

## **MINISTRY OF HEALTH INFORMATION BRIEFING NOTE**

**CLIFF:** 1227067

**PREPARED FOR:** Honourable Sheila Malcolmson - **FOR INFORMATION**

**TITLE:** Ukraine Arrivals and Mental Health Supports

**PURPOSE:** Outlines the Ministry's current and future work to support the mental health needs of displaced Ukrainians arriving in BC.

### **BACKGROUND:**

As a result of the Russian Federation's invasion of Ukraine in February 2022, and ongoing war, it is expected that a significant number of people, mostly women and children will arrive in BC from Ukraine over the next 12 months. Between January 1 and May 1, 2022, a total of 22,645 Ukrainian citizens, including returning Canadian permanent residents of Ukrainian origin have arrived in Canada. Based on recent federal survey data BC could receive approximately 20,000 displaced Ukrainians in 2021/22 and to date approximately 1500 displaced Ukrainians have arrived in BC.

The BC Government has established provincial Deputy Minister (DM) and Assistant Deputy Minister (ADM) Working Groups on Ukraine to share information from the federal government immigration programs, build awareness of ministry approaches to the crisis, work on solutions to address gaps, provide policy direction to the ADM Working Group and liaise with relevant Federal/Provincial/Territorial Tables and Working Groups. For more information, see Terms of Reference DM Working Group on Ukraine.

Ukrainian arrivals are eligible for all publicly funded BC health care programs funded by the Ministry of Health (HLTH), including acute and primary care services, community health services including mental health and substance use (MHSU) services, public health, and senior's services. HLTH has expanded the Medical Services Plan (MSP) eligibility criteria for Ukrainian arrivals and waived the three months wait period. As of May 5, 2022, approximately 400 Ukrainian arrivals have enrolled in MSP and Pharmacare has created emergency BC Pharmacare coverage for Ukrainian arrivals that allows for urgently needed eligible prescriptions to be covered 100%.

Ministries supporting the DM/ADM Working Group have also established a list of eligible programs and services for Ukrainian arrivals including health care, housing, childcare, education, employment, and income support. The Ministry of Children and Family Development (MCFD) is also providing access to all direct and contracted community-based mental health services for Ukrainian children, youth under the age of 19 with potential development of additional counselling and support services pending the number of new arrivals.

The Honourable Nathan Cullen, Minister of Municipal Affairs, announced on May 3, 2022, an additional \$15 million over two years for BC settlement and integration programming, including better access to labour-market services, trauma counselling and increased staffing of the BC211 information and referral services.

## **DISCUSSION:**

Many Ukrainian arrivals have experienced trauma, anxiety, and depression and many will require mental health services including crisis intervention, mental health assessment and treatment services, including trauma counselling, health information, and referrals to appropriate provincial and local health and community social services. Following their arrival, the initial focus of the Ukrainian arrivals is safety and security of their family and themselves. This includes securing shelter, food, employment, child education, income support and access to health care. In alignment with evidence and population health patterns, it can be predicted that many new arrivals will seek access to local mental health services to address increased levels of depression, anxiety, and trauma within one to six months of arrival.

It is projected that the existing publicly funded mental health services provided by health authorities (HA) and the recently enhanced BC settlement and integration programs that include trauma counselling will be able to respond to the mental health needs of approximately 15,000 - 20,000 Ukrainian arrivals. Once the number of Ukrainian arrivals exceed approximately 15,000 people, it is estimated that the following mental health enhancements will be required:

- Increase the capacity of the Youth and Adult Cross Cultural Mental Health Clinics within the Lower Mainland including virtual capacity to support Ukrainian arrivals outside the Lower mainland.
- Establish regional coordinators within each health authority to coordinate access to local mental health services.
- Enhance community counselling and support groups for Ukrainian youth and adults throughout BC. These counselling and support groups would address trauma, depression, anxiety, and include peer support services. Considering the Canadian Mental Health Association (CMHA) has chapters throughout BC and strong linkages with NGOs of the Community Action Initiative (CAI), this service could be provided province wide, either directly by CMHA or subcontracted to CAI agencies.
- Enhance existing MHSU crisis line services to address the immediate mental health needs of Ukrainian youth and adults experiencing a mental health crisis.
- Enhance provincial MHSU website: [heretohelp.bc.ca](http://heretohelp.bc.ca) by including translated MHSU information for Ukrainian arrivals.

To support planning and responses required to support new Ukrainians, a provincial advisory committee is being established, lead by HLTH, in partnership with Ministry of Mental Health and Addictions (MMHA), HAs, Ministry of Municipal Affairs, CMHA, and other key stakeholders to monitor the number of Ukrainian arrivals and if required, support and oversee the implementation of the recommended enhanced mental services, including ongoing close examination whether the enhancements meet the needs of the Ukrainian arrivals. This committee will link with the work of the provincial ADM Working Group on Ukraine.

## **FINANCE**

The estimated annual costs of the recommended enhanced mental services outlined above is estimated at \$3.04 million. Also, the Office of the Comptroller General (OCG) is implementing a financial reporting process to capture direct and incremental expenditures for costs of the Ukrainian arrivals. HLTH is working with health authorities to track

expenditures and will work with the Ministry of Finance to address any budgetary pressures at fiscal year end.

**ADVICE:**

The existing publicly funded mental health services provided by HAs and the recently enhanced BC settlement and integration programs will be able to address the mental health needs of approximately 15,000 - 20,000 Ukrainian arrivals. Once the number of Ukrainian arrivals exceed 15,000 people, enhanced mental health services, including assessment, treatment and trauma counselling services will be required to address the mental health of Ukrainian arrivals.

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**Drafter:** Gerrit van der Leer and Jessica Sahlstrom

**Date:** April 28, 2022

**File Name with Path:**

**MINISTRY OF MENTAL HEALTH AND ADDICTIONS  
INFORMATION BRIEFING NOTE**

**CLIFF: 1230300**

**PREPARED FOR:** Honourable Sheila Malcolmson, Minister - **FOR INFORMATION**

**TITLE:** Managed Alcohol Programs (MAPs) Update

**PURPOSE:** Update on the regulatory change to exempt MAPs from the *Liquor Control and Licensing Act* (LCLA), provide reduced cost alcohol for MAPs, and outline next steps.

**BACKGROUND:**

Managed Alcohol Programs (MAPs) support adults with severe Alcohol Use Disorder by dispensing measured doses of alcohol to clients at key intervals to prevent over-intoxication, manage withdrawal symptoms, and reduce reliance on non-beverage alcohols, such as hair spray or cleaning products. MAPs provide an evidence-based method of harm reduction, and they have been shown to decrease emergency health service utilization, improve physical health outcomes, and reduce housing instability.<sup>i ii</sup>

As part of Budget 2021, government committed to funding 3 new and 2 expanded MAPs. These include:

s.17

- Expanding PHS Community-Based MAP in Vancouver's Downtown Eastside: implemented
- Expanding Gwa'dzi MAP in Port Hardy, operated in conjunction with the Gwa'sala-'nakwaxda'x First Nation: implemented

s.13; s.14

s.13; s.14

With support from MMHA, MOH and the Liquor and Cannabis Regulation Branch (LCRB) of PSSG, an amendment was made to the *Liquor Control and Licensing Regulation* (LCLR) to exempt MAPs from oversight under the LCLA.

**DISCUSSION:**

Regulatory Change

The Order in Council exempting MAPs from the LCLA was approved by Cabinet on April 6, 2022. Importantly, the exemption requires that all MAPs be approved by a health authority to legally operate in BC. This ensures that current and future clinician-led and community-based MAPs will not be subject to interference or enforcement actions taken under the LCLA, while also safeguarding potential public safety and health concerns by only exempting programs that serve a harm reduction and public health interest. This change has been communicated to all regional health authorities, the First Nations Health Authority (FNHA), and the Provincial Health Services Authority (PHSA).

To support health authorities in the MAPs approval process, a working group has been established to set out the minimum safety and operational standards for MAPs in BC. The goals of these standards are to:

- Protect the health and safety of participants and reduce risks to program staff and the health authority
- Allow for the continued and expanded operation of MAPs (including low-barrier programs)

The working group is led by the Ministry of Health's Population and Public Health Division and supported by the Substance Use Policy team at MMHA. Membership in the working group also includes HLTH's Mental Health and Addictions Division, regional health authorities, FNHA, and PHSA. s.13; s.17  
s.17

#### Access to Reduced-Cost Alcohol

One significant challenge for MAPs operating in BC has been the cost of purchasing alcohol. MAPs have been required to purchase alcohol at full retail price, which represents a large portion of program operating costs. MMHA and HLTH have worked with the Liquor Distribution Branch (LDB) to identify an option for MAPs to access alcohol at a reduced cost.

After a comprehensive review of the relevant legislation and policy, it was determined that the only available option is for MAPs to purchase directly from BC manufacturers. Moving forward, MAPs will be able to work with BC beer, wine, and spirit manufacturers to negotiate sales directly through the *Liquor Distribution Act's* "medicinal purposes" exemption. This will exempt alcohol sales for MAPs from wholesale mark-ups and minimum retail prices requirements.

This option represents a significant advancement in the ability of MAPs to access affordable alcohol. However, alcohol must be sourced individually from manufacturers, and the system relies on manufacturers' willingness to provide reduced pricing at their own discretion. Further, this exemption is limited to BC manufacturers, which restricts the products and brands available to MAPs at non-retail prices. In some cases, MAPs may still need to purchase products through retail stores to support client preferences.

#### **ADVICE:**

MMHA will continue to advance policies and initiatives that reduce barriers and enable access to MAPs as important harm reduction programs. Ministry staff will support the work of the Minimum Standards Working Group to ensure that MAPs are operated safely and consistently across the province.

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**Date:** May 31, 2022

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- <sup>i</sup> Stockwell, T., Zhao, J., Pauly, B., Chow, C., Vallance, K., Wettlaufer, A., Saunders, J. B., & Chick, J. (2021). Trajectories of alcohol use and related harms for managed alcohol program participants over 12 months compared with local controls: A quasi-experimental study. *Alcohol and Alcoholism* 56(6), 651-659.
- <sup>ii</sup> Pauly, B., Brown, M., Evans, J., Gray, E., Schiff, R., Ivsins, A., Krysovaty, B., Vallance, K., & Stockwell, T. (2019). “There is a place”: Impacts of managed alcohol programs for people experiencing severe alcohol dependence and homelessness. *Harm Reduction Journal* 16.