

# Baseline Data Report 2003–2004

## *Regional Profile of Estrie*



*prepared by the*

**CHSSN**

Community Health  
and Social Services Network

*for the Networking and Partnership Initiative*

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# Health Determinants of English-speaking Regional Communities

## Acknowledgement

For the purpose of describing regional highlights, this section draws primarily on the demographic data developed by William Floch for the Department of Canadian Heritage based on the 1996 and 2001 Canadian Census, 2004. Any other sources are indicated throughout.

## Regional Health Determinants

While the factors influencing health in a given region will be presented as much as possible as discreet entities it is important to keep in mind they are interdependent. Often the configuration of a number of factors underlies the difference between a weak and an optimal health situation.

## Explanation of Table Indices:

Information in this report is supported by a series of reference tables for each administrative region. One of these tables compares the Income/Social Status of each region's Anglophone population relative to either the Francophone regional majority, or to the entire Anglophone population of the province. Two important methods of measurement (**mmi** and **rgi**) are used and their meanings are explained here:

## Minority-Majority Index (mmi)

The Minority-Majority Index in this report compares the characteristic of the regional *minority* Anglophone population relative to the *majority* Francophone population which shares the same region. An **mmi greater than 1.00** indicates that the characteristic is more commonly found in the minority population. An **mmi less than 1.00** indicates that it is less present in the minority population.

**Example:** This Minority-Majority Index table for the Outaouais region indicates that the average income **mmi of 0.99** for the Anglophone population is just slightly lower than that of the Francophone population, while the proportion of population over the age of 15 without income is an **mmi of 1.09**, significantly higher.

Income/Social Status Characteristics	<a href="#">mmi</a>
Average income	0.99
Population 15+ without income	1.09
Dependence on government transfer	1.06
Incidence of low income (under \$20k)	1.07
Incidence of high income (over \$50k)	0.99

## Relative Geographic Index (rgi)

The Relative Geographic Index in this document refers to the relative value of a characteristic for the Anglophone population of a given region compared to the Anglophone population of the entire province of Québec. Thus, an **rgi greater than 1.00**

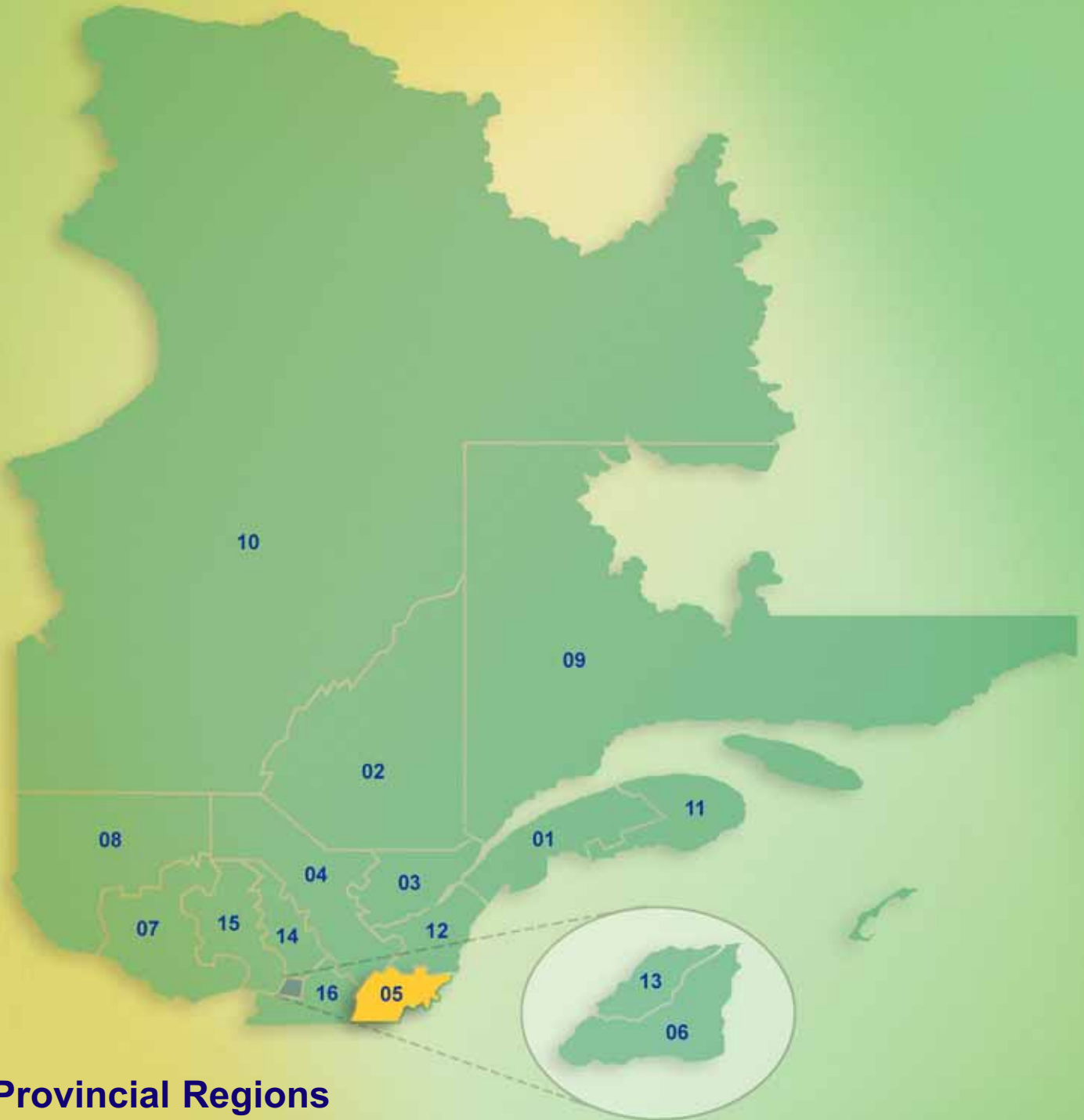
indicates that the characteristic is more present in the specific regional Anglophone population than in the provincial Anglophone population as a whole. An **rgi less than 1.00** indicates that the characteristic is less present in the regional population than in the provincial population.

**Example:** Adding the **rgi** index to the same table indicates that the proportion of Anglophone population of the Outaouais over the age of 15 without income has an **rgi of 0.91** (or lower than the proportion of the Anglophone population of the whole province), while the **rgi of 1.13** indicates that the relative incidence of high income earning is substantially higher.

<b>Income/Social Status Characteristics</b>	<b>mmi</b>	<b>rgi</b>
Average income	0.99	0.99
Population 15+ without income	1.09	0.91
Dependence on government transfer	1.06	0.97
Incidence of low income (under \$20k)	1.07	0.93
Incidence of high income (over \$50k)	0.99	1.13



# Etrie



## Provincial Regions

- |                                   |                                    |
|-----------------------------------|------------------------------------|
| 01 Bas-Saint-Laurent              | 09 Côte-Nord                       |
| 02 Saguenay – Lac-Saint-Jean      | 10 Nord-du-Québec                  |
| 03 Québec – La Capitale Nationale | 11 Gaspésie – Îles-de-la-Madeleine |
| 04 Mauricie – Centre-du-Québec    | 12 Chaudière-Appalaches            |
| 05 Estrie                         | 13 Laval                           |
| 06 Montréal                       | 14 Lanaudière                      |
| 07 Outaouais                      | 15 Laurentides                     |
| 08 Abitibi-Témiscamingue          | 16 Montérégie                      |

## Overview - Region 05 – Estrie

[Link](#) to full description

Key Determinant	Key Facts
<a href="#">Income &amp; Social Status</a>	There is a significant polarization of rich and poor in this English-speaking community. Rate of dependence on government transfers exceeds that of the majority and of the larger Anglophone provincial population. The average income of Anglophones is low relative to the Francophone.
<a href="#">Social Support Networks</a>	The Anglophone community has an accelerated rate of aging (19%). Their mmi ranks the 2nd highest of 16 regions. There are low numbers of Anglophone individuals in the middle years age group.
<a href="#">Education</a>	Levels of scolarity have declined in the Anglophone population. Anglophones are more likely than Francophones and the Anglophone provincial population not to have high school leaving. They have a greater likelihood of no university degree than the majority population.
<a href="#">Employment &amp; Working Conditions</a>	A greater proportion of the linguistic minority population is out of the labour force. The unemployment rate of the Anglophone is high relative to the Francophone. Anglophones experience a high rate of unpaid work (especially women).
<a href="#">Social Environments</a>	The English-speaking population is declining. The rate of bilingualism among Anglophones relative to the majority is 63% . There is a strong tradition of family-based care among Anglophones.
<a href="#">Health Services</a>	The use of English in health situations relative to the provincial average is low. This Anglophone group ranks 4th of 16 in regional ranking of entitled services. Service access is substantial. The Anglophone minority population is underrepresented in the health care and social assistance industrial sector.
<a href="#">Gender</a>	Anglophone women experience the highest rate of unemployment combined with the lowest average income amongst both the Anglophone and majority group. There are high proportions of senior widowed Anglophone women.
<a href="#">Culture</a>	This Anglophone community is among those least likely to believe in equal access to government jobs. Low knowledge of resources for employment and career development.
<b>Defining Characteristics of the Region</b>	
<p>The high rate of aging, growing levels of low income and decline in levels of education suggest an increasing health risk for this community. The social support network of families and communities is likely to be strained by the low number of middle generation individuals. The discrepancy between fairly high levels of education and income status is noteworthy among Estrie Anglophones. The fact of an age structure which diverges from the majority, the tendency to be located in rural rather than urban areas and the general reduction of health services combined with a culturally preferred family based model of care suggests gendered health outcomes.</p>	

## Region 05 – Estrie

Estrie is an administrative region entirely contained within the historic Eastern Townships. In 2001 Estrie had 23,385 Anglophones who comprised 8.4% of the region's total population of 279,695. The largest municipality in the region is Sherbrooke with a population of 73,280 which also contains the largest Anglophone population (2,800). For the 1996-2001 period, the Anglophone

population of the region dropped by 1385 individuals which represents a decline of 5.6%. The Estrie Anglophone community is among the most aged linguistic communities across Québec. The region is predominately rural made up of small towns with a major urban center, Sherbrooke (population of 75,000). Manufacturing, educational services, health services and agriculture are the largest employers of the English-speaking population in this region.

Regional rankings for 16 Regions / Potential for services in English	
Feature (1=highest, 16=lowest)	Rank
Demographic Characteristics	8
Access to entitled services	7
Services delivered in English	4
Summary rank	6
Source: (CCSEC, 2002: 12-15)	

### Income and Social Status

Characteristics	<a href="#">mmi</a>	<a href="#">rgi</a>
Average income	0.94	0.76
Population 15+ without income	1.21	1.00
Dependence on government transfer	1.33	1.63
Incidence of low income (under \$20k)	1.11	1.14
Incidence of high income (over \$50k)	0.94	0.76

- While displaying a high proportion of individuals with low income, Estrie Anglophones also exhibit greater than normal numbers of people at the higher end of the economic spectrum. In other words, a significant polarization of rich and poor.
- The average income for Estrie Anglophones is slightly lower than that of the Francophone majority of the same region (mmi.94) and even lower than that enjoyed by the rest of Anglophone Québec (rgi.76)
- The rate of dependence on government transfer is higher than that of the majority population and less than the rest of Anglophone Québec
- Anglophones living in Estrie are more likely than Francophones to earn under \$20k and do not differ from larger Anglophone Québec in this respect

### **Social Support Networks**

<b>Age Structure</b>	<b>Anglo</b>	<b>Franco</b>
0-14	16.2	18.5
15-24	12.3	14.1
25-44	25.9	28.4
45-64	26.6	26.7
65+	19.0	12.3
Care-giver to Senior Ratio	1.56	2.61

- The Estrie Anglophone population are experiencing a high rate of aging (19.0% are 65 and over compared to 12.3% for Francophones. In other words, Anglophones have 54% more individuals in their senior years than found in the Francophone majority.
- Given the majority population is not experiencing the same demographic characteristics as the minority its institutions and services may not be designed to meet the same needs
- Estrie Anglophones have traditionally turned to family and community in the case of illness, childcare, and care for seniors rather than public institutions. While rural populations typically experience a lack of geographical proximity among family members this is exacerbated in the case of English-speakers living in Estrie by the accelerated rate of aging. As a result of the exodus of a significant portion of the middle-years group we can easily surmise that the informal network of family, friends, and neighbors traditionally relied upon is under strain.
- This strain in social support poses a health risk which becomes even greater when combined with the recent reduction in public health services and the fact that the income level of most Anglophone families places the option of purchasing private care beyond reach.
- As a proportion, there are 53% more senior Anglophone women than senior Francophone women in Estrie.
- There are five and a half times more widowed women than men in the Anglophone Estrie population.



## Education

Characteristics	mmi	rgi
Without high school leaving	1.07	1.39
With post-secondary qualifications	0.98	0.71
High school drop-out	1.16	1.12
College drop-out	1.11	1.06
University drop-out	1.34	1.15

- According to 2001 Census, the 15-24 and 25-44 age groups of Estrie Anglophones have lower tendency than Francophones to possess post-secondary qualification. In the 45-64 and 65 and over age groups we see higher tendencies among Anglophones than Francophones. This represents a relative decline in educational status across the generations.
- Among those in the region without high school leaving or additional training Estrie Anglophones are 7% more likely than Francophones to be in this situation
- Anglophone youth 15-24 are 29% more likely than Francophones not to attain high school leaving certificate. Older Anglophones are less likely than Francophones to show low educational status. Again, a significant decline across the generations.
- Estrie Anglophones are 39% more likely than their Anglophone peers across the province to have no high school leaving or additional training
- Once they have entered the various levels of schooling, and relative to their Francophone counterparts, English-speakers in the region are more likely to desist from their studies at the high school (mmi=1.16.), college (mmi=1.11) and university levels (mmi=1.34)
- Within the Anglophone Estrie community women are 23% more likely not to complete their degree than men.

## Employment and Working Conditions

Characteristics	mmi	rgi
Unemployed	1.18	0.85
Not in workforce	1.28	1.20
Self-employed	1.13	1.12
15+ hrs/week, unpaid housework	1.24	1.28
15+ hrs/week, unpaid childcare	1.09	0.97
10+ hrs/week, unpaid care to seniors	1.69	1.05

- The main industrial sectors for Estrie Anglophones are manufacturing (25%) educational services (11%), health (8.3%), and agriculture (8%)
- Anglophone women are almost four times more likely than men to be working in health care and social assistance than in any other industrial sector



- Estrie Anglophones are 13% more likely than Francophones in the region and 20% more likely than Anglophones across the province to be out of the labour force (have not worked for 1 year and not actively looking for work)
- The unemployment rate of the English-speaking Estrie community is 20% higher than that of the French-speaking Estrie community. When compared to other Anglophone communities in Québec the rate is 14% lower.
- Government transfers represent 33% more of the income of Estrie Anglophones than of the Francophone majority
- In the Estrie region, English-speaking men are 80% more likely than Francophone men to perform 10+ hours per week of unpaid care to seniors; Anglophone women are 59% more likely to do this than Francophone women sharing same territory. Anglophone women living in the Estrie region are 94% more likely than Anglophone men to perform 10+ hours of unpaid care for seniors
- Estrie Anglophones are 28% more likely than Francophones in the region to be self-employed
- The knowledge of local resources for career services, employment resources, or public resources to help start a business is low for Estrie Anglophones (Saber-Freedman, 2001:73-76)
- English-speaking individuals living in Estrie are the least likely among all the regions to believe Anglophones have equal access to federal or provincial jobs although interest in such opportunities is fairly substantial (Saber-Freedman, 2001:79-82)

### ***Social Environments***

- Overall the Estrie Anglophone population declined by 1,385 individuals which represents 5.6% from 1996 to 2001
- Roughly 2/3 of Anglophone population were living in the same municipality five years previously
- Estrie region has a high rate of international immigration. The rate of inter-provincial migration is high (six or seven times higher than in the Francophone community).
- The presence of visible minorities is stronger in the Estrie Anglophone minority when compared to the Francophone majority sharing the same territory.
- Estrie Anglophones are five times more likely to claim citizenship other than Canadian and eight times more likely than the Francophone majority to have been born outside the province
- This community continues to exhibit a high tendency for out-migration to Montréal and to other Canadian provinces
- When compared to the Francophone majority there is a higher level of unemployed individuals, higher portion of low income households, higher levels of unpaid work by the “sandwich generation”, and higher numbers of frail elderly who are mostly women.
- 1/3 of the elderly in Estrie are poor or very poor

- While during the inter-census period of 1971-1981 this community suffered significant population loss, the Anglophone farming population stood up better than the Francophone. According to the most recent census English-speaking individuals living this region are twice as likely as French-speakers to be employed in agriculture
- 63% of the English-speaking population in Estrie are bilingual (CCESC, 2002: 8)
- Estrie has three designated English-language institutions for health and social services; Wales Home, CR Dixville, and Institut universitaire de gériatrie de Sherbrooke.
- Among the institutions serving the interests of Anglophones; Bishop’s University, an English-speaking University, and Champlain Regional College, a CEGEP, are both located in Estrie region.

### **Health Services**

<b>Use of English in Health Situations</b>		
	Province	Estrie
Doctor	86%	79%
Hospital	80%	63%
Community organization	78%	75%
Emergency room	73%	40%
Private facility	72%	56%
CHSLD	70%	61%
CLSC	66%	72%
Info-santé	61%	56%
Private nurse	75%	89%
Overall	75%	65%
Rank among regions	n/a	7 <sup>th</sup>

Source: CCESC, 2002: 12

- The use of English in health and social service situations in Estrie relative to the provincial average is low. (CCESC, 2002: 12)
- The percentage of English-speakers receiving service in English are highest from doctors, private nursing services, CLSCs, and community based groups and lowest from emergency rooms, Info-santé, private residence, public long-term care and hospitals.(CCESC, 2002: 12)

<b>Service category</b>	<b>Entitled rights</b>
Primary care (CLSCs)	1
General and specialized medical services	1
Long-term care	2
Youth protection	1
Rehabilitation	1
Inter-regional agreements	4
Designated institutions	1
Sum of indicators of level of access	11
Regional ranking	4
Definition of the level of access to a service : 1 = substantial; 2 = moderate; 3 = limited; 4 = extremely limited	
Source: (CCESC, 2002: 15)	

- With regard to entitled services as defined in regional access programs approved by the Québec government for health and social services in English Estrie Anglophones are weakest with respect to inter-regional agreements (extremely limited access) and long-term care (moderate access) and have substantial service access to primary care (CLSCs), general and specialized medical services, youth protection, rehabilitation, and designated institutions.(CCESC, 2002: 15)
- Estrie region has no inter-regional agreement in their access programs approved by the Québec government in 1999
- In Estrie, English-speaking people appear to under use the public long-term care system, preferring private resources more adapted to their linguistic and cultural needs. (CCESC, 2002: .17)
- The Anglophone community is underrepresented as employees in the area of health and social service

### **Gender**

- Anglophone Estrie women have the highest rate of unemployment (14.1%) combined with lowest average income (\$11,124) among male and female Anglophone and Francophone groups
- If we consider unpaid work, (more than 10 hours weekly of unpaid care to seniors specifically) Anglophone women show higher tendencies than Francophone women (47% higher), Anglophone men (91% higher), and Francophone men (3 times as high)
- In the region, English-speaking men are nearly twice as likely as Francophone men to perform 10+ hours per week of unpaid care to seniors (mmi=1.80)
- Anglophone women draw more than ¼ of their income from government transfers
- There are nearly three and a half times as many extremely aged women (85 and over) in this group than we find on a per capita basis in the Francophone Estrie population.

- When we consider women over 65 we find much higher proportions of English-speaking senior women than Francophone (mmi=1.53)
- There are three times as many elderly Anglophone men as Francophone
- There are also relatively many more widowed Anglophone women than Francophone women (mmi=1.59)
- While Anglophone women are almost four times more likely than Anglophone men to be employed in the area of health care and social assistance they are highly unlikely to have postsecondary education in the health professions
- Women are highly implicated in a family based model of care and yet with declining access to resources like family and community support, education, and income.
- Anglophone men are more implicated in the family based model of care than Francophone men and this is coupled with declining access to resources

### **Culture**

- 31% of Estrie Anglophones are Catholic; 57% non-Catholics; Anglophones in Estrie are more than twice as likely as Francophones to have no religious affiliation
- If we consider Anglophone Estrie from the point of view of the ethnic origins of the individuals who comprise this population we find a greater diversity of backgrounds (almost twice as varied) than we find in the majority population
- In terms of family patterns, the Anglophone community is more likely than its Francophone counterpart to be legally married; somewhat less likely to be divorced; less likely to be in common-law relationship; and finally, substantially more likely to be widowed



# Acronyms and Glossary

## Acronyms

CCESC	Consultative Committee for English-speaking Communities (Health Canada)
NPI	Networking and Partnership Initiative
QCGN	Quebec Community Groups Network
CHSSN	Community Health and Social Services Network
C-MI survey	CROP-Missisquoi Survey conducted in the spring of 2000
PCH	Patrimoine Canadian Heritage

## Glossary

**Administrative Region** – The concept of administrative region is important to an understanding of the way that the Government of Quebec organizes its territory for the delivery of services. There are currently 17 administrative regions. For the purposes of health, there are 16 health regions. In the former, more general example, we find Centre-du-Québec added as a new, seventeenth region. For the analysis of entitled services and for the coverage of the CROP-Missisquoi survey, the 16 health regions were utilized. To remain consistent to these data sources, the demographic analysis used in this document retains the 16 health regions as the geographic basis.

**Aging** - At a societal level aging refers to the proportion of age groups in a given population: young, mature, and aged. According to the United Nations a population is considered “aged” if 10% or more of its population is 60 years or over. For Census Canada, the term “elderly” or “senior”, refers to 65 years or over. Some of Quebec’s official language communities are presently living the rate of aging the general Canadian population is predicted to experience in about 20 years.

**Agreements on inter-regional services** – are agreements between regional health councils that facilitate the provision of services in English to residents of other regions which may not be in a position to offer such services in English in their region.

**Care-giver-to-Senior Ratio** – refers to the number of individuals in a given population between the ages of 35-54 relative to the number of individuals aged 65 and over. Implicit in the use of this ratio is the expectation that the care-giver generation provide informal support and, in some instances, care to seniors in the community.

**Demographic Vitality** - The concept of demographic vitality used in the Report to the Federal Minister of Health was a blend of demographic characteristics considered important to health. These characteristics included population size and proportion, percentage of bilingual persons in the minority community, unemployment rate, and age structure. Each region was ranked for each of the characteristics and an overall ranking was calculated based on the sum of the rankings.

**Designated Institutions** – are those health and social service institutions which are specifically mandated to provide health and social services to members of the English-speaking community. Many of these institutions were originally established by the Anglophone community but are now publicly funded and depending on this designation, able to operate bilingually under certain conditions.

**Entitled Services** – are those health and social services which are described in regional access plans and for which access in English is guaranteed by law under certain conditions.

**First Official Language Spoken** - The first official language spoken (FOLS) is a derived language variable based on the answers to three Census of Canada questions: knowledge of English and French, mother tongue and home language. The algorithm used by Statistics Canada results in the assigning of 98% of Canadians as Anglophone or Francophone with the remaining 2% split between dual Anglophone/Francophone (0.5%) or neither Anglophone or Francophone (1.5%). The dual Anglophone/Francophone individuals have been divided equally between the two language groups.

**Health Determinants** – These are a broad range of individual and collective factors that have been shown to exert a determining influence upon health status.

**Minority-Majority Index** - The Minority-Majority Index in this report compares the characteristic of the regional *minority* Anglophone population relative to the *majority* Francophone population which shares the same region. An **mmi** greater than 1.00 indicates that the characteristic is more commonly found in the minority population. An **mmi** less than 1.00 indicates that it is less present in the minority population.

**Population Health** – Population health is an approach that aims to improve the health of an entire population by taking into account a broad range of factors that have a strong influence on health.

**Relative Geographic Index** - The Relative Geographic Index in this document refers to the relative value of a characteristic for the Anglophone population of a given region compared to the Anglophone population of the entire province of Québec. Thus, an **rgi** greater than 1.00 indicates that the characteristic is more present in the specific regional Anglophone population than in the provincial Anglophone population as a whole. An **rgi** less than 1.00 indicates that the characteristic is less present in the regional population than in the provincial population.

**Without High School Leaving** – refers to the population 15 years and over who have not attained a high school graduation certificate.





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