

Access to Mental Health Care for People with Intellectual and Developmental Disabilities

Plain Language Version

Adopted January 2025

All people should have access to timely, effective, accessible, and culturally safe mental health care. All levels of government must enact their identified responsibilities to take the right measures to provide mental health care that improves people's quality of life. The measures should provide coordination of care between mental health and disability-related supports.

Access to mental health care should exist on a continuum, addressing needs across the lifespan. For this position statement, we are highlighting specific needs and calls to action for people with intellectual and developmental disabilities of all ages.

Our position statement aims to challenge racist,¹ ableist,² colonial³ and other unfair ideas about people with intellectual and developmental disabilities. Our goal is to promote the inclusion of everyone in the community, no matter how much money they have, where they come from (background or culture), what their religion is, if they are married or not, what their sex, sexual orientation, or gender identity and expression is, their age, or the type of disability they live with.

We recognize and support Indigenous rights and titles across British Columbia. We support the UN Declaration on the Rights of Indigenous Peoples, the 94 Calls to Action by the Truth and Reconciliation Commission, and the B.C. Declaration on the Rights of Indigenous Peoples Act.

[To skip the background and rights-based section and move directly to the calls to action, click here.](#)

¹ Racist – discriminatory ideas against a person or group of people because they belong to a particular racial or ethnic group.

² Ableist – discriminatory ideas against people with disabilities.

³ Colonial – ideas imposed from one group of people to another.

Background: People with Disabilities and Mental Health

What is Dual Diagnosis?

"Dual diagnosis" means having both intellectual and developmental disabilities along with mental health challenges and/or substance use. Research shows that children and youth with these disabilities are more likely to have mental health challenges. Approximately 45% of adults with developmental disabilities also have a mental illness or addiction. This creates additional challenges, and they may face more barriers to accessing the support and treatment they need.

In Canada, mental health is now the most common type of disability. The need for specialized mental health services is increasing. Projections suggest that the number of people with intellectual and developmental disabilities will double every 20 years. Supporting people throughout their lives is essential.

To make sure everyone gets the right mental health support, it's important to consider the different parts of people's identity. For example, Indigenous people and people who are 2SLGBTQIA+⁴ often face more mental health challenges and disabilities. People with intellectual and developmental disabilities deserve the same chance as anyone else to live a good life, including access to mental health care where they can make their own choices.

Culturally Safe Care

Newcomers and people from different cultural backgrounds often face more mental health challenges because of discrimination and isolation. Cultural safety means that mental health services should respect differences in culture, language, identity, and beliefs. Using an equity⁵ lens in health care helps promote cultural safety for

⁴ 2SLGBTQIA+ stands for Two-Spirit, Lesbian, Gay, Bisexual, Transgender, Queer, Questioning, Intersex, Androgynous, Asexual, plus.

⁵ Equity means rather than treating everyone the same, people receive what they need based on their needs.

Indigenous people, immigrants, racialized groups, people with disabilities, and the 2SLGBTQIA+ community.

Different Indigenous cultures have their own views on disability. The 2023 Indigenous child and youth mental wellness framework, "[Culture is Healing](#)," focuses on the person, their family, community, culture, and land. It calls for more services for children and youth with support needs, the involvement of Elders and Knowledge Keepers, and the importance of culture- and land-based prevention supports and services.

Mental Health for Children and Youth

Rights Specific to Children and Youth

All children and youth, especially Indigenous children and children with disabilities, have the right to health care, including mental health care. In 1991, Canada signed the [United Nations Convention on the Rights of the Child](#). This helps ensure the rights of children are respected, including the right to the best possible health. It also helps to make sure no child is denied access to health care.

What Has Been Done: Background for Children and Youth

Service Delivery History

From 2000 to 2005, the Ministry of Children and Family Development (MCFD) provided services for Children and Youth with Support Needs (CYSN). In 2003, MCFD created Children and Youth Mental Health (CYMH) services. In 2005, CYSN services moved to Community Living BC (CLBC) but returned to MCFD in 2009.

Since 2009, MCFD has provided CYSN and CYMH services for children and youth with dual diagnosis. For 2025, there are changes expected to who delivers all these services.

Recent Efforts

Since 2018, the government has been working on a new framework for CYSN services. In 2021, pushback led to a pause and reset. Premier David Eby said that “every child in B.C. should have the supports they need to thrive.” However, this is still not happening in many areas of children’s lives.

The Representative for Children and Youth says that important changes to the CYSN framework are still a year or more away from being available. This delay is harmful to children and youth with disabilities who need support, including mental health support. In the redesign of the system, there should be enough resources, and support should focus on individual needs, not only diagnosis.

The Representative for Children and Youth has issued reports recommending that the government remove barriers and provide a proper mental health service system for children and youth with support needs. The government should create and fund a plan that offers mental health screening, assessment, and treatment services to ensure needs are met.

Service Gaps

Limited Supports and Services

Publicly funded mental health services for children and youth with dual diagnoses are provided through Child and Youth Mental Health services, specialized Developmental Disabilities Mental Health services, hospital services, and complex care programs. However, Child and Youth Mental Health services lack the appropriate support for this group’s needs across the province, and Developmental Disabilities Mental Health services and complex care programs are limited in who they can help.

The 2019, [Child and Youth Mental Health Service Framework](#) says that Child and Youth Mental Health teams provide assessment and treatment for children with both developmental disabilities and mental health challenges. However, in 2020, it was found that none of these teams in B.C. are focused on dual diagnosis and there are no specialists for this population. Instead, they are referred to regional

Developmental Disabilities Mental Health services, which have long wait times and limited access to support.

Mainstream Services

Mainstream mental health services, like the [Foundry](#), are intended for all youth, but families have told us these services often do not support youth with intellectual and developmental disabilities. These services need more resources and training to support people with dual diagnosis in every community. Currently, the workforce necessary to meet existing demand is lacking.

Transitions

[Research](#) shows transitions into adulthood can worsen mental health symptoms for many people with intellectual and developmental disabilities. However, it is difficult to get accurate information about health effects during these times because the systems are not well connected.

The lack of collaboration between government ministries makes it hard for many families to meet their children's needs, especially during transitions. Families often find it tough to connect with Community Living BC services before their child turns 19. This means they might not get the help they need until they are 20 or 21 years old.

Without a **strategy for training, recruiting, and attracting specialists in mental health professions**, people's needs will continue to go unmet. Because people do not get the help they need, they often end up in crisis before getting support. Access to **prevention and assessment** services would better help people.

Government Plans for Children and Youth

2023 Report by the Representative for Children and Youth

The 2023 report [Toward Inclusion](#), highlights a strong need to include improvements to mental health services for children and youth into the province's next Accessibility Plan. BC's current [Accessibility Plan](#), which runs from 2022-2025, is silent on mental

health services for children and youth with disabilities who require care delivered in ways that meet their needs.

A Pathway to Hope

The [Ministry of Health's 2023-2026 Service Plan](#) includes plans to improve services for children and youth by putting into action [A Pathway to Hope](#). This is a guide for improving mental health and addiction care in British Columbia. It focuses on helping children and youth through prevention, early intervention, integrated care, and mental health support in schools.

Mental Health in Schools

Schools play an important role in supporting the mental health of children and youth. The [Mental Health in Schools Strategy](#) recognizes that schools are key places for students to get care. To make sure students get the support they need, schools should connect with government and community resources. Without understanding how to support students with dual diagnoses, they miss out on these efforts. We spoke with families whose children were removed from school due to mental health challenges. They wondered how their children could recover without these crucial supports in place.

To help people with dual diagnoses, **there needs to be better and more complete mental health services and supports available across different care options. This must include access to specialized mental health professionals for people with dual diagnosis.**

Mental Health for Adults

Rights of People with Disabilities

In 2010, Canada agreed to the [UN Convention on the Rights of Persons with Disabilities](#), which says people with disabilities should be treated equally and not face discrimination in areas like school, health care, work, and family life.

In its 2017 [report](#), the Committee on the Rights of Persons with Disabilities was worried about extra discrimination against women, girls, Indigenous people, and people with disabilities in Canada. These groups are more likely to face violence, poverty, and a lack of mental health care.

In reviewing the human rights records of Canada, the 2023 [Report of the Working Group on the Universal Periodic Review](#) recommends that Canada work harder to make sure everyone has the right to health care, especially Indigenous people and minorities. This means removing barriers to mental health care and making sure policies respect people's rights and choices.

On June 21, 2021, the [UN Declaration on the Rights of Indigenous People Act](#) became law in Canada. It is a law that requires the government to follow a [Declaration](#) that says Indigenous people have the same right to the best physical and mental health as everyone else, and Canada must work to make this happen.

What has been Done: Background for Adults

Early Efforts

For over 20 years, there have been concerns that the system focuses more on fitting people into programs than on meeting their individual needs. In the 1990s, specialized Developmental Disability Mental Health (DDMH) teams were created for people with dual diagnosis. These services are managed by regional health authorities. However, limited access, divided services, and a lack of consistent care for people with dual diagnoses are ongoing problems across systems.

Provincial Assessment Centre (PAC)

The PAC is a specialized mental health service for people 14 and older with developmental disabilities and mental health challenges. It provides inpatient and outpatient care but has limited capacity, with only ten beds available for all of B.C.

Re-imagining Community Inclusion

In 2018, the [Re-imagining Community Inclusion](#) initiative was launched to create a pathway for the future of community inclusion. Throughout 2021, the [Re-imagining Community Inclusion Work Plan](#) was developed. It identified health— including mental health, as a priority to improve the lives of people with intellectual and developmental disabilities in B.C.

Collaborative Guidelines

The [Guidelines for Collaborative Service Delivery for Adults with Developmental Disabilities](#) and the [2007 Planning Guidelines for Mental Health and Addiction Services for Children, Youth, and Adults with Developmental Disabilities](#) were developed to ensure that people with developmental disabilities receive fair and proper care. These guidelines are supposed to guide how services are provided, but many people are not aware of them, and they are not always followed in practice.

The guidelines say that Developmental Disabilities Mental Health Services (DDMHS) should provide:

- Thorough assessment and diagnosis.
- Local referral processes in collaboration with Community Living BC.
- Treatment recommendations that primary care providers and family doctors should follow.
- Collaboration with individuals, families, and support teams to create and follow up on support plans.
- Collaboration with mainstream mental health services and appropriate healthcare services.

There must be a **review and update of the 2007 Mental Health Guidelines**, including the development of training and implementation with accountability measures to show they are working.

Government Plans for Adults

In 2022, the government announced the [Complex Care Housing program](#), which includes people with intellectual and developmental disabilities and mental health challenges. However, the demand for services still exceeds the availability.

The [2023 mandate letter](#) directs Community Living BC to improve access to mental health services. The [Ministry of Health 2023-2026 Service Plan](#) includes goals for better, more accessible health services to support people with dual diagnosis.

The Ministry of Health says it will strengthen access to quality mental health services and implement the [Pathway to Hope plan](#). This is aimed at prevention, early identification, improving quality and access to services, and enhancing mental health and substance use services. These goals are supposed to be achieved between 2023 and 2026, but so far, they have not been met for people (children, youth, or adults) with dual diagnosis.

Existing Challenges and Barriers to Mental Health Care

Data collection

There are not enough mental health supports in the province for people with intellectual and developmental disabilities. This leads to long wait times and crises that could be avoided. There is no clear information on how waitlists are created and who is waiting for services.

B.C.-specific information is needed to help plan services to best meet the mental health needs of all children, youth, and adults with dual diagnoses.

Lack of Doctors and Mental Health Care

Doctors and primary care providers are key entry points for accessing specialized services. However, they often lack the training and expertise to help people with intellectual and developmental disabilities. Lots of people in B.C. don't have a doctor and waitlists can be very long. This means people do not have the support they need.

The current availability of mental health care for people with intellectual and developmental disabilities in B.C. does not meet the level of need. Not all supports for people with dual diagnosis need to be addressed by specialized services; mainstream services should be capable of supporting a wide range of needs.

An intellectual and developmental disability should not be a barrier to accessing mental health support.

People with lived experience say it's important to have:

- Different options for support,
- Help to navigate resources and fill accessibility gaps,
- Access to support during a crisis,
- Daily mental health support that focuses on overall well-being, not only medication, and
- Involvement in the design of mental health supports and services.

There are still many gaps and barriers in mental health services and supports, including long waits, difficulty accessing services (especially in remote regions), high costs, lack of professionals trained in dual diagnosis, and a lack of culturally safe services. These issues should be addressed as part of Canada's human rights obligations.

Calls to Action

It is the job of the provincial government to improve access to mental health care for people with intellectual and developmental disabilities, and it must act immediately to do so. We call on the government to:

- Develop and fully fund an inclusive, equitable, robust, and culturally safe **mental health strategy** to fully respond to the needs of people with intellectual and developmental disabilities across the lifespan. Provide a range

of options along a continuum of care that are coordinated across systems and with appropriate accountability measures in place.

Key elements of a successful mental health strategy would include:

- Ensure **mainstream mental health services become inclusive** of people with intellectual and developmental disabilities and invest in **community-based supports** across the province. Make sure they have the capacity to provide timely, appropriate, and ongoing mental health support with trained professionals and resources.
- Create a **strategy for training, attracting, and recruiting generalists and specialists** with professional expertise in the mental health of people with intellectual and developmental disabilities. This must increase the capacity of specialized services, adequately support transitional periods, and meet regional needs.
- Review and **update the Mental Health Guidelines** (2007) and create a framework to implement and establish accountability measures, including regulation.
- Increase funding for **early access to wellness supports and assessment** aligned with the Re-imagining Community Inclusion Roadmap.
- **Coordinate and emphasize** the roles and responsibilities of government, ministries, health authorities, school districts, Community Living BC, and social service organizations to respond to people's mental health needs and ensure a continuum of care.
- **Create an independent oversight⁶ structure** to protect the rights of people with intellectual and developmental disabilities who need health and mental health support.

⁶ Oversight means the actions taken to review and monitor public services to ensure they are achieving expected results.

- Support **data collection** among relevant ministries and public bodies, as well as provincial **research** on intellectual and developmental disabilities and co-occurring mental health challenges.
- Establish mechanisms to **include people with disabilities** in designing and redesigning mental health care services, including using an intersectional lens to account for the multiple factors that impact a person's life.

People with intellectual and developmental disabilities must have all the support needed to realize their right to mental health. The UN Convention on the Rights of Persons with Disabilities says that people have the right to enjoy the best possible health without being treated unfairly because of a disability. We need strong actions to remove barriers and create a mental health service system that is inclusive and complete.