

The Benefits of Membership

Thank you for your interest in becoming part of a community of people who are striving toward the goal of promoting positive mental health for all.

Your membership includes:

- Membership with your local CMHA branch, CMHA BC Division and CMHA National
- The opportunity to stand for and vote for members of our governing board of directors
- A free subscription to the award-winning *Visions* Magazine (6 issues per year)
- A free subscription to our newsletter



Good Mental Health for All

Everyone has a right to achieve the highest level of mental health possible. *You can help.*

The Facts

- Mental illness indirectly affects all Canadians at some time.
- 20% of Canadians will personally experience a mental illness in their lifetime.
- Mental illness affects people of all ages, educational backgrounds, cultures and income levels.
- Approximately 8% of adults will experience major depression at some time in their lives.
- 10-20% of all Canadian youth are affected by a mental illness or disorder.
- Approximately 5% of male youth and 12% of female youth, age 12 to 19, have experienced a major depressive episode.
- Once depression is recognized, help can make a difference for 80% of people who are affected.
- Many Cowichan Valley residents who are affected by mental illness and/or addictions become homeless.

Wellness is within reach for all of us.



Cowichan Valley Branch

MAKE A DIFFERENCE
GET INVOLVED WITH CMHA
BECOME A MEMBER



Contact us:

#201, 2878 York Road

Duncan BC V9L 3S4

Telephone: (250) 597-1372

Fax: (250) 748-2606

or email:

cmhacvb@cmha.bc.ca

Canadian Mental Health Association, Cowichan Valley Branch is a registered charitable organization providing a wide range of programs for Cowichan Valley families, children, youth, and adults. We are focused on mental health, addiction, and homelessness.

Our Programs Include:

Family Child & Youth Services

Family Capacity Program

Counselling program providing parenting support .

Disordered Eating Program

Counselling for youth who struggle with all types of disordered eating and eating disorders.

Sexual Abuse Intervention Program

Counselling program for children/ youth who have experienced sexual abuse or exhibit sexually intrusive behavior.

U-Fix it BikeWorks & ArtWorks

A place for youth to engage in activities to gain independence and a sense of accomplishment.

Rainbows Program

A peer support program for children and their families in painful transition and dealing with loss.

Affordable Counselling

For individuals, couples, children, youth and families.

Malahat First Nations Girls' Project

Outreach support to First Nations adolescents.

BounceBack® for Youth

Helping adolescents manage symptoms of depression and anxiety.

Community Services

BounceBack® For Adults

Helping adults manage symptoms of depression, anxiety, and stress through workbooks and telephone support.

Affordable Counselling

For individuals, couples, children, youth and families.

Sobering & Assessment Centre

Provides a safe place for individuals to 'sober-up' 24 hours a day, every day of the year.

Overdose Prevention Site

Is designed to limit fentanyl poisoning deaths from injection drug use. It's open from 1 pm to 7 pm daily.

Sharps Pick-up Team

Collects and disposes discarded needle from public spaces. Please call (250) 732-3330 to report discarded needles.

Homelessness & Housing

Warmland House

A community resource facility with 30 extreme weather emergency shelter beds, and 24 transitional apartments.

Housing Outreach Team

Supports individuals who are homeless or at risk of becoming homeless.

Foot care clinics

For those with income barriers.

Chiropractor services

For those with limited incomes.

Nurse Practitioner

Providing services to community members without a doctor.

Membership Form

Annual Membership: (please choose one)

- \$20 for Individuals
 \$50 for Organizations
 \$5 for Individuals on limited income
 New Membership Renewal

Name _____

Mailing Address _____

City _____

Prov. _____ Postal Code _____

Phone (_____) _____ - _____

Email _____

Yes, please subscribe me to "Visions Magazine", bimonthly via postal mail.

Yes, please subscribe me to CMHA-CVB newsletter, via email.

In addition to my membership, I would like to donate \$ _____

Total paid: \$ _____

CHEQUE CASH

(Tax receipts provided for donations over \$25)

Please make cheques payable to:
"CMHA- Cowichan Valley Branch"