



**Family Support Institute of BC (FSI)
Budget 2027 Submission
Select Standing Committee on Finance and Government Services**

For more than 40 years, the Family Support Institute of BC has walked alongside families of children, youth, and adults with disabilities.

Every day, families contact us looking for help. Increasingly, they are not asking for more. They are asking for something.

Anything.

Parents are exhausted. Caregivers are burning out. Children are reaching crisis before services become available. Adults with disabilities are waiting years for support. Families are being forced to navigate fragmented systems that are difficult to access, difficult to understand, and too often unavailable when they are needed most.

The reality facing many British Columbians today is simple:

Support comes too late.

Budget 2027 presents an opportunity to change that.

Recommendation 1 (MCFD)

Invest an additional \$100 million annually to fully implement the Children and Youth with Support Needs (CYSN) model, ensuring children and families have timely access to funding, early intervention, respite, therapies, behavioural supports, navigation, and family preservation services before needs escalate into crisis.

Explanation:

The Province estimates that approximately 107,000 children and youth in British Columbia have disabilities or support needs. Yet many families continue to struggle to access services until circumstances have significantly deteriorated.

The current approach remains largely crisis-driven and inconsistent with decades of evidence demonstrating that early intervention improves outcomes, strengthens family capacity, reduces long-term costs, and prevents the need for more intensive interventions later.

As government transitions to the new CYSN framework, families have expressed concern about the Disability Benefit and Disability Supplement model. Many fear that supports they currently receive may be reduced, replaced, or become insufficient to meet their child's needs.

No child should lose support as a result of system transformation.

The success of the new CYSN model must not be measured simply by how many families become eligible. It must be measured by whether children and youth actually receive the services they need when they need them. The system needs to be looking at over-arching need – not just severity of impact.

Investments should prioritize direct-funding, early intervention, family support, respite, therapies, behavioural supports, Indigenous-led services, navigation, and rural and remote access. The Province must ensure the model is inclusive, accessible, and barrier-free so that every child can access support based on need, not crisis.

The most effective child protection strategy is ensuring families receive support before they reach a breaking point.

Recommendation 2 (MCFD, MSDPR, MoH, MECC)

Invest an additional \$150 million annually through the Ministries of Health, Children and Family Development, Social Development and Poverty Reduction, and Education and Child Care to expand and coordinate disability-competent mental health services, including counselling, psychiatry, telepsychiatry, caregiver supports, care coordination, peer support, and transition services for children, youth, adults, and families with disabilities.

Explanation:

Mental health is one of the most significant unmet needs identified by families across British Columbia.

Through FSI's recent provincial engagement on child and youth mental health, families described lengthy waitlists, fragmented services, shortages of psychiatrists and counsellors, restrictive eligibility criteria, and a lack of providers equipped to support people with disabilities.

Too often, families are told their child is too complex for one service and not eligible for another. Too often, children deteriorate while waiting.

Children and youth with disabilities experience disproportionately high rates of mental health challenges, yet access to specialized, disability-informed supports remains limited. Families frequently find themselves navigating multiple ministries, health authorities, and service systems with little coordination and no clear accountability.

Funding should support counselling and psychotherapy, expanded psychiatry capacity, telepsychiatry for rural and remote communities, family and caregiver mental health supports, peer navigation, culturally safe services, disability-competent training, and improved transitions between child and adult systems.

Mental health care should not depend on where a family lives, whether they have a family physician, or how long they can survive on a waitlist.

Investing early improves outcomes while reducing pressures on healthcare, education, child welfare, and justice systems.

Recommendation 3 (CLBC; MSDPR)

Invest an additional \$100 million annually in Community Living BC (CLBC) to reduce waitlists, strengthen direct supports, address workforce shortages, expand housing and community inclusion opportunities, improve crisis prevention, and support aging caregivers and families.

Explanation:

Adults with intellectual and developmental disabilities continue to experience growing waitlists and unmet support needs across British Columbia.

Families report waiting months or years for residential supports, home sharing, community inclusion programs, employment services, behavioural supports, crisis response, and individualized planning and support. Many aging parents continue providing intensive support because no viable alternatives exist.

While annual budget increases have generally reflected population and caseload growth, they have not adequately addressed accumulated unmet need.

Importantly, new investments must be directed toward front-line supports and services that have a direct impact on individuals and families. Funding should not be primarily absorbed through administrative growth, executive expansion, infrastructure costs, or additional layers of management.

Families are not waiting for more organizational structure.

They are waiting for services.

Funding should prioritize waitlist reduction, direct services, housing, community inclusion, workforce recruitment and retention, crisis prevention, transition planning, and supports for aging caregivers.

The measure of success should not be the number of positions created within the system. It should be the number of individuals and families who finally receive the supports they have been waiting for.

Investing in community supports costs significantly less than responding to crisis

Conclusion

The recommendations contained in this submission are not requests for new systems or additional layers of bureaucracy. They are investments in the supports that children, adults with disabilities, and families have been asking for—and waiting for—for years. They are investments that help children receive support before they reach crisis, strengthen families and prevent breakdown, and ensure people with disabilities can live safe, meaningful, and inclusive lives in their communities with the supports they need to thrive.

FSI is recommending targeted investments of:

- \$100 million annually to ensure the new CYSN model delivers meaningful, barrier-free access to early intervention, family support, respite, therapies, and family preservation services;
- \$150 million annually to expand disability-competent mental health services for children, youth, adults, and caregivers; and

- \$100 million annually for Community Living BC to reduce waitlists and ensure funding reaches the front-line services, supports, and housing options that individuals and families urgently need.

Together, these investments represent an opportunity to fundamentally strengthen the systems that support children, adults with disabilities, and their families. They recognize that prevention is not only more effective than crisis response—it is also more humane and fiscally responsible. By investing earlier in family supports, mental health services, and community-based disability services, British Columbia can reduce pressures across healthcare, child welfare, education, housing, and emergency response systems while improving outcomes for the people these systems are intended to serve.

Families have been clear about what they need: timely support, meaningful access to services, coordinated systems, and the ability to receive help before challenges become emergencies. These recommendations reflect those priorities and provide a practical path toward a system that responds to needs earlier, strengthens families, and supports people with disabilities to live safe, meaningful, and inclusive lives in their communities.

Budget 2027 provides an opportunity to make that shift.

Families across British Columbia are ready.


Now the system must be ready too.

Sincerely,





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As a provincial organization FSI acknowledges that our work spans across all the traditional, ancestral, and unceded Indigenous territories in BC. Therefore, we respectfully honour all First Nations, Inuit and Métis people, as well as their ancestors, who have lived here and cared for these lands. It is with gratitude that we can live, learn and do our work in the province now known as British Columbia.

