

## Federal funding marks a major move forward

The CHSSN has just concluded a new agreement with Health Canada that delivers a total of \$19.5 million over four years to improving access to English-language health and social services in Quebec. “This is major – and very welcome – news,” exclaims Jennifer Johnson, CHSSN executive director. “It means that our access efforts will be continued, and expanded, through to 2013.”

The federal government has also made a commitment for new resources to extend the McGill Training and Human Resources Development Project.

“We presented a report to the Health Minister last April on how past federal funding had benefited the English-speaking minority in Quebec,” says Johnston. “We then prepared a document, *Investing in the health and vitality of Quebec’s English-speaking communities*, which outlines what we want to do with future federal funding. Our new funding agreement with Ottawa was concluded at the end of January.”

These new resources will support anglophone community networking by enhancing the ability of existing networks to partner with their service providers as well as allowing for expansion into other, targeted, vulnerable communities.

A key component of CHSSN’s new action plan is to facilitate adaptation of healthcare services already being provided in the Quebec system to meet the needs of

the English-speaking community. Services for seniors, youth and families, and supportive programs for people with physical and mental disabilities are of major importance, as are public health programs.

### Agencies to play a leadership role

In CHSSN’s previous five-year action plan, the focus was on public institutions, 37 of which directly took on the job of upgrading their capacity to serve English-speaking clients. This time it is the regional Health and Social Services Agencies that will coordinate the programs.

“The CHSSN will be working closely with the Ministry and with the regional coordinator of each Agency to develop its multi-year program,” explains Jim Carter, CHSSN policy and program advisor. “The operation will be run under the leadership of the Agencies.”

The new funding will provide Agencies the means to invite those institutions participating in access programs to present projects that will help them to implement services for their local English-speaking community. Resources are to be spread over four years to allow service providers to maximize the impact of their projects.

“The CHSSN will also be working closely with the provincial committee that advises the Ministry on English services access,” says Carter. “Projects put forth by the

regional Agencies will involve the regional access committees as well as English-speaking communities who will play a key role in defining service priorities.”

These new resources stem from a federal plan, announced in June, for assistance to Canada’s minority language communities. The *Roadmap for Linguistic Duality in Canada 2008-2013: Acting for the Future* set out the federal intention to make a \$1.1 billion investment over five years in five priority areas, including health.

“This new federal commitment is so important,” Carter affirms, “because it will strengthen the partnerships between community networks and service providers, and among all the other key actors in the healthcare system. And it will further support our efforts to strengthen legislative guarantees for English-speaking Quebecers.” ■

### More research to come

As part of the new federal commitment, the CHSSN will be concluding a four-year framework agreement with the Ministry to conduct research on English-speaking communities. The objective is to carry out commissioned research on the health status of anglophone Quebecers. These new research projects should significantly contribute to the knowledge base required by stakeholders and planners in the health and social services system.

## Public health high on CHSSN agenda

November was a very active month for the major public health initiative launched by CHSSN last year. New public health projects by community organizations were approved. These groups met with each other, and with their francophone counterparts from across Canada, to exchange ideas and experiences. And all attended an international conference on public health held in Quebec City.

“Expanding the breadth and depth of local community projects is key to our Community Public Health Strategy,” explains Jennifer Johnson, CHSSN executive director. “It’s crucial for future access to quality health care that better ties be

developed between anglophone communities and the provincial public health system.

“This is round two,” says Johnson. “We received additional funding from the Public Health Agency of Canada to continue our 2007-08 initiative to help community groups reinforce their relationships and exchanges with regional local public health planners and professionals.”

Eleven community organizations submitted projects this time, ranging from a basic needs assessment to a travelling social theatre. Each had developed its own strategy on how to engage with its public partners.

“What’s fun about this phase of our public health project,” says Johnson, “is that we were able to bring in newly developing networks. L’Association amicale des jeunes et parents, Agape, from Laval, and the Neighbours Regional Association of Rouyn Noranda have joined with our established networking groups.

“The future goal,” Johnson says, “is to work with these communities to help develop their particular knowledge base and to incorporate English services into public health programs. And we’ll be building on the headway made at our spring conference with public health officials who discovered what our community groups are doing.”

## Groups get together for mutual support

One of the pillars of CHSSN’s community support policy is to bring its networking groups together every year to meet and discuss their activities. In November, two of the groups made presentations on some of their new public health initiatives.

### Schools the focus

“We decided on a very participatory project to promote healthy living habits within the school community,” says Suzanne Aubre, executive director of the Megantic Community Development Corporation (MCDC). “It’s called [Walking to Vancouver](#), and involves teams of students, teachers, MCDC staff and people from the community in a virtual walk across Canada to the opening of the 2010 Olympics next February.”

Starting February 25, the teams will walk every school day for the next year, recording their distances on a huge map of Canada, with Iqaluit in Nunavut as the starting point. Along the way, special activities will mark geographic points noted for Canadian historical or athletic achievements. “And it is a real competition,” says Aubre. “There’ll be medals and a trophy for winners. It’s a very popular project.”

### Making friends in French

Neighbours Regional Association of Rouyn Noranda, a new organization, and the sole anglophone group in the Abitibi region, wanted to help francophone healthcare professionals who took English language training to retain what they learned. “We’ve set up

informal meetings where they can practice the language with anglophones in a social setting,” says Sharleen Sullivan, executive director. “These [English Encounters](#) have other advantages, too, in that they’re helping anglophones to build a relationship with their healthcare providers, while encouraging the francophone professionals to learn more about our community.”

“Hands down, these community groups meetings are always a great success,” says Jennifer Johnson, CHSSN executive director. “Many anglophones are very isolated, and not just physically, from their public institutions. Hearing about the experiences of other organizations breaks down that sense of isolation. And they pick up ideas that can be used in their own community.”

## Common themes at international conference

The Quebec Public Health directorate has been organizing an annual professional conference for 17 years. In November, its Journées annuelles de santé publique (JASP) conference was designated an international forum on social inequalities in health care. Four hundred francophone delegates participated in discussions during the week. They were joined by CHSSN staff and anglophone community groups who attended many of the conference workshops.

### Children at risk

Anne-Marie Powell from the Megantic Community Development Corporation attended a discussion on the impact of social inequality on the health of young children. “It’s been proven that what happens to very young children follows them all their lives,” says Powell. “This was a recurring theme throughout our discussion: how negative social determinants have such an impact

on the health of children. What can society do to reduce such repercussions as low self esteem and even suicide in their adult life?”

“I found it most interesting that the research of these public health professionals from around the world mirrored what the CHSSN has been doing in measuring social determinants and how they affect the health of English-speaking Quebecers and the vitality of their communities. It was a very exciting conference for me.”

### Poverty as an issue

Evelina Smith, from the Townshippers’ Association, also had an interesting experience. “I went to an amazing workshop on poverty,” says Smith. “Our group included anti-poverty activists, welfare recipients and professional health care providers. The opinion of the lead speaker – that often the life of poor people was akin to trying to

go up the down escalator – was well illustrated during our very lively discussion.

“Our key topic was food banks,” Smith explains, “and it raised issues most of us had never considered. For example, what if the needy person doesn’t live near the bus route to a food bank? Or doesn’t even have money to get on a bus?”

“It was such a very broadly based conference,” says Smith. “And, overall, the amount of networking that was possible was amazing. I was very privileged to be there.”

### A worthwhile event

CHSSN attended JASP for the first time in 2007. “Since then, we’ve definitely become recognized by the Public Health directorate,” says Jennifer Johnson, executive director. “Our community members are also gaining recognition through their work in the public health area.”

## Francos and anglos have a lot in common

The JASP conference was site of another interesting session when the CHSSN hosted a gathering of its invitees with representatives of francophone health networks from across Canada. “The Société Santé en français has networks in every province and territory,” explains Russell Keuber, CHSSN project coordinator. “As two minority populations, we soon realized that our problems have many similarities.”

The idea for the Quebec meeting stemmed from a visit that CHSSN staff paid to the Société Santé et Mieux-être en français du Nouveau Brunswick, “They have a very interesting model,” says Kueber. “The highlight of our visit was seeing CLC sites where all French minority services are brought together: primary healthcare clinics, radio, arts and culture – up to 20 organizations all working together.

“These meetings were very productive,” affirms Kueber. “At JASP, we all really connected and everyone felt they’d learned a lot. Both minority communities have been very innovative in addressing the question of accessibility to services. We understand and respect the magnitude of the challenges we each face. Consensus was that we need to do more of this. We all want more opportunities to meet.” ■

## Anglo data on line for first time

Health data on English-speaking communities is to be entered for the first time in one of Quebec's most important data banks. The CHSSN has concluded an agreement with the Institut national de santé publique de Québec (INSPQ) to incorporate health determinant statistics on INSPQ's website, Santéscope.

"Santéscope is the place to get statistical information, in graph format, on most of the major health determinants for the Quebec population," explains Jennifer Johnson, CHSSN executive director. "It's widely used by healthcare planners, professional researchers, and organizations that want to run public health campaigns on such things as obesity, heart disease or diabetes. But it has never carried any stats on anglophones."

INSPQ became interested in the idea of adding data specific to English-speaking Quebecers after being briefed on the extent of the knowledge base that CHSSN has already acquired and could make available.

"We've identified two areas where our material on the English-speaking community would be of interest," says Johnson. "By the end of March, we'll have introductory elements up on one health determinant, either age or revenue.

"It's a good start," affirms Johnson, "and we can look forward to expanding into other data. We're very excited about this: it's our biggest advance so far in working with the Public Health sector." ■

## McGill and CHSSN to continue partnership

McGill University has concluded a new agreement with the CHSSN for 2009-13. It continues the five-year partnership with the McGill Training and Human Resources Development Project begun in 2003. In light of the successes achieved in that effort, the federal government has committed new funding in its new action plan for official-language minorities.

"We are very pleased that the government decided to continue to support efforts to improve access to health services for Quebec's English-speaking communities," says Ron Creary, chair of CHSSN's board of directors. "And we're delighted that McGill has agreed to carry on its leadership role in this important project. The CHSSN is proud to again be the key community collaborator with McGill in its development and implementation."

A solid foundation was laid during the first phase of the project. The university linked up directly with 17 regional health and social services agencies, 97 health and social services institutions, 28 language-training organizations and six English-speaking community organizations. Over 5,000 French-speaking healthcare professionals received second language training to improve their ability to provide their services in English.

And to increase the number of anglophone professionals working in the regions, McGill collaborated with local service providers and community organizations to develop internships in several disciplines. ■

## Get healthy campaign looks like a winner

The CHSSN has joined with several public institutions, health organizations and food businesses in a major province-wide health promotion campaign called the 5/30 Health Challenge. Now in its fifth year in Quebec, the participation of CHSSN is bringing the benefits of this campaign to its English-speaking communities.

"We've been supportive all along," says Russell Kueber, project coordinator, "but this year we were able to attract funding from the Public Health Agency of Canada to translate promotional material and get it to our communities. The Challenge fits well within CHSSN's goal of having existing public health programs adapted to make them accessible in English. And it goes beyond translations; we see it as a means of making our public partners more aware of the English-speaking community."

Aimed at all Quebecers from the age of four, the six-week Challenge campaign is designed to encourage healthy lifestyle habits. Participants are asked to commit to eating at least five portions of fruit and vegetables a day and moving for at least 30 minutes per day for at least five days a week. Young people are encouraged to spend less time in front of screens, adults to keep check of their weight and waistline.

Registrants will receive on-line support, information kits and bonus coupons. There will also be prizes available to successful participants. The Challenge runs from March 1 through April 11. To register: [www.530HealthChallenge.ca](http://www.530HealthChallenge.ca). ■

## Symposium to promote new research network

A symposium to be held in Montreal in March aims to open up new avenues of communication among health researchers. The goal is to encourage and promote more research on the health of the English-speaking minority in Quebec. The gathering is sponsored by the Canadian Institutes for Health Research (CIHR) in partnership with the CHSSN, the McGill Training and Human Resources Development Project, and the Jeffrey Hale.

“Much more research needs to be done,” affirms Jim Carter, CHSSN policy and program advisor. “It’s crucial that we are able to have all the pertinent information that is required for all the stakeholders in order to continue to improve health outcomes in our English-speaking communities. For that to happen, we need to provide targeted support for researchers dedicated to the topic.”

This conference is one step, bringing together researchers in the field to establish a dialogue with each other and with anglophone community organizations. Together, they will discuss the most appropriate research themes and explore funding opportunities.

“I think this symposium will provide an important momentum in opening up a fruitful dialogue,” says Carter. “We can then follow through with promoting research initiatives that actually reflect the needs and priorities identified by the English-speaking community. I hope it might also encourage other researchers to become involved.” ■

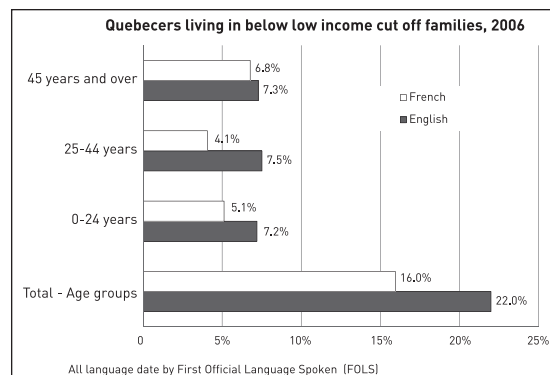
## Data take a dramatic turn

A new CHSSN analysis of census data will provide another powerful tool for improving access to health services for anglophone Quebecers. Using data from the 2006 Canadian census recently released by Statistics Canada, this new report paints a clear and dramatic picture of a troubling situation.

“Our analysis of the 2001 census provided basic information English-speaking communities needed to argue for better delivery of healthcare services,” explains Jan Warnke, CHSSN demographic consultant. “By showing what has happened over the following five years, this new report points to the issues and areas most in need of attention now. And it exposes the differences between English and French communities.”

how anglophones are defined, whether by their mother tongue or their first other language spoken (FOLS). “When only mother tongue is used as the criterion for delivery of services in English, this can grossly underestimate the number of English-speaking people requiring services,” says Warnke. “The 2006 stats for Quebec record a mother tongue total of 667,100, but a FOLS total of 994,720. That’s a huge difference.”

This report analyzes population distribution by FOLS under three orientations – income level, age and household living arrangements. “It identifies where there are the highest and smallest populations, and where there are particular characteristics or problems,” Warnke explains. “So we can zero in on any particular group.”



Take income, a prime example. According to the new tally, 17 percent of Quebecers live in low-income households. Proportionately, however, 38 percent more anglophones than francophones live below the low-income cut-off. “There are huge differences among health regions,” says Warnke. “But it’s clear that, across the board, anglophone families are in trouble.”

The new report also brings to light the tremendous importance of

It is the CHSSN data model, using dedicated information technology, that allows for extrapolation of massive amounts of raw data into meaningful images. “We’ve broken the 2006 data down according to 95 CSSS territories,” says Warnke. “We can create thousands of cross tabulations to illustrate determinants of health and areas of need. This is important information for everyone – the government, our communities and the service providers.” ■

## Gaspé groups focus on family health

A new government directive on enhancing family living has found ready response in the Gaspé region. Legislation was introduced last year requiring every municipality in Quebec to develop a policy for family development. Gaspé-Percé Community Health Networks has seized the opportunity to have health and social services in English included in that policy planning.

Vision Gaspé-Percé Now has been involved from the start. “We’re on the committee that’s developing the municipal policy,” says Cynthia Patterson, Vision executive director. “We came prepared with the data from our own health networks and have made certain that our anglophone community profiles are included as part of the mix.”

As well as providing basic data, the Network consulted with seniors to establish their priorities – they are concerned about local transport, assisted living and housing for people with cognitive deficits, and with physical and social activities. Youngsters in elementary and secondary schools and young parents were also consulted.

“A ‘family friendly’ municipality is a very interesting tool to allow for consideration of anglophones’ needs within the community context,” says Patterson. “We want to take it one step further. We believe our municipalities would benefit greatly by becoming part of the Quebec Villes et villages en santé network which promotes better coordination of health and social services. That would provide an ideal framework for developing access programs.” ■

## Batshaw wins award of excellence

Batshaw Youth and Family Centres has received an Award of Excellence from the Association des centres jeunesse du Québec. The agency won this special recognition for an innovative prevention project it introduced, with local partners, for Black families in LaSalle. Given its outstanding success, it may well be adopted by other communities.

The LaSalle project was set up as a pilot in 2004 by Batshaw, the local CLSC and the LaSalle Boys and Girls Club. Their goal was to prevent more Black youth from coming under the youth protection system. “LaSalle had the largest number of children being reported to child protection as being abused or neglected,” says Howard Nadler, Batshaw’s manager, Liaison with Network Partners. Something had to be done to change that picture.”

The partners took aim at some of the root causes of a dire situation

with a comprehensive program of family support and conflict mediation. Intensive home-based support services for the families included assistance with parent/child conflict; with child behaviour management, at home and in school; individual counselling; and learning issues. A system of providing referrals to community services was set up, which marked a greater collaboration between social services providers in meeting Black families’ needs.

“We were all thrilled with the results,” exclaims Nadler. “Sixty-four families, with a total of 97 children, participated. Before our intervention, all these kids would have been referred to youth protection. But with the cooperation of the families, and the services we offered, only nine of those children required youth protection. Feedback from both the families and their kids has been very, very positive.” ■

## Townshippers launch an important search

A new grassroots community development initiative has been launched for and by the English-speaking community in the Eastern Townships. The project is called the Eastern Townships Community Search Conference, which seeks to answer the question: What is the most desirable future for a vital English-speaking community in the Eastern Townships in 2014?

“The Search Conference concept is based on bringing people together to establish priorities for the community and to develop the means of achieving them over the

next five years,” says Rachel Garber, executive director of Townshippers’ Association. “The key is that the public is asked to select whom they want to attend the conference. It’s a very effective way of engaging the whole community. What I found striking is that the names that were put forward are not the usual list we see always doing the lion’s share of volunteer work. A lot of new people are involved. That’s fantastic.”

The Townshippers are partnered with four other organizations in preparing the conference. Canadian Heritage provided the funding. ■

## Learning to do business from a distance

A new distance learning program designed to help youth, women and older workers in remote areas to develop entrepreneurial skills has proven to be a winner. The program is a joint venture of the Quebec Learners Network (QLN), the Carleton Centre for Community Innovation (3ci) and the local Community Learning Centre. It is funded by Human Resources and Social Development Canada.

“We set up a pilot program in two Lower North Shore towns, Chevery and St. Paul’s River,” says Peter McGibbon, project director. “There were 12 participants who over eight-weeks received coaching and mentoring through a schedule of videoconferences and webcast workshops. This phase was followed by a guided self-study program in which individuals developed their own skills and support networks to reach their own goals.”

## Helping ageing volunteers

A recent Montreal workshop on managing ageing volunteers raised important issues that all nonprofit organizations should be aware of. Experts in law and gerontology advised the Community Counsel on Volunteerism on the necessity of identifying the early onset of cognitive disability and understanding that there is actually a legal responsibility to intervene should any volunteer exhibit signs of impairment. This obligation stems from the Good Samaritan dictate, which requires citizens to come to the aid of someone in need. It overrides any contractual agreement that waives such responsibility. ■

The program is not a one-size-fits-all concept. “We wanted the program to be flexible to meet their individual needs,” says McGibbon. “Not everybody wanted to set up a new business right away. Some wanted to upgrade their workplace skills, others were interested in developing community projects.”

The ultimate goal of the program is for participants to develop the self-confidence to take responsibility for their own working lives. “These Lower North Shore groups really rose to the challenge,” McGibbon affirms. “They’ve worked with each other to form a learning community and are well on their way.

“We’ve generated a number of tools that enabled this to happen,” McGibbon explains. “Now that we’ve had this success, the concept can be introduced into other remote anglophone communities.” ■

## Mental health spotlighted

A new national mental health charity has been established to develop leading research and demonstration projects in the field of mental health, mental illness and brain injury. Mental Health Partnerships of Canada, a new body created by the Mental Health Commission of Canada, has joined with the Canadian Psychiatric Research Foundation to launch the venture. Their goal is to harness a national army of volunteers to fund-raise on a scale with such charities as cancer and heart and stroke. Ella Amir, executive director of AMI-Quebec, chairs the Commission’s Family Caregivers Committee. ■

## McGill nurtures aboriginal students

McGill’s School of Social Work has been making some significant headway in its goal of attracting aboriginal students by adapting its curriculum and providing them with special support on campus. The School is also exploring the possibilities of providing degree level courses in the North.

“Coming to the city is quite a challenge for most native people who want to study,” says Wendy Thomson, School director. “For others, it just isn’t an option. We’re taking a two-pronged approach to educating native social workers to serve in their communities.”

For those who might be interested in attending McGill, there is a three-week summer program that gives them an idea of what is involved in studying social work. Those who do enroll follow a Bachelor’s degree program tailored to their specific cultural needs. They also receive a high level of personalized support from faculty and a dedicated resource centre to use as their home base.

In another breakthrough initiative, the School has entered into a partnership with the Inuit communities of Nunatsiavut in Labrador and Nunavut in northern Quebec to develop a community-based Bachelor of Social Work degree for Inuit students. “We’ve received a grant from Health Canada to develop a preparatory entry program and to design an Inuit-oriented curriculum,” says Thomson. “It’s really exciting that we could eventually introduce a degree level program in the North.” ■

## Black community group joins the CHSSN

The most recent community organization to join the CHSSN, the African Canadian Development and Prevention Network (ACDP) was formed in 2005. Founded in response to heightened violence and increasing social problems within Montreal's Black community, the ACDP brings together the Côte-des-Neiges Black Community Association, the NDG Black Community Association, the West Island Black Community Organization, the Quebec Board of Black Educators, the Council for Black Aging Community of Montreal and the LaSalle Black Resource Centre.

While each of its member organizations had established solid programs and policies in their own right, the urgency of the present situation called for a framework within which they and future Black community organizations could work together towards common goals. The overall aim of the ACDP is to help Black neighbourhoods build networks of social, cultural, educational, economic, and psychological supports that promote the healthy development of Black families, protect Black children, and strengthen Black communities.

The Network has been making headway on several fronts. Its Black Family Strengthening Program, aimed at helping troubled families, has been particularly successful. It addresses the causes of family dysfunction by strengthening parenting skills and improving the children's social and life skills. Many families, and their children, have so far benefited from the program. ■

## CHSSN business

Brigid Gagnon has been appointed CHSSN's new administrative assistant.

### New members

The CHSSN welcomes three new members:

- African Canadian Development and Prevention Network; Montreal
- L'Association amicale des jeunes et parents (Agape), Laval
- LEARN, (Leading English Education and Resources Network), an educational foundation funded through the Quebec-Canada Entente for Minority Language Education, headquartered in Laval

### Member news

Batshaw Youth and Family Services has a new executive director, Margaret Douek, replacing Michael Udy, who retired in October.

CCS (Catholic Community Services) has a new managing director, Bruno Mital, replacing Zenny Bryniawsky, who retired in September after over 20 years in that post.

Cynthia Patterson has been named part-time executive director of Vision Gaspé-Percé Now.

Vision Gaspé-Percé Now has opened a new office at the Douglas Community Centre in Gaspé. The telephone number is 418 368 3212.

## The CHSSN

The Community Health and Social Services Network (CHSSN) is a network of community resources, associations and public institutions dedicated to the development of health and social services for English-speaking communities in Quebec.

The CHSSN's objectives are to:

- Foster projects and initiatives, through partnership and network building, to promote access to English-language health and social services, and support community vitality
- Create new knowledge and provide information on English-language communities and their needs
- Promote, evaluate and disseminate successful models of organization of services
- Promote informed public policy supporting the vitality of English-speaking communities
- Support conferences and other forms of consultation on health and social services for English-speaking communities

Any organization interested in becoming a member of the CHSSN may contact us at:

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