

Ten years and counting

The CHSSN is celebrating its 10th anniversary this year, with some pride and much anticipation for the future. "It's been a good decade," says **James Carter**, the CHSSN's first coordinator and now program and policy advisor. "I believe that we've illustrated the need for an organization that promotes projects and partnerships, and have proven that such a strategy can succeed."

The founding meeting of the CHSSN, in September 2000, was attended by representatives of the Butters Foundation, the English-speaking Catholic Council, Holland Centre, and St. Brigid's Home. They were concerned that the English-speaking communities in Quebec were dealing with serious issues of access to health and social services, and that more coordinated action was required to address their needs.

A CHSSN/CROP survey in 2000 confirmed that indeed there

was widespread dissatisfaction with access to health and social services.

Since its creation, the CHSSN has worked to rally and empower the community to play a strategic role in changing that situation. It has negotiated major investments with the federal government to fund community partnerships and projects. It has undertaken major engagements with the provincial Ministry of Health and Social Services and partnered with McGill on a program to improve services.

There are now 66 CHSSN members and 18 CHSSN-supported community networks across the province. "We're proud to have brought over \$74 million of federal funding into Quebec's public health system and to our communities," says Carter. "We're very pleased with the progress that's been made."

(A special CHSSN anniversary edition of *NetLink* will be published in the fall.)

Survey targets English-speakers

The recent – and third – CROP survey sponsored by the CHSSN was designed to determine how anglophones perceive changes in their status as a minority community. **Jan Warnke**, CHSSN demographer, presented some preliminary findings to the prestigious francophone scientific association l'ACFAS in May.

"It's vital to note a considerable difference between Montreal and

the regions," Warnke says, "particularly in terms of services. It's a major issue off-Island. So a one-size-fits-all approach cannot be used when framing future policies; we have to adapt to the needs of a diverse, highly dispersed population.

"This qualitative data provides us with insights into the community not available elsewhere, and will provide us with a crucial tool to work with decision-makers in the future."

A sprightly spring

It has been an extraordinarily busy spring for the CHSSN and its members:

- Funding negotiations brought major investments into the province to improve access to health and social services for English-speaking Quebecers
- A CHSSN/CROP survey sounded out opinion on access to English-language health and social services
- The CHSSN's 18 community networks met for a two-day retreat
- A daylong symposium on drugs was held for community networks
- The CHSSN signed a breakthrough agreement with Quebec's Public Health Institute
- The first provincial seminar on seniors health promotion was held in Montreal
- Montreal region community networks met for a best practices exchange
- Cabinet approval was received for 17 adaptation projects designed by Quebec's Health and Social Services Agencies
- Community networks' new health promotion projects were approved
- Researchers and community representatives met at a daylong workshop on poverty
- CROP survey stake holders met to review preliminary results

Drugs were the topic of the day

A provincial conference on drug and alcohol abuse was held on February 16 in Gatineau when representatives from the CHSSN community networks and the public health system met to discuss experiences and share information. The ultimate goal of the exchange was to further the eventual establishment of a province-wide network on substance abuse awareness and prevention.

Among the presentations was that of the **Coasters' Association**, whose efforts have raised the level of drug education on the Lower North Shore, and have led to formation of a youth action group that promotes healthier lifestyles for young anglophones. The **Council for Anglophone Magdalene Islanders (CAMI)** discussed their broad local awareness and addiction prevention program that includes a summer camp for young people.

The **African Canadian Development and Prevention Network** has been developing a best practice in drug prevention for its targetted population, which emphasizes strengthening the families of youth at risk. The **Townshippers' Association** made a presentation on harm reduction programs designed to assist people already addicted. The **East Island Network for English Language Services (REISA)** has introduced a very effective drug information program in East End Montreal high schools to impress youth not only with the negative consequences of using drugs, but also to help develop techniques to avoid them.

Seniors symposium seen as a success

The subject was seniors as over 100 delegates from community groups and public institutions from across Quebec gathered in Montreal in March. Sponsored by the CHSSN through funding from Health Canada, this Seniors Health Promotion Symposium was co-chaired by the Cummings Jewish Centre for Seniors and Jeffery Hale Community Partners.

"We wanted to talk about the importance of the community and public sectors working together to respond to the needs of seniors and older adults," explains **Richard Walling**, executive director of Jeff. "This symposium was designed to provide the opportunity for sharing best practices among our English-speaking communities. And what better partner and host could there be than the Cummings? For 50 years, now, this institution has been leading the way with its innovative services programs, its strong volunteerism promotion, and its advocacy for seniors' rights."

A full schedule of sessions

There were ample examples of imaginative and effective activities under way across the province. Workshops were held on such diverse topics as intergenerational

volunteerism and adapted exercise programs, home care and day services, mental health programs and service provider training. Developing new programs for older adults and improving community collaboration with public sector partners were other featured topics.

Keynote speaker was David Levine, president and executive director of the Montreal Health and Social Services Agency. He offered some criticism of the healthcare system in Quebec. He decried the fact that our system is unduly hospital focused, and that the numbers of hospital beds receive more attention than effectiveness of care. Levine also indicated that the Montreal Agency vision is to change that system, and he will be revealing how in the near future.

It seems that this symposium will have long-term results. "It was just the first such event," says **Benita Golden**, coordinator of Community Relations for the Cummings. "Feedback has been very, very positive. We were enormously pleased to see people from a wide variety of work settings connecting so well with each other. I'm certain that their meeting will lead to new partnerships in the future."

Info-Santé picking up anglo interest

Info-Santé, the government's health information line, has finally found response among Quebec anglophones. Last year, they called Info-Santé at the rate of 2,000 per day (over 3,000 during the H1N1 pandemic). Four years earlier, a CHSSN survey revealed that 60 per

cent had never heard of Info-Santé. Of those who did use the service, 70 percent did not know they could receive information in English. It was a CHSSN project that provided English language training for Info-Santé responders and translated pertinent documentation for them.

Number 18 comes onboard

The eighteenth community networking and partnership initiative has been launched in the Vaudreuil-Soulanges region west of Montreal. This is the first to be spearheaded by a public healthcare institution, the local Health and Social Services Centre (CSSS). While English-language access programs have been implemented in the region, recent demographic data has spurred the CSSS to pursue a more comprehensive approach to providing services to anglophones.

The CSSS is aware that some 30,000 English-speakers now account for over 25 percent of the total population of the Vaudreuil-Soulanges region. But their needs and services had not been signaled under the Ministry's new projet clinique policy. As well as addressing such issues as documents translation and English language training for healthcare professionals, the CSSS is now planning to fully study the needs of the anglophone community and to draw its organizations into partnership with local public institutions.

McGill agreement signed

McGill has signed a \$19 million contribution agreement with Health Canada for its new Training and Retention Project. The project will involve second-language training for both anglophone and francophone healthcare professionals as well as internships for health and social services students. "We're so pleased to have this continued support for our work in the community," says Mirielle Marcil, Project coordinator.

Health promotion projects approved

Eight new community networks have launched their first health promotion projects. The **4 Korners Family Resource Centre** is addressing the need to coordinate and support family caregivers in the Laurentian region. In Montreal, the **African Canadian Development and Prevention Network** is working to develop a community-based model and permanent network to promote best practices in prevention and health promotion for cultural minorities.

Youth and Parents Agape Association in Laval is focusing on a healthy eating and active living program for seniors, and developing a seniors network in the region. **Heritage Lower Saint Lawrence** is developing a monthly newsletter for its scattered anglophone population and promoting multidirectional communication on health and social services issues.

The **Neighbours' Regional Association of Rouyn-Noranda** is working to improve access for anglophones to disease prevention campaigns and more opportunities for health promotion programs for students. The **North Shore Community Association** will be assessing needs of seniors and the availability of services, as well as designing an action plan to promote healthy lifestyles among older anglophones. CCS in Montreal is developing new outreach activities, particularly for marginalized families and the Punjabi community. **Jeffery Hale Community Partners** will be piloting new health promotion programs in the Quebec City region.

Public agencies take up the cause

Quebec's regional Health and Social Services Agencies have become directly involved in finding ways to improve accessibility to English-language services in the province. A previous, highly successful program in which CHSSN-sponsored projects were developed by public institutions to upgrade their capacity to serve their anglophone clientele, set the stage for new initiatives. Now the regional Agencies have taken on the role of coordinating such projects through to 2013. "The CHSSN, through funding from Health Canada, is supporting the Agencies," says James Carter, CHSSN policy and program advisor.

The new projects share a common focus: identifying needs, bolstering or introducing resources, translation of documents, and recruitment of English-speaking professionals. In different regions, there are particular situations being addressed. For example, a pilot project in Quebec City will examine the feasibility of setting up a "guichet unique" for English health and social services. In Laval, the emphasis will be on provision of services locally – particularly for youth with behavioural problems. In the Montérégie, the problems of anglophone youth will be addressed. In Nunavik, the goal is to develop support programs for professionals in the field of youth protection. There will be a major effort to improve communication on health issues and services to anglophones in the Laurentians. A Montreal study will assess the impact of language training for professionals.

Retreat poses questions, makes connections

It was network networking time when coordinators and teams from the 17 CHSSN NPIs gathered in Gatineau in February for a two-day retreat. They were joined by representatives of sponsoring organizations and CHSSN staff. Basic aim of the get-together was to share past activities and to discuss strategies for the future. Richard Walling, executive director of Jeffrey Hale Community Partners, and Russell Kueber, CHSSN project coordinator, animated the proceedings.

“One of our main objectives was to provide the time and creative ways for people to really connect over two days,” explains **Richard Walling**. “Not only around the serious work we all do, but around some fun things as well. It was a challenge this time because the number of NPIs has doubled since we started five years ago. But it worked out very well, I think.”

“We’ve learned things that surprised us.”

The past can be a good teacher. That was a lesson brought home when several retreat participants described some of the tools that they had used to carry out their community projects. **Shannon Keenan** and **Kate Middleton** from the ‘Townshippers’ Association spoke about production of a profile on their community that took aim at many of the pervasive myths about anglophones, and a “neighbourhood notebook” prepared for isolated seniors.

Annabelle Cloutier from Jeffrey Hale Community Partners described their early childhood and family wellness programs developed for

Quebec City English-speakers. **Cathy Brown** of the Committee for Anglophone Social Action in the Gaspé told how a rejected seniors’ day care centre received government approval after by being re-presented as a wellness centre.

“I think it’s incredible what we’ve all done since we started.”

The Montreal East End network REISA illustrated how collaboration among community networks can broaden the impact of healthcare programs. Its innovative diabetes project – distance telemonitoring of patients – was developed at the McGill School of Nursing and is being shared among five NPIs across the province. Patients provided with Blackberrys enter their own daily readings to be read by local CSSS nurses. While enabling patients to develop better self-management of the disease, the setup will also help them to avoid crisis situations.

“It’s not just what they’ve been doing, but how much they’ve accomplished.”

The Outaouais Health and Social Services Network (OHSSN) has been working with local schools to promote healthy lifestyles among students. Its pilot project, Food for Thought, includes a DVD rap about making healthy food choices to avoid diabetes and a teacher’s guide on nutrition. The idea is to discern what is lacking in the schools and how the community can develop material to help them.

And then there came time to look at future strategies that would bring forward even better results. The brainstorming sessions were lively and intense, and brought out a consensus on those areas that needed the most immediate attention:

- Developing a knowledge base
- Engaging school boards
- Building partnerships
- Community development
- Health promotion
- Communications
- Resource centres
- Better monitoring of outcomes

“There’s so much to be done, but we’ll get there.”

Breakaway sessions focused on goals that should be incorporated into future planning and program direction.

- More anglophones in the public institutions
- Better knowledge of the English-speaking community’s real capacities
- More and better language training
- Better understanding of the different levels of governance

- Better understanding of the diversity within the English-speaking communities
- Development of social enterprise business models that would generate autonomous sustainable income
- Market what we're good at
- Increase the English spoken on decision-making committees
- Develop and strengthen youth and family networks
- Reach out to the hard-to-reach groups

“We're a learning community.”

André Lussier, planning consultant for La Société Santé en français (SSF), presented an overview of his organization's current operations to delegates. The SSF is a network of francophone community organizations outside Quebec that comprises 17 regional, provincial and territorial networks operating in nine provinces and three territories.

“We have some interesting legislative complexities to consider since we operate in 12 different healthcare systems,” said Lussier. “The CHSSN has developed some successful tools that we hope to borrow in our quest for equitable access to French health and social services. Our two organizations share the same objectives, so there's a lot of opportunity for us to share ideas and experiences.”

Lussier pointed out that one of SSF's chief preoccupations is recruitment of new professionals to French-language services positions. “Then we need to address the question of their deployment and retention. We share that concern with you as well, so we would like to re-enforce our collaboration on that important issue,” Lussier concluded.

“I'm so impressed with this activity, and how we've made connections with each other.”

“It was an excellent meeting,” says Russell Kueber, CHSSN project coordinator and co-animator of the retreat. “We wanted to create an environment in which learning can happen for a relatively large number of people. With the established networks, we wanted everyone to reflect on our accomplishments, the milestones in our past. The new networks also have their own history of creating partnerships. We wanted to capture all that experience and build on it. I think we succeeded.”

The executive director agrees. “We decided on twice yearly retreats for the NPI coordinators from the outset,” says Jennifer Johnson. “They've proven to be very important and appreciated because people often feel they're working in isolation. I'm very pleased to see that they continue to be a source of inspiration for everyone, not just the coordinators, but for the sponsor organizations, and for the CHSSN team as well. It's what we're able to accomplish together that is an essential ingredient of a successful community development approach.”

Health Canada works with NPIs on evaluation

Roger Farley, executive director of the Official Languages Community Development Bureau of Health Canada, brought good news to the Gatineau gathering. An independent evaluation of his department's program of supporting community health services projects was highly positive.

“The evaluators asked two very important questions,” said Farley. “Was the program relevant, did it fulfill a need in Canadian society? Is there a need for it in the future? Their answers were ‘yes’. That's good news for both the funding beneficiaries and my department.”

Funding comes from Canadian Heritage, which is responsible for the federal government's Roadmap for Canada's Linguistic Duality 2008-2013: Acting for the Future. Health Canada will receive \$174.3 million to address the health concerns of Canada's official-language minority communities. The CHSSN and McGill are the designated beneficiaries for English-speaking communities.

“We want to do an even better job of monitoring the success of this initiative,” Farley said. “So we're doing a baseline data study of the impact of previous programs in improving access to services. And we've now refined the reporting procedures the NPIs will be using with their new projects.”

Farley also affirmed that results from the CHSSN-sponsored CROP survey will play an important role in measuring what this community support program has accomplished.

Montreal networks' day of sharing

An all-day forum in March brought the Montreal region's four community networks together to share their projects and best practices among themselves and with other invited community representatives. "Excellent", "very useful", "great insight" were among the very positive responses turned in on the day's evaluation sheets.

The **African Canadian Development and Prevention Network** presented the successful partnership model it has developed to further prevention approaches and empowerment of minority communities. The **East Island Network for English Language Services (REISA)** discussed the development of its mental health program for anglophones. A panel of the **NDG Senior Citizens' Council**, **CCS** and the **Youth and Parents Agape Association** discussed strategies to battle poverty and social exclusion. Funding – a

perennial problem for nonprofits – was the subject of a presentation by COCo, the **Centre for Community Organizations** (see page 7). REISA made a presentation on partner-based funding strategies.

Anne Usher, NPI Volunteer Committee chair, acted as forum moderator. "What really impressed me was how well the presenters knew the situation of the vulnerable people in their communities," Usher affirms. "They were able to use the pertinent data to put a face on those most in need."

The March forum was the third in a series of similar consultations. According to feedback from the attendees, there should be more. "There was a lot of useful learning going on that day," says Usher. "People became resources for each other and many individual contacts made at the forum are continuing on their own."

More education for remote regions

Now entering its sixth year, the CHSSN's program for delivering health and social services information via video-conferencing to remote anglophone communities has proven to be an outstanding success. Not only has individual participation in the Community Health Education Program (CHEP) increased – up 50 percent last year – but the number of participating sites and program partners has continued to rise.

"Communities partnering with national, provincial and local health-oriented associations has enabled

them to access more services in English," says **Brenda Edwards**, Project Development Manager. "And when they are linked with professionals and programs in the public health and social services system, there can be more follow-up activities to promote health.

"Ten communities will be participating during the 2010-2013 sessions," says Edwards. "These will continue to be video-conferenced out of the Montreal Children's Hospital in Montreal. The program will be funded through the McGill Training and Retention Project."

Anglo poverty getting more attention

Recent research showing serious levels of poverty among Quebec's English-speaking communities has brought that issue into sharper focus. The CHSSN is preparing an analysis of the situation in the province's 95 CSSS territories that will be part of its next Baseline Data Report to member associations. The newly formed Quebec English-speaking Communities Research Network (QUESCREN) promotes and conducts new research into the causes and levels of poverty among anglophones. Each introduced their findings to a daylong workshop for community organizations in March.

"There's no official, government mandated definition of poverty," explains **Lorraine O'Donnell**, QUESCREN coordinator. "We use what Statistics Canada defines as the poverty line. If the amount a family spends (after income tax) on the necessities of life – food, shelter and clothing – is 20 percent higher than the average family in a year, it's dropped below the poverty line."

CHSSN's data illustrate that an extraordinarily high number of Quebec's anglophones are much poorer than their francophone neighbours. QUESCREN's report raises the basic question of why that is so. "Poverty is often associated with minority status," O'Donnell says. "We need much more research on how poverty and language intersect in Quebec."

The CHSSN report on poverty will be available at www.chssn.org. QUESCREN information is at www.quescren.concordia.ca.

Health illiteracy is a growing concern

A conference on health literacy took place in April on what has become a serious, and potentially life-threatening, problem. Literacy Volunteers of Quebec organized a half-day meeting at the Montreal Children's Hospital at which specialists in the field shared their knowledge and experience with community organizations and healthcare providers.

Linda Shohet, executive director of the Centre for Literacy of Quebec, and long-time advocate of health literacy, was one of the key speakers. "We're trying to raise awareness of this issue," explains Shohet. "How many people know that over 60 percent of Canadians can't understand their prescriptions or deal with written health information they're receiving from the doctor, the hospital, the clinic? Among seniors, that figure rises to

over 80 percent. That tells us something is terribly wrong with the way the system is communicating."

The concern also extends to social services organizations. Literacy Alberta has developed an audit tool kit that provides a way for them to assess their own practices relating to health literacy. "It's a brilliant tool," Shohet affirms. "It also provides clues about what is good practice." The kit is available from www.literacyalberta.ca.

The Canadian Council for Learning has researched levels of health literacy across the country and has created an interactive map that illustrates its findings. Quebec results show a 50 percent literacy rate in the Montreal region, with numbers dropping off drastically farther out into the province. See: www.ccl-ccc.ca.

Mission moves more people into homes

The Old Brewery Mission (OBM) is setting records for the number of homeless men that have moved through its transition program into home living. Because of this intermediate counselling, some 500 men who had sought emergency shelter were able to move into stable accommodations in the community over the past year.

"That's very gratifying, for all of us," affirms Matthew Pearce, OBM executive director. "Our goal is to make sure that emergency shelter is really a short-term proposition. We're working to increase the effectiveness of our transition program and will continue

to develop options for those clients who are ready for autonomous living. That includes creating and managing social housing: we now have 120 transition apartments for men and have just opened a 29-unit apartment complex for women. We want to provide a normal social environment for these people so they feel part of a community."

The province has pledged \$14 million to combat homelessness, \$3.3 million of which is to be allotted to the city's three large shelters over the next three years. "That's good news for us," says Pearce, "The \$1.1 million we'll be getting will be well spent."

COCo researching nonprofits

The Centre for Community Organizations (COCo) has undertaken a broad research project aimed at better understanding the English-speaking, bilingual and ethno-cultural community groups across Quebec. The three-year project is funded by the province's Secrétariat à l'action communautaire autonome et innovation sociale. Groups in Montreal, Laval and the Eastern Townships have been surveyed in phase one.

"It is an action research project," explains COCo facilitator Frances Ravensbergen, "in that there are expectations that the results will bring about change. Many of these groups don't know what's going on in the provincial government, and it is not aware of them, either. What we've uncovered certainly opens several avenues to be considered."

One is funding. Of 217 survey respondents, 45 percent receive no provincial core funding. One explanation is that criteria are not available in English, and many community groups have experienced challenges in trying to communicate with the francophone bureaucracy. Then there is the government policy requiring groups to approach only one ministry for core funding. Many groups working in English have multiple action areas, so defining themselves within only one becomes problematic.

"It's incredible what these small groups are doing," Ravensbergen says. "We've given them a presence in a map on our website." For more information: www.coco-net.org.

Tool kit prepared for rural community projects

A group of 28 young women from rural Quebec has compiled a tool kit designed to help others develop projects in their communities. Funded by the Status of Women, the tool kit project was sponsored by the Quebec Community Groups Network (QCGN) as part of its policy to develop leadership in rural areas.

Participants were young women already actively involved in their communities in the Lower North Shore, the Gaspé and the Outaouais regions. Over several months, they were coached by local mentors experienced in project development to create and realize their own projects. The material they compiled make up the tool kit that can be used as a resource by any group seeking to develop projects in their communities. It is now available on QUESCAN, the QCGN's new community development website.

Helping caregivers to cope with stress

The Megantic Community Development Corporation (MCDC) has developed a program to assist senior caregivers who are looking after a spouse. In addition to specific training for volunteers on how to provide seniors with in-home care, MCDC has prepared a special booklet for stressed caregivers. It contains an agenda to keep track of appointments and medications, but it also is a diary in which they can record their feelings – to recount things they might not want to say aloud. It's a tool to help them measure their level of stress.

New CHSSN members

The CHSSN recently welcomed two new members into the fold:

Our Harbour, operating on the South Shore of Montreal, provides community supportive housing for English-speaking persons living with mental illness, the only such establishment in the Montérégie region. Set up five years ago, Our Harbour now manages four apartments, with three residents each. As well as a professional staff member, four volunteer visitors help residents with in-house living and provide them with accompaniment to medical visits and community activities. The goal is provide a sense of community that will nurture their self-confidence.

LEARN is an educational foundation that seeks to offer quality learning material, educational technology and online learning resources to all English school boards, private schools, community organizations and the private sector in rural and urban settings. One of its prime goals is to promote partnerships with key stakeholders in the educational milieu and the community at large. It is carrying out this mandate through the 23 Community Learning Centres (CLC) it has set up in English-language schools across the province.

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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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