



Consortium national
de formation en santé



Société Santé
en français

The Health of Francophones in Minority Communities: An Urgent Need for More Information to Provide Better Services

S U M M A R Y

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The Health of Francophones in Minority Communities: An Urgent Need for More Information to Provide Better Services

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The *Consortium national de formation en santé* (CNFS) and the *Société Santé en français* (SSF) are two national organizations working to improve access to French-language health services for Francophone minority communities (FMCs). They see access to knowledge on these communities as a short-term priority. Indeed, the CNFS, the SSF, and their partners have on many occasions lamented the lack of relevant data describing the realities faced by Francophone minority communities, their health needs, the services at their disposal, and the human resources able to provide care in French. This gap creates significant barriers to the provision of relevant French-language health services in these communities.

The CNFS and the SSF are therefore asking federal, provincial, and territorial officials to find solutions. This document will demonstrate the relevance of the need for concrete action in this regard.

THE STARTING POINT: ACCESS TO RELEVANT AND UPDATED DATA

Ensuring access to relevant and systematically updated data requires action on **three key dimensions**:

- Systematic inclusion of one or more recognized variables accurately describing the linguistic characteristics (related to both official languages) of the target populations in administrative databases and surveys originating with government authorities;
- In the case of databases or surveys already containing such variables, harmonization of the variables used, by province and territory;
- Sufficiently large samples to allow more sophisticated and statistically significant analysis of linguistic communities (analysis based on age groups, regions, etc.).

These three key dimensions must be reflected in the **various databases** in the following categories:

- Databases and survey data on measurements of population health and wellness, on health determinants, and on communities' needs. This category includes, among others, the many population surveys conducted by Statistics Canada for federal departments;
- Databases on the use of health and social services. In most, but not all cases, this category includes databases that are collected in all regions, provinces and territories, and managed by the Canadian Institute for Health Information (CIHI);

- Databases and surveys on health and social services human resources. This category includes data collected by professional associations and colleges in the provinces and territories entered into national databases managed by the CIHI.

The currently incomplete profile of Francophone minority populations and their needs severely hinders the ability of health care systems to tailor their responses to these populations' specific needs. It is therefore essential to equip health care providers as quickly as possible so they can better define the provision of quality French-language services.

HARMONIZED USE OF RELEVANT LANGUAGE VARIABLES

In the past, uniform selection of the language variables to be included in databases and harmonization of their use have constituted major challenges. Based on analyses conducted by the Canadian Institute for Research on Linguistic Minorities (CIRLM), the CNFS and the SSF adopted a resolution recommending that the Government of Canada take steps to systematically collect three language variables that measure the realities faced by Francophones in minority situations and that can be used to generate the derived variable of first official language spoken (FOLS). These three variables include: knowledge of both official languages, mother tongue, and language spoken at home. Complementary variables will, however, also be required for databases on the use of services and human resources in the health and social services field.

IMPLEMENTATION OF POSITIVE MEASURES

Inclusion of language variables in databases represents both a strategic and operational issue. Information on Francophone minority communities constitutes an essential tool for these communities' vitality and for recognition of the country's linguistic duality, as set out in the *Roadmap for Canada's Linguistic Duality 2008-2013*. Indeed, for minority language communities, access to quality health services in their own language is entirely consistent with the provisions of the *Constitution Act, 1982*, which recognizes the language rights of both official language groups.

In the federal sphere, the Supreme Court of Canada has reiterated, through various decisions, the principle of linguistic equality in the delivery of government services and has guaranteed equal quality in the provision of services by federal

institutions. These language rights require government measures for their implementation; furthermore, governments cannot invoke administrative factors to limit their accessibility.

In addition to the obligations inherent to its institutional services under the *Official Languages Act*, the Government of Canada is responsible for enhancing the vitality of English and French linguistic minorities in Canada and for supporting and assisting their development, as well as fostering the full recognition and use of both English and French in Canadian society (section 41 of the *Official Languages Act*). Federal institutions must therefore ensure that positive measures are taken to implement this commitment. For example, Health Canada and Statistics Canada could, based on the provisions of section 41 of the Act, invite the CIHI to review its approach to the collection of language variables in the databases for which it is responsible. This organization is a key player in the development of databases on health services and resources. However, it has indicated that it does not consider itself subject to the provisions of the *Official Languages Act*.

IDENTIFICATION OF THE NEEDS OF FRANCOPHONE COMMUNITIES

In health and wellness

Any measures targeting the health and wellness of populations must be based on an accurate assessment of the realities they face. Each province / territory already compiles a demographic, socioeconomic, and health and social services profile of their population consisting of a broad range of data. It goes without saying that major social surveys containing language variables, including the Census of Canada and the Canadian Community Health Survey (CCHS), constitute important assets in compiling these profiles. Unfortunately, the studies, analyses, and reports resulting from these databases provide fragmented and limited profiles. Work must proceed based on a much larger pool of knowledge. As well, provinces and territories must profile the health of their Francophone communities.

In health services delivery

Provincial, territorial and regional authorities, as well as health facilities, must be able to provide a quality response to their communities' needs. This means providing satisfactory access to an integrated and continuous series of quality health and social services. To this end, the various authorities involved must see to the planning, organization, coordination, management and evaluation of these services. Their toolbox necessarily includes administrative databases that measure the production and use of services. However, the existing databases do not currently allow them to measure levels of use by linguistic communities. The various health authorities involved must develop and implement policies requiring

service organizations to place linguistic and cultural competencies at the heart of their mission and their quality process. These policies should provide access to data on the health services delivered to minority language or minority culture populations.

In Francophone human resources

Human resources are the very cornerstone of health and social services systems. The salaries and benefits of health facility employees represent the largest portion of the public expenditures devoted to these two sectors. Government authorities are attempting to plan and manage human resources in relation to populations' rapidly changing needs, as well as to the transformations affecting the organization of work, interdisciplinary approaches, etc. In order to offer French-language services, it is essential to have detailed knowledge of human resources' ability to provide services to Francophone communities. Directories of provincial and territorial professional colleges are being updated regularly and are capturing more detailed data. However, the language in which professionals are able to provide services is not a systematically captured variable. The CIHI manages a national database that supports the provinces and territories. It is therefore essential for this database to include appropriate variables measuring health and social services professionals' ability to provide French-language services.

TECHNOLOGICAL BARRIERS: A THING OF THE PAST

In the past, authorities cited technical issues and the costs associated with changes to explain a certain lack of progress in adding language variables to databases. However, these arguments are no longer valid, since technological advancements are opening up many possibilities. First, Statistics Canada is working to develop a Sociodemographic Data Master File for the entire Canadian population, which would include information on the first official language spoken. This file would also allow matching with all Statistics Canada and CIHI files. Second, there is the possibility of developing a unique identification code for each health and social services professional having received certification from a provincial or territorial professional college.

Despite the potential that these initiatives offer, awaiting concrete results from these technological advancements before taking action is not an option, given the delays inherent in implementing significant transformations in major databases. In light of the progress underway and the investments being made by the federal government, it is reasonable to expect that information on Canadians' language skills will rapidly become an easily collected variable.

THE TIME FOR ACTION IS NOW

The CNFS and the SSF firmly believe that past barriers to accessing more sophisticated data on Francophone minority communities (FMCs) should no longer guide future choices. However, there is an urgent need for action, and timely solutions are required. The current debate no longer involves the relevance of information. The major issue is rather the implementation of measures that will provide access to this information.

In this regard, the CNFS and the SSF acknowledge the leadership being provided by Health Canada. This federal department can serve as a catalyst for the requested changes with the other federal, provincial, and territorial authorities involved in the issue.

Against this backdrop, the CNFS and the SSF wish to work with these government partners to help develop increased knowledge of the realities faced by Francophone minority communities. For this purpose, the CNFS and the SSF propose the following solutions:

1. With respect to the selection of language variables and their systematic use:

- ▶ That the three variables, namely mother tongue, knowledge of both official languages, and language spoken at home be retained by all relevant authorities as core variables to describe the characteristics of the Francophone minority population and that they be systematically captured in all population databases;
- ▶ That Health Canada, Statistics Canada, the other federal authorities involved, as well as provincial and territorial authorities agree on the selection of standardized and complementary variables for databases on health services and health care professionals;
That the CNFS and the SSF be partners in the work leading up to the selection of language variables.

2. With respect to the implementation of positive measures enhancing the vitality of Francophone communities:

- ▶ That all the data provided by the surveys and administrative databases of Health Canada, Statistics Canada and the other federal authorities involved, include language variables that make it possible to capture the population by official language, with sufficiently large sampling to allow more sophisticated analysis;

- ▶ That Health Canada and Statistics Canada take positive measures under section 41 (Part VII) of the *Official Languages Act* to initiate a process with the CIHI, for this organization to review its policies and approaches governing the inclusion of language variables;
- ▶ That this issue be raised during future meetings of the Federal-Provincial-Territorial Ministers of Health Roundtable or organizations reporting to same.

3. With respect to databases on the characteristics, health status and wellness of Francophone populations:

- ▶ That Health Canada, Statistics Canada, the other federal authorities involved, as well as provincial and territorial authorities work to increase the number of population health and wellness databases that include the linguistic dimension, by promoting the following aspects:
 - Ongoing use of the SVOLM as a core tool for minority language communities;
 - Oversampling of minority language communities in the major federal health surveys, first among them being the CCHS, in accordance with the recommendation of the Standing Committee on Official Languages;
 - Systematic inclusion of relevant language variables in all future federal surveys related to health and wellness;
 - Compilation and maintenance of the health profiles of FMCs in the provinces and territories.
- ▶ That Health Canada involves the CNFS and the SSF in analysing information needs for prioritization purposes.

4. With respect to a quality response to the health needs of Francophone communities:

- ▶ That Health Canada, the other federal authorities involved, as well as provincial and territorial authorities agree on a common approach to tailoring administrative databases on health and social services to capture linguistic communities;
- ▶ That these government authorities also agree on an action plan, in collaboration with the CIHI, to implement these approaches;
- ▶ That Health Canada involves the CNFS and the SSF in this work, for the purpose of identifying Francophone communities' needs.

5. With respect to better planning and management of health and social services human resources:

- ▶ That Health Canada, the other federal authorities involved, as well as provincial and territorial authorities agree with the CIHI to include, in national databases, appropriate and standardized variables measuring the ability of health and social services professionals to provide French-language services;
- ▶ That Health Canada involves the CNFS and the SSF in this work by inviting them to sit on service provider committees.

6. With respect to advancements in information and communication technologies:

- ▶ That the systematic inclusion of technological innovations, such as the Master File, standardized patient index, and standardized health care professional files, yield results facilitating access to data on health services and resources that include language variables as soon as possible;
- ▶ That Health Canada involves the CNFS and the SSF in analysing information needs, for prioritization purposes.