

## What we heard

### Roundtable Dialogue with LGBTQ2S+ Communities

Vancouver, June 1, 2018

On June 1, 2018, the Honorable Judy Darcy, British Columbia's Minister of Mental Health and Addictions, convened 24 LGBTQ2S+ service-providers and community leaders for a roundtable dialogue in Vancouver.

This dialogue was part of the Ministry's engagement process for developing a strategy for a seamless, coordinated mental health and addictions system that is free of discrimination and stigma, culturally-safe and focused on a path forward. The initial stages of the process include meeting with a broad spectrum of individuals and organizations, as well as Indigenous peoples across the province. In addition, we are encouraging people to share their feedback on mental health and addiction services on the B.C. Government Engage [website](#). What we learn from this engagement process will help inform the mental health and addictions strategy and be incorporated into a final report.

The Ministry recognizes that B.C.'s mental health and addictions system needs reform in spite of the best efforts of service providers who are working hard every day to serve people's needs. Hosted by the Honourable Minister Darcy and facilitated by Simon Fraser University's Morris J. Wosk Centre for Dialogue, the roundtable provided an opportunity to listen and learn from the experiences of members of LGBTQ2S+ communities—so we can build from the strengths and approaches that are successful.

Following opening remarks from Minister Darcy, participants were invited to introduce themselves and to share what brought them to this dialogue. After the opening circle, participants met in small breakout groups supported by a table facilitator to discuss what—based on their experience or observations—has worked or is currently working in the mental health and addictions system, and what challenges they have encountered or observed. Next, participants discussed in their breakout groups what changes would make a difference and identified priorities for action. In a closing circle, participants shared what gives them hope and what more needs to change in the mental health and addictions service system.

Participants' experiences and specific suggestions were captured by note-takers and through worksheets.<sup>1</sup> This report summarizes participants' input and suggestions by themes, illustrated with selected individual responses recorded in participants' own words. The themes listed in this report are ideas or suggestions mentioned in at least two participant worksheets. This means that the list does not indicate an order of priority.

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<sup>1</sup> The testimonies and suggestions recorded in this report do not necessarily reflect the views of the Ministry of Mental Health and Addictions or its staff. Individual statements reproduced in participants' own words are identified as such through quotation marks.

Decriminalization and legalization of drug and substance use including greater access to opioid alternatives other than suboxone and methadone was most frequently mentioned as a priority for action. A large number for participants also called for better access to mental health and addictions services, increased availability of services, using existing facilities more effectively. It would also include lowering barriers to services, by providing services in multiple languages or reducing eligibility requirements. Participants also called for increased medical services plan (MSP) coverage for counselling services to make them more accessible.<sup>2</sup> Many participants also called for increased involvement of voices that are not currently heard, in particular the voices of trans-feminine individuals, sex workers and drug users.

The availability of competent and specific services to LGBTQ2S+ communities was a priority for many participants. This included calls for mandatory training of publicly-funded health professionals and effective accountability measures for service agencies and tangible consequences for harmful behaviour. Harm reduction measures were highlighted as a priority, as were systemic responses to addressing the overdose crisis, from treatment programs to affordable housing and education.

The full list of themes for priority changes and improvements includes:

- Decriminalization and legalization of drug and substance use
- Better access to mental health services
- Increased MSP coverage for counselling services
- Involving voices that are not currently heard
- LGBTQ2S+ competent and LGBTQ2S+ specific services
- Harm reduction
- Addressing overdose crisis systematically
- More funding for peer support and services provided by existing community groups
- Increased support for culturally-competent/sensitive services
- Providing sufficient training on trauma-informed/specific practices
- Increased crisis intervention and 24/7 emergency mental health services
- Taking a preventative and proactive approach to mental health, including through education and training
- Expanding LGBTQ2S+ specific services and networks to rural settings

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<sup>2</sup> Because this change was mentioned frequently, it is listed here as its own theme.