



**CRISIS INTERVENTION AND
SUICIDE PREVENTION CENTRE OF BC**

Annual Report

 **2025 / 2026**



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About the Crisis Centre



Everyone deserves support through crisis.

The Crisis Centre of BC believes in a world where the human experience of suicide and crisis is met with compassion, respect, and understanding. We provide opportunities for connection where people are valued and supported to address crisis and suicide.

We are proud to care for residents living in the communities of Richmond, Vancouver, North Shore, Sea-to-Sky Corridor, Sunshine Coast, Powell River, Bella Bella and Bella Coola located within the traditional territories of the hł̓zaqv wáwís (Heiltsuk), Kitasoo, Xai'xais, Líl'wat (Lil'wat), x̣ẉməθḳwəỵəm (Musqueam), N'Quatqua, Nuxalk, Samahquam, shíshálh (Sechelt), Skatin, Sḳwx̣wú7mesh Úxwumixw (Squamish), ɬaʔəmen (Tla'amin), səlilwətaɬ (Tseil-Waututh), Wuikinuxv, and Xa'xtsa.

We have been in operation since 1969.

Spanning the spectrum of crisis support, suicide prevention, and postvention, we engage staff and volunteers in various services and programs that educate, train, and support the strength and capacity of individuals and communities.

We Offer

- Immediate access to barrier-free, non-judgemental, and confidential support through 24/7 phone lines and SMS services, including follow-up support
- Education and training programs that promote mental wellness and equip schools, organizations, and communities to assist people at risk of suicide
- Support for those who have been affected by a suicide, including connecting events and support groups for suicide loss survivors
- Advocacy for compassionate, flexible, responsive crisis and mental health systems rooted in knowledge gained over 57 years of frontline service.

Our programs work to ensure timely access to support, destigmatize suicide and mental health concerns, and increase awareness and skills for mental health. We engage a community of passionate volunteers while fostering and creating compassionate, connected, and suicide-safer communities.



Content Warning & Support

Content Warning

Our Annual Report contains stories and information related to suicide that might be difficult for some readers.

The personal stories featured in this report are fictionalized composites inspired by the real experiences of British Columbians. They do not represent any specific individual.

Support is available

If you or someone you know is struggling and needs someone to talk to, we are here for you:



9-8-8

Call or text: National Suicide Crisis Helpline
/ Ligne d'aide en cas de crise de suicide



310-6789

BC Mental Health & Crisis Response, no area
code needed

Annual Report Contributors

Thank you to everyone whose contributions made this report possible: Alain Bedard-Gibson, Jeffrey Preiss, Laura Zuniga, Mark Sheehan, Rose Rai, Rosie Forth, Sam Newbery, Shannon McCluskie, Stacy Ashton, Thomas Maloney





A MESSAGE FROM STACY

Letter from the Executive Director

What does it actually mean to provide opportunities for connection where people are valued and supported to address crisis and suicide?

It's obvious how connection works on our crisis lines and in our training. We connect directly with people in the middle of crisis on phone and text, and we train people to address crisis and suicide with care and compassion when it shows up in their lives.

In our bereavement programs, an advisory group of people who have lost loved ones to suicide help us decide how to support people through grief, and provide opportunities for formal and informal connections.

Through our advocacy for improved systems, we are also providing opportunities for people to address crisis and suicide. Change comes when people affected by a system demand a different system. For folks in crisis, police intervention, hospital discharge with no follow-up, and long waiting lists create harm and block crisis resolution.

Take the opportunity to make a difference: raise your voice, volunteer, and donate to create systems of hope.



Stacy Ashton

Executive Director, Crisis Intervention and Suicide Prevention Centre of BC



Letter from the Board President

As I reflect on the past year, I am reminded that every meaningful change begins with people who believe that no one should have to face crisis alone.

Our Board of Directors has the privilege of supporting an organization that meets people where they are, with compassion, respect, and hope. Whether someone reaches out in a moment of despair, attends a suicide intervention workshop, finds support after the loss of a loved one, or joins us in advocating for better systems of care, they become part of a community that believes connection can save lives.

The Board's responsibility is to ensure that this work remains strong, sustainable, and responsive to the needs of our communities. We are committed to sound governance, thoughtful stewardship of our resources, and a strategic vision that allows the organization to continue growing its impact. We are inspired by the dedication of our staff, volunteers, donors, and partners, whose commitment makes this work possible every day.

This year has reinforced what we have long known: addressing crisis and suicide is not the responsibility of one organization alone. It requires communities that are willing to listen, systems that respond with dignity and care, and individuals who choose to act.

On behalf of the Board of Directors, thank you for believing in this mission and for investing your time, expertise, and generosity in it. Your support strengthens our ability to create opportunities for connection, advocate for compassionate systems, and ensure that people experiencing crisis are met with understanding rather than judgment.

Together, we are building a future where hope is always within reach.



Mark Price

Board President, Crisis Intervention and Suicide
Prevention Centre of BC



Right Response. Right Time. Right People. Every Person. Every Time.

This story is a fictionalized composite inspired by the real experiences. It does not represent any specific individual.

By the time a Crisis Centre responder picked up the call, after just one ring, the caller had already been told "no" in several different ways.

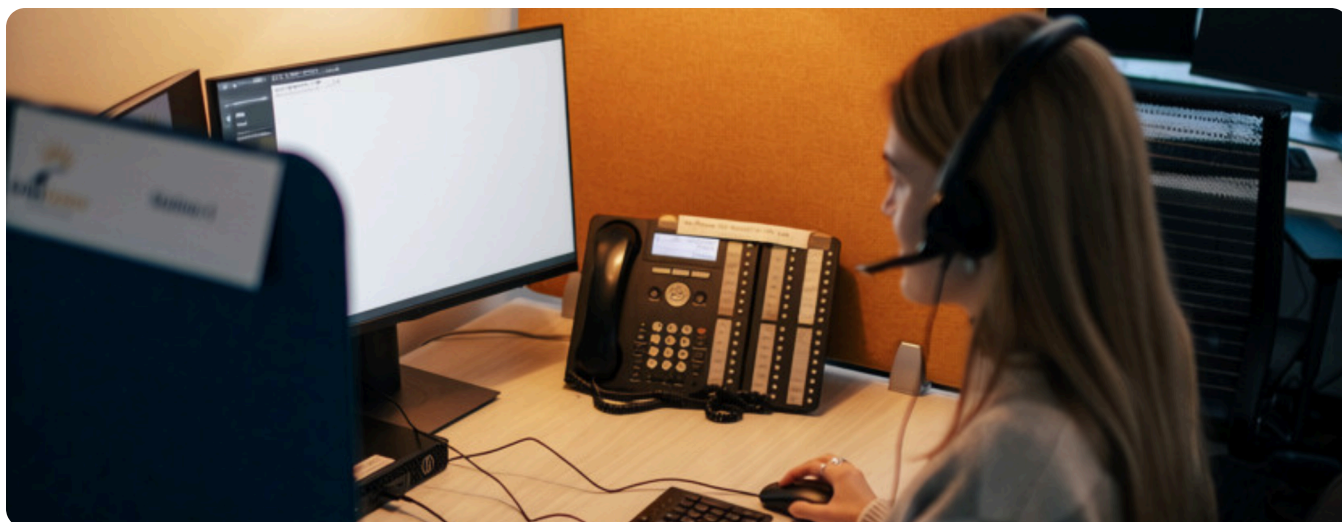
She was in crisis. She had left an unsafe living situation and had nowhere stable to go. She was exhausted, frightened, and trying to make it through the night. She had called a housing service, but there were no immediate beds available. She had been referred to counselling, but the waitlist was months long. She had reached out to another service, but she did not meet the eligibility criteria.

No one was cruel. Everyone wanted to help. But every door seemed to require something she did not have: a fixed address, a formal referral, an appointment, transportation, time, or the capacity to keep telling her story again and again.

On the other end of the line, one of our crisis responders listened. They helped her slow her breathing. They asked careful questions about safety. They stayed with her as she described what had happened, what she had tried, and what she was afraid might happen next.

The responder could hear the crisis. They could also hear the deeper problem. The crisis was not only what was happening inside this person. The crisis was also the maze around her.

Often resolving a crisis is painfully practical: a place to sleep, a ride across town, a few hundred dollars for rent, a safe way to leave, or a person who can stay until morning.



“
**The crisis was not only what was happening inside this person.
The crisis was also the maze around her.**

Every day, the Crisis Centre answers calls and texts from people at their lowest points. We know what crisis looks like. We know what helps. We know that a conversation can interrupt panic, reduce isolation, support safety planning, and help someone stay alive.

We also know that a conversation cannot, on its own, create housing, shorten a waitlist, remove a financial barrier, or redesign an emergency response system. That is why systems improvement is not separate from our work. It grows directly out of it.

One priority is to do the right thing: public systems where people experiencing a mental health or suicidal crisis must receive the right response, at the right time, from the right people. An emergency response system that defaults to police cannot provide a health-oriented response to a health-oriented problem.

Another priority is means restriction: advocating for changes to the built environment that reduce access to lethal means and help make communities suicide-safer. Bridge barriers and other protective infrastructure interrupt lethal decisions and make it safer to provide the right response to a suicidal crisis.

The Crisis Centre exists for the moment of crisis. But we also work for a world in which fewer people are left to reach that point alone.

As an organisation, we are there when people call us when they are in crisis. Our mission is to ensure that when any person in crisis reaches out anywhere, to a friend, a doctor, a hospital, a crisis line, 9-1-1, or a community service, the response they receive helps them.

The right response, at the right time, from the right people. Every time. For every person.



We know how to prevent bridge suicides; why aren't we doing it?

Emma's account is drawn from her testimony to Vancouver City Council.

Emma is in the ninth grade. She lives next to the Granville Street Bridge. Earlier this year, she stood before Vancouver City Council and asked a question that no child should have to ask: "Since when do we put a price tag on human life?"

Since when do we put a price tag on human life?

Emma has witnessed tragedy on that bridge since she was 12. She has watched people in crisis on the railing. She has seen people jump. She described lying in bed at night, terrified of what she might hear. She told the council she can barely keep her blinds open anymore because of what she might see outside her window. Those experiences, she said, do not leave you. They steal your sense of safety and change how you feel in your own home.

Emma is not alone. Residents, families, workers on Granville Island, and community members along the bridge corridor have been raising these concerns for years. Her testimony brought painful clarity to a debate that has gone on far too long. The Granville Street Bridge averages approximately 2.6 suicide deaths every year. Funding for barriers has been delayed, made contingent on other levels of government, and at one point removed from the City's capital plan entirely.

The evidence has never been in question. Barriers were installed on the Ironworkers Memorial Bridge in 2015 and on the Burrard Street Bridge in 2017. There have been no suicide deaths on either bridge since. Research consistently confirms the same pattern: physical barriers at high-risk locations reduce suicides, and people do not simply move to another site. The intervention works. The barrier creates time: for pause, for connection, for help to arrive. And 90% of people who survive a suicidal crisis do not go on to die by suicide. That means a bridge barrier can be the difference between a life that ends and a life that thrives.

The Crisis Centre appeared before Vancouver City Council on June 3, 2026, alongside community members, health officials, and business leaders from Granville Island, to support Councillor Dominato's motion to restore barrier funding to the capital plan. The motion passed unanimously. That outcome matters, and is the result of years of sustained advocacy by many people, including those at the Crisis Centre who have worked for barriers at every opportunity. Even more hopefully, the City is starting stakeholder work on bridge barrier design, and has invited the Crisis Centre to be a part of making the bridge barriers a reality. Our work made the Burrard Street Bridge barriers happen. We will make the Granville Bridge barriers happen too.



2015

Barriers installed on the Ironworkers Memorial Bridge

2017

Barriers installed on the Burrard Street Bridge

2026

City Council votes unanimously to restore Granville Bridge barrier funding. City Council requires Granville Bridge barriers appear as a distinct line item in the 2027-2030 capital budget.

Beyond Granville

The Granville Street Bridge is only one part of a larger picture. Across the region and the province, suicide means prevention remains an afterthought in infrastructure planning. Advocates and community members must fight for it project by project, bridge by bridge. The Crisis Centre believes the solution lies at the systems level. Barriers should be a design requirement from the beginning, embedded in building codes and architectural standards, expected as a baseline whenever a new bridge is designed or significantly retrofitted. Suicide prevention should not depend on someone having to ask for it. It should already be there.

Emma has already written to the Prime Minister's office and received a response indicating her concerns have been forwarded to federal ministers. A ninth grader should not have to carry this. But her question, and the courage it took to ask it in front of council, captures something we have long known: we have the evidence, we have the tools, and every day we wait is a day we could have prevented a death.



2.6

average suicide deaths per year on the Granville Street Bridge



0

suicide deaths on the Ironworkers or Burrard bridges since barriers were installed



90%

of people who survive a suicidal crisis do not go on to die by suicide



Distress Services



Our Distress Services program provides no-barrier crisis support to vulnerable individuals across British Columbia. Highly-trained volunteers and paid responders provide non-judgemental emotional support through risk assessment, collaborative safety planning, and short-term follow-up by phone. We engage with the appropriate emergency services when an in-person intervention is essential.

Services Include



9-8-8

Canada's national suicide crisis line, providing 24/7 phone and text support for adults and youth across Canada. 9-8-8 links callers to a responder within their local community whenever possible, and also includes options for specialised support for First Nations, Inuit and Métis, and youth. The primary focus of the 9-8-8 service is suicide prevention.



310 Mental Health & 1-800-SUICIDE

310 Mental Health (604-310-6789) and 1-800-SUICIDE (1-800-784-2433) are available 24/7 to youth, adults and seniors throughout the province of BC who are experiencing a crisis or having thoughts of suicide. BC crisis lines support callers experiencing crisis for any reason, including emotional distress, natural disaster, acute situations, and psychiatric crisis. The primary focus of the local support lines is crisis intervention.



Call and Text Demographics



PHSA / PROVINCIAL LINES

22,920

total calls

16%with a suicide risk
assessment

9-8-8

17,834total interactions
11,430 calls
6,404 texts**60%**of interactions
related to suicide

What are our callers calling about?

Primary concern, as a percentage of calls that had a primary concern listed. Calls may cover more than one issue.

PRIMARY CONCERN	% OF CALLS
Mental Health*	49%
Relationships	18%
Suicide	9%
Personal (e.g. Faith, Gender Identity, Self-Esteem)	7%
Physical Health	6%
Basic Needs	5%
Violence / Abuse	3%
Addiction	2%
Legal Issues	2%

*Calls classified as mental health may not include a disclosed diagnosis. They may include struggles with anxiety, depressed mood or other emotions.



Community Learning & Engagement

The Crisis Centre specializes in fostering resilience and capacity in individuals, organizations and communities. Our trauma-informed training and courses build compassionate, connected, suicide-safer communities through:



Destigmatizing suicide and mental health



Strengthening intervention and de-escalation skills



Facilitating growth and recovery after a suicide experience



Providing skills and strategies that foster wellness and help prevent stress, burnout, vicarious trauma, and compassion fatigue

Our work spans three programs, each detailed on the following pages: Adult Training, Youth, and Bereavement.



Adult Training Programs



The Crisis Centre specializes in fostering resilience and capacity in individuals, organizations and communities. Our trauma-informed training and courses build compassionate, connected, suicide-safer communities.

SUPPORTING OTHERS: CRISIS AND SUICIDE RESPONSE

Skillfully Responding to Distress · Suicide Awareness for Everyone · safeTALK · safeTALK Training for Trainers · Applied Suicide Intervention Skills Training (ASIST) · ASIST Tune-Up · LivingWorks Start · əokwimas - You Are Strong: Indigenous Suicide Prevention · Customized Suicide Response Training

SUPPORTING OURSELVES: RESILIENCE & WELLBEING

Wellness and Resiliency Courses, Workshops and Webinars · Tools for Managing Stress and Burnout

Annual Highlights



3,144

participants in paid training,
incl. emotional wellbeing
and suicide response



1,697

service providers and
community members trained
in suicide response



386

organizations hosted offsite
or participated in CLE
training

"I feel so much more confident to handle situations of suicide when they arise as I'm sure they will in my job. Very in depth, patient, comprehensive course that is very trauma-informed. Amazing job. Thank you!"

"Very useful sharing the info. Really wish this was mandatory in ALL schools and workplaces"



COMMUNITY LEARNING & ENGAGEMENT

Youth Program



Our interactive and practical programs are suitable for youth aged 12 through 19. We work with schools, community-based programs and alternative programs for youth with social, learning and mental health challenges. We offer youth-oriented training that provides teens with practical skills to help support their peers and build connections to resources for further support:

Self Care for Mental Health Workshop · It's Okay to NOT Be Okay ·
MindFlip - Brain Science Tools for Everyday Living

Our Impact in 2025–2026



11,570

youth reached through
self-care workshops



445

workshops delivered



89

schools visited

*"I feel less intimidated by speaking up
about mental health"*

*"This workshop let me know I'm not alone
with my feelings"*



COMMUNITY LEARNING & ENGAGEMENT

Bereavement Program

The Crisis Centre provides a range of low and no cost programming and services for those who have been impacted by suicide loss with the aim of fostering connection, information and healing. This year, our bereavement program offered:

- Support and resources for communities, organizations and individuals after a suicide
- Events and activities that foster healing and connection, including International Survivors of Suicide Loss Day, our online Cup of Tea for the Soul Series, and our Take a Walk With Us Walking Group
- An 8-week support group for individuals who are grieving a suicide loss
- Training and workshops
- Volunteer opportunities for those who have lost someone to suicide to support our programming



216

participants in our
bereavement and
suicide loss support
programs

PROGRAM

PARTICIPANTS

8 Week Suicide Support Groups

32

Cup of Tea for the Soul: An online gathering for
suicide loss griever

66

Take a Walk with Us: A monthly walking group for
suicide loss griever

26

International Survivors of Suicide Loss Day
Webinar

28

Understanding and Responding to Grief Webinar

64

Total

216



Bereavement Advisory Committee

Our Bereavement Advisory Committee is made up of individuals who have lost loved ones to suicide and have done significant work in their grief journey. They are committed to giving back by supporting others who are grieving. The committee provides valuable insight and guidance on organizing and improving events to best meet the needs of those experiencing loss.

In 2025–2026 we added one new member to the Committee, bringing us to a total of nine members.

"From that initial meeting, I felt that something had shifted almost instantly."

- 8-week support group participant

"I really enjoyed the training and I feel I learned a lot. And interacting with the other participants and learning from them was very powerful as well."

- Webinar participant



When someone calls 9-1-1 in mental health crisis, what happens next matters

The opening scenario is a fictionalized composite inspired by the real experiences. It does not represent any specific individual.

It is 2 a.m. on a Tuesday. A person sits alone in their apartment, the city quiet outside their window. They have been struggling for weeks: with loss, with isolation, with thoughts that have grown darker than they can manage on their own. Tonight, something has shifted. They need help. They reach for their phone.

They dial 9-1-1. It is the only number they can think of. It is the number we all grow up knowing.

The call connects, and the dispatcher on the other end is professional, caring, and doing their job well. But their job is built for emergencies of a different kind: fires, accidents, medical crises requiring immediate

physical intervention. A person in psychological distress, alone at 2 a.m., needing someone to talk them through the night, that is not a gap in the dispatcher's compassion. It is a gap in the system.

A police unit is sent. It is the available response. It is not always the right one.

When someone calls 9-1-1, they have three choices: police, fire, or ambulance. For a person experiencing a mental health crisis or having thoughts of suicide, none of these may be the right first response. And yet, right now in British Columbia, there is no other pathway.

The Crisis Centre believes that must change.



We are advocating for a fourth option within 9-1-1: a dedicated pathway that connects people in crisis directly to trained crisis line responders when police, fire, or ambulance is not the most appropriate first response. Not as a replacement for emergency services, but as the right response for a different kind of emergency.

A practical, proven pathway for crisis response

The Crisis Centre's crisis lines already resolve the vast majority of calls without any need for police or ambulance dispatch. Only 0.28% of calls to the Centre from Provincial crisis lines require an in-person dispatch. This extremely low number is a sign that what we do is working.

0.28%

of calls to the Centre from Provincial crisis lines require an in-person dispatch: this extremely low number is a sign that what we do is working

Crisis responders listen, de-escalate, assess risk, and connect people to supports, often helping someone through the hardest moment of their life without a single vehicle being dispatched. A fourth option within 9-1-1 would extend that kind of response to more people, through the system they already know how to reach.

We aren't alone in this work

Ecomm 9-1-1 and the Canadian Mental Health Association of BC are also working towards better options for people in emotional and mental health crisis. Building a fourth option requires bringing emergency response, crisis response, and community-based mental health into an integrated system. It is complex work, and it will take time. But the need is clear, the evidence is strong, and the conversations are taking place. We will keep making the case until the right response is available to everyone who needs it.



Creating space: the Crisis Centre looks toward a new home

Since the mid 80s, the Crisis Centre of BC has called our current building home. The space on East Broadway has seen thousands of volunteers trained, hundreds of thousands of calls answered, and countless moments of connection between people in crisis and the people who showed up to help. It has character. It has history. It also has its quirks (many of them).

Our building is aging. We do our best to maintain it, and we are proud of what we have built within its walls, but we are clear-eyed about the reality: our current home will not serve us indefinitely. The question is not whether we will need a new space, but when, and what that space should be.

What we have been doing is asking the questions: what kind of space does the Crisis Centre need to serve our community well for the next 50 years?

That is a gift from the donors and supporters who came before us, and it gives us something rare in the non-profit world: genuine choice. We sit within Vancouver's Broadway Plan corridor, an area undergoing significant transformation as the city plans for decades of new housing, jobs, and transit-oriented development. That context creates opportunities we might not otherwise have, and means that how and where we position ourselves for the future deserves thoughtful consideration.

We are not ready to make announcements, nor are we launching a capital campaign. What we have been doing is asking the questions: what kind of space does the Crisis Centre need to serve our community well for the next 50 years?

We have started and will continue this exploration, and we are approaching it with the same care we bring to everything else: thoughtfully, with our community in mind, and with a deep commitment to ensuring that whatever comes next allows us to keep doing this work for generations to come. If you believe in that future, your support, in any form, helps make it possible.



Volunteer Powered



Metro Vancouver has a rich and diverse community of committed and talented individuals who are passionate about helping others. The Crisis Centre trains and supports these regular yet extraordinary individuals who share their skills as volunteers in administration, on the phone and text lines, in classrooms and community events, and in training rooms at the Centre.



33,866

total volunteer hours
contributed in 2025/26



330

volunteers at the end of
2025/26



103

new Distress Services
volunteers trained in
2025/26

Hours Contributed by Department

DEPARTMENT	HOURS
Administration & Office Support	567
Community Learning & Engagement	3,550
Development & Communications	48
Distress Services*	29,701

Volunteers by Department

DEPARTMENT	VOLUNTEERS
Administration & Office Support	13
Community Learning & Engagement and Bereavement	63
Development and Communications	9
Distress Services	245

**Volunteers answer calls and chats, and provide training and support to new volunteers.*



Thank You!



We rely on the generosity of our community to ensure we can deliver our lifesaving services and programs.

We would like to thank all our donors and supporters including those who wish to remain anonymous. Your financial support helps us help others when they need it the most.

Ready to help? Donate today.

www.crisiscentre.bc.ca/donate

Donor Wall

Recognizing everyone who generously supported our work in 2025/26, listed by giving level.

Visionaries of Hope \$75,000+

The Walsh Foundation

Vancouver Foundation

Stewards of Hope \$10,000–\$74,999

Al Roadburg Foundation
Aldat 2000 Holdings Ltd.
Arbutus Tree Foundation
CIBC Foundation
City of Vancouver
CKNW Kids' Fund
District of North Vancouver
Federation of Canadian Municipalities
First West Foundation
Lululemon
National Bank of Canada

New Horizons/HRSDC - Government of Canada
Pieta Head Office
Rexall Cares
Shein Legacy Fund
The Fairway Fund
The Raven Foundation
The Victor & Anna Kern Foundation
Tim Clapp
Vancity Community Foundation
Westcoast Energy Inc.
Western Financial Group/Western Communities Foundation



Darkness Into Light

148 walked in honour of loved ones lost to suicide, raising \$12,918.



Kingfisher Bluez concert raised \$54,840!

Partners of Hope \$5,000–\$9,999

Ann Claire Angus Fund
Big Red Mental Health Society
City of North Vancouver
Eldorado Gold Corp
Enbridge Inc.
Green Shield Canada
Marin Investments Ltd.
North Shore Community Foundation

Prospera Credit Union
Provincial Employees Community Services Fund
The Dayhu Family Foundation
The Hamber Foundation
The Wolrige Foundation
United Way British Columbia
Youth Philanthropy Initiative Canada (YPI)

Builders of Hope \$1,000–\$4,999

Alison Cameron
Amy Francis
BC General Employees' Union
Benefaction Foundation
Betty Wall
Bob and Sue Hastings
Bob Meyer
Catherine Slade
Charlotte Wall
City of Port Moody
Constantine Hatzipanayis & Sarah Munro
Daphne Francis

Darla Kendel
Dennis and Kathy Meakin Family Foundation
District of Sechelt
District of West Vancouver
Djavad Mowafaghian Foundation
Elizabeth and Kenneth Black and MacLeod
Gerald Leonard
Graham and Diana Isenegger and Hrushy
Iain Harris Family Foundation

Janet Cunningham
Jaynie and Tim Potocky
Jean-Michel Côté
Jim Atwater
Juli Kyle
Kahn Foundation
Korinna Fehrmann
Leanne Nadine Averbach Giving Fund
Legion BC/Yukon Foundation
Loveleen Grewal
Mary Ellen Sanajko
Mary-Anne Bedard



Builders of Hope, continued \$1,000–\$4,999

Mel & Geri Davis Charitable Trust	Paul Pavlik	Resort Municipality of Whistler
Melissa Van Dyk	Paypal Charitable Giving Fund	Stacy Ashton
Michael R. Williams Foundation	Peter & June Young Legacy Fund	Suzie Fong
Mike Goetz	Peter Kenward	The UK Online Giving Foundation
Morgan Gough	R&B Brewing Co	Tracy Leroux
Olivia Bing	Ralph Barrows	United Way of Greater Toronto
Orbis Investments (Canada) Limited	RDH Building Science Inc	Wesmont Foundation

Patrons of Hope \$300–\$999

Abby Dacho	Dolores Billey	Linda Bentley	Richmond Community Foundation
Aicha Kante	Dolph Schluter	Lisa Yeates	Ronald and Marion Johnston
Alena Gordeeva	Elizabeth Clode	Lorne Palmer	Ryan Rickaby
Alexis Martis	Emile Scheffel	Lucille Welburn	Sabrina Piovesan
Alice Reed	Emory Jako	Lyn Anglin	Santa Aloï
Allan & Sherry Buium	Fiona and Bobby Lee	Madeline Brown	Sharee Proudfoot
Alma Bealle	Frank Anfield	Malawiya Industries & Associates Inc.	Sherry Christianson
Arne Salvesen	Fraternal Order of Eagles Aerie 2638	Marena Dix	Stellers Jay Engineering
Beverley Green	Geoffrey Peters	Mark Northcote	Strategic Charitable Giving Foundation
Bill and Heather Holmes	Gina & David Sufrin	Melissa Duchak	Susanne J Evans
Brandon Ma	Giuliana Ambrosini	Melody Mason and Edward Gilling	The Josh Platzer Memorial Fund
Cathy Mutis	Hong Wong	North Surrey Secondary School	The Zacks Family Charitable Foundation
Charities Aid Foundation Of Canada	Hootsuite	Pat Shaw	Tomas Wittrup
Charles and Lucile Flavelle Family Fund	Ian & Coleen Ross	Patricia Crowe	Ton and Mary Lo
Chin Lung Huang	Jackie Hogan	Paul Whitehead	Vincent Wheeler
Clive and Carol Holloway	Jewish Community Foundation	Penelope Soo	West Vancouver Community Foundation
Constance Hummel	John and Carol Oakley	Private Giving Foundation	Wild Acorn Accounting Ltd.
Cornelius van Heerden	John Cedric Fitz-Clarke	PwC Canada	Workday
Darcy and Valerie O'Shea	Jon Levitt and Edward Sandberg Foundation	Raymond & Evelyn Hazlett	Yiyang Liu
David VanBlarcom	Kenneth Heichert		
	Kudaliyanage Gunasekera		

We strive to ensure our donor information is as accurate as possible. If you see an error, or if you were missed, please contact us: development@crisiscentre.bc.ca



Leadership



Board of Directors

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Melisa Foster	Vice President
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Shannon McCluskie
Director, Finance, HR & Administration

Mark Sheehan
Program Director, Community Learning & Engagement

Alain Bedard-Gibson
Program Director, Distress Services



Financials

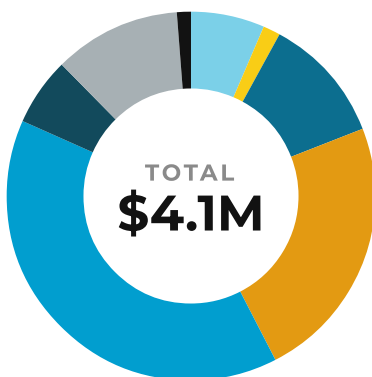
The Crisis Centre of BC has worked hard to meet the demands for its services and programs. By exploring new streams of funding and fostering relationships with our community, the Centre secured a total revenue of \$4,109,843 to support our frontline work.

The Centre is grateful for its main sources of revenue provided by various organizations, service contracts and fee-for-service programming, foundations, businesses, and individuals. A list of donors is provided in this report.

The Centre also operates with a generous and dedicated volunteer team and would like to acknowledge this value, which is not necessarily present in the financial statements. The Crisis Centre's incredible volunteers, supporting frontline services, community learning, and administrative support are estimated to be a value of \$922,171 per year.

The Centre is a beacon of hope because of dedicated volunteers.

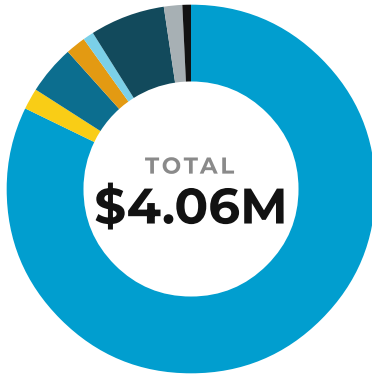
Revenue



SOURCE	AMOUNT	%
Individual Donations	265,403	7%
Corporate Donations	62,369	2%
Grants & Foundations	454,297	11%
Provincial Health Services Authority	958,341	23%
988 Network	1,610,852	39%
Province of BC: Community Gaming Grant	244,200	6%
Fees for Service and Training	456,306	11%
Interest & Miscellaneous	58,076	1%
Total	4,109,843	100%



Expenses



CATEGORY	AMOUNT	%
Salaries & Benefits	3,332,278	82%
Administrative & Fundraising	75,167	2%
Telecommunications & Technology	173,940	4%
Building Occupancy	71,319	2%
Amortization	38,367	1%
Community Training	265,993	6%
Volunteer Support & Staff Development	65,138	2%
Publicity & Marketing	37,769	1%
Total	4,059,970	100%





9-8-8

Call or text, 24/7

310-6789

BC Mental Health & Crisis Response

Crisis Intervention and Suicide Prevention Centre of BC
Mailing address: 763 E Broadway, Vancouver, BC V5T 1X8
Canada Revenue Agency Charity Registration Number: 10699 3322 RR0001