BC)

The Community Navigator Program was first introduced to the South Cariboo in May 2018, following the devastating wildfires of 2017. Subsequent challenges—including additional wildfires, floods, and mill closures, have created an even greater and more urgent need for rural residents to access services and supports. Most recently, our community experienced a significant economic blow with the final closure of our last mill in December 2025. This resulted in a cascading impact on local businesses, widespread job loss, and the displacement of many residents who were forced to leave the community to seek employment elsewhere.

The Community Navigator provides a broad range of information and resources tailored to individual needs. These include assistance with accessing medical care, income support, food security programs, housing, counselling, mental health and addiction services, transportation, seniors' supports, and more.

Navigating government systems can be complex and overwhelming. Many of our clients face significant barriers, including lack of access to the internet, cell phones, or reliable connectivity. The Community Navigator Program helps bridge these gaps by offering personalized, face-to-face support and guidance to ensure individuals can access the services they need.

While the population of 100 Mile House is approximately 2,039 residents, the Community Navigator Program serves a broader regional population estimated at over 20,000 people. This number significantly increases during the summer months due to seasonal residents, placing additional pressure on local services.

According to the 2021 Statistics Canada Census, 58.6% of residents in 100 Mile House are aged 45 and older, 19.7% are aged 25–44, 9.1% are aged 15–24, and 12.7% are aged 0–14.

In recent years, the region has also experienced an influx of individuals relocating from the Lower Mainland in search of more affordable housing and a quieter lifestyle. Unfortunately, local infrastructure has not kept pace with this growth. There is an increasing demand for mental health, health care, social, and legal services.

Currently, one Community Navigator serves this entire geographic area, with support from a Community Engagement Coordinator during absences.

During the 2025–2026 fiscal year, the program:

- Recorded over 1,611 client contacts
- Supported 869 individual clients
- Provided 1,189 referrals
- Welcomed 57 new clients

These services include Legal Aid support and application assistance.

The Community Navigator works closely with key community partners, including the RCMP, RCMP Victim Services, Interior Health (Mental Health and Emergency Department), BC Ambulance Service, WorkBC, Service BC, Ministry of Social Development of Poverty Reduction, Ministry of Children and Family Development, the District of 100 Mile House, and provincial representatives. These collaborations strengthen community response to mental health and addiction challenges.

The program also plays an active role in community events, promoting mental health awareness and connecting residents to available resources.

Transportation remains a major barrier. Clients often travel long distances in harsh weather conditions, sometimes in temperatures as low as -40°C—to access services. The program helps mitigate this by providing transportation assistance or gas cards when possible.

The South Cariboo is a resilient and hardworking community that has faced numerous challenges over the past nine years. However, significant barriers remain, including limited access to mental health services, addiction support, affordable housing, and food security. Demand on local food banks and community organizations continues to grow, with recent reductions in food bank service days placing additional strain on vulnerable residents.

The Community Navigator Program helps meet these needs by providing emergency food support through the CMHA food cupboard and connecting individuals to available resources.

We are seeing increasing numbers of seniors and families seeking assistance due to rising costs of living, housing instability, physician shortages, and the ongoing impacts of mental health and addiction challenges.

Seniors Poverty Reduction Program (funded by The Prince George Community Foundation)

The Community Navigator supports local seniors through a limited but impactful program designed to assist those without access to other supports. Services may include:

- $50 FreshCo grocery cards
- $25 Chevron gas cards
- Prescription assistance
- Temporary heating/firewood support
- Emergency food from the CMHA cupboard
- Frozen meals through the “Soup de Tour” program

Legal Aid Support

As a Legal Aid BC Community Partner, the Community Navigator attends First Appearances at the 100 Mile House courthouse (Criminal Court) on the first Tuesday of each month, assisting clients with applications and access to legal resources.

Legal support is also provided to individuals experiencing domestic violence or navigating child protection matters, reducing the need for costly travel to larger centres. Services include:

- Assistance with Legal Aid applications
- Coordination with lawyers and intake services
- Document submission and reception from lawyers (email/fax)
- Referrals to duty counsel, legal clinics, and other organizations
- Facilitating meetings between clients and lawyers in CMHA offices

Additionally, many clients receiving legal assistance also require support with mental health, addictions, housing, and food security—needs that the Community Navigator helps address holistically.

Conclusion

Residents of the South Cariboo face disproportionate barriers to accessing essential services due to geographic isolation, limited transportation, and lack of reliable internet and communication infrastructure. These inequities result in reduced access to the same supports readily available in urban centres.

At the Canadian Mental Health Association, the Community Navigator Program is committed to strengthening community connections and improving equitable access to services. Our mission is to ensure that all residents—regardless of location, background, or circumstance—have the support and resources they need to thrive.

Kim Fraser- Community Navigator, Legal Aid BC Community Partner
Kristin Buxton- Community Engagement Coordinator

Acquired Brain Injury Program (funded by Interior Health Authority)

The Acquired Brain Injury (ABI) Program provides critical support and rehabilitation services to survivors of traumatic brain injuries (TBI), including those caused by strokes, accidents, assaults, and other incidents that impair an individual's ability to live independently. The primary goal of the program is to foster recovery and personal growth by helping individuals relearn and develop life skills essential for daily living.

Role of the Life Skills Worker

The ABI Life Skills Worker plays a key role in supporting clients through one-on-one assistance aimed at helping them regain independence and confidence. The support is tailored to each client's needs and includes:

- Attending and managing personal and medical appointments
- Grocery shopping and budgeting
- Accessing government and community services
- Relearning essential life skills such as cooking, managing stress, social interaction, and decision-making

Despite challenges in accessing healthcare professionals like speech therapists, occupational therapists, physiotherapists, and physicians in rural areas, the program has recorded notable successes. One example includes clients with apraxia who have made significant progress through consistent speech therapy exercises facilitated by the Life Skills Worker.

Geographic Scope and Caseload

The program is based out of Kamloops through Interior Health but operates extensively in the Cariboo region, covering communities such as 100 Mile House, Cache Creek, Clinton, Forest Grove, and Lac La Hache.

- Current active caseload: 11 clients
- Pending referrals: 6 clients
- Previous caseload: 8 clients

Due to transportation limitations, Life Skills Workers often travel to clients, ensuring continued support even in remote areas. Most ABI clients rely heavily on program-provided transportation for their essential appointments and community reintegration.

Community Integration & Extended Support

Several clients have achieved personal milestones, such as returning to part-time employment or engaging in volunteer work and other community activities. To address service access gaps and support individuals who fall outside Interior Health's eligibility criteria (due to age, documentation issues, or insufficient injury evidence), the Life Skills Worker helped establish a support group:

Cariboo Brain Injury Association (CBIA)

The CBIA was formed as an inclusive community support initiative to serve those unable to access the ABI Program directly but still in need of assistance related to brain injury. The group offers encouragement, peer support, and guidance in navigating life after brain injury.

Safe House (funded by BC Housing)

The Safe House program has operated under CMHA South Cariboo since the 100 Mile House & District Women's Centre closed in 2019. Safe House helps break the cycle of domestic violence by assisting women and children who are victims of domestic abuse. Safe House provides emergency housing, groceries, emotional support, safety planning, referrals and transportation to longer term transition houses, and referrals to counselling services, legal aid and other community resources as each individual client may require. Safe House Coordinators also work closely with 100 Mile House and Clinton RCMP Victims Assistance and with Williams Lake Community-based Victims Services. A CMHA Safe House Coordinator is available 24 hours per day, seven days per week.

Safe House Coordinators can offer women the information needed to make informed decisions. During the previous 2025/26 fiscal year Safe House provided eight-five overnight stays for women fleeing domestic violence, almost double the number of stays from the previous fiscal year. Stays were of longer duration as clients sought longer-term housing. Sixteen referrals to other community resources were provided to women who did not stay overnight in Safe House. Fifteen enquiries from other agencies about services available and from clients who had exceeded their allowed time in transition houses in other areas were responded to.

Safe House has faced increasing challenges during the past two years which highlight the need for first and second-stage housing in the 100 Mile House area. The lack of rental accommodation in 100 Mile House and vicinity makes finding housing for clients extremely challenging, and Safe House has often depended on the Homeless Outreach Program to assist in this area. Most women staying in Safe House in the past fiscal year also had

pets which could be accommodated in Safe House but made finding rental units or transportation out of the area very difficult.

Another challenge that emphasizes the need for housing is the lack of motel accommodation in spring, summer, and early fall in the 100 Mile area. Unlike the Homeless Outreach Program, Safe House does not have a dedicated motel room and must find rooms as needed. With the influx of various workers at times, there are often no motel rooms available in town. When tourist- attracting community events such as Hot July Nights car show are happening in 100 Mile, all motels are booked and there are no vacancies. This situation is extremely stressful for Safe House coordinators as we don't know where we can place women in a crisis should they need accommodation during these periods.

Roxanne Salinas
Safe House Coordinator

Homeless Outreach Program (Funded by BC Housing)

Annual General Report 2025/2026

The Homeless Outreach Program helps break the cycle of homelessness by assisting people who are homeless, or at risk of homelessness and in the 2025/2026 fiscal year, the Homeless Outreach Program has been extremely busy with many new and returning clients.

We are currently supporting 8-9 clients with shelter each day. While having shelter options are helpful, an increasing number of people are unable to meet the requirements to stay in our high-barrier motel room shelter spaces or have been asked to leave and are unwelcome at motels.

Currently we are administering 6 Homeless Outreach Program monthly supplements for a total of $1015 monthly and 35 CBCHB rental supplements for a total of $17,517.50 monthly. We do still have a few spots available for this program with a total of 47 subsidies available to members of community.

We were fortunate to receive funds from grants for Cold weather supplies from BC Housing and Interior Health of $5000 each for a total of $10,000. These funds were for winter boots, coats, clothes, propane, sleeping bags, socks, and gloves etc. To date we have supported over 40 community members with these funds.

We also received $25,000 from The Prince George & Nechako Aboriginal Employment and Training Association for the Reaching Home program, and we have been able to

support over 70 individuals with tents, gas cards, grocery cards, groceries, propane, butane cook tops, clothes etc. We have spent over $6500 of these funds to date.

BC Housing shelter funding has allowed us to continue to provide after-hours emergency supports 24/7 to individuals throughout the year, this has continued to be a much needed community support.

Rick McKinney – Homeless Outreach Worker

CMHA Senior's Outreach Program Report Annual General Meeting – June 2026 (West Fraser Rural Mental Health Grant)

The Senior's Outreach Program, launched in June 2025, was created to support older adults in our community who face barriers accessing essential services. When the role began, the distinction between outreach work and system navigation required clarification, but the program quickly evolved into a hybrid model—meeting seniors where they are, providing hands-on assistance, and guiding them through increasingly complex systems.

Public awareness grew through a *Free Press* article and community word-of-mouth, resulting in a steady increase in referrals and direct calls for support.

Program Activity and Services

Over the past year, the program responded to a wide range of senior-specific needs. Support provided included:

- **Transportation to appointments**-to reduce missed-appointment fees and ensure reliable access to care.
- **Assistance with personal finance issues**-including budgeting and resolving mismanagement concerns.
- **Pharmacare applications**-and other health-related paperwork.
- **Lifeline device setup**-for safety and emergency response.
- **Simple will preparation** and basic estate planning.
- **Advance care plan completion-**to document future health-care wishes.
- **Disability Tax Credit applications** and supporting documentation.
- **Property name changes after the death of a spouse**-and other administrative tasks.

These services reflect the diverse and often complex challenges faced by seniors—each requiring patience, advocacy, and personalized support.

Collaboration and Confidentiality

Many client needs overlapped with services offered by other CMHA staff. Collaboration across departments was essential and conducted with strict attention to confidentiality. This coordinated approach ensured clients received comprehensive support without compromising privacy.

Program Impact

The Senior's Outreach Program made a significant difference in the lives of 28 clients this year. Some required one-time assistance with a specific issue while others received ongoing, multi-issue support, often involving repeated appointments, follow-up, and coordination with external agencies.

For many seniors, the most meaningful impact was the reassurance that they could safely and reliably access services. Reliable transportation, help with paperwork, and system navigation reduced stress and increased confidence—especially for those who feared missed-appointment fees or felt overwhelmed by digital-only government systems.

Systemic Barriers Identified

The program also highlighted broader challenges affecting seniors in our community:

- **Mobility barriers**: Some local businesses and service providers are not accessible for individuals with limited mobility.
- **Digital exclusion**: Many government programs are now exclusively online, yet a significant number of seniors lack:
    - computers
    - smartphones
    - internet access
    - or the digital literacy required to navigate online systems

This digital divide has created substantial barriers to essential supports, leaving many seniors unable to access programs intended to help them.

Conclusion

In its first full year, the Seniors Outreach Program has demonstrated a clear and growing need for hands-on, personalized support for older adults. Serving 28 clients—each with

unique and often complex needs—underscores the importance of having a dedicated program to help seniors navigate systems that are increasingly inaccessible.

Through practical assistance, advocacy, and reliable transportation, the program has strengthened independence, reduced stress, and ensured that seniors in our community are not left behind.

Climate Change Task Force Project Review and Summary

2026 AGM Report

Canadian Mental Health Association - South Cariboo Branch

In February of 2023 our CMHA South Cariboo Branch initiated a Task Force to study and address the mental health impacts of severe climate and weather-related events in the South Cariboo. Those events include wildfire, drought, extreme storm and severe heat. Because the mental health-related effects of these events are wide-spread, having varied influences across the entire population in the South Cariboo, we readily acknowledged that they constitute a public health threat, far beyond the response capacities of first responders and other health care agencies, like the CMHA. This awareness shaped our identification of project priorities resulting in the following documents and outcomes:

Needs assessment:

Survey of the Impacts of Wildfire and Extreme Weather in the South Cariboo.

Respondents to this survey confirmed both significant concern and interest in the vulnerabilities of South Cariboo residents and communities due to weather and climate related impacts.

Community Development/Resilience:

Climate Mental Health Community Development Coordinator

The intent of our Climate Mental Health Community Development Coordinator position, as elaborated in our job description document, is to provide support to community organizations/agencies and all residents in the South Cariboo who are experiencing climate related mental health distress. The Climate Mental Health Community Development Coordinator would utilize a community-wide public health systems approach that employs prevention and intervention strategies designed to help others manage climate mental health distress. Regrettably, we have not obtained funding for this position.

Asset Based Community Development Project

Given the scope of climate/weather-related impacts as a public health crisis, we identified, adopted and implemented the well-established strategic approach of Asset Based Community Development as a resource supporting community strength and resilience.

Information Resources:

Climate Distress Resources List

Information is essential to awareness and empowerment in responding to the chronic and acute mental health effects of severe environmental impacts. This list provides a variety of informative resources in several different formats. Our Task Force also initiated the creation of what has been a work in progress of a First Aid Kit of resources for individuals in immediate need of support.

Funding:

Climate Mental Health Task Force Funding Proposal Framework

This document establishes the scope and specifics of context for funding pursuits in support of our Task Force Projects, in particular our desire to create a full-time staff position as named above. As we have pursued funding resources we have regrettably encountered a culture of funders as yet disinclined to support both the issue of environmental mental health impacts and relatively small service areas like that of the South Cariboo.

Conclusion:

In conclusion, with this report, we are also announcing an end to our Task Force endeavor. Currently, given economic conditions within the province and beyond, and also due to the affiliated reductions in CMHA staff capacity, we encountered a circumstantial limit to a continued pursuit of our initiatives. I heartily thank Task Force members Kitten Cadrin, Howard Kirkham, and Marty Norgren, along with Kristen Buxton, Emily Pletsch, Susann Collins and Marnie Jenson, for their numerous and varied contributions. There are many untold hours of their devoted effort residing behind the documented evidence of our three-year project. As we bring our effort to a close, we will be compiling a file of the documents and reports produced in our pursuit of the initiatives named above. We expect that file to reside as an archive in support of others having similar intentions.

Our effort has been an inspired learning curve, from which we have personally benefited in gaining insight into the evolving mental health crisis effected by the environmental declines humanity is creating, and will be facing. We hope that our effort will reside as a meaningful

context for further initiatives. We anticipate that a future of urgent crises lies ahead, certainly calling out for the care they will provide.

Rick Meyer, Task Force Chair

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