



Baseline Data Report 2018-2019 Part 1 (Telephone Survey)

English-language Health and Social Services Access in Québec



Community Health and Social Services Network

based on data from the 2019 CHSSN - CROP Community Health and Social Survey

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1 Introduction

1.1 The Networking and Partnership Initiative (NPI)

The NPI is a funding program of the Community Health and Social Services Network as a measure of "Canada's Roadmap for Linguistic Duality". The NPI aims to support the creation of durable links between English-speaking communities and Quebec's health and social services system. The Baseline Data Report 2018-2019 (BDR) is the seventeenth volume of a series produced by the Community Health and Social Services Network (CHSSN) to serve as a

Year	Title	Data Source
2003-2004	Regional Profiles of English-speaking Communities	2001 Census
2004-2005	Profiles of English-speaking Communities in Selected CLSC Territories	2001 Census
2005-2006	English-Language Health and Social Services Access in Québec	2005 CHSSN-CROP Survey on Community Vitality
2006-2007	Community Network Building	Case studies (qualitative interviews
2007-2008	Health and Social Survey Information on Quebec's English-speaking Communities	1998 Québec Health and Social Survey
2008-2009	Regional Profiles of Quebec's English-speaking Communities: Selected 1996-2006 Census Findings	1996 and 2006 Census
2009-2010	Demographic Profiles of Quebec's English-speaking Communities for Selected CSSS Territories	1996 and 2006 Census
2010-2011	English-Language Health and Social Services Access in Québec	2010 CHSSN-CROP Survey on Community Vitality
2011-2012	Socio-economic Profiles of English-speaking Visible Minority Population by Quebec Health Region	2006 Census
2012-2013	Quebec's English-speaking Community Networks and their Partners in Public Health and Social Services	Survey of NPI organizations and interviews
2013-2014	Demographic Profiles of Quebec's English-speaking Communities for Selected CSSS Territories	2011 Census of Canada; 2011 National Household Survey
2014-2015	Canadian Community Health Survey (2011-2012) / Findings related to the Mental and Emotional Health of Quebec's English-speaking Communities	Canadian Community Health Survey, 2011-2012
2015-2016	English-Language Health and Social Services Access in Québec	2015 CHSSN-CROP Survey on Community Vitality
2015-2016	Findings on English-speaking Community Vitality across Key Sectors	2015 CHSSN-CROP Survey on Community Vitality
2017-2018	Demographic Profiles of English-speaking Communities	2016 Census of Canada
2018-2019	Socio-demographic Profile of Children Aged 0 to 5 and their Parents	2016 Census of Canada
2018-2019	English-language Health and Social Service Access in Quebec	2019 CHSSN-CROP Community Health and Social Survey

relevant and comprehensive knowledge base regarding the situation of Quebec's Englishspeaking population in the area of health

The Baseline Data Report series is intended to serve as a resource that will allow local communities to better understand the demographic factors and health determinants affecting them and to assist institutional partners and community leaders in developing strategies to improve the well-being of their constituencies.

The Baseline Data Report 2018-2019 explores a single factor that is a key determinant of the health of English-speaking Quebec, namely, access to health and social services.

1.2 About this Report

The 2018-2019 Baseline Data Report relays the health and social service findings of the 2019 CHSSN/CROP *Community Health and Social Survey*. The commonalities and distinct features of regional communities within the English-speaking provincial population are delineated as well as sub-groups defined by gender, age, household income, health status and level of bilingualism.

This study follows previous surveys conducted by CROP in 2000 for the Missisquoi Institute and again in 2005, 2010 and 2015 for the CHSSN with minor modifications. These earlier surveys were also done among a representative sample of French-speaking Quebecers on the same issues. In 2019, the CHSSN provincial survey was significantly modified and the title of the survey has changed to *Community Health and Social Survey* to reflect an increased focus on health sector issues.

1.3 Methodology

1.3.1 Research Techniques

Telephone Survey – For the 2019 English study, a total of 3,133 English-speaking Quebeckers aged 18 and over were randomly selected for interviews over the telephone between March 21st and June 16th, 2019. Data was weighted according to region, age and gender using data from the Statistics Canada 2016 Census. For the 2019 majority study, a total of 1,000 French-speaking Quebeckers aged 18 and over responded to telephone interviews between April 9th and May 26th.

Focus Groups and Online Survey – Six health regions resulted in a low response rate to the telephone interviews. This imbalance was addressed through focus groups and an online survey that were conducted to gather responses from the English-speaking communities residing within these regions. The six regions were Saguenay-Lac-St-Jean, Côte-Nord (middle and upper parts), Gaspésie-Les Îles (Magdalen Islands), Chaudière-Appalaches, Centre-du-Quebec and Abitibi-Témiscamingue. The focus groups were held in March and April 2019,

and the online survey between May and June 2019. The methodology and findings from these data collection techniques are presented in the final section of this Baseline Data Report.

Focus Groups – The focus groups were held in five regions: Saguenay-Lac-St-Jean, Côte-Nord (middle and upper parts), Chaudière-Appalaches, Centre-du-Quebec and Abitibi-Témiscamingue.

Online Survey – The online survey targeted areas where it was not possible to hold focus groups (Bas St-Laurent, Magdalen Islands), or not possible to hold focus groups in a representative number of communities (Lower North Shore). The online survey was distributed in collaboration with English-speaking community organizations in the targeted sub-regions: Lower North Shore (Coasters Association), Magdalen Islands (CAMI), Bas-St-Laurent (HLSL) and Chaudière-Appalaches (MCDC). The survey used the same set of questions distributed in all the focus groups.

1.3.2 Tabulation

Geographic Regions – The regions used in the report tables are Quebec's 22 RTS (réseau territorial de services) territories. As mentioned above, some regions are not included in the tables that list regional level percentages due to small sample size. The correspondence between Quebec's 18 Health regions and its Integrated Health and Social Service Centers (CISSS) and Integrated Center for University Health and Social Services (CIUSSS) after the adoption of Law 10 is available at the following link: https://www.msss.gouv.qc.ca/professionnels/informations-geographiques-et-de-population/decoupage-territorial/

Percentages – The majority of tables in this report present results in the form of percentages. Non-responses (no answer, did not know, etc.) have been excluded from the totals prior to calculation of percentages.

Tables – The numbers in following tables may not always total 100% due to rounding values (sums are added before rounding numbers).

Weighted – Data has been weighted according to region, age, and gender using data from the Statistics Canada 2016 Census.

1.4 Size and Proportion of English-speaking Population, by Health Region, 2001-2016

The accompanying table surveys the size and proportion of the **English-speaking** population comparing 2001, 2006, 2011 and 2016. The greater Montreal region (including Laval and Montérégie) experienced solid growth over the past 10 years as did Norddu-Québec. Most other regions experienced either modest growth or may even have declined in numbers and percentage over this period.

Health Region	Size of th	ne English-	Speaking Po	English Speakers as a Proportion of Regional Population				
	2001	2006	2011	2016	2001	2006	2011	2016
Bas-Saint-Laurent	829	1,295	841	1,085	0.4%	0.7%	0.4%	0.6%
Saguenay - Lac-Saint-Jean	1,765	1,830	1,536	1,975	0.6%	0.6%	0.6%	0.7%
Capitale-Nationale	11,065	11,840	12,666	14,210	1.8%	1.8%	1.9%	2.0%
Mauricie et Centre-du-Québec	4,885	4,995	5,392	5,805	1.1%	1.1%	1.1%	1.2%
Estrie	23,390	23,580	22,577	37,015	8.4%	8.0%	7.5%	8.1%
Outaouais	53,945	58,720	65,604	70,580	17.2%	17.4%	18.0%	18.7%
Abitibi-Témiscamingue	5,315	5,355	4,914	5,160	3.7%	3.8%	3.4%	3.6%
Côte-Nord	5,740	5,630	5,093	5,175	5.9%	5.9%	5.5%	5.7%
Nord-du-Québec*	14,385	16,945	20,480	23,340	37.4%	42.8%	48.3%	53.2%
Gaspésie - Îles-de-la-Madeleine	9,740	9,505	9,401	8,790	10.2%	10.2%	10.2%	10.0%
Chaudière-Appalaches	2,685	3,705	3,114	3,755	0.7%	1.0%	0.8%	0.9%
Lanaudière	8,215	10,115	11,561	14,215	2.1%	2.4%	2.5%	2.9%
Laurentides	30,565	33,175	34,680	37,555	6.7%	6.6%	6.3%	6.5%
Montérégie	129,125	143,645	155,636	156,005	10.2%	10.7%	11.0%	11.8%
Montréal	563,940	595,920	610,700	622,160	31.6%	32.7%	33.1%	32.8%
Laval	53,385	68,640	82,255	91,115	15.7%	18.8%	20.9%	22.2%
Québec (province)	918,955	994,720	1,046,495	1,097,920	12.9%	13.4%	13.5%	13.8%

Source: Statistics Canada, 2001, 2006, 2011 and 2016 Census of Canada. The linguistic concept used is First Official Language Spoken with multiple responses proportionately distributed between the English and the French.

*Includes the First Nations population of the health region of Terres-Cries-de-la-Baie-James and the population of the health region of Nunavik.

1.5 Access to Services as a Health Determinant

The Population Health Model,¹ supported by both federal and provincial health agencies, is an approach that aims to improve the health of an entire population by taking into account a broad range of individual and collective factors that have a strong influence on health.² Developing an understanding of what contributes to the good health and vitality of English-speaking communities requires an assessment of key health determinants. Mapping health determinants lays the groundwork for the development of health promotion strategies necessary to bring about the best possible health outcomes for these communities. A feature of this model is a commitment to making knowledge of health determinants relevant at the level of local communities who, with recent restructuring in the health sector, are increasingly called upon to "partner" with health agencies as the means to an optimal health status.

In this report our objective is to take a measure of access to health and social services as a key determinant for Quebec's official language minority communities. This includes considering the interaction of this health determinant with others such as household income, social support networks, gender and social environments. For example, the direct relationship between good health and the accessibility of services for treatment of illness, the prevention of disease, as well as promotion of health knowledge, has long been established. However, access not only concerns geographic location but also includes many elements one of which, in this case, is language as a key aspect for the delivery of health and social services.³ Evidence suggests that the availability of accessible services, both geographically and linguistically, and the presence of strong social support networks which serve as the basis for the unpaid

¹ For an explanation of the Population Health Approach see the Public Health Agency of Canada "What is Population Health?" at https://www.canada.ca/en/public-health/services/health-promotion/population-health/population-health-approach.html (accessed August 28 2019).

² Health Canada lists some twelve health determinants that have been shown to have a strong influence on the health status of a population among which access to health services is included. For further discussion see Raphael, D. (Ed.) (2008). Social Determinants of Health: Canadian Perspectives. Toronto: Canadian Scholar's Press. See also, Mikkoven, J and Raphael, D. (2010) Social Determinants of Health: The Canadian Facts. http://www.thecanadianfacts.org/ and WHO, Social Determinants of Health website, http://www.who.int/social_determinants/en/. See also "Social Determinants of Health and Health Inequalities" at https://www.canada.ca/en/public-health/services/health-promotion/population-health/what-determines-health.html#a1 (accessed August 28 2019).

^{3 &}quot;There is compelling evidence that language barriers have an adverse effect on access to health services." Sarah Bowen, 2001. Language Barriers in Access to Health Care, Health Canada, p. v1. Also see Bowen, S. (2015) for Société Santé en Français (SSF). Impact of Language Barriers on Quality and Safety of Healthcare. http://santefrancais.ca/wp-content/uploads/SSF-Bowen-S.- Language-Barriers-Study-1.pdf Jacobs, E., and A. Chen, L. Karliner, N. Agger-Gupta & S. Mutha. (2006). "The Need for More Research on Language Barriers in Health Care: A Proposed Research Agenda." The Millbank Quarterly, Vol. 84, No.1, pp.111-133.

care so crucial to childhood development and healthy aging, go hand-in-hand. ⁴ These two important health determinants, in turn, are proven predictors of a more geographically stable population.

1.6 Respondent Count (unweighted)

1.6.1 English Speakers

		gender		age group				household income			general state of health			bilingual status		Aboriginal or First Nation		
Region	Total	male	female	18-24 years	25-44 years		65 years and over	less than \$30k	\$30k- 70k	\$70k- 100k	\$100k and over	very good / excellent	good	average / bad	bilingual	unilingual English	yes	no
031 Capitale-Nationale	202	92	110	5	23	86	82	22	52	29	45	48	14	15	192	9	6	195
051 Estrie – CHU de Sherbrooke	106	36	70	2	8	40	55	24	28	15	16	140	51	48	75	31	5	101
061 Ouest-de-l'Île-de-Montréal	484	193	291	12	31	234	202	47	112	71	134	44	12	19	346	137	18	461
062 Centre-Ouest-de-l'Île-de-Montréal	465	158	307	10	45	164	237	79	118	38	87	141	66	45	320	144	14	446
063 Centre-Sud-de-l'Île-de-Montréal	226	76	150	2	44	91	84	40	63	25	48	67	23	20	183	42	10	213
064 Nord-de-l'Île-de-Montréal	251	91	160	10	30	123	80	40	63	35	37	239	129	92	200	51	10	239
065 Est-de-l'Île-de-Montréal	215	72	143	6	34	126	44	13	53	31	55	127	57	41	199	16	7	203
071 Outaouais	200	92	108	2	24	84	87	36	51	31	41	115	71	64	108	92	17	181
111 Gaspésie	75	31	44	0	3	34	38	21	27	7	7	124	59	31	51	24	10	64
131 Laval	257	99	158	6	36	134	79	27	70	28	58	55	21	30	210	46	9	244
141 Lanaudière	75	25	50	1	8	25	38	10	26	7	16	280	119	80	67	8	6	69
151 Laurentides	110	43	67	0	6	44	58	16	32	15	18	102	42	54	82	28	8	101
161 Montérégie-Centre	150	57	93	1	15	52	75	18	36	26	22	124	40	37	112	38	5	143
162 Montérégie-Est	77	31	46	5	8	28	34	9	21	11	17	36	22	17	60	17	5	72
163 Montérégie-Ouest	240	106	134	2	27	117	92	31	53	45	56	74	40	34	167	73	9	229
Total	3,133	1,202	1,931	64	342	1,382	1,285	433	805	414	657	1,716	766	627	2,372	756	139	2,961

⁴ Wooley elaborates on the way government supported services and informal care strategies reinforce rather than replace one another. Wooley, Frances. 2001. "The Voluntary Sector" in Isuma, Vol.3, No.2. Summer, pp.1-11

1.6.2 French Speakers

	T-1-1	gender		age group				household income			general state of health			Aboriginal or First Nation		
Region	Total	male	female	18-24 years	25-44 years	45-64 years	65 years and over	less than \$30k	\$30k- 70k	\$70k- 100k	\$100k and over	very good / excellent	good	average / bad	yes	no
031 Capitale-Nationale	99	47	52	2	22	20	55	12	31	22	19	40	27	12	1	98
051 Estrie – CHU de Sherbrooke	70	22	48	1	11	13	45	11	23	12	15	47	14	9	3	66
061 Ouest-de-l'Île-de-Montréal	50	18	32	2	6	8	34	8	12	7	15	23	20	7	1	49
062 Centre-Ouest-de-l'Île-de-Montréal	50	22	28	1	8	8	33	6	17	11	10	29	22	9	1	47
063 Centre-Sud-de-l'Île-de-Montréal	50	22	28	2	10	6	31	9	7	4	21	66	20	13	2	47
064 Nord-de-l'Île-de-Montréal	70	23	47	1	17	9	43	12	18	11	14	11	3	6	1	66
065 Est-de-l'Île-de-Montréal	80	30	50	2	10	10	58	17	31	3	15	30	21	9	1	78
071 Outaouais	60	22	38	2	7	9	42	12	12	11	18	42	28	9	5	55
111 Gaspésie	20	9	11	0	2	2	16	3	8	4	2	42	17	11	1	19
131 Laval	70	26	44	0	13	20	37	7	19	17	15	44	23	12	3	66
141 Lanaudière	80	33	47	0	14	16	50	19	23	14	11	40	18	12	3	77
151 Laurentides	90	32	58	1	13	11	64	17	32	14	12	60	12	18	4	86
161 Montérégie-Centre	60	25	35	4	13	8	34	7	19	10	14	28	13	9	1	59
162 Montérégie-Est	80	42	38	5	16	13	45	8	28	15	21	26	14	10	2	78
163 Montérégie-Ouest	70	25	45	2	14	12	42	11	20	7	23	41	21	7	3	67
Total	1,000	398	602	25	176	165	630	159	301	162	225	569	274	153	32	959

2 Access to Doctors

2.1.1 Access to Family Doctor

	English s	peakers	French speakers		
Region	Yes	No	Yes	No	
031 Capitale-Nationale (n=202)	75.9%	24.1%	83.2%	16.8%	
051 Estrie – CHU de Sherbrooke (n=106)	86.7%	13.3%	71.6%	28.4%	
061 Ouest-de-l'Île-de-Montréal (n=484)	82.8%	17.2%	79.8%	20.2%	
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	87.3%	12.7%	69.9%	30.1%	
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	79.3%	20.7%	85.0%	15.0%	
064 Nord-de-l'Île-de-Montréal (n=251)	84.3%	15.7%	60.9%	39.1%	
065 Est-de-l'Île-de-Montréal (n=215)	77.3%	22.7%	75.9%	24.1%	
071 Outaouais (n=200)	72.1%	27.9%	95.6%	4.4%	
111 Gaspésie (n=75)	91.3%	8.7%	100.0%	0.0%	
131 Laval (n=257)	92.1%	7.9%	76.1%	23.9%	
141 Lanaudière (n=75)	85.0%	15.0%	91.2%	8.8%	
151 Laurentides (n=110)	91.2%	8.8%	86.1%	13.9%	
161 Montérégie-Centre (n=150)	68.7%	31.3%	76.1%	23.9%	
162 Montérégie-Est (n=77)	54.2%	45.8%	84.5%	15.5%	
163 Montérégie-Ouest (n=240)	87.1%	12.9%	93.7%	6.3%	
Total Total (n=3,133)	82.6%	17.4%	81.9%	18.1%	

family doctor. Overall, English speakers were about as likely as their French-speaking counterparts to report having a family doctor (81.9%).

Among English speakers, 82.6% reported having a

We observe that English-speakers in the regions of RTS de Laval (92.1%), RTS de la Gaspésie (91.3%) and RTS des Laurentides (91.2%) were the most likely to report having a family doctor.

English speakers in the regions of RTS de la Montérégie-Est (54.2%), RTS de la Montérégie-Centre (68.7%) and RTS de l'Outaouais (72.1%) were the least likely to report having a family doctor.

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q9. Do you have a family doctor?

Access to a Family Doctor

		English s	peakers	French	speakers
	Variable	Yes	No	Yes	No
	Male	79.5%	20.5%	75.8%	24.2%
gender	Female	85.8%	14.2%	87.6%	12.4%
	Total	82.6%	17.4%	81.9%	18.1%
	18-24 years	83.9%	16.1%	71.7%	28.3%
	25-44 years	79.3%	20.7%	74.7%	25.3%
age	45-64 years	82.1%	17.9%	83.9%	16.1%
	65 years and over	89.5%	10.5%	89.3%	10.7%
	Total	82.6%	17.4%	81.8%	18.2%
	less than \$30k	80.0%	20.0%	75.4%	24.6%
	\$30-70k	85.2%	14.8%	84.1%	15.9%
household income	\$70-100k	84.5%	15.5%	77.1%	22.9%
meome	\$100k and over	82.1%	17.9%	85.5%	14.5%
	Total	82.6%	17.4%	81.8%	18.2%
knowledge of	bilingual	83.1%	16.9%		
English and	unilingual English	80.8%	19.2%		
Fre n ch	Total	82.6%	17.4%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q9. Do you have a family doctor?

English-speaking females were more likely to report having a family doctor (85.8%) than were their male counterparts (79.5%).

Across age groups, English speakers who were aged 65 years and over were the most likely to report having a family doctor (89.5%) while those aged 25-44 years were the least likely (79.3%).

With respect to income, those who earned \$30k-70k were the most likely to report having a family doctor (85.2%) while those earning less than \$30k were the least likely (80.0%).

English-speakers who were bilingual were more likely to report having a family doctor than their unilingual English counterparts.

2.1.2 Private Practice Family Doctor

Among English speakers with a family doctor, 17.1% reported having a family doctor in a private practice. Overall, English speakers were much more likely than their French-speaking counterparts to report having a family doctor in a private practice (6.9%).

We observe that those with a family doctor in the regions of RTS de la Gaspésie (30.2%), RTS des Laurentides (26.9%) and RTS du Centre-Ouest-de-l'Île-de-Montréal (24.1%) were the most likely to report having a family doctor in a private practice.

English speakers with a family doctor in the regions of RTS de la Capitale-Nationale (2.7%), RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (4.8%) and RTS de Lanaudière (7.9%) were the least likely to report having a family doctor in a private practice.

Type of Practice Among Family Doctors

	En	glish speak	ers	Fre	ench spea	kers
Region	Clinic, GMF, CLSC	Private practice doctor	Other or Unspecified	Clinic, GMF, CLSC	Private practice doctor	Other or Unspecified
031 Capitale-Nationale (n=163)	94.7%	2.7%	2.6%	95.3%	4.7%	0.0%
051 Estrie – CHU de Sherbrooke (n=91)	95.2%	4.8%	0.0%	87.7%	12.3%	0.0%
061 Ouest-de-l'Île-de-Montréal (n=419)	79.6%	19.5%	0.9%	87.6%	12.4%	0.0%
062 Centre-Ouest-de-l'Île-de-Montréal (n=393)	75.3%	24.1%	0.6%	91.2%	8.8%	0.0%
063 Centre-Sud-de-l'Île-de-Montréal (n=177)	91.3%	8.0%	0.7%	91.1%	7.3%	1.6%
064 Nord-de-l'Île-de-Montréal (n=209)	83.6%	15.4%	1.0%	95.0%	3.9%	1.2%
065 Est-de-l'Île-de-Montréal (n=185)	89.6%	10.1%	0.3%	96.4%	2.7%	0.9%
071 Outaouais (n=170)	78.0%	17.6%	4.4%	95.4%	4.6%	0.0%
111 Gaspésie (n=67)	67.0%	30.2%	2.8%	-	-	-
131 Laval (n=232)	84.5%	13.8%	1.7%	93.2%	6.8%	0.0%
141 Lanaudière (n=62)	92.1%	7.9%	0.0%	92.8%	6.3%	0.9%
151 Laurentides (n=98)	71.9%	26.9%	1.2%	93.4%	4.3%	2.2%
161 Montérégie-Centre (n=120)	82.6%	14.7%	2.6%	90.5%	8.5%	1.0%
162 Montérégie-Est (n=61)	75.0%	22.8%	2.2%	87.1%	11.4%	1.5%
163 Montérégie-Ouest (n=210)	79.0%	19.5%	1.5%	91.7%	7.6%	0.7%
Total (n=2,657)	81.7%	17.1%	1.2%	92.3%	6.9%	0.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those with a family doctor (from Q9): Q10A. Do you see your family doctor in a... ONE MENTION ONLY

Type of Practice Among Family Doctors

		En	glish speak	ers	Fre	ench spea	kers
	Variable	Clinic, GMF, CLSC	Private practice doctor	Other or Unspecified	Clinic, GMF, CLSC	Private practice doctor	Other or Unspecified
	Male	79.7%	18.9%	0.8%	91.8%	7.2%	1.0%
gender	Female	83.6%	15.3%	0.3%	92.7%	6.7%	0.6%
	Total	81.7%	17.1%	0.6%	92.3%	6.9%	0.8%
	18-24 years	75.1%	24.9%	0.0%	95.0%	5.0%	0.0%
	25-44 years	83.8%	15.5%	0.5%	95.2%	4.8%	0.0%
age	45-64 years	82.1%	16.2%	0.8%	93.8%	6.2%	0.0%
-	65 years and over	81.5%	16.3%	0.7%	89.3%	8.9%	1.8%
	Total	81.7%	17.1%	0.6%	92.4%	6.9%	0.8%
	less than \$30k	88.8%	9.9%	0.7%	88.9%	7.8%	3.3%
	\$30-70k	83.3%	15.7%	0.6%	94.6%	4.8%	0.5%
household income	\$70-100k	85.9%	12.1%	1.3%	94.2%	5.0%	0.8%
meome	\$100k and over	77.9%	20.8%	0.1%	92.3%	7.5%	0.2%
	Total	81.7%	17.1%	0.6%	93.0%	6.2%	0.9%
knowledge of	bilingual	81.7%	17.2%	0.6%			
English and	unilingual English	81.8%	16.6%	0.5%			
French	Total	81.7%	17.0%	0.6%			

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those with a family doctor (from Q9): Q10A. Do you see your family doctor in a... ONE MENTION ONLY English-speaking males with a family doctor were more likely to report having a family doctor in a private practice (18.9%) than were their female counterparts (15.3%).

Across age groups, English speakers with a family doctor who were aged 18-24 years were the most likely to report having a family doctor in a private practice (24.9%) while those aged 25-44 years were the least likely (15.5%).

With respect to income, those with a family doctor who earned \$100k and over were the most likely to report having a family doctor in a private practice (20.8%) while those earning less than \$30k were the least likely (9.9%).

English-speakers with a family doctor who were bilingual were more likely to report having a family doctor in a private practice than their unilingual English counterparts.

2.1.3 Used Hospital Emergency Room to See a Doctor

Among English speakers without a family doctor, 29.8% reported using hospital emergency rooms to see a doctor. Overall, English speakers were about as likely as their French-speaking counterparts to report using hospital emergency rooms to see a doctor (28.7%).

Access to a Doctor for Anglophones without a Family Doctor

Region	Hospital emergency	Clinic offering "walk-in" access - where you use your health	Private practice doctor where you pay a fee	Some other place (specify)
031 Capitale-Nationale (n=34)	20.6%	74.5%	3.3%	1.7%
061 Ouest-de-l'Île-de-Montréal (n=58)	31.5%	66.2%	0.8%	1.6%
062 Centre-Ouest-de-l'Île-de-Montréal (n=67)	18.6%	69.7%	11.4%	0.6%
063 Centre-Sud-de-l'Île-de-Montréal (n=42)	29.9%	67.1%	4.7%	3.3%
064 Nord-de-l'Île-de-Montréal (n=40)	42.0%	57.1%	0.9%	-
Total (n=426)	29.8%	58.3%	7.3%	5.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those without a family doctor (Q9): Q10B. Where do you go to access a doctor?

English-speaking males without a family doctor were more likely to report using hospital emergency rooms to see a doctor (37.4%) than were their female counterparts (19.2%).

Across age groups, English speakers without a family doctor who were aged 65 years and over were the most likely to report using hospital emergency rooms to see a doctor (31.7%) while those aged 25-44 years were the least likely (26.4%).

With respect to income, those without a family doctor who earned less than \$30k were the most likely to report using hospital emergency rooms to see a doctor (37.4%) while those earning \$100k and over were the least likely (11.4%).

Persons without a family doctor who were unilingual English were more likely to report using hospital emergency rooms to see a doctor than their bilingual counterparts.

Access to a Doctor for Anglophones without a Family Doctor

	Region	Hospital emergency	Clinic offering "walk-in" access - where you use your health	Private practice doctor where you pay a fee	Some other place (specify)
	Male (n=206)	37.4%	52.9%	7.2%	3.2%
gender	Female (n=237)	19.2%	65.8%	7.6%	7.8%
	Total (n=443)	29.8%	58.3%	7.3%	5.2%
	25-44 years (n=67)	26.4%	61.5%	4.8%	7.3%
age	45-64 years (n=228)	27.5%	62.1%	9.4%	2.8%
	65 years and over (n=131)	31.7%	58.6%	4.7%	5.4%
	Total (n=435)	30.0%	58.4%	7.5%	4.7%
	less than \$30k (n=84)	37.4%	54.6%	9.4%	0.3%
ĺ	\$30-70k (n=99)	34.1%	62.0%	3.7%	0.1%
household income	\$70-100k (n=59)	28.5%	53.4%	16.2%	3.6%
meome	\$100k and over (n=107)	11.4%	68.4%	6.2%	14.5%
	Total (n=349)	25.3%	61.5%	7.9%	6.1%
knowledge of	bilingual (n=329)	26.1%	62.6%	7.6%	4.4%
English and	unilingual English (n=114)	43.2%	42.7%	6.5%	7.8%
French	Total (n=443)	29.8%	58.3%	7.3%	5.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those without a family doctor (Q9): Q10B. Where do you go to access a doctor?

v	Vait Time	for App	oointme	nt with	Family I	Doctor W	hen Nee	ding Imn	nediate (Care				
	English speakers								Fre	ench speal	cers			
Region	On the same day	The next day	In 2 to 3 days	In 4 to 6 days	In 1 to 2 weeks	Between 2 weeks and one month	One month or more	On the same day		In 2 to 3 days	In 4 to 6 days	In 1 to 2 weeks	Between 2 weeks and one month	One month or more
031 Capitale-Nationale (n=115)	7.5%	17.0%	5.9%	5.8%	23.0%	20.0%	20.9%	18.5%	11.0%	12.2%	12.9%	19.0%	13.7%	12.6%
051 Estrie – CHU de Sherbrooke (n=80)	12.8%	10.5%	23.2%	5.8%	30.6%	11.8%	5.4%	13.1%	13.8%	14.6%	7.9%	18.0%	7.1%	25.5%
061 Ouest-de-l'Île-de-Montréal (n=344)	11.6%	11.5%	24.5%	18.9%	20.3%	6.3%	6.9%	6.9%	9.8%	28.9%	13.8%	30.1%	5.6%	4.9%
062 Centre-Ouest-de-l'Île-de-Montréal (n=318)	11.6%	16.3%	21.2%	5.4%	22.0%	15.7%	7.9%	8.5%	22.0%	3.8%	16.8%	25.7%	13.3%	9.8%
063 Centre-Sud-de-l'Île-de-Montréal (n=152)	6.7%	11.0%	15.1%	7.2%	46.4%	7.5%	6.1%	15.4%	9.6%	25.8%	4.9%	11.3%	18.5%	14.6%
064 Nord-de-l'Île-de-Montréal (n=170)	15.8%	17.1%	20.9%	7.6%	16.3%	14.0%	8.4%	23.4%	9.6%	16.4%	4.2%	12.1%	10.4%	23.8%
065 Est-de-l'Île-de-Montréal (n=140)	5.5%	9.5%	17.4%	16.2%	20.1%	18.1%	13.3%	7.6%	17.1%	17.2%	3.1%	26.7%	5.6%	22.7%
071 Outaouais (n=146)	23.8%	11.8%	8.6%	15.7%	19.7%	11.2%	9.1%	6.5%	37.2%	10.3%	7.6%	17.6%	11.3%	9.5%
111 Gaspésie (n=55)	14.1%	9.2%	19.9%	7.2%	27.0%	15.6%	7.1%	14.5%	10.7%	0.0%	4.0%	47.9%	22.9%	0.0%
131 Laval (n=186)	15.2%	12.3%	27.3%	7.8%	18.6%	5.3%	13.5%	12.6%	20.9%	19.7%	1.5%	11.4%	14.1%	19.8%
141 Lanaudière (n=56)	6.6%	3.4%	22.2%	4.1%	39.5%	20.4%	3.8%	14.1%	9.2%	32.1%	6.9%	18.8%	7.7%	11.1%
151 Laurentides (n=73)	10.3%	4.3%	21.1%	4.6%	39.2%	5.9%	14.5%	12.8%	13.3%	23.9%	4.2%	18.2%	11.1%	16.5%
161 Montérégie-Centre (n=97)	7.2%	13.7%	26.2%	4.5%	23.1%	11.8%	13.5%	15.5%	10.0%	27.6%	14.1%	17.6%	8.3%	7.0%
162 Montérégie-Est (n=48)	8.7%	28.3%	0.5%	11.8%	28.6%	11.9%	10.2%	15.0%	3.5%	22.8%	10.4%	26.4%	8.2%	13.7%
163 Montérégie-Ouest (n=164)	12.9%	9.2%	16.8%	19.5%	12.7%	16.3%	12.5%	12.8%	16.6%	28.2%	11.4%	10.6%	10.8%	9.6%
Total (n=2,144)	12.0%	12.5%	20.3%	11.1%	23.1%	11.6%	9.5%	13.6%	13.8%	20.1%	8.2%	19.2%	10.6%	14.5%
C 18 1 8	CUCCNI/CDOD	C												

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those with a family doctor (from Q9): Q11. When you need immediate care for a minor health problem, how long do you usually wait before you can have an appointment with your family doctor?

2.1.4 Waited a Month or More to See Family Doctor

Among English speakers needing immediate care for a minor health problem, 9.5% reported waiting a month or more to see their family doctor. Overall, English speakers were much less likely than their French-speaking counterparts to report waiting a month or more to see their family doctor (14.5%).

We observe that English-speakers needing immediate care for a minor health problem in the regions of RTS de la Capitale-Nationale (20.9%), RTS des Laurentides (14.5%) and RTS de la Montérégie-Centre (13.5%) were the most likely to report waiting a month or more to see their family doctor.

English speakers needing immediate care for a minor health problem in the regions of RTS de Lanaudière (3.8%), RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (5.4%) and RTS du Centre-Sud-de-l'Île-de-Montréal (6.1%) were the least likely to report waiting a month or more to see their family doctor.

			W	ait Time	e for Ap	pointme	ent with F	amily Do	ctor						
			English speakers								Fre	ench speal	kers		
	Variable	On the same day	The next day	In 2 to 3 days	In 4 to 6 days	In 1 to 2 weeks	Between 2 weeks and one month	One month or more	On the same day		In 2 to 3 days	In 4 to 6 days	In 1 to 2 weeks	Between 2 weeks and one month	One month or more
	Male	13.2%	12.0%	21.6%	10.3%	25.3%	10.1%	7.5%	14.7%	14.9%	18.7%	7.6%	21.4%	8.7%	14.1%
gender	Female	10.9%	12.9%	19.2%	11.8%	21.1%	12.8%	11.3%	12.9%	13.0%	21.0%	8.7%	17.6%	11.9%	14.8%
	Total	12.0%	12.5%	20.3%	11.1%	23.1%	11.6%	9.5%	13.6%	13.8%	20.1%	8.2%	19.2%	10.6%	14.5%
	18-24 ye a rs	14.9%	12.5%	29.0%	7.2%	18.1%	11.0%	7.3%	15.6%	17.9%	5.4%	14.6%	27.3%	0.0%	19.1%
	25-44 ye a rs	11.4%	12.2%	19.0%	15.5%	24.8%	9.2%	8.0%	9.0%	19.7%	19.8%	8.6%	21.3%	7.3%	14.2%
age	45-64 years	10.8%	12.8%	17.8%	9.0%	23.2%	14.4%	12.0%	13.2%	14.5%	22.5%	7.1%	13.9%	16.1%	12.7%
	65 years and over	12.7%	12.9%	21.8%	10.0%	22.7%	10.8%	9.0%	15.7%	9.2%	22.1%	7.4%	18.9%	12.1%	14.7%
	Total	12.0%	12.5%	20.3%	11.1%	23.1%	11.6%	9.5%	13.3%	13.9%	20.1%	8.3%	19.4%	10.5%	14.6%
	less than \$30k	9.0%	13.0%	11.7%	12.1%	30.6%	13.2%	10.5%	16.8%	10.2%	18.5%	10.8%	19.9%	11.1%	12.6%
	\$30-70k	8.8%	13.9%	20.6%	8.8%	25.0%	13.1%	9.9%	15.8%	12.0%	19.0%	9.2%	20.7%	10.2%	13.1%
household income	\$70-100k	9.3%	19.1%	25.7%	4.3%	15.8%	12.6%	13.1%	9.4%	23.6%	22.7%	6.1%	19.4%	8.3%	10.3%
	\$100k and over	15.9%	9.4%	21.6%	16.5%	20.1%	9.7%	6.8%	11.5%	14.0%	23.7%	6.6%	17.5%	11.2%	15.6%
	Total	12.0%	12.5%	20.3%	11.1%	23.1%	11.6%	9.5%	13.2%	14.8%	21.2%	8.0%	19.3%	10.2%	13.3%
knowledge of	bilingual	12.1%	12.2%	20.9%	11.7%	22.2%	11.0%	9.8%							
English and	unilingual English	11.3%	13.7%	17.7%	8.6%	26.6%	14.0%	8.1%							
French	Total	12.0%	12.5%	20.3%	11.1%	23.0%	11.6%	9.5%							

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those with a family doctor (from Q9): Q11. When you need immediate care for a minor health problem, how long do you usually wait before you can have an appointment with your family doctor?

English-speaking females needing immediate care for a minor health problem were more likely to report waiting a month or more to see their family doctor (11.3%) than were their male counterparts (7.5%).

Across age groups, English speakers needing immediate care for a minor health problem who were aged 45-64 years were the most likely to report waiting a month or more to see their family doctor (12.0%) while those aged 18-24 years were the least likely (7.3%).

With respect to income, those needing immediate care for a minor health problem who earned \$70k-100k were the most likely to report waiting a month or more to see their family doctor (13.1%) while those earning \$100k and over were the least likely (6.8%).

English speakers needing immediate care for a minor health problem who were bilingual were more likely to report waiting a month or more to see their family doctor than their unilingual English counterparts.

2.1.5 Very Poor Wait Times for Family Doctor

Among English speakers, 5.7% reported the wait time to see their family doctor as "very poor". Overall, English speakers were less likely than their Frenchspeaking counterparts to report the wait time to see their family doctor as "very poor" (6.4%).

We observe that English-speakers in the regions of RTS de la Capitale-Nationale (13.4%), RTS de l'Est-de-l'Île-de-Montréal (7.9%) and RTS de la Montérégie-Est (6.9%) were the most likely to report the wait time to see their family doctor as "very poor".

		English s	peakers			French	speakers	
Region	Very good	Good	Poor	Very poor	Very good	Good	Poor	Very poor
031 Capitale-Nationale (n=153)	25.6%	49.3%	11.7%	13.4%	36.4%	43.9%	12.9%	6.8%
051 Estrie – CHU de Sherbrooke (n=88)	25.2%	61.8%	9.4%	3.5%	31.2%	41.8%	11.2%	15.8%
061 Ouest-de-l'Île-de-Montréal (n=391)	33.3%	46.0%	15.2%	5.5%	33.1%	54.8%	9.6%	2.5%
062 Centre-Ouest-de-l'Île-de-Montréal (n=376)	30.8%	47.2%	15.9%	6.1%	10.8%	61.2%	27.9%	0.0%
063 Centre-Sud-de-l'Île-de-Montréal (n=170)	25.6%	57.2%	10.8%	6.5%	35.8%	42.6%	17.1%	4.6%
064 Nord-de-l'Île-de-Montréal (n=199)	32.5%	47.6%	16.3%	3.6%	25.0%	44.4%	29.1%	1.5%
065 Est-de-l'Île-de-Montréal (n=177)	28.0%	50.8%	13.2%	7.9%	27.9%	44.1%	19.8%	8.2%
071 Outaouais (n=162)	38.8%	34.7%	20.4%	6.1%	36.6%	43.6%	12.4%	7.4%
111 Gaspésie (n=63)	49.1%	40.9%	7.0%	3.0%	25.2%	71.6%	3.2%	0.0%
131 Laval (n=220)	28.6%	46.4%	18.3%	6.7%	26.7%	43.8%	21.9%	7.6%
141 Lanaudière (n=62)	21.8%	54.6%	17.4%	6.2%	42.4%	27.1%	27.2%	3.4%
151 Laurentides (n=95)	24.5%	60.5%	11.8%	3.2%	37.8%	37.7%	19.0%	5.5%
161 Montérégie-Centre (n=115)	20.7%	60.0%	14.2%	5.0%	33.1%	54.8%	8.2%	3.8%
162 Montérégie-Est (n=56)	39.5%	38.5%	15.1%	6.9%	24.4%	45.2%	19.1%	11.2%
163 Montérégie-Ouest (n=197)	40.7%	40.7%	14.5%	4.1%	39.0%	46.1%	12.6%	2.3%
Total (n=2,524)	31.0%	48.3%	15.1%	5.7%	32.8%	43.5%	17.2%	6.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those with a family doctor (from Q9): Q12. How would you describe the wait time for the appointment with your family doctor?

			English s	speakers		French speakers				
	Variable	Very good	Good	Poor	Very poor	Very good	Good	Poor	Very poor	
	Male	32.8%	50.9%	12.3%	4.0%	35.2%	42.4%	14.0%	8.4%	
gender	Female	29.4%	45.8%	17.6%	7.2%	31.0%	44.4%	19.6%	4.9%	
	Total	31.0%	48.3%	15.1%	5.7%	32.8%	43.5%	17.2%	6.4%	
	18-24 years	27.4%	54.8%	13.7%	4.0%	35.2%	38.4%	20.0%	6.4%	
age 4	25-44 years	21.4%	57.0%	16.6%	5.0%	33.4%	38.6%	23.9%	4.2%	
	45-64 years	34.7%	41.9%	15.9%	7.5%	26.2%	44.9%	21.0%	7.9%	
	65 years and over	43.8%	40.2%	11.8%	4.2%	34.6%	47.1%	11.4%	6.9%	
	Total	31.0%	48.3%	15.1%	5.7%	32.8%	43.6%	17.3%	6.3%	
	less than \$30k	39.9%	37.9%	16.3%	5.9%	31.5%	50.3%	10.9%	7.2%	
	\$30-70k	29.7%	49.4%	13.9%	7.1%	25.8%	54.8%	15.4%	4.0%	
household income	\$70-100k	19.9%	57.0%	16.1%	7.0%	39.0%	39.6%	13.3%	8.1%	
meome	\$100k and over	41.3%	39.8%	14.5%	4.4%	39.0%	33.6%	19.6%	7.8%	
	Total	31.0%	48.3%	15.1%	5.7%	33.6%	44.2%	15.7%	6.5%	
knowledge of	bilingual	30.0%	49.1%	15.3%	5.6%					
English and	unilingual English	35.4%	44.6%	13.9%	6.1%					
French	Total	31.0%	48.3%	15.1%	5.7%					

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those with a family doctor (from Q9): Q12. How would you describe the wait time for the appointment with your family doctor?

English speakers in the regions of RTS de la Gaspésie (3.0%), RTS des Laurentides (3.2%) and RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (3.5%) were the least likely to report the wait time to see their family doctor as "very poor".

English-speaking females (7.2%) were more likely to feel the wait time for an appointment with a family doctor was "very poor" than their male counterparts (4.0%).

Across age groups, English speakers aged 45-64 years (7.5%) were the most likely to feel the wait time for an appointment with a family doctor was "very poor" while those aged 18-24 years (4.0%) were the least likely.

With respect to income, those earning \$30k-70k were the most likely to feel the wait time for an appointment with a family doctor was "very poor" (7.1%) while those earning \$100k and over were the least likely (4.4%).

Persons who were bilingual (5.7%) were less likely to feel the wait time for an appointment with a family doctor was "very poor" than their unilingual English (6.1%) counterparts.

3 Test Procedures

163 Montérégie-Ouest (n=240)

Total (n=3,133)

3.1.1 Referred for Test Procedures

	English S	peakers	French Speakers		
Region	Yes	No	Yes	No	
031 Capitale-Nationale (n=202)	54.2%	45.8%	59.3%	40.7%	
051 Estrie – CHU de Sherbrooke (n=106)	50.7%	49.3%	63.1%	36.9%	
061 Ouest-de-l'Île-de-Montréal (n=484)	59.4%	40.6%	57.7%	42.3%	
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	50.4%	49.6%	78.0%	22.0%	
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	48.9%	51.1%	65.4%	34.6%	
064 Nord-de-l'Île-de-Montréal (n=251)	52.0%	48.0%	58.5%	41.5%	
065 Est-de-l'Île-de-Montréal (n=215)	43.1%	56.9%	66.1%	33.9%	
071 Outaouais (n=200)	58.3%	41.7%	74.1%	25.9%	
111 Gaspésie (n=75)	62.8%	37.2%	-	-	
131 Laval (n=257)	59.1%	40.9%	66.2%	33.8%	
141 Lanaudière (n=75)	48.0%	52.0%	65.2%	34.8%	
151 Laurentides (n=110)	46.0%	54.0%	64.7%	35.3%	
161 Montérégie-Centre (n=150)	56.9%	43.1%	68.1%	31.9%	
162 Montérégie-Est (n=77)	43.2%	56.8%	73.3%	26.7%	

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q13. Within the last twelve months, have you or another person you helped been referred by a doctor for one or more test procedures?

53.1%

53.2%

46.9%

46.8%

64.1%

65.6%

35.9%

34.4%

Among English speakers, 53.2% reported they or another had been referred for test procedures in the past year. This was much lower than the proportion reported for French speakers (65.6%).

We observe that English-speakers in the regions of RTS de la Gaspésie (62.8%), RTS de l'Ouest-de-l'Île-de-Montréal (59.4%) and RTS de Laval (59.1%) were the most likely to report they or a person they helped had been referred for test procedures.

English speakers in the regions of RTS de l'Est-de-l'Île-de-Montréal (43.1%), RTS de la Montérégie-Est (43.2%) and RTS des Laurentides (46.0%) were the least likely to report they or a person they helped had been referred for test procedures.

Referred for Test Procedures by a Doctor in the Previous Year

		English S	Speakers	French S	peakers
	Variable	Yes	No	Yes	No
	Male	46.1%	53.9%	58.5%	41.5%
gender	Female	60.4%	39.6%	72.3%	27.7%
	Total	53.2%	46.8%	65.6%	34.4%
	18-24 years	24.6%	75.4%	63.8%	36.2%
	25-44 years	44.9%	55.1%	57.4%	42.6%
age	45-64 years	65.2%	34.8%	67.2%	32.8%
	65 years and over	66.9%	33.1%	72.1%	27.9%
	Total	53.2%	46.8%	65.6%	34.4%
	less than \$30k	47.0%	53.0%	64.4%	35.6%
	\$30-70k	56.5%	43.5%	68.9%	31.1%
household income	\$70-100k	56.8%	43.2%	61.8%	38.2%
Income	\$100k and over	59.5%	40.5%	68.1%	31.9%
	Total	56.2%	43.8%	66.5%	33.5%
knowledge of	bilingual	52.6%	47.4%		
English and	unilingual English	55.7%	44.3%		
French	Total	53.2%	46.8%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q13. Within the last twelve months, have you or another person you helped been referred by a doctor for one or more test procedures?

English-speaking females were more likely to report they or someone they helped had been referred for test procedures (60.4%) than were their male counterparts (46.1%).

Across age groups, English speakers who were aged 65 years and over were the most likely to report they or a person they helped had been referred for test procedures (66.9%) while those aged 18-24 years were the least likely (24.6%).

With respect to income, those who earned \$100k and over were the most likely to report they or a person they helped had been referred for test procedures (59.5%) while those earning less than \$30k were the least likely (47.0%).

English-speakers who were unilingual English were more likely to report they or a person they helped had been referred for test procedures (55.7%) than their bilingual counterparts (52.6%).

3.1.2 Type of Facility for Test Procedures

Among English speakers who had been referred for test procedures, 22.1% were referred to a private clinic or testing facility requiring payment. This was higher than the proportion reported for French speakers (19.4%).

We observe that English-speakers who had been referred for test procedures in the regions of RTS du Centre-Sud-de-l'Île-de-Montréal (30.6%), RTS de la Montérégie-Ouest (30.4%) and RTS de l'Ouest-de-l'Île-de-Montréal (26.8%) were the most likely to have been referred to a private clinic or facility requiring payment.

English speakers who had been referred for test procedures in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (9.8%), RTS des Laurentides (11.3%) and RTS de la Gaspésie (13.9%) were the least likely to have been referred to a private clinic or facility requiring payment.

Type of Facility Re	ferred to for ⁻	Test Procedure	es		
	English :	Speakers	French Speakers		
Region	Hospital, CLSC, or other public institution	A private clinic or private testing facility	Hospital, CLSC, or other public institution	A private clinic or private testing facility	
031 Capitale-Nationale (n=125)	90.1%	20.2%	72.4%	27.6%	
051 Estrie – CHU de Sherbrooke (n=67)	92.4%	9.8%	75.4%	24.6%	
061 Ouest-de-l'Île-de-Montréal (n=339)	77.8%	26.8%	85.1%	14.9%	
062 Centre-Ouest-de-l'Île-de-Montréal (n=311)	90.9%	18.0%	97.5%	2.5%	
063 Centre-Sud-de-l'Île-de-Montréal (n=156)	90.5%	30.6%	66.3%	33.7%	
064 Nord-de-l'Île-de-Montréal (n=161)	82.0%	23.7%	86.5%	13.5%	
065 Est-de-l'Île-de-Montréal (n=125)	78.8%	23.5%	93.5%	6.5%	
071 Outaouais (n=120)	85.1%	16.6%	80.5%	19.5%	
111 Gaspésie (n=41)	87.4%	13.9%	-	-	
131 Laval (n=166)	92.1%	17.2%	76.3%	23.7%	
141 Lanaudière (n=52)	83.5%	17.6%	83.7%	16.3%	
151 Laurentides (n=74)	93.7%	11.3%	77.7%	22.3%	
161 Montérégie-Centre (n=107)	85.2%	21.8%	84.4%	15.6%	
162 Montérégie-Est (n=50)	85.4%	21.3%	70.5%	29.5%	
163 Montérégie-Ouest (n=150)	70.5%	30.4%	96.4%	3.6%	
Total (n=2,044)	84.5%	22.1%	80.6%	19.4%	

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those referred for test procedures within the previous year (Q13): Q14A. For the test procedures, were you or the other person referred to ...? MULTIPLE ANSWERS POSSIBLE

Type of Facility Referred to for Test Procedures

		English :	Speakers	French	Speakers
	Variable	Hospital, CLSC, or other public institution	A private clinic or private testing facility	Hospital, CLSC, or other public institution	A private clinic or private testing facility
	Male	84.6%	20.1%	81.1%	18.9%
gender	Female	84.3%	23.6%	80.3%	19.7%
	Total	84.5%	22.1%	80.6%	19.4%
	18-24 years	88.9%	11.4%	69.9%	30.1%
	25-44 years	82.1%	26.1%	82.7%	17.3%
age	45-64 years	83.2%	23.7%	70.9%	29.1%
	65 years and over	88.5%	16.4%	85.8%	14.2%
	Total	84.4%	22.0%	80.8%	19.2%
	less than \$30k	93.8%	7.2%	90.7%	9.3%
	\$30-70k	86.3%	20.0%	83.5%	16.5%
household	\$70-100k	85.6%	20.9%	79.7%	20.3%
Income	\$100k and over	80.6%	29.0%	76.0%	24.0%
	Total	85.0%	21.9%	81.4%	18.6%
knowledge of	bilingual	83.8%	22.4%		
English and	unilingual English	86.8%	20.8%		
French	Total	84.4%	22.1%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those referred for test procedures within the previous year (Q13): Q14A. For the test procedures, were you or the other person referred to ...? MULTIPLE ANSWERS POSSIBLE

English-speaking females who had been referred for test procedures were more likely to have been referred to a private clinic or facility requiring payment (23.6%) than were their male counterparts (20.1%).

Across age groups, English speakers who had been referred for test procedures who were aged 25-44 years were the most likely to have been referred to a private clinic or facility requiring payment (26.1%) while those aged 18-24 years were the least likely (11.4%).

With respect to income, those who had been referred for test procedures who earned \$100k and over were the most likely to have been referred to a private clinic or facility requiring payment (29.0%) while those earning less than \$30k were the least likely (7.2%).

English-speakers who had been referred for test procedures who were bilingual were more likely to have been referred to a private clinic or facility requiring payment (22.4%) than their unilingual English counterparts (20.8%).

3.1.3 Choice of Facility for Test Procedures

Had a Choice of Facilty for Test Procedures

	English S	Speakers	French Speakers		
Region	Yes	No	Yes	No	
031 Capitale-Nationale (n=117)	28.2%	71.8%	43.6%	56.4%	
051 Estrie – CHU de Sherbrooke (n=65)	47.0%	53.0%	46.0%	54.0%	
061 Ouest-de-l'Île-de-Montréal (n=321)	42.7%	57.3%	38.7%	61.3%	
062 Centre-Ouest-de-l'Île-de-Montréal (n=281)	50.6%	49.4%	32.5%	67.5%	
063 Centre-Sud-de-l'Île-de-Montréal (n=137)	48.8%	51.2%	46.1%	53.9%	
064 Nord-de-l'Île-de-Montréal (n=153)	59.6%	40.4%	37.8%	62.2%	
065 Est-de-l'Île-de-Montréal (n=120)	46.9%	53.1%	31.7%	68.3%	
071 Outaouais (n=114)	42.0%	58.0%	41.8%	58.2%	
111 Gaspésie (n=38)	34.1%	65.9%	-	-	
131 Laval (n=149)	48.2%	51.8%	49.6%	50.4%	
141 Lanaudière (n=50)	51.7%	48.3%	25.3%	74.7%	
151 Laurentides (n=70)	56.9%	43.1%	45.0%	55.0%	
161 Montérégie-Centre (n=99)	62.8%	37.2%	45.5%	54.5%	
162 Montérégie-Est (n=47)	51.8%	48.2%	24.1%	75.9%	
163 Montérégie-Ouest (n=147)	59.9%	40.1%	45.7%	54.3%	
Total (n=1,908)	49.5%	50.5%	38.8%	61.2%	

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those referred for test procedures within the previous year (Q13): Q14B. Were you given the choice for where you or the other person was referred to?

Among English speakers who had been referred for test procedures, 50.5% were not given a choice of where to go for those procedures. This was lower than the proportion reported for French speakers (61.2%).

We observe that English-speakers who had been referred for test procedures in the regions of RTS de la Capitale-Nationale (71.8%), RTS de la Gaspésie (65.9%) and RTS de l'Outaouais (58.0%) were the most likely to not be given a choice of where to go for those procedures.

English speakers who had been referred for test procedures in the regions of RTS de la Montérégie-Centre (37.2%), RTS de la Montérégie-Ouest (40.1%) and RTS du Nord-de-l'Île-de-Montréal (40.4%) were the least likely to not be given a choice of where to go for those procedures.

Had a Choice of Facilty for Test Procedures

Variable		English S	Speakers	French Speakers		
		Yes	No	Yes	No	
	Male	51.8%	48.2%	40.2%	59.8%	
gender	Female	47.8%	52.2%	37.9%	62.1%	
	Total	49.5%	50.5%	38.8%	61.2%	
	18-24 years	39.9%	60.1%	50.1%	49.9%	
	25-44 years	51.2%	48.8%	34.7%	65.3%	
age	45-64 years	51.1%	48.9%	39.8%	60.2%	
	65 years and over	47.6%	52.4%	39.2%	60.8%	
	Total	49.7%	50.3%	39.0%	61.0%	
	less than \$30k	45.9%	54.1%	36.5%	63.5%	
[\$30-70k	45.1%	54.9%	40.1%	59.9%	
household income	\$70-100k	55.6%	44.4%	42.8%	57.2%	
meome	\$100k and over	54.5%	45.5%	37.9%	62.1%	
	Total	50.7%	49.3%	39.4%	60.6%	
knowledge of	bilingual	50.0%	50.0%			
English and	unilingual English	47.8%	52.2%			
French	Total	49.6%	50.4%			

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those referred for test procedures within the previous year (Q13): Q14B. Were you given the choice for where you or the other person was referred to?

English-speaking females who had been referred for test procedures were more likely to not be given a choice of where to go for those procedures (52.2%) than were their male counterparts (48.2%).

Across age groups, English speakers who had been referred for test procedures who were aged 18-24 years were the most likely to not be given a choice of where to go for those procedures (60.1%) while those aged 25-44 years were the least likely (48.8%).

With respect to income, those who had been referred for test procedures who earned \$30-70k were the most likely to not be given a choice of where to go for those procedures (54.9%) while those earning \$70-100k were the least likely (44.4%).

English-speakers who had been referred for test procedures who were unilingual English were more likely to not be given` a choice of where to go for those procedures (52.2%) than their bilingual counterparts (50.0%).

3.1.4 Reasons for Choice of Facility

Among English speakers who were given a choice of where to go for their test procedures, 5.1% chose the facility based on the language of service.

We observe that English-speakers who were given a choice of where to go for their test procedures in the regions of RTS de la Gaspésie (24.9%), RTS du Centre-Ouest-de-l'Île-de-Montréal (8.2%) and RTS du Nord-de-l'Île-de-Montréal (5.9%) were the most likely to choose the facility based on the language of service.

English speakers who had a choice of where to go for their test procedures in the regions of RTS de la Capitale-Nationale (0.0%) were the least likely to choose the facility based on the language of service.

Main Reason for Choice of Facility Among Anglophones

	Region	Wait times for appointments or results	Cost	Geographic convenience	Language	Familiar / My file / doctor is there	Quality of care / Expertise
	031 Capitale-Nationale (n=39)	37.7%	2.3%	41.0%	-	12.2%	4.3%
	051 Estrie – CHU de Sherbrooke (n=31)	19.0%	1.1%	40.9%	3.6%	1.1%	33.7%
•	061 Ouest-de-l'Île-de-Montréal (n=149)	31.3%	8.3%	48.4%	4.2%	1.7%	5.1%
	062 Centre-Ouest-de-l'Île-de-Montréal (n=134)	23.2%	4.1%	53.3%	8.2%	5.1%	8.1%
,	063 Centre-Sud-de-l'Île-de-Montréal (n=59)	20.6%	3.1%	54.1%	4.1%	3.4%	13.7%
	064 Nord-de-l'Île-de-Montréal (n=70)	27.9%	9.1%	38.5%	5.9%	3.7%	10.9%
	065 Est-de-l'Île-de-Montréal (n=64)	24.0%	3.4%	49.3%	5.6%	4.5%	10.4%
	071 Outaouais (n=36)	21.3%	8.5%	57.8%	2.5%	=	6.8%
	131 Laval (n=62)	39.7%	5.7%	42.4%	4.1%	1.6%	2.4%
	151 Laurentides (n=33)	25.6%	-	52.0%	4.6%	=	1.9%
	161 Montérégie-Centre (n=50)	13.4%	7.0%	46.9%	4.8%	2.4%	12.5%
	163 Montérégie-Ouest (n=73)	32.0%	5.0%	41.2%	5.7%	=	10.6%
	Total (n=849)	27.0%	5.6%	47.5%	5.1%	2.5%	8.9%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those given a choice where to go for test procedures (Q14B): Q14C. What was the MAIN REASON for your or the other person's choice of the facility?

English-speaking females who were given a choice of where to go for their test procedures were more likely to choose the facility based on the language of service (6.0%) than were their male counterparts (4.1%).

Across age groups, among English speakers who were given a choice of where to go for their test procedures, those who were aged 65 years and over were the most likely to choose the facility based on the language of service (7.4%) while those aged 18-24 years were the least likely (0.0%).

With respect to income, among those who were

Main Reason for Choice of Facility Among Anglophones

	Variable	Wait times for appointments or results	Cost	Geographic convenience	Language	Familiar / My file / doctor is there	Quality of care / Expertise
	Male (n=311)	25.4%	5.9%	48.7%	4.1%	2.2%	9.0%
gender	Female (n=538)	28.3%	5.4%	46.5%	6.0%	2.8%	8.9%
	Total (n=849)	27.0%	5.6%	47.5%	5.1%	2.5%	8.9%
	25-44 years (n=84)	29.3%	4.5%	46.3%	5.1%	0.8%	11.3%
2.00	45-64 years (n=406)	32.1%	6.1%	45.4%	4.4%	2.1%	7.2%
age	65 years and over (n=340)	20.7%	4.6%	45.7%	7.4%	6.3%	9.5%
	Total (n=838)	27.2%	5.4%	47.5%	5.1%	2.5%	9.0%
	less than \$30k (n=80)	17.1%	3.3%	51.3%	2.9%	4.1%	15.7%
	\$30-70k (n=200)	17.8%	6.3%	52.9%	6.1%	3.7%	10.0%
household income	\$70-100k (n=130)	19.3%	6.3%	56.4%	6.9%	1.4%	4.9%
Income	\$100k and over (n=222)	40.1%	4.1%	40.0%	4.0%	2.4%	7.3%
•	Total (n=632)	26.8%	5.1%	48.4%	5.1%	2.8%	8.5%
knowledge of	bilingual (n=679)	28.1%	5.5%	47.0%	4.6%	2.0%	9.1%
English and	unilingual English (n=170)	22.5%	6.2%	49.6%	7.4%	4.5%	8.2%
French	Total (n=849)	27.0%	5.6%	47.5%	5.1%	2.5%	8.9%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those given a choice where to go for test procedures (Q14B): Q14C. What was the MAIN REASON for your or the other person's choice of the facility?

given a choice of where to go for their test procedures, those who earned \$70-100k were the most likely to choose the facility based on the language of service (6.9%) while those earning less than \$30k were the least likely (2.9%).

English-speakers who were given a choice of where to go for their test procedures who were unilingual English were more likely to choose the facility based on the language of service (7.4%) than their bilingual counterparts (4.6%).

Main Reason for Choice of Facility Among Francophones

	Variable	Wait times for appointments or results	Cost	Geographic convenience	Familiar / My file / doctor is there	Quality of care / Expertise
	Male (n=84)	34.2%	1.7%	53.8%	1.4%	2.6%
gender	Female (n=165)	26.5%	7.9%	51.4%	4.6%	4.1%
	Total (n=249)	29.8%	5.3%	52.4%	3.3%	3.4%
	25-44 years (n=36)	31.3%	7.4%	46.9%	4.7%	3.1%
2.50	45-64 years (n=42)	38.3%	1.7%	45.6%	3.4%	2.3%
age	65 years and over (n=166)	24.0%	6.7%	55.9%	3.1%	4.9%
	Total (n=249)	29.8%	5.3%	52.4%	3.3%	3.4%
	less than \$30k (n=30)	21.2%	-	62.0%	-	6.7%
household income	\$30-70k (n=84)	17.4%	10.4%	62.7%	4.2%	3.6%
	\$70-100k (n=42)	37.7%	1.8%	55.6%	1.3%	0.6%
	\$100k and over (n=56)	44.3%	4.5%	36.6%	4.1%	3.1%
	Total (n=212)	30.0%	5.3%	53.7%	2.9%	3.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those given a choice where to go for test procedures (Q14B): Q14C. What was the MAIN REASON for your or the other person's choice of the facility?

4 Medical Specialist

4.1.1 Referred to a Medical Specialist

Referred by a Doctor to a Medical Specialist for a Follow Up Within the Previous Year

	English S	peakers	French Speakers		
Region	Yes	No	Yes	No	
031 Capitale-Nationale (n=202)	37.3%	62.7%	35.7%	64.3%	
051 Estrie – CHU de Sherbrooke (n=106)	60.5%	39.5%	35.9%	64.1%	
061 Ouest-de-l'Île-de-Montréal (n=484)	46.3%	53.7%	46.7%	53.3%	
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	42.0%	58.0%	49.9%	50.1%	
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	42.7%	57.3%	49.3%	50.7%	
064 Nord-de-l'Île-de-Montréal (n=251)	43.5%	56.5%	42.5%	57.5%	
065 Est-de-l'Île-de-Montréal (n=215)	27.0%	73.0%	38.4%	61.6%	
071 Outaouais (n=200)	47.8%	52.2%	55.3%	44.7%	
111 Gaspésie (n=75)	48.6%	51.4%	-	-	
131 Laval (n=257)	44.1%	55.9%	39.7%	60.3%	
141 Lanaudière (n=75)	47.4%	52.6%	34.9%	65.1%	
151 Laurentides (n=110)	46.0%	54.0%	51.4%	48.6%	
161 Montérégie-Centre (n=150)	38.2%	61.8%	45.1%	54.9%	
162 Montérégie-Est (n=77)	50.8%	49.2%	45.9%	54.1%	
163 Montérégie-Ouest (n=240)	45.3%	54.7%	36.4%	63.6%	
Total (n=3,133)	43.6%	56.4%	42.7%	57.3%	

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q15. Within the last twelve months, have you or another person you have helped been referred by a doctor to a medical specialist for follow up?

Among English speakers who had been referred for test procedures, 43.6% had been referred to a medical specialist for a follow up in the previous year. This was similar to the proportion reported for French speakers (42.7%).

We observe that English-speakers who had been referred for test procedures in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (60.5%), RTS de la Montérégie-Est (50.8%) and RTS de la Gaspésie (48.6%) were the most likely to have been referred to a medical specialist for a follow up in the previous year.

English speakers who had been referred for test procedures in the regions of RTS de l'Est-de-l'Île-de-Montréal (27.0%), RTS de la Capitale-Nationale (37.3%) and RTS de la Montérégie-Centre (38.2%) were the least likely to have been referred to a medical specialist for a follow up in the previous year.

Referred by a Doctor to a Medical Specialist for a Follow Up Within the Previous Year

		English S	peakers	French Speakers		
Variable		Yes	No	Yes	No	
	Male	38.5%	61.5%	37.7%	62.3%	
gender	Female	48.6%	51.4%	47.5%	52.5%	
	Total	43.6%	56.4%	42.7%	57.3%	
	18-24 years	32.1%	67.9%	43.8%	56.2%	
	25-44 years	38.6%	61.4%	35.1%	64.9%	
age	45-64 years	49.2%	50.8%	44.7%	55.3%	
	65 years and over	50.7%	49.3%	47.5%	52.5%	
	Total	43.6%	56.4%	42.6%	57.4%	
	less than \$30k	38.2%	61.8%	38.5%	61.5%	
	\$30-70k	42.3%	57.7%	45.1%	54.9%	
household income	\$70-100k	43.5%	56.5%	44.7%	55.3%	
income	\$100k and over	49.5%	50.5%	42.5%	57.5%	
	Total	44.3%	55.7%	43.2%	56.8%	
knowledge of	bilingual	45.1%	54.9%			
English and	unilingual English	37.2%	62.8%			
French	Total	43.5%	56.5%			

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q15. Within the last twelve months, have you or another person you have helped been referred by a doctor to a medical specialist for follow up?

English-speaking females who had been referred for test procedures were more likely to have been referred to a medical specialist for a follow up in the previous year (48.6%) than were their male counterparts (38.5%).

Across age groups, English speakers who had been referred for test procedures who were aged 65 years and over were the most likely to have been referred to a medical specialist for a follow up in the previous year (50.7%) while those aged 18-24 years were the least likely (32.1%).

With respect to income, those who had been referred for test procedures who earned \$100k and over were the most likely to have been referred to a medical specialist for a follow up in the previous year (49.5%) while those earning less than \$30k were the least likely (38.2%).

English-speakers who had been referred for test procedures who were bilingual were more likely to have been referred to a medical specialist for a follow up in the previous year (45.1%) than their unilingual English counterparts (37.2%).

4.1.2 Wait Time for Follow with Medical Specialist

Among English speakers who had been referred to a medical specialist, 16.1% reported waiting over 5 months for the appointment. This was higher than the proportion reported for French speakers (13.9%).

We observe that English-speakers who had been referred to a medical specialist in the regions of RTS de l'Outaouais (45.5%), RTS de l'Est-de-l'Île-de-Montréal (33.5%) and RTS de la Gaspésie (20.7%) were the most likely to report waiting over 5 months for the appointment.

English speakers who had been referred to a medical specialist in the regions of RTS de la Montérégie-Est (1.5%), RTS de Lanaudière (4.4%) and RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (7.4%) were the least likely to report waiting over 5 months for the appointment.

Wait Time for Follow Up with Specialist Among Anglophones

Region	Up to 1 month	1 month to 6 weeks	More than 6 weeks but no more than 3 months	More than 3 months but no more than 5 months	More than 5 months
031 Capitale-Nationale (n=66)	47.0%	11.9%	17.0%	10.4%	13.7%
051 Estrie – CHU de Sherbrooke (n=42)	51.0%	18.2%	17.3%	6.2%	7.4%
061 Ouest-de-l'Île-de-Montréal (n=238)	39.0%	16.1%	17.4%	10.2%	17.3%
062 Centre-Ouest-de-l'Île-de-Montréal (n=219)	41.1%	16.7%	20.3%	11.5%	10.5%
063 Centre-Sud-de-l'Île-de-Montréal (n=105)	30.7%	20.1%	18.8%	10.4%	20.1%
064 Nord-de-l'Île-de-Montréal (n=104)	35.8%	13.2%	26.1%	14.6%	10.3%
065 Est-de-l'Île-de-Montréal (n=84)	30.2%	7.9%	21.8%	6.5%	33.5%
071 Outaouais (n=82)	25.8%	13.4%	8.5%	6.9%	45.5%
131 Laval (n=121)	34.7%	18.2%	18.9%	18.2%	10.1%
141 Lanaudière (n=37)	23.6%	48.9%	15.0%	8.0%	4.4%
151 Laurentides (n=49)	65.1%	9.5%	12.2%	3.9%	9.3%
161 Montérégie-Centre (n=60)	34.8%	25.4%	18.7%	4.8%	16.2%
162 Montérégie-Est (n=36)	24.1%	1.6%	50.1%	22.7%	1.5%
163 Montérégie-Ouest (n=119)	53.1%	19.0%	7.9%	9.8%	10.3%
Total (n=1,390)	38.9%	16.4%	18.1%	10.6%	16.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those referred to a medical specialist for follow up (Q15): Q16A. Thinking of the most recent referral to a medical specialist for a follow up... From the time you were told of the referral to the time you saw the medical specialist, how long did you wait for your appointment?

Wait Time for Follow Up with Specialist Among Francophones

Region	Up to 1 month	1 month to 6 weeks	More than 6 weeks but no more than 3 months	More than 3 months but no more than 5 months	More than 5 months	More than 5 months but no more than 12 months	More than	More than 12 months but no more than 18 months	More than
031 Capitale-Nationale (n=35)	42.0%	11.4%	10.4%	5.5%	30.7%	24.2%	6.6%	3.4%	2.8%
064 Nord-de-l'Île-de-Montréal (n=30)	30.5%	12.7%	15.9%	23.6%	17.3%	14.0%	3.2%	3.1%	0.0%
065 Est-de-l'Île-de-Montréal (n=31)	24.1%	5.7%	32.2%	19.3%	18.7%	14.0%	4.8%	2.2%	2.4%
151 Laurentides (n=45)	37.0%	12.2%	18.9%	22.3%	9.6%	6.0%	3.6%	1.3%	2.1%
162 Montérégie-Est (n=33)	44.1%	6.6%	11.2%	16.6%	21.4%	6.7%	14.7%	1.0%	11.8%
Total (n=416)	37.0%	13.2%	17.5%	14.3%	18.0%	12.7%	5.3%	1.9%	3.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those referred to a medical specialist for follow up (Q15): Q16A. Thinking of the most recent referral to a medical specialist for a follow up... From the time you were told of the referral to the time you saw the medical specialist, how long did you wait for your appointment?

English-speaking females who had been referred to a medical specialist were more likely to report waiting over 5 months for the appointment (18.8%) than were their male counterparts (12.5%).

Across age groups, English speakers who had been referred to a medical specialist who were aged 45-64 years were the most likely to report waiting over 5 months for the appointment (19.1%) while those aged 18-24 years were the least likely (7.2%).

With respect to income, among those who had been referred to a medical specialist, those who earned less than \$30k were the most likely to report waiting over 5 months for the appointment (19.7%) while those earning \$30-70k were the least likely (12.9%).

Wait Time for Follow Up with Specialist Among Anglophones

	Variable	Up to 1 month	1 month to 6 weeks	More than 6 weeks but no more than 3 months	More than 3 months but no more than 5 months	More than 5 months
	Male (n=495)	43.1%	20.4%	15.5%	8.3%	12.5%
gender	Female (n=895)	35.5%	13.3%	20.0%	12.3%	18.8%
	Total (n=1,390)	38.9%	16.4%	18.1%	10.6%	16.1%
	25-44 years (n=135)	38.4%	18.7%	14.9%	10.8%	17.3%
2.50	45-64 years (n=628)	33.7%	16.2%	18.6%	12.4%	19.1%
age	65 years and over (n=584)	40.8%	19.3%	16.5%	10.4%	12.9%
	Total (n=1,367)	38.6%	16.6%	18.2%	10.5%	16.1%
	less than \$30k (n=164)	39.6%	16.1%	16.9%	7.7%	19.7%
b b . l .l	\$30-70k (n=370)	32.3%	21.8%	19.9%	13.1%	12.9%
household income	\$70-100k (n=196)	35.9%	15.9%	19.0%	11.6%	17.6%
meeme	\$100k and over (n=318)	41.8%	14.9%	14.2%	9.6%	19.6%
	Total (n=1,048)	37.5%	17.3%	17.1%	10.8%	17.2%
knowledge of	bilingual (n=1,095)	38.7%	16.1%	18.5%	10.7%	15.9%
English and	unilingual English (n=293)	39.3%	18.0%	15.7%	9.8%	17.1%
French	Total (n=1,388)	38.8%	16.4%	18.1%	10.6%	16.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those referred to a medical specialist for follow up (Q15): Q16A. Thinking of the most recent referral to a medical specialist for a follow up... From the time you were told of the referral to the time you saw the medical specialist, how long did you wait for your appointment?

English-speakers who had been referred to a medical specialist who were unilingual English were more likely to report waiting over 5 months for the appointment (17.1%) than their bilingual counterparts (15.9%).

Wait Time for Follow Up with Specialist Among Francophones

	Variable	Up to 1 month	1 month to 6 weeks	More than 6 weeks but no more than 3 months	More than 3 months but no more than 5 months	More than 5 months
	Male (n=150)	46.6%	14.1%	19.0%	12.5%	7.8%
gender	Female (n=266)	30.2%	12.6%	16.5%	15.6%	25.2%
	Total (n=416)	37.0%	13.2%	17.5%	14.3%	18.0%
	25-44 years (n=64)	32.2%	17.1%	13.3%	19.1%	18.3%
2.50	45-64 years (n=69)	27.6%	13.7%	23.6%	9.4%	25.8%
age	65 years and over (n=270)	41.5%	10.4%	20.2%	12.3%	15.5%
	Total (n=414)	36.8%	13.3%	17.7%	14.4%	17.8%
	less than \$30k (n=57)	44.4%	13.9%	18.7%	11.4%	11.6%
	\$30-70k (n=128)	36.4%	17.2%	23.2%	12.1%	11.3%
household income	\$70-100k (n=75)	44.3%	11.8%	12.3%	16.9%	14.5%
moonic	\$100k and over (n=94)	33.0%	11.1%	18.3%	14.2%	23.3%
	Total (n=354)	38.3%	13.7%	18.7%	13.7%	15.6%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those referred to a medical specialist for follow up (Q15): Q16A. Thinking of the most recent referral to a medical specialist for a follow up... From the time you were told of the referral to the time you saw the medical specialist, how long did you wait for your appointment?

4.1.3 Attitude to Wait Time for Follow Up with Specialist

Among English speakers who had been referred to a medical specialist, 11.8% reported the wait time for an appointment with the specialist as "very poor". This was much lower than the proportion reported for French speakers (15.0%).

We observe that English-speakers who had been referred to a medical specialist in the regions of RTS de la Gaspésie (20.5%), RTS de l'Est-de-l'Île-de-Montréal (18.7%) and RTS de la Capitale-Nationale (15.3%) were the most likely to report the wait time for an appointment with the specialist as "very poor".

Attitude to Wait Times for Follow Up with a Specialist											
		English S	peakers			French S	peakers				
Region	Very good	Good	Poor	Very poor	Very good	Good	Poor	Very poor			
031 Capitale-Nationale (n=75)	40.3%	22.5%	21.8%	15.3%	20.1%	56.9%	11.8%	11.3%			
051 Estrie – CHU de Sherbrooke (n=49)	48.5%	32.4%	12.3%	6.8%	16.7%	66.0%	10.7%	6.6%			
061 Ouest-de-l'Île-de-Montréal (n=249)	28.1%	38.0%	19.0%	15.0%	31.9%	43.5%	16.5%	8.1%			
062 Centre-Ouest-de-l'Île-de-Montréal (n=226)	29.2%	40.4%	19.4%	11.0%	41.8%	20.7%	30.6%	6.9%			
063 Centre-Sud-de-l'Île-de-Montréal (n=110)	21.6%	42.5%	25.5%	10.4%	17.3%	29.5%	30.2%	23.1%			
064 Nord-de-l'Île-de-Montréal (n=111)	23.6%	35.4%	31.0%	10.0%	20.2%	26.7%	43.6%	9.5%			
065 Est-de-l'Île-de-Montréal (n=88)	18.6%	31.3%	31.4%	18.7%	29.2%	39.3%	17.7%	13.9%			
071 Outaouais (n=90)	22.0%	35.0%	28.7%	14.2%	34.6%	21.4%	28.5%	15.4%			
111 Gaspésie (n=30)	37.6%	24.7%	17.3%	20.5%	-	-	-	-			
131 Laval (n=121)	23.0%	40.0%	23.1%	13.9%	31.5%	20.4%	24.8%	23.2%			
141 Lanaudière (n=36)	14.9%	18.2%	63.0%	3.9%	24.5%	31.2%	20.7%	23.5%			
151 Laurentides (n=52)	57.3%	23.8%	11.2%	7.7%	20.1%	56.2%	16.8%	6.9%			
161 Montérégie-Centre (n=68)	28.5%	38.8%	26.7%	6.0%	18.3%	50.1%	16.3%	15.3%			
162 Montérégie-Est (n=38)	20.2%	64.4%	13.6%	1.8%	24.1%	41.2%	6.8%	27.8%			
163 Montérégie-Ouest (n=122)	28.2%	39.7%	20.3%	11.8%	41.1%	23.7%	17.3%	17.9%			
Total (n=1,465)	28.1%	37.5%	22.5%	11.8%	24.8%	41.2%	19.0%	15.0%			

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those referred to a medical specialist for follow up (Q15): Q16B. How would you describe this wait time for the appointment with a medical specialist?

English speakers who had been referred to a medical specialist in the regions of RTS de la Montérégie-Est (1.8%), RTS de Lanaudière (3.9%) and RTS de la Montérégie-Centre (6.0%) were the least likely to report the wait time for an appointment with the specialist as "very poor".

English-speaking females who had been referred to a medical specialist were more likely to report the wait time for an appointment with the specialist as "very poor" (12.3%) than were their male counterparts (11.1%).

Across age groups, English speakers who had been referred to a medical specialist who were aged 45-64 years were the most likely to report the wait time for an appointment with the specialist as "very poor" (15.6%).

			English Speakers				French Speakers			
	Variable	Very good	Good	Poor	Very poor	Very good	Good	Poor	Very poor	
	Male (n=525)	29.1%	39.7%	20.1%	11.1%	26.5%	43.3%	17.9%	12.3%	
gender	Female (n=940)	27.3%	35.9%	24.5%	12.3%	23.6%	39.6%	19.7%	17.0%	
	Total (n=1,465)	28.1%	37.5%	22.5%	11.8%	24.8%	41.2%	19.0%	15.0%	
	25-44 years (n=143)	28.4%	34.8%	26.9%	9.9%	18.8%	43.5%	22.4%	15.3%	
2.00	45-64 years (n=662)	23.4%	36.7%	24.4%	15.6%	23.0%	30.6%	26.1%	20.3%	
age	65 years and over (n=616)	33.0%	39.1%	18.6%	9.3%	26.6%	42.2%	17.3%	13.9%	
	Total (n=1,441)	28.2%	37.8%	22.4%	11.6%	25.0%	41.1%	19.1%	14.8%	
	less than \$30k (n=181)	30.0%	32.9%	27.6%	9.5%	34.2%	42.0%	9.7%	14.2%	
	\$30-70k (n=372)	29.3%	34.3%	28.1%	8.4%	21.4%	49.2%	18.1%	11.2%	
household income	\$70-100k (n=207)	18.1%	48.1%	19.1%	14.7%	29.3%	44.6%	16.2%	9.9%	
Income	\$100k and over (n=337)	29.5%	35.9%	20.5%	14.1%	17.9%	32.2%	25.9%	24.1%	
	Total (n=1,097)	27.4%	37.3%	23.4%	11.9%	23.8%	42.0%	18.9%	15.3%	
knowledge of	bilingual (n=1,150)	27.2%	38.3%	23.3%	11.2%					
English and	unilingual English (n=314)	32.8%	33.9%	18.9%	14.4%					
French	Total (n=1,464)	28.1%	37.6%	22.6%	11.8%					

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those referred to a medical specialist for follow up (Q15): Q16B. How would you describe this wait time for the appointment with a medical specialist?

With respect to income, those who had been referred to a medical specialist who earned \$70-100k were the most likely to report the wait time for an appointment with the specialist as "very poor" (14.7%) while those earning \$30-70k were the least likely (8.4%).

English-speakers who had been referred to a medical specialist who were unilingual English were more likely to report the wait time for an appointment with the specialist as "very poor" (14.4%) than their bilingual counterparts (11.2%).

5 Medical Procedure

5.1.1 Underwent Medical Procedure in Previous Year

	English S	Speakers	French Speakers		
Region	Yes	No	Yes	No	
031 Capitale-Nationale (n=202)	21.5%	78.5%	15.0%	85.0%	
051 Estrie – CHU de Sherbrooke (n=106)	39.1%	60.9%	23.3%	76.7%	
061 Ouest-de-l'Île-de-Montréal (n=484)	26.3%	73.7%	17.4%	82.6%	
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	23.5%	76.5%	26.8%	73.2%	
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	26.1%	73.9%	23.9%	76.1%	
064 Nord-de-l'Île-de-Montréal (n=251)	28.4%	71.6%	23.9%	76.1%	
065 Est-de-l'Île-de-Montréal (n=215)	16.2%	83.8%	17.1%	82.9%	
071 Outaouais (n=200)	36.4%	63.6%	47.9%	52.1%	
111 Gaspésie (n=75)	19.8%	80.2%	-	-	
131 Laval (n=257)	28.5%	71.5%	21.4%	78.6%	
141 Lanaudière (n=75)	24.1%	75.9%	23.3%	76.7%	
151 Laurentides (n=110)	18.5%	81.5%	28.7%	71.3%	
161 Montérégie-Centre (n=150)	20.7%	79.3%	37.6%	62.4%	
162 Montérégie-Est (n=77)	17.2%	82.8%	21.2%	78.8%	
163 Montérégie-Ouest (n=240)	29.8%	70.2%	21.1%	78.9%	
Total (n=3,133)	25.9%	74.1%	24.1%	75.9%	

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q17. Within the last twelve months, have you or another person you helped undergone a medical procedure in a hospital?

Among English speakers, 25.9% reported they or someone they helped underwent a medical procedure in a hospital within the previous year. This was higher than the proportion reported for French speakers (24.1%).

We observe that English-speakers in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (39.1%), RTS de l'Outaouais (36.4%) and RTS de la Montérégie-Ouest (29.8%) were the most likely to report they or someone they helped underwent a medical procedure in a hospital within the previous year.

English speakers in the regions of RTS de l'Est-de-l'Île-de-Montréal (16.2%), RTS de la Montérégie-Est (17.2%) and RTS des Laurentides (18.5%) were the least likely to report they or someone they helped underwent a medical procedure in a hospital within the previous year.

Underwent a Medical Procedure in a Hospital in the Previous Year

		English S	Speakers	French Speakers		
	Variable		No	Yes	No	
	Male	23.5%	76.5%	22.4%	77.6%	
gender	Female	28.4%	71.6%	25.7%	74.3%	
	Total	25.9%	74.1%	24.1%	75.9%	
	18-24 ye a rs	9.5%	90.5%	33.3%	66.7%	
	25-44 years	25.4%	74.6%	24.3%	75.7%	
age	45-64 years	29.3%	70.7%	20.1%	79.9%	
	65 years and over	32.0%	68.0%	23.4%	76.6%	
	Total	26.0%	74.0%	24.2%	75.8%	
	less than \$30k	29.1%	70.9%	28.5%	71.5%	
ĺ	\$30-70k	25.6%	74.4%	22.0%	78.0%	
household income	\$70-100k	21.7%	78.3%	23.6%	76.4%	
meonie	\$100k and over	29.0%	71.0%	27.5%	72.5%	
	Total	26.5%	73.5%	25.0%	75.0%	
knowledge of	bilingual	25.4%	74.6%			
English and	unilingual English	28.1%	71.9%			
French	Total	25.9%	74.1%			

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q17. Within the last twelve months, have you or another person you helped undergone a medical procedure in a hospital?

English-speaking females were more likely to report they or someone they helped underwent a medical procedure in a hospital within the previous year (28.4%) than were their male counterparts (23.5%).

Across age groups, English speakers who were aged 65 years and over were the most likely to report they or someone they helped underwent a medical procedure in a hospital within the previous year (32.0%) while those aged 18-24 years were the least likely (9.5%).

With respect to income, those who earned less than \$30k were the most likely to report they or someone they helped underwent a medical procedure in a hospital within the previous year (29.1%) while those earning \$70-100k were the least likely (21.7%).

English-speakers who were unilingual English were more likely to report they or someone they helped underwent a medical procedure in a hospital within the previous year (28.1%) than their bilingual counterparts (25.4%).

5.1.2 Wait Time for Medical Procedure

Among English speakers who underwent a medical procedure in a hospital, 13.4% reported waiting over five months to have the medical procedure. This was much lower than the proportion reported for French speakers (17.6%).

We observe that English-speakers who underwent a medical procedure in a hospital in the regions of RTS de Laval (24.3%), RTS du Centre-Sud-de-l'Île-de-Montréal (20.6%) and RTS de la Montérégie-Est (20.4%) were the most likely to report waiting over five months to have the medical procedure.

English speakers who underwent a medical procedure in a hospital in the regions of RTS de la Gaspésie (1.9%), RTS des Laurentides (4.6%) and RTS du Centre-Ouest-de-l'Île-de-Montréal (8.1%) were the least likely to report waiting over five months to have the medical procedure.

Wait Time for Medical Procedure Among Anglophones

Region	Up to 1 month	1 month to 6 weeks	More than 6 weeks but no more than 3 months	More than 3 months but no more than 5 months	More than 5 months
031 Capitale-Nationale (n=53)	36.2%	18.5%	23.6%	12.7%	9.1%
061 Ouest-de-l'Île-de-Montréal (n=140)	42.5%	14.3%	23.3%	8.9%	11.1%
062 Centre-Ouest-de-l'Île-de-Montréal (n=117)	36.5%	29.9%	12.1%	13.4%	8.1%
063 Centre-Sud-de-l'Île-de-Montréal (n=71)	44.8%	9.9%	11.4%	13.3%	20.6%
064 Nord-de-l'Île-de-Montréal (n=71)	53.0%	11.6%	17.6%	7.6%	10.2%
065 Est-de-l'Île-de-Montréal (n=49)	37.0%	11.3%	31.5%	7.5%	12.8%
071 Outaouais (n=68)	49.6%	18.1%	10.2%	5.8%	16.3%
131 Laval (n=72)	38.8%	20.3%	10.6%	6.1%	24.3%
151 Laurentides (n=34)	69.0%	13.1%	10.1%	3.3%	4.6%
161 Montérégie-Centre (n=42)	31.2%	18.8%	28.4%	4.8%	16.8%
163 Montérégie-Ouest (n=71)	58.6%	4.5%	16.1%	8.0%	12.9%
Total (n=872)	45.8%	16.1%	15.8%	9.0%	13.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who had undergone a medical procedure within the previous year (Q17): Q18A. Thinking of the last medical procedure... From the time you were told you or the person you helped needed a medical procedure to the time of the procedure, how long did you wait?

English-speaking females who underwent a medical procedure in a hospital were more likely to report waiting over five months to have the medical procedure (17.4%) than were their male counterparts (8.6%).

Across age groups, English speakers who underwent a medical procedure in a hospital who were aged 25-44 years were the most likely to report waiting over five months to have the medical procedure (15.7%) while those aged 18-24 years were the least likely (0.0%).

With respect to income, those who underwent a medical procedure in a hospital who earned \$30-70k were the most likely to report waiting over five months to have the medical procedure (14.3%) while those earning less than \$30k were the least likely (9.6%).

English-speakers who underwent a medical procedure in a hospital who were unilingual English were more likely to report waiting over five months to have the medical procedure (16.3%) than their bilingual counterparts (12.6%).

Wait Time for Medical Procedure Among Anglophones

	Variable	Up to 1 month	1 month to 6 weeks	More than 6 weeks but no more than 3 months	More than 3 months but no more than 5 months	More than 5 months
	Male (n=317)	49.6%	18.4%	17.1%	6.4%	8.6%
gender	Female (n=555)	42.6%	14.2%	14.6%	11.1%	17.4%
	Total (n=872)	45.8%	16.1%	15.8%	9.0%	13.4%
	25-44 years (n=82)	49.3%	18.2%	8.9%	7.8%	15.7%
2.50	45-64 years (n=387)	40.1%	15.0%	21.3%	9.5%	14.2%
age	65 years and over (n=384)	46.8%	17.2%	14.9%	11.5%	9.5%
	Total (n=861)	46.1%	16.0%	16.0%	9.0%	12.9%
	less than \$30k (n=109)	52.0%	19.5%	10.8%	8.2%	9.6%
	\$30-70k (n=228)	44.3%	16.6%	15.0%	9.9%	14.3%
household	\$70-100k (n=116)	40.1%	16.5%	20.7%	10.4%	12.2%
meome	\$100k and over (n=199)	45.8%	14.7%	18.3%	8.8%	12.4%
'	Total (n=652)	45.3%	16.3%	16.5%	9.3%	12.6%
knowledge of	bilingual (n=674)	44.0%	17.3%	16.5%	9.6%	12.6%
English and	unilingual English (n=196)	52.4%	11.8%	13.1%	6.4%	16.3%
French	Total (n=870)	45.8%	16.1%	15.8%	8.9%	13.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who had undergone a medical procedure within the previous year (Q17): Q18A. Thinking of the last medical procedure... From the time you were told you or the person you helped needed a medical procedure to the time of the procedure, how long did you wait?

Wait Time for Medical Procedure Among Francophones

Variable		Up to 1 month	1 month to 6 weeks	More than 6 weeks but no more than 3 months	More than 3 months but no more than 5 months	More than 5 months
	Male (n=85)	48.3%	11.6%	12.6%	14.4%	13.1%
gender	Female (n=148)	44.9%	11.8%	10.6%	11.4%	21.3%
	Total (n=233)	46.4%	11.7%	11.5%	12.7%	17.6%
	25-44 years (n=48)	41.5%	10.6%	13.8%	15.7%	18.3%
2.00	45-64 years (n=33)	40.6%	11.7%	6.1%	13.3%	28.1%
age	65 years and over (n=144)	50.8%	13.0%	11.9%	8.3%	15.9%
	Total (n=233)	46.4%	11.7%	11.5%	12.7%	17.6%
	less than \$30k (n=36)	58.0%	6.2%	4.5%	5.7%	25.5%
	\$30-70k (n=65)	44.7%	14.5%	6.2%	14.7%	19.8%
household income	\$70-100k (n=40)	61.4%	7.1%	11.7%	7.5%	12.3%
moonic	\$100k and over (n=63)	34.8%	16.9%	20.5%	9.7%	18.1%
	Total (n=204)	46.7%	12.5%	12.0%	10.1%	18.6%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who had undergone a medical procedure within the previous year (Q17): Q18A. Thinking of the last medical procedure... From the time you were told you or the person you helped needed a medical procedure to the time of the procedure, how long did you wait?

5.1.3 Attitude to Wait Time for Medical Procedure

Attitude Toward Wait Time for Medical Procedure

	English Speakers						
Region	Very good	Good	Poor	Very poor			
031 Capitale-Nationale (n=59)	41.0%	39.1%	17.1%	2.8%			
061 Ouest-de-l'Île-de-Montréal (n=142)	26.9%	50.2%	15.9%	7.1%			
062 Centre-Ouest-de-l'Île-de-Montréal (n=126)	35.7%	28.8%	23.2%	12.4%			
063 Centre-Sud-de-l'Île-de-Montréal (n=75)	18.5%	52.6%	18.7%	10.2%			
064 Nord-de-l'Île-de-Montréal (n=72)	23.5%	51.1%	11.3%	14.0%			
065 Est-de-l'Île-de-Montréal (n=49)	39.0%	45.4%	3.7%	11.9%			
071 Outaouais (n=70)	51.7%	25.9%	14.4%	8.0%			
131 Laval (n=74)	30.7%	39.2%	16.6%	13.5%			
151 Laurentides (n=35)	52.6%	32.8%	3.8%	10.8%			
161 Montérégie-Centre (n=45)	21.5%	54.4%	21.1%	2.9%			
163 Montérégie-Ouest (n=72)	31.9%	50.2%	7.5%	10.3%			
Total (n=901)	32.2%	42.5%	15.2%	10.1%			

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who had undergone a medical procedure within the previous year (Q17): Q18B. How would you describe this wait time for the procedure?

Among English speakers who underwent a medical procedure in a hospital, 10.1% reported the wait time as "very poor". This was lower than the proportion reported for French speakers (10.8%).

We observe that English-speakers who underwent a medical procedure in a hospital in the regions of RTS de Lanaudière (17.2%), RTS du Nord-de-l'Île-de-Montréal (14.0%) and RTS de Laval (13.5%) were the most likely to report the wait time as "very poor".

English speakers who underwent a medical procedure in a hospital in the regions of RTS de la Gaspésie (1.9%), RTS de la Capitale-Nationale (2.8%) and RTS de la Montérégie-Centre (2.9%) were the least likely to report the wait time as "very poor".

English-speaking males who underwent a medical procedure in a hospital were more likely to report the wait time as "very poor" (11.8%) than were their female counterparts (8.8%).

Across age groups, among English speakers who underwent a medical procedure in a hospital, those who were aged 45-64 years were the most likely to report the wait time as "very poor" (12.7%) while those aged 18-24 years were the least likely (0.0%).

With respect to income, among those who underwent a medical procedure in a hospital, those who earned \$70-100k were the most likely to report the wait time as

Attitude Toward Wait Time for Medical Procedure

			English S	peakers		French Speakers			
	Variable	Very good	Good	Poor	Very poor	Very good	Good	Poor	Very poor
	Male (n=329)	32.3%	42.5%	13.3%	11.8%	41.3%	31.6%	16.1%	11.1%
gender	Female (n=572)	32.0%	42.5%	16.7%	8.8%	38.8%	33.7%	17.0%	10.5%
	Total (n=901)	32.2%	42.5%	15.2%	10.1%	39.9%	32.8%	16.6%	10.8%
	25-44 years (n=87)	27.5%	45.7%	17.0%	9.8%	34.9%	30.4%	23.3%	11.4%
2.50	45-64 years (n=395)	31.6%	38.6%	17.1%	12.7%	38.5%	28.6%	19.3%	13.6%
age	65 years and over (n=400)	39.3%	42.1%	11.7%	7.0%	44.5%	34.2%	12.3%	9.1%
	Total (n=890)	32.4%	42.6%	15.2%	9.8%	39.9%	32.8%	16.6%	10.8%
	less than \$30k (n=119)	25.6%	56.2%	8.5%	9.7%	30.9%	39.3%	16.4%	13.4%
l	\$30-70k (n=236)	35.0%	39.7%	14.2%	11.1%	37.3%	22.4%	28.3%	12.0%
household	\$70-100k (n=122)	24.3%	54.2%	9.1%	12.4%	72.3%	10.7%	8.9%	8.1%
Income	\$100k and over (n=201)	38.0%	29.5%	23.0%	9.4%	30.4%	45.5%	11.3%	12.8%
	Total (n=678)	32.9%	41.0%	15.7%	10.5%	40.5%	31.1%	16.6%	11.8%
knowledge of	bilingual (n=690)	33.7%	41.5%	15.4%	9.4%				
English and	unilingual English (n=209)	26.4%	46.1%	14.7%	12.8%				
French	Total (n=899)	32.1%	42.5%	15.2%	10.1%				

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who had undergone a medical procedure within the previous year (Q17): Q18B. How would you describe this wait time for the procedure?

"very poor" (12.4%) while those earning \$100k and over were the least likely (9.4%).

English-speakers who underwent a medical procedure in a hospital who were unilingual English were more likely to report the wait time as "very poor" (12.8%) than their bilingual counterparts (9.4%).

5.1.4 Wait Times Had Negative Impact on Treatment and Recovery

Among English speakers who underwent a medical procedure in a hospital, 14.6% strongly agree that the wait time had a negative impact on the treatment and recovery. This was similar to the proportion reported for French speakers (14.1%).

We observe that English-speakers who underwent a medical procedure in a hospital in the regions of RTS de Lanaudière (40.9%), RTS de la Gaspésie (36.6%) and RTS du Centre-Sud-de-l'Île-de-Montréal (31.7%) were the most likely to strongly agree that the wait time had a negative impact on the treatment and recovery.

English speakers who underwent a medical procedure in a hospital in the regions of RTS de la Capitale-Nationale (7.1%), RTS des Laurentides (8.4%) and RTS de l'Ouest-de-l'Île-de-Montréal (9.3%) were the least likely to strongly agree that the wait time had a negative impact on the treatment and recovery.

Felt Wait Time for Medical Procedure had a Negative Impact on Treatment and Recovery

	English Speakers						
Region	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree			
031 Capitale-Nationale (n=55)	7.1%	19.5%	31.4%	42.0%			
061 Ouest-de-l'Île-de-Montréal (n=137)	9.3%	20.2%	36.6%	33.8%			
062 Centre-Ouest-de-l'Île-de-Montréal (n=125)	16.6%	22.3%	23.7%	37.3%			
063 Centre-Sud-de-l'Île-de-Montréal (n=74)	31.7%	11.2%	15.4%	41.7%			
064 Nord-de-l'Île-de-Montréal (n=71)	12.1%	12.5%	32.1%	43.3%			
065 Est-de-l'Île-de-Montréal (n=49)	22.9%	28.3%	19.0%	29.8%			
071 Outaouais (n=66)	10.9%	15.7%	22.2%	51.2%			
131 Laval (n=73)	9.9%	23.9%	35.1%	31.1%			
151 Laurentides (n=33)	8.4%	7.6%	45.2%	38.8%			
161 Montérégie-Centre (n=45)	9.4%	38.4%	17.9%	34.3%			
163 Montérégie-Ouest (n=72)	11.7%	29.1%	19.1%	40.1%			
Total (n=884)	14.6%	19.9%	25.8%	39.7%			

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who had undergone a medical procedure within the previous year (Q17): Q18C. Do you agree or disagree with the following statement: This wait time for the medical procedure had a negative impact on the treatment and recovery.

English-speaking females who underwent a medical procedure in a hospital were more likely to strongly agree that the wait time had a negative impact on the treatment and recovery (17.1%) than were their male counterparts (11.7%).

Across age groups, English speakers who underwent a medical procedure in a hospital who were aged 45-64 years were the most likely to strongly agree that the wait time had a negative impact on the treatment and recovery (17.1%) while those aged 18-24 years were the least likely (10.6%).

F	elt Wait Time i	for Medical I	Procedure I	had a l	Negative	Impact on	Treatment	and Recover	У

			English S	peakers		French Speakers			
	Variable	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree
	Male (n=327)	11.7%	15.4%	25.5%	47.5%	20.0%	8.1%	31.3%	40.6%
gender	Female (n=557)	17.1%	23.6%	26.1%	33.1%	9.3%	13.0%	37.1%	40.5%
	Total (n=884)	14.6%	19.9%	25.8%	39.7%	14.1%	10.8%	34.5%	40.6%
	25-44 years (n=84)	12.0%	16.2%	29.1%	42.6%	15.9%	11.6%	40.3%	32.3%
0.50	45-64 years (n=388)	17.1%	19.7%	30.4%	32.8%	16.9%	18.4%	21.9%	42.7%
age	65 years and over (n=393)	13.8%	22.2%	17.7%	46.2%	8.2%	11.7%	35.0%	45.2%
	Total (n=872)	14.2%	19.9%	25.9%	40.0%	14.1%	10.8%	34.5%	40.6%
	less than \$30k (n=117)	15.3%	32.5%	22.8%	29.5%	33.9%	5.9%	27.6%	32.6%
ĺ	\$30-70k (n=223)	22.5%	23.6%	21.6%	32.3%	10.4%	22.8%	30.6%	36.2%
household income	\$70-100k (n=122)	14.3%	17.2%	29.0%	39.5%	2.8%	5.5%	42.2%	49.5%
meonie	\$100k and over (n=198)	11.7%	16.8%	24.8%	46.7%	16.2%	4.9%	42.6%	36.2%
ĺ	Total (n=660)	15.9%	21.4%	24.2%	38.4%	15.0%	10.3%	36.5%	38.2%
knowledge of	bilingual (n=683)	12.3%	18.9%	24.9%	44.0%				
English and	unilingual English (n=200)	23.8%	23.6%	29.4%	23.3%				
French	Total (n=883)	14.6%	19.9%	25.8%	39.7%				

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who had undergone a medical procedure within the previous year (Q17): Q18C. Do you agree or disagree with the following statement: This wait time for the medical procedure had a negative impact on the treatment and recovery.

With respect to income, those who underwent a medical procedure in a hospital who earned \$30-70k were the most likely to strongly agree that the wait time had a negative impact on the treatment and recovery (22.5%) while those earning \$100k and over were the least likely (11.7%).

English-speakers who underwent a medical procedure in a hospital who were unilingual English were more likely to strongly agree that the wait time had a negative impact on the treatment and recovery (23.8%) than their bilingual counterparts (12.3%).

6 Medical Procedure Follow Up

6.1.1 Required Patient Follow Up

Among English speakers who underwent a medical procedure in a hospital, 80.8% required a patient follow up. This was similar to the proportion reported for French speakers (82.7%).

We observe that English-speakers who underwent a medical procedure in a hospital in the regions of RTS de l'Est-de-l'Île-de-Montréal (93.0%), RTS de Laval (92.3%) and RTS du Centre-Sud-de-l'Île-de-Montréal (88.0%) were the most likely to require a patient follow up.

English speakers who underwent a medical procedure in a hospital in the regions of RTS de la Gaspésie (58.4%), RTS du Nord-de-l'Île-de-Montréal (65.7%) and RTS du Centre-Ouest-de-l'Île-de-Montréal (72.5%) were the least likely to require a patient follow up.

Required Patient Follow Up After Medical Procedure

	English S	peakers
Region	Yes	No
031 Capitale-Nationale (n=57)	75.1%	24.9%
061 Ouest-de-l'Île-de-Montréal (n=144)	79.9%	20.1%
062 Centre-Ouest-de-l'Île-de-Montréal (n=128)	72.5%	27.5%
063 Centre-Sud-de-l'Île-de-Montréal (n=77)	88.0%	12.0%
064 Nord-de-l'Île-de-Montréal (n=73)	65.7%	34.3%
065 Est-de-l'Île-de-Montréal (n=50)	93.0%	7.0%
071 Outaouais (n=68)	86.5%	13.5%
131 Laval (n=73)	92.3%	7.7%
151 Laurentides (n=35)	80.4%	19.6%
161 Montérégie-Centre (n=43)	74.4%	25.6%
163 Montérégie-Ouest (n=75)	85.1%	14.9%
Total (n=909)	80.8%	19.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who had undergone a medical procedure within the previous year (Q17): Q19. After the medical procedure was there a requirement for patient follow up? NOTE: we are referring to the medical procedure mentioned in the previous question

English-speaking females who underwent a medical procedure in a hospital were more likely to require a patient follow up (86.2%) than were their male counterparts (74.5%).

Across age groups, English speakers who underwent a medical procedure in a hospital who were aged 65 years and over were the most likely to require a patient follow up (83.4%).

With respect to income, those who underwent a medical procedure in a hospital who earned less than \$30k were the most likely to require a patient follow up (89.7%) while those earning \$100k and over were the least likely (75.2%).

English-speakers who underwent a medical procedure in a hospital who were unilingual English were more likely to require a patient follow up (81.1%) than their bilingual counterparts (80.8%).

Variable		English S	peakers	French Speakers		
		Yes	No	Yes	No	
	Male (n=335)	74.5%	25.5%	81.0%	19.0%	
gender	Female (n=574)	86.2%	13.8%	84.0%	16.0%	
	Total (n=909)	80.8%	19.2%	82.7%	17.3%	
	25-44 years (n=87)	80.1%	19.9%	83.4%	16.6%	
	45-64 years (n=398)	81.5%	18.5%	83.4%	16.6%	
age	65 years and over (n=403)	83.4%	16.6%	83.2%	16.8%	
	Total (n=896)	81.1%	18.9%	82.7%	17.3%	
	less than \$30k (n=115)	89.7%	10.3%	85.4%	14.6%	
	\$30-70k (n=237)	84.6%	15.4%	78.6%	21.4%	
household income	\$70-100k (n=122)	83.4%	16.6%	81.0%	19.0%	
meome	\$100k and over (n=204)	75.2%	24.8%	81.8%	18.2%	
	Total (n=678)	81.7%	18.3%	81.4%	18.6%	
knowledge of	bilingual (n=700)	80.8%	19.2%			
English and	unilingual English (n=207)	81.1%	18.9%			
French	Total (n=907)	80.8%	19.2%			

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who had undergone a medical procedure within the previous year (Q17): Q19. After the medical procedure was there a requirement for patient follow up? NOTE: we are referring to the medical procedure mentioned in the previous question

6.1.2 Location of Patient Follow Up

Among English speakers who required a patient follow up after a medical procedure in a hospital, 74.1% did so through a hospital outpatient clinic. This was higher than the proportion reported for French speakers (64.6%).

We observe that English-speakers who required a patient follow up after a medical procedure in a hospital in the regions of RTS de la Montérégie-Est (98.5%), RTS des Laurentides (93.1%) and RTS du Nord-de-l'Île-de-Montréal (89.5%) were the most likely to have done so through a hospital outpatient clinic.

Location of Patient Follow	Jp After Medical Procedure	Among Anglophones
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Region	at home	through a hospital outpatient clinic	at a CLSC	at another public institution	Doctor's office	Other, specify
031 Capitale-Nationale (n=44)	6.3%	69.6%	8.3%	8.7%	11.8%	ı
061 Ouest-de-l'Île-de-Montréal (n=116)	3.3%	60.7%	6.8%	23.1%	8.7%	1.7%
062 Centre-Ouest-de-l'Île-de-Montréal (n=105)	5.3%	65.3%	8.9%	21.4%	4.5%	0.9%
063 Centre-Sud-de-l'Île-de-Montréal (n=60)	2.1%	87.5%	4.2%	4.0%	6.1%	0.5%
064 Nord-de-l'Île-de-Montréal (n=57)	3.8%	89.5%	1.8%	3.5%	3.0%	-
065 Est-de-l'Île-de-Montréal (n=47)	-	85.6%	5.1%	6.3%	3.8%	6.2%
071 Outaouais (n=54)	9.5%	78.3%	4.9%	6.1%	3.0%	-
131 Laval (n=63)	27.2%	66.0%	2.7%	2.9%	5.4%	-
161 Montérégie-Centre (n=32)	8.8%	84.1%	8.2%	6.4%	5.0%	=
163 Montérégie-Ouest (n=63)	9.2%	70.4%	24.1%	8.4%	8.1%	-
Total (n=738)	7.7%	74.1%	7.9%	10.9%	5.4%	0.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required a patient follow up after their medical procedure (Q19): Q20A. Was the follow up ... MULTIPLE ANSWERS POSSIBLE

English speakers who required a patient follow up after a medical procedure in a hospital in the regions of RTS de la Gaspésie (44.7%), RTS de l'Ouest-de-l'Île-de-Montréal (60.7%) and RTS du Centre-Ouest-de-l'Île-de-Montréal (65.3%) were the least likely to have done so through a hospital outpatient clinic.

English-speaking males who required a patient follow up after a medical procedure in a hospital were more likely to have done so through a hospital outpatient clinic (76.7%) than were their female counterparts (72.3%).

Across age groups, English speakers who required a patient follow up after a medical procedure in a hospital who were aged 45-64 years were the most likely to have done so through a hospital outpatient clinic (79.0%) while those aged 18-24 years were the least likely (24.4%).

With respect to income, those who required a patient follow up after a medical procedure in a hospital who earned \$100k and over were the most likely to have done so through a hospital outpatient clinic (79.7%) while those earning less than \$30k were the least likely (62.3%).

Location of Patient Follow Up After Medical Procedure Among Anglophones

	Variable	at home	through a hospital outpatient clinic	at a CLSC	at another public institution	Doctor's office	Other, specify
	Male (n=260)	5.9%	76.7%	4.9%	8.2%	5.5%	1.3%
gender	Female (n=478)	9.0%	72.3%	10.1%	12.8%	5.4%	0.5%
	Total (n=738)	7.7%	74.1%	7.9%	10.9%	5.4%	0.8%
	25-44 years (n=66)	11.5%	73.1%	7.3%	10.1%	3.5%	ı
2.50	45-64 years (n=327)	4.7%	79.0%	8.1%	8.9%	5.8%	1.5%
age	65 years and over (n=328) 6.2% 76.3% 10.1% 6.1% 8.6%	8.6%	0.9%				
	Total (n=727)	7.8%	74.1%	8.0%	10.8%	5.4%	0.8%
	less than \$30k (n=93)	3.2%	62.3%	6.7%	19.7%	2.4%	-
l	\$30-70k (n=193)	15.9%	73.5%	6.9%	3.0%	4.3%	0.7%
household income	\$70-100k (n=102)	1.2%	79.6%	5.0%	8.4%	10.4%	-
meonie	\$100k and over (n=159)	6.8%	79.7%	11.2%	8.2%	7.0%	1.5%
	Total (n=547)	8.2%	74.7%	8.0%	8.6%	5.9%	0.7%
knowledge of	bilingual (n=573)	8.2%	73.6%	8.4%	10.7%	6.0%	1.0%
English and	unilingual English (n=163)	5.8%	76.3%	6.0%	11.1%	3.2%	0.2%
French	Total (n=736)	7.7%	74.2%	7.9%	10.8%	5.4%	0.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required a patient follow up after their medical procedure (Q19): Q20A. Was the follow up ... MULTIPLE ANSWERS POSSIBLE

English-speakers who required a patient follow up after a medical procedure in a hospital who were unilingual English were more likely to have done so through a hospital outpatient clinic (76.3%) than their bilingual counterparts (73.6%).

Location of Patient Follow Up After Medical Procedure Among Francophones

	Variable	at home	through a hospital outpatient clinic	at a CLSC	at another public institution	Doctor's office	Other, specify
	Male (n=68)	5.2%	58.2%	17.0%	16.0%	-	3.6%
gender	Female (n=127)	7.5%	69.5%	8.2%	8.4%	-	6.3%
Total (r	Total (n=195)	6.5%	64.6%	12.1%	11.7%	-	5.1%
	25-44 years (n=41)	8.6%	68.5%	8.1%	11.3%	=	3.5%
age	65 years and over (n=122)	6.6%	65.7%	5.6%	14.0%	=	8.1%
	Total (n=195)	6.5%	64.6%	12.1%	11.7%	-	5.1%
	\$30-70k (n=53)	10.9%	67.3%	8.2%	6.5%	-	7.2%
household	\$70-100k (n=33)	7.8%	45.7%	38.1%	8.5%	-	-
income	\$100k and over (n=56)	-	77.1%	6.9%	15.3%	-	0.6%
	Total (n=171)	7.0%	65.0%	13.2%	11.9%	=	2.9%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required a patient follow up after their medical procedure (Q19): Q20A. Was the follow up ... MULTIPLE ANSWERS POSSIBLE

6.1.3 Wait Time for Patient Follow Up

Among English speakers who required a patient follow up after a medical procedure in a hospital, 5.9% waited four months or longer for the appointment. This was much higher than the proportion reported for French speakers (3.1%).

We observe that English-speakers who required a patient follow up after a medical procedure in a hospital in the regions of RTS de la Montérégie-Centre (24.5%), RTS de la Montérégie-Est (23.2%) and RTS du Nord-de-l'Île-de-Montréal (7.4%) were the most likely to wait four months or longer for the appointment.

There were multiple regions where no English speakers waited four months or longer for the appointment

Wait Time for Patient Follow Up After Medical Procedure

		English S	peakers	
Region	Less than 2 weeks	2 weeks to less than a month	1 month to less than 4 months	4 months or more
031 Capitale-Nationale (n=39)	23.7%	24.2%	47.2%	4.9%
061 Ouest-de-l'Île-de-Montréal (n=114)	29.9%	37.5%	27.2%	5.3%
062 Centre-Ouest-de-l'Île-de-Montréal (n=99)	28.2%	34.2%	30.7%	6.9%
063 Centre-Sud-de-l'Île-de-Montréal (n=58)	15.9%	57.8%	21.9%	4.4%
064 Nord-de-l'Île-de-Montréal (n=54)	17.8%	39.8%	35.0%	7.4%
065 Est-de-l'Île-de-Montréal (n=47)	29.9%	29.0%	38.1%	2.9%
071 Outaouais (n=52)	68.8%	15.9%	8.6%	6.7%
131 Laval (n=62)	47.5%	13.4%	33.8%	5.4%
161 Montérégie-Centre (n=32)	17.8%	43.0%	14.8%	24.5%
163 Montérégie-Ouest (n=61)	55.4%	22.5%	18.8%	3.3%
Total (n=710)	34.5%	31.3%	28.2%	5.9%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who required a patient follow up after their medical procedure (Q19): Q20B. From the time you were told you or the person you helped needed a follow up to the time of the appointment, how long did you wait?

English-speaking females who required a patient follow up after a medical procedure in a hospital were more likely to wait four months or longer for the appointment (6.0%) than were their male counterparts (5.7%).

Across age groups, English speakers who required a patient follow up after a medical procedure in a hospital who were aged 45-64 years were the most likely to wait four months or longer

Wait Time for Patient Follow Up After Medical Procedu	ıre

			English S	peakers			French S	peakers	
	Variable	Less than 2 weeks		1 month to less than 4 months	4 months or more	Less than 2 weeks		1 month to less than 4 months	4 months or more
	Male (n=247)	35.0%	30.8%	28.5%	5.7%	46.7%	37.8%	14.3%	1.2%
gender	Female (n=463)	34.2%	31.7%	28.0%	6.0%	41.0%	27.2%	27.1%	4.7%
	Total (n=710)	34.5%	31.3%	28.2%	5.9%	43.5%	32.0%	21.4%	3.1%
	25-44 years (n=64)	35.8%	29.6%	28.4%	6.3%	34.7%	36.5%	26.0%	2.8%
2.50	45-64 years (n=320)	31.0%	33.6%	28.7%	6.7%	31.8%	41.1%	23.3%	3.9%
age	65 years and over (n=310)	36.7%	31.9%	26.4%	5.0%	52.7%	23.5%	19.5%	4.4%
age 6	Total (n=700)	34.4%	31.6%	28.1%	5.9%	43.5%	32.0%	21.4%	3.1%
	less than \$30k (n=90)	32.1%	33.7%	32.0%	2.1%	39.4%	39.7%	18.5%	2.4%
	\$30-70k (n=188)	33.6%	32.2%	25.7%	8.4%	45.6%	28.7%	22.3%	3.4%
	\$70-100k (n=98)	27.3%	40.9%	25.8%	6.0%	63.5%	25.3%	8.4%	2.7%
meome	\$100k and over (n=156)	48.2%	18.4%	25.1%	8.3%	33.9%	30.8%	30.7%	4.6%
	Total (n=532)	37.5%	29.0%	26.6%	6.9%	43.8%	30.8%	21.9%	3.5%
knowledge of	bilingual (n=550)	35.2%	32.0%	26.7%	6.1%				
household \$7 income \$1 To knowledge of English and Errosch	unilingual English (n=158)	31.7%	29.0%	34.1%	5.2%				
French	Total (n=708)	34.5%	31.4%	28.3%	5.9%				

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required a patient follow up after their medical procedure (Q19): Q20B. From the time you were told you or the person you helped needed a follow up to the time of the appointment, how long did you wait?

for the appointment (6.7%).

With respect to income, those who required a patient follow up after a medical procedure in a hospital who earned \$30-70k were the most likely to wait four months or longer for the appointment (8.4%) while those earning less than \$30k were the least likely (2.1%).

English-speakers who required a patient follow up after a medical procedure in a hospital who were bilingual were more likely to wait four months or longer for the appointment (6.1%) than their unilingual English counterparts (5.2%).

6.1.4 Attitude to Wait Time for Patient Follow Up

065 Est-de-l'Île-de-Montréal (n=46)

161 Montérégie-Centre (n=31)

163 Montérégie-Ouest (n=60)

071 Outaouais (n=53)

131 Laval (n=62)

Total (n=714)

Attitude to the		· delette · e		reci ivicuio	ar i roccuu.					
		English S	Speakers		French Speakers					
Region	Very good	Good	Poor	Very poor	Very good	Good	Poor	Very poor		
031 Capitale-Nationale (n=43)	30.0%	61.2%	5.9%	2.9%	64.1%	35.9%	-	-		
061 Ouest-de-l'Île-de-Montréal (n=114)	35.6%	46.4%	13.1%	4.9%	59.7%	40.3%	-	-		
062 Centre-Ouest-de-l'Île-de-Montréal (n=101)	35.5%	37.6%	23.5%	3.4%	38.9%	34.1%	27.0%	-		
063 Centre-Sud-de-l'Île-de-Montréal (n=58)	44.6%	44.9%	6.1%	4.5%	51.1%	48.9%	-	-		
064 Nord-de-l'Île-de-Montréal (n=55)	31.4%	50.4%	7.7%	10.5%	38.8%	31.7%	29.5%	-		

22.8%

6.6%

17.2%

37.1%

5.9%

13.1%

5.3%

3.4%

17.9%

2.0%

0.7%

5.5%

43.6%

70.2%

38.2%

18.7%

53.0%

48.0%

46.2%

22.9%

50.3%

79.1%

47.0%

40.9%

10.2%

2.2%

11.5%

2.2%

7.5%

4.7%

3.5%

Attitude to Wait Time for Patient Follow Up After Medical Procedure

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

43.1%

60.3%

34.0%

11.3%

58.9%

40.1%

For those who required a patient follow up after their medical procedure (Q19): Q20C. How would you describe this wait time for the follow up?

28.8%

29.7%

31.0%

49.7%

34.5%

41.4%

Among English speakers who required a patient follow up after a medical procedure in a hospital, 5.5% reported the wait time as "very poor". This was much higher than the proportion reported for French speakers (3.5%).

We observe that English-speakers who required a patient follow up after a medical procedure in a hospital in the regions of RTS de Laval (17.9%), RTS du Nord-de-l'Île-de-Montréal (10.5%) and RTS de l'Est-de-l'Île-de-Montréal (5.3%) were the most likely to report the wait time as "very poor".

English-speaking males and their female counterparts were about as likely to report the wait time as "very poor" (5.5%).

Across age groups, English speakers who required a patient follow up after a medical procedure in a hospital who were aged 25-44 years were the most likely to report the wait time as "very poor" (8.1%) while those aged 18-24 years were the least likely (0.0%).

household

income

knowledge of

English and

French

\$70-100k (n=97)

Total (n=533)

Total (n=712)

bilingual (n=554)

\$100k and over (n=158)

unilingual English (n=158)

With respect to income, those who required a patient follow up after a medical procedure in a hospital who earned \$30-

			English S	Speakers		French Speakers					
Variable		Very good	Good	Poor	Very poor	Very good	Good	Poor	Very poor		
	Male (n=250)	39.4%	42.3%	12.8%	5.5%	44.1%	47.9%	2.6%	5.3%		
gender	Female (n=464)	40.5%	40.7%	13.3%	5.5%	51.2%	35.2%	11.5%	2.1%		
	Total (n=714)	40.1%	41.4%	13.1%	5.5%	48.0%	40.9%	7.5%	3.5%		
	25-44 years (n=65)	41.4%	37.9%	12.5%	8.1%	36.2%	46.7%	15.7%	1.4%		
2.72	45-64 years (n=321)	35.3%	42.1%	18.2%	4.4%	47.1%	52.9%	-	-		
age	65 years and over (n=312)	43.8%	44.5%	7.6%	4.1%	59.9%	31.2%	6.2%	2.7%		
	Total (n=703)	40.0%	41.3%	13.1%	5.5%	48.0%	40.9%	7.5%	3.5%		
	less than \$30k (n=92)	34.7%	50.3%	14.3%	0.7%	31.5%	27.7%	23.8%	17.1%		
	\$30-70k (n=186)	34.5%	38.9%	16.7%	9.9%	50.5%	43.7%	5.8%	-		

Attitude to Wait Time for Patient Follow Un After Medical Procedure

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

38.6%

51.3%

41.1%

40.3%

38.8%

40.0%

For those who required a patient follow up after their medical procedure (Q19): Q20C. How would you describe this wait time for the follow up?

44.0%

29.1%

38.2%

41.3%

41.7%

41.4%

14.6%

13.7%

14.9%

13.9%

10.0%

13.1%

2.8%

5.9%

5.8%

4.4%

9.6%

5.5%

68.8%

39.2%

46.4%

23.9%

56.3%

41.6%

7.2%

2.1%

8.0%

2.4%

4.0%

70k were the most likely to report the wait time as "very poor" (9.9%) while those earning less than \$30k were the least likely (0.7%).

English-speakers who required a patient follow up after a medical procedure in a hospital who were unilingual English were more likely to report the wait time as "very poor" (9.6%) than their bilingual counterparts (4.4%).

7 CLSC Services

7.1.1 Used Services of a CLSC⁵

Used the Services of a CLSC Within the Previous Year (other than Info Santé or Info Social)

	English S	Speakers	French S	peakers
Region	Yes	No	Yes	No
031 Capitale-Nationale (n=202)	47.1%	52.9%	24.2%	75.8%
051 Estrie – CHU de Sherbrooke (n=106)	28.3%	71.7%	29.0%	71.0%
061 Ouest-de-l'Île-de-Montréal (n=484)	22.1%	77.9%	20.2%	79.8%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	38.5%	61.5%	32.6%	67.4%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	31.2%	68.8%	30.3%	69.7%
064 Nord-de-l'Île-de-Montréal (n=251)	27.1%	72.9%	31.6%	68.4%
065 Est-de-l'Île-de-Montréal (n=215)	28.3%	71.7%	36.2%	63.8%
071 Outaouais (n=200)	32.6%	67.4%	34.7%	65.3%
111 Gaspésie (n=75)	41.3%	58.7%	-	-
131 Laval (n=257)	34.7%	65.3%	44.2%	55.8%
141 Lanaudière (n=75)	37.0%	63.0%	43.7%	56.3%
151 Laurentides (n=110)	35.1%	64.9%	25.4%	74.6%
161 Montérégie-Centre (n=150)	37.1%	62.9%	45.5%	54.5%
162 Montérégie-Est (n=77)	45.5%	54.5%	53.4%	46.6%
163 Montérégie-Ouest (n=240)	44.3%	55.7%	48.8%	51.2%
Total (n=3,133)	32.6%	67.4%	36.2%	63.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q21. Within the last twelve months, in your region, have you used the services of a CLSC, other than Info Santé or Info
Social line either for yourself or to help another person?

Among English speakers, 32.6% used the services of a CLSC within the past year. This was lower than the proportion reported for French speakers (36.2%).

We observe that English-speakers in the regions of RTS de la Capitale-Nationale (47.1%), RTS de la Montérégie-Est (45.5%) and RTS de la Montérégie-Ouest (44.3%) were the most likely to have used the services of a CLSC.

English speakers in the regions of RTS de l'Ouest-de-l'Île-de-Montréal (22.1%), RTS du Nord-de-l'Île-de-Montréal (27.1%) and RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (28.3%) were the least likely to have used the services of a CLSC.

Used the Services of a CLSC Within the Previous Year (other than Info Santé or Info Social)

		English S	peakers	French S	peakers
	Variable	Yes	No	Yes	No
	Male	30.5%	69.5%	35.9%	64.1%
gender	Female	34.7%	65.3%	36.5%	63.5%
	Total	32.6%	67.4%	36.2%	63.8%
	18-24 years	15.2%	84.8%	-	-
	25-44 years	34.4%	65.6%	37.3%	62.7%
age	45-64 years	35.3%	64.7%	29.6%	70.4%
	65 years and over	36.2%	63.8%	37.7%	62.3%
	Total	32.7%	67.3%	36.3%	63.7%
	less than \$30k	39.1%	60.9%	41.0%	59.0%
ĺ	\$30-70k	32.0%	68.0%	40.4%	59.6%
household income	\$70-100k	30.3%	69.7%	33.0%	67.0%
meonie	\$100k and over	31.9%	68.1%	32.1%	67.9%
	Total	32.7%	67.3%	36.4%	63.6%
knowledge of	bilingual	31.2%	68.8%		
English and	unilingual English	38.4%	61.6%		
French	Total	32.6%	67.4%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q21. Within the last twelve months, in your region, have you used the services of a CLSC, other than Info Santé or Info Social line either for yourself or to help another person?

English-speaking females were more likely to have used the services of a CLSC (34.7%) than were their male counterparts (30.5%).

Across age groups, English speakers who were aged 65 years and over were the most likely to have used the services of a CLSC (36.2%) while those aged 18-24 years were the least likely (15.2%).

With respect to income, those who earned less than \$30k were the most likely to have used the services of a CLSC (39.1%) while those earning \$70-100k were the least likely (30.3%).

English-speakers who were unilingual English were more likely to have used the services of a CLSC (38.4%) than their bilingual counterparts (31.2%).

⁵ In Quebec City, English-language CLSC Services are organized differently from the rest of the province (www.jhsb). Many who use these services may not recognize they are part of the CLSC system.

7.1.2 Type of CLSC Service Accessed

CLSC Service Accessed Within the Previous Year, Among Anglophones

Region	Homecare	Counseling services or programs for children	services or programs	ŭ	Blood test	Consultation with a doctor	Physical therapy	Vaccination	Consultati on with a nurse	Other
031 Capitale-Nationale (n=69)	3.7%	-	4.6%	1.5%	34.1%	27.3%	-	7.9%	7.4%	14.0%
051 Estrie – CHU de Sherbrooke (n=32)	14.2%	8.9%	-	-	23.8%	16.4%	-	13.3%	18.6%	9.4%
061 Ouest-de-l'Île-de-Montréal (n=124)	8.1%	1.9%	7.4%	3.0%	25.2%	12.3%	1.3%	24.8%	12.0%	4.9%
062 Centre-Ouest-de-l'Île-de-Montréal (n=176)	5.1%	7.3%	8.5%	2.3%	28.1%	16.7%	1.3%	28.9%	6.1%	1.6%
063 Centre-Sud-de-l'Île-de-Montréal (n=79)	5.8%	2.7%	6.5%	1.5%	18.0%	17.7%	2.9%	33.8%	2.3%	9.0%
064 Nord-de-l'Île-de-Montréal (n=72)	2.1%	2.7%	3.5%	1.4%	25.9%	14.7%	11.2%	19.0%	15.1%	4.3%
065 Est-de-l'Île-de-Montréal (n=91)	6.2%	2.2%	-	2.6%	59.4%	8.0%	2.4%	10.6%	5.3%	3.6%
071 Outaouais (n=73)	3.3%	-	7.4%	1.4%	18.2%	32.7%	2.3%	18.3%	13.4%	3.3%
131 Laval (n=101)	5.0%	0.9%	1.4%	2.1%	56.0%	12.9%	0.5%	10.1%	6.9%	4.8%
141 Lanaudière (n=32)	4.2%	-	4.8%	0.5%	15.4%	19.4%	0.9%	48.4%	5.6%	14.1%
151 Laurentides (n=35)	7.7%	1.3%	1.3%	6.0%	20.8%	13.3%	1.7%	1.5%	42.7%	6.2%
161 Montérégie-Centre (n=60)	2.4%	-	2.4%	11.3%	32.0%	17.8%	1.3%	14.0%	2.3%	16.5%
162 Montérégie-Est (n=38)	1.6%	-	10.5%	-	64.6%	4.1%	1.2%	14.0%	4.0%	-
163 Montérégie-Ouest (n=109)	5.3%	4.0%	1.6%	-	50.7%	16.3%	4.6%	4.5%	13.7%	3.0%
Total (n=1,116)	5.4%	3.1%	4.9%	2.4%	34.0%	16.0%	2.5%	18.9%	10.1%	5.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used the services of a CLSC other than Info Santé or Info Social line (Q21): Q22A. Which service did you access? ONE POSSIBLE ANSWER

CLSC Service Accessed Within the Previous Year, Among Francophones

Region	Homecare	Counseling services or programs for children	services or programs	services or	Blood test	Consultation with a doctor	Physical therapy	Vaccination	Consultation with a nurse	Other
065 Est-de-l'Île-de-Montréal (n=31)	8.4%	-	4.2%	-	62.7%	14.1%	-	8.0%	2.5%	2.5%
131 Laval (n=30)	-	10.8%	-	4.8%	56.8%	11.2%	-	3.0%	13.4%	1.6%
141 Lanaudière (n=33)	11.1%	3.8%	3.9%	=	40.2%	26.9%	=	4.5%	9.5%	16.3%
162 Montérégie-Est (n=42)	12.4%	12.0%	-	=	58.6%	14.3%	1.1%	1.7%	-	12.9%
163 Montérégie-Ouest (n=32)	7.7%	-	-	-	49.4%	23.6%	-	9.8%	9.5%	5.9%
Total (n=361)	7.1%	6.8%	2.8%	1.6%	44.6%	20.2%	1.1%	9.8%	5.9%	7.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used the services of a CLSC other than Info Santé or Info Social line (Q21): Q22A. Which service did you access? ONE POSSIBLE ANSWER

CLSC Service Accessed Within the Previous Year, Among Anglophones

	Variable	Homecare	Counseling services or programs for children	Counseling services or programs for adults	Counseling services or programs for seniors	Blood test	Consultation with a doctor	Physical therapy	vaccination	Consultation with a nurse	Other
	Male (n=410)	4.7%	2.6%	2.7%	1.4%	30.7%	18.6%	1.4%	22.8%	11.4%	4.7%
gender	Female (n=706)	6.1%	3.5%	6.8%	3.2%	36.8%	13.8%	3.4%	15.4%	8.9%	5.4%
	Total (n=1,116)	5.4%	3.1%	4.9%	2.4%	34.0%	16.0%	2.5%	18.9%	10.1%	5.1%
	25-44 years (n=139)	1.3%	4.0%	5.6%	2.7%	26.6%	12.7%	2.2%	31.2%	12.2%	5.2%
age	45-64 years (n=477)	6.0%	4.2%	4.8%	2.1%	39.2%	18.5%	2.5%	9.1%	8.8%	6.6%
age	65 years and over (n=469)	12.8%	-	2.6%	2.9%	40.5%	13.0%	3.8%	10.9%	11.3%	3.8%
	Total (n=1,097)	5.3%	3.1%	4.9%	2.4%	34.0%	16.1%	2.5%	18.9%	10.1%	5.1%
	less than \$30k (n=149)	9.4%	-	3.4%	2.5%	28.5%	11.4%	7.2%	26.0%	7.5%	5.9%
	\$30-70k (n=294)	6.4%	1.5%	3.9%	0.6%	35.8%	16.2%	1.9%	15.8%	9.2%	10.3%
household income	\$70-100k (n=148)	5.2%	6.0%	4.0%	5.2%	42.2%	11.3%	1.6%	13.2%	7.7%	3.6%
mome	\$100k and over (n=221)	3.4%	7.4%	3.4%	3.7%	28.3%	20.8%	1.4%	24.9%	9.9%	2.9%
	Total (n=812)	5.7%	4.0%	3.7%	2.8%	33.0%	16.0%	2.7%	20.3%	8.9%	5.8%
knowledge of	bilingual (n=868)	5.6%	3.9%	5.7%	2.1%	33.9%	16.8%	2.9%	15.6%	10.9%	5.2%
	unilingual English (n=246)	4.6%	0.5%	2.1%	3.2%	34.0%	13.5%	1.0%	29.7%	7.5%	4.7%
French	Total (n=1,114)	5.4%	3.1%	4.9%	2.4%	34.0%	16.0%	2.5%	18.9%	10.1%	5.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who used the services of a CLSC other than Info Santé or Info Social line (Q21): Q22A. Which service did you access? ONE POSSIBLE ANSWER

CLSC Service Accessed Within the Previous Year, Among Francophones

	Variable	Homecare	Counseling services or programs for children	services or programs		Blood test	Consultation with a doctor	Physical	Vaccination	Consultation with a nurse	Other
	Male (n=150)	7.3%	4.6%	4.4%	2.2%	36.1%	28.3%	0.8%	8.7%	7.5%	8.7%
gender	Female (n=211)	7.0%	8.9%	1.4%	1.1%	52.4%	12.9%	1.4%	10.7%	4.3%	6.8%
	Total (n=361)	7.1%	6.8%	2.8%	1.6%	44.6%	20.2%	1.1%	9.8%	5.9%	7.7%
	25-44 years (n=64)	3.1%	15.2%	3.5%	2.1%	37.4%	22.8%	-	12.5%	3.3%	9.6%
2.00	45-64 years (n=53)	4.4%	9.1%	4.6%	2.7%	37.9%	11.6%	-	17.8%	11.9%	10.8%
age	65 years and over (n=234)	10.1%	1.5%	2.6%	1.4%	50.7%	18.2%	2.8%	5.1%	7.7%	7.5%
	Total (n=360)	6.9%	6.9%	2.8%	1.6%	44.7%	20.3%	1.1%	9.8%	5.9%	7.7%
	less than \$30k (n=61)	19.7%	-	11.7%	-	31.0%	24.2%	0.5%	3.3%	9.6%	10.7%
	\$30-70k (n=130)	7.4%	6.9%	0.5%	0.7%	48.4%	14.7%	2.2%	11.7%	7.5%	15.9%
household income	\$70-100k (n=53)	2.6%	16.6%	2.4%	1.6%	40.7%	24.1%	2.6%	6.5%	2.9%	3.3%
mcome	\$100k and over (n=73)	2.1%	4.2%	2.3%	1.9%	42.7%	22.4%	-	18.5%	6.0%	1.6%
	Total (n=317)	7.0%	6.8%	3.3%	1.1%	42.3%	20.4%	1.3%	11.3%	6.5%	8.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who used the services of a CLSC other than Info Santé or Info Social line (Q21): Q22A. Which service did you access? ONE POSSIBLE ANSWER

7.1.3 Wait Time for CLSC Service

Among English speakers who used the services of a CLSC within the past year, 7.5% waited four months or longer for an appointment. This was lower than the proportion reported for French speakers (8.0%).

We observe that English-speakers who used the services of a CLSC within the past year in the regions of RTS du Centre-Ouestde-l'Île-de-Montréal (15.6%) and RTS de la

Wait	Time 1	for C	LSC S	ervice
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		English S	Speakers		French Speakers				
Region	Less than 2 weeks	2 weeks to less than a month	1 month to less than 4 months	4 months or more	Less than 2 weeks	2 weeks to less than a month	1 month to less than 4 months	4 months or more	
031 Capitale-Nationale (n=66)	85.8%	2.0%	10.6%	1.7%	84.8%	7.7%	3.3%	4.2%	
051 Estrie – CHU de Sherbrooke (n=32)	84.0%	4.7%	11.4%	-	43.0%	2.8%	26.8%	27.4%	
061 Ouest-de-l'Île-de-Montréal (n=116)	57.8%	20.5%	16.7%	5.0%	78.7%	-	21.3%	1	
062 Centre-Ouest-de-l'Île-de-Montréal (n=166)	63.5%	6.5%	14.4%	15.6%	66.6%	24.5%	9.0%	-	
063 Centre-Sud-de-l'Île-de-Montréal (n=73)	49.4%	33.0%	10.2%	7.4%	100.0%	-	-	-	
064 Nord-de-l'Île-de-Montréal (n=72)	58.4%	13.5%	18.8%	9.3%	71.4%	18.8%	-	9.8%	
065 Est-de-l'Île-de-Montréal (n=80)	81.1%	9.8%	5.9%	3.2%	62.4%	23.9%	13.7%	-	
071 Outaouais (n=72)	62.5%	19.5%	16.2%	1.8%	61.0%	9.2%	19.8%	10.0%	
131 Laval (n=96)	75.7%	15.2%	8.2%	0.9%	81.5%	12.3%	3.1%	3.1%	
151 Laurentides (n=32)	86.1%	3.2%	2.3%	8.5%	83.4%	13.6%	3.0%	-	
161 Montérégie-Centre (n=59)	71.8%	2.8%	15.1%	10.4%	55.7%	33.6%	3.4%	7.2%	
162 Montérégie-Est (n=37)	80.2%	1.5%	7.7%	10.5%	56.8%	23.2%	12.7%	7.3%	
163 Montérégie-Ouest (n=103)	84.0%	7.3%	3.2%	5.5%	76.3%	11.1%	2.2%	10.5%	
Total (n=1,056)	69.0%	12.1%	11.5%	7.5%	67.7%	15.9%	8.4%	8.0%	

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used the services of a CLSC other than Info Santé or Info Social line (Q21): Q22B. How long did you wait to get an appointment?

Montérégie-Est

(10.5%) were the most likely to wait four months or longer for an appointment.

English speakers who used the services of a CLSC within the past year in the region of RTS de Laval (0.9%) were the least likely to wait four months or longer for an appointment.

English-speaking females who used the services of a CLSC within the past year were more likely to wait four months or longer for an appointment (9.3%) than were their male counterparts (5.5%).

Across age groups, English speakers who used the services of a CLSC within the past year who were aged 18-24 years were the most likely to wait four months or longer for an appointment (13.4%) while those aged 65 years and over were the least likely (1.9%).

Wait Time for CLSC Service												
			peakers		French Speakers							
Variable		Less than 2 weeks	2 weeks to less than a month	1 month to less than 4 months	4 months or more	Less than 2 weeks	2 weeks to less than a month	1 month to less than 4 months	4 months or more			
	Male (n=396)	70.0%	14.4%	10.1%	5.5%	69.5%	14.9%	5.4%	10.2%			
gender	Female (n=660)	68.0%	10.0%	12.7%	9.3%	66.0%	16.9%	11.2%	5.9%			
	Total (n=1,056)	69.0%	12.1%	11.5%	7.5%	67.7%	15.9%	8.4%	8.0%			
	25-44 years (n=133)	57.0%	16.7%	16.5%	9.8%	54.8%	17.0%	12.2%	16.0%			
	45-64 years (n=456)	75.2%	8.5%	9.0%	7.4%	67.1%	13.0%	11.1%	8.8%			
age	65 years and over (n=439)	80.5%	11.4%	6.2%	1.9%	75.2%	14.8%	6.7%	3.3%			
	Total (n=1,040)	68.7%	12.2%	11.6%	7.5%	67.6%	16.0%	8.4%	8.0%			
	less than \$30k (n=145)	52.9%	19.4%	12.5%	15.2%	54.4%	21.6%	8.0%	16.1%			
	\$30-70k (n=284)	76.1%	9.0%	8.1%	6.8%	70.5%	15.6%	6.1%	7.8%			
household income	\$70-100k (n=141)	78.4%	4.1%	10.3%	7.1%	69.4%	8.2%	14.3%	8.1%			
	\$100k and over (n=211)	60.5%	13.8%	18.7%	7.0%	70.2%	17.8%	6.0%	6.0%			
	Total (n=781)	67.1%	11.6%	12.8%	8.5%	67.5%	15.9%	7.9%	8.7%			
knowledge of	bilingual (n=819)	72.2%	8.1%	12.3%	7.4%							
English and	unilingual English (n=237)	58.3%	25.2%	8.6%	7.9%							
French	Total (n=1,056)	69.0%	12.1%	11.5%	7.5%							

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who used the services of a CLSC other than Info Santé or Info Social line (Q21): Q22B. How long did you wait to get an appointment?

With respect to income, those who used the services of a CLSC within the past year who earned less than \$30k were the most likely to wait four months or longer for an appointment (15.2%) while those earning \$30-70k were the least likely (6.8%).

English-speakers who used the services of a CLSC within the past year who were unilingual English were more likely to wait four months or longer for an appointment (7.9%) than their bilingual counterparts (7.4%).

7.1.4 Attitude to Wait Time for CLSC Service

Among English speakers who used the services of a CLSC within the past year, 9.9% described the wait time for the appointment as "very poor". This was much higher than the proportion reported for French speakers (6.6%).

We observe that English-speakers who used the services of a CLSC within the past year in the regions of RTS de Laval (18.2%), RTS du Nord-de-l'Île-de-Montréal (14.3%) and RTS du Centre-Ouest-de-l'Île-de-Montréal (12.1%) were the most likely to describe the wait time for the appointment as "very poor".

Attitude	to	Wait	Time	for	CLSC	Service
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		English S	Speakers			French S	Speakers	
Region	Very good	Good	Poor	Very poor	Very good	Good	Poor	Very poor
031 Capitale-Nationale (n=66)	71.5%	14.4%	9.4%	4.6%	80.3%	15.6%	-	4.1%
051 Estrie – CHU de Sherbrooke (n=32)	64.3%	25.5%	4.9%	5.3%	35.1%	39.7%	-	25.2%
061 Ouest-de-l'Île-de-Montréal (n=119)	23.9%	51.0%	17.0%	8.2%	77.7%	6.1%	16.1%	-
062 Centre-Ouest-de-l'Île-de-Montréal (n=169)	29.2%	42.7%	16.0%	12.1%	39.5%	36.2%	13.4%	10.8%
063 Centre-Sud-de-l'Île-de-Montréal (n=78)	29.4%	55.2%	8.9%	6.4%	82.8%	17.2%	-	-
064 Nord-de-l'Île-de-Montréal (n=71)	27.6%	32.6%	25.4%	14.3%	65.0%	22.5%	7.5%	5.1%
065 Est-de-l'Île-de-Montréal (n=92)	30.4%	38.1%	24.5%	7.0%	51.0%	45.1%	3.9%	-
071 Outaouais (n=71)	29.2%	44.1%	16.9%	9.8%	49.7%	38.4%	-	11.9%
131 Laval (n=100)	19.3%	40.5%	21.9%	18.2%	43.5%	36.3%	12.2%	8.1%
151 Laurentides (n=34)	78.8%	9.6%	7.9%	3.7%	71.6%	20.8%	-	7.6%
161 Montérégie-Centre (n=59)	29.0%	51.6%	8.4%	11.0%	50.5%	26.6%	19.2%	3.8%
162 Montérégie-Est (n=37)	67.9%	19.7%	12.1%	0.3%	45.1%	28.8%	24.2%	1.9%
163 Montérégie-Ouest (n=107)	42.8%	36.7%	10.5%	10.0%	35.1%	52.8%	2.4%	9.7%
Total (n=1,089)	33.9%	41.0%	15.2%	9.9%	51.6%	31.8%	10.0%	6.6%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used the services of a CLSC other than Info Santé or Info Social line (Q21): Q22C. How would you describe this wait time?

English speakers who used the services of a CLSC within the past year in the region of RTS de la Montérégie-Est (0.3%) were the least likely to describe the wait time for the appointment as "very poor".

English-speaking females who used the services of a CLSC within the past year were more likely to describe the wait time for the appointment as "very poor" (11.5%) than were their male counterparts (8.2%).

Across age groups, English speakers who used the services of a CLSC within the past year who were aged 25-44 years were the most likely to describe the wait time for the appointment as "very poor" (14.1%) while those aged 65 years and over were the least likely (3.5%).

With respect to income, those who used the services of a CLSC within the past year who earned \$100k and over were the most likely to describe the wait time for the appointment as "very poor" (10.4%) while those earning \$30-70k were the least likely (8.7%).

			English S	Speakers			French S	peakers	
Variable		Very good	Good	Poor	Very poor	Very good	Good	Poor	Very poor
	Male (n=400)	33.1%	41.7%	17.0%	8.2%	51.6%	28.5%	11.7%	8.2%
gender	Female (n=689)	34.7%	40.3%	13.5%	11.5%	51.6%	34.7%	8.5%	5.1%
	Total (n=1,089)	33.9%	41.0%	15.2%	9.9%	51.6%	31.8%	10.0%	6.6%
	25-44 years (n=138)	25.0%	45.9%	15.0%	14.1%	49.0%	22.0%	20.2%	8.8%
2.00	45-64 years (n=467)	37.6%	37.1%	16.5%	8.8%	43.7%	34.5%	11.7%	10.1%
age	65 years and over (n=453)	47.8%	39.3%	9.4%	3.5%	54.3%	36.0%	4.0%	5.6%
	Total (n=1,070)	33.9%	40.9%	15.1%	10.0%	51.5%	31.8%	10.0%	6.6%
	less than \$30k (n=149)	27.6%	46.4%	17.3%	8.8%	33.3%	48.7%	3.8%	14.1%

43.7%

35.4%

36.1%

40.1%

36.5%

55.6%

41.0%

13.4%

13.3%

20.5%

16.5%

16.9%

9.4%

15.1%

8.7%

10.3%

10.4%

9.6%

10.2%

9.3%

9.9%

59.2%

58.2%

53.0%

52.9%

25.6%

26.4%

27.4%

30.2%

11.6%

7.1%

12.3%

9.6%

3.6%

8.2%

7.3%

7.3%

34.2%

40.9%

33.0%

33.8%

36.5%

25.7%

34.0%

Attitude to Wait Time for CLSC Service

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who used the services of a CLSC other than Info Santé or Info Social line (Q21): Q22C. How would you describe this wait time?

English-speakers who used the services of a CLSC within the past year who were bilingual were more likely to describe the wait time for the appointment as "very poor" (10.2%) than their unilingual English counterparts (9.3%).

\$30-70k (n=286)

\$70-100k (n=148)

bilingual (n=847)

Total (n=1,087)

Total (n=799)

\$100k and over (n=216)

unilingual English (n=240)

household

income

knowledge c

English and

French

8 Satisfaction with Access to English Health and Social Services

8.1.1 Used Services of a CLSC⁶

Satisfaction with Availability of Local Health And Social Services in English

Region	1- not satisfied at all	2-	3-	4-	5- totally satisfied	did not use
031 Capitale-Nationale (n=202)	13.5%	13.5%	36.9%	16.4%	19.7%	14.9%
051 Estrie – CHU de Sherbrooke (n=106)	23.7%	21.3%	25.8%	14.1%	15.1%	1.3%
061 Ouest-de-l'Île-de-Montréal (n=484)	7.2%	9.5%	19.0%	34.3%	30.0%	3.0%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	3.7%	7.0%	15.5%	38.3%	35.4%	3.0%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	17.1%	17.4%	18.3%	25.0%	22.1%	3.7%
064 Nord-de-l'Île-de-Montréal (n=251)	12.3%	14.4%	25.6%	23.9%	23.8%	7.6%
065 Est-de-l'Île-de-Montréal (n=215)	20.9%	17.4%	35.8%	16.9%	9.1%	11.0%
071 Outaouais (n=200)	13.4%	24.3%	26.0%	11.4%	25.0%	3.7%
111 Gaspésie (n=75)	10.8%	14.9%	26.2%	15.6%	32.5%	9.3%
131 Laval (n=257)	29.8%	14.2%	29.1%	18.1%	8.9%	5.8%
141 Lanaudière (n=75)	42.6%	32.5%	8.9%	9.9%	6.1%	17.5%
151 Laurentides (n=110)	12.6%	28.5%	16.6%	26.9%	15.5%	7.2%
161 Montérégie-Centre (n=150)	13.6%	22.4%	23.1%	32.1%	8.9%	3.7%
162 Montérégie-Est (n=77)	14.3%	11.2%	23.8%	31.3%	19.4%	8.4%
163 Montérégie-Ouest (n=240)	19.9%	18.0%	18.3%	28.2%	15.6%	3.6%
Total (n=3,133)	13.7%	14.8%	21.8%	27.2%	22.5%	5.0%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q23. On a scale from 1 to 5, where 1 means not satisfied at all and 5 means totally satisfied, how satisfied are you with the availability of health and social services in English in your region?

Among English speakers, 13.7% reported they were "not satisfied at all" with the availability of health and social services in English in their region.

We observe that English-speakers in the regions of RTS de Lanaudière (42.6%), RTS de Laval (29.8%) and RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (23.7%) were the most likely to report they were "not satisfied at all" with the availability of health and social services in English.

English speakers in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (3.7%), RTS de l'Ouest-de-l'Île-de-Montréal (7.2%) and RTS de la Gaspésie (10.8%) were the least likely to report they were "not satisfied at all" with the availability of health and social services in English.

Satisfaction with Availability of Local Health And Social Services in English

	Variable	1- not satisfied at all	2-	3-	4-	5- totally satisfied	did not use
	Male	9.4%	16.3%	18.6%	31.4%	24.3%	5.4%
gender	Female	18.0%	13.3%	24.9%	23.0%	20.8%	4.5%
	Total	13.7%	14.8%	21.8%	27.2%	22.5%	5.0%
	18-24 years	1.2%	8.8%	17.1%	43.6%	29.3%	3.0%
	25-44 years	15.5%	19.6%	20.3%	29.0%	15.7%	3.4%
age	45-64 years	17.4%	14.9%	26.1%	21.8%	19.8%	6.4%
	65 years and over	11.0%	9.7%	20.2%	23.2%	35.8%	6.6%
	Total	13.5%	14.9%	21.7%	27.5%	22.4%	4.9%
	less than \$30k	11.9%	17.1%	16.1%	22.4%	32.6%	4.5%
İ	\$30-70k	14.6%	17.5%	23.4%	24.1%	20.4%	3.9%
household	\$70-100k	12.0%	16.3%	25.3%	30.3%	16.1%	4.4%
Income	\$100k and over	15.4%	15.1%	18.6%	24.5%	26.4%	5.4%
İ	Total	13.9%	16.4%	21.0%	25.2%	23.5%	4.6%
knowledge of	bilingual	13.1%	15.3%	22.4%	28.5%	20.6%	5.4%
English and	unilingual English	16.1%	12.8%	19.3%	22.0%	29.9%	3.1%
French	Total	13.7%	14.8%	21.8%	27.2%	22.5%	5.0%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q23. On a scale from 1 to 5, where 1 means not satisfied at all and 5 means totally satisfied, how satisfied are you with the availability of health and social services in English in your region?

English-speaking females were more likely to report they were "not satisfied at all" with the availability of health and social services in English (18.0%) than were their male counterparts (9.4%).

Across age groups, English speakers who were aged 45-64 years were the most likely to report they were "not satisfied at all" with the availability of health and social services in English (17.4%) while those aged 18-24 years were the least likely (1.2%).

With respect to income, those who earned \$100k and over were the most likely to report they were "not satisfied at all" with the availability of health and social services in English (15.4%) while those earning less than \$30k were the least likely (11.9%).

English-speakers who were unilingual English were more likely

⁶ In Quebec City, English-language CLSC Services are organized differently from the rest of the province (www.jhsb). Many who use these services may not recognize they are part of the CLSC system.

to report they were "not satisfied at all" with the availability of health and social services in English (16.1%) than their bilingual counterparts (13.1%).



9 Language of Service in a Private Office or Clinic

	Used the Services	d the Services Were Served in English			Were Not Served in English		
Region	of a Doctor in a Private Office or Clinic	Served in English	Asked to be Served in English	Felt Service in English was Important	Not Served in English	Asked to be Served in English	Felt Service in English was Important
031 Capitale-Nationale (n=202)	40.5%	12.6%	15.9%	57.7%	87.4%	1.1%	8.0%
051 Estrie – CHU de Sherbrooke (n=106)	26.6%	78.9%	9.9%	98.2%	21.1%	6.4%	6.4%
061 Ouest-de-l'Île-de-Montréal (n=484)	47.9%	95.8%	9.0%	64.3%	4.2%	14.2%	56.5%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	54.4%	94.8%	6.9%	88.9%	5.2%	35.5%	59.7%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	41.6%	71.8%	9.1%	52.5%	28.2%	11.2%	27.4%
064 Nord-de-l'Île-de-Montréal (n=251)	34.3%	82.2%	11.1%	81.3%	17.8%	27.6%	48.5%
065 Est-de-l'Île-de-Montréal (n=215)	29.0%	67.3%	12.4%	70.2%	32.7%	25.0%	34.5%
071 Outaouais (n=200)	49.4%	85.0%	20.2%	87.5%	15.0%	34.6%	46.4%
111 Gaspésie (n=75)	65.8%	64.1%	2.7%	90.4%	35.9%	0.0%	36.8%

63.5%

23.4%

77.1%

92.1%

30.4%

59.0%

80.5%

37.2%

62.4%

38.9%

34.7%

35.3%

42.3%

42.9%

Language of Service for Doctors in a Private Office or Clinic

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

131 Laval (n=257)

Total (n=3,133)

141 Lanaudière (n=75)

151 Laurentides (n=110)

162 Montérégie-Est (n=77)

161 Montérégie-Centre (n=150)

163 Montérégie-Ouest (n=240)

23.3%

7.2%

9.3%

31.4%

0.5%

6.5%

11.4%

70.3%

72.3%

94.9%

80.1%

71.4%

83.6%

77.2%

36.5%

76.6%

22.9%

7.9%

69.6%

41.0%

19.5%

34.9%

2.9%

5.3%

0.0%

77.4%

21.5%

22.9%

57.7%

2.2%

5.3%

8.9%

1.8%

40.9%

34.9%

Q24. Within the last twelve months, in your region, have you used the services of a doctor in a private office or clinic either for yourself or to help another person? Q25A. Were you or the person you helped served in English by the doctor you saw at a private office or clinic?

Q25B. Were you served directly in English or did you or the person you helped have to ask for service in English when you saw the doctor in a private office or clinic?

Q25C. Considering the situation, do you feel it was VERY IMPORTANT to receive the service in English or would it have been acceptable to receive the service in French?

Language of Service for Doctors in a Private Office or Clinic

		Used the Services	Were Served in English			Were Not Served in English		
Variable		of a Doctor in a Private Office or Clinic	Total Served in English	Had to Ask to be Served in English	Felt Service in English was Important	Total Not Served in English	Asked to be Served in English	Felt Service in English was Important
	Male	43.5%	78.8%	10.2%	68.3%	21.2%	13.0%	33.3%
gender	Female	42.3%	82.2%	12.5%	86.1%	17.8%	34.7%	36.5%
	Total	42.9%	80.5%	11.4%	77.2%	19.5%	22.9%	34.9%
	18-24 years	44.9%	81.5%	5.6%	69.5%	18.5%	33.9%	0.0%
	25-44 years	36.9%	74.0%	15.5%	72.1%	26.0%	27.9%	45.0%
age	45-64 years	46.3%	80.9%	12.7%	78.7%	19.1%	17.4%	41.8%
	65 years and over	48.5%	88.4%	8.0%	84.6%	11.6%	13.2%	18.4%
	Total	43.1%	80.4%	11.5%	77.0%	19.6%	23.1%	34.6%
	less than \$30k	38.2%	86.5%	8.5%	68.5%	13.5%	21.6%	50.9%
	\$30-70k	41.5%	74.4%	8.4%	75.3%	25.6%	15.7%	29.7%
household income	\$70-100k	44.4%	81.4%	15.7%	85.5%	18.6%	14.0%	18.9%
meome	\$100k and over	48.2%	77.9%	13.6%	70.7%	22.1%	26.6%	46.9%
	Total	43.9%	78.7%	11.8%	74.6%	21.3%	20.3%	37.4%
knowledge of English and	bilingual	42.9%	77.9%	11.5%	73.5%	22.1%	18.2%	28.2%
	unilingual English	43.2%	90.6%	11.0%	89.9%	9.4%	66.3%	91.4%
French	Total	42.9%	80.5%	11.4%	77.2%	19.5%	22.9%	34.9%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q24. Within the last twelve months, in your region, have you used the services of a doctor in a private office or clinic either for yourself or to help another person? Q25A. Were you or the person you helped served in English by the doctor you saw at a private office or clinic?

9.1.1 Visited Doctor in a Private Office or Clinic

Visited a Doctor in a Private Office or Clinic Within the Previous year

Region	yes, for myself and/or another person	yes, for myself	yes, for another person	Both myself and another person	no
031 Capitale-Nationale (n=202)	40.5%	23.8%	13.8%	3.0%	59.5%
051 Estrie – CHU de Sherbrooke (n=106)	26.6%	20.4%	4.2%	2.0%	73.4%
061 Ouest-de-l'Île-de-Montréal (n=484)	47.9%	39.7%	4.9%	3.3%	52.1%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	54.4%	38.2%	10.8%	5.4%	45.6%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	41.6%	34.4%	3.4%	3.8%	58.4%
064 Nord-de-l'Île-de-Montréal (n=251)	34.3%	22.3%	8.2%	3.7%	65.7%
065 Est-de-l'Île-de-Montréal (n=215)	29.0%	17.8%	8.2%	3.0%	71.0%
071 Outaouais (n=200)	49.4%	23.5%	13.2%	12.6%	50.6%
111 Gaspésie (n=75)	65.8%	58.2%	2.2%	5.4%	34.2%
131 Laval (n=257)	37.2%	24.6%	6.1%	6.5%	62.8%
141 Lanaudière (n=75)	62.4%	37.5%	5.5%	19.4%	37.6%
151 Laurentides (n=110)	38.9%	18.6%	18.7%	1.5%	61.1%
161 Montérégie-Centre (n=150)	34.7%	22.0%	8.0%	4.7%	65.3%
162 Montérégie-Est (n=77)	35.3%	17.9%	0.0%	17.4%	64.7%
163 Montérégie-Ouest (n=240)	42.3%	27.5%	9.8%	4.9%	57.7%
Total (n=3,133)	42.9%	29.7%	8.0%	5.2%	57.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
Q24. Within the last twelve months, in your region, have you used the services of a doctor in a private office or clinic either
for yourself or to help another person?

Among English speakers, 42.9% had used the services of a doctor in a private office or clinic in the previous year for themselves or someone they helped.

We observe that English-speakers in the regions of RTS de la Gaspésie (65.8%), RTS de Lanaudière (62.4%) and RTS du Centre-Ouest-de-l'Île-de-Montréal (54.4%) were the most likely to have used the services of a doctor in a private office or clinic.

English speakers in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (26.6%), RTS de l'Est-de-l'Île-de-Montréal (29.0%) and RTS du Nord-de-l'Île-de-Montréal (34.3%) were the least likely to have used the services of a doctor in a private office or clinic.

Visited a Doctor in a Private Office or Clinic Within the Previous year

	Variable	yes, for myself and/or another person	yes, for myself	yes, for another person	Both myself and another person	no
	Male	43.5%	31.7%	8.4%	3.4%	56.5%
gender	Female	42.3%	27.8%	7.6%	7.0%	57.7%
	Total	42.9%	29.7%	8.0%	5.2%	57.1%
	18-24 years	44.9%	31.5%	7.2%	6.3%	55.1%
	25-44 years	36.9%	21.4%	10.1%	5.3%	63.1%
age	45-64 years	46.3%	33.2%	8.4%	4.7%	53.7%
•	65 years and over	48.5%	39.2%	4.3%	5.1%	51.5%
	Total	43.1%	29.8%	8.1%	5.2%	56.9%
	less than \$30k	38.2%	27.9%	6.2%	4.1%	61.8%
ĺ	\$30-70k	41.5%	30.0%	7.6%	3.9%	58.5%
household income	\$70-100k	44.4%	32.2%	8.2%	4.0%	55.6%
meonie	\$100k and over	48.2%	28.0%	12.9%	7.3%	51.8%
	Total	43.9%	29.4%	9.3%	5.1%	56.1%
knowledge of	bilingual	42.9%	29.7%	7.7%	5.5%	57.1%
English and	unilingual English	43.2%	30.0%	9.2%	4.0%	56.8%
French	Total	42.9%	29.7%	8.0%	5.2%	57.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q24. Within the last twelve months, in your region, have you used the services of a doctor in a private office or clinic either for yourself or to help another person?

English-speaking males were more likely to have used the services of a doctor in a private office or clinic (43.5%) than were their female counterparts (42.3%).

Across age groups, English speakers who were aged 65 years and over were the most likely to have used the services of a doctor in a private office or clinic (48.5%) while those aged 25-44 years were the least likely (36.9%).

With respect to income, those who earned \$100k and over were the most likely to have used the services of a doctor in a private office or clinic (48.2%) while those earning less than \$30k were the least likely (38.2%).

English-speakers who were unilingual English were more likely to have used the services of a doctor in a private office or clinic (43.2%) than their bilingual counterparts (42.9%).

9.1.2 Served in English by Doctor in Private Office or Clinic

Among English speakers who had used the services of a doctor in a private office or clinic, 19.5% were not served in English.

We observe that English-speakers who had used the services of a doctor in a private office or clinic in the regions of RTS de la Capitale-Nationale (87.4%), RTS de Lanaudière (76.6%) and RTS de la Montérégie-Est (69.6%) were the most likely to not have been served in English.

English speakers who had used the services of a doctor in a private office or clinic in the regions of RTS de l'Ouest-de-l'Île-de-Montréal (4.2%), RTS du Centre-Ouest-de-l'Île-de-Montréal (5.2%) and RTS de la Montérégie-Centre (7.9%) were the least likely to have not been served in English.

Served in English when Visiting a Doctor in a Private Office or Clinic

Region	yes	no
031 Capitale-Nationale (n=81)	12.6%	87.4%
051 Estrie – CHU de Sherbrooke (n=43)	78.9%	21.1%
061 Ouest-de-l'Île-de-Montréal (n=235)	95.8%	4.2%
062 Centre-Ouest-de-l'Île-de-Montréal (n=246)	94.8%	5.2%
063 Centre-Sud-de-l'Île-de-Montréal (n=93)	71.8%	28.2%
064 Nord-de-l'Île-de-Montréal (n=111)	82.2%	17.8%
065 Est-de-l'Île-de-Montréal (n=93)	67.3%	32.7%
071 Outaouais (n=91)	85.0%	15.0%
111 Gaspésie (n=44)	64.1%	35.9%
131 Laval (n=109)	63.5%	36.5%
141 Lanaudière (n=36)	23.4%	76.6%
151 Laurentides (n=44)	77.1%	22.9%
161 Montérégie-Centre (n=68)	92.1%	7.9%
163 Montérégie-Ouest (n=109)	59.0%	41.0%
Total (n=1,426)	80.5%	19.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used the services of a doctor in a private office or clinic (Q24): Q25A. Were you or the person you helped served in English by the doctor you saw at a private office or clinic?

English-speaking males who had used the services of a doctor in a private office or clinic were more likely to report not being served in English (21.2%) than were their female counterparts (17.8%).

Across age groups, English speakers who had used the services of a doctor in a private office or clinic who were aged 25-44 years were the most likely to report not being served in English (26.0%) while those aged 65 years and over were the least likely (11.6%).

With respect to income, those who had used the services of a doctor in a private office or clinic who earned \$30-70k were the most likely to report not being served in English (25.6%) while those earning less than \$30k were the least likely (13.5%).

English-speakers who had used the services of a doctor in a private office or clinic who were bilingual were more likely to report not being served in English (22.1%) than their unilingual English counterparts (9.4%).

Served in English when Visiting a Doctor in a Private Office or Clinic

	Variable	yes	no
	Male (n=562)	78.8%	21.2%
gender	Female (n=864)	82.2%	17.8%
	Total (n=1,426)	80.5%	19.5%
	25-44 years (n=135)	74.0%	26.0%
age	45-64 years (n=635)	80.9%	19.1%
	65 years and over (n=603)	88.4%	11.6%
	Total (n=1,402)	80.4%	19.6%
	less than \$30k (n=166)	86.5%	13.5%
	\$30-70k (n=354)	74.4%	25.6%
household income	\$70-100k (n=207)	81.4%	18.6%
meome	\$100k and over (n=336)	77.9%	22.1%
	Total (n=1,063)	78.7%	21.3%
knowledge of English and	bilingual (n=1,099)	77.9%	22.1%
	unilingual English (n=325)	90.6%	9.4%
French	Total (n=1,424)	80.5%	19.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used the services of a doctor in a private office or clinic (Q24): Q25A. Were you or the person you helped served in English by the doctor you saw at a private office or clinic?

9.1.3 Requested and Received Service in English from Doctor Private Office or Clinic

Among English speakers who had been served in English by a doctor in a private office or clinic, 11.4% reported having to ask for service in English.

We observe that English-speakers who had been served in English by a doctor in a private office or clinic in the regions of RTS de la Montérégie-Centre (31.4%), RTS de Laval (23.3%) and RTS de l'Outaouais (20.2%) were the most likely to report having to ask for service in English.

English speakers who had been served in English by a doctor in a private office or clinic in the regions of RTS de la Montérégie-Est (0.5%), RTS de la Gaspésie (2.7%) and RTS de la Montérégie-Ouest (6.5%) were the least likely to report having to ask for service in English.

Requested and Recieved Service in English when Visiting a Doctor in a Private Office or Clinic

Region	Served directly in English	Had to ask to be served in English	Cannot remember
051 Estrie – CHU de Sherbrooke (n=37)	88.4%	9.9%	1.7%
061 Ouest-de-l'Île-de-Montréal (n=220)	89.6%	9.0%	1.4%
062 Centre-Ouest-de-l'Île-de-Montréal (n=237)	92.1%	6.9%	1.1%
063 Centre-Sud-de-l'Île-de-Montréal (n=79)	85.4%	9.1%	5.6%
064 Nord-de-l'Île-de-Montréal (n=90)	78.4%	11.1%	10.5%
065 Est-de-l'Île-de-Montréal (n=65)	78.5%	12.4%	9.2%
071 Outaouais (n=77)	79.8%	20.2%	-
111 Gaspésie (n=33)	97.3%	2.7%	1
131 La val (n=75)	75.0%	23.3%	1.7%
151 Laurentides (n=30)	90.7%	9.3%	-
161 Montérégie-Centre (n=61)	68.6%	31.4%	-
163 Montérégie-Ouest (n=88)	93.5%	6.5%	-
Total (n=1,144)	86.4%	11.4%	2.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those served in English by a doctor in a private office or clinic (Q25A): Q25B. Were you served directly in English or did you or the person you helped have to ask for service in English when you saw the doctor in a private office or clinic?

English-speaking females who had been served in English by a doctor in a private office or clinic were more likely to report having to ask for service in English (12.5%) than were their male counterparts (10.2%).

Across age groups, English speakers who had been served in English by a doctor in a private office or clinic who were aged 25-44 years were the most likely to report having to ask for service in English (15.5%) while those aged 18-24 years were the least likely (5.6%).

With respect to income, those who had been served in English by a doctor in a private office or clinic who earned \$70-100k were the most likely to report having to ask for service in English (15.7%) while those earning \$30-70k were the least likely (8.4%).

English-speakers who had been served in English by a doctor in a private office or clinic who were bilingual were more likely to report having to ask for service in English (11.5%) than their unilingual English counterparts (11.0%).

Requested and Recieved Service in English when Visiting a Doctor in a Private Office or Clinic

	Variable	Served directly in English	Had to ask to be served in English	Cannot remember
	Male (n=435)	88.4%	10.2%	1.4%
gender	Female (n=709)	84.4%	12.5%	3.0%
	Total (n=1,144)	86.4%	11.4%	2.2%
	25-44 years (n=95)	80.7%	15.5%	3.8%
2.00	45-64 years (n=495)	84.4%	12.7%	2.9%
age	65 years and over (n=516)	91.5%	8.0%	0.5%
	Total (n=1,126)	86.2%	11.5%	2.3%
	less than \$30k (n=140)	91.5%	8.5%	-
	\$30-70k (n=286)	90.5%	8.4%	1.1%
household income	\$70-100k (n=158)	83.0%	15.7%	1.4%
meome	\$100k and over (n=253)	83.1%	13.6%	3.3%
	Total (n=837)	86.4%	11.8%	1.8%
knowledge of English and	bilingual (n=838)	85.7%	11.5%	2.8%
	unilingual English (n=304)	88.7%	11.0%	0.4%
French	Total (n=1,142)	86.4%	11.4%	2.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those served in English by a doctor in a private office or clinic (Q25A): Q25B. Were you served directly in English or did you or the person you helped have to ask for service in English when you saw the doctor in a private office or clinic?

9.1.4 Importance of English Services at Doctor in a Private Office or Clinic

Among English speakers who had been served in English by a doctor in a private office or clinic, 77.2% reported that it was very important to receive the service in English.

We observe that English-speakers who had been served in English by a doctor in a private office or clinic in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (98.2%), RTS des Laurentides (94.9%) and RTS de la Gaspésie (90.4%) were the most likely to report that it was very important to receive the service in English.

English speakers who had been served in English by a doctor in a private office or clinic in the regions of RTS du Centre-Sud-de-l'Île-de-Montréal (52.5%), RTS de la Capitale-Nationale (57.7%) and RTS de l'Ouest-de-l'Île-de-Montréal (64.3%) were the least likely to report that it was very important to receive the service in English.

Perceived Importance of Being Served in English when Visiting a Doctor in a Private Office or Clinic

Region	It was very important to receive the service in English	The service in French was acceptable
051 Estrie – CHU de Sherbrooke (n=36)	98.2%	1.8%
061 Ouest-de-l'Île-de-Montréal (n=222)	64.3%	35.7%
062 Centre-Ouest-de-l'Île-de-Montréal (n=237)	88.9%	11.1%
063 Centre-Sud-de-l'Île-de-Montréal (n=79)	52.5%	47.5%
064 Nord-de-l'Île-de-Montréal (n=88)	81.3%	18.7%
065 Est-de-l'Île-de-Montréal (n=65)	70.2%	29.8%
071 Outaouais (n=77)	87.5%	12.5%
111 Gaspésie (n=34)	90.4%	9.6%
131 Laval (n=75)	70.3%	29.7%
151 Laurentides (n=30)	94.9%	5.1%
161 Montérégie-Centre (n=62)	80.1%	19.9%
163 Montérégie-Ouest (n=89)	83.6%	16.4%
Total (n=1,150)	77.2%	22.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those served in English by a doctor in a private office or clinic (Q25A): Q25C. Considering the situation, do you feel it was VERY IMPORTANT to receive the service in English or would it have been acceptable to receive the service in French?

English-speaking females who had been served in English by a doctor in a private office or clinic were more likely to report English language services were very important (86.1%) than were their male counterparts (68.3%).

Across age groups, English speakers who had been served in English by a doctor in a private office or clinic who were aged 65 years and over were the most likely to report English language services were very important (84.6%) while those aged 18-24 years were the least likely (69.5%).

With respect to income, those who had been served in English by a doctor in a private office or clinic who earned \$70-100k were the most likely to report English language services were very important (85.5%) while those earning less than \$30k were the least likely (68.5%).

English-speakers who had been served in English by a doctor in a private office or clinic who were unilingual English were more likely to report English language services were very important (89.9%) than their bilingual counterparts (73.5%).

Perceived Importance of Being Served in English when Visiting a Doctor in a Private Office or Clinic

	Variable	It was very important to receive the service in English	The service in French was acceptable
	Male (n=440)	68.3%	31.7%
gender	Female (n=710)	86.1%	13.9%
	Total (n=1,150)	77.2%	22.8%
	25-44 years (n=95)	72.1%	27.9%
3,00	45-64 years (n=494)	78.7%	21.3%
age	65 years and over (n=521)	84.6%	15.4%
	Total (n=1,130)	77.0%	23.0%
	less than \$30k (n=145)	68.5%	31.5%
	\$30-70k (n=284)	75.3%	24.7%
household	\$70-100k (n=159)	85.5%	14.5%
Income	\$100k and over (n=253)	70.7%	29.3%
	Total (n=841)	74.6%	25.4%
knowledge of English and	bilingual (n=844)	73.5%	26.5%
	unilingual English (n=304)	89.9%	10.1%
French	Total (n=1,148)	77.2%	22.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those served in English by a doctor in a private office or clinic (Q25A): Q25C. Considering the situation, do you feel it was VERY IMPORTANT to receive the service in English or would it have been acceptable to receive the service in French?

9.1.5 Not Served in English Despite Request

English-speaking females who had not been served in English by a doctor in a private office or clinic were more likely to have asked for service in English (34.7%) than were their male counterparts (13.0%).

Across age groups, English speakers who were aged 65 years and over were the least likely to have asked for service in English (13.2%).

With respect to income, those who earned \$100k and over were the most likely to have asked for service in English (26.6%) while those earning \$70-100k were the least likely (14.0%).

Q25D. Did you or the person you helped ask for service in English?

	Variable	yes	no
	Male (n=120)	13.0%	87.0%
gender	Female (n=148)	34.7%	65.3%
	Total (n=268)	22.9%	77.1%
	25-44 years (n=39)	27.9%	72.1%
2.00	45-64 years (n=137)	17.4%	82.6%
age	65 years and over (n=79)	13.2%	86.8%
	Total (n=264)	23.1%	76.9%
	\$30-70k (n=68)	15.7%	84.3%
household	\$70-100k (n=46)	14.0%	86.0%
income	\$100k and over (n=82)	26.6%	73.4%
*	Total (n=216)	20.3%	79.7%
knowledge of English and French	bilingual (n=248)	18.2%	81.8%
	Total (n=268)	22.9%	77.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those not served in English by a doctor in a private office or clinic (Q25A): Q25D. Did you or the person you helped ask for service in English?

9.1.6 Importance of English Services Among those Not Served in English

English-speaking females who had not been served in English by a doctor in a private office or clinic were more likely to report English language services were very important (36.5%) than were their male counterparts (33.3%).

Across age groups, English speakers who had not been served in English by a doctor in a private office or clinic who were aged 25-44 years were the most likely to report English language services were very important (45.0%).

With respect to income, those who had not been served in English by a doctor in a private office or clinic who earned less than \$30k were the most likely to report English language services were very important (50.9%) while those earning \$70-100k were the least likely (18.9%).

For those who were not served in English: Perceived Importance of Being Served in English when Visiting a Doctor in a Private Office or Clinic

	Variable	It was very important to receive the service in English	The service in French was acceptable
	Male (n=116)	33.3%	66.7%
gender	Female (n=147)	36.5%	63.5%
	Total (n=263)	34.9%	65.1%
	25-44 years (n=38)	45.0%	55.0%
2.00	45-64 years (n=135)	41.8%	58.2%
age	65 years and over (n=78)	18.4%	81.6%
	Total (n=259)	34.6%	65.4%
	\$30-70k (n=65)	29.7%	70.3%
household	\$70-100k (n=46)	18.9%	81.1%
income	\$100k and over (n=81)	46.9%	53.1%
	Total (n=212)	37.4%	62.6%
knowledge of	bilingual (n=243)	28.2%	71.8%
English and French	Total (n=263)	34.9%	65.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those not served in English by a doctor in a private office or clinic (Q25A): Q25E. Considering the situation, do you feel it would have been VERY IMPORTANT to receive the service in English or was receiving service in French acceptable?

10 Language of Service at CLSCs

10.1.1 Served in English at a CLSC

Among English speakers who had used the services of a CLSC, 54.7% were served in English.

We observe that English-speakers who had used the services of a CLSC in the regions of RTS de l'Ouest-de-l'Île-de-Montréal (83.7%), RTS du Centre-Ouest-de-l'Île-de-Montréal (76.7%) and RTS de l'Outaouais (68.7%) were the most likely to report having been served in English.

English speakers who had used the services of a CLSC in the regions of RTS de la Capitale-Nationale (15.9%), RTS de Lanaudière (16.1%) and RTS de la Montérégie-Est (20.4%) were the least likely to report having been served in English.

Served	lin	English	at a	CLSC

Region	yes	no
031 Capitale-Nationale (n=68)	15.9%	84.1%
051 Estrie – CHU de Sherbrooke (n=31)	51.9%	48.1%
061 Ouest-de-l'Île-de-Montréal (n=119)	83.7%	16.3%
062 Centre-Ouest-de-l'Île-de-Montréal (n=173)	76.7%	23.3%
063 Centre-Sud-de-l'Île-de-Montréal (n=76)	64.9%	35.1%
064 Nord-de-l'Île-de-Montréal (n=71)	44.8%	55.2%
065 Est-de-l'Île-de-Montréal (n=92)	21.6%	78.4%
071 Outaouais (n=71)	68.7%	31.3%
131 Laval (n=95)	23.0%	77.0%
141 Lanaudière (n=32)	16.1%	83.9%
151 Laurentides (n=35)	66.2%	33.8%
161 Montérégie-Centre (n=59)	35.2%	64.8%
162 Montérégie-Est (n=37)	20.4%	79.6%
163 Montérégie-Ouest (n=106)	44.7%	55.3%
Total (n=1,091)	54.7%	45.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used the services of a CLSC other than Info Santé or Info Social line (Q21): Q26A. Thinking of your most recent visit to a CLSC for yourself or to help another person... Were you or the person you helped served in English at the CLSC (other than Info Santé or Info Social)?

Served in English at a CLSC

	Variable	yes	no
	Male (n=397)	56.7%	43.3%
gender	Female (n=694)	53.0%	47.0%
	Total (n=1,091)	54.7%	45.3%
	25-44 years (n=135)	45.1%	54.9%
2.50	45-64 years (n=474)	55.6%	44.4%
age	65 years and over (n=451)	70.3%	29.7%
	Total (n=1,071)	55.2%	44.8%
	less than \$30k (n=150)	68.4%	31.6%
	\$30-70k (n=288)	54.2%	45.8%
household income	\$70-100k (n=140)	47.3%	52.7%
meome	\$100k and over (n=220)	43.6%	56.4%
	Total (n=798)	52.0%	48.0%
knowledge of English and French	bilingual (n=850)	47.0%	53.0%
	unilingual English (n=239)	80.6%	19.4%
	Total (n=1,089)	54.7%	45.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used the services of a CLSC other than Info Santé or Info Social line (Q21): Q26A. Thinking of your most recent visit to a CLSC for yourself or to help another person... Were you or the person you helped served in English at the CLSC (other than Info Santé or Info Social)?

English-speaking males who had used the services of a CLSC were more likely to report having been served in English (56.7%) than were their female counterparts (53.0%).

Across age groups, English speakers who had used the services of a CLSC who were aged 65 years and over were the most likely to report having been served in English (70.3%) while those aged 25-44 years were the least likely (45.1%).

With respect to income, those who had used the services of a CLSC who earned less than \$30k were the most likely to report having been served in English (68.4%) while those earning \$100k and over were the least likely (43.6%).

Unilingual English-speakers who had used the services of a CLSC were more likely to report having been served in English (80.6%) than their bilingual counterparts (47.0%).

10.1.2 Requested and Received Service in English at a CLSC

Among English speakers who were served in English at a CLSC, 29.6% had to ask for service in English.

We observe that English-speakers who were served in English at a CLSC in the regions of RTS des Laurentides (83.1%), RTS de la Montérégie-Est (78.4%) and RTS de Laval (70.8%) were the most likely to have had to ask for service in English.

English speakers who were served in English at a CLSC in the regions of RTS de Lanaudière (0.0%) and RTS de la Capitale-Nationale (10.4%) were the least likely to have had to ask for service in English.

Requested and Received Service in English at a CLSC

Region	Served directly in English	Had to ask to be served in English	Cannot remember
061 Ouest-de-l'Île-de-Montréal (n=95)	68.2%	28.2%	3.6%
062 Centre-Ouest-de-l'Île-de-Montréal (n=145)	85.2%	11.8%	3.0%
063 Centre-Sud-de-l'Île-de-Montréal (n=41)	31.7%	65.1%	3.2%
064 Nord-de-l'Île-de-Montréal (n=33)	52.9%	47.1%	-
071 Outaouais (n=55)	86.6%	13.4%	-
131 Laval (n=30)	26.2%	70.8%	3.0%
161 Montérégie-Centre (n=33)	79.9%	17.8%	2.3%
163 Montérégie-Ouest (n=65)	79.8%	19.4%	0.8%
Total (n=597)	68.1%	29.6%	2.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those served in English at a CLSC (Q26A): Q26B. Were you served directly in English or did you or the person you helped have to ask for service in English at the CLSC (other than Info Santé or Info Social)?

English-speaking males who were served in English at a CLSC were more likely to have had to ask for service in English (32.1%) than were their female counterparts (27.3%).

Across age groups, English speakers who were served in English at a CLSC who were aged 25-44 years were the most likely to have had to ask for service in English (40.2%) while those aged 65 years and over were the least likely (17.7%).

With respect to income, those who were served in English at a CLSC who earned less than \$30k were the most likely to have had to ask for service in English (39.5%) while those earning \$70-100k were the least likely (23.6%).

Unilingual English-speakers who were served in English at a CLSC were more likely to have had to ask for service in English (30.7%) than their bilingual counterparts (29.1%).

Requested and Received Service in English at a CLSC

	Variable	Served directly in English	Had to ask to be served in English	Cannot remember
	Male (n=218)	66.2%	32.1%	1.7%
gender	Female (n=379)	69.8%	27.3%	2.9%
	Total (n=597)	68.1%	29.6%	2.3%
	25-44 years (n=52)	58.7%	40.2%	1.1%
2.70	45-64 years (n=242)	68.2%	27.6%	4.2%
age	65 years and over (n=292)	80.5%	17.7%	1.8%
	Total (n=592)	68.1%	29.6%	2.3%
	less than \$30k (n=99)	59.9%	39.5%	0.5%
	\$30-70k (n=166)	75.2%	23.8%	1.0%
household income	\$70-100k (n=70)	76.4%	23.6%	-
meonic	\$100k and over (n=98)	62.3%	32.2%	5.5%
	Total (n=433)	68.1%	29.9%	2.0%
knowledge of English and	bilingual (n=390)	68.5%	29.1%	2.4%
	unilingual English (n=206)	67.2%	30.7%	2.1%
French	Total (n=596)	68.1%	29.7%	2.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those served in English at a CLSC (Q26A): Q26B. Were you served directly in English or did you or the person you helped have to ask for service in English at the CLSC (other than Info Santé or Info Social)?

10.1.3 Importance of English Services at a CLSC Among Those Served in English

Importance of English Services at a CLSC Among Those Served in English

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Region	It was very important to receive the service in English	The service in French was acceptable		
061 Ouest-de-l'Île-de-Montréal (n=97)	88.3%	11.7%		
062 Centre-Ouest-de-l'Île-de-Montréal (n=143)	75.7%	24.3%		
063 Centre-Sud-de-l'Île-de-Montréal (n=43)	81.4%	18.6%		
064 Nord-de-l'Île-de-Montréal (n=33)	72.6%	27.4%		
071 Outaouais (n=56)	92.9%	7.1%		
161 Montérégie-Centre (n=33)	61.9%	38.1%		
163 Montérégie-Ouest (n=67)	70.9%	29.1%		
Total (n=600)	79.6%	20.4%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those served in English at a CLSC (Q26A): Q26C. Considering the situation, do you feel it was VERY IMPORTANT to receive the service in English or was it acceptable to receive the service in French?

Importance of English Services at a CLSC Among Those Served in English

	Variable	It was very important to receive the service in English	The service in French was acceptable
	Male (n=216)	77.5%	22.5%
gender	Female (n=384)	81.6%	18.4%
	Total (n=600)	79.6%	20.4%
	25-44 years (n=52)	86.0%	14.0%
	45-64 years (n=245)	78.9%	21.1%
age	65 years and over (n=292)	81.1%	18.9%
	Total (n=595)	79.5%	20.5%
	less than \$30k (n=99)	84.8%	15.2%
	\$30-70k (n=166)	85.5%	14.5%
household income	\$70-100k (n=69)	72.8%	27.2%
meome	\$100k and over (n=102)	83.3%	16.7%
•	Total (n=436)	82.7%	17.3%
knowledge of	bilingual (n=392)	71.0%	29.0%
English and	unilingual English (n=206)	96.3%	3.7%
French	Total (n=598)	79.6%	20.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those served in English at a CLSC (Q26A): Q26C. Considering the situation, do you feel it was VERY IMPORTANT to receive the service in English or was it acceptable to receive the service in French?

English-speaking females who were served in English at a CLSC were more likely to feel it was very important to be served in English (81.6%) than were their male counterparts (77.5%).

Across age groups, English speakers who were served in English at a CLSC who were aged 25-44 years were the most likely to feel it was very important to be served in English (86.0%).

With respect to income, those who were served in English at a CLSC who earned \$30-70k were the most likely to feel it was very important to be served in English (85.5%) while those earning \$70-100k were the least likely (72.8%).

Unilingual English-speakers who were served in English at a CLSC were more likely to feel it was very important to be served in English (96.3%) than their bilingual counterparts (71.0%).

10.1.4 Not Served in English at CLSC Despite Request

Among English speakers who were not served in English at a CLSC, 23.2% had asked for service in English.

We observe that English-speakers who were not served in English at a CLSC in the regions of RTS de la Montérégie-Ouest (52.1%) and RTS du Nord-de-l'Île-de-Montréal (35.3%) were the most likely to have asked for service in English.

English speakers who were not served in English at a CLSC in the region of RTS de la Capitale-Nationale (1.2%) were the least likely to have asked for service in English.

Not Served in English at CLSC Despite Request

Region	yes	no
031 Capitale-Nationale (n=60)	1.2%	98.8%
063 Centre-Sud-de-l'Île-de-Montréal (n=32)	31.2%	68.8%
064 Nord-de-l'Île-de-Montréal (n=35)	35.3%	64.7%
065 Est-de-l'Île-de-Montréal (n=69)	12.7%	87.3%
131 Laval (n=64)	15.1%	84.9%
163 Montérégie-Ouest (n=37)	52.1%	47.9%
Total (n=470)	23.2%	76.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who were not served in English at a CLSC (Q26A): Q26D. Did you or the person you helped ask for service in English?

Not Served in English at CLSC Despite Request

	Variable	yes	no
	Male (n=169)	15.0%	85.0%
gender	Female (n=301)	29.1%	70.9%
	Total (n=470)	23.2%	76.8%
	25-44 years (n=81)	29.9%	70.1%
2.00	45-64 years (n=222)	19.1%	80.9%
age	65 years and over (n=149)	16.6%	83.4%
	Total (n=457)	23.0%	77.0%
	less than \$30k (n=48)	32.6%	67.4%
h a a a la a la l	\$30-70k (n=119)	23.3%	76.7%
household income	\$70-100k (n=66)	40.3%	59.7%
meome	\$100k and over (n=116)	18.6%	81.4%
	Total (n=349)	25.8%	74.2%
knowledge of	bilingual (n=438)	20.2%	79.8%
English and	unilingual English (n=32)	48.5%	51.5%
French	Total (n=470)	23.2%	76.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who were not served in English at a CLSC (Q26A): Q26D. Did you or the person you helped ask for service in English?

English-speaking females who were not served in English at a CLSC were more likely to have asked for service in English (29.1%) than were their male counterparts (15.0%).

Across age groups, English speakers who were not served in English at a CLSC who were aged 25-44 years were the most likely to have asked for service in English (29.9%).

With respect to income, those who were not served in English at a CLSC who earned \$70-100k were the most likely to have asked for service in English (40.3%) while those earning \$100k and over were the least likely (18.6%).

Unilingual English-speakers who were not served in English at a CLSC were more likely to have asked for service in English (48.5%) than their bilingual counterparts (20.2%).

10.1.5 Importance of English Services at a CLSC Among Those Not Served in English

Among English speakers who were not served in English at a CLSC, 34.2% felt it was very important to be served in English.

We observe that English-speakers who were not served in English at a CLSC in the regions of RTS du Nord-de-l'Île-de-Montréal (50.0%) and RTS de la Montérégie-Ouest (48.5%) were the most likely to feel it was very important to be served in English.

English speakers who were not served in English at a CLSC in the region of RTS de la Capitale-Nationale (6.4%) were the least likely to feel it was very important to be served in English.

Importance of English Services at a CLSC Among Those Not Served in English

Region	It was very important to receive the service in English	The service in French was acceptable
031 Capitale-Nationale (n=59)	6.4%	93.6%
063 Centre-Sud-de-l'Île-de-Montréal (n=32)	30.2%	69.8%
064 Nord-de-l'Île-de-Montréal (n=37)	50.0%	50.0%
065 Est-de-l'Île-de-Montréal (n=70)	32.3%	67.7%
131 Laval (n=65)	42.1%	57.9%
163 Montérégie-Ouest (n=39)	48.5%	51.5%
Total (n=474)	34.2%	65.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who were not served in English at a CLSC (Q26A): Q26E. Considering the situation, do you feel it would have been VERY IMPORTANT to receive the service in English or was receiving service in French acceptable?

English-speaking females who were not served in English at a CLSC were more likely to feel it was very important to be served in English (41.9%) than were their male counterparts (24.8%).

Across age groups, English speakers who were not served in English at a CLSC who were aged 45-64 years were the most likely to feel it was very important to be served in English (36.0%) while those aged 18-24 years were the least likely (6.2%).

With respect to income, those who were not served in English at a CLSC who earned less than \$30k were the most likely to feel it was very important to be served in English (50.7%) while those earning \$100k and over were the least likely (23.8%).

Unilingual English-speakers who were not served in English at a CLSC were more likely to feel it was very important to be served in English (62.7%) than their bilingual counterparts (31.0%).

Importance of English Services at a CLSC Among Those Not Served in English

	Variable	It was very important to receive the service in English	The service in French was acceptable
	Male (n=174)	24.8%	75.2%
gender	Female (n=300)	41.9%	58.1%
	Total (n=474)	34.2%	65.8%
	25-44 years (n=83)	35.6%	64.4%
200	45-64 years (n=224)	36.0%	64.0%
age	65 years and over (n=148)	29.9%	70.1%
	Total (n=460)	33.8%	66.2%
	less than \$30k (n=47)	50.7%	49.3%
	\$30-70k (n=119)	26.7%	73.3%
household income	\$70-100k (n=69)	43.1%	56.9%
meome	\$100k and over (n=117)	23.8%	76.2%
	Total (n=352)	31.6%	68.4%
knowledge of English and French	bilingual (n=442)	31.0%	69.0%
	unilingual English (n=32)	62.7%	37.3%
	Total (n=474)	34.2%	65.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who were not served in English at a CLSC (Q26A): Q26E. Considering the situation, do you feel it would have been VERY IMPORTANT to receive the service in English or was receiving service in French acceptable?

10.1.6 Receptionist at CLSC Spoke English

Among English speakers who had used the services of a CLSC, 48.4% reported the receptionist spoke English.

We observe that English-speakers who had used the services of a CLSC in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (80.5%), RTS de l'Ouest-de-l'Île-de-Montréal (72.7%) and RTS des Laurentides (63.6%) were the most likely to have reported the receptionist spoke English.

English speakers who had used the services of a CLSC in the regions of RTS de Lanaudière (4.3%), RTS de Laval (13.8%) and RTS de la Montérégie-Est (13.9%) were the least likely to have reported the receptionist spoke English.

Receptionist at CLSC Spoke English

Region	Yes	No
031 Capitale-Nationale (n=68)	16.4%	83.6%
051 Estrie – CHU de Sherbrooke (n=32)	45.4%	54.6%
061 Ouest-de-l'Île-de-Montréal (n=114)	72.7%	27.3%
062 Centre-Ouest-de-l'Île-de-Montréal (n=161)	80.5%	19.5%
063 Centre-Sud-de-l'Île-de-Montréal (n=69)	56.3%	43.7%
064 Nord-de-l'Île-de-Montréal (n=72)	27.5%	72.5%
065 Est-de-l'Île-de-Montréal (n=91)	18.4%	81.6%
071 Outaouais (n=72)	62.9%	37.1%
131 Laval (n=97)	13.8%	86.2%
141 Lanaudière (n=30)	4.3%	95.7%
151 Laurentides (n=35)	63.6%	36.4%
161 Montérégie-Centre (n=58)	30.2%	69.8%
162 Montérégie-Est (n=37)	13.9%	86.1%
163 Montérégie-Ouest (n=100)	41.5%	58.5%
Total (n=1,062)	48.4%	51.6%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used the services of a CLSC other than Info Santé or Info Social line (Q21): Q26F. During your most recent experience at the CLSC (respondent used the services of a CLSC for himself or to help another person)... Did the receptionist speak to you in English?

Receptionist at CLSC Spoke English

	Variable	Yes	No
	Male (n=389)	50.3%	49.7%
gender	Female (n=673)	46.7%	53.3%
	Total (n=1,062)	48.4%	51.6%
	25-44 years (n=130)	42.5%	57.5%
2.00	45-64 years (n=451)	43.2%	56.8%
age	65 years and over (n=451)	65.2%	34.8%
	Total (n=1,043)	48.7%	51.3%
	less than \$30k (n=144)	69.5%	30.5%
	\$30-70k (n=287)	49.3%	50.7%
household income	\$70-100k (n=140)	46.2%	53.8%
meome	\$100k and over (n=207)	28.7%	71.3%
	Total (n=778)	45.9%	54.1%
knowledge of English and French	bilingual (n=822)	39.0%	61.0%
	unilingual English (n=238)	80.7%	19.3%
	Total (n=1,060)	48.3%	51.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used the services of a CLSC other than Info Santé or Info Social line (Q21): Q26F. During your most recent experience at the CLSC (respondent used the services of a CLSC for himself or to help another person)... Did the receptionist speak to you in English?

English-speaking males who had used the services of a CLSC were more likely to have reported the receptionist spoke English (50.3%) than were their female counterparts (46.7%).

Across age groups, English speakers who had used the services of a CLSC who were aged 65 years and over were the most likely to have reported the receptionist spoke English (65.2%) while those aged 25-44 years were the least likely (42.5%).

With respect to income, those who had used the services of a CLSC who earned less than \$30k were the most likely to have reported the receptionist spoke English (69.5%) while those earning \$100k and over were the least likely (28.7%).

English-speakers who had used the services of a CLSC who were unilingual were more likely to have reported the receptionist spoke English (80.7%) than their bilingual counterparts (39.0%).

10.1.7 Information Forms at CLSC in English

Among English speakers who had used the services of a CLSC, 51.8% reported the information forms were in English.

We observe that English-speakers who had used the services of a CLSC in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (75.0%), RTS de l'Ouest-de-l'Île-de-Montréal (73.1%) and RTS de Lanaudière (73.0%) were the most likely to report the information forms were in English.

English speakers who had used the services of a CLSC in the regions of RTS de la Capitale-Nationale (16.1%), RTS de la Montérégie-Est (23.3%) and RTS de l'Est-de-l'Île-de-Montréal (25.2%) were the least likely to report the information forms were in English.

Information Forms at CLSC in English

Region	Yes	No
031 Capitale-Nationale (n=65)	16.1%	83.9%
061 Ouest-de-l'Île-de-Montréal (n=101)	73.1%	26.9%
062 Centre-Ouest-de-l'Île-de-Montréal (n=134)	75.0%	25.0%
063 Centre-Sud-de-l'Île-de-Montréal (n=56)	35.5%	64.5%
064 Nord-de-l'Île-de-Montréal (n=66)	44.4%	55.6%
065 Est-de-l'Île-de-Montréal (n=73)	25.2%	74.8%
071 Outaouais (n=60)	63.0%	37.0%
131 Laval (n=84)	26.7%	73.3%
151 Laurentides (n=30)	56.6%	43.4%
161 Montérégie-Centre (n=54)	36.5%	63.5%
162 Montérégie-Est (n=31)	23.3%	76.7%
163 Montérégie-Ouest (n=90)	47.4%	52.6%
Total (n=924)	51.8%	48.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used the services of a CLSC other than Info Santé or Info Social line (Q21): Q26G. During your most recent experience at the CLSC... Were information forms or forms requiring you to provide information on your (or the person you helped) health status in English?

Information Forms at CLSC in English

	Variable	Yes	No
	Male (n=354)	54.9%	45.1%
gender	Female (n=570)	48.8%	51.2%
	Total (n=924)	51.8%	48.2%
	25-44 years (n=125)	49.5%	50.5%
2.00	45-64 years (n=389)	49.5%	50.5%
age	65 years and over (n=387)	63.5%	36.5%
	Total (n=906)	52.3%	47.7%
	less than \$30k (n=142)	54.4%	45.6%
	\$30-70k (n=243)	51.6%	48.4%
household income	\$70-100k (n=124)	55.9%	44.1%
meome	\$100k and over (n=180)	45.5%	54.5%
	Total (n=689)	50.8%	49.2%
knowledge of English and French	bilingual (n=705)	46.5%	53.5%
	unilingual English (n=218)	67.7%	32.3%
	Total (n=923)	51.7%	48.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used the services of a CLSC other than Info Santé or Info Social line (Q21): Q26G. During your most recent experience at the CLSC... Were information forms or forms requiring you to provide information on your (or the person you helped) health status in English?

English-speaking males who had used the services of a CLSC were more likely to report the information forms were in English (54.9%) than were their female counterparts (48.8%).

Across age groups, English speakers who had used the services of a CLSC who were aged 65 years and over were the most likely to report the information forms were in English (63.5%) while those aged 18-24 years were the least likely (46.0%).

With respect to income, those who had used the services of a CLSC who earned \$70-100k were the most likely to report the information forms were in English (55.9%) while those earning \$100k and over were the least likely (45.5%).

English-speakers who had used the services of a CLSC who were unilingual were more likely to report the information forms were in English (67.7%) than their bilingual counterparts (46.5%).

10.1.8 Health or Social Services Professional at CLSC Spoke English

Health or Social Services Professional at CLSC Spoke English

Region	Yes	No
031 Capitale-Nationale (n=68)	16.8%	83.2%
051 Estrie – CHU de Sherbrooke (n=31)	56.7%	43.3%
061 Ouest-de-l'Île-de-Montréal (n=114)	89.8%	10.2%
062 Centre-Ouest-de-l'Île-de-Montréal (n=170)	94.5%	5.5%
063 Centre-Sud-de-l'Île-de-Montréal (n=74)	82.8%	17.2%
064 Nord-de-l'Île-de-Montréal (n=72)	60.5%	39.5%
065 Est-de-l'Île-de-Montréal (n=88)	27.7%	72.3%
071 Outaouais (n=72)	80.8%	19.2%
131 Laval (n=99)	37.4%	62.6%
141 Lanaudière (n=32)	69.6%	30.4%
151 Laurentides (n=32)	66.3%	33.7%
161 Montérégie-Centre (n=61)	41.7%	58.3%
162 Montérégie-Est (n=35)	20.4%	79.6%
163 Montérégie-Ouest (n=108)	50.4%	49.6%
Total (n=1,082)	66.0%	34.0%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used the services of a CLSC other than Info Santé or Info Social line (Q21): Q26H. During your most recent experience at the CLSC... Did the health or social services professional you consulted speak to you or the person you helped in English during the appointment?

Among English speakers who had used the services of a CLSC, 66.0% reported the health or social services professional spoke English.

We observe that English-speakers who had used the services of a CLSC in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (94.5%), RTS de l'Ouest-de-l'Île-de-Montréal (89.8%) and RTS du Centre-Sud-de-l'Île-de-Montréal (82.8%) were the most likely to have reported the health or social services professional spoke English.

English speakers who had used the services of a CLSC in the regions of RTS de la Capitale-Nationale (16.8%), RTS de la Montérégie-Est (20.4%) and RTS de l'Est-de-l'Île-de-Montréal (27.7%) were the least likely to have reported the health or social services professional spoke English.

English-speaking males who had used the services of a CLSC were more likely to have reported the health or social services professional spoke English (67.2%) than were their female counterparts (64.8%).

With respect to income, those who had used the services of a CLSC who earned less than \$30k were the most likely to have reported the health or social services professional spoke English (81.1%) while those earning \$70-100k were the least likely (55.0%).

English-speakers who had used the services of a CLSC who were unilingual were more likely to have reported the health or social services professional spoke English (88.4%) than their bilingual counterparts (59.5%).

Health or Social Services Professional at CLSC Spoke English

Variable	Yes	No
Male (n=402)	67.2%	32.8%
Female (n=680)	64.8%	35.2%
Total (n=1,082)	66.0%	34.0%
25-44 years (n=136)	62.4%	37.6%
45-64 years (n=462)	62.2%	37.8%
65 years and over (n=454)	75.2%	24.8%
Total (n=1,063)	66.2%	33.8%
ess than \$30k (n=147)	81.1%	18.9%
\$30-70k (n=287)	66.6%	33.4%
\$70-100k (n=141)	55.0%	45.0%
\$100k and over (n=213)	56.6%	43.4%
Total (n=788)	63.8%	36.2%
oilingual (n=836)	59.5%	40.5%
unilingual English (n=244)	88.4%	11.6%
Total (n=1,080)	65.9%	34.1%
	Male (n=402) Female (n=680) Fotal (n=1,082) 15-44 years (n=136) 15-64 years (n=462) 15 years and over (n=454) Fotal (n=1,063) Fotal (n=1,063) Fotal (n=287) Foto-100k (n=287) Foto-100k and over (n=213) Fotal (n=788) Fotal (n=788) Fotal (n=836) Inilingual English (n=244)	Male (n=402) 67.2% female (n=680) 64.8% fotal (n=1,082) 66.0% fotal (n=1,082) 62.4% fotal (n=1,082) 62.2% fotal (n=462) 62.2% fotal (n=1,063) 66.2% fotal (n=1,063) 66.2% fotal (n=1,063) 66.2% fotal (n=1,063) 66.6% fotal (n=287) 66.6% fotal (n=287) 66.6% fotal (n=141) 55.0% fotal (n=788) 63.8% fotal (n=788) 59.5% fotal ingual English (n=244) 88.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used the services of a CLSC other than Info Santé or Info Social line (Q21): Q26H. During your most recent experience at the CLSC... Did the health or social services professional you consulted speak to you or the person you helped in English during the appointment?

10.1.9 Importance of Health or Social Services Professional Speaking English

Among English speakers who had used the services of a CLSC, 61.8% felt being served in English by the health and social services professional was very important.

We observe that English-speakers who had used the services of a CLSC in the regions of RTS de l'Ouest-de-l'Île-de-Montréal (80.5%), RTS de l'Outaouais (74.2%) and RTS du Centre-Ouest-de-l'Île-de-Montréal (71.6%) were the most likely to feel being served in English by the health and social services professional was very important.

English speakers who had used the services of a CLSC in the regions of RTS de la Capitale-Nationale (22.2%), RTS de Lanaudière (24.3%) and RTS des Laurentides (27.5%) were the least likely to feel being served in English by the health and social services professional was very important.

Importance of Health or Social Services Professional Speaking English

Region	Very important	Somewhat important		Not at all important
031 Capitale-Nationale (n=69)	22.2%	14.2%	33.5%	30.1%
051 Estrie – CHU de Sherbrooke (n=32)	59.4%	21.4%	16.4%	2.8%
061 Ouest-de-l'Île-de-Montréal (n=120)	80.5%	13.0%	4.3%	2.2%
062 Centre-Ouest-de-l'Île-de-Montréal (n=178)	71.6%	15.5%	3.4%	9.5%
063 Centre-Sud-de-l'Île-de-Montréal (n=77)	65.2%	16.5%	10.6%	7.7%
064 Nord-de-l'Île-de-Montréal (n=73)	60.4%	16.0%	16.5%	7.0%
065 Est-de-l'Île-de-Montréal (n=91)	48.7%	20.5%	16.7%	14.1%
071 Outaouais (n=72)	74.2%	15.6%	3.5%	6.7%
131 Laval (n=98)	55.6%	21.0%	15.0%	8.4%
141 Lanaudière (n=32)	24.3%	54.5%	5.2%	16.1%
151 Laurentides (n=35)	27.5%	46.9%	9.4%	16.3%
161 Montérégie-Centre (n=61)	46.6%	31.4%	15.0%	7.0%
162 Montérégie-Est (n=37)	59.6%	30.1%	9.9%	0.4%
163 Montérégie-Ouest (n=108)	59.9%	22.1%	10.8%	7.2%
Total (n=1,109)	61.8%	20.3%	9.8%	8.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who used the services of a CLSC other than Info Santé or Info Social (Q21): Q26I. During your most recent experience at the CLSC, how important was it to your understanding that the health and social services professional speak in English to you or the person you helped during the appointment? Was it...

Importance of Health or Social Services Professional Speaking English

	Variable	Very important	Somewhat important	Not very important	Not at all important
	Male (n=404)	51.0%	25.8%	13.8%	9.4%
gender	Female (n=705)	71.1%	15.4%	6.3%	7.2%
	Total (n=1,109)	61.8%	20.3%	9.8%	8.2%
	25-44 years (n=138)	58.5%	22.0%	9.4%	10.1%
3,00	45-64 years (n=475)	63.0%	17.5%	10.7%	8.8%
age	65 years and over (n=466)	64.4%	19.6%	10.1%	5.9%
	Total (n=1,090)	61.6%	20.3%	9.8%	8.2%
	less than \$30k (n=150)	76.2%	18.7%	2.5%	2.6%
[\$30-70k (n=290)	60.4%	22.2%	8.1%	9.4%
household income	\$70-100k (n=145)	57.9%	20.1%	18.2%	3.8%
meonie	\$100k and over (n=221)	50.8%	17.8%	13.3%	18.2%
	Total (n=806)	59.6%	19.7%	10.6%	10.1%
knowledge of English and French	bilingual (n=860)	51.8%	25.3%	12.3%	10.6%
	unilingual English (n=247)	94.8%	3.6%	1.4%	0.2%
	Total (n=1,107)	61.7%	20.3%	9.8%	8.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used the services of a CLSC other than Info Santé or Info Social (Q21): Q26I. During your most recent experience at the CLSC, how important was it to your understanding that the health and social services professional speak in English to you or the person you helped during the appointment? Was it...

English-speaking females who had used the services of a CLSC were more likely to feel being served in English by the health and social services professional was very important (71.1%) than were their male counterparts (51.0%).

Across age groups, English speakers who had used the services of a CLSC who were aged 65 years and over were the most likely to feel being served in English by the health and social services professional was very important (64.4%) while those aged 25-44 years were the least likely (58.5%).

With respect to income, those who had used the services of a CLSC who earned less than \$30k were the most likely to feel being served in English by the health and social services professional was very important (76.2%) while those earning \$100k and over were the least likely (50.8%).

English-speakers who had used the services of a CLSC who were unilingual were more likely to feel being served in English by the health and social services professional was very important (94.8%) than their bilingual counterparts (51.8%).

11 Language of Service from Info Santé or Info Social

11.1.1 Used the Services of Info Santé or Info Social

Used the Services of Info Santé or Info Social

	English S	oeakers	French Sp	eakers
Region	yes, either for myself or another	no	yes, either for myself or another	no
031 Capitale-Nationale (n=202)	25.2%	74.8%	21.4%	78.6%
051 Estrie – CHU de Sherbrooke (n=106)	14.6%	85.4%	20.0%	80.0%
061 Ouest-de-l'Île-de-Montréal (n=484)	8.6%	91.4%	7.1%	92.9%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	17.5%	82.5%	24.3%	75.7%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	28.3%	71.7%	13.6%	86.4%
064 Nord-de-l'Île-de-Montréal (n=251)	20.0%	80.0%	32.1%	67.9%
065 Est-de-l'Île-de-Montréal (n=215)	13.3%	86.7%	31.1%	68.9%
071 Outaouais (n=200)	29.5%	70.5%	35.6%	64.4%
111 Gaspésie (n=75)	24.2%	75.8%	9.8%	90.2%
131 Laval (n=257)	24.4%	75.6%	24.4%	75.6%
141 Lanaudière (n=75)	36.5%	63.5%	13.6%	86.4%
151 Laurentides (n=110)	30.4%	69.6%	12.7%	87.3%
161 Montérégie-Centre (n=150)	18.7%	81.3%	27.5%	72.5%
162 Montérégie-Est (n=77)	26.7%	73.3%	16.8%	83.2%
163 Montérégie-Ouest (n=240)	26.9%	73.1%	23.9%	76.1%
Total (n=3,133)	19.7%	80.3%	21.4%	78.6%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q27. Within the last twelve months, in your region, have you used the services of Info Santé or Info Social either for yourself or to help another person?

Among English speakers, 19.7% used the services of Info Santé or Info Social. This was lower than the proportion reported for French speakers (21.4%).

We observe that English-speakers in the regions of RTS de Lanaudière (36.5%), RTS des Laurentides (30.4%) and RTS de l'Outaouais (29.5%) were the most likely to have used the services of Info Santé or Info Social.

English speakers in the regions of RTS de l'Ouest-del'Île-de-Montréal (8.6%), RTS de l'Est-de-l'Île-de-Montréal (13.3%) and RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (14.6%) were the least likely to have used the services of Info Santé or Info Social.

Used the Services of Info Santé or Info Social

Variable		English Speakers		French Speakers	
		yes, either for myself or another	no	yes, either for myself or another	no
	Male	16.4%	83.6%	20.6%	79.4%
gender	Female	23.0%	77.0%	22.1%	77.9%
	Total	19.7%	80.3%	21.4%	78.6%
	18-24 years	9.8%	90.2%	19.8%	80.2%
	25-44 years	28.3%	71.7%	26.9%	73.1%
age	45-64 years	17.1%	82.9%	22.5%	77.5%
	65 years and over	15.0%	85.0%	17.1%	82.9%
	Total	19.9%	80.1%	21.5%	78.5%
	less than \$30k	20.3%	79.7%	27.4%	72.6%
ĺ	\$30-70k	19.5%	80.5%	26.0%	74.0%
household income	\$70-100k	18.8%	81.2%	16.4%	83.6%
meeme	\$100k and over	24.6%	75.4%	20.3%	79.7%
	Total	21.2%	78.8%	22.5%	77.5%
knowledge of English and French	bilingual	19.6%	80.4%		
	unilingual English	20.5%	79.5%		
	Total	19.7%	80.3%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q27. Within the last twelve months, in your region, have you used the services of Info Santé or Info Social either for yourself or to help another person?

English-speaking females were more likely to have used the services of Info Santé or Info Social (23.0%) than were their male counterparts (16.4%).

Across age groups, English speakers who were aged 25-44 years were the most likely to have used the services of Info Santé or Info Social (28.3%) while those aged 18-24 years were the least likely (9.8%).

With respect to income, those who earned \$100k and over were the most likely to have used the services of Info Santé or Info Social (24.6%) while those earning \$70-100k were the least likely (18.8%).

English-speakers who were unilingual English were more likely to have used the services of Info Santé or Info Social (20.5%) than their bilingual counterparts (19.6%).

11.1.2 Served in English by Info Santé or Info Social

Served in English by Info Santé or Info Social

yes	no
69.0%	31.0%
79.6%	20.4%
66.2%	33.8%
71.0%	29.0%
52.8%	47.2%
65.5%	34.5%
30.9%	69.1%
62.3%	37.7%
59.0%	41.0%
	69.0% 79.6% 66.2% 71.0% 52.8% 65.5% 30.9% 62.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used the services of Info Santé or Info Social (Q27): Q28A. Were you served in English by the person you spoke to at Info Santé or Info Social?

Among English speakers who had used the services of Info Santé or Info Social, 41.0% were not served in English.

English speakers who had used the services of Info Santé or Info Social in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (20.4%), RTS du Nord-de-l'Île-de-Montréal (29.0%) and RTS de l'Ouest-de-l'Île-de-Montréal (31.0%) were the least likely to report not being served in English.

Served in English by Info Santé or Info Social

	Variable	yes	no		
	Male (n=191)	65.6%	34.4%		
gender	Female (n=331)	54.4%	45.6%		
	Total (n=522)	59.0%	41.0%		
	25-44 years (n=103)	59.9%	40.1%		
2.70	45-64 years (n=231)	59.1%	40.9%		
age	65 years and over (n=171)	74.7%	25.3%		
	Total (n=515)	59.2%	40.8%		
	less than \$30k (n=68)	89.9%	10.1%		
ĺ	\$30-70k (n=133)	52.0%	48.0%		
household income	\$70-100k (n=74)	57.5%	42.5%		
meonie	\$100k and over (n=117)	48.7%	51.3%		
	Total (n=392)	57.3%	42.7%		
knowledge of English and French	bilingual (n=404)	49.9%	50.1%		
	unilingual English (n=118)	94.4%	5.6%		
	Total (n=522)	59.0%	41.0%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used the services of Info Santé or Info Social (Q27): Q28A. Were you served in English by the person you spoke to at Info Santé or Info Social?

English-speaking females who had used the services of Info Santé or Info Social were more likely to not being served in English (45.6%) than were their male counterparts (34.4%).

Across age groups, English speakers who had used the services of Info Santé or Info Social who were aged 18-24 years were the most likely to not being served in English (80.2%) while those aged 65 years and over were the least likely (25.3%).

With respect to income, those who had used the services of Info Santé or Info Social who earned \$100k and over were the most likely to not being served in English (51.3%) while those earning less than \$30k were the least likely (10.1%).

English-speakers who had used the services of Info Santé or Info Social who were bilingual were more likely to not being served in English (50.1%) than their unilingual English counterparts (5.6%).

11.1.3 Requested and Received Service in English from Info Santé or Info Social

Requested and Received Service in English from Info Santé or Info Social

	Variable	Served directly in English	Had to ask for service in English	Cannot remember
	Male (n=112)	53.8%	43.0%	3.2%
gender	Female (n=189)	58.0%	36.7%	5.3%
	Total (n=301)	56.0%	39.7%	4.3%
	25-44 years (n=51)	51.7%	44.3%	3.9%
2.00	45-64 years (n=125)	57.6%	37.2%	5.2%
age	65 years and over (n=120)	67.3%	28.0%	4.7%
	Total (n=298)	56.2%	39.4%	4.4%
	less than \$30k (n=53)	67.8%	26.3%	5.9%
	\$30-70k (n=81)	52.1%	44.9%	2.9%
household income	\$70-100k (n=38)	65.3%	32.2%	2.5%
meome	\$100k and over (n=53)	64.2%	32.0%	3.8%
	Total (n=225)	61.9%	34.2%	3.9%
knowledge of English and French	bilingual (n=200)	54.6%	40.4%	5.0%
	unilingual English (n=101)	59.0%	38.1%	2.9%
	Total (n=301)	56.0%	39.7%	4.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those served in English by Info Santé or Info Social (Q28A): Q28B. Were you served directly in English or did you or the person you helped have to ask for service in English when you spoke to the person on Info Santé or Info Social?

English-speaking males who were served in English by Info Santé or Info Social were more likely to have had to ask for service in English (43.0%) than were their female counterparts (36.7%).

Across age groups, English speakers who were served in English by Info Santé or Info Social who were aged 18-24 years were the most likely to have had to ask for service in English (44.8%) while those aged 65 years and over were the least likely (28.0%).

With respect to income, those who were served in English by Info Santé or Info Social who earned \$30-70k were the most likely to have had to ask for service in English (44.9%) while those earning less than \$30k were the least likely (26.3%).

English-speakers who were served in English by Info Santé or Info Social who were bilingual were more likely to have had to ask for service in English (40.4%) than their unilingual English counterparts (38.1%).

11.1.4 Importance of English Services from Info Santé or Info Social Among Those Served in English

Importance of English Services from Info Santé or Info Social Among Those Served in English

Region	It was very important to receive the service in English	The service in French was acceptable
061 Ouest-de-l'Île-de-Montréal (n=38)	100.0%	-
062 Centre-Ouest-de-l'Île-de-Montréal (n=58)	77.7%	22.3%
064 Nord-de-l'Île-de-Montréal (n=30)	97.8%	2.2%
Total (n=304)	88.4%	11.6%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those served in English by Info Santé or Info Social (Q28A): Q28C. Considering the situation, do you feel it was VERY IMPORTANT to receive the service in English or was it acceptable to receive the service in French?

Among English speakers who were served in English by Info Santé or Info Social, 88.4% felt it was very important to be served in English.

Importance of English Services from Info Santé or Info Social Among Those Served in English

	Variable	It was very important to receive the service in English	The service in French was acceptable
	Male (n=111)	81.7%	18.3%
gender	Female (n=193)	94.2%	5.8%
	Total (n=304)	88.4%	11.6%
	25-44 years (n=52)	84.1%	15.9%
	45-64 years (n=127)	92.2%	7.8%
age	65 years and over (n=120)	93.4%	6.6%
	Total (n=301)	88.3%	11.7%
	less than \$30k (n=55)	88.1%	11.9%
harra hald	\$30-70k (n=81)	92.3%	7.7%
household income	\$70-100k (n=38)	89.4%	10.6%
meome	\$100k and over (n=53)	79.2%	20.8%
	Total (n=227)	86.6%	13.4%
knowledge of English and French	bilingual (n=202)	82.9%	17.1%
	unilingual English (n=102)	99.6%	0.4%
	Total (n=304)	88.4%	11.6%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those served in English by Info Santé or Info Social (Q28A): Q28C. Considering the situation, do you feel it was VERY IMPORTANT to receive the service in English or was it acceptable to receive the service in French?

English-speaking females who were served in English by Info Santé or Info Social were more likely to feel it was very important to be served in English (94.2%) than were their male counterparts (81.7%).

Across age groups, English speakers who were served in English by Info Santé or Info Social who were aged 25-44 years were the least likely to feel it was very important to be served in English (84.1%).

With respect to income, those who were served in English by Info Santé or Info Social who earned \$30-70k were the most likely to feel it was very important to be served in English (92.3%) while those earning \$100k and over were the least likely (79.2%).

English-speakers who were served in English by Info Santé or Info Social who were unilingual English were more likely to feel it was very important to be served in English (99.6%) than their bilingual counterparts (82.9%).

11.1.5 Not Served in English by Info Santé or Info Social Despite Request

Not Served in English by Info Santé or Info Social Despite Request

	Variable	yes	no
	Male (n=78)	17.8%	82.2%
gender	Female (n=131)	34.3%	65.7%
	Total (n=209)	28.2%	71.8%
	25-44 years (n=50)	18.8%	81.2%
2.50	45-64 years (n=97)	27.8%	72.2%
age	65 years and over (n=50)	19.4%	80.6%
	Total (n=205)	28.6%	71.4%
	\$30-70k (n=51)	25.5%	74.5%
household income	\$70-100k (n=34)	13.1%	86.9%
, nousenoia income	\$100k and over (n=62)	25.9%	74.1%
	Total (n=159)	22.9%	77.1%
knowledge of English and French	bilingual (n=196)	27.6%	72.4%
	Total (n=209)	28.2%	71.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who were not served in English by Info Santé or Info Social (Q28A): Q28D. Did you or the person you helped ask for service in English?

English-speaking females who were not served in English by Info Santé or Info Social were more likely to have asked for service in English (34.3%) than were their male counterparts (17.8%).

Across age groups, English speakers who were not served in English by Info Santé or Info Social who were aged were the least likely to have asked for service in English (18.8%).

With respect to income, those who were not served in English by Info Santé or Info Social who earned \$100k and over were the most likely to have asked for service in English (25.9%).

11.1.6 Importance of English Services from Info Santé or Info Social Among Those Not Served in English

Importance of English Services from Info Santé or Info Social Among Those Not Served in English

	Variable	It was very important to receive the service in English	The service in French was acceptable
	Male (n=79)	29.3%	70.7%
gender	Female (n=135)	27.8%	72.2%
	Total (n=214)	28.3%	71.7%
	25-44 years (n=50)	27.3%	72.7%
2.00	45-64 years (n=103)	40.1%	59.9%
age	65 years and over (n=49)	36.0%	64.0%
	Total (n=210)	28.7%	71.3%
	\$30-70k (n=52)	26.7%	73.3%
household income	\$70-100k (n=35)	31.7%	68.3%
	\$100k and over (n=62)	21.9%	78.1%
	Total (n=161)	25.4%	74.6%
knowledge of	bilingual (n=200)	26.5%	73.5%
English and French	Total (n=214)	28.3%	71.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who were not served in English by Info Santé or Info Social (Q28A): Q28E. Considering the situation, do you feel it would have been VERY IMPORTANT to receive the service in English or was receiving service in French acceptable?

English-speaking males who were not served in English by Info Santé or Info Social were more likely to feel it was very important to be served in English (29.3%) than were their female counterparts (27.8%).

Across age groups, English speakers who were not served in English by Info Santé or Info Social who were aged 45-64 years were the most likely to feel it was very important to be served in English (40.1%).

With respect to income, those who were not served in English by Info Santé or Info Social who earned \$70-100k were the most likely to feel it was very important to be served in English (31.7%).

12 Language of Service at Hospital Emergency Rooms or Out-patient Clinics

12.1.1 Used the Services of a Hospital Emergency Room or Out-patient Clinic

Used the Services of a Hospital Emergency Room or Out-patient Clinic

	English S	peakers	French S	peakers
Region	yes, either for myself or another	no	yes, either for myself or another	no
031 Capitale-Nationale (n=202)	40.5%	59.5%	32.1%	67.9%
051 Estrie – CHU de Sherbrooke (n=106)	59.8%	40.2%	34.8%	65.2%
061 Ouest-de-l'Île-de-Montréal (n=484)	34.3%	65.7%	37.5%	62.5%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	42.7%	57.3%	31.6%	68.4%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	46.2%	53.8%	30.4%	69.6%
064 Nord-de-l'Île-de-Montréal (n=251)	32.3%	67.7%	34.0%	66.0%
065 Est-de-l'Île-de-Montréal (n=215)	35.2%	64.8%	24.5%	75.5%
071 Outaouais (n=200)	47.3%	52.7%	28.5%	71.5%
111 Gaspésie (n=75)	46.9%	53.1%	23.5%	76.5%
131 Laval (n=257)	39.3%	60.7%	29.7%	70.3%
141 Lanaudière (n=75)	46.1%	53.9%	26.1%	73.9%
151 Laurentides (n=110)	38.1%	61.9%	41.5%	58.5%
161 Montérégie-Centre (n=150)	39.4%	60.6%	26.9%	73.1%
162 Montérégie-Est (n=77)	42.5%	57.5%	35.2%	64.8%
163 Montérégie-Ouest (n=240)	38.8%	61.2%	31.7%	68.3%
Total (n=3,133)	40.0%	60.0%	31.8%	68.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q29. Within the last twelve months, in your region, have you used the services of a hospital emergency room or out-patient clinic either for yourself or to help another person?

Among English speakers, 40.0% used the services of a hospital emergency room or outpatient clinic within the past year.

We observe that English-speakers in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (59.8%), RTS de l'Outaouais (47.3%) and RTS de la Gaspésie (46.9%) were the most likely to have used the services of a hospital emergency room or outpatient clinic.

English speakers in the regions of RTS du Nord-de-l'Île-de-Montréal (32.3%), RTS de l'Ouest-de-l'Île-de-Montréal (34.3%) and RTS de l'Est-de-l'Île-de-Montréal (35.2%) were the least likely to have used the services of a hospital emergency room or out-patient clinic.

Used the Services of a Hospital Emergency Room or Out-patient Clinic

Variable		English Speakers		French Speakers	
		yes, either for myself or another	no	yes, either for myself or another	no
	Male	36.7%	63.3%	26.3%	73.7%
gender	Female	43.3%	56.7%	37.1%	62.9%
	Total	40.0%	60.0%	31.8%	68.2%
	18-24 years	36.8%	63.2%	13.2%	86.8%
	25-44 years	40.8%	59.2%	34.2%	65.8%
age	45-64 years	40.5%	59.5%	36.4%	63.6%
•	65 years and over	40.1%	59.9%	32.5%	67.5%
	Total	40.1%	59.9%	31.8%	68.2%
	less than \$30k	37.1%	62.9%	37.9%	62.1%
	\$30-70k	44.0%	56.0%	28.7%	71.3%
household income	\$70-100k	34.4%	65.6%	27.8%	72.2%
meome	\$100k and over	39.1%	60.9%	36.7%	63.3%
•	Total	39.4%	60.6%	32.4%	67.6%
knowledge of	bilingual	38.5%	61.5%		
English and	unilingual English	46.2%	53.8%		
French	Total	40.0%	60.0%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q29. Within the last twelve months, in your region, have you used the services of a hospital emergency room or out-patient clinic either for yourself or to help another person?

English-speaking females were more likely to have used the services of a hospital emergency room or out-patient clinic (43.3%) than were their male counterparts (36.7%).

Across age groups, English speakers who were aged 25-44 years were the most likely to have used the services of a hospital emergency room or out-patient clinic (40.8%) while those aged 18-24 years were the least likely (36.8%).

With respect to income, those who earned \$30-70k were the most likely to have used the services of a hospital emergency room or outpatient clinic (44.0%) while those earning \$70-100k were the least likely (34.4%).

English-speakers who were unilingual English were more likely to have used the services of a hospital emergency room or out-patient clinic (46.2%) than their bilingual counterparts (38.5%).

12.1.2 Served in English at a Hospital Emergency Room or Out-patient Clinic

Served in English at a Hospital Emergency Room or Out-patient Clinic

Region	yes	no
031 Capitale-Nationale (n=80)	15.3%	84.7%
051 Estrie – CHU de Sherbrooke (n=51)	38.4%	61.6%
061 Ouest-de-l'Île-de-Montréal (n=190)	85.7%	14.3%
062 Centre-Ouest-de-l'Île-de-Montréal (n=192)	95.8%	4.2%
063 Centre-Sud-de-l'Île-de-Montréal (n=95)	73.8%	26.2%
064 Nord-de-l'Île-de-Montréal (n=88)	65.2%	34.8%
065 Est-de-l'Île-de-Montréal (n=85)	35.5%	64.5%
071 Outaouais (n=89)	77.3%	22.7%
111 Gaspésie (n=33)	73.7%	26.3%
131 Laval (n=86)	40.3%	59.7%
141 Lanaudière (n=31)	11.6%	88.4%
151 Laurentides (n=35)	63.3%	36.7%
161 Montérégie-Centre (n=52)	55.6%	44.4%
163 Montérégie-Ouest (n=86)	81.2%	18.8%
Total (n=1,220)	69.0%	31.0%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used an emergency room or out-patient clinic within the previous year (Q29): Q30A. Were you or the person you helped served in English at the hospital emergency room or out-patient clinic?

Among English speakers who used the services of an ER or out-patient clinic, 31.0% were not served in English.

We observe that English-speakers who used the services of an ER or out-patient clinic in the regions of RTS de Lanaudière (88.4%), RTS de la Capitale-Nationale (84.7%) and RTS de l'Est-de-l'Île-de-Montréal (64.5%) were the most likely to report not being served in English.

English speakers who used the services of an ER or outpatient clinic in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (4.2%), RTS de l'Ouest-de-l'Île-de-Montréal (14.3%) and RTS de la Montérégie-Ouest (18.8%) were the least likely to report not being served in English.

Served in English at a Hospital Emergency Room or Out-patient Clinic

	Variable	yes	no
	Male (n=447)	68.3%	31.7%
gender	Female (n=773)	69.5%	30.5%
	Total (n=1,220)	69.0%	31.0%
	25-44 years (n=136)	63.6%	36.4%
2.00	45-64 years (n=556)	63.8%	36.2%
age	65 years and over (n=482)	80.8%	19.2%
	Total (n=1,196)	69.0%	31.0%
	less than \$30k (n=164)	77.3%	22.7%
	\$30-70k (n=315)	62.6%	37.4%
household income	\$70-100k (n=162)	68.8%	31.2%
meome	\$100k and over (n=264)	74.4%	25.6%
	Total (n=905)	69.7%	30.3%
knowledge of	bilingual (n=941)	62.2%	37.8%
English and French	unilingual English (n=278)	92.5%	7.5%
	Total (n=1,219)	69.0%	31.0%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used an emergency room or out-patient clinic within the previous year (Q29): Q30A. Were you or the person you helped served in English at the hospital emergency room or out-patient clinic?

English-speaking males who used the services of an ER or out-patient clinic were more likely to report not being served in English (31.7%) than were their female counterparts (30.5%).

Across age groups, English speakers who used the services of an ER or out-patient clinic who were aged 25-44 years were the most likely to report not being served in English (36.4%).

With respect to income, those who used the services of an ER or out-patient clinic who earned \$30-70k were the most likely to report not being served in English (37.4%) while those earning less than \$30k were the least likely (22.7%).

English-speakers who used the services of an ER or outpatient clinic who were bilingual were more likely to report not being served in English (37.8%) than their unilingual English counterparts (7.5%).

12.1.3 Requested and Received Service in English at the ER or Out-patient Clinic

Requested and Received Service in English at the ER or Out-patient Clinic

Region	Served directly in English	Had to ask for service in English	cannot remember
061 Ouest-de-l'Île-de-Montréal (n=159)	81.2%	18.1%	0.7%
062 Centre-Ouest-de-l'Île-de-Montréal (n=179)	84.3%	15.1%	0.6%
063 Centre-Sud-de-l'Île-de-Montréal (n=76)	75.6%	19.3%	5.1%
064 Nord-de-l'Île-de-Montréal (n=58)	80.3%	18.2%	1.5%
065 Est-de-l'Île-de-Montréal (n=31)	70.4%	29.6%	-
071 Outaouais (n=73)	75.0%	25.0%	-
131 Laval (n=39)	68.0%	32.0%	-
161 Montérégie-Centre (n=31)	84.6%	11.7%	3.7%
163 Montérégie-Ouest (n=65)	88.6%	10.3%	1.1%
Total (n=821)	80.1%	18.7%	1.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those served in English during recent visit to an emergency room or out-patient clinic (Q30A): Q30B. Were you served directly in English or did you or the person you helped have to ask for service in English at the hospital emergency room or out-patient clinic?

Among English speakers who were served in English at the ER or out-patient clinic, 18.7% had to ask for service in English.

We observe that English-speakers who were served in English at the ER or out-patient clinic in the region RTS de Laval (32.0%) were the most likely to have had to ask for service in English.

English speakers who were served in English at the ER or out-patient clinic in the region of RTS de la Montérégie-Ouest (10.3%) were the least likely to have had to ask for service in English.

Requested and Received Service in English at the ER or Out-patient Clinic

	Variable	Served directly in English	Had to ask for service in English	cannot remember
	Male (n=308)	79.5%	19.8%	0.6%
gender	Female (n=513)	80.6%	17.8%	1.6%
	Total (n=821)	80.1%	18.7%	1.2%
	25-44 years (n=88)	78.7%	20.1%	1.2%
2.00	45-64 years (n=335)	77.6%	21.2%	1.2%
age	65 years and over (n=366)	81.1%	16.9%	1.9%
	Total (n=807)	80.1%	18.7%	1.2%
	less than \$30k (n=122)	82.5%	15.7%	1.8%
ĺ	\$30-70k (n=219)	69.9%	29.6%	0.5%
household income	\$70-100k (n=100)	80.4%	19.6%	-
meome	\$100k and over (n=175)	81.5%	16.3%	2.2%
	Total (n=616)	77.8%	21.0%	1.2%
knowledge of	bilingual (n=569)	79.5%	18.9%	1.6%
English and	unilingual English (n=251)	81.5%	18.4%	0.2%
French	Total (n=820)	80.1%	18.7%	1.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those served in English during recent visit to an emergency room or out-patient clinic (Q30A): Q30B. Were you served directly in English or did you or the person you helped have to ask for service in English at the hospital emergency room or out-patient clinic?

English-speaking males who were served in English at the ER or out-patient clinic were more likely to have had to ask for service in English (19.8%) than were their female counterparts (17.8%).

Across age groups, English speakers who were served in English at the ER or out-patient clinic who were aged 45-64 years were the most likely to have had to ask for service in English (21.2%).

With respect to income, those who were served in English at the ER or out-patient clinic who earned \$30-70k were the most likely to have had to ask for service in English (29.6%) while those earning less than \$30k were the least likely (15.7%).

English-speakers who were served in English at the ER or out-patient clinic who were bilingual were more likely to have had to ask for service in English (18.9%) than their unilingual English counterparts (18.4%).

12.1.4 Importance of English Services at the ER or Out-patient Clinic Among Those Served in English

Importance of English Services at the ER or Out-patient Clinic Among Those Served in English

Region	Region It was very important to receive the service in English				
061 Ouest-de-l'Île-de-Montréal (n=160)	77.3%	22.7%			
062 Centre-Ouest-de-l'Île-de-Montréal (n=180)	94.5%	5.5%			
063 Centre-Sud-de-l'Île-de-Montréal (n=77)	75.4%	24.6%			
064 Nord-de-l'Île-de-Montréal (n=59)	81.6%	18.4%			
065 Est-de-l'Île-de-Montréal (n=33)	77.9%	22.1%			
071 Outaouais (n=73)	89.2%	10.8%			
131 Laval (n=40)	76.8%	23.2%			
161 Montérégie-Centre (n=31)	44.6%	55.4%			
163 Montérégie-Ouest (n=64)	74.3%	25.7%			
Total (n=828)	82.0%	18.0%			

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those served in English during recent visit to an emergency room or out-patient clinic (Q30A): Q30C. Considering the situation, do you feel it was VERY IMPORTANT to receive the service in English or was it acceptable to receive the service in French?

Among English speakers who were served in English at the ER or out-patient clinic, 82.0% felt it was very important to be served in English.

We observe that English-speakers who were served in English at the ER or out-patient clinic in the region of RTS du Centre-Ouest-de-l'Île-de-Montréal (94.5%) were the most likely to feel it was very important to be served in English.

English speakers who were served in English at the ER or out-patient clinic in the region of RTS de la Montérégie-Centre (44.6%) were the least likely to feel it was very important to be served in English.

Importance of English Services at the ER or Out-patient Clinic Among Those Served in English

	Variable	It was very important to receive the service in English	The service in French was acceptable
	Male (n=311)	76.9%	23.1%
gender	Female (n=517)	86.3%	13.7%
	Total (n=828)	82.0%	18.0%
	25-44 years (n=89)	84.4%	15.6%
2.00	45-64 years (n=338)	88.2%	11.8%
age	65 years and over (n=370)	87.6%	12.4%
	Total (n=814)	81.7%	18.3%
	less than \$30k (n=126)	94.1%	5.9%
	\$30-70k (n=219)	86.9%	13.1%
household income	\$70-100k (n=100)	77.9%	22.1%
meome	\$100k and over (n=178)	79.9%	20.1%
	Total (n=623)	84.0%	16.0%
knowledge of	bilingual (n=576)	75.1%	24.9%
English and	unilingual English (n=251)	97.7%	2.3%
French	Total (n=827)	82.0%	18.0%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those served in English during recent visit to an emergency room or out-patient clinic (Q30A): Q30C. Considering the situation, do you feel it was VERY IMPORTANT to receive the service in English or was it acceptable to receive the service in French?

English-speaking females who were served in English at the ER or out-patient clinic were more likely to feel it was very important to be served in English (86.3%) than were their male counterparts (76.9%).

Across age groups, English speakers who were served in English at the ER or out-patient clinic who were aged 45-64 years were the most likely to feel it was very important to be served in English (88.2%).

With respect to income, those who were served in English at the ER or out-patient clinic who earned less than \$30k were the most likely to feel it was very important to be served in English (94.1%) while those earning \$70-100k were the least likely (77.9%).

English-speakers who were served in English at the ER or out-patient clinic who were unilingual English were more likely to feel it was very important to be served in English (97.7%) than their bilingual counterparts (75.1%).

12.1.5 Not Served in English at the ER or Out-patient Clinic Despite Request

Not Served in English at the ER or Out-patient Clinic Despite Request

	Variable	yes	no
	Male (n=133)	24.8%	75.2%
gender	Female (n=252)	24.6%	75.4%
	Total (n=385)	24.7%	75.3%
	25-44 years (n=47)	24.4%	75.6%
2.00	45-64 years (n=214)	27.5%	72.5%
age	65 years and over (n=110)	27.5%	72.5%
	Total (n=375)	24.5%	75.5%
	less than \$30k (n=37)	14.6%	85.4%
	\$30-70k (n=96)	21.9%	78.1%
household income	\$70-100k (n=60)	20.2%	79.8%
	\$100k and over (n=86)	38.0%	62.0%
	Total (n=279)	25.4%	74.6%
knowledge of	bilingual (n=358)	21.6%	78.4%
English and French	Total (n=385)	24.7%	75.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who were not served in English during recent visit to an emergency room or outpatient clinic (Q30A): Q30D. Did you or the person you helped ask for service in English?

Among English speakers who were not served in English at the ER or out-patient clinic, 24.7% had asked for service in English.

With respect to income, those who were not served in English at the ER or out-patient clinic who earned \$100k and over were the most likely to have asked for service in English (38.0%) while those earning less than \$30k were the least likely (14.6%).

12.1.6 Importance of English Services at the ER or Out-patient Clinic Among Those Not Served in English

Importance of English Services at the ER or Out-patient Clinic Among Those Not Served in English

	Variable	It was very important to receive the service in English	The service in French was acceptable
	Male (n=131)	33.9%	66.1%
gender	Female (n=245)	49.9%	50.1%
	Total (n=376)	42.2%	57.8%
	25-44 years (n=47)	40.0%	60.0%
2.00	45-64 years (n=211)	47.5%	52.5%
age	65 years and over (n=104)	42.6%	57.4%
	Total (n=366)	41.8%	58.2%
	less than \$30k (n=35)	26.9%	73.1%
	\$30-70k (n=93)	37.3%	62.7%
household income	\$70-100k (n=60)	32.4%	67.6%
	\$100k and over (n=85)	54.5%	45.5%
	Total (n=273)	40.3%	59.7%
knowledge of	bilingual (n=350)	39.3%	60.7%
English and French	Total (n=376)	42.2%	57.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who were not served in English during recent visit to an emergency room or out-patient clinic (Q30A): Q30E. Considering the situation, do you feel it would have been VERY IMPORTANT to receive the service in English or was receiving service in French acceptable?

Among English speakers who were not served in English at the ER or out-patient clinic, 42.2% felt it was very important to be served in English.

English-speaking females who were not served in English at the ER or out-patient clinic were more likely to feel it was very important to be served in English (49.9%) than were their male counterparts (33.9%).

Across age groups, English speakers who were not served in English at the ER or out-patient clinic who were aged 45-64 years were the most likely to feel it was very important to be served in English (47.5%).

With respect to income, those who were not served in English at the ER or out-patient clinic who earned \$100k and over were the most likely to feel it was very important to be served in English (54.5%) while those earning less than \$30k were the least likely (26.9%).

12.1.7 Admission Personnel Spoke English at a Hospital Emergency Room or Out-patient Clinic

Admission Personnel Spoke English at a Hospital Emergency Room or Out-patient Clinic

Region	Yes	No
031 Capitale-Nationale (n=81)	16.0%	84.0%
051 Estrie – CHU de Sherbrooke (n=50)	38.3%	61.7%
061 Ouest-de-l'Île-de-Montréal (n=189)	86.7%	13.3%
062 Centre-Ouest-de-l'Île-de-Montréal (n=191)	94.8%	5.2%
063 Centre-Sud-de-l'Île-de-Montréal (n=88)	84.5%	15.5%
064 Nord-de-l'Île-de-Montréal (n=88)	45.3%	54.7%
065 Est-de-l'Île-de-Montréal (n=84)	29.2%	70.8%
071 Outaouais (n=87)	73.2%	26.8%
111 Gaspésie (n=33)	69.0%	31.0%
131 Laval (n=86)	38.5%	61.5%
141 Lanaudière (n=30)	8.6%	91.4%
151 Laurentides (n=35)	53.8%	46.2%
161 Montérégie-Centre (n=52)	64.6%	35.4%
163 Montérégie-Ouest (n=84)	66.2%	33.8%
Total (n=1,204)	66.2%	33.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used an emergency room or out-patient clinic within the previous year (Q29): Q30F. During your experience at the ER or out-patient clinic... Did admission personnel speak in English to you or the person you helped?

Among English speakers who used the services of an ER or outpatient clinic, 33.8% reported the admission personnel did not speak English.

We observe that English-speakers who used the services of an ER or out-patient clinic in the regions of RTS de Lanaudière (91.4%), RTS de la Capitale-Nationale (84.0%) and RTS de l'Est-de-l'Île-de-Montréal (70.8%) were the most likely to report the admission personnel did not speak English.

English speakers who used the services of an ER or out-patient clinic in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (5.2%), RTS de l'Ouest-de-l'Île-de-Montréal (13.3%) and RTS du Centre-Sud-de-l'Île-de-Montréal (15.5%) were the least likely to report the admission personnel did not speak English.

Admission Personnel Spoke English at a Hospital Emergency Room or Out-patient Clinic

	Variable	Yes	No
	Male (n=439)	69.1%	30.9%
gender	Female (n=765)	63.8%	36.2%
	Total (n=1,204)	66.2%	33.8%
	25-44 years (n=138)	59.6%	40.4%
2.50	45-64 years (n=549)	61.3%	38.7%
age	65 years and over (n=474)	78.9%	21.1%
	Total (n=1,182)	66.2%	33.8%
	less than \$30k (n=164)	68.7%	31.3%
	\$30-70k (n=311)	63.8%	36.2%
household income	\$70-100k (n=152)	67.4%	32.6%
meome	\$100k and over (n=266)	69.8%	30.2%
	Total (n=893)	67.2%	32.8%
knowledge of	bilingual (n=928)	60.6%	39.4%
English and	unilingual English (n=275)	84.8%	15.2%
French	Total (n=1,203)	66.2%	33.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used an emergency room or out-patient clinic within the previous year (Q29): Q30F. During your experience at the ER or out-patient clinic... Did admission personnel speak in English to you or the person you helped?

English-speaking females who used the services of an ER or out-patient clinic were more likely to report the admission personnel did not speak English (36.2%) than were their male counterparts (30.9%).

Across age groups, English speakers who used the services of an ER or out-patient clinic who were aged 25-44 years were the most likely to report the admission personnel did not speak English (40.4%).

With respect to income, those who used the services of an ER or out-patient clinic who earned \$30-70k were the most likely to report the admission personnel did not speak English (36.2%) while those earning \$100k and over were the least likely (30.2%).

English-speakers who used the services of an ER or out-patient clinic who were bilingual were more likely to report the admission personnel did not speak English (39.4%) than their unilingual English counterparts (15.2%).

12.1.8 Forms in English at a Hospital Emergency Room or Out-patient Clinic

Among English speakers who used the services of an ER or out-patient clinic, 38.5% reported the various forms were not provided in English.

We observe that English-speakers who used the services of an ER or out-patient clinic in the regions of RTS de l'Est-de-l'Île-de-Montréal (80.1%) and RTS de la Capitale-Nationale (79.7%) were the most likely to report the various forms were not provided in English.

English speakers who used the services of an ER or outpatient clinic in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (8.1%), RTS de l'Ouest-de-l'Île-de-Montréal (19.5%) and RTS de la Montérégie-Ouest (22.1%) were the least likely to report the various forms were not provided in English.

Forms in English at a Hospital Emergency Room or Out-patient Clinic

Region	Yes	No
031 Capitale-Nationale (n=78)	20.3%	79.7%
051 Estrie – CHU de Sherbrooke (n=37)	26.5%	73.5%
061 Ouest-de-l'Île-de-Montréal (n=163)	80.5%	19.5%
062 Centre-Ouest-de-l'Île-de-Montréal (n=164)	91.9%	8.1%
063 Centre-Sud-de-l'Île-de-Montréal (n=83)	72.6%	27.4%
064 Nord-de-l'Île-de-Montréal (n=78)	42.5%	57.5%
065 Est-de-l'Île-de-Montréal (n=79)	19.9%	80.1%
071 Outaouais (n=76)	72.6%	27.4%
111 Gaspésie (n=30)	69.0%	31.0%
131 Laval (n=81)	39.6%	60.4%
151 Laurentides (n=35)	49.1%	50.9%
161 Montérégie-Centre (n=44)	46.3%	53.7%
163 Montérégie-Ouest (n=77)	77.9%	22.1%
Total (n=1,074)	61.5%	38.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used an emergency room or out-patient clinic within the previous year (Q29): Q30G. During your most recent experience at the ER or out-patient clinic... Were any forms you were required to fill out, or other information forms given to you (or the person you helped) provided in English?

English-speaking males who used the services of an ER or out-patient clinic were more likely to report the various forms were not provided in English (40.7%) than were their female counterparts (36.7%).

Across age groups, English speakers who used the services of an ER or out-patient clinic who were aged 45-64 years were the most likely to report the various forms were not provided in English (44.7%) while those aged 18-24 years were the least likely (16.2%).

With respect to income, those who used the services of an ER or out-patient clinic who earned \$30-70k were the most likely to report the various forms were not provided in English (44.4%) while those earning \$100k and over were the least likely (30.0%).

English-speakers who used the services of an ER or outpatient clinic who were bilingual were more likely to report the various forms were not provided in English (44.0%) than their unilingual English counterparts (21.0%).

Forms in English at a Hospital Emergency Room or Out-patient Clinic

	Variable	Yes	No
	Male (n=401)	59.3%	40.7%
gender	Female (n=673)	63.3%	36.7%
	Total (n=1,074)	61.5%	38.5%
	25-44 years (n=122)	58.7%	41.3%
200	45-64 years (n=493)	55.3%	44.7%
age	65 years and over (n=417)	64.6%	35.4%
	Total (n=1,054)	61.8%	38.2%
	less than \$30k (n=152)	64.9%	35.1%
h a considerated	\$30-70k (n=275)	55.6%	44.4%
household income	\$70-100k (n=137)	66.3%	33.7%
l meonie	\$100k and over (n=240)	70.0%	30.0%
	Total (n=804)	63.7%	36.3%
knowledge of	bilingual (n=824)	56.0%	44.0%
English and	unilingual English (n=250)	79.0%	21.0%
French	Total (n=1,074)	61.5%	38.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used an emergency room or out-patient clinic within the previous year (Q29): Q30G. During your most recent experience at the ER or out-patient clinic... Were any forms you were required to fill out, or other information forms given to you (or the person you helped) provided in English?

12.1.9 Able to Easily Find One's Way Around a Hospital Emergency Room or Out-patient Clinic

Able to Easily Find One's Way Around a Hospital Emergency Room or Out-patient Clinic

Yes	No
96.8%	3.2%
91.1%	8.9%
95.4%	4.6%
89.2%	10.8%
90.0%	10.0%
83.1%	16.9%
94.5%	5.5%
95.6%	4.4%
92.0%	8.0%
87.9%	12.1%
95.7%	4.3%
97.5%	2.5%
92.9%	7.1%
93.3%	6.7%
91.7%	8.3%
	96.8% 91.1% 95.4% 89.2% 90.0% 83.1% 94.5% 95.6% 92.0% 87.9% 95.7% 97.5% 92.9% 93.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used an emergency room or out-patient clinic within the previous year (Q29): Q30H. During your most recent experience at the ER or out-patient clinic... Were you or the person you helped able to find your way around the ER or out-patient clinic easily?

Among English speakers who used the services of an ER or outpatient clinic, 8.3% reported that it was not easy to find their way around.

We observe that English-speakers who used the services of an ER or out-patient clinic in the regions of RTS du Nord-de-l'Île-de-Montréal (16.9%) and RTS de Laval (12.1%) were the most likely to report it was not easy to find their way around.

English speakers who used the services of an ER or out-patient clinic in the regions of RTS des Laurentides (2.5%), RTS de la Capitale-Nationale (3.2%) and RTS de Lanaudière (4.3%) were the least likely to report it was not easy to find their way around.

Able to Easily Find One's Way Around a Hospital Emergency Room or Out-patient Clinic

	Variable	Yes	No
	Male (n=450)	94.9%	5.1%
gender	Female (n=780)	88.9%	11.1%
	Total (n=1,230)	91.7%	8.3%
	25-44 years (n=138)	91.0%	9.0%
2.00	45-64 years (n=561)	93.0%	7.0%
age	65 years and over (n=487)	88.9%	11.1%
	Total (n=1,207)	91.7%	8.3%
	less than \$30k (n=167)	91.8%	8.2%
	\$30-70k (n=317)	93.0%	7.0%
household income	\$70-100k (n=162)	92.2%	7.8%
meome	\$100k and over (n=268)	93.2%	6.8%
	Total (n=914)	92.7%	7.3%
knowledge of	bilingual (n=951)	92.5%	7.5%
English and	unilingual English (n=278)	88.8%	11.2%
French	Total (n=1,229)	91.7%	8.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used an emergency room or out-patient clinic within the previous year (Q29): Q30H. During your most recent experience at the ER or out-patient clinic... Were you or the person you helped able to find your way around the ER or out-patient clinic easily?

English-speaking females who used the services of an ER or out-patient clinic were more likely to report it was not easy to find their way around (11.1%) than were their male counterparts (5.1%).

Across age groups, English speakers who used the services of an ER or out-patient clinic who were aged 65 years and over were the most likely to report it was not easy to find their way around (11.1%).

With respect to income, those who used the services of an ER or out-patient clinic who earned less than \$30k were the most likely to report it was not easy to find their way around (8.2%) while those earning \$100k and over were the least likely (6.8%).

English-speakers who used the services of an ER or outpatient clinic who were unilingual English were more likely to report it was not easy to find their way around (11.2%) than their bilingual counterparts (7.5%).

12.1.10 Factors that would Improve Finding One's Way Around the ER or Out-patient Clinic

Factors that would Improve Finding One's Way Around the ER or Out-patient Clinic

Region	Bilingual signs	Bilingual receptionist	Nothing	Clearer directions / Departmental map / color codes	A bilingual person dedicated to giving directions / info
031 Capitale-Nationale (n=74)	36.1%	2.4%	58.2%	-	-
051 Estrie – CHU de Sherbrooke (n=50)	46.1%	1.3%	46.2%	1.3%	2.9%
061 Ouest-de-l'Île-de-Montréal (n=180)	41.2%	2.5%	43.9%	1.1%	7.1%
062 Centre-Ouest-de-l'Île-de-Montréal (n=187)	32.7%	5.8%	44.2%	8.9%	6.7%
063 Centre-Sud-de-l'Île-de-Montréal (n=89)	26.3%	14.7%	46.4%	6.7%	5.2%
064 Nord-de-l'Île-de-Montréal (n=86)	30.4%	4.8%	55.1%	4.7%	0.5%
065 Est-de-l'Île-de-Montréal (n=81)	47.6%	4.3%	40.8%	0.5%	-
071 Outaouais (n=86)	62.0%	1.2%	29.4%	0.8%	0.7%
131 Laval (n=84)	45.7%	17.7%	33.3%	2.7%	-
141 Lanaudière (n=30)	65.6%	4.0%	27.3%	0.4%	0.4%
151 Laurentides (n=37)	23.6%	1.5%	68.8%	0.8%	2.5%
161 Montérégie-Centre (n=50)	35.0%	-	58.6%	4.7%	1.2%
163 Montérégie-Ouest (n=84)	42.4%	1.7%	49.6%	-	-
Total (n=1,174)	40.3%	5.3%	44.4%	3.5%	3.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used an emergency room or out-patient clinic within the previous year (Q29): Q301. During your most recent experience at the ER or out-patient clinic: What would have made it easier to find your way around the ER or out-patient clinic? ONE POSSIBLE ANSWER

Factors that would Improve Finding One's Way Around the ER or Out-patient Clinic

	Variable	Bilingual signs	Bilingual receptionist		Translation services	Nothing	Clearer directions	A bilingual person dedicated to giving directions / info	Bilingual services/for ms/staff in general	Other (Specify :)
	Male (n=431)	39.5%	3.8%	0.5%	1.0%	47.1%	2.3%	4.3%	0.1%	1.4%
gender	Female (n=743)	41.0%	6.7%	1.0%	1.1%	42.1%	4.5%	2.4%	0.8%	0.5%
	Total (n=1,174)	40.3%	5.3%	0.8%	1.1%	44.4%	3.5%	3.3%	0.5%	0.9%
	25-44 years (n=136)	44.3%	9.4%	0.4%	0.7%	40.4%	2.4%	1.6%	-	1.0%
2.00	45-64 years (n=534)	38.2%	4.6%	1.4%	1.2%	45.1%	4.8%	2.5%	1.1%	1.1%
age	65 years and over (n=462)	41.7%	2.4%	0.8%	1.8%	46.2%	2.2%	3.2%	0.8%	0.9%
	Total (n=1,154)	40.2%	5.4%	0.8%	1.0%	44.3%	3.5%	3.3%	0.5%	0.9%
	less than \$30k (n=151)	45.2%	2.8%	1	1.1%	45.0%	1.6%	2.8%	0.4%	1.2%
	\$30-70k (n=302)	44.6%	10.8%	1.1%	0.4%	36.0%	3.4%	0.8%	0.9%	2.1%
household income	\$70-100k (n=153)	32.5%	1.7%	1.4%	1.3%	51.2%	4.3%	6.3%	0.0%	1.2%
meome	\$100k and over (n=264)	40.8%	2.3%	0.3%	0.3%	48.0%	5.6%	1.9%	0.6%	0.3%
	Total (n=870)	41.4%	5.2%	0.7%	0.6%	44.0%	4.1%	2.3%	0.6%	1.2%
knowledge of	bilingual (n=915)	38.7%	3.9%	0.9%	0.9%	46.9%	3.8%	3.6%	0.6%	0.7%
1 · . •	unilingual English (n=258)	46.1%	10.5%	0.3%	1.7%	35.1%	2.4%	2.3%	0.2%	1.3%
French	Total (n=1,173)	40.3%	5.3%	0.8%	1.1%	44.4%	3.5%	3.3%	0.5%	0.9%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used an emergency room or out-patient clinic within the previous year (Q29): Q30I. During your most recent experience at the ER or out-patient clinic: What would have made it easier to find your way around the ER or out-patient clinic? ONE POSSIBLE ANSWER

12.1.11 Doctor or Health Professional Spoke English at the ER or Out-patient Clinic

Doctor or Health Professional Spoke English at the ER or Outpatient Clinic

1	
Yes	No
23.5%	76.5%
52.8%	47.2%
90.5%	9.5%
98.9%	1.1%
77.3%	22.7%
75.1%	24.9%
62.6%	37.4%
87.9%	12.1%
82.8%	17.2%
61.6%	38.4%
22.0%	78.0%
78.7%	21.3%
70.9%	29.1%
82.0%	18.0%
78.4%	21.6%
	23.5% 52.8% 90.5% 98.9% 77.3% 75.1% 62.6% 87.9% 82.8% 61.6% 22.0% 78.7% 70.9% 82.0%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used an emergency room or out-patient clinic within the previous year (Q29): Q30K. During your most recent experience at the ER or out-patient clinic... Did the doctor or health professional speak to you or the person you helped in English?

Among English speakers who used the services of an ER or outpatient clinic, 21.6% reported the doctor or health professional did not speak English to them.

We observe that English-speakers who used the services of an ER or out-patient clinic in the regions of RTS de Lanaudière (78.0%) and RTS de la Capitale-Nationale (76.5%) were the most likely to report the doctor or health professional did not speak English.

English speakers who used the services of an ER or out-patient clinic in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (1.1%), RTS de l'Ouest-de-l'Île-de-Montréal (9.5%) and RTS de l'Outaouais (12.1%) were the least likely to report the doctor or health professional did not speak English.

Doctor or Health Professional Spoke English at the ER or Out-patient Clinic

	Variable	Yes	No
	Male (n=450)	78.6%	21.4%
gender	Female (n=779)	78.2%	21.8%
	Total (n=1,229)	78.4%	21.6%
	25-44 years (n=139)	75.0%	25.0%
age	45-64 years (n=555)	75.8%	24.2%
	65 years and over (n=489)	87.7%	12.3%
	Total (n=1,205)	78.5%	21.5%
	less than \$30k (n=167)	78.4%	21.6%
	\$30-70k (n=317)	73.0%	27.0%
household income	\$70-100k (n=162)	84.4%	15.6%
moome	\$100k and over (n=268)	83.4%	16.6%
	Total (n=914)	79.2%	20.8%
knowledge of	bilingual (n=944)	73.7%	26.3%
English and	unilingual English (n=284)	94.2%	5.8%
French	Total (n=1,228)	78.4%	21.6%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used an emergency room or out-patient clinic within the previous year (Q29): Q30K. During your most recent experience at the ER or out-patient clinic... Did the doctor or health professional speak to you or the person you helped in English?

English-speaking females who used the services of an ER or out-patient clinic were more likely to report the doctor or health professional did not speak English (21.8%) than were their male counterparts (21.4%).

Across age groups, English speakers who used the services of an ER or out-patient clinic who were aged 25-44 years were the most likely to report the doctor or health professional did not speak English (25.0%) while those aged 65 years and over were the least likely (12.3%).

With respect to income, those who used the services of an ER or out-patient clinic who earned \$30-70k were the most likely to report the doctor or health professional did not speak English (27.0%) while those earning \$70-100k were the least likely (15.6%).

English-speakers who used the services of an ER or outpatient clinic who were bilingual were more likely to report the doctor or health professional did not speak English (26.3%) than their unilingual English counterparts (5.8%).

12.1.12 Importance of Doctor or Health Professional Speaking English at the ER or Out-patient Clinic

Importance of Doctor or Health Professional Speaking English at the ER or Outpatient Clinic

Region	Very important	Somewhat important	Not very important	Not at all important
031 Capitale-Nationale (n=80)	42.8%	20.3%	13.7%	23.2%
051 Estrie – CHU de Sherbrooke (n=51)	81.3%	9.6%	6.6%	2.5%
061 Ouest-de-l'Île-de-Montréal (n=191)	76.5%	16.4%	6.5%	0.6%
062 Centre-Ouest-de-l'Île-de-Montréal (n=200)	91.3%	4.4%	1.1%	3.2%
063 Centre-Sud-de-l'Île-de-Montréal (n=97)	64.1%	6.2%	28.9%	0.8%
064 Nord-de-l'Île-de-Montréal (n=91)	76.9%	4.7%	12.1%	6.3%
065 Est-de-l'Île-de-Montréal (n=86)	78.9%	9.2%	9.2%	2.7%
071 Outaouais (n=90)	85.5%	3.8%	6.6%	4.2%
111 Gaspésie (n=31)	83.7%	6.3%	1.9%	8.0%
131 Laval (n=86)	75.1%	14.0%	6.1%	4.8%
141 Lanaudière (n=32)	16.3%	50.7%	18.0%	15.0%
151 Laurentides (n=37)	83.7%	3.5%	5.4%	7.3%
161 Montérégie-Centre (n=54)	72.6%	12.7%	11.9%	2.8%
163 Montérégie-Ouest (n=87)	88.2%	4.7%	6.3%	0.8%
Total (n=1,240)	78.3%	9.1%	8.4%	4.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used an emergency room or out-patient clinic within the previous year (Q29): Q30L. During your most recent experience at the ER or out-patient clinic... How important was it to your understanding that the health and social services professional speak in English to you or the person you helped during the consultation? Was it...

Among English speakers who used the services of an ER or out-patient clinic, 78.3% felt it was "very important" that the health and social services professional spoke English.

We observe that English-speakers who used the services of an ER or out-patient clinic in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (91.3%), RTS de la Montérégie-Ouest (88.2%) and RTS de l'Outaouais (85.5%) were the most likely to report it was "very important" that the health and social services professional spoke English.

English speakers who used the services of an ER or out-patient clinic in the regions of RTS de Lanaudière (16.3%) and RTS de la Capitale-Nationale (42.8%) were the least likely to report it was "very important" that the health and social services professional spoke English.

Importance of Doctor or Health Professional Speaking English at the ER or Out-patient Clinic

	Variable	Very important	Somewhat important	Not very important	Not at all important
	Male (n=452)	73.7%	11.0%	11.7%	3.6%
gender	Female (n=788)	82.2%	7.5%	5.7%	4.7%
	Total (n=1,240)	78.3%	9.1%	8.4%	4.1%
	25-44 years (n=138)	80.9%	7.5%	9.9%	1.7%
age	45-64 years (n=560)	77.4%	9.3%	8.0%	5.3%
	65 years and over (n=496)	79.5%	9.8%	5.4%	5.2%
	Total (n=1,216)	78.1%	9.2%	8.6%	4.1%
	less than \$30k (n=168)	85.8%	6.4%	5.9%	1.9%
harra halal	\$30-70k (n=317)	73.8%	14.1%	7.9%	4.2%
household income	\$70-100k (n=164)	70.4%	10.1%	13.3%	6.2%
meome	\$100k and over (n=269)	81.1%	6.4%	9.6%	2.9%
	Total (n=918)	77.5%	9.7%	9.1%	3.8%
knowledge of	bilingual (n=955)	72.8%	11.2%	10.8%	5.3%
English and	unilingual English (n=284)	97.0%	2.2%	0.6%	0.2%
French	Total (n=1,239)	78.3%	9.1%	8.5%	4.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used an emergency room or out-patient clinic within the previous year (Q29): Q30L. During your most recent experience at the ER or out-patient clinic... How important was it to your understanding that the health and social services professional speak in English to you or the person you helped during the consultation? Was it...

English-speaking females who used the services of an ER or out-patient clinic were more likely to report it was "very important" that the health and social services professional spoke English (82.2%) than were their male counterparts (73.7%).

Across age groups, English speakers who used the services of an ER or out-patient clinic who were aged 25-44 years were the most likely to report it was "very important" that the health and social services professional spoke English (80.9%).

With respect to income, those who used the services of an ER or out-patient clinic who earned less than \$30k were the most likely to report it was "very important" that the health and social services professional spoke English (85.8%) while those earning \$70-100k were the least likely (70.4%).

English-speakers who used the services of an ER or out-patient clinic who were unilingual English were more likely to report it was "very important" that the health and social services professional spoke English (97.0%) than their bilingual counterparts (72.8%).

12.1.13 Translation Services Offered at the Hospital Emergency Room or Out-patient Clinic

Translation Services Offered at the Hospital Emergency Room or Out-patient Clinic

Yes	No
14.7%	85.3%
12.1%	87.9%
13.9%	86.1%
22.1%	77.9%
18.5%	81.5%
15.3%	84.7%
9.4%	90.6%
13.1%	86.9%
11.4%	88.6%
10.2%	89.8%
6.5%	93.5%
51.2%	48.8%
11.5%	88.5%
24.5%	75.5%
16.7%	83.3%
	14.7% 12.1% 13.9% 22.1% 18.5% 15.3% 9.4% 13.1% 11.4% 10.2% 6.5% 51.2% 11.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used an emergency room or out-patient clinic within the previous year (Q29): Q30M. During your most recent experience at the ER or out-patient clinic: Were translation services offered?

Among English speakers who used the services of an ER or outpatient clinic, 83.3% reported that translation services were not offered.

We observe that English-speakers who used the services of an ER or out-patient clinic in the regions of RTS des Laurentides (51.2%), RTS de la Montérégie-Ouest (24.5%) and RTS du Centre-Ouest-de-l'Île-de-Montréal (22.1%) were the most likely to report that translation services were offered.

English speakers who used the services of an ER or out-patient clinic in the regions of RTS de Lanaudière (6.5%) and RTS de l'Est-de-l'Île-de-Montréal (9.4%) were the least likely to report that translation services were offered.

Translation Services Offered at the Hospital Emergency Room or Outpatient Clinic

	Variable	Yes	No
	Male (n=418)	17.2%	82.8%
gender	Female (n=726)	16.2%	83.8%
	Total (n=1,144)	16.7%	83.3%
	25-44 years (n=130)	15.6%	84.4%
age	45-64 years (n=527)	16.1%	83.9%
age	65 years and over (n=446)	17.1%	82.9%
	Total (n=1,124)	16.7%	83.3%
	less than \$30k (n=157)	33.6%	66.4%
h a a a h a l al	\$30-70k (n=295)	16.9%	83.1%
household income	\$70-100k (n=154)	17.6%	82.4%
Tilled.iie	\$100k and over (n=251)	7.8%	92.2%
	Total (n=857)	16.4%	83.6%
knowledge of	bilingual (n=881)	15.6%	84.4%
English and	unilingual English (n=263)	20.3%	79.7%
French	Total (n=1,144)	16.7%	83.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used an emergency room or out-patient clinic within the previous year (Q29): Q30M. During your most recent experience at the ER or out-patient clinic: Were translation services offered?

English-speaking males who used the services of an ER or out-patient clinic were more likely to report that translation services were offered (17.2%) than were their female counterparts (16.2%).

Across age groups, English speakers who used the services of an ER or out-patient clinic who were aged 25-44 years were the least likely to report that translation services were offered (15.6%).

With respect to income, those who used the services of an ER or out-patient clinic who earned less than \$30k were the most likely to report that translation services were offered (33.6%) while those earning \$100k and over were the least likely (7.8%).

English-speakers who used the services of an ER or outpatient clinic who were unilingual English were more likely to report that translation services were offered (20.3%) than their bilingual counterparts (15.6%).

13 Language of Service During Overnight Stay at a Hospital

13.1.1 Used the Services of a Hospital Service Requiring Overnight Stay

Used the Services of a Hospital Service Requiring Overnight Stay

	English Sp	English Speakers		eakers
Region	yes, either for self or another	no	yes, either for self or another	no
031 Capitale-Nationale (n=202)	10.6%	89.4%	11.5%	88.5%
051 Estrie – CHU de Sherbrooke (n=106)	23.8%	76.2%	15.4%	84.6%
061 Ouest-de-l'Île-de-Montréal (n=484)	15.2%	84.8%	25.4%	74.6%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	12.7%	87.3%	30.7%	69.3%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	11.9%	88.1%	2.3%	97.7%
064 Nord-de-l'Île-de-Montréal (n=251)	13.5%	86.5%	22.9%	77.1%
065 Est-de-l'Île-de-Montréal (n=215)	12.8%	87.2%	16.6%	83.4%
071 Outaouais (n=200)	21.9%	78.1%	23.7%	76.3%
111 Gaspésie (n=75)	14.1%	85.9%	30.2%	69.8%
131 Laval (n=257)	17.5%	82.5%	15.6%	84.4%
141 Lanaudière (n=75)	33.2%	66.8%	7.3%	92.7%
151 Laurentides (n=110)	26.4%	73.6%	17.0%	83.0%
161 Montérégie-Centre (n=150)	7.5%	92.5%	30.7%	69.3%
162 Montérégie-Est (n=77)	5.9%	94.1%	18.3%	81.7%
163 Montérégie-Ouest (n=240)	18.1%	81.9%	8.7%	91.3%
Total (n=3,133)	15.3%	84.7%	16.5%	83.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Among English speakers, 15.3% used the services of a hospital requiring at least one overnight stay within the past year. This was lower than the proportion reported for French speakers (16.5%).

We observe that English-speakers in the regions of RTS de Lanaudière (33.2%), RTS des Laurentides (26.4%) and RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (23.8%) were the most likely to report using the services of a hospital requiring at least one overnight stay.

English speakers in the regions of RTS de la Montérégie-Est (5.9%), RTS de la Montérégie-Centre (7.5%) and RTS de la Capitale-Nationale (10.6%) were the least likely to report using the services of a hospital requiring at least one overnight stay.

Q31. Within the last twelve months, in your region, have you used a hospital service requiring at least one overnight stay either for yourself or to help another person? (IF YES:) THE LAST TIME IT HAPPENED, was it for yourself or to help another person?

Used the Services of a Hospital Service Requiring Overnight Stay

		English Sp	eakers	French Speakers	
Variable		yes, either for self or another	no	yes, either for self or another	no
	Male	12.7%	87.3%	15.3%	84.7%
gender	Female	18.0%	82.0%	17.6%	82.4%
	Total	15.3%	84.7%	16.5%	83.5%
	18-24 years	7.6%	92.4%	20.8%	79.2%
	25-44 years	14.1%	85.9%	14.7%	85.3%
age	45-64 years	16.9%	83.1%	15.1%	84.9%
	65 years and over	20.6%	79.4%	17.6%	82.4%
	Total	15.4%	84.6%	16.6%	83.4%
	less than \$30k	16.8%	83.2%	20.0%	80.0%
	\$30-70k	18.6%	81.4%	19.3%	80.7%
household income	\$70-100k	11.9%	88.1%	18.9%	81.1%
meome	\$100k and over	14.3%	85.7%	14.0%	86.0%
	Total	15.6%	84.4%	17.7%	82.3%
knowledge of	bilingual	15.0%	85.0%		
English and	unilingual English	16.7%	83.3%		
French	Total	15.3%	84.7%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q31. Within the last twelve months, in your region, have you used a hospital service requiring at least one overnight stay either for yourself or to help another person? (IF YES:) THE LAST TIME IT HAPPENED, was it for yourself or to help another person?

English-speaking females were more likely to report using the services of a hospital requiring at least one overnight stay (18.0%) than were their male counterparts (12.7%).

Across age groups, English speakers who were aged 65 years and over were the most likely to report using the services of a hospital requiring at least one overnight stay (20.6%) while those aged 18-24 years were the least likely (7.6%).

With respect to income, those who earned \$30-70k were the most likely to report using the services of a hospital requiring at least one overnight stay (18.6%) while those earning \$70-100k were the least likely (11.9%).

English-speakers who were unilingual English were more likely to report using the services of a hospital requiring at least one overnight stay (16.7%) than their bilingual counterparts (15.0%).

13.1.2 Served in English During Overnight Stay at a Hospital

Served in English During Overnight Stay at a Hospital

Region	yes	no
031 Capitale-Nationale (n=31)	21.6%	78.4%
061 Ouest-de-l'Île-de-Montréal (n=85)	77.9%	22.1%
062 Centre-Ouest-de-l'Île-de-Montréal (n=87)	94.3%	5.7%
063 Centre-Sud-de-l'Île-de-Montréal (n=39)	83.9%	16.1%
064 Nord-de-l'Île-de-Montréal (n=48)	60.3%	39.7%
065 Est-de-l'Île-de-Montréal (n=37)	55.6%	44.4%
071 Outaouais (n=36)	83.6%	16.4%
131 Laval (n=40)	38.1%	61.9%
163 Montérégie-Ouest (n=40)	65.1%	34.9%
Total (n=551)	67.9%	32.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32A. Were you served in English at the hospital when you or the person you helped stayed overnight for at least one night?

Among English speakers who stayed overnight at a hospital, 32.1% were not served in English.

We observe that English-speakers who stayed overnight at a hospital in the regions of RTS de la Capitale-Nationale (78.4%) and RTS de Laval (61.9%) were the most likely to report not being served in English.

English speakers who stayed overnight at a hospital in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (5.7%), RTS du Centre-Sud-de-l'Île-de-Montréal (16.1%) and RTS de l'Outaouais (16.4%) were the least likely to report not being served in English.

Served in English During Overnight Stay at a Hospital

	Variable	yes	no
	Male (n=184)	70.8%	29.2%
gender	Female (n=367)	66.0%	34.0%
	Total (n=551)	67.9%	32.1%
	25-44 years (n=51)	60.3%	39.7%
	45-64 years (n=240)	63.8%	36.2%
age	65 years and over (n=250)	83.0%	17.0%
	Total (n=545)	67.9%	32.1%
	less than \$30k (n=85)	73.9%	26.1%
	\$30-70k (n=147)	56.9%	43.1%
household income	\$70-100k (n=68)	77.6%	22.4%
meenie	\$100k and over (n=110)	74.4%	25.6%
	Total (n=410)	68.2%	31.8%
knowledge of	bilingual (n=424)	62.7%	37.3%
English and French	unilingual English (n=126)	87.0%	13.0%
	Total (n=550)	67.9%	32.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who required an overnight stay at a hospital within the previous year (Q31): Q32A. Were you served in English at the hospital when you or the person you helped stayed overnight for at least one night?

English-speaking females who stayed overnight at a hospital were more likely to report not being served in English (34.0%) than were their male counterparts (29.2%).

Across age groups, English speakers who stayed overnight at a hospital who were aged 25-44 years were the most likely to report not being served in English (39.7%) while those aged 65 years and over were the least likely (17.0%).

With respect to income, those who stayed overnight at a hospital who earned \$30-70k were the most likely to report not being served in English (43.1%) while those earning \$70-100k were the least likely (22.4%).

English-speakers who stayed overnight at a hospital who were bilingual were more likely to report not being served in English (37.3%) than their unilingual English counterparts (13.0%).

13.1.3 Requested and Received Service in English During Overnight Stay at a Hospital

Served Directly or Had to Ask for Service in English During Overnight Stay at a Hospital

	Variable	Served directly in English	Had to ask for service in English
	Male (n=128)	80.8%	17.7%
gender	Female (n=239)	79.6%	19.9%
	Total (n=367)	80.1%	19.0%
	45-64 years (n=151)	77.6%	21.7%
age	65 years and over (n=183)	78.6%	18.9%
	Total (n=363)	80.2%	18.9%
	less than \$30k (n=62)	83.4%	15.3%
h a sa halal	\$30-70k (n=99)	78.5%	20.6%
household income	\$70-100k (n=48)	74.0%	26.0%
meome	\$100k and over (n=69)	77.4%	22.6%
	Total (n=278)	78.3%	21.2%
knowledge of	bilingual (n=257)	80.1%	18.8%
English and	unilingual English (n=109)	79.8%	19.5%
French	Total (n=366)	80.1%	19.0%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey For those who were served in English during an overnight stay at a hospital (Q32A): Q32B. Were you served directly in English or did you or the person you helped have to ask for service in English at the hospital when you stayed overnight for at least one night?

Among English speakers who were served in English during an overnight stay at a hospital, 19.0% had to ask for service in English.

English-speaking females who were served in English during an overnight stay at a hospital were more likely to have had to ask for service in English (19.9%) than were their male counterparts (17.7%).

Across age groups, English speakers who were served in English during an overnight stay at a hospital who were aged 45-64 years were the most likely to have had to ask for service in English (21.7%).

With respect to income, those who were served in English during an overnight stay at a hospital who earned \$70-100k were the most likely to have had to ask for service in English (26.0%) while those earning less than \$30k were the least likely (15.3%).

English-speakers who were served in English during an overnight stay at a hospital who were unilingual English were more likely to have had to ask for service in English (19.5%) than their bilingual counterparts (18.8%).

13.1.4 Importance of English Services During Overnight Stay at a Hospital Among Those Served in English

Importance of English Services During Overnight Stay at a Hospital Among Those Served in English

Region	It was very important to receive the service in English	The service in French was acceptable
061 Ouest-de-l'Île-de-Montréal (n=75)	80.6%	19.4%
062 Centre-Ouest-de-l'Île-de-Montréal (n=82)	93.8%	6.2%
063 Centre-Sud-de-l'Île-de-Montréal (n=32)	71.5%	28.5%
064 Nord-de-l'Île-de-Montréal (n=31)	85.5%	14.5%
Total (n=378)	87.3%	12.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who were served in English during an overnight stay at a hospital (Q32A): Q32C. Considering the situation, do you feel it was VERY IMPORTANT to receive the service in English or was it acceptable to receive the service in French?

Among English speakers who were served in English during an overnight stay at a hospital, 87.3% felt it was very important to be served in English.

Importance of English Services During Overnight Stay at a Hospital Among Those Served in English

	Variable	It was very important to receive the service in English	The service in French was acceptable
	Male (n=132)	79.4%	20.6%
gender	Female (n=246)	93.0%	7.0%
	Total (n=378)	87.3%	12.7%
	45-64 years (n=154)	85.9%	14.1%
age	65 years and over (n=191)	86.0%	14.0%
•	Total (n=374)	87.2%	12.8%
	less than \$30k (n=62)	88.8%	11.2%
	\$30-70k (n=101)	84.7%	15.3%
household income	\$70-100k (n=51)	83.5%	16.5%
meome	\$100k and over (n=70)	82.6%	17.4%
	Total (n=284)	84.5%	15.5%
knowledge of	bilingual (n=266)	82.9%	17.1%
English and	unilingual English (n=111)	99.1%	0.9%
French	Total (n=377)	87.3%	12.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who were served in English during an overnight stay at a hospital (Q32A): Q32C. Considering the situation, do you feel it was VERY IMPORTANT to receive the service in English or was it acceptable to receive the service in French?

English-speaking females who were served in English during an overnight stay at a hospital were more likely to feel it was very important to be served in English (93.0%) than were their male counterparts (79.4%).

With respect to income, those who were served in English during an overnight stay at a hospital who earned less than \$30k were the most likely to feel it was very important to be served in English (88.8%) while those earning \$100k and over were the least likely (82.6%).

English-speakers who were served in English during an overnight stay at a hospital who were unilingual English were more likely to feel it was very important to be served in English (99.1%) than their bilingual counterparts (82.9%).

13.1.5 Not Served in English During Overnight Stay at a Hospital Despite Request

Not Served in English During Overnight Stay at a Hospital Despite Request

	Variable	yes	no
	Male (n=49)	16.7%	83.3%
gender	Female (n=118)	31.7%	68.3%
	Total (n=167)	26.2%	73.8%
	45-64 years (n=84)	29.1%	70.9%
age	65 years and over (n=55)	23.3%	76.7%
	Total (n=165)	26.3%	73.7%
	\$30-70k (n=45)	25.9%	74.1%
household income	\$100k and over (n=38)	35.3%	64.7%
	Total (n=120)	28.4%	71.6%
knowledge of	bilingual (n=153)	20.8%	79.2%
English and French	Total (n=167)	26.2%	73.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who were not served in English during an overnight stay at a hospital (Q32A): Q32D. Did you or the person you helped ask for service in English?

English-speaking females who were not served in English during an overnight stay at a hospital were more likely to have asked for service in English (31.7%) than were their male counterparts (16.7%).

With respect to income, those who were not served in English during an overnight stay at a hospital who earned \$100k and over were the most likely to have asked for service in English (35.3%).

13.1.6 Importance of English Services During Overnight Stay at a Hospital Among Those Not Served in English

Importance of English Services During Overnight Stay at a Hospital Among Those Not Served in English

	Variable	It was very important to receive the service in English	The service in French was acceptable
	Male (n=48)	24.9%	75.1%
gender	Female (n=118)	60.2%	39.8%
	Total (n=166)	47.2%	52.8%
age	45-64 years (n=84)	51.7%	48.3%
	65 years and over (n=54)	32.8%	67.2%
	Total (n=164)	46.9%	53.1%
	\$30-70k (n=44)	45.1%	54.9%
household income	\$100k and over (n=38)	58.4%	41.6%
	Total (n=119)	46.2%	53.8%
knowledge of	bilingual (n=152)	42.9%	57.1%
English and French	Total (n=166)	47.2%	52.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who were not served in English during an overnight stay at a hospital (Q32A): Q32E. Considering the situation, do you feel it would have been VERY IMPORTANT to receive the service in English or was receiving service in French acceptable?

Among English speakers who were not served in English during an overnight stay at a hospital, 47.2% felt it was very important to be served in English.

English-speaking females who were not served in English during an overnight stay at a hospital were more likely to feel it was very important to be served in English (60.2%) than were their male counterparts (24.9%).

With respect to income, those who were not served in English during an overnight stay at a hospital who earned \$100k and over were the most likely to feel it was very important to be served in English (58.4%).

13.1.7 Admission Personnel Spoke English During Overnight Stay at a Hospital

Admission Personnel Spoke English During Overnight Stay at a Hospital

Region	Yes	No
061 Ouest-de-l'Île-de-Montréal (n=86)	68.4%	31.6%
062 Centre-Ouest-de-l'Île-de-Montréal (n=88)	95.5%	4.5%
063 Centre-Sud-de-l'Île-de-Montréal (n=40)	70.8%	29.2%
064 Nord-de-l'Île-de-Montréal (n=47)	58.6%	41.4%
065 Est-de-l'Île-de-Montréal (n=35)	58.0%	42.0%
071 Outaouais (n=37)	75.1%	24.9%
131 Laval (n=39)	52.6%	47.4%
163 Montérégie-Ouest (n=40)	66.7%	33.3%
Total (n=544)	66.2%	33.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32F. During the hospital stay... Did admission personnel speak in English to you or the person you helped?

Among English speakers who stayed overnight at a hospital, 33.8% reported the admission personnel did not speak English.

English speakers who stayed overnight at a hospital in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (4.5%) and RTS de l'Outaouais (24.9%) were the least likely to report the admission personnel did not speak English.

Admission Personnel Spoke English During Overnight Stay at a Hospital

	Variable	Yes	No
	Male (n=188)	66.0%	34.0%
gender	Female (n=356)	66.4%	33.6%
	Total (n=544)	66.2%	33.8%
	25-44 years (n=49)	66.8%	33.2%
age	45-64 years (n=242)	59.9%	40.1%
	65 years and over (n=243)	78.8%	21.2%
	Total (n=538)	66.2%	33.8%
	less than \$30k (n=82)	58.7%	41.3%
	\$30-70k (n=144)	64.0%	36.0%
household income	\$70-100k (n=67)	75.5%	24.5%
meome	\$100k and over (n=109)	71.5%	28.5%
	Total (n=402)	67.2%	32.8%
knowledge of	bilingual (n=417)	61.2%	38.8%
English and	unilingual English (n=126)	83.8%	16.2%
French	Total (n=543)	66.2%	33.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who required an overnight stay at a hospital within the previous year (Q31): Q32F. During the hospital stay... Did admission personnel speak in English to you or the person you helped?

English-speaking males who stayed overnight at a hospital were more likely to report the admission personnel did not speak English (34.0%) than were their female counterparts (33.6%).

Across age groups, English speakers who stayed overnight at a hospital who were aged 45-64 years were the most likely to report the admission personnel did not speak English (40.1%) while those aged 65 years and over were the least likely (21.2%).

With respect to income, those who stayed overnight at a hospital who earned less than \$30k were the most likely to report the admission personnel did not speak English (41.3%) while those earning \$70-100k were the least likely (24.5%).

13.1.8 Admission Forms in English During Overnight Stay at a Hospital

Admission Forms in English During Overnight Stay at a Hospital

Region	Yes	No
061 Ouest-de-l'Île-de-Montréal (n=69)	70.6%	29.4%
062 Centre-Ouest-de-l'Île-de-Montréal (n=73)	96.2%	3.8%
063 Centre-Sud-de-l'Île-de-Montréal (n=32)	58.9%	41.1%
064 Nord-de-l'Île-de-Montréal (n=43)	66.0%	34.0%
065 Est-de-l'Île-de-Montréal (n=31)	24.5%	75.5%
131 Laval (n=33)	26.7%	73.3%
163 Montérégie-Ouest (n=35)	51.2%	48.8%
Total (n=453)	59.6%	40.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32G. During the hospital stay... Were the admission forms provided in English?

Among English speakers who stayed overnight at a hospital, 40.4% reported the admission forms were not in English.

We observe that English-speakers who stayed overnight at a hospital in the region of RTS de l'Est-de-l'Île-de-Montréal (75.5%) were the most likely to report the admission forms were not in English.

English speakers who stayed overnight at a hospital in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (3.8%) and RTS de l'Ouest-de-l'Île-de-Montréal (29.4%) were the least likely to report the admission forms were not in English.

Admission Forms in English During Overnight Stay at a Hospital

	Variable	Yes	No
	Male (n=157)	61.7%	38.3%
gender	Female (n=296)	58.0%	42.0%
	Total (n=453)	59.6%	40.4%
	25-44 years (n=43)	52.3%	47.7%
age	45-64 years (n=202)	59.6%	40.4%
	65 years and over (n=201)	70.2%	29.8%
	Total (n=449)	59.9%	40.1%
	less than \$30k (n=66)	55.9%	44.1%
	\$30-70k (n=129)	48.0%	52.0%
household income	\$70-100k (n=56)	68.7%	31.3%
meeme	\$100k and over (n=95)	67.7%	32.3%
•	Total (n=346)	58.4%	41.6%
knowledge of	bilingual (n=354)	54.7%	45.3%
English and	unilingual English (n=99)	79.2%	20.8%
French	Total (n=453)	59.6%	40.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32G. During the hospital stay... Were the admission forms provided in English?

English-speaking females who stayed overnight at a hospital were more likely to report the admission forms were not in English (42.0%) than were their male counterparts (38.3%).

Across age groups, English speakers who stayed overnight at a hospital who were aged 25-44 years were the most likely to report the admission forms were not in English (47.7%) while those aged 65 years and over were the least likely (29.8%).

With respect to income, those who stayed overnight at a hospital who earned \$30-70k were the most likely to report the admission forms were not in English (52.0%) while those earning \$70-100k were the least likely (31.3%).

English-speakers who stayed overnight at a hospital who were bilingual were more likely to report the admission forms were not in English (45.3%) than their unilingual English counterparts (20.8%).

13.1.9 Able to Easily Find One's Way During Overnight Stay at a Hospital

Able to Easily Find One's Way During Overnight Stay at a Hospital

Yes	No
90.5%	9.5%
92.0%	8.0%
79.9%	20.1%
80.4%	19.6%
73.3%	26.7%
86.0%	14.0%
77.2%	22.8%
68.6%	31.4%
83.5%	16.5%
	90.5% 92.0% 79.9% 80.4% 73.3% 86.0% 77.2% 68.6%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who required an overnight stay at a hospital within the previous year (Q31): Q32H. During the hospital stay... Were you or the person you helped able to find your way around the hospital easily?

Among English speakers who stayed overnight at a hospital, 16.5% reported being unable to easily find their way around.

We observe that English-speakers who stayed overnight at a hospital in the regions of RTS de la Montérégie-Ouest (31.4%) and RTS de Laval (22.8%) were the most likely to report being unable to easily find their way around.

English speakers who stayed overnight at a hospital in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (8.0%), RTS de l'Ouest-de-l'Île-de-Montréal (9.5%) and RTS de l'Outaouais (14.0%) were the least likely to report being unable to easily find their way around.

Able to Easily Find One's Way During Overnight Stay at a Hospital

	Variable	Yes	No
	Male (n=189)	86.2%	13.8%
gender	Female (n=358)	81.6%	18.4%
	Total (n=547)	83.5%	16.5%
	25-44 years (n=52)	79.3%	20.7%
age	45-64 years (n=239)	86.8%	13.2%
	65 years and over (n=246)	79.7%	20.3%
	Total (n=541)	83.4%	16.6%
	less than \$30k (n=84)	80.6%	19.4%
barra balal	\$30-70k (n=146)	82.4%	17.6%
household income	\$70-100k (n=68)	87.4%	12.6%
meome	\$100k and over (n=109)	84.9%	15.1%
	Total (n=407)	83.6%	16.4%
knowledge of	bilingual (n=420)	86.3%	13.7%
English and	unilingual English (n=126)	73.5%	26.5%
French	Total (n=546)	83.5%	16.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who required an overnight stay at a hospital within the previous year (Q31): Q32H. During the hospital stay... Were you or the person you helped able to find your way around the hospital easily?

English-speaking females who stayed overnight at a hospital were more likely to report being unable to easily find their way around (18.4%) than were their male counterparts (13.8%).

With respect to income, those who stayed overnight at a hospital who earned less than \$30k were the most likely to report being unable to easily find their way around (19.4%) while those earning \$70-100k were the least likely (12.6%).

English-speakers who stayed overnight at a hospital who were unilingual English were more likely to report being unable to easily find their way around (26.5%) than their bilingual counterparts (13.7%).

13.1.10 Factors that would Improve Finding One's Way Around During Overnight Stay at a Hospital

Factors that would Improve Finding One's Way Around During Overnight Stay at a Hospital

Region	Bilingual signs	Bilingual receptionist	Documents in English	Translation services	Nothing	Clearer directions / Departmental map / color codes	A bilingual person dedicated to giving directions / info
061 Ouest-de-l'Île-de-Montréal (n=82)	39.1%	0.4%	0.7%	-	42.1%	5.9%	11.1%
062 Centre-Ouest-de-l'Île-de-Montréal (n=83)	34.6%	3.8%	3.8%	1.2%	35.4%	7.7%	12.7%
063 Centre-Sud-de-l'Île-de-Montréal (n=35)	52.9%	3.3%	-	-	38.7%	2.0%	1.5%
064 Nord-de-l'Île-de-Montréal (n=44)	31.6%	1.1%	6.2%	-	58.4%	-	-
065 Est-de-l'Île-de-Montréal (n=36)	52.3%	7.3%	-	-	38.5%	-	-
071 Outaouais (n=37)	54.0%	2.1%	3.5%	-	32.5%	6.5%	-
131 Laval (n=37)	22.1%	20.7%	-	16.5%	28.4%	11.0%	-
163 Montérégie-Ouest (n=39)	45.3%	22.4%	0.6%	0.6%	30.1%	1.0%	-
Total (n=526)	38.5%	6.0%	1.7%	3.5%	39.9%	4.5%	4.9%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32I. What would have made it easier to find your way within the hospital? ONE POSSIBLE ANSWER

Factors that would Improve Finding One's Way Around During Overnight Stay at a Hospital

	Variable	Bilingual signs	Bilingual receptionist	Documents in English	Translation services	Nothing	Clearer directions / Departmental map / color codes	A bilingual person dedicated to giving directions
	Male (n=184)	38.8%	1.2%	1.8%	4.3%	40.8%	6.6%	6.1%
gender	Female (n=342)	38.3%	9.4%	1.6%	2.9%	39.2%	3.0%	4.0%
	Total (n=526)	38.5%	6.0%	1.7%	3.5%	39.9%	4.5%	4.9%
	25-44 years (n=52)	33.1%	13.3%	1.9%	9.5%	39.8%	2.5%	-
2.00	45-64 years (n=227)	44.0%	2.4%	1.7%	0.3%	43.0%	5.4%	2.1%
age	65 years and over (n=238)	37.4%	2.1%	0.7%	0.9%	45.9%	7.5%	3.3%
	Total (n=521)	38.7%	5.8%	1.4%	3.5%	40.0%	4.6%	5.0%
	less than \$30k (n=81)	32.7%	3.3%	5.0%	-	52.5%	2.3%	3.3%
ĺ	\$30-70k (n=138)	31.9%	9.5%	1.4%	12.0%	34.7%	8.7%	0.8%
household income	\$70-100k (n=67)	41.3%	18.2%	-	-	37.3%	0.4%	2.7%
meome	\$100k and over (n=107)	51.4%	1.6%	1.8%	0.8%	37.3%	5.9%	0.7%
	Total (n=393)	39.6%	7.3%	1.9%	4.7%	38.8%	5.5%	1.4%
knowledge of	bilingual (n=408)	38.1%	4.5%	0.9%	4.4%	39.8%	5.2%	6.2%
	unilingual English (n=117)	40.3%	11.7%	5.0%	-	39.9%	2.1%	-
French	Total (n=525)	38.6%	6.0%	1.7%	3.5%	39.8%	4.5%	4.9%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32I. What would have made it easier to find your way within the hospital?

ONE POSSIBLE ANSWER

13.1.11 Received Consent Forms in English During Overnight Stay at a Hospital

Received Consent Forms in English During Overnight Stay at a Hospital

Region	Yes	No
031 Capitale-Nationale (n=31)	6.9%	93.1%
061 Ouest-de-l'Île-de-Montréal (n=73)	66.3%	33.7%
062 Centre-Ouest-de-l'Île-de-Montréal (n=75)	93.3%	6.7%
063 Centre-Sud-de-l'Île-de-Montréal (n=32)	69.1%	30.9%
064 Nord-de-l'Île-de-Montréal (n=45)	65.9%	34.1%
065 Est-de-l'Île-de-Montréal (n=33)	27.1%	72.9%
071 Outaouais (n=30)	69.7%	30.3%
131 Laval (n=35)	37.7%	62.3%
163 Montérégie-Ouest (n=35)	49.2%	50.8%
Total (n=478)	58.5%	41.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32J. During the hospital stay... Did you or the person you helped receive consent forms in English?

Among English speakers who stayed overnight at a hospital, 41.5% reported the consent forms were not in English.

English speakers who stayed overnight at a hospital in the region of RTS du Centre-Ouest-de-l'Île-de-Montréal (6.7%) were the least likely to report the consent forms were not in English.

Received Consent Forms in English During Overnight Stay at a Hospital

	Variable	Yes	No
	Male (n=169)	57.7%	42.3%
gender	Female (n=309)	59.1%	40.9%
	Total (n=478)	58.5%	41.5%
	25-44 years (n=47)	51.7%	48.3%
2.00	45-64 years (n=214)	57.9%	42.1%
age	65 years and over (n=209)	69.1%	30.9%
	Total (n=473)	58.8%	41.2%
	less than \$30k (n=76)	54.8%	45.2%
h a contract of	\$30-70k (n=130)	48.0%	52.0%
household income	\$70-100k (n=53)	68.1%	31.9%
lineome	\$100k and over (n=100)	67.6%	32.4%
	Total (n=359)	58.0%	42.0%
knowledge of	bilingual (n=371)	55.6%	44.4%
English and	unilingual English (n=107)	68.8%	31.2%
French	Total (n=478)	58.5%	41.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32J. During the hospital stay... Did you or the person you helped receive consent forms in English?

English-speaking males who stayed overnight at a hospital were more likely to report the consent forms were not in English (42.3%) than were their female counterparts (40.9%).

Across age groups, English speakers who stayed overnight at a hospital who were aged 25-44 years were the most likely to report the consent forms were not in English (48.3%) while those aged 65 years and over were the least likely (30.9%).

With respect to income, those who stayed overnight at a hospital who earned \$30-70k were the most likely to report the consent forms were not in English (52.0%) while those earning \$70-100k were the least likely (31.9%).

English-speakers who stayed overnight at a hospital who were bilingual were more likely to report the consent forms were not in English (44.4%) than their unilingual English counterparts (31.2%).

13.1.12 Received Other Information in English During Overnight Stay at a Hospital

Received Other Information in English During Overnight Stay at a Hospital

Region	Yes	No
031 Capitale-Nationale (n=30)	33.0%	67.0%
061 Ouest-de-l'Île-de-Montréal (n=72)	59.5%	40.5%
062 Centre-Ouest-de-l'Île-de-Montréal (n=79)	78.6%	21.4%
063 Centre-Sud-de-l'Île-de-Montréal (n=31)	64.2%	35.8%
064 Nord-de-l'Île-de-Montréal (n=41)	63.2%	36.8%
065 Est-de-l'Île-de-Montréal (n=35)	26.7%	73.3%
071 Outaouais (n=33)	61.7%	38.3%
131 Laval (n=38)	35.7%	64.3%
163 Montérégie-Ouest (n=36)	56.7%	43.3%
Total (n=489)	54.4%	45.6%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32K. During the hospital stay... Other than consent forms was any other written information provided in English to you or the person you helped?

Among English speakers who stayed overnight at a hospital, 45.6% reported that written information other than consent forms was not provided in English.

We observe that English-speakers who stayed overnight at a hospital in the regions of RTS de Lanaudière (99.5%), RTS de l'Est-de-l'Île-de-Montréal (73.3%) and RTS de la Capitale-Nationale (67.0%) were the most likely to report that other written information was not in English.

English speakers who stayed overnight at a hospital in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (21.4%), RTS du Centre-Sud-de-l'Île-de-Montréal (35.8%) and RTS du Nord-de-l'Île-de-Montréal (36.8%) were the least likely to report that other written information was not in English.

Received Other Information in English During Overnight Stay at a Hospital

	Variable	Yes	No
	Male (n=169)	55.9%	44.1%
gender	Female (n=320)	53.3%	46.7%
	Total (n=489)	54.4%	45.6%
	25-44 years (n=49)	56.3%	43.7%
2.00	45-64 years (n=217)	46.4%	53.6%
age	65 years and over (n=215)	59.6%	40.4%
·	Total (n=485)	54.6%	45.4%
	less than \$30k (n=76)	50.2%	49.8%
	\$30-70k (n=139)	40.0%	60.0%
household income	\$70-100k (n=57)	64.0%	36.0%
meome	\$100k and over (n=97)	64.5%	35.5%
•	Total (n=369)	52.4%	47.6%
knowledge of English and French	bilingual (n=374)	51.2%	48.8%
	unilingual English (n=114)	66.0%	34.0%
	Total (n=488)	54.5%	45.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32K. During the hospital stay... Other than consent forms was any other written information provided in English to you or the person you helped?

English-speaking females who stayed overnight at a hospital were more likely to report that other written information was not in English (46.7%) than were their male counterparts (44.1%).

Across age groups, English speakers who stayed overnight at a hospital who were aged 45-64 years were the most likely to report that other written information was not in English (53.6%).

With respect to income, those who stayed overnight at a hospital who earned \$30-70k were the most likely to report that other written information was not in English (60.0%) while those earning \$100k and over were the least likely (35.5%).

English-speakers who stayed overnight at a hospital who were bilingual were more likely to report that other written information was not in English (48.8%) than their unilingual English counterparts (34.0%).

13.1.13 Nursing Staff Spoke English During Overnight Stay at a Hospital

Nursing Staff Spoke English During Overnight Stay at a Hospital

Region	Yes	No
061 Ouest-de-l'Île-de-Montréal (n=88)	78.5%	21.5%
062 Centre-Ouest-de-l'Île-de-Montréal (n=87)	95.5%	4.5%
063 Centre-Sud-de-l'Île-de-Montréal (n=40)	67.4%	32.6%
064 Nord-de-l'Île-de-Montréal (n=49)	69.0%	31.0%
065 Est-de-l'Île-de-Montréal (n=37)	40.8%	59.2%
071 Outaouais (n=37)	88.0%	12.0%
131 Laval (n=40)	38.0%	62.0%
163 Montérégie-Ouest (n=40)	79.3%	20.7%
Total (n=555)	71.7%	28.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32L. During the hospital stay... Did the nursing staff providing care speak in English to you or the person you helped?

Among English speakers who stayed overnight at a hospital, 28.3% reported that the nursing staff did not speak English to them.

We observe that English-speakers who stayed overnight at a hospital in the regions of RTS de Laval (62.0%) and RTS de l'Est-de-l'Île-de-Montréal (59.2%) were the most likely to report that the nursing staff did not speak English.

English speakers who stayed overnight at a hospital in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (4.5%), RTS de l'Outaouais (12.0%) and RTS de la Montérégie-Ouest (20.7%) were the least likely to report that the nursing staff did not speak English.

Nursing Staff Spoke English During Overnight Stay at a Hospital

	Variable	Yes	No
	Male (n=190)	71.8%	28.2%
gender	Female (n=365)	71.6%	28.4%
	Total (n=555)	71.7%	28.3%
	25-44 years (n=52)	71.5%	28.5%
2.00	45-64 years (n=244)	64.8%	35.2%
age	65 years and over (n=250)	82.2%	17.8%
	Total (n=550)	71.6%	28.4%
	less than \$30k (n=84)	72.0%	28.0%
	\$30-70k (n=149)	66.7%	33.3%
household income	\$70-100k (n=69)	73.5%	26.5%
meome	\$100k and over (n=112)	71.7%	28.3%
	Total (n=414)	70.1%	29.9%
knowledge of English and French	bilingual (n=427)	68.8%	31.2%
	unilingual English (n=127)	81.8%	18.2%
	Total (n=554)	71.6%	28.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32L. During the hospital stay... Did the nursing staff providing care speak in English to you or the person you helped?

Across age groups, English speakers who stayed overnight at a hospital who were aged 45-64 years were the most likely to report that the nursing staff did not speak English (35.2%) while those aged 65 years and over were the least likely (17.8%).

With respect to income, those who stayed overnight at a hospital who earned \$30-70k were the most likely to report that the nursing staff did not speak English (33.3%) while those earning \$70-100k were the least likely (26.5%).

English-speakers who stayed overnight at a hospital who were bilingual were more likely to report that the nursing staff did not speak English (31.2%) than their unilingual English counterparts (18.2%).

13.1.14 Doctors Spoke English During Overnight Stay at a Hospital

Doctors Spoke English During Overnight Stay at a Hospital

Yes	No
32.3%	67.7%
87.8%	12.2%
100.0%	-
85.4%	14.6%
80.7%	19.3%
76.4%	23.6%
83.1%	16.9%
45.8%	54.2%
80.3%	19.7%
80.4%	19.6%
	32.3% 87.8% 100.0% 85.4% 80.7% 76.4% 83.1% 45.8% 80.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32M. During the hospital stay... Did your doctors speak in English to you or the person you helped?

Among English speakers who stayed overnight at a hospital, 19.6% reported that the doctors did not speak English to them.

We observe that English-speakers who stayed overnight at a hospital in the regions of RTS de la Capitale-Nationale (67.7%) and RTS de Laval (54.2%) were the most likely to report that the doctors did not speak English.

Doctors Spoke English During Overnight Stay at a Hospital

	Variable	Yes	No
	Male (n=192)	79.1%	20.9%
gender	Female (n=365)	81.2%	18.8%
	Total (n=557)	80.4%	19.6%
	25-44 years (n=51)	80.3%	19.7%
2.00	45-64 years (n=243)	76.8%	23.2%
age	65 years and over (n=253)	88.1%	11.9%
	Total (n=551)	80.4%	19.6%
	less than \$30k (n=85)	77.9%	22.1%
	\$30-70k (n=150)	75.2%	24.8%
household income	\$70-100k (n=69)	83.9%	16.1%
meome	\$100k and over (n=111)	84.6%	15.4%
	Total (n=415)	79.9%	20.1%
knowledge of English and French	bilingual (n=429)	77.3%	22.7%
	unilingual English (n=127)	91.4%	8.6%
	Total (n=556)	80.3%	19.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32M. During the hospital stay... Did your doctors speak in English to you or the person you helped?

Across age groups, English speakers who stayed overnight at a hospital who were aged 65 years and over were the least likely to report that the doctors did not speak English (11.9%).

With respect to income, those who stayed overnight at a hospital who earned \$30-70k were the most likely to report that the doctors did not speak English (24.8%) while those earning \$100k and over were the least likely (15.4%).

English-speakers who stayed overnight at a hospital who were bilingual were more likely to report that the doctors did not speak English (22.7%) than their unilingual English counterparts (8.6%).

13.1.15 Medical Technicians Spoke English During Overnight Stay at a Hospital

Medical Technicians Spoke English During Overnight Stay at a Hospital

Region	Yes	No	Did not see medical technicians
031 Capitale-Nationale (n=31)	5.8%	94.2%	3.4%
061 Ouest-de-l'Île-de-Montréal (n=87)	79.2%	20.8%	2.0%
062 Centre-Ouest-de-l'Île-de-Montréal (n=83)	98.7%	1.3%	1.2%
063 Centre-Sud-de-l'Île-de-Montréal (n=37)	76.9%	23.1%	1.1%
064 Nord-de-l'Île-de-Montréal (n=48)	63.2%	36.8%	1.8%
065 Est-de-l'Île-de-Montréal (n=37)	69.0%	31.0%	5.4%
071 Outaouais (n=36)	84.2%	15.8%	8.9%
131 Laval (n=40)	36.6%	63.4%	2.4%
163 Montérégie-Ouest (n=40)	67.0%	33.0%	5.7%
Total (n=538)	71.1%	28.9%	2.9%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who required an overnight stay at a hospital within the previous year (Q31): Q32N. During the hospital stay... Did your medical technicians speak to you or the person you helped in English?

Among English speakers who stayed overnight at a hospital, 28.9% reported that the medical technicians did not speak English to them.

We observe that English-speakers who stayed overnight at a hospital in the regions of RTS de la Capitale-Nationale (94.2%) and RTS de Laval (63.4%) were the most likely to report that the medical technicians did not speak English.

English speakers who stayed overnight at a hospital in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (1.3%), RTS de l'Outaouais (15.8%) and RTS de l'Ouest-de-l'Île-de-Montréal (20.8%) were the least likely to report that the medical technicians did not speak English.

Medical Technicians Spoke English During Overnight Stay at a Hospital

	Variable	Yes	No	Did not see medical technicians
	Male (n=186)	72.3%	27.7%	1.0%
gender	Female (n=352)	70.2%	29.8%	4.2%
	Total (n=538)	71.1%	28.9%	2.9%
	25-44 years (n=50)	69.4%	30.6%	2.0%
2.00	45-64 years (n=239)	65.4%	34.6%	3.2%
age	65 years and over (n=241)	81.7%	18.3%	3.3%
	Total (n=534)	71.1%	28.9%	2.6%
	less than \$30k (n=83)	72.0%	28.0%	3.3%
	\$30-70k (n=143)	62.0%	38.0%	3.6%
household income	\$70-100k (n=67)	89.5%	10.5%	3.2%
meome	\$100k and over (n=105)	71.4%	28.6%	1.3%
	Total (n=398)	70.7%	29.3%	2.8%
knowledge of English and French	bilingual (n=412)	66.8%	33.2%	2.8%
	unilingual English (n=125)	86.4%	13.6%	3.2%
	Total (n=537)	71.1%	28.9%	2.9%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who required an overnight stay at a hospital within the previous year (Q31): Q32N. During the hospital stay... Did your medical technicians speak to you or the person you helped in English?

Across age groups, English speakers who stayed overnight at a hospital who were aged 45-64 years were the most likely to report that the medical technicians did not speak English (34.6%) while those aged 65 years and over were the least likely (18.3%).

With respect to income, those who stayed overnight at a hospital who earned \$30-70k were the most likely to report that the medical technicians did not speak English (38.0%) while those earning \$70-100k were the least likely (10.5%).

English-speakers who stayed overnight at a hospital who were bilingual were more likely to report that the medical technicians did not speak English (33.2%) than their unilingual English counterparts (13.6%).

13.1.16 Received Pre-intervention or Post-intervention Instructions in English During Overnight Stay

Received Pre-intervention or Post-intervention Instructions in English During Overnight Stay at a Hospital

Region	Yes	No	Did not receive Pre- intervention or Post-intervention instruction		
031 Capitale-Nationale (n=31)	10.7%	89.3%	-		
061 Ouest-de-l'Île-de-Montréal (n=79)	65.2%	34.8%	10.3%		
062 Centre-Ouest-de-l'Île-de-Montréal (n=80)	93.7%	6.3%	3.8%		
063 Centre-Sud-de-l'Île-de-Montréal (n=36)	69.6%	30.4%	3.5%		
064 Nord-de-l'Île-de-Montréal (n=41)	54.9%	45.1%	4.8%		
065 Est-de-l'Île-de-Montréal (n=35)	43.3%	56.7%	1.4%		
071 Outaouais (n=35)	78.1%	21.9%	9.7%		
131 Laval (n=39)	40.5%	59.5%	2.8%		
163 Montérégie-Ouest (n=38)	59.0%	41.0%	7.4%		
Total (n=516)	58.8%	41.2%	9.5%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who required an overnight stay at a hospital within the previous year (Q31): Q320. During the hospital stay... Did you or the person you helped receive written Pre-intervention or Post-intervention instructions in English?

Among English speakers who stayed overnight at a hospital, 41.2% reported that Pre-intervention or Post-intervention instructions were not provided in English.

We observe that English-speakers who stayed overnight at a hospital in the regions of RTS de la Capitale-Nationale (89.3%) and RTS de Laval (72.2%) were the most likely to report that Pre- or Post-intervention instructions were not provided in English.

English speakers who stayed overnight at a hospital in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (6.3%) and RTS de l'Outaouais (21.9%) were the least likely to report that Pre- or Post-intervention instructions were not provided in English.

Received Pre-intervention or Post-intervention Instructions in English During Overnight Stay at a Hospital

	Variable	Yes	No	Did not receive Pre- intervention or Post-intervention instruction
	Male (n=181)	59.5%	40.5%	12.4%
gender	Female (n=335)	58.4%	41.6%	7.4%
	Total (n=516)	58.8%	41.2%	9.5%
	25-44 years (n=49)	51.6%	48.4%	13.2%
age	45-64 years (n=230)	56.0%	44.0%	9.1%
	65 years and over (n=229)	70.5%	29.5%	6.0%
	Total (n=511)	58.7%	41.3%	9.3%
	less than \$30k (n=83)	61.3%	38.7%	6.5%
	\$30-70k (n=143)	51.6%	48.4%	6.4%
household income	\$70-100k (n=59)	70.5%	29.5%	8.2%
meome	\$100k and over (n=103)	69.0%	31.0%	4.8%
	Total (n=388)	61.1%	38.9%	6.2%
English and	bilingual (n=396)	53.0%	47.0%	11.1%
	unilingual English (n=119)	78.3%	21.7%	4.0%
	Total (n=515)	58.9%	41.1%	9.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who required an overnight stay at a hospital within the previous year (Q31): Q32O. During the hospital stay... Did you or the person you helped receive written Pre-intervention or Post-intervention instructions in English?

Across age groups, English speakers who stayed overnight at a hospital who were aged 25-44 years were the most likely to report that Pre- or Post-intervention instructions were not provided in English (48.4%) while those aged 65 years and over were the least likely (29.5%).

With respect to income, those who stayed overnight at a hospital who earned \$30-70k were the most likely to report that Pre- or Post-intervention instructions were not provided in English (48.4%) while those earning \$70-100k were the least likely (29.5%).

English-speakers who stayed overnight at a hospital who were bilingual were more likely to report that Pre- or Post-intervention instructions were not provided in English (47.0%) than their unilingual English counterparts (21.7%).

13.1.17 Translation Services Offered During Overnight Stay at a Hospital

Translation Services Offered During Overnight Stay at a Hospital

Region	Yes	No
031 Capitale-Nationale (n=30)	19.5%	80.5%
061 Ouest-de-l'Île-de-Montréal (n=73)	30.3%	69.7%
062 Centre-Ouest-de-l'Île-de-Montréal (n=72)	34.5%	65.5%
063 Centre-Sud-de-l'Île-de-Montréal (n=36)	24.7%	75.3%
064 Nord-de-l'Île-de-Montréal (n=45)	21.0%	79.0%
065 Est-de-l'Île-de-Montréal (n=33)	7.0%	93.0%
071 Outaouais (n=35)	12.7%	87.3%
131 Laval (n=35)	11.4%	88.6%
163 Montérégie-Ouest (n=38)	14.7%	85.3%
Total (n=495)	18.7%	81.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32P. During the hospital stay... Were translation services offered?

Among English speakers who stayed overnight at a hospital, 81.3% reported translation services were not provided in English.

English speakers who stayed overnight at a hospital in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (65.5%) and RTS de l'Ouest-de-l'Île-de-Montréal (69.7%) were the least likely to report translation services were not provided in English.

Translation Services Offered During Overnight Stay at a Hospital

	Variable	Yes	No
	Male (n=160)	25.8%	74.2%
gender	Female (n=335)	13.9%	86.1%
	Total (n=495)	18.7%	81.3%
	25-44 years (n=48)	12.3%	87.7%
2.00	45-64 years (n=222)	13.4%	86.6%
age	65 years and over (n=219)	23.7%	76.3%
	Total (n=491)	18.5%	81.5%
	less than \$30k (n=72)	27.2%	72.8%
h h - l - l	\$30-70k (n=136)	17.1%	82.9%
household income	\$70-100k (n=64)	6.9%	93.1%
	\$100k and over (n=102)	19.6%	80.4%
	Total (n=374)	17.9%	82.1%
knowledge of English and French	bilingual (n=382)	16.6%	83.4%
	unilingual English (n=113)	25.7%	74.3%
	Total (n=495)	18.7%	81.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32P. During the hospital stay... Were translation services offered?

English-speaking females who stayed overnight at a hospital were more likely to report translation services were not provided in English (86.1%) than were their male counterparts (74.2%).

Across age groups, English speakers who stayed overnight at a hospital who were aged 25-44 years were the most likely to report translation services were not provided in English (87.7%).

With respect to income, those who stayed overnight at a hospital who earned \$70-100k were the most likely to report translation services were not provided in English (93.1%) while those earning less than \$30k were the least likely (72.8%).

English-speakers who stayed overnight at a hospital who were bilingual were more likely to report translation services were not provided in English (83.4%) than their unilingual English counterparts (74.3%).

13.1.18 Received English Instructions when Discharged During Overnight Stay at a Hospital

Received English Instructions when Discharged During Overnight Stay at a Hospital

Region	Yes	No			
031 Capitale-Nationale (n=31)	7.4%	92.6%			
061 Ouest-de-l'Île-de-Montréal (n=86)	72.2%	27.8%			
062 Centre-Ouest-de-l'Île-de-Montréal (n=85)	91.0%	9.0%			
063 Centre-Sud-de-l'Île-de-Montréal (n=38)	70.0%	30.0%			
064 Nord-de-l'Île-de-Montréal (n=47)	51.0%	49.0%			
065 Est-de-l'Île-de-Montréal (n=32)	29.5%	70.5%			
071 Outaouais (n=37)	86.8%	13.2%			
131 Laval (n=39)	38.9%	61.1%			
163 Montérégie-Ouest (n=38)	58.1%	41.9%			
Total (n=533)	62.7%	37.3%			

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32Q. When you or the person you helped were discharged from the hospital, did you receive instructions in English?

Among English speakers who stayed overnight at a hospital, 37.3% reported they did not receive instructions in English when discharged.

We observe that English-speakers who stayed overnight at a hospital in the regions of RTS de la Capitale-Nationale (92.6%) and RTS de l'Est-de-l'Île-de-Montréal (70.5%) were the most likely to report they did not receive instructions in English when discharged.

English speakers who stayed overnight at a hospital in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (9.0%) and RTS de l'Outaouais (13.2%) were the least likely to report they did not receive instructions in English when discharged.

Received English Instructions when Discharged During Overnight Stay at a Hospital

	Variable	Yes	No
	Male (n=182)	60.5%	39.5%
gender	Female (n=351)	64.4%	35.6%
•	Total (n=533)	62.7%	37.3%
	25-44 years (n=48)	56.2%	43.8%
	45-64 years (n=235)	60.7%	39.3%
age	65 years and over (n=242)	74.8%	25.2%
	Total (n=528)	62.7%	37.3%
	less than \$30k (n=83)	65.0%	35.0%
	\$30-70k (n=144)	55.0%	45.0%
household income	\$70-100k (n=64)	69.7%	30.3%
meome	\$100k and over (n=104)	64.5%	35.5%
	Total (n=395)	61.7%	38.3%
knowledge of	bilingual (n=406)	59.3%	40.7%
English and	unilingual English (n=126)	74.7%	25.3%
French	Total (n=532)	62.8%	37.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who required an overnight stay at a hospital within the previous year (Q31): Q32Q. When you or the person you helped were discharged from the hospital, did you receive instructions in English?

English-speaking males who stayed overnight at a hospital were more likely to report they did not receive instructions in English when discharged (39.5%) than were their female counterparts (35.6%).

Across age groups, English speakers who stayed overnight at a hospital who were aged 25-44 years were the most likely to report they did not receive instructions in English when discharged (43.8%) while those aged 65 years and over were the least likely (25.2%).

With respect to income, those who stayed overnight at a hospital who earned \$30-70k were the most likely to report they did not receive instructions in English when discharged (45.0%) while those earning \$70-100k were the least likely (30.3%).

English-speakers who stayed overnight at a hospital who were bilingual were more likely to report they did not receive instructions in English when discharged (40.7%) than their unilingual English counterparts (25.3%).

14 Language of Service from Health or Social Service Professional Concerning Mental Health

14.1.1 Used the Services of a Health or Social Service Professional Concerning Mental Health

Used the Services of a Health or Social Service Professional Concerning Mental Health

	English S	peakers	French Speakers		
Region	Yes	No	Yes	No	
031 Capitale-Nationale (n=202)	12.9%	87.1%	10.9%	89.1%	
051 Estrie – CHU de Sherbrooke (n=106)	24.8%	75.2%	15.6%	84.4%	
061 Ouest-de-l'Île-de-Montréal (n=484)	13.6%	86.4%	7.1%	92.9%	
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	16.7%	83.3%	7.5%	92.5%	
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	18.3%	81.7%	2.4%	97.6%	
064 Nord-de-l'Île-de-Montréal (n=251)	9.8%	90.2%	12.2%	87.8%	
065 Est-de-l'Île-de-Montréal (n=215)	3.8%	96.2%	8.5%	91.5%	
071 Outaouais (n=200)	5.6%	94.4%	14.1%	85.9%	
111 Gaspésie (n=75)	7.4%	92.6%	-	-	
131 Laval (n=257)	8.6%	91.4%	3.8%	96.2%	
141 Lanaudière (n=75)	5.2%	94.8%	5.0%	95.0%	
151 Laurentides (n=110)	21.7%	78.3%	9.6%	90.4%	
161 Montérégie-Centre (n=150)	3.3%	96.7%	9.5%	90.5%	
162 Montérégie-Est (n=77)	21.9%	78.1%	26.4%	73.6%	
163 Montérégie-Ouest (n=240)	14.1%	85.9%	9.6%	90.4%	
Total (n=3,133)	12.7%	87.3%	10.9%	89.1%	

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
Q33. Within the last twelve months, in your region, have you used either for yourself or to help another person the services of a health or social service professional concerning a mental health problem.

Among English speakers, 12.7% had used the services of a health or social service professional concerning a mental health problem within the past year. This was higher than the proportion reported for French speakers (10.9%).

We observe that English-speakers in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (24.8%), RTS de la Montérégie-Est (21.9%) and RTS des Laurentides (21.7%) were the most likely to report using the services of a professional concerning a mental health problem.

English speakers in the regions of RTS de la Montérégie-Centre (3.3%), RTS de l'Est-de-l'Île-de-Montréal (3.8%) and RTS de Lanaudière (5.2%) were the least likely to report using the services of a professional concerning a mental health problem.

Used the Services of a Health or Social Service Professional Concerning Mental Health

		English S	peakers	French Speakers	
	Variable		No	Yes	No
	Male	10.5%	89.5%	6.8%	93.2%
gender	Female	14.9%	85.1%	14.7%	85.3%
	Total	12.7%	87.3%	10.9%	89.1%
	18-24 years	15.1%	84.9%	11.2%	88.8%
	25-44 years	16.2%	83.8%	16.1%	83.9%
age	45-64 years	12.5%	87.5%	11.1%	88.9%
	65 years and over	5.5%	94.5%	6.6%	93.4%
	Total	12.9%	87.1%	10.9%	89.1%
	less than \$30k	11.3%	88.7%	15.8%	84.2%
	\$30-70k	11.9%	88.1%	12.8%	87.2%
household income	\$70-100k	7.5%	92.5%	6.0%	94.0%
meome	\$100k and over	14.2%	85.8%	11.9%	88.1%
	Total	11.8%	88.2%	11.6%	88.4%
knowledge of	bilingual	13.5%	86.5%		
English and	unilingual English	9.5%	90.5%		
French	Total	12.7%	87.3%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q33. Within the last twelve months, in your region, have you used either for yourself or to help another person the services of a health or social service professional concerning a mental health problem.

English-speaking females were more likely to report using the services of a professional concerning a mental health problem (14.9%) than were their male counterparts (10.5%).

Across age groups, English speakers who were aged 25-44 years were the most likely to report using the services of a professional concerning a mental health problem (16.2%) while those aged 65 years and over were the least likely (5.5%).

With respect to income, those who earned \$100k and over were the most likely to report using the services of a professional concerning a mental health problem (14.2%) while those earning \$70-100k were the least likely (7.5%).

English-speakers who were bilingual were more likely to report using the services of a professional concerning a mental health problem (13.5%) than their unilingual English counterparts (9.5%).

14.1.2 Type of Professional Consulted Concerning Mental Health

Type of Professional Consulted Concerning Mental Health

	Variable	Psychologist	Psychiatrist	Family doctor/General practitioner	Social worker	Nurse	Specialist
	Male	37.8%	18.8%	14.4%	25.4%	0.4%	2.4%
gender	Female	49.5%	18.9%	12.3%	20.6%	2.1%	5.1%
	Total	44.6%	18.9%	13.2%	22.6%	1.4%	4.0%
	18-24 years	63.3%	19.9%	2.3%	30.1%	-	-
	25-44 years	49.6%	12.7%	13.1%	24.6%	1.4%	4.1%
age	45-64 years	36.3%	26.2%	15.1%	18.1%	1.6%	4.6%
•	65 years and over	17.5%	22.8%	23.1%	17.0%	3.7%	8.2%
	Total	44.7%	18.9%	13.0%	22.7%	1.4%	4.0%
	less than \$30k	29.4%	27.8%	14.4%	17.2%	7.9%	3.3%
	\$30-70k	27.3%	20.9%	8.3%	33.2%	1.2%	9.9%
household income	\$70-100k	38.0%	3.2%	38.1%	16.1%	0.4%	6.0%
meome	\$100k and over	56.6%	17.4%	19.4%	11.9%	0.8%	1.9%
•	Total	41.0%	18.3%	17.4%	19.9%	1.9%	5.1%
knowledge of	bilingual	48.7%	20.0%	10.6%	21.3%	0.9%	4.2%
English and	unilingual English	21.5%	12.5%	27.8%	30.1%	4.3%	2.4%
French	Total	44.6%	18.9%	13.2%	22.6%	1.4%	4.0%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used the services of a professional regarding mental health within the previous year (Q33): Q34A. What type of health professional did you consult most frequently for yourself or to help another person?

14.1.3 Served in English by Professional Concerning Mental Health

Served in English by Professional Concerning Mental Health

	Variable	Yes	No
	Male (n=93)	80.5%	19.5%
gender	Female (n=203)	85.1%	14.9%
	Total (n=296)	83.2%	16.8%
	25-44 years (n=47)	86.8%	13.2%
200	45-64 years (n=162)	79.6%	20.4%
age	65 years and over (n=70)	89.4%	10.6%
	Total (n=291)	83.5%	16.5%
	less than \$30k (n=40)	79.0%	21.0%
	\$30-70k (n=77)	88.8%	11.2%
household income	\$70-100k (n=32)	92.0%	8.0%
meome	\$100k and over (n=84)	90.8%	9.2%
	Total (n=233)	88.6%	11.4%
knowledge of	bilingual (n=244)	81.5%	18.5%
English and	unilingual English (n=52)	92.8%	7.2%
French	Total (n=296)	83.2%	16.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used the services of a professional regarding mental health within the previous year (Q33): Q34B. Thinking of the health professional you or the person your helped consulted most frequently concerning a mental health problem... Were you served in English by this professional?

Among English speakers who used the services of a professional concerning mental health, 16.8% were not served in English.

English-speaking males who used the services of a professional concerning mental health were more likely to report not being served in English (19.5%) than were their female counterparts (14.9%).

Across age groups, English speakers who used the services of a professional concerning mental health who were aged 65 years and over were the least likely to report not being served in English (10.6%).

With respect to income, those who used the services of a professional concerning mental health who earned less than \$30k were the most likely to report not being served in English (21.0%) while those earning \$70-100k were the least likely (8.0%).

English-speakers who used the services of a professional concerning mental health who were bilingual were more likely to report not being served in English (18.5%) than their unilingual English counterparts (7.2%).

14.1.4 Requested and Received Service in English by Professional Concerning Mental Health

Requested and Received Service in English by Professional Concerning Mental Health

	Variable	Served directly in English	Had to ask for service in English	
	Male (n=74)	92.1%	6.5%	
gender	Female (n=154)	80.8%	17.8%	
	Total (n=228)	85.4%	13.2%	
	25-44 years (n=42)	89.6%	10.4%	
	45-64 years (n=118)	75.8%	19.5%	
age	65 years and over (n=57)	82.1%	17.9%	
	Total (n=226)	85.3%	13.2%	
	less than \$30k (n=32)	91.6%	8.4%	
household	\$30-70k (n=58)	92.7%	7.3%	
income	\$100k and over (n=72)	78.9%	21.1%	
	Total (n=186)	86.5%	13.5%	
knowledge of	bilingual (n=184)	84.8%	13.5%	
English and	unilingual English (n=44)	88.3%	11.7%	
French	Total (n=228)	85.4%	13.2%	

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who were served in English by a professional regarding mental health (Q34B): Q34C. Were you served directly in English or did you or the person you helped have to ask for service in English when you saw the health or social services professional?

Among English speakers who used the services of a professional concerning mental health, 13.2% had to ask for service in English.

English-speaking females who used the services of a professional concerning mental health were more likely to have had to ask for service in English (17.8%) than were their male counterparts (6.5%).

Across age groups, English speakers who used the services of a professional concerning mental health who were aged 45-64 years were the most likely to have had to ask for service in English (19.5%).

With respect to income, those who used the services of a professional concerning mental health who earned \$100k and over were the most likely to have had to ask for service in English (21.1%) while those earning \$30-70k were the least likely (7.3%).

English-speakers who used the services of a professional concerning mental health who were bilingual were more likely to have had to ask for service in English (13.5%) than their unilingual English counterparts (11.7%)

14.1.5 Importance of being Served in English Concerning Mental Health Among Those Served in English

Importance of being Served in English by Professional Concerning Mental Health Among Those Served in English

	Variable		Service in French was acceptable
	Male (n=74)	74.9%	25.1%
gender	Female (n=158)	94.3%	5.7%
	Total (n=232)	86.4%	13.6%
	25-44 years (n=43)	78.0%	22.0%
2.00	45-64 years (n=122)	92.8%	7.2%
age	65 years and over (n=56)	94.8%	5.2%
	Total (n=230)	86.4%	13.6%
	less than \$30k (n=32)	84.8%	15.2%
household	\$30-70k (n=57)	73.0%	27.0%
income	\$100k and over (n=72)	81.1%	18.9%
	Total (n=186)	81.0%	19.0%
knowledge of	bilingual (n=188)	84.1%	15.9%
English and	unilingual English (n=44)	98.3%	1.7%
French	Total (n=232)	86.4%	13.6%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who were served in English by a professional regarding mental health (Q34B): Q34D. Considering the situation, do you feel it was VERY IMPORTANT to receive the service in English or would it have been acceptable to receive the service in French?

Among English speakers who were served in English by a professional concerning mental health, 86.4% felt it was very important to be served in English.

English-speaking females who were served in English by a professional concerning mental health were more likely to feel it was very important to be served in English (94.3%) than were their male counterparts (74.9%).

Across age groups, English speakers who were served in English by a professional concerning mental health who were aged 25-44 years were the least likely to feel it was very important to be served in English (78.0%) while those aged 65 years and over were the most likely (94.8%).

English-speakers who were served in English by a professional concerning mental health who were unilingual English were more likely to feel it was very important to be served in English (98.3%) than their bilingual counterparts (84.1%).

14.1.6 Importance of Mental Health Services in English

Importance of Mental Health Services in English

Very important			Not at all important	
50.6%	15.1%	17.4%	16.9%	
75.6%	5.7%	0.8%	18.0%	
83.8%	7.7%	8.2%	0.2%	
89.2%	6.3%	3.6%	0.8%	
83.9%	12.8%	2.6%	0.8%	
71.2%	17.3%	8.2%	3.3%	
73.0%	21.7%	2.0%	3.3%	
93.1%	2.0%	2.5%	2.4%	
92.1%	5.5%	1.5%	0.9%	
81.8%	9.7%	6.6%	2.0%	
55.8%	32.5%	7.0%	4.6%	
79.5%	13.3%	3.3%	3.8%	
76.7%	21.0%	1.1%	1.2%	
71.1%	4.0%	20.0%	4.9%	
89.2%	5.4%	4.2%	1.2%	
81.9%	10.5%	5.2%	2.4%	
	50.6% 75.6% 83.8% 89.2% 83.9% 71.2% 73.0% 93.1% 92.1% 81.8% 55.8% 79.5% 76.7% 71.1% 89.2%	important important 50.6% 15.1% 75.6% 5.7% 83.8% 7.7% 89.2% 6.3% 83.9% 12.8% 71.2% 17.3% 73.0% 21.7% 93.1% 2.0% 92.1% 5.5% 81.8% 9.7% 55.8% 32.5% 79.5% 13.3% 76.7% 21.0% 71.1% 4.0% 89.2% 5.4%	important important important 50.6% 15.1% 17.4% 75.6% 5.7% 0.8% 83.8% 7.7% 8.2% 89.2% 6.3% 3.6% 83.9% 12.8% 2.6% 71.2% 17.3% 8.2% 73.0% 21.7% 2.0% 93.1% 2.0% 2.5% 92.1% 5.5% 1.5% 81.8% 9.7% 6.6% 55.8% 32.5% 7.0% 79.5% 13.3% 3.3% 76.7% 21.0% 1.1% 71.1% 4.0% 20.0% 89.2% 5.4% 4.2%	

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q35. If you or a person that you helped were in need of mental health services how important would it be that those services be provided in English? Would it be...

Among English speakers, 81.9% felt being provided mental health services in English was very important.

We observe that English-speakers in the regions of RTS de l'Outaouais (93.1%), RTS de la Gaspésie (92.1%) and RTS du Centre-Ouest-de-l'Île-de-Montréal (89.2%) were the most likely to report mental health services in English were very important.

English speakers in the regions of RTS de la Capitale-Nationale (50.6%), RTS de Lanaudière (55.8%) and RTS de la Montérégie-Est (71.1%) were the least likely to report mental health services in English were very important.

Importance of Mental Health Services in English

	Variable	Very important	Somewhat important		Not at all important
	Male	77.9%	12.7%	6.7%	2.7%
gender	Female	85.9%	8.3%	3.6%	2.2%
	Total	81.9%	10.5%	5.2%	2.4%
	18-24 years	69.8%	18.2%	11.1%	0.9%
	25-44 years	76.8%	14.1%	6.1%	3.0%
age	45-64 years	87.8%	6.5%	3.1%	2.5%
	65 years and over	88.2%	6.3%	3.2%	2.3%
	Total	81.7%	10.6%	5.2%	2.5%
	less than \$30k	82.2%	10.1%	6.1%	1.6%
[\$30-70k	82.9%	11.0%	3.6%	2.5%
household income	\$70-100k	90.8%	5.7%	2.6%	1.0%
l meenie	\$100k and over	79.9%	12.0%	5.9%	2.2%
	Total	83.3%	10.2%	4.6%	2.0%
knowledge of	bilingual	78.3%	12.5%	6.3%	2.8%
English and	unilingual English	96.7%	2.2%	0.4%	0.7%
French	Total	81.9%	10.5%	5.2%	2.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q35. If you or a person that you helped were in need of mental health services how important would it be that those services be provided in English? Would it be...

English-speaking females were more likely to report mental health services in English were very important (85.9%) than were their male counterparts (77.9%).

Across age groups, English speakers who were aged 65 years and over were the most likely to report mental health services in English were very important (88.2%) while those aged 18-24 years were the least likely (69.8%).

With respect to income, those who earned \$70-100k were the most likely to report mental health services in English were very important (90.8%) while those earning \$100k and over were the least likely (79.9%).

English-speakers who were unilingual English were more likely to report mental health services in English were very important (96.7%) than their bilingual counterparts (78.3%).

15 Health and Social Services in Another Region

15.1.1 Used Health and Social Services from a Public Institution in Another Region

Used Health and Social Services from a Public Institution in Another Region

	English Spe	eakers	French Sp	eakers
Region	Yes, for myself or another person	No	Yes, for myself or another person	No
031 Capitale-Nationale (n=202)	2.2%	97.8%	9.9%	90.1%
051 Estrie – CHU de Sherbrooke (n=106)	6.8%	93.2%	4.4%	95.6%
061 Ouest-de-l'Île-de-Montréal (n=484)	4.6%	95.4%	7.0%	93.0%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	4.2%	95.8%	5.7%	94.3%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	6.8%	93.2%	5.0%	95.0%
064 Nord-de-l'Île-de-Montréal (n=251)	7.8%	92.2%	7.9%	92.1%
065 Est-de-l'Île-de-Montréal (n=215)	5.8%	94.2%	7.9%	92.1%
071 Outaouais (n=200)	35.1%	64.9%	15.1%	84.9%
111 Gaspésie (n=75)	17.3%	82.7%	18.4%	81.6%
131 Laval (n=257)	14.6%	85.4%	11.1%	88.9%
141 Lanaudière (n=75)	6.5%	93.5%	14.6%	85.4%
151 Laurentides (n=110)	21.3%	78.7%	8.5%	91.5%
161 Montérégie-Centre (n=150)	13.5%	86.5%	14.4%	85.6%
162 Montérégie-Est (n=77)	11.7%	88.3%	13.3%	86.7%
163 Montérégie-Ouest (n=240)	28.8%	71.2%	3.8%	96.2%
Total (n=3,133)	11.1%	88.9%	9.7%	90.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q36. Within the last twelve months, have you used (either for yourself or to help another person), health and social services from a public institution (CLSC, hospital, long-term care facility) in ANOTHER REGION?

Among English speakers, 11.1% used the services of a public health and social service institution in another region. This was higher than the proportion reported for French speakers (9.7%).

We observe that English-speakers in the regions of RTS de l'Outaouais (35.1%), RTS de la Montérégie-Ouest (28.8%) and RTS des Laurentides (21.3%) were the most likely to report using public health and social services in another region.

English speakers in the regions of RTS de la Capitale-Nationale (2.2%), RTS du Centre-Ouest-de-l'Île-de-Montréal (4.2%) and RTS de l'Ouest-de-l'Île-de-Montréal (4.6%) were the least likely to report using public health and social services in another region.

Used Health and Social Services from a Public Institution in Another Region

Variable		English Spo	eakers	French Sp	eakers
		Yes, for myself or another person	No	Yes, for myself or another person	No
	Male	8.5%	91.5%	7.9%	92.1%
gender	Female	13.8%	86.2%	11.5%	88.5%
	Total	11.1%	88.9%	9.7%	90.3%
	18-24 years	2.6%	97.4%	7.3%	92.7%
•	25-44 years	13.5%	86.5%	6.8%	93.2%
age	45-64 years	12.8%	87.2%	10.8%	89.2%
	65 years and over	9.2%	90.8%	12.1%	87.9%
	Total	11.2%	88.8%	9.6%	90.4%
	less than \$30k	9.4%	90.6%	9.6%	90.4%
	\$30-70k	9.3%	90.7%	9.0%	91.0%
household income	\$70-100k	11.3%	88.7%	4.5%	95.5%
meome	\$100k and over	17.8%	82.2%	13.7%	86.3%
•	Total	12.6%	87.4%	9.6%	90.4%
knowledge of	bilingual	11.0%	89.0%		
English and	unilingual English	11.7%	88.3%		
French	Total	11.2%	88.8%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
Q36. Within the last twelve months, have you used (either for yourself or to help another person), health and social services from a public institution (CLSC, hospital, long-term care facility) in ANOTHER REGION?

English-speaking females were more likely to report using public health and social services in another region (13.8%) than were their male counterparts (8.5%).

Across age groups, English speakers who were aged 25-44 years were the most likely to report using public health and social services in another region (13.5%) while those aged 18-24 years were the least likely (2.6%).

With respect to income, those who earned \$100k and over were the most likely to report using public health and social services in another region (17.8%) while those earning \$30-70k were the least likely (9.3%).

English-speakers who were unilingual English were more likely to report using public health and social services in another region (11.7%) than their bilingual counterparts (11.0%).

15.1.2 Type of Service Used in Another Region

Type of Service Used in Another Region

Region	Oncology	Cardiology	Pediatrics	Obstetrics / Gynecology	mology	(nhysical and	Mental Health Services	Consultation / Walk-in clinic / General practioner		Surgery / Hospitalization / Medical procedure	X-Ray / Scans / Treatments	Nephrology / Eurology	l (blood
061 Ouest-de-l'Île-de-Montréal (n=30)	7.5%	11.0%	4.9%	-	2.1%	2.4%	-	7.6%	17.5%	9.5%	13.3%	8.3%	5.1%
071 Outaouais (n=51)	0.5%	3.6%	7.2%	4.1%	3.8%	6.7%	2.8%	63.3%	8.3%	7.4%	4.6%	1	0.8%
131 Laval (n=37)	15.8%	6.7%	1.3%	3.1%	15.5%	-	11.3%	36.0%	2.0%	1.9%	10.2%	21.8%	3.3%
163 Montérégie-Ouest (n=51)	1.0%	4.6%	12.1%	13.0%	5.5%	-	1.8%	31.2%	20.7%	9.8%	17.6%	0.8%	-
Total (n=343)	5.0%	5.0%	5.6%	4.8%	5.1%	2.9%	10.7%	34.4%	11.4%	6.3%	11.3%	3.7%	4.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who used public health and social services in another region (Q36): Q37A. What type of services did you receive in another region (either for yourself or to help another person)?

Type of Service Used in Another Region

	Variable	Oncology	Cardiology	Pediatrics	Obstetrics / Gynecology	•	Rehabilitation (physical and developmental)	Mental Health Services	Consultation / Walk-in clinic / General practioner	Emergency (unspecified)	Surgery / Hospitalization / Medical procedure	X-Ray / Scans / Treatments	Nephrology / Eurology	Testing (blood, urine)
	Male (n=117)	1.0%	5.8%	3.0%	0.4%	3.2%	3.9%	7.5%	45.3%	17.6%	5.0%	7.3%	4.1%	3.3%
gender	Female (n=226)	7.6%	4.5%	7.3%	7.6%	6.3%	2.2%	12.7%	27.3%	7.3%	7.1%	14.0%	3.5%	5.2%
	Total (n=343)	5.0%	5.0%	5.6%	4.8%	5.1%	2.9%	10.7%	34.4%	11.4%	6.3%	11.3%	3.7%	4.4%
	25-44 years (n=48)	5.5%	1.6%	9.1%	7.7%	6.2%	2.8%	15.6%	40.2%	5.4%	4.8%	8.5%	6.0%	3.9%
age	45-64 years (n=164)	4.6%	6.7%	4.8%	3.3%	3.2%	2.2%	7.7%	28.2%	20.1%	8.9%	14.8%	2.4%	4.3%
age	65 years and over (n=122)	3.7%	11.6%	-	2.2%	4.5%	5.8%	1.1%	33.5%	7.0%	5.4%	11.8%	2.1%	6.1%
,	Total (n=337)	5.1%	5.1%	5.7%	4.9%	4.5%	2.9%	10.8%	34.9%	11.3%	6.4%	11.3%	3.8%	4.3%
	\$30-70k (n=88)	7.0%	5.6%	-	3.1%	3.6%	0.4%	21.3%	25.2%	6.2%	5.2%	7.4%	4.1%	4.2%
household	\$70-100k (n=49)	2.1%	3.1%	8.0%	0.6%	2.3%	1.6%	7.5%	49.0%	9.1%	8.1%	20.6%	-	4.4%
income	\$100k and over (n=100)	3.3%	2.1%	10.3%	8.4%	2.7%	4.2%	3.1%	39.4%	19.7%	8.2%	9.9%	2.8%	1.6%
	Total (n=263)	3.6%	4.3%	6.4%	5.5%	2.6%	2.6%	10.9%	36.2%	12.3%	6.6%	11.4%	2.5%	4.0%
knowledge of	bilingual (n=263)	2.7%	5.2%	7.1%	5.8%	3.7%	2.1%	12.8%	30.5%	11.9%	6.8%	13.0%	2.3%	5.1%
	unilingual English (n=79)	13.7%	4.2%	-	0.8%	10.5%	5.9%	2.8%	49.5%	9.5%	4.3%	5.0%	8.9%	1.8%
French	Total (n=342)	5.0%	5.0%	5.6%	4.8%	5.1%	2.9%	10.7%	34.4%	11.4%	6.3%	11.3%	3.7%	4.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who used public health and social services in another region (Q36): Q37A. What type of services did you receive in another region (either for yourself or to help another person)?

15.1.3 Location of Service Used in Another Region

Location of Service Used in Another Region

Region	Outside Quebec, in another Canadian province or territory	Outside Canada	Inside Quebec but in another Health Region, specify:	
061 Ouest-de-l'Île-de-Montréal (n=32)	4.5%	1	95.5%	
071 Outaouais (n=54)	95.3%	1	5.3%	
131 Laval (n=38)	1.6%	4.0%	94.4%	
151 Laurentides (n=32)	44.4%	1	59.9%	
163 Montérégie-Ouest (n=55)	40.2%	0.6%	62.0%	
Total (n=367)	37.8%	1.8%	63.6%	

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used public health and social services in another region within the previous year (Q36): Q37B. Where did you go to receive those services (either for yourself or the person you helped)?

Location of Service Used in Another Region

	Variable	Outside Quebec, in another Canadian province or territory	Outside Canada	Inside Quebec but in another Health Region, specify:	
	Male (n=121)	44.3%	2.1%	55.1%	
gender	Female (n=246)	33.8%	1.6%	68.8%	
	Total (n=367)	37.8%	1.8%	63.6%	
	25-44 years (n=52)	52.2%	1.0%	48.5%	
2.00	45-64 years (n=174)	28.6%	3.1%	71.2%	
age	65 years and over (n=131)	22.4%	1.1%	79.2%	
	Total (n=361)	38.2%	1.8%	63.2%	
	\$30-70k (n=95)	34.5%	0.0%	73.2%	
household	\$70-100k (n=51)	49.9%	0.8%	49.4%	
income	\$100k and over (n=104)	44.9%	2.9%	54.2%	
	Total (n=279)	40.9%	1.5%	60.3%	
knowledge of	bilingual (n=282)	33.3%	1.9%	68.7%	
English and	unilingual English (n=84)	55.0%	1.2%	43.8%	
French	Total (n=366)	37.8%	1.8%	63.6%	

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who used public health and social services in another region within the previous year (Q36): Q37B. Where did you go to receive those services (either for yourself or the person you helped)?

15.1.4 Factors Motivating Use of Services in Another Region

Factors Motivating Use of Services in Another Region

Region	Services do not exist in my region	Personal preference	Medical referral	Service unavailable in English in my region	I helped a person living in another region		_	Quality of services / better services	Specialized		Availability / No doctor available in my area / No services	Provimity	Emergency / Accident
061 Ouest-de-l'Île-de-Montréal (n=32)	13.8%	29.0%	27.8%	-	12.0%	7.2%	4.0%	8.2%	2.0%	-	-	9.0%	-
071 Outaouais (n=54)	20.9%	1.7%	1.5%	27.2%	1.1%	-	0.4%	19.9%	5.7%	35.9%	11.3%	7.1%	0.5%
131 Laval (n=38)	22.0%	34.1%	24.2%	22.8%	9.1%	7.6%	5.5%	9.9%	1.5%	1	1.5%	4.0%	4.1%
151 Laurentides (n=31)	26.4%	30.9%	9.6%	22.1%	2.5%	-	12.1%	-	-	0.6%	17.0%	23.9%	-
163 Montérégie-Ouest (n=53)	3.0%	17.4%	9.5%	31.4%	5.1%	9.1%	5.1%	9.5%	-	24.9%	2.2%	11.3%	-
Total (n=354)	14.1%	17.5%	10.9%	29.1%	5.2%	4.5%	3.9%	8.9%	1.8%	14.9%	5.1%	10.3%	2.0%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used public health and social services in another region within the previous year (Q36): Q37C. What were the most important factors that motivated you to use services in another region (either for yourself or for the person you helped)? Multiple answers possible

Factors Motivating Use of Services in Another Region

	Variable	Services do not exist in my region	Personal preference	Medical referral	Service unavailable in English in my region	I helped a person living in another region	I was in the area at the time/travel /business	_	Quality of services / better services	Specialized	Less waiting / Faster service	Availability / No doctor available in my area / No services	Proximity	Emergency / Accident
	Male (n=120)	10.0%	12.7%	9.1%	30.5%	4.4%	6.9%	4.3%	4.5%	3.1%	11.6%	7.6%	15.7%	2.4%
gender	Female (n=234)	16.7%	20.4%	12.1%	28.2%	5.7%	3.0%	3.7%	11.6%	1.0%	16.9%	3.4%	7.0%	1.7%
	Total (n=354)	14.1%	17.5%	10.9%	29.1%	5.2%	4.5%	3.9%	8.9%	1.8%	14.9%	5.1%	10.3%	2.0%
	25-44 years (n=50)	10.0%	11.3%	10.0%	37.5%	5.3%	5.2%	1.2%	15.5%	2.2%	24.5%	5.6%	6.5%	0.4%
age	45-64 years (n=170)	15.7%	20.9%	10.1%	25.6%	7.2%	3.8%	6.4%	4.1%	1.2%	8.1%	5.8%	16.0%	3.2%
age	65 years and over (n=126)	24.2%	10.8%	18.9%	18.4%	1.2%	5.7%	6.7%	1.9%	2.5%	6.0%	2.1%	9.6%	4.1%
	Total (n=349)	14.0%	17.1%	11.1%	29.0%	5.2%	4.6%	4.0%	9.0%	1.8%	15.1%	5.0%	10.4%	2.0%
	\$30-70k (n=91)	12.9%	8.7%	9.3%	37.5%	4.4%	3.5%	4.4%	4.3%	-	8.1%	6.8%	5.6%	3.9%
household	\$70-100k (n=51)	3.9%	14.0%	6.3%	18.5%	4.4%	1.2%	1.3%	3.5%	6.8%	27.0%	1.8%	18.5%	2.0%
income	\$100k and over (n=101)	12.9%	14.2%	6.6%	25.4%	2.8%	7.9%	3.4%	17.0%	0.4%	21.5%	7.2%	11.8%	0.2%
	Total (n=270)	11.2%	15.6%	10.0%	29.9%	4.2%	5.1%	4.1%	9.9%	1.6%	17.5%	5.6%	11.3%	1.4%
knowledge of	bilingual (n=271)	8.8%	18.9%	10.4%	31.4%	6.1%	5.0%	4.6%	10.8%	2.2%	14.0%	4.5%	11.5%	2.1%
English and	unilingual English (n=82)	35.4%	11.9%	13.2%	19.5%	1.5%	2.7%	1.4%	0.9%	0.3%	18.5%	7.3%	5.9%	1.4%
French	Total (n=353)	14.1%	17.5%	10.9%	29.1%	5.2%	4.5%	3.9%	8.9%	1.8%	14.9%	5.1%	10.3%	2.0%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who used public health and social services in another region within the previous year (Q36): Q37C. What were the most important factors that motivated you to use services in another region (either for yourself or for the person you helped)? Multiple answers possible

16 Language of Care for Seniors

16.1.1 Expect to Require a Public Long-Term Care Institution for Seniors in the Next Five Years

Expect to Require a Public Long-Term Care Institution for Seniors in the Next Five Years, for Themselves or Another

	English Sp	eakers	French Sp	eakers
Region	yes, either for myself or someone else	no	yes, either for myself or someone else	no
031 Capitale-Nationale (n=202)	29.3%	70.7%	35.7%	64.3%
051 Estrie – CHU de Sherbrooke (n=106)	53.3%	46.7%	34.4%	65.6%
061 Ouest-de-l'Île-de-Montréal (n=484)	35.8%	64.2%	24.2%	75.8%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	31.1%	68.9%	19.3%	80.7%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	25.1%	74.9%	30.0%	70.0%
064 Nord-de-l'Île-de-Montréal (n=251)	31.5%	68.5%	28.3%	71.7%
065 Est-de-l'Île-de-Montréal (n=215)	49.3%	50.7%	25.6%	74.4%
071 Outaouais (n=200)	21.9%	78.1%	30.8%	69.2%
111 Gaspésie (n=75)	35.5%	64.5%	56.8%	43.2%
131 Laval (n=257)	46.5%	53.5%	26.9%	73.1%
141 Lanaudière (n=75)	30.1%	69.9%	42.4%	57.6%
151 Laurentides (n=110)	53.9%	46.1%	29.8%	70.2%
161 Montérégie-Centre (n=150)	21.6%	78.4%	20.8%	79.2%
162 Montérégie-Est (n=77)	31.6%	68.4%	30.4%	69.6%
163 Montérégie-Ouest (n=240)	47.9%	52.1%	27.9%	72.1%
Total (n=3,133)	36.0%	64.0%	30.8%	69.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q38A. Do you expect that within the next five years, you or a person you know or care for will require a public long term care institution for seniors?

Among English speakers, 36.0% expected to require a public long-term care institution for seniors in the next five years. This was higher than the proportion reported for French speakers (30.8%).

We observe that English-speakers in the regions of RTS des Laurentides (53.9%), RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (53.3%) and RTS de l'Est-de-l'Île-de-Montréal (49.3%) were the most likely to expect to require a public long-term care institution.

English speakers in the regions of RTS de la Montérégie-Centre (21.6%), RTS de l'Outaouais (21.9%) and RTS du Centre-Sud-de-l'Île-de-Montréal (25.1%) were the least likely to expect to require a public long-term care institution.

Expect to Require a Public Long-Term Care Institution for Seniors in the Next Five Years, for Themselves or Another

		English Sp	eakers	French Sp	eakers
	Variable	yes, either for myself or someone else	no	yes, either for myself or someone else	no
	Male	40.0%	60.0%	28.0%	72.0%
gender	Female	32.0%	68.0%	33.6%	66.4%
	Total	36.0%	64.0%	30.8%	69.2%
	18-24 years	40.3%	59.7%	33.0%	67.0%
	25-44 years	30.5%	69.5%	25.0%	75.0%
age	45-64 years	38.5%	61.5%	37.2%	62.8%
	65 years and over	40.4%	59.6%	32.7%	67.3%
	Total	36.1%	63.9%	30.9%	69.1%
	less than \$30k	32.8%	67.2%	40.3%	59.7%
ĺ	\$30-70k	36.7%	63.3%	33.7%	66.3%
household income	\$70-100k	39.2%	60.8%	27.7%	72.3%
income	\$100k and over	31.8%	68.2%	25.9%	74.1%
	Total	34.9%	65.1%	30.8%	69.2%
knowledge of	bilingual	36.8%	63.2%		
English and	unilingual English	32.4%	67.6%		
French	Total	36.0%	64.0%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q38A. Do you expect that within the next five years, you or a person you know or care for will require a public long term care institution for seniors?

English-speaking males were more likely to expect to require a public long-term care institution (40.0%) than were their female counterparts (32.0%).

Across age groups, English speakers who were aged 65 years and over were the most likely to expect to require a public long-term care institution (40.4%) while those aged 25-44 years were the least likely (30.5%).

With respect to income, those who earned \$70-100k were the most likely to expect to require a public long-term care institution (39.2%) while those earning \$100k and over were the least likely (31.8%).

English-speakers who were bilingual were more likely to expect to require a public long-term care institution (36.8%) than their unilingual English counterparts (32.4%).

16.1.2 Importance of English Language Services at a Public Long-Term Care Institution for Seniors

Importance of English Language Services at a Public Long-Term Care Institution for Seniors

Region	yes, very important	French is acceptable
031 Capitale-Nationale (n=62)	61.1%	38.9%
051 Estrie – CHU de Sherbrooke (n=39)	57.0%	43.0%
061 Ouest-de-l'Île-de-Montréal (n=154)	81.7%	18.3%
062 Centre-Ouest-de-l'Île-de-Montréal (n=140)	82.8%	17.2%
063 Centre-Sud-de-l'Île-de-Montréal (n=63)	68.0%	32.0%
064 Nord-de-l'Île-de-Montréal (n=85)	68.4%	31.6%
065 Est-de-l'Île-de-Montréal (n=92)	69.7%	30.3%
071 Outaouais (n=61)	85.5%	14.5%
131 Laval (n=110)	67.8%	32.2%
151 Laurentides (n=41)	58.1%	41.9%
161 Montérégie-Centre (n=39)	93.4%	6.6%
163 Montérégie-Ouest (n=96)	82.9%	17.1%
Total (n=1,057)	74.8%	25.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who expect to use a public long term care institution for seniors within the next five years (Q38A): Q38B. Do you feel it would be very important to receive these services in English or would it be acceptable to receive the service in French?

Among English speakers who expected to require a public long-term care institution for seniors, 74.8% felt it was very important to be served in English.

We observe that English-speakers who expected to require a public long-term care institution for seniors in the regions of RTS de la Montérégie-Centre (93.4%) and RTS de l'Outaouais (85.5%) were the most likely to feel it was very important to be served in English.

English speakers who expected to require a public long-term care institution for seniors in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (57.0%) and RTS des Laurentides (58.1%) were the least likely to feel it was very important to be served in English.

Importance of English Language Services at a Public Long-Term Care Institution for Seniors

	Variable	yes, very important	French is acceptable
	Male (n=407)	65.4%	34.6%
gender	Female (n=650)	87.0%	13.0%
	Total (n=1,057)	74.8%	25.2%
	25-44 years (n=90)	66.6%	33.4%
age	45-64 years (n=492)	83.2%	16.8%
age	65 years and over (n=439)	84.0%	16.0%
	Total (n=1,045)	74.6%	25.4%
	less than \$30k (n=162)	84.7%	15.3%
h a considerable	\$30-70k (n=254)	72.9%	27.1%
household income	\$70-100k (n=153)	81.9%	18.1%
Internie	\$100k and over (n=235)	84.5%	15.5%
	Total (n=804)	80.1%	19.9%
knowledge of	bilingual (n=817)	70.3%	29.7%
English and	unilingual English (n=240)	97.4%	2.6%
French	Total (n=1,057)	74.8%	25.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who expect to use a public long term care institution for seniors within the next five years (Q38A): Q38B. Do you feel it would be very important to receive these services in English or would it be acceptable to receive the service in French? English-speaking females who expected to require a public long-term care institution for seniors were more likely to feel it was very important to be served in English (87.0%) than were their male counterparts (65.4%).

Across age groups, English speakers who expected to require a public long-term care institution for seniors who were aged 65 years and over were the most likely to feel it was very important to be served in English (84.0%).

With respect to income, those who expected to require a public long-term care institution for seniors who earned less than \$30k were the most likely to feel it was very important to be served in English (84.7%) while those earning \$30-70k were the least likely (72.9%).

English-speakers who expected to require a public long-term care institution for seniors who were unilingual English were more likely to feel it was very important to be served in English (97.4%) than their bilingual counterparts (70.3%).

16.1.3 Expect to Require a Public Homecare Program for Seniors in the Next Five Years

Expect to Require a Public Homecare Program for Seniors in the Next Five Years

	English Spo	eakers	French Sp	eakers
Region	yes, either for myself or someone else	no	yes, either for myself or someone else	no
031 Capitale-Nationale (n=202)	29.2%	70.8%	30.4%	69.6%
051 Estrie – CHU de Sherbrooke (n=106)	54.3%	45.7%	33.7%	66.3%
061 Ouest-de-l'Île-de-Montréal (n=484)	38.7%	61.3%	26.9%	73.1%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	28.7%	71.3%	28.1%	71.9%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	20.0%	80.0%	17.5%	82.5%
064 Nord-de-l'Île-de-Montréal (n=251)	30.9%	69.1%	23.3%	76.7%
065 Est-de-l'Île-de-Montréal (n=215)	35.7%	64.3%	25.4%	74.6%
071 Outaouais (n=200)	24.8%	75.2%	15.8%	84.2%
111 Gaspésie (n=75)	42.3%	57.7%	60.0%	40.0%
131 Laval (n=257)	46.3%	53.7%	33.1%	66.9%
141 Lanaudière (n=75)	20.8%	79.2%	33.5%	66.5%
151 Laurentides (n=110)	45.1%	54.9%	28.9%	71.1%
161 Montérégie-Centre (n=150)	29.0%	71.0%	23.2%	76.8%
162 Montérégie-Est (n=77)	31.0%	69.0%	28.4%	71.6%
163 Montérégie-Ouest (n=240)	40.6%	59.4%	27.4%	72.6%
Total (n=3,133)	34.3%	65.7%	28.2%	71.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q39A. Do you expect that within the next five years, you or a person you know or care for will require a public homecare program for seniors?

Among English speakers, 34.3% expected to require a public homecare program for seniors in the next five years. This was much higher than the proportion reported for French speakers (28.2%).

We observe that English-speakers in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (54.3%), RTS de Laval (46.3%) and RTS des Laurentides (45.1%) were the most likely to expect requiring public homecare program for seniors.

English speakers in the regions of RTS du Centre-Sud-de-l'Île-de-Montréal (20.0%), RTS de Lanaudière (20.8%) and RTS de l'Outaouais (24.8%) were the least likely to expect requiring public homecare program for seniors.

Expect to Require a Public Homecare Program for Seniors in the Next Five Years

		English Spo	eakers	French Sp	eakers
	Variable	yes, either for myself or someone else	no	yes, either for myself or someone else	no
	Male	35.5%	64.5%	23.6%	76.4%
gender	Female	33.0%	67.0%	32.6%	67.4%
	Total	34.3%	65.7%	28.2%	71.8%
	18-24 years	29.1%	70.9%	20.0%	80.0%
	25-44 years	28.4%	71.6%	22.0%	78.0%
age	45-64 years	38.3%	61.7%	36.1%	63.9%
	65 years and over	43.3%	56.7%	32.7%	67.3%
	Total	34.3%	65.7%	28.3%	71.7%
	less than \$30k	35.2%	64.8%	38.3%	61.7%
	\$30-70k	36.1%	63.9%	29.3%	70.7%
household income	\$70-100k	31.6%	68.4%	27.7%	72.3%
meome	\$100k and over	33.5%	66.5%	23.2%	76.8%
	Total	34.2%	65.8%	28.3%	71.7%
knowledge of English and	bilingual	34.4%	65.6%		
	unilingual English	33.8%	66.2%		
Fre n ch	Total	34.3%	65.7%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q39A. Do you expect that within the next five years, you or a person you know or care for will require a public homecare program for seniors?

English-speaking males were more likely to expect requiring public homecare program for seniors (35.5%) than were their female counterparts (33.0%).

Across age groups, English speakers who were aged 65 years and over were the most likely to expect requiring public homecare program for seniors (43.3%) while those aged 25-44 years were the least likely (28.4%).

With respect to income, those who earned \$30-70k were the most likely to expect requiring public homecare program for seniors (36.1%) while those earning \$70-100k were the least likely (31.6%).

English-speakers who were bilingual were more likely to expect requiring public homecare program for seniors (34.4%) than their unilingual English counterparts (33.8%).

16.1.4 Importance of English Language Services at a Public Homecare Program for Seniors

Importance of English Language Services at a Public Homecare Program for Seniors

Region	yes, very important	French is acceptable
031 Capitale-Nationale (n=53)	64.6%	35.4%
051 Estrie – CHU de Sherbrooke (n=40)	57.9%	42.1%
061 Ouest-de-l'Île-de-Montréal (n=161)	82.7%	17.3%
062 Centre-Ouest-de-l'Île-de-Montréal (n=149)	81.6%	18.4%
063 Centre-Sud-de-l'Île-de-Montréal (n=63)	87.2%	12.8%
064 Nord-de-l'Île-de-Montréal (n=92)	69.4%	30.6%
065 Est-de-l'Île-de-Montréal (n=82)	77.3%	22.7%
071 Outaouais (n=71)	83.2%	16.8%
111 Gaspésie (n=31)	97.3%	2.7%
131 Laval (n=110)	72.0%	28.0%
151 Laurentides (n=41)	85.3%	14.7%
161 Montérégie-Centre (n=55)	85.5%	14.5%
163 Montérégie-Ouest (n=85)	93.0%	7.0%
Total (n=1,085)	79.5%	20.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who expect to use a public homecare program for seniors within the next five years (Q39A): Q39B. Do you feel it would be very important to receive these services in English or would it be acceptable to receive the service in French?

Among English speakers who expected to require public homecare for seniors, 79.5% felt it was very important to be served in English.

We observe that English-speakers who expected to require public homecare for seniors in the regions of RTS de la Gaspésie (97.3%), RTS de la Montérégie-Ouest (93.0%) and RTS du Centre-Sud-de-l'Île-de-Montréal (87.2%) were the most likely to feel it was very important to be served in English.

English speakers who expected to require public homecare for seniors in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (57.9%) and RTS de la Capitale-Nationale (64.6%) were the least likely to feel it was very important to be served in English.

Importance of English Language Services at a Public Homecare Program for Seniors

	Variable	yes, very important	French is acceptable
	Male (n=394)	74.0%	26.0%
gender	Female (n=691)	85.4%	14.6%
	Total (n=1,085)	79.5%	20.5%
	25-44 years (n=88)	76.7%	23.3%
3.00	45-64 years (n=498)	84.8%	15.2%
age	65 years and over (n=464)	81.3%	18.7%
	Total (n=1,070)	79.3%	20.7%
	less than \$30k (n=164)	83.1%	16.9%
	\$30-70k (n=279)	83.1%	16.9%
household income	\$70-100k (n=154)	80.7%	19.3%
meome	\$100k and over (n=222)	74.5%	25.5%
	Total (n=819)	79.8%	20.2%
knowledge of	bilingual (n=844)	75.7%	24.3%
English and French	unilingual English (n=240)	95.1%	4.9%
	Total (n=1,084)	79.5%	20.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who expect to use a public homecare program for seniors within the next five years (Q39A): Q39B. Do you feel it would be very important to receive these services in English or would it be acceptable to receive the service in French?

English-speaking females who expected to require public homecare for seniors were more likely to feel it was very important to be served in English (85.4%) than were their male counterparts (74.0%).

Across age groups, English speakers who expected to require public homecare for seniors who were aged 45-64 years were the most likely to feel it was very important to be served in English (84.8%).

With respect to income, those who expected to require public homecare for seniors who earned less than \$70k were the most likely to feel it was very important to be served in English (83.1%) while those earning \$100k and over were the least likely (74.5%).

English-speakers who expected to require public homecare for seniors who were unilingual English were more likely to feel it was very important to be served in English (95.1%) than their bilingual counterparts (75.7%).

16.1.5 Expect to Require a Private Residence or Nursing Home for Seniors in the Next Five Years

Expect to Require a Private Residence or Nursing Home for Seniors in the Next Five Years

English Speakers French Speakers yes, either for myself or someone else 71.1% 031 Capitale-Nationale (n=202) 20.5% 79.5% 28.9% 71.1% 051 Estrie − CHU de Sherbrooke (n=106) 42.6% 57.4% 23.9% 76.1% 061 Ouest-de-l'Île-de-Montréal (n=484) 28.5% 71.5% 28.2% 71.8% 062 Centre-Ouest-de-l'Île-de-Montréal (n=265) 27.0% 73.0% 17.4% 82.6% 063 Centre-Sud-de-l'Île-de-Montréal (n=226) 11.1% 88.9% 21.9% 78.1% 064 Nord-de-l'Île-de-Montréal (n=251) 23.9% 76.1% 22.3% 77.7% 065 Est-de-l'Île-de-Montréal (n=215) 29.7% 70.3% 10.4% 89.6% 071 Outaouais (n=200) 16.1% 83.9% 29.0% 71.0% 111 Gaspésie (n=75) 31.0% 69.0% 53.9% 46.1% 131 Laval (n=257) 34.7% 65.3% 26.4% 73.6% <th></th> <th></th> <th></th> <th></th> <th></th>					
Region for myself or some one else no some one else for myself or some one else 031 Capitale-Nationale (n=202) 20.5% 79.5% 28.9% 71.1% 051 Estrie – CHU de Sherbrooke (n=106) 42.6% 57.4% 23.9% 76.1% 061 Ouest-de-l'Île-de-Montréal (n=484) 28.5% 71.5% 28.2% 71.8% 062 Centre-Ouest-de-l'Île-de-Montréal (n=465) 27.0% 73.0% 17.4% 82.6% 063 Centre-Sud-de-l'Île-de-Montréal (n=226) 11.1% 88.9% 21.9% 78.1% 064 Nord-de-l'Île-de-Montréal (n=251) 23.9% 76.1% 22.3% 77.7% 065 Est-de-l'Île-de-Montréal (n=215) 29.7% 70.3% 10.4% 89.6% 071 Outaouais (n=200) 16.1% 83.9% 29.0% 71.0% 111 Gaspésie (n=75) 31.0% 69.0% 53.9% 46.1% 131 Laval (n=257) 34.7% 65.3% 26.4% 73.6% 141 Lanaudière (n=75) 18.2% 81.8% 19.6% 80.4% 151 Laurentides (n=110) 23.4% 76.6% 22.3%		English Sp	eakers	French Sp	eakers
051 Estrie – CHU de Sherbrooke (n=106) 42.6% 57.4% 23.9% 76.1% 061 Ouest-de-I'Île-de-Montréal (n=484) 28.5% 71.5% 28.2% 71.8% 062 Centre-Ouest-de-I'Île-de-Montréal (n=465) 27.0% 73.0% 17.4% 82.6% 063 Centre-Sud-de-I'Île-de-Montréal (n=226) 11.1% 88.9% 21.9% 78.1% 064 Nord-de-I'Île-de-Montréal (n=251) 23.9% 76.1% 22.3% 77.7% 065 Est-de-I'Île-de-Montréal (n=215) 29.7% 70.3% 10.4% 89.6% 071 Outaouais (n=200) 16.1% 83.9% 29.0% 71.0% 111 Gaspésie (n=75) 31.0% 69.0% 53.9% 46.1% 131 Laval (n=257) 34.7% 65.3% 26.4% 73.6% 141 Lanaudière (n=75) 18.2% 81.8% 19.6% 80.4% 151 Laurentides (n=110) 23.4% 76.6% 22.3% 77.7% 161 Montérégie-Centre (n=150) 20.8% 79.2% 22.2% 77.8% 162 Montérégie-Est (n=77) 29.8% 70.2% 28.4% 71.6% 163 Montérégie-Ouest (n=240) 30.3% 69.7%	Region	for myself or someone	no	for myself or someone	no
061 Ouest-de-l'Île-de-Montréal (n=484) 28.5% 71.5% 28.2% 71.8% 062 Centre-Ouest-de-l'Île-de-Montréal (n=465) 27.0% 73.0% 17.4% 82.6% 063 Centre-Sud-de-l'Île-de-Montréal (n=226) 11.1% 88.9% 21.9% 78.1% 064 Nord-de-l'Île-de-Montréal (n=251) 23.9% 76.1% 22.3% 77.7% 065 Est-de-l'Île-de-Montréal (n=215) 29.7% 70.3% 10.4% 89.6% 071 Outaouais (n=200) 16.1% 83.9% 29.0% 71.0% 111 Gaspésie (n=75) 31.0% 69.0% 53.9% 46.1% 131 Laval (n=257) 34.7% 65.3% 26.4% 73.6% 141 Lanaudière (n=75) 18.2% 81.8% 19.6% 80.4% 151 Laurentides (n=110) 23.4% 76.6% 22.3% 77.7% 161 Montérégie-Centre (n=150) 20.8% 79.2% 22.2% 77.8% 162 Montérégie-Est (n=77) 29.8% 70.2% 28.4% 71.6% 163 Montérégie-Ouest (n=240) 30.3% 69.7% 14.2% 85.8%	031 Capitale-Nationale (n=202)	20.5%	79.5%	28.9%	71.1%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465) 27.0% 73.0% 17.4% 82.6% 063 Centre-Sud-de-l'Île-de-Montréal (n=226) 11.1% 88.9% 21.9% 78.1% 064 Nord-de-l'Île-de-Montréal (n=251) 23.9% 76.1% 22.3% 77.7% 065 Est-de-l'Île-de-Montréal (n=215) 29.7% 70.3% 10.4% 89.6% 071 Outaouais (n=200) 16.1% 83.9% 29.0% 71.0% 111 Gaspésie (n=75) 31.0% 69.0% 53.9% 46.1% 131 Laval (n=257) 34.7% 65.3% 26.4% 73.6% 141 Lanaudière (n=75) 18.2% 81.8% 19.6% 80.4% 151 Laurentides (n=110) 23.4% 76.6% 22.3% 77.7% 161 Montérégie-Centre (n=150) 20.8% 79.2% 22.2% 77.8% 162 Montérégie-Est (n=77) 29.8% 70.2% 28.4% 71.6% 163 Montérégie-Ouest (n=240) 30.3% 69.7% 14.2% 85.8%	051 Estrie – CHU de Sherbrooke (n=106)	42.6%	57.4%	23.9%	76.1%
063 Centre-Sud-de-l'Île-de-Montréal (n=226) 11.1% 88.9% 21.9% 78.1% 064 Nord-de-l'Île-de-Montréal (n=251) 23.9% 76.1% 22.3% 77.7% 065 Est-de-l'Île-de-Montréal (n=215) 29.7% 70.3% 10.4% 89.6% 071 Outaouais (n=200) 16.1% 83.9% 29.0% 71.0% 111 Gaspésie (n=75) 31.0% 69.0% 53.9% 46.1% 131 Laval (n=257) 34.7% 65.3% 26.4% 73.6% 141 Lanaudière (n=75) 18.2% 81.8% 19.6% 80.4% 151 Laurentides (n=110) 23.4% 76.6% 22.3% 77.7% 161 Montérégie-Centre (n=150) 20.8% 79.2% 22.2% 77.8% 162 Montérégie-Est (n=77) 29.8% 70.2% 28.4% 71.6% 163 Montérégie-Ouest (n=240) 30.3% 69.7% 14.2% 85.8%	061 Ouest-de-l'Île-de-Montréal (n=484)	28.5%	71.5%	28.2%	71.8%
064 Nord-de-l'Île-de-Montréal (n=251) 23.9% 76.1% 22.3% 77.7% 065 Est-de-l'Île-de-Montréal (n=215) 29.7% 70.3% 10.4% 89.6% 071 Outaouais (n=200) 16.1% 83.9% 29.0% 71.0% 111 Gaspésie (n=75) 31.0% 69.0% 53.9% 46.1% 131 Laval (n=257) 34.7% 65.3% 26.4% 73.6% 141 Lanaudière (n=75) 18.2% 81.8% 19.6% 80.4% 151 Laurentides (n=110) 23.4% 76.6% 22.3% 77.7% 161 Montérégie-Centre (n=150) 20.8% 79.2% 22.2% 77.8% 162 Montérégie-Est (n=77) 29.8% 70.2% 28.4% 71.6% 163 Montérégie-Ouest (n=240) 30.3% 69.7% 14.2% 85.8%	062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	27.0%	73.0%	17.4%	82.6%
065 Est-de-l'Île-de-Montréal (n=215) 29.7% 70.3% 10.4% 89.6% 071 Outaouais (n=200) 16.1% 83.9% 29.0% 71.0% 111 Gaspésie (n=75) 31.0% 69.0% 53.9% 46.1% 131 Laval (n=257) 34.7% 65.3% 26.4% 73.6% 141 Lanaudière (n=75) 18.2% 81.8% 19.6% 80.4% 151 Laurentides (n=110) 23.4% 76.6% 22.3% 77.7% 161 Montérégie-Centre (n=150) 20.8% 79.2% 22.2% 77.8% 162 Montérégie-Est (n=77) 29.8% 70.2% 28.4% 71.6% 163 Montérégie-Ouest (n=240) 30.3% 69.7% 14.2% 85.8%	063 Centre-Sud-de-l'Île-de-Montréal (n=226)	11.1%	88.9%	21.9%	78.1%
071 Outaouais (n=200) 16.1% 83.9% 29.0% 71.0% 111 Gaspésie (n=75) 31.0% 69.0% 53.9% 46.1% 131 Laval (n=257) 34.7% 65.3% 26.4% 73.6% 141 Lanaudière (n=75) 18.2% 81.8% 19.6% 80.4% 151 Laurentides (n=110) 23.4% 76.6% 22.3% 77.7% 161 Montérégie-Centre (n=150) 20.8% 79.2% 22.2% 77.8% 162 Montérégie-Est (n=77) 29.8% 70.2% 28.4% 71.6% 163 Montérégie-Ouest (n=240) 30.3% 69.7% 14.2% 85.8%	064 Nord-de-l'Île-de-Montréal (n=251)	23.9%	76.1%	22.3%	77.7%
111 Gaspésie (n=75) 31.0% 69.0% 53.9% 46.1% 131 Laval (n=257) 34.7% 65.3% 26.4% 73.6% 141 Lanaudière (n=75) 18.2% 81.8% 19.6% 80.4% 151 Laurentides (n=110) 23.4% 76.6% 22.3% 77.7% 161 Montérégie-Centre (n=150) 20.8% 79.2% 22.2% 77.8% 162 Montérégie-Est (n=77) 29.8% 70.2% 28.4% 71.6% 163 Montérégie-Ouest (n=240) 30.3% 69.7% 14.2% 85.8%	065 Est-de-l'Île-de-Montréal (n=215)	29.7%	70.3%	10.4%	89.6%
131 Laval (n=257) 34.7% 65.3% 26.4% 73.6% 141 Lanaudière (n=75) 18.2% 81.8% 19.6% 80.4% 151 Laurentides (n=110) 23.4% 76.6% 22.3% 77.7% 161 Montérégie-Centre (n=150) 20.8% 79.2% 22.2% 77.8% 162 Montérégie-Est (n=77) 29.8% 70.2% 28.4% 71.6% 163 Montérégie-Ouest (n=240) 30.3% 69.7% 14.2% 85.8%	071 Outaouais (n=200)	16.1%	83.9%	29.0%	71.0%
141 Lanaudière (n=75) 18.2% 81.8% 19.6% 80.4% 151 Laurentides (n=110) 23.4% 76.6% 22.3% 77.7% 161 Montérégie-Centre (n=150) 20.8% 79.2% 22.2% 77.8% 162 Montérégie-Est (n=77) 29.8% 70.2% 28.4% 71.6% 163 Montérégie-Ouest (n=240) 30.3% 69.7% 14.2% 85.8%	111 Gaspésie (n=75)	31.0%	69.0%	53.9%	46.1%
151 Laurentides (n=110) 23.4% 76.6% 22.3% 77.7% 161 Montérégie-Centre (n=150) 20.8% 79.2% 22.2% 77.8% 162 Montérégie-Est (n=77) 29.8% 70.2% 28.4% 71.6% 163 Montérégie-Ouest (n=240) 30.3% 69.7% 14.2% 85.8%	131 Laval (n=257)	34.7%	65.3%	26.4%	73.6%
161 Montérégie-Centre (n=150) 20.8% 79.2% 22.2% 77.8% 162 Montérégie-Est (n=77) 29.8% 70.2% 28.4% 71.6% 163 Montérégie-Ouest (n=240) 30.3% 69.7% 14.2% 85.8%	141 Lanaudière (n=75)	18.2%	81.8%	19.6%	80.4%
162 Montérégie-Est (n=77) 29.8% 70.2% 28.4% 71.6% 163 Montérégie-Ouest (n=240) 30.3% 69.7% 14.2% 85.8%	151 Laurentides (n=110)	23.4%	76.6%	22.3%	77.7%
163 Montérégie-Ouest (n=240) 30.3% 69.7% 14.2% 85.8%	161 Montérégie-Centre (n=150)	20.8%	79.2%	22.2%	77.8%
	162 Montérégie-Est (n=77)	29.8%	70.2%	28.4%	71.6%
Total (n=3,133) 26.1% 73.9% 23.3% 76.7%	163 Montérégie-Ouest (n=240)	30.3%	69.7%	14.2%	85.8%
	Total (n=3,133)	26.1%	73.9%	23.3%	76.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q40A. Do you expect that within the next five years, you or a person you know or care for will require a private residence or private nursing home for seniors?

Among English speakers, 26.1% expected to require a private residence or private nursing home for seniors in the next five years. This was higher than the proportion reported for French speakers (23.3%).

We observe that English-speakers in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (42.6%), RTS de Laval (34.7%) and RTS de la Gaspésie (31.0%) were the most likely to expect to require a private residence or private nursing home for seniors.

English speakers in the regions of RTS du Centre-Sud-de-l'Île-de-Montréal (11.1%), RTS de l'Outaouais (16.1%) and RTS de Lanaudière (18.2%) were the least likely to expect to require a private residence or private nursing home for seniors.

Expect to Require a Private Residence or Nursing Home for Seniors in the Next Five Years

		English Sp	eakers	French Speakers	
Variable		yes, either for myself or someone else	no	yes, either for myself or someone else	no
	Male	27.0%	73.0%	21.4%	78.6%
gender	Female	25.3%	74.7%	25.2%	74.8%
	Total	26.1%	73.9%	23.3%	76.7%
	18-24 years	24.7%	75.3%	30.3%	69.7%
	25-44 years	18.8%	81.2%	14.5%	85.5%
age	45-64 years	31.5%	68.5%	27.2%	72.8%
·	65 years and over	32.7%	67.3%	27.5%	72.5%
,	Total	26.1%	73.9%	23.4%	76.6%
	less than \$30k	23.4%	76.6%	30.3%	69.7%
	\$30-70k	22.3%	77.7%	25.5%	74.5%
household income	\$70-100k	30.0%	70.0%	19.6%	80.4%
income	\$100k and over	27.8%	72.2%	22.7%	77.3%
	Total	25.9%	74.1%	24.1%	75.9%
knowledge of	bilingual	26.5%	73.5%		
English and French	unilingual English	24.6%	75.4%		
	Total	26.1%	73.9%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q40A. Do you expect that within the next five years, you or a person you know or care for will require a private residence or private nursing home for seniors?

English-speaking males were more likely to expect to require a private residence or private nursing home for seniors (27.0%) than were their female counterparts (25.3%).

Across age groups, English speakers who were aged 65 years and over were the most likely to expect to require a private residence or private nursing home for seniors (32.7%) while those aged 25-44 years were the least likely (18.8%).

With respect to income, those who earned \$70-100k were the most likely to expect to require a private residence or private nursing home for seniors (30.0%) while those earning \$30-70k were the least likely (22.3%).

English-speakers who were bilingual were more likely to expect to require a private residence or private nursing home for seniors (26.5%) than their unilingual English counterparts (24.6%).

16.1.6 Importance of English Language Services at a Private Residence or Nursing Home for Seniors

Importance of English Language Services at a Private Residence or Nursing Home for Seniors

Region	yes, very important	French is acceptable
031 Capitale-Nationale (n=41)	55.3%	44.7%
051 Estrie – CHU de Sherbrooke (n=31)	50.9%	49.1%
061 Ouest-de-l'Île-de-Montréal (n=132)	86.9%	13.1%
062 Centre-Ouest-de-l'Île-de-Montréal (n=114)	84.6%	15.4%
063 Centre-Sud-de-l'Île-de-Montréal (n=47)	80.6%	19.4%
064 Nord-de-l'Île-de-Montréal (n=63)	65.0%	35.0%
065 Est-de-l'Île-de-Montréal (n=63)	76.4%	23.6%
071 Outaouais (n=46)	91.9%	8.1%
131 Laval (n=87)	72.6%	27.4%
151 Laurentides (n=33)	70.4%	29.6%
161 Montérégie-Centre (n=38)	88.4%	11.6%
163 Montérégie-Ouest (n=64)	90.4%	9.6%
Total (n=821)	78.8%	21.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who expect to use a private residence or nursing home for seniors within the next five years (Q40A): Q40B. Do you feel it would be very important to receive these services in English or would it be acceptable to receive the service in French?

Among English speakers who expected to require a private residence or private nursing home, 78.8% felt it was very important to be served in English.

We observe that English-speakers who expected to require a private residence or private nursing home in the regions of RTS de l'Outaouais (91.9%) and RTS de la Montérégie-Ouest (90.4%) were the most likely to feel it was very important to be served in English.

English speakers who expected to require a private residence or private nursing home in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (50.9%) and RTS de la Capitale-Nationale (55.3%) were the least likely to feel it was very important to be served in English.

Importance of English Language Services at a Private Residence or Nursing Home for Seniors

	Variable	yes, very important	French is acceptable
	Male (n=304)	71.8%	28.2%
gender	Female (n=517)	86.5%	13.5%
	Total (n=821)	78.8%	21.2%
	25-44 years (n=59)	69.7%	30.3%
2.50	45-64 years (n=397)	80.8%	19.2%
age	65 years and over (n=337)	82.2%	17.8%
	Total (n=808)	78.4%	21.6%
	less than \$30k (n=102)	78.4%	21.6%
	\$30-70k (n=188)	81.7%	18.3%
household	\$70-100k (n=126)	83.3%	16.7%
meome	\$100k and over (n=202)	78.5%	21.5%
	Total (n=618)	80.5%	19.5%
knowledge of	bilingual (n=643)	74.4%	25.6%
English and	unilingual English (n=177)	98.3%	1.7%
Fre n ch	Total (n=820)	78.8%	21.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who expect to use a private residence or nursing home for seniors within the next five years (Q40A): Q40B. Do you feel it would be very important to receive these services in English or would it be acceptable to receive the service in French?

English-speaking females who expected to require a private residence or private nursing home were more likely to feel it was very important to be served in English (86.5%) than were their male counterparts (71.8%).

Across age groups, English speakers who expected to require a private residence or private nursing home who were aged 18-24 were the least likely to feel it was very important to be served in English (69.7%).

With respect to income, those who expected to require a private residence or private nursing home who earned \$70-100k were the most likely to feel it was very important to be served in English (83.3%).

English-speakers who expected to require a private residence or private nursing home who were unilingual English were more likely to feel it was very important to be served in English (98.3%) than their bilingual counterparts (74.4%).

16.1.7 Expect to Require Private Nursing Services at Home or Private Homecare for Seniors Within Five Years

Expect to Require Private Nursing Services at Home or Private Homecare for Seniors in the Next Five Years

	English Sp	eakers	French Sp	eakers
Region	yes, either for myself or someone else	no	yes, either for myself or someone else	no
031 Capitale-Nationale (n=202)	22.2%	77.8%	26.7%	73.3%
051 Estrie – CHU de Sherbrooke (n=106)	43.3%	56.7%	21.1%	78.9%
061 Ouest-de-l'Île-de-Montréal (n=484)	33.3%	66.7%	17.8%	82.2%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	23.0%	77.0%	20.7%	79.3%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	15.4%	84.6%	18.9%	81.1%
064 Nord-de-l'Île-de-Montréal (n=251)	28.2%	71.8%	26.9%	73.1%
065 Est-de-l'Île-de-Montréal (n=215)	32.6%	67.4%	17.9%	82.1%
071 Outaouais (n=200)	20.5%	79.5%	26.8%	73.2%
111 Gaspésie (n=75)	30.1%	69.9%	60.9%	39.1%
131 Laval (n=257)	38.7%	61.3%	19.8%	80.2%
141 Lanaudière (n=75)	23.2%	76.8%	21.0%	79.0%
151 Laurentides (n=110)	45.6%	54.4%	23.7%	76.3%
161 Montérégie-Centre (n=150)	20.0%	80.0%	17.8%	82.2%
162 Montérégie-Est (n=77)	29.8%	70.2%	25.9%	74.1%
163 Montérégie-Ouest (n=240)	37.1%	62.9%	17.7%	82.3%
Total (n=3,133)	29.3%	70.7%	22.8%	77.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q41A. Do you expect that within the next five years, you or a person you know or care for will require private nursing services at home or private homecare services for seniors?

Among English speakers, 29.3% expected to require private home care for seniors in the next five years. This was much higher than the proportion reported for French speakers (22.8%).

We observe that English-speakers in the regions of RTS des Laurentides (45.6%), RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (43.3%) and RTS de Laval (38.7%) were the most likely to expect to require private home care for seniors in the next five years.

English speakers in the regions of RTS du

Centre-Sud-de-l'Île-de-Montréal (15.4%), RTS de
la Montérégie-Centre (20.0%) and RTS de
l'Outaouais (20.5%) were the least likely to
expect to require private home care for seniors in
the next five years.

Expect to Require Private Nursing Services at Home or Private Homecare for Seniors in the Next Five Years

Variable		English Sp	eakers	French Speakers	
		yes, either for myself or someone else	no	yes, either for myself or someone else	no
	Male	29.8%	70.2%	19.7%	80.3%
gender	Female	28.8%	71.2%	25.9%	74.1%
	Total	29.3%	70.7%	22.8%	77.2%
	18-24 years	21.1%	78.9%	17.2%	82.8%
	25-44 years	25.9%	74.1%	14.6%	85.4%
age	45-64 years	33.6%	66.4%	31.7%	68.3%
	65 years and over	35.0%	65.0%	27.5%	72.5%
	Total	29.4%	70.6%	22.9%	77.1%
	less than \$30k	29.8%	70.2%	30.7%	69.3%
	\$30-70k	28.4%	71.6%	23.5%	76.5%
household income	\$70-100k	28.1%	71.9%	18.2%	81.8%
meome	\$100k and over	32.2%	67.8%	22.1%	77.9%
	Total	29.9%	70.1%	23.0%	77.0%
knowledge	bilingual	29.7%	70.3%		
of English	unilingual English	27.6%	72.4%		
and French	Total	29.3%	70.7%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q41A. Do you expect that within the next five years, you or a person you know or care for will require private nursing services at home or private homecare services for seniors?

English-speaking males were more likely to expect to require private home care for seniors in the next five years (29.8%) than were their female counterparts (28.8%).

Across age groups, English speakers who were aged 65 years and over were the most likely to expect to require private home care for seniors in the next five years (35.0%) while those aged 18-24 years were the least likely (21.1%).

With respect to income, those who earned \$100k and over were the most likely to expect to require private home care for seniors in the next five years (32.2%) while those earning \$70-100k were the least likely (28.1%).

English-speakers who were bilingual were more likely to expect to require private home care for seniors in the next five years (29.7%) than their unilingual English counterparts (27.6%).

16.1.8 Importance of English Language Private Nursing Services at Home or Private Homecare for Seniors

Importance of English Language Private Nursing Services at Home or Private Homecare for Seniors

Region	yes, very important	French is acceptable
031 Capitale-Nationale (n=42)	61.7%	38.3%
051 Estrie – CHU de Sherbrooke (n=30)	45.8%	54.2%
061 Ouest-de-l'Île-de-Montréal (n=147)	90.4%	9.6%
062 Centre-Ouest-de-l'Île-de-Montréal (n=120)	92.4%	7.6%
063 Centre-Sud-de-l'Île-de-Montréal (n=59)	75.3%	24.7%
064 Nord-de-l'Île-de-Montréal (n=75)	47.0%	53.0%
065 Est-de-l'Île-de-Montréal (n=67)	83.8%	16.2%
071 Outaouais (n=59)	86.9%	13.1%
131 Laval (n=99)	73.3%	26.7%
151 Laurentides (n=39)	84.7%	15.3%
161 Montérégie-Centre (n=35)	93.7%	6.3%
163 Montérégie-Ouest (n=72)	94.2%	5.8%
Total (n=912)	80.7%	19.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who expect to use a private nursing services at home or private homecare services within the next five years (Q41A): Q41B. Do you feel it would be very important to receive these services in English or would it be acceptable to receive the service in French?

Among English speakers who expected to require private home care for seniors, 80.7% felt it was very important to be served in English.

English speakers who expected to require private home care for seniors in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (45.8%) and RTS du Nord-de-l'Île-de-Montréal (47.0%) were the least likely to feel it was very important to be served in English.

Importance of English Language Private Nursing Services at Home or Private Homecare for Seniors

	Variable	yes, very important	French is acceptable
	Male (n=332)	75.7%	24.3%
gender	Female (n=580)	86.2%	13.8%
	Total (n=912)	80.7%	19.3%
	25-44 years (n=78)	76.1%	23.9%
age	45-64 years (n=431)	85.2%	14.8%
age	65 years and over (n=374)	81.0%	19.0%
	Total (n=899)	80.6%	19.4%
	less than \$30k (n=125)	73.1%	26.9%
h h - l -l	\$30-70k (n=225)	82.5%	17.5%
household income	\$70-100k (n=133)	85.2%	14.8%
Income	\$100k and over (n=215)	86.1%	13.9%
	Total (n=698)	83.2%	16.8%
knowledge of	bilingual (n=709)	77.2%	22.8%
English and	unilingual English (n=202)	97.6%	2.4%
French	Total (n=911)	80.8%	19.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who expect to use a private nursing services at home or private homecare services within the next five years (Q41A): Q41B. Do you feel it would be very important to receive these services in English or would it be acceptable to receive the service in French?

English-speaking females who expected to require private home care for seniors were more likely to feel it was very important to be served in English (86.2%) than were their male counterparts (75.7%).

Across age groups, English speakers who expected to require private home care for seniors who were aged 45-64 years were the most likely to feel it was very important to be served in English (85.2%) while those aged 25-44 years were the least likely (76.1%).

With respect to income, those who expected to require private home care for seniors who earned \$100k and over were the most likely to feel it was very important to be served in English (86.1%) while those earning less than \$30k were the least likely (73.1%).

English-speakers who expected to require private home care for seniors who were unilingual English were more likely to feel it was very important to be served in English (97.6%) than their bilingual counterparts (77.2%).

17 Information in English

17.1.1 Received Information about Services Provided by Public Health and Social Service Institutions

Received Information about Services Provided by Public Health and Social Service Institutions

	English S	peakers	French Speakers	
Region	yes, in english	no, not in English	yes	no
031 Capitale-Nationale (n=202)	15.9%	84.1%	29.9%	70.1%
051 Estrie – CHU de Sherbrooke (n=106)	18.2%	81.8%	30.9%	69.1%
061 Ouest-de-l'Île-de-Montréal (n=484)	17.3%	82.7%	24.3%	75.7%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	24.3%	75.7%	30.4%	69.6%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	21.3%	78.7%	39.1%	60.9%
064 Nord-de-l'Île-de-Montréal (n=251)	21.2%	78.8%	19.7%	80.3%
065 Est-de-l'Île-de-Montréal (n=215)	8.7%	91.3%	19.4%	80.6%
071 Outaouais (n=200)	18.4%	81.6%	31.5%	68.5%
111 Gaspésie (n=75)	22.7%	77.3%	31.0%	69.0%
131 Laval (n=257)	6.4%	93.6%	16.1%	83.9%
141 Lanaudière (n=75)	6.3%	93.7%	22.6%	77.4%
151 Laurentides (n=110)	27.6%	72.4%	32.8%	67.2%
161 Montérégie-Centre (n=150)	8.6%	91.4%	48.8%	51.2%
162 Montérégie-Est (n=77)	7.8%	92.2%	24.3%	75.7%
163 Montérégie-Ouest (n=240)	13.0%	87.0%	33.6%	66.4%
Total (n=3,133)	16.8%	83.2%	28.5%	71.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q42. In the last two years, have you received information about services in English that are provided by the public health and social services institutions in your region?

Among English speakers, 16.8% had received information about local services in English provided by public health and social service institutions.

We observe that English-speakers in the regions of RTS des Laurentides (27.6%), RTS du Centre-Ouest-de-l'Île-de-Montréal (24.3%) and RTS de la Gaspésie (22.7%) were the most likely to have received information about local public health and social services in English.

English speakers in the regions of RTS de Lanaudière (6.3%), RTS de Laval (6.4%) and RTS de la Montérégie-Est (7.8%) were the least likely to have received information about local public health and social services in English.

Received Information about Services Provided by Public Health and Social Service Institutions

		English Speakers		French Speakers	
	Variable	yes, in english	no, not in English	yes	no
	Male	18.4%	81.6%	28.7%	71.3%
gender	Female	15.2%	84.8%	28.4%	71.6%
	Total	16.8%	83.2%	28.5%	71.5%
	18-24 years	20.3%	79.7%	36.2%	63.8%
	25-44 years	15.2%	84.8%	33.0%	67.0%
age	45-64 years	14.3%	85.7%	22.3%	77.7%
	65 years and over	22.9%	77.1%	26.0%	74.0%
	Total	16.9%	83.1%	28.7%	71.3%
	less than \$30k	20.3%	79.7%	31.8%	68.2%
	\$30-70k	18.1%	81.9%	28.3%	71.7%
household income	\$70-100k	14.0%	86.0%	28.3%	71.7%
meome	\$100k and over	15.6%	84.4%	32.2%	67.8%
	Total	16.8%	83.2%	30.1%	69.9%
knowledge of	bilingual	16.5%	83.5%		
English and French	unilingual English	17.8%	82.2%		
	Total	16.8%	83.2%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q42. In the last two years, have you received information about services in English that are provided by the public health and social services institutions in your region?

English-speaking males were more likely to have received information about local public health and social services in English (18.4%) than were their female counterparts (15.2%).

Across age groups, English speakers who were aged 65 years and over were the most likely to have received information about local public health and social services in English (22.9%) while those aged 45-64 years were the least likely (14.3%).

With respect to income, those who earned less than \$30k were the most likely to have received information about local public health and social services in English (20.3%) while those earning \$70-100k were the least likely (14.0%).

English-speakers who were unilingual English were more likely to have received information about local public health and social services in English (17.8%) than their bilingual counterparts (16.5%).

17.1.2 Source of Information Regarding Public Health and Social Services

Source of Information Regarding Public Health and Social Services Among Anglophones

Region	From a public health and social services institution	From a community organization	From a school	From a weekly or daily newspaper	Internet / Social media	Word of mouth / friend / relative	media	Mail / Flyer / Newsletter
031 Capitale-Nationale (n=30)	19.5%	49.4%	23.3%	5.0%	-	6.6%	-	-
061 Ouest-de-l'Île-de-Montréal (n=86)	42.1%	23.3%	21.4%	21.7%	1.9%	0.8%	1.5%	3.0%
062 Centre-Ouest-de-l'Île-de-Montréal (n=97)	45.8%	15.0%	16.5%	20.7%	1.1%	6.7%	-	2.2%
063 Centre-Sud-de-l'Île-de-Montréal (n=42)	56.1%	12.9%	26.7%	23.3%	0.6%	-	0.4%	1.3%
064 Nord-de-l'Île-de-Montréal (n=37)	40.0%	27.3%	3.5%	21.1%	7.1%	2.6%	-	-
071 Outaouais (n=40)	66.5%	52.6%	1.7%	15.3%	0.7%	-	-	4.1%
163 Montérégie-Ouest (n=33)	27.9%	44.4%	17.8%	15.3%	8.5%	4.5%	-	2.6%
Total (n=516)	43.6%	25.9%	16.2%	20.2%	3.7%	2.7%	4.2%	2.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who received information in English about local public health and social service institutions (Q42): Q43A. Did you obtain your information regarding access to services in English that are provided by the public health and social services institutions from any of the following: MULTIPLE ANSWERS POSSIBLE

Source of Information Regarding Public Health and Social Services Among Anglophones

	Variable	From a public health and social services institution	From a community organization	From a school	From a weekly or daily newspaper	Internet / Social media	Word of mouth / friend / relative	media	Mail / Flyer / Newsletter
	Male (n=199)	35.1%	25.5%	19.0%	20.2%	2.4%	1.4%	6.4%	1.8%
gender	Female (n=317)	53.8%	26.4%	12.7%	20.2%	5.3%	4.3%	1.5%	2.6%
	Total (n=516)	43.6%	25.9%	16.2%	20.2%	3.7%	2.7%	4.2%	2.1%
age	25-44 years (n=45)	48.8%	31.8%	24.1%	12.8%	0.7%	4.3%	10.0%	-
	45-64 years (n=193)	46.6%	22.6%	10.5%	27.4%	7.0%	3.0%	2.8%	4.5%
	65 years and over (n=262)	46.4%	27.4%	3.4%	26.7%	3.4%	1.9%	0.5%	3.5%
	Total (n=510)	43.5%	26.0%	16.2%	20.3%	3.8%	2.8%	4.2%	2.2%
	less than \$30k (n=83)	54.6%	25.6%	14.7%	13.4%	1.6%	4.0%	0.3%	1.0%
	\$30-70k (n=154)	37.9%	34.2%	11.2%	28.4%	4.8%	6.5%	2.3%	3.0%
household income	\$70-100k (n=62)	53.0%	26.2%	24.2%	22.6%	8.6%	-	2.5%	-
income	\$100k and over (n=97)	58.4%	28.4%	20.4%	21.6%	3.8%	0.4%	-	3.5%
	Total (n=396)	49.8%	29.6%	16.8%	22.6%	4.5%	3.1%	1.2%	2.3%
knowledge of	bilingual (n=367)	44.7%	24.6%	16.4%	19.0%	4.2%	2.8%	5.1%	2.1%
English and	unilingual English (n=149)	39.2%	31.0%	15.2%	24.7%	1.9%	2.4%	0.6%	2.4%
	Total (n=516)	43.6%	25.9%	16.2%	20.2%	3.7%	2.7%	4.2%	2.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who received information in English about local public health and social service institutions (Q42): Q43A. Did you obtain your information regarding access to services in English that are provided by the public health and social services institutions from any of the following: MULTIPLE ANSWERS POSSIBLE

Source of Information Regarding Public Health and Social Services Among Francophones

	Variable	From a public health and social services institution	From a community organization	From a school	From a weekly or daily newspaper	Internet / Social media	Word of mouth / friend / relative	media	Mail / Flyer / Newsletter
	Male (n=96)	57.4%	17.5%	12.5%	38.5%	6.2%	3.2%	5.9%	2.1%
gender	Female (n=162)	67.0%	11.8%	11.2%	20.7%	4.7%	3.7%	0.4%	3.7%
	Total (n=258)	62.5%	14.5%	11.8%	29.2%	5.4%	3.5%	3.0%	3.0%
	25-44 years (n=51)	65.5%	3.3%	16.8%	24.7%	9.0%	6.2%	-	1.2%
2.50	45-64 years (n=34)	72.8%	25.7%	21.4%	29.4%	2.7%	-	-	3.7%
age	65 years and over (n=165)	57.8%	19.0%	3.4%	31.7%	4.9%	3.4%	1.4%	5.5%
	Total (n=258)	62.5%	14.5%	11.8%	29.2%	5.4%	3.5%	3.0%	3.0%
	less than \$30k (n=44)	81.8%	20.3%	3.0%	13.7%	1.9%	-	-	2.4%
l	\$30-70k (n=87)	58.9%	11.7%	11.8%	34.1%	5.4%	4.4%	-	2.6%
household income	\$70-100k (n=39)	44.6%	1.9%	9.7%	40.0%	15.1%	3.7%	14.0%	6.1%
Income	\$100k and over (n=59)	70.0%	18.0%	12.6%	29.3%	2.6%	3.9%	-	1.1%
	Total (n=229)	63.4%	13.3%	10.3%	30.5%	5.8%	3.4%	2.7%	2.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who received information in English about local public health and social service institutions (Q42): Q43A. Did you obtain your information regarding access to services in English that are provided by the public health and social services institutions from any of the following: MULTIPLE ANSWERS POSSIBLE

17.1.3 Form of Information Regarding Public Health and Social Services

Form of Information Regarding Public Health and Social Services Among Anglophones

Region	directly by telephone contact or a visit	at an information meeting	through flyers or material placed in public locations	through a website	through mail	from family / friends	from a health-social services professional	Traditional media
031 Capitale-Nationale (n=30)	14.9%	10.3%	25.9%	45.1%	9.0%	10.4%	7.1%	-
061 Ouest-de-l'Île-de-Montréal (n=85)	23.9%	4.0%	43.3%	15.2%	16.9%	6.3%	4.3%	0.8%
062 Centre-Ouest-de-l'Île-de-Montréal (n=97)	30.1%	1.8%	25.2%	24.3%	17.1%	17.9%	0.7%	0.7%
063 Centre-Sud-de-l'Île-de-Montréal (n=41)	22.7%	1.4%	34.7%	21.3%	36.9%	9.5%	6.0%	7.2%
064 Nord-de-l'Île-de-Montréal (n=37)	15.7%	1.5%	25.9%	5.5%	28.5%	33.7%	0.9%	1.8%
071 Outaouais (n=40)	12.2%	4.2%	13.0%	15.6%	64.2%	6.6%	-	5.5%
163 Montérégie-Ouest (n=33)	12.2%	26.3%	49.7%	12.3%	16.2%	10.2%	1.9%	-
Total (n=515)	21.5%	6.5%	29.0%	17.8%	23.4%	13.6%	2.1%	5.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who received information in English about local public health and social service institutions (Q42): Q43B. Did you obtain this information... 5 POSSIBLE MENTIONS

Form of Information Regarding Public Health and Social Services Among Anglophones

	Variable	directly by telephone contact or a visit	at an information meeting	through flyers or material placed in public locations	through a website	through mail	from family / friends	from a health-social services professional	media
	Male (n=198)	22.8%	5.4%	30.3%	19.9%	15.1%	14.0%	1.2%	8.7%
gender	Female (n=317)	20.0%	7.8%	27.5%	15.3%	33.1%	13.1%	3.2%	1.3%
	Total (n=515)	21.5%	6.5%	29.0%	17.8%	23.4%	13.6%	2.1%	5.3%
age	25-44 years (n=45)	19.2%	5.6%	25.3%	22.0%	27.0%	16.0%	0.6%	13.2%
	45-64 years (n=196)	18.6%	5.7%	33.8%	21.2%	24.2%	10.6%	3.4%	0.1%
	65 years and over (n=259)	25.6%	11.8%	24.7%	14.9%	25.7%	19.4%	3.7%	3.5%
	Total (n=509)	21.6%	6.6%	29.2%	17.6%	23.5%	13.4%	2.1%	5.4%
	less than \$30k (n=86)	26.6%	7.8%	22.4%	8.0%	14.6%	33.4%	4.4%	1.1%
l	\$30-70k (n=153)	17.7%	5.3%	25.8%	17.2%	32.2%	19.2%	2.8%	5.9%
household income	\$70-100k (n=62)	30.2%	9.1%	41.2%	17.8%	20.2%	5.5%	3.3%	-
meome	\$100k and over (n=96)	22.2%	7.8%	32.2%	37.8%	33.9%	6.1%	1.1%	1.4%
	Total (n=397)	22.7%	7.1%	29.5%	21.8%	27.5%	15.7%	2.6%	2.7%
knowledge of	bilingual (n=365)	22.4%	6.3%	28.2%	17.8%	24.3%	12.9%	1.8%	6.1%
English and	unilingual English (n=150)	18.4%	7.4%	32.1%	17.9%	20.2%	16.1%	3.3%	2.6%
French	Total (n=515)	21.5%	6.5%	29.0%	17.8%	23.4%	13.6%	2.1%	5.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who received information in English about local public health and social service institutions (Q42): Q43B. Did you obtain this information... 5 POSSIBLE MENTIONS

Form of Information Regarding Public Health and Social Services Among Francophones

	Variable	directly by telephone contact or a visit	at an information meeting	through flyers or material placed in public locations	through a website	through mail	from family / friends
	Male (n=97)	33.8%	12.8%	44.4%	22.0%	25.4%	16.2%
gender	Female (n=162)	46.5%	18.1%	30.5%	22.1%	18.8%	22.4%
	Total (n=259)	40.4%	15.6%	37.2%	22.0%	22.0%	19.5%
	25-44 years (n=52)	44.3%	19.9%	35.6%	26.2%	21.2%	15.7%
2.50	45-64 years (n=34)	40.9%	21.1%	36.3%	21.7%	25.2%	20.0%
age	65 years and over (n=165)	36.9%	14.9%	33.8%	14.9%	17.5%	17.8%
	Total (n=259)	40.4%	15.6%	37.2%	22.0%	22.0%	19.5%
	less than \$30k (n=45)	43.3%	14.0%	15.7%	5.3%	27.0%	15.2%
	\$30-70k (n=87)	48.1%	24.0%	36.5%	21.0%	21.4%	20.4%
household income	\$70-100k (n=39)	24.6%	11.0%	44.5%	32.8%	15.5%	10.6%
Income	\$100k and over (n=59)	41.7%	14.9%	40.4%	28.1%	20.0%	12.8%
	Total (n=230)	40.6%	16.8%	35.8%	23.0%	20.7%	15.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who received information in English about local public health and social service institutions (Q42): Q43B. Did you obtain this information... 5 POSSIBLE MENTIONS

17.1.4 Received Information on a Public Health Promotion or Prevention Program from Public Authorities

Received Information on a Public Health Promotion or Prevention Program from Public Authorities

	Fnglish 9	Speakers	French	Speakers
Region	yes, in English	not in English	yes	no
031 Capitale-Nationale (n=202)	11.5%	88.5%	13.3%	86.7%
051 Estrie – CHU de Sherbrooke (n=106)	13.0%	87.0%	15.2%	84.8%
061 Ouest-de-l'Île-de-Montréal (n=484)	17.8%	82.2%	20.9%	79.1%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	18.9%	81.1%	20.0%	80.0%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	20.0%	80.0%	22.5%	77.5%
064 Nord-de-l'Île-de-Montréal (n=251)	13.0%	87.0%	24.3%	75.7%
065 Est-de-l'Île-de-Montréal (n=215)	5.2%	94.8%	16.0%	84.0%
071 Outaouais (n=200)	16.9%	83.1%	14.6%	85.4%
111 Gaspésie (n=75)	18.4%	81.6%	48.0%	52.0%
131 Laval (n=257)	3.8%	96.2%	7.1%	92.9%
141 Lanaudière (n=75)	4.1%	95.9%	13.2%	86.8%
151 Laurentides (n=110)	23.2%	76.8%	27.4%	72.6%
161 Montérégie-Centre (n=150)	11.4%	88.6%	28.9%	71.1%
162 Montérégie-Est (n=77)	7.3%	92.7%	14.5%	85.5%
163 Montérégie-Ouest (n=240)	9.6%	90.4%	9.1%	90.9%
Total (n=3,133)	14.1%	85.9%	17.6%	82.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q44A. In the last two years, have you received information on a public health promotion or prevention program in English from one or more of the following: 1) Public health and social services institutions or public health authorities in your region

Among English speakers, 14.1% had received information in English on public health programs from public authorities.

We observe that English-speakers in the regions of RTS des Laurentides (23.2%), RTS du Centre-Sud-de-l'Île-de-Montréal (20.0%) and RTS du Centre-Ouest-de-l'Île-de-Montréal (18.9%) were the most likely to have received information on public health programs from public authorities.

English speakers in the regions of RTS de Laval (3.8%), RTS de Lanaudière (4.1%) and RTS de l'Est-de-l'Île-de-Montréal (5.2%) were the least likely to have received information on public health programs from public authorities.

Received Information on a Public Health Promotion or Prevention Program from Public Authorities

		English S	peakers	French	Speakers
	Variable	yes, in English	not in English	yes	no
	Male	14.3%	85.7%	14.7%	85.3%
gender	Female	13.8%	86.2%	20.3%	79.7%
	Total	14.1%	85.9%	17.6%	82.4%
	18-24 years	14.8%	85.2%	15.9%	84.1%
	25-44 years	14.8%	85.2%	18.3%	81.7%
age	45-64 years	11.8%	88.2%	18.9%	81.1%
	65 years and over	17.1%	82.9%	17.2%	82.8%
	Total	14.2%	85.8%	17.7%	82.3%
	less than \$30k	20.6%	79.4%	18.6%	81.4%
	\$30-70k	12.8%	87.2%	17.5%	82.5%
household income	\$70-100k	12.1%	87.9%	17.1%	82.9%
medille	\$100k and over	14.4%	85.6%	19.7%	80.3%
	Total	14.5%	85.5%	18.3%	81.7%
knowledge of	bilingual	13.7%	86.3%		
English and	unilingual English	15.7%	84.3%		
French	Total	14.1%	85.9%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q44A. In the last two years, have you received information on a public health promotion or prevention program in English from one or more of the following: 1) Public health and social services institutions or public health authorities in your region

English-speaking males were more likely to have received information in English on public health programs from public authorities (14.3%) than were their female counterparts (13.8%).

Across age groups, English speakers who were aged 65 years and over were the most likely to have received information on public health programs from public authorities (17.1%) while those aged 45-64 years were the least likely (11.8%).

With respect to income, those who earned less than \$30k were the most likely to have received information on public health programs from public authorities (20.6%) while those earning \$70-100k were the least likely (12.1%).

English-speakers who were unilingual English were more likely to have received information on public health programs from public authorities (15.7%) than their bilingual counterparts (13.7%).

17.1.5 Received Information on a Public Health Promotion or Prevention Program from Community Organizations

Received Information on a Public Health Promotion or Prevention Program from Community Organizations

	English S	peakers	French S	peakers
Region	yes, in English	not in English	yes	no
031 Capitale-Nationale (n=202)	15.5%	84.5%	17.8%	82.2%
051 Estrie – CHU de Sherbrooke (n=106)	29.1%	70.9%	31.4%	68.6%
061 Ouest-de-l'Île-de-Montréal (n=484)	22.5%	77.5%	20.0%	80.0%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	29.4%	70.6%	16.2%	83.8%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	13.1%	86.9%	31.7%	68.3%
064 Nord-de-l'Île-de-Montréal (n=251)	14.0%	86.0%	13.4%	86.6%
065 Est-de-l'Île-de-Montréal (n=215)	13.3%	86.7%	11.2%	88.8%
071 Outaouais (n=200)	13.6%	86.4%	11.3%	88.7%
111 Gaspésie (n=75)	31.4%	68.6%	37.0%	63.0%
131 Laval (n=257)	7.0%	93.0%	15.2%	84.8%
141 Lanaudière (n=75)	9.6%	90.4%	18.5%	81.5%
151 Laurentides (n=110)	34.5%	65.5%	29.8%	70.2%
161 Montérégie-Centre (n=150)	13.3%	86.7%	23.7%	76.3%
162 Montérégie-Est (n=77)	10.2%	89.8%	11.5%	88.5%
163 Montérégie-Ouest (n=240)	23.0%	77.0%	13.1%	86.9%
Total (n=3,133)	19.3%	80.7%	19.2%	80.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q44B. In the last two years, have you received information on a public health promotion or prevention program in English from: 2) Community organization in your region

Among English speakers, 19.3% had received information in English on public health programs from community organizations.

We observe that English-speakers in the regions of RTS des Laurentides (34.5%), RTS de la Gaspésie (31.4%) and RTS du Centre-Ouest-de-l'Île-de-Montréal (29.4%) were the most likely to have received information in English on public health programs from community organizations.

English speakers in the regions of RTS de Laval (7.0%), RTS de Lanaudière (9.6%) and RTS de la Montérégie-Est (10.2%) were the least likely to have received information in English on public health programs from community organizations.

Received Information on a Public Health Promotion or Prevention Program from Community Organizations

		English S	Speakers	French Speakers		
	Variable	yes, in English	not in English	yes	no	
	Male	19.0%	81.0%	17.1%	82.9%	
gender	Female	19.6%	80.4%	21.1%	78.9%	
	Total	19.3%	80.7%	19.2%	80.8%	
	18-24 years	18.5%	81.5%	23.7%	76.3%	
	25-44 years	19.2%	80.8%	23.0%	77.0%	
age	45-64 years	18.6%	81.4%	17.8%	82.2%	
	65 years and over	22.6%	77.4%	15.8%	84.2%	
	Total	19.6%	80.4%	19.3%	80.7%	
	less than \$30k	20.7%	79.3%	20.9%	79.1%	
l	\$30-70k	21.2%	78.8%	21.7%	78.3%	
household income	\$70-100k	24.3%	75.7%	17.4%	82.6%	
meome	\$100k and over	18.3%	81.7%	15.7%	84.3%	
	Total	20.7%	79.3%	18.8%	81.2%	
knowledge of	bilingual	19.1%	80.9%			
English and	unilingual English	20.4%	79.6%			
French	Total	19.3%	80.7%			

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
Q44B. In the last two years, have you received information on a public health promotion or prevention program in
English from: 2) Community organization in your region

English-speaking females were more likely to have received information in English on public health programs from community organizations (19.6%) than were their male counterparts (19.0%).

Across age groups, English speakers who were aged 65 years and over were the most likely to have received information in English on public health programs from community organizations (22.6%) while those aged 18-24 years were the least likely (18.5%).

With respect to income, those who earned \$70-100k were the most likely to have received information in English on public health programs from community organizations (24.3%) while those earning \$100k and over were the least likely (18.3%).

English-speakers who were unilingual English were more likely to have received information in English on public health programs from community organizations (20.4%) than their bilingual counterparts (19.1%).

17.1.6 Received Information on a Public Health Promotion or Prevention Program from Schools

Received Information on a Public Health Promotion or Prevention Program from Schools

	English S	Speakers	French S	Speakers		
Region	yes, in English	not in English	yes	no		
031 Capitale-Nationale (n=202)	24.1%	75.9%	15.6%	84.4%		
051 Estrie – CHU de Sherbrooke (n=106)	21.6%	78.4%	23.4%	76.6%		
061 Ouest-de-l'Île-de-Montréal (n=484)	26.6%	73.4%	7.1%	92.9%		
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	32.9%	67.1%	23.1%	76.9%		
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	19.7%	80.3%	18.0%	82.0%		
064 Nord-de-l'Île-de-Montréal (n=251)	16.1%	83.9%	20.8%	79.2%		
065 Est-de-l'Île-de-Montréal (n=215)	22.1%	77.9%	16.6%	83.4%		
071 Outaouais (n=200)	19.6%	80.4%	16.0%	84.0%		
111 Gaspésie (n=75)	27.1%	72.9%	26.5%	73.5%		
131 Laval (n=257)	21.4%	78.6%	18.3%	81.7%		
141 Lanaudière (n=75)	13.3%	86.7%	29.1%	70.9%		
151 Laurentides (n=110)	27.1%	72.9%	13.4%	86.6%		
161 Montérégie-Centre (n=150)	23.6%	76.4%	24.8%	75.2%		
162 Montérégie-Est (n=77)	18.3%	81.7%	25.8%	74.2%		
163 Montérégie-Ouest (n=240)	30.0%	70.0%	29.7%	70.3%		
Total (n=3,133)	24.6%	75.4%	20.5%	79.5%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q44C. In the last two years, have you received information on a public health promotion or prevention program in English from: 3) Schools

Among English speakers, 24.6% had received information in English on public health programs from schools. This was much higher than the proportion reported for French speakers (20.5%).

We observe that English-speakers in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (32.9%), RTS de la Montérégie-Ouest (30.0%) and RTS de la Gaspésie (27.1%) were the most likely to have received information in English on public health programs from schools.

English speakers in the regions of RTS de Lanaudière (13.3%), RTS du Nord-de-l'Île-de-Montréal (16.1%) and RTS de la Montérégie-Est (18.3%) were the least likely to have received information in English on public health programs from schools.

Received Information on a Public Health Promotion or Prevention Program from Schools

		English S	peakers	French S	peakers
	Variable	yes, in English	not in English	yes	no
	Male	24.8%	75.2%	17.2%	82.8%
gender	Female	24.3%	75.7%	23.5%	76.5%
	Total	24.6%	75.4%	20.5%	79.5%
	18-24 ye a rs	47.1%	52.9%	24.3%	75.7%
	25-44 ye a rs	30.2%	69.8%	33.6%	66.4%
age	45-64 years	20.6%	79.4%	31.9%	68.1%
	65 years and over	7.3%	92.7%	4.3%	95.7%
	Total	24.9%	75.1%	20.6%	79.4%
	less than \$30k	10.3%	89.7%	10.6%	89.4%
harra hald	\$30-70k	24.4%	75.6%	18.4%	81.6%
household income	\$70-100k	30.8%	69.2%	21.6%	78.4%
meome	\$100k and over	32.6%	67.4%	28.9%	71.1%
	Total	26.3%	73.7%	21.1%	78.9%
knowledge of	bilingual	26.5%	73.5%		
English and	unilingual English	16.8%	83.2%		
Fre n ch	Total	24.6%	75.4%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q44C. In the last two years, have you received information on a public health promotion or prevention program in English from: 3) Schools

English-speaking males were more likely to have received information in English on public health programs from schools (24.8%) than were their female counterparts (24.3%).

Across age groups, English speakers who were aged 18-24 years were the most likely to have received information in English on public health programs from schools (47.1%) while those aged 65 years and over were the least likely (7.3%).

With respect to income, those who earned \$100k and over were the most likely to have received information in English on public health programs from schools (32.6%) while those earning less than \$30k were the least likely (10.3%).

English-speakers who were bilingual were more likely to have received information in English on public health programs from schools (26.5%) than their unilingual English counterparts (16.8%).

18 Requesting Services in English

18.1.1 Felt Comfortable Asking for Public Health or Social Services in English

Felt Comfortable Asking for Public Health or Social Services in English

Region	yes	no	not important to ask for services in English
031 Capitale-Nationale (n=202)	50.7%	21.4%	27.9%
051 Estrie – CHU de Sherbrooke (n=106)	61.4%	36.2%	2.3%
061 Ouest-de-l'Île-de-Montréal (n=484)	88.3%	9.1%	2.6%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	90.8%	7.9%	1.3%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	74.7%	21.5%	3.8%
064 Nord-de-l'Île-de-Montréal (n=251)	71.3%	21.0%	7.7%
065 Est-de-l'Île-de-Montréal (n=215)	64.4%	23.6%	12.1%
071 Outaouais (n=200)	79.2%	18.8%	2.0%
111 Gaspésie (n=75)	63.1%	29.2%	7.7%
131 Laval (n=257)	60.7%	34.9%	4.5%
141 Lanaudière (n=75)	42.0%	50.2%	7.9%
151 Laurentides (n=110)	61.7%	25.7%	12.7%
161 Montérégie-Centre (n=150)	72.2%	21.9%	5.9%
162 Montérégie-Est (n=77)	70.3%	24.9%	4.8%
163 Montérégie-Ouest (n=240)	70.1%	25.2%	4.7%
Total (n=3,133)	75.8%	19.4%	4.9%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q45. When you require the service of a public health or social services institution, do you feel comfortable asking for the service in English?

Among English speakers, 19.4% felt uncomfortable asking for public health or social services in English.

We observe that English-speakers in the regions of RTS de Lanaudière (50.2%), RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (36.2%) and RTS de Laval (34.9%) were the most likely to feel uncomfortable asking for public health or social services in English.

English speakers in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (7.9%), RTS de l'Ouest-de-l'Île-de-Montréal (9.1%) and RTS de l'Outaouais (18.8%) were the least likely to feel uncomfortable asking for public health or social services in English.

Felt Comfortable Asking for Public Health or Social Services in English

	Variable	yes	no	not important to ask for services in English
	Male	76.6%	18.2%	5.1%
gender	Female	74.9%	20.5%	4.6%
	Total	75.8%	19.4%	4.9%
age	18-24 years	88.6%	6.8%	4.6%
	25-44 years	69.8%	25.0%	5.2%
	45-64 years	73.4%	22.4%	4.1%
	65 years and over	83.4%	10.9%	5.7%
	Total	75.9%	19.3%	4.9%
	less than \$30k	80.4%	15.1%	4.5%
h a coa a la a la d	\$30-70k	69.8%	26.7%	3.5%
household income	\$70-100k	76.7%	18.9%	4.4%
lineome	\$100k and over	76.9%	19.8%	3.3%
	Total	75.2%	21.1%	3.7%
knowledge of	bilingual	73.5%	20.7%	5.8%
English and	unilingual English	85.2%	13.9%	1.0%
French	Total	75.8%	19.4%	4.9%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q45. When you require the service of a public health or social services institution, do you feel comfortable asking for the service in English?

English-speaking females were more likely to feel uncomfortable asking for public health or social services in English (20.5%) than were their male counterparts (18.2%).

Across age groups, English speakers who were aged 25-44 years were the most likely to feel uncomfortable asking for public health or social services in English (25.0%) while those aged 18-24 years were the least likely (6.8%).

With respect to income, those who earned \$30-70k were the most likely to feel uncomfortable asking for public health or social services in English (26.7%) while those earning less than \$30k were the least likely (15.1%).

English-speakers who were bilingual were more likely to feel uncomfortable asking for public health or social services in English (20.7%) than their unilingual English counterparts (13.9%).

18.1.2 Reasons for Not Feeling Comfortable Asking for Public Health or Social Services in English

Reasons for Not Feeling Comfortable Asking for Public Health or Social Services in English

Region	too embarrass ed or shy to ask	fear the answer will be no	request will impose an extra burden on the staff	a delay may occur in obtaining the service	Lack of confidence in French skills	Franco- phone Staff	Staff attitude	Will be better served in French	l am bilingual	l expect to be served in French	My right to be served in English	other (specify)
031 Capitale-Nationale (n=52)	15.2%	21.7%	43.1%	36.9%	1.2%	6.5%	4.8%	3.7%	8.5%	3.8%	-	0.2%
061 Ouest-de-l'Île-de-Montréal (n=44)	42.5%	14.6%	37.5%	20.2%	-	4.9%	5.8%	1.4%	6.1%	1.5%	4.9%	2.4%
062 Centre-Ouest-de-l'Île-de-Montréal (n=40)	40.0%	19.3%	35.7%	15.3%	4.6%	1.2%	8.8%	-	6.7%	6.4%	2.0%	4.9%
063 Centre-Sud-de-l'Île-de-Montréal (n=36)	13.0%	53.4%	14.3%	12.6%	3.8%	6.2%	10.7%	3.8%	-	2.7%	-	-
064 Nord-de-l'Île-de-Montréal (n=44)	34.1%	34.4%	21.0%	7.1%	-	4.8%	4.2%	0.6%	2.9%	6.5%	2.1%	-
065 Est-de-l'Île-de-Montréal (n=55)	38.8%	17.9%	54.8%	47.5%	0.7%	6.2%	3.6%	0.8%	0.7%	-	4.3%	4.0%
131 Laval (n=70)	10.9%	26.5%	33.6%	26.4%	-	14.9%	9.9%	3.1%	-	-	3.1%	-
161 Montérégie-Centre (n=33)	18.5%	21.3%	19.0%	58.1%	0.7%	1.2%	10.0%	10.2%	1.6%	-	-	4.7%
163 Montérégie-Ouest (n=43)	11.9%	20.1%	33.1%	39.8%	-	5.6%	8.0%	1.9%	4.7%	-	2.2%	-
Total (n=543)	23.2%	23.4%	30.4%	25.7%	1.2%	10.0%	9.4%	2.7%	2.2%	1.8%	2.5%	1.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who did not feel comfortable asking for public health or social services in English (Q45): Q46. Is this because... READ ALL 4 POSSIBLE MENTIONS

Reasons for Not Feeling Comfortable Asking for Public Health or Social Services in English

	Variable	too embarrass ed or shy to ask	fear the answer will be no	impose an extra burden	a delay may occur in obtaining the service	Lack of confidence in French skills	Franco- phone Staff	Staff attitude	Will be better served in French	I am bilingual	l expect to be served in French	My right to be served in English	other (specify)
gender	Male (n=185)	17.0%	24.9%	26.1%	31.7%	1.1%	15.1%	3.4%	1.9%	1.8%	1.1%	3.3%	1.7%
	Female (n=358)	28.6%	22.1%	34.1%	20.5%	1.3%	5.6%	14.7%	3.4%	2.5%	2.4%	1.8%	1.1%
	Total (n=543)	23.2%	23.4%	30.4%	25.7%	1.2%	10.0%	9.4%	2.7%	2.2%	1.8%	2.5%	1.4%
	25-44 years (n=77)	25.6%	21.8%	34.7%	21.2%	1.0%	10.6%	11.2%	1.5%	2.3%	1.9%	1.6%	-
age	45-64 years (n=307)	18.8%	25.6%	26.9%	35.7%	1.2%	7.4%	7.5%	4.6%	2.0%	1.4%	3.3%	1.4%
	65 years and over (n=142)	26.2%	26.9%	29.6%	21.2%	1.2%	7.4%	5.5%	1.8%	3.5%	3.5%	4.7%	1.3%
	Total (n=532)	23.5%	23.1%	30.8%	26.1%	1.0%	10.1%	9.4%	2.7%	2.2%	1.8%	2.5%	0.7%
	less than \$30k (n=54)	24.5%	35.1%	20.2%	17.2%	-	0.9%	3.7%	1.0%	0.7%	1.6%	7.3%	-
	\$30-70k (n=128)	32.2%	22.2%	37.9%	23.9%	0.5%	10.3%	10.9%	2.4%	1.1%	1.9%	1.2%	0.5%
household income	\$70-100k (n=81)	27.1%	18.9%	34.6%	28.8%	1.0%	2.1%	2.6%	6.4%	2.3%	-	4.8%	1.6%
Income	\$100k and over (n=140)	13.3%	22.6%	27.9%	31.8%	1.5%	6.2%	17.0%	3.4%	4.6%	2.8%	1.2%	0.9%
	Total (n=403)	24.5%	23.2%	32.2%	26.5%	0.8%	6.5%	10.5%	3.3%	2.4%	1.8%	2.5%	0.7%
knowledge of	bilingual (n=449)	23.2%	22.1%	30.3%	26.0%	1.2%	10.9%	9.3%	2.9%	2.5%	1.9%	1.8%	1.2%
English and	unilingual English (n=92)	23.6%	31.9%	30.4%	24.1%	1.3%	3.9%	10.4%	1.2%	-	1.1%	6.8%	2.5%
French	Total (n=541)	23.2%	23.4%	30.4%	25.7%	1.2%	10.0%	9.4%	2.7%	2.2%	1.8%	2.5%	1.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who did not feel comfortable asking for public health or social services in English (Q45): Q46. Is this because... READ ALL 4 POSSIBLE MENTIONS

18.1.3 Used Assistance of Another Person to Communicate with Public Health or Social Service Providers

Used Assistance of Another Person to Communicate with Public Health or Social Service Providers

Region	Yes	No
031 Capitale-Nationale (n=202)	8.3%	91.7%
051 Estrie – CHU de Sherbrooke (n=106)	11.7%	88.3%
061 Ouest-de-l'Île-de-Montréal (n=484)	9.8%	90.2%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	7.5%	92.5%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	7.2%	92.8%
064 Nord-de-l'Île-de-Montréal (n=251)	12.1%	87.9%
065 Est-de-l'Île-de-Montréal (n=215)	4.9%	95.1%
071 Outaouais (n=200)	22.8%	77.2%
111 Gaspésie (n=75)	7.7%	92.3%
131 Laval (n=257)	11.3%	88.7%
141 Lanaudière (n=75)	8.1%	91.9%
151 Laurentides (n=110)	11.5%	88.5%
161 Montérégie-Centre (n=150)	11.4%	88.6%
162 Montérégie-Est (n=77)	40.8%	59.2%
163 Montérégie-Ouest (n=240)	10.7%	89.3%
Total (n=3,133)	10.8%	89.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q47A. In the last 2 years, did you use the assistance of another person in order to communicate with a service provider within a health and social service institution (hospitals, CLSCs, long-term carefacilities)?

Among English speakers, 10.8% used the assistance of another person to communicate with public health or social service providers.

We observe that English-speakers in the regions of RTS de la Montérégie-Est (40.8%), RTS de l'Outaouais (22.8%) and RTS du Nord-de-l'Île-de-Montréal (12.1%) were the most likely to used assistance to communicate with public health or social service providers.

English speakers in the regions of RTS de l'Est-de-l'Île-de-Montréal (4.9%), RTS du Centre-Sud-de-l'Île-de-Montréal (7.2%) and RTS du Centre-Ouest-de-l'Île-de-Montréal (7.5%) were the least likely to used assistance to communicate with public health or social service providers.

Used Assistance of Another Person to Communicate with Public Health or Social Service Providers

	Variable	Yes	No
	Male	8.6%	91.4%
gender	Female	13.1%	86.9%
	Total	10.8%	89.2%
	18-24 years	13.8%	86.2%
	25-44 years	10.5%	89.5%
age	45-64 years	9.6%	90.4%
	65 years and over	12.1%	87.9%
	Total	10.9%	89.1%
	less than \$30k	12.3%	87.7%
	\$30-70k	10.5%	89.5%
household income	\$70-100k	11.0%	89.0%
meome	\$100k and over	7.3%	92.7%
	Total	9.8%	90.2%
knowledge of	bilingual	7.8%	92.2%
English and	unilingual English	23.1%	76.9%
French	Total	10.8%	89.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q47A. In the last 2 years, did you use the assistance of another person in order to communicate with a service provider within a health and social service institution (hospitals, CLSCs, long-term care facilities)?

English-speaking females were more likely to used assistance to communicate with public health or social service providers (13.1%) than were their male counterparts (8.6%).

Across age groups, English speakers who were aged 18-24 years were the most likely to used assistance to communicate with public health or social service providers (13.8%) while those aged 45-64 years were the least likely (9.6%).

With respect to income, those who earned less than \$30k were the most likely to used assistance to communicate with public health or social service providers (12.3%) while those earning \$100k and over were the least likely (7.3%).

English-speakers who were unilingual English were more likely to used assistance to communicate with public health or social service providers (23.1%) than their bilingual counterparts (7.8%).

18.1.4 Person Assisting to Communicate with Public Health or Social Service Providers

Person Assisting to Communicate with Public Health or Social Service Providers

Variable		professional interpreter	friend	family member	employee of the institution	community volunteer	Other (specify)
	Male (n=115)	12.9%	16.1%	58.0%	13.9%	1.8%	0.8%
gender	Female (n=228)	5.9%	27.4%	50.5%	10.6%	1.9%	6.3%
	Total (n=343)	8.7%	22.8%	53.5%	11.9%	1.8%	4.1%
	25-44 years (n=36)	-	15.3%	70.0%	6.3%	=	8.4%
age	45-64 years (n=131)	6.3%	21.1%	51.0%	21.5%	3.4%	3.5%
	65 years and over (n=160)	2.3%	29.8%	51.3%	16.7%	4.2%	0.6%
	Total (n=336)	8.8%	22.9%	53.2%	12.1%	1.9%	4.1%
	less than \$30k (n=72)	4.8%	33.5%	32.3%	24.6%	6.0%	2.2%
ĺ	\$30-70k (n=90)	0.6%	30.2%	56.8%	13.3%	1.3%	1.4%
household income	\$70-100k (n=35)	5.8%	15.1%	56.8%	5.2%	-	19.7%
meome	\$100k and over (n=48)	3.1%	4.0%	78.3%	16.0%	2.3%	-
	Total (n=245)	3.2%	20.9%	57.6%	14.4%	2.2%	5.0%
knowledge of	bilingual (n=190)	12.2%	23.4%	50.8%	11.7%	2.7%	1.5%
English and	unilingual English (n=153)	3.9%	22.0%	57.2%	12.2%	0.7%	7.6%
French	Total (n=343)	8.7%	22.8%	53.5%	11.9%	1.8%	4.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who used the assistance of another person to communicate with public health and social service providers (Q45): Q48B. Who provided the assistance you needed when you used the public health and social services? (Read all)

18.1.5 Could Have Benefited from Assistance Communicating with Public Health or Social Service Providers

Could Have Benefited from Assistance Communicating with Public Health or Social Service Providers

Region	Yes	No
031 Capitale-Nationale (n=202)	13.2%	86.8%
051 Estrie – CHU de Sherbrooke (n=106)	26.6%	73.4%
061 Ouest-de-l'Île-de-Montréal (n=484)	26.1%	73.9%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	20.0%	80.0%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	16.7%	83.3%
064 Nord-de-l'Île-de-Montréal (n=251)	20.2%	79.8%
065 Est-de-l'Île-de-Montréal (n=215)	23.2%	76.8%
071 Outaouais (n=200)	33.9%	66.1%
111 Gaspésie (n=75)	31.8%	68.2%
131 Laval (n=257)	26.4%	73.6%
141 Lanaudière (n=75)	17.3%	82.7%
151 Laurentides (n=110)	26.5%	73.5%
161 Montérégie-Centre (n=150)	28.7%	71.3%
162 Montérégie-Est (n=77)	29.3%	70.7%
163 Montérégie-Ouest (n=240)	22.4%	77.6%
Total (n=3,133)	23.8%	76.2%
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Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q49. In the last 2 years, could you have benefited from communication assistance in your use of services from public sector health and social services providers (doctor's office, hospitals, CLSCs, long-term care facilities)?

Among English speakers, 23.8% could have benefited from assistance communicating with public health or social service providers.

We observe that English-speakers in the regions of RTS de l'Outaouais (33.9%), RTS de la Gaspésie (31.8%) and RTS de la Montérégie-Est (29.3%) were the most likely to they could have benefited from assistance communicating with public health or social service providers.

English speakers in the regions of RTS de la Capitale-Nationale (13.2%), RTS du Centre-Sud-de-l'Île-de-Montréal (16.7%) and RTS de Lanaudière (17.3%) were the least likely to they could have benefited from assistance communicating with public health or social service providers.

Could Have Benefited from Assistance Communicating with Public Health or Social Service Providers

	Variable	Yes	No
	Male	20.4%	79.6%
gender	Female	27.2%	72.8%
	Total	23.8%	76.2%
	18-24 years	20.5%	79.5%
	25-44 years	22.7%	77.3%
age	45-64 years	25.4%	74.6%
	65 years and over	25.5%	74.5%
	Total	23.9%	76.1%
	less than \$30k	21.2%	78.8%
	\$30-70k	25.7%	74.3%
household income	\$70-100k	26.3%	73.7%
meome	\$100k and over	25.3%	74.7%
	Total	25.0%	75.0%
knowledge of	bilingual	20.2%	79.8%
English and	unilingual English	38.9%	61.1%
French	Total	23.8%	76.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q49. In the last 2 years, could you have benefited from communication assistance in your use of services from public sector health and social services providers (doctor's office, hospitals, CLSCs, long-term care facilities)?

English-speaking females were more likely to report that they could have benefited from assistance communicating with public health or social service providers (27.2%) than were their male counterparts (20.4%).

Across age groups, English speakers who were aged 65 years and over were the most likely to report that they could have benefited from assistance communicating with public health or social service providers (25.5%) while those aged 18-24 years were the least likely (20.5%).

With respect to income, those who earned \$70-100k were the most likely to report that they could have benefited from assistance communicating with public health or social service providers (26.3%) while those earning less than \$30k were the least likely (21.2%).

English-speakers who were unilingual English were more likely to report that they could have benefited from assistance communicating with public health or social service providers (38.9%) than their bilingual counterparts (20.2%).

19 Medical Insurance or Health Plan Coverage

19.1.1 Had Medical Insurance or a Health Plan

Had Medical Insurance or a Health Plan **English Speakers** French Speakers Region yes no yes 031 Capitale-Nationale (n=202) 77.7% 22.3% 87.2% 12.8% 76.8% 051 Estrie - CHU de Sherbrooke (n=106) 56.1% 43.9% 23.2% 061 Ouest-de-l'Île-de-Montréal (n=484) 80.9% 19.1% 88.4% 11.6% 062 Centre-Ouest-de-l'Île-de-Montréal (n=465) 77.0% 23.0% 81.6% 18.4% 063 Centre-Sud-de-l'Île-de-Montréal (n=226) 72.0% 28.0% 88.9% 11.1% 064 Nord-de-l'Île-de-Montréal (n=251) 72.3% 27.7% 81.0% 19.0% 065 Est-de-l'Île-de-Montréal (n=215) 75.0% 25.0% 83.8% 16.2% 071 Outaouais (n=200) 82.8% 17.2% 94.7% 5.3% 111 Gaspésie (n=75) 65.7% 34.3% 51.4% 48.6% 131 Laval (n=257) 20.4% 76.0% 24.0% 79.6% 20.3% 141 Lanaudière (n=75) 84.0% 16.0% 79.7% 151 Laurentides (n=110) 77.1% 22.9% 74.8% 25.2% 161 Montérégie-Centre (n=150) 81.3% 18.7% 77.3% 22.7% 162 Montérégie-Est (n=77) 78.9% 21.1% 86.2% 13.8% 163 Montérégie-Ouest (n=240) 82.7% 17.3% 83.2% 16.8% Total (n=3,133) 77.1% 22.9% 82.2% 17.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q50A. Do you have medical insurance or a health plan? Among English speakers, 77.1% had medical insurance or a health plan. This was lower than the proportion reported for French speakers (82.2%).

We observe that English-speakers in the regions of RTS de Lanaudière (84.0%), RTS de l'Outaouais (82.8%) and RTS de la Montérégie-Ouest (82.7%) were the most likely to report they had medical insurance or a health plan.

English speakers in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (56.1%), RTS de la Gaspésie (65.7%) and RTS du Centre-Sud-de-l'Île-de-Montréal (72.0%) were the least likely to report they had medical insurance or a health plan.

Had Medical Insurance or a Health Plan										
		English S	peakers	French Speakers						
	Variable	yes	no	yes	no					
	Male	77.1%	22.9%	80.8%	19.2%					
gender	Female	77.1%	22.9%	83.5%	16.5%					
	Total	77.1%	22.9%	82.2%	17.8%					
	18-24 years	81.8%	18.2%	88.7%	11.3%					
	25-44 years	78.2%	21.8%	89.1%	10.9%					
age	45-64 years	81.3%	18.7%	81.5%	18.5%					
	65 years and over	63.9%	36.1%	75.5%	24.5%					
	Total	77.0%	23.0%	82.3%	17.7%					
	less than \$30k	48.5%	51.5%	62.8%	37.2%					
	\$30-70k	69.6%	30.4%	74.4%	25.6%					
household income	\$70-100k	83.3%	16.7%	94.9%	5.1%					
monic	\$100k and over	92.5%	7.5%	93.1%	6.9%					
	Total	76.9%	23.1%	82.7%	17.3%					
knowledge of	bilingual	78.2%	21.8%							
English and	unilingual English	72.5%	27.5%							

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q50A. Do you have medical insurance or a health plan?

77.1%

22.9%

French

Total

English-speaking females were as likely to report they had medical insurance or a health plan (77.1%) compared to their male counterparts (77.1%).

Across age groups, English speakers who were aged 18-24 years were the most likely to report they had medical insurance or a health plan (81.8%) while those aged 65 years and over were the least likely (63.9%).

With respect to income, those who earned \$100k and over were the most likely to report they had medical insurance or a health plan (92.5%) while those earning less than \$30k were the least likely (48.5%).

English-speakers who were bilingual were more likely to report they had medical insurance or a health plan (78.2%) than their unilingual English counterparts (72.5%).

19.1.2 Type of Medical Insurance or Health Plan

Type of Medical Insurance or Health Plan

		English Spe	akers			French Spe	akers	
Region	Universal public health insurance coverage	Governmental benefit (for seniors or social assistance)	Through your own or your partner's employer	Another private source	Universal public health insurance coverage	Governmental benefit (for seniors or social assistance)	Through your own or your partner's employer	Another private source
031 Capitale-Nationale (n=175)	31.1%	23.3%	65.2%	9.8%	24.8%	3.2%	66.7%	21.3%
051 Estrie – CHU de Sherbrooke (n=69)	23.3%	17.6%	52.4%	17.2%	33.8%	0.9%	67.0%	17.2%
061 Ouest-de-l'Île-de-Montréal (n=353)	21.4%	6.3%	63.2%	20.3%	26.2%	2.6%	70.8%	23.9%
062 Centre-Ouest-de-l'Île-de-Montréal (n=315)	30.1%	14.5%	48.7%	16.3%	40.2%	3.3%	60.3%	27.8%
063 Centre-Sud-de-l'Île-de-Montréal (n=144)	29.7%	5.4%	59.9%	8.7%	28.1%	5.7%	68.6%	14.5%
064 Nord-de-l'Île-de-Montréal (n=158)	21.4%	11.5%	51.6%	23.2%	37.9%	12.9%	72.8%	25.4%
065 Est-de-l'Île-de-Montréal (n=158)	12.0%	3.7%	79.9%	8.8%	28.9%	4.5%	56.5%	32.3%
071 Outaouais (n=140)	17.1%	19.1%	56.1%	15.4%	27.8%	8.4%	59.6%	31.4%
111 Gaspésie (n=46)	22.9%	25.5%	55.4%	8.0%	-	-	-	-
131 Laval (n=189)	18.7%	14.8%	65.8%	13.0%	25.2%	6.4%	75.4%	16.9%
141 Lanaudière (n=48)	11.2%	10.9%	76.9%	6.5%	24.2%	6.0%	68.8%	24.3%
151 Laurentides (n=82)	38.5%	7.9%	60.3%	11.8%	30.1%	3.4%	65.9%	20.3%
161 Montérégie-Centre (n=107)	22.8%	18.0%	49.9%	24.4%	22.4%	6.8%	60.6%	26.4%
162 Montérégie-Est (n=63)	33.4%	18.9%	65.4%	7.8%	43.7%	4.4%	66.2%	22.9%
163 Montérégie-Ouest (n=170)	12.1%	12.5%	68.5%	18.7%	20.8%	2.6%	61.3%	29.3%
Total (n=2,217)	22.5%	11.7%	60.0%	16.2%	29.5%	4.8%	65.4%	23.6%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those with medical insurance or a health plan (Q50A): Q50B. What type of medical insurance or health plan coverage? Is it... READ 4 POSSIBLE MENTIONS

Type of Medical Insurance or Health Plan

			English Spe	akers		French Speakers			
Variable		Universal public health insurance coverage	Governmental benefit (for seniors or social assistance)	Through your own or your partner's employer	Another private source	Universal public health insurance coverage	Governmental benefit (for seniors or social assistance)	Through your own or your partner's employer	Another private source
	Male (n=850)	23.1%	10.6%	60.2%	15.2%	28.9%	5.4%	62.0%	24.5%
gender	Female (n=1,367)	21.8%	12.8%	59.9%	17.3%	30.1%	4.3%	68.6%	22.8%
	Total (n=2,217)	22.5%	11.7%	60.0%	16.2%	29.5%	4.8%	65.4%	23.6%
	18-24 years (n=45)	41.6%	18.0%	31.2%	19.4%	-	-	-	-
	25-44 years (n=283)	15.2%	9.4%	69.9%	14.0%	25.9%	3.5%	78.1%	15.5%
age	45-64 years (n=1,069)	18.9%	7.4%	69.4%	13.1%	20.5%	3.5%	79.7%	23.5%
	65 years and over (n=786)	32.0%	22.3%	40.4%	24.4%	33.2%	8.0%	54.3%	26.0%
	Total (n=2,183)	22.4%	11.8%	60.3%	16.0%	29.5%	4.7%	65.6%	23.7%
	less than \$30k (n=191)	43.0%	22.3%	31.9%	7.9%	59.8%	9.5%	14.8%	16.8%
	\$30-70k (n=559)	28.0%	14.9%	53.8%	15.4%	32.4%	8.0%	64.4%	23.1%
household	\$70-100k (n=336)	13.5%	4.5%	73.6%	17.7%	19.2%	0.8%	78.9%	31.3%
Income	\$100k and over (n=594)	13.5%	5.1%	75.5%	14.9%	19.2%	3.6%	80.6%	20.3%
	Total (n=1,680)	20.4%	9.4%	64.8%	14.9%	27.8%	4.9%	67.8%	23.3%
knowledge of	bilingual (n=1,732)	21.5%	10.2%	61.7%	16.9%				
English and	unilingual English (n=484)	26.8%	18.2%	52.7%	13.3%				
French	Total (n=2,216)	22.5%	11.7%	60.0%	16.2%				

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those with medical insurance or a health plan (Q50A): Q50B. What type of medical insurance or health plan coverage? Is it... READ 4 POSSIBLE MENTIONS

20 General State of Health

20.1.1 General State of Health

General State of Health

		Fn	glish Speake	ers			Fre	nch Speak	ers	
Region	excellent	very good	good	average	bad	excellent	very good	good	average	bad
031 Capitale-Nationale (n=202)	30.2%	37.2%	16.2%	8.8%	7.5%	24.1%	44.0%	18.0%	13.9%	-
051 Estrie – CHU de Sherbrooke (n=106)	15.1%	28.1%	16.4%	38.2%	2.2%	21.2%	40.6%	27.6%	8.4%	2.2%
061 Ouest-de-l'Île-de-Montréal (n=484)	28.3%	31.7%	24.7%	13.1%	2.2%	5.7%	50.4%	34.7%	7.6%	1.6%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	24.5%	32.2%	20.9%	18.1%	4.2%	16.1%	42.6%	24.8%	14.1%	2.4%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	29.6%	22.5%	31.7%	13.8%	2.4%	26.0%	27.7%	33.7%	11.6%	1.0%
064 Nord-de-l'Île-de-Montréal (n=251)	17.3%	29.7%	31.6%	16.1%	5.3%	31.8%	27.4%	29.9%	10.9%	-
065 Est-de-l'Île-de-Montréal (n=215)	15.5%	47.6%	26.3%	9.2%	1.4%	28.9%	27.6%	33.4%	6.2%	4.0%
071 Outaouais (n=200)	24.0%	24.7%	23.3%	20.6%	7.4%	19.7%	27.2%	43.7%	6.1%	3.3%
111 Gaspésie (n=75)	23.6%	20.3%	27.3%	28.4%	0.3%	3.7%	41.6%	11.2%	33.5%	10.0%
131 Laval (n=257)	19.4%	34.3%	28.8%	14.7%	2.8%	20.6%	31.8%	31.6%	13.3%	2.8%
141 Lanaudière (n=75)	14.9%	21.7%	27.0%	29.6%	6.8%	25.2%	35.5%	27.1%	10.6%	1.7%
151 Laurentides (n=110)	16.7%	49.4%	23.2%	6.2%	4.5%	28.7%	39.8%	11.8%	15.7%	4.1%
161 Montérégie-Centre (n=150)	18.6%	31.9%	29.3%	11.9%	8.3%	14.6%	31.2%	35.9%	10.6%	7.7%
162 Montérégie-Est (n=77)	25.3%	22.4%	18.0%	32.9%	1.4%	20.7%	33.9%	33.9%	8.7%	2.8%
163 Montérégie-Ouest (n=240)	21.0%	37.5%	18.8%	19.0%	3.5%	36.9%	24.7%	19.7%	16.4%	2.3%
Total (n=3,133)	22.7%	32.5%	24.8%	16.3%	3.8%	23.8%	34.9%	27.2%	11.5%	2.6%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q51. How would you describe your general state of health at this time, compared to other people of your age? Is it...

General State of Health

			En	glish Speake	ers			Fre	nch Speak	ers	
	Variable	excellent	very good	good	average	bad	excellent	very good	good	average	bad
	Male	22.7%	33.3%	25.0%	15.4%	3.5%	21.7%	34.3%	28.6%	12.9%	2.5%
gender	Female	22.6%	31.7%	24.5%	17.2%	4.0%	25.8%	35.5%	25.8%	10.2%	2.7%
	Total	22.7%	32.5%	24.8%	16.3%	3.8%	23.8%	34.9%	27.2%	11.5%	2.6%
	18-24 years	34.6%	24.0%	20.3%	17.9%	3.2%	30.7%	32.7%	29.4%	3.6%	3.6%
	25-44 years	24.4%	30.9%	25.9%	16.3%	2.5%	23.1%	37.5%	27.8%	10.3%	1.3%
age	45-64 years	18.9%	34.5%	25.7%	15.8%	5.1%	22.4%	34.5%	25.3%	15.7%	2.1%
	65 years and over	19.0%	36.1%	23.6%	16.9%	4.4%	23.0%	33.9%	27.0%	12.5%	3.6%
	Total	22.8%	32.2%	24.7%	16.4%	3.8%	23.8%	35.1%	27.2%	11.4%	2.6%
	less than \$30k	8.9%	16.1%	34.1%	31.6%	9.3%	12.7%	30.0%	24.7%	24.4%	8.2%
h a coa a h a l al	\$30-70k	20.4%	26.1%	27.9%	20.6%	5.1%	20.2%	32.0%	32.9%	13.3%	1.6%
household income	\$70-100k	34.4%	33.5%	20.5%	10.3%	1.2%	24.9%	42.1%	22.8%	7.9%	2.4%
meonie	\$100k and over	29.9%	38.5%	22.1%	6.6%	2.9%	31.5%	34.8%	24.5%	7.2%	2.1%
	Total	24.6%	30.2%	25.4%	15.5%	4.2%	23.5%	34.6%	26.9%	12.0%	2.9%
knowledge of	bilingual	22.3%	34.6%	24.5%	15.2%	3.4%					
English and	unilingual English	24.1%	24.0%	25.8%	20.8%	5.3%					
French	Total	22.7%	32.5%	24.8%	16.3%	3.8%					

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q51. How would you describe your general state of health at this time, compared to other people of your age? Is it...

21 Satisfaction with English Language Services

21.1.1 Satisfaction with English-language Daycare Services

Satisfaction with English-language Daycare Services

Region	1 = not at all satisfied	2	3	4	5 = totally satisfied	Did not use
031 Capitale-Nationale (n=202)	33.6%	5.7%	17.8%	16.7%	26.3%	49.4%
051 Estrie – CHU de Sherbrooke (n=106)	5.6%	24.5%	28.9%	30.7%	10.4%	48.0%
061 Ouest-de-l'Île-de-Montréal (n=484)	6.9%	4.2%	30.7%	23.8%	34.4%	57.0%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	6.1%	3.3%	15.8%	25.6%	49.2%	57.1%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	13.1%	9.5%	11.0%	17.0%	49.4%	40.0%
064 Nord-de-l'Île-de-Montréal (n=251)	6.3%	5.0%	21.3%	27.9%	39.5%	53.7%
065 Est-de-l'Île-de-Montréal (n=215)	10.0%	10.2%	17.6%	20.3%	42.0%	52.2%
071 Outaouais (n=200)	5.7%	11.5%	24.3%	22.0%	36.5%	60.3%
111 Gaspésie (n=75)	15.1%	16.4%	36.7%	10.9%	21.0%	39.9%
131 Laval (n=257)	25.3%	20.5%	14.7%	25.7%	13.7%	43.5%
141 Lanaudière (n=75)	49.2%	10.6%	33.6%	5.0%	1.7%	37.8%
151 Laurentides (n=110)	25.2%	5.2%	7.8%	49.2%	12.6%	35.7%
161 Montérégie-Centre (n=150)	23.0%	16.8%	17.2%	31.5%	11.5%	61.0%
162 Montérégie-Est (n=77)	35.3%		34.5%	16.9%	13.2%	67.4%
163 Montérégie-Ouest (n=240)	11.0%	8.6%	12.4%	25.2%	42.8%	52.1%
Total (n=3,133)	12.8%	8.9%	19.4%	24.9%	33.9%	52.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
Q52A. On a scale from 1 to 5, where 1 means not satisfied at all and 5 means totally satisfied, how satisfied are you with the

following services offered in English in your region... a) daycare services?

Among English speakers, 12.8% were not at all satisfied with local English-language daycare services.

We observe that English-speakers in the regions of RTS de Lanaudière (49.2%), RTS de la Montérégie-Est (35.3%) and RTS de la Capitale-Nationale (33.6%) were the most likely to report they were not at all satisfied with local English-language daycare services.

English speakers in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (5.6%), RTS de l'Outaouais (5.7%) and RTS du Centre-Ouest-de-l'Île-de-Montréal (6.1%) were the least likely to report they were not at all satisfied with local Englishlanguage daycare services.

Satisfaction with English-language Daycare Services

	Variable	1 = not at all satisfied	2	3	4	5 = totally satisfied	Did not use
	Male	10.0%	8.8%	23.6%	26.9%	30.7%	50.7%
gender	Female	16.0%	9.0%	14.9%	22.8%	37.3%	54.7%
	Total	12.8%	8.9%	19.4%	24.9%	33.9%	52.7%
	18-24 years	-	-	21.7%	41.7%	36.6%	49.5%
	25-44 years	16.4%	10.0%	16.7%	21.3%	35.7%	38.0%
age	45-64 years	12.3%	11.9%	22.8%	22.6%	30.4%	56.8%
	65 years and over	12.5%	5.2%	20.1%	28.6%	33.6%	76.1%
•	Total	12.5%	8.7%	19.5%	25.2%	34.1%	52.5%
	less than \$30k	11.5%	6.1%	12.3%	19.9%	50.3%	61.0%
	\$30-70k	12.8%	10.7%	17.8%	27.5%	31.1%	43.3%
household income	\$70-100k	5.6%	12.5%	27.9%	22.7%	31.3%	44.8%
mome	\$100k and over	14.5%	4.3%	19.0%	24.1%	38.1%	45.1%
•	Total	11.9%	8.2%	19.6%	24.5%	35.9%	46.9%
knowledge of tenglish and	bilingual	13.3%	9.4%	20.0%	26.3%	31.0%	51.2%
	unilingual English	10.7%	6.8%	16.7%	18.5%	47.3%	58.5%
	Total	12.9%	8.9%	19.4%	24.9%	33.8%	52.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q52A. On a scale from 1 to 5, where 1 means not satisfied at all and 5 means totally satisfied, how satisfied are you with the following services offered in English in your region... a) daycare services? English-speaking females were more likely to report they were not at all satisfied with local English-language daycare services (16.0%) than were their male counterparts (10.0%).

Across age groups, English speakers who were aged 25-44 years were the most likely to report they were not at all satisfied with local English-language daycare services (16.4%) while those aged 18-24 years were the least likely (0.0%).

With respect to income, those who earned \$100k and over were the most likely to report they were not at all satisfied with local English-language daycare services (14.5%) while those earning \$70-100k were the least likely (5.6%).

English-speakers who were bilingual were more likely to report they were not at all satisfied with local English-language daycare services (13.3%) than their unilingual English counterparts (10.7%).

21.1.2 Satisfaction with English-language Prenatal and Parenting Programs

Satisfaction with English-language Prenatal and Parenting Programs

Region	1 = not at all satisfied	2	3	4	5 = totally satisfied	Did not use
031 Capitale-Nationale (n=202)	26.2%	21.0%	36.4%	11.7%	4.7%	51.3%
051 Estrie – CHU de Sherbrooke (n=106)	3.1%	27.9%	18.7%	2.8%	47.5%	52.2%
061 Ouest-de-l'Île-de-Montréal (n=484)	3.8%	4.5%	32.3%	26.6%	32.8%	59.9%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	5.1%	9.1%	26.6%	33.9%	25.3%	67.7%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	15.8%	16.7%	16.7%	23.0%	27.8%	42.9%
064 Nord-de-l'Île-de-Montréal (n=251)	10.3%	9.3%	27.2%	35.0%	18.3%	65.3%
065 Est-de-l'Île-de-Montréal (n=215)	18.7%	22.6%	12.4%	19.9%	26.4%	66.1%
071 Outaouais (n=200)	7.9%	27.9%	32.1%	8.8%	23.2%	56.8%
111 Gaspésie (n=75)	29.3%	6.6%	35.7%	8.9%	19.5%	49.8%
131 Laval (n=257)	37.3%	16.2%	26.6%	10.4%	9.4%	53.8%
141 Lanaudière (n=75)	25.9%	28.2%	38.4%	7.5%	-	57.1%
151 Laurentides (n=110)	29.7%	5.8%	46.8%	13.6%	4.1%	41.0%
161 Montérégie-Centre (n=150)	34.8%	2.4%	24.0%	35.6%	3.2%	74.4%
162 Montérégie-Est (n=77)	3.5%	51.6%	28.3%	4.0%	12.6%	68.5%
163 Montérégie-Ouest (n=240)	28.7%	10.5%	13.2%	12.8%	34.9%	55.9%
Total (n=3,133)	15.5%	13.4%	26.3%	21.0%	23.8%	59.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
Q52B. On a scale from 1 to 5, where 1 means not satisfied at all and 5 means totally satisfied, how satisfied are you with the following services offered in English in your region... b) prenatal and parenting programs?

Among English speakers, 15.5% were not at all satisfied with local English-language prenatal and parenting programs.

We observe that English-speakers in the regions of RTS de Laval (37.3%), RTS de la Montérégie-Centre (34.8%) and RTS des Laurentides (29.7%) were the most likely to report they were not at all satisfied with local English-language prenatal and parenting programs.

English speakers in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (3.1%), RTS de la Montérégie-Est (3.5%) and RTS de l'Ouest-de-l'Île-de-Montréal (3.8%) were the least likely to report they were not at all satisfied with local English-language prenatal and parenting programs.

Satisfaction with English-language Prenatal and Parenting Programs

	Variable	1 = not at all satisfied	2	3	4	5 = totally satisfied	Did not use
	Male	12.4%	15.5%	30.8%	17.9%	23.5%	60.9%
gender	Female	18.4%	11.5%	22.1%	24.0%	24.1%	58.2%
	Total	15.5%	13.4%	26.3%	21.0%	23.8%	59.5%
	18-24 years	3.0%	5.4%	20.6%	37.1%	33.9%	67.0%
	25-44 years	17.3%	12.9%	28.7%	16.8%	24.3%	41.6%
age	45-64 years	17.0%	18.1%	24.2%	23.6%	17.2%	64.5%
	65 years and over	12.6%	10.9%	27.4%	19.9%	29.2%	83.0%
	Total	15.4%	13.4%	26.5%	21.0%	23.7%	59.4%
	less than \$30k	15.1%	9.8%	22.0%	10.2%	42.9%	68.8%
[\$30-70k	16.8%	16.5%	30.1%	22.8%	13.8%	50.0%
household income	\$70-100k	4.7%	15.7%	25.4%	30.2%	24.1%	52.8%
Income	\$100k and over	18.9%	11.8%	25.8%	18.9%	24.6%	53.2%
	Total	15.0%	13.9%	26.7%	21.5%	22.9%	54.6%
knowledge of	bilingual	15.9%	12.8%	27.5%	22.4%	21.3%	58.7%
English and	unilingual English	13.5%	16.1%	21.1%	14.9%	34.4%	62.9%
French	Total	15.5%	13.4%	26.3%	21.0%	23.8%	59.6%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
Q52B. On a scale from 1 to 5, where 1 means not satisfied at all and 5 means totally satisfied, how satisfied are you with the following services offered in English in your region... b) prenatal and parenting programs?

English-speaking females were more likely to report they were not at all satisfied with local English-language prenatal and parenting programs (18.4%) than were their male counterparts (12.4%).

Across age groups, English speakers who were aged 25-44 years were the most likely to report they were not at all satisfied with local English-language prenatal and parenting programs (17.3%) while those aged 18-24 years were the least likely (3.0%).

With respect to income, those who earned \$100k and over were the most likely to report they were not at all satisfied with local Englishlanguage prenatal and parenting programs (18.9%) while those earning \$70-100k were the least likely (4.7%).

English-speakers who were bilingual were more likely to report they were not at all satisfied with local English-language prenatal and parenting programs (15.9%) than their unilingual English counterparts (13.5%).

21.1.3 Satisfaction with English-language Activities for Youth

Satisfaction with English-language Activities for Youth

Region	1 = not at all satisfied	2	3	4	5 = totally satisfied	Did not use
031 Capitale-Nationale (n=202)	14.3%	10.7%	21.7%	36.5%	16.9%	42.2%
051 Estrie – CHU de Sherbrooke (n=106)	12.2%	10.6%	46.3%	22.6%	8.3%	50.0%
061 Ouest-de-l'Île-de-Montréal (n=484)	4.8%	7.1%	24.9%	23.8%	39.4%	34.6%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	5.8%	7.8%	29.1%	27.4%	29.9%	48.7%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	10.4%	16.1%	19.9%	23.8%	29.8%	37.6%
064 Nord-de-l'Île-de-Montréal (n=251)	8.2%	6.5%	22.9%	26.2%	36.1%	39.1%
065 Est-de-l'Île-de-Montréal (n=215)	10.8%	10.3%	22.7%	25.7%	30.5%	46.2%
071 Outaouais (n=200)	24.6%	15.8%	34.6%	11.6%	13.5%	36.5%
111 Gaspésie (n=75)	32.5%	17.1%	28.4%	8.3%	13.8%	24.1%
131 Laval (n=257)	26.1%	12.8%	24.3%	21.6%	15.2%	31.9%
141 Lanaudière (n=75)	12.7%	45.0%	33.3%	3.8%	5.1%	28.6%
151 Laurentides (n=110)	26.6%	5.0%	28.1%	29.6%	10.6%	29.1%
161 Montérégie-Centre (n=150)	16.3%	10.0%	23.7%	32.8%	17.2%	49.8%
162 Montérégie-Est (n=77)	13.7%	17.9%	33.7%	12.2%	22.5%	41.6%
163 Montérégie-Ouest (n=240)	15.3%	11.1%	28.7%	22.9%	22.0%	36.0%
Total (n=3,133)	12.6%	10.6%	26.8%	23.6%	26.4%	39.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q52C. On a scale from 1 to 5, where 1 means not satisfied at all and 5 means totally satisfied, how satisfied are you with the following services offered in English in your region... c) Activities for youth (after school programs, recreation, social groups

Among English speakers, 12.6% were not at all satisfied with local English-language activities for youth.

We observe that English-speakers in the regions of RTS de la Gaspésie (32.5%), RTS des Laurentides (26.6%) and RTS de Laval (26.1%) were the most likely to report they were not at all satisfied with local English-language activities for youth.

English speakers in the regions of RTS de l'Ouest-de-l'Île-de-Montréal (4.8%), RTS du Centre-Ouest-de-l'Île-de-Montréal (5.8%) and RTS du Nord-de-l'Île-de-Montréal (8.2%) were the least likely to report they were not at all satisfied with local English-language activities for youth.

Satisfaction with English-language Activities for Youth

	Variable	1 = not at all satisfied	2	3	4	5 = totally satisfied	Did not use
	Male	9.5%	8.3%	28.5%	27.4%	26.4%	37.6%
gender	Female	15.9%	13.1%	24.9%	19.7%	26.3%	41.8%
	Total	12.6%	10.6%	26.8%	23.6%	26.4%	39.7%
	18-24 years	4.7%	2.8%	25.3%	31.8%	35.3%	28.7%
	25-44 years	15.2%	11.0%	29.7%	21.3%	22.9%	30.6%
age	45-64 years	14.0%	13.8%	24.7%	23.0%	24.6%	39.9%
	65 years and over	8.6%	10.3%	22.9%	24.8%	33.4%	65.0%
	Total	12.5%	10.6%	26.7%	23.8%	26.4%	39.5%
	less than \$30k	14.5%	7.3%	23.9%	16.0%	38.2%	57.0%
	\$30-70k	11.9%	18.8%	22.5%	21.8%	24.9%	33.7%
household income	\$70-100k	12.3%	7.3%	31.1%	30.5%	18.8%	31.8%
Income	\$100k and over	10.9%	7.3%	32.0%	18.1%	31.8%	29.2%
	Total	11.9%	10.9%	28.0%	21.4%	27.8%	35.3%
knowledge of	bilingual	11.6%	10.5%	27.1%	25.6%	25.2%	37.8%
English and	unilingual English	17.5%	11.0%	25.0%	14.4%	32.1%	47.3%
French	Total	12.6%	10.6%	26.8%	23.6%	26.4%	39.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q52C. On a scale from 1 to 5, where 1 means not satisfied at all and 5 means totally satisfied, how satisfied are you with the following services offered in English in your region... c) Activities for youth (after school programs, recreation, social groups

English-speaking females were more likely to report they were not at all satisfied with local English-language activities for youth (15.9%) than were their male counterparts (9.5%).

Across age groups, English speakers who were aged 25-44 years were the most likely to report they were not at all satisfied with local English-language activities for youth (15.2%) while those aged 18-24 years were the least likely (4.7%).

With respect to income, those who earned less than \$30k were the most likely to report they were not at all satisfied with local English-language activities for youth (14.5%) while those earning \$100k and over were the least likely (10.9%).

English-speakers who were unilingual English were more likely to report they were not at all satisfied with local English-language activities for youth (17.5%) than their bilingual counterparts (11.6%).

21.1.4 Satisfaction with English-language Seniors Wellness Services and Recreational Activities

Satisfaction with English-language Seniors Wellness Services and Recreational Activities

Region	1 = not at all satisfied	2	3	4	5 = totally satisfied	Did not use
031 Capitale-Nationale (n=202)	20.6%	3.1%	26.7%	40.6%	9.0%	47.3%
051 Estrie – CHU de Sherbrooke (n=106)	4.8%	29.2%	34.4%	20.6%	11.0%	25.4%
061 Ouest-de-l'Île-de-Montréal (n=484)	3.3%	6.2%	27.0%	33.9%	29.5%	36.0%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	5.6%	12.2%	23.3%	31.5%	27.4%	56.9%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	15.1%	21.5%	17.3%	13.4%	32.7%	42.0%
064 Nord-de-l'Île-de-Montréal (n=251)	14.1%	20.5%	14.5%	40.8%	10.0%	46.3%
065 Est-de-l'Île-de-Montréal (n=215)	18.9%	11.8%	29.6%	15.4%	24.2%	45.8%
071 Outaouais (n=200)	9.6%	30.3%	25.9%	7.7%	26.4%	43.0%
111 Gaspésie (n=75)	14.2%	8.9%	19.2%	24.9%	32.8%	15.2%
131 Laval (n=257)	38.2%	17.3%	17.5%	13.2%	13.8%	39.2%
141 Lanaudière (n=75)	16.7%	12.5%	45.2%	22.9%	2.7%	47.3%
151 Laurentides (n=110)	9.6%	21.5%	14.7%	25.6%	28.6%	29.1%
161 Montérégie-Centre (n=150)	19.7%	11.4%	45.0%	9.9%	13.9%	57.4%
162 Montérégie-Est (n=77)	6.7%	18.5%	38.9%	15.3%	20.6%	54.5%
163 Montérégie-Ouest (n=240)	18.6%	10.7%	32.3%	23.5%	15.0%	49.8%
Total (n=3,133)	13.0%	14.8%	25.2%	24.4%	22.6%	44.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q52D. On a scale from 1 to 5, where 1 means not satisfied at all and 5 means totally satisfied, how satisfied are you with the following services offered in English in your region... d) seniors wellness and recreational activities?

Among English speakers, 13.0% were not at all satisfied with local Englishlanguage seniors wellness services and recreational activities.

We observe that English-speakers in the regions of RTS de Laval (38.2%), RTS de la Capitale-Nationale (20.6%) and RTS de la Montérégie-Centre (19.7%) were the most likely to report they were not at all satisfied with local English-language seniors wellness services and recreational activities.

English speakers in the regions of RTS de l'Ouest-de-l'Île-de-Montréal (3.3%), RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (4.8%) and RTS du Centre-Ouest-de-l'Île-de-Montréal (5.6%) were the least likely to report they were not at all satisfied with local English-language seniors wellness services and recreational activities.

Satisfaction with English-language Seniors Wellness Services and Recreational Activities

	Variable	1 = not at all satisfied	2	3	4	5 = totally satisfied	Did not use
	Male	10.2%	14.6%	23.3%	29.3%	22.5%	44.5%
gender	Female	15.8%	15.1%	27.1%	19.5%	22.6%	44.6%
	Total	13.0%	14.8%	25.2%	24.4%	22.6%	44.5%
	18-24 years	2.9%	12.0%	23.2%	48.6%	13.4%	56.7%
	25-44 years	14.1%	16.3%	20.7%	23.7%	25.2%	43.0%
age	45-64 years	16.0%	17.1%	30.6%	16.9%	19.3%	43.5%
	65 years and over	9.5%	10.0%	25.1%	26.6%	28.8%	40.4%
	Total	12.7%	14.9%	25.2%	24.6%	22.7%	44.5%
	less than \$30k	12.2%	7.4%	25.9%	21.8%	32.7%	43.3%
ĺ	\$30-70k	12.4%	23.0%	23.5%	19.9%	21.3%	36.8%
household	\$70-100k	12.4%	10.1%	31.7%	27.0%	18.8%	35.6%
Income	\$100k and over	11.1%	14.3%	28.8%	22.0%	23.8%	47.3%
	Total	12.0%	15.3%	27.2%	22.3%	23.3%	41.2%
knowledge of	bilingual	12.2%	14.8%	26.2%	25.7%	21.1%	44.2%
English and	unilingual English	16.1%	14.9%	21.0%	19.4%	28.6%	45.9%
French	Total	13.0%	14.8%	25.2%	24.4%	22.6%	44.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
Q52D. On a scale from 1 to 5, where 1 means not satisfied at all and 5 means totally satisfied, how satisfied are you with the following services offered in English in your region... d) seniors wellness and recreational activities?

English-speaking females were more likely to report they were not at all satisfied with local English-language seniors wellness services and recreational activities (15.8%) than were their male counterparts (10.2%).

Across age groups, English speakers who were aged 45-64 years were the most likely to report they were not at all satisfied with local Englishlanguage seniors wellness services and recreational activities (16.0%) while those aged 18-24 years were the least likely (2.9%).

With respect to income, those who earned \$70-100k were the most likely to report they were not at all satisfied with local English-language seniors wellness services and recreational activities (12.4%) while those earning \$100k and over were the least likely (11.1%).

English-speakers who were unilingual English were more likely to report they were not at all satisfied with local English-language seniors wellness services and recreational activities (16.1%) than their bilingual counterparts (12.2%).

21.1.5 Satisfaction with English-language Prenatal Services

Satisfaction with English-language Prenatal Services

Region	1 = not at all satisfied	2	3	4	5 = totally satisfied	Did not use
031 Capitale-Nationale (n=202)	25.2%	3.4%	57.1%	7.9%	6.4%	56.0%
051 Estrie – CHU de Sherbrooke (n=106)	7.3%	30.4%	29.3%	20.9%	12.1%	78.2%
061 Ouest-de-l'Île-de-Montréal (n=484)	2.4%	6.4%	31.3%	29.3%	30.5%	58.0%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	3.8%	6.9%	24.9%	37.2%	27.3%	69.3%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	13.9%	18.0%	11.9%	20.2%	36.1%	44.7%
064 Nord-de-l'Île-de-Montréal (n=251)	9.8%	3.8%	38.5%	24.3%	23.6%	65.8%
065 Est-de-l'Île-de-Montréal (n=215)	20.8%	18.3%	17.2%	16.0%	27.6%	66.2%
071 Outaouais (n=200)	21.0%	15.1%	24.1%	10.7%	29.1%	55.5%
111 Gaspésie (n=75)	29.5%	11.5%	26.0%	3.9%	29.1%	44.5%
131 Laval (n=257)	37.6%	15.6%	22.6%	14.7%	9.6%	53.8%
141 Lanaudière (n=75)	33.4%	16.6%	41.1%	7.9%	1.0%	62.1%
151 Laurentides (n=110)	12.1%	3.1%	64.2%	14.5%	6.1%	41.0%
161 Montérégie-Centre (n=150)	30.3%	6.1%	36.8%	21.4%	5.4%	71.1%
162 Montérégie-Est (n=77)	26.6%	7.2%	35.2%	19.7%	11.4%	68.5%
163 Montérégie-Ouest (n=240)	25.0%	9.4%	15.4%	14.5%	35.8%	55.8%
Total (n=3,133)	15.3%	10.4%	27.7%	21.9%	24.6%	60.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
Q52E. On a scale from 1 to 5, where 1 means not satisfied at all and 5 means totally satisfied, how satisfied are you with the following services offered in English in your region... e) prenatal services?

Among English speakers, 15.3% were not at all satisfied with local English-language prenatal services.

We observe that English-speakers in the regions of RTS de Laval (37.6%), RTS de Lanaudière (33.4%) and RTS de la Montérégie-Centre (30.3%) were the most likely to report they were not at all satisfied with local English-language prenatal services.

English speakers in the regions of RTS de l'Ouest-de-l'Île-de-Montréal (2.4%), RTS du Centre-Ouest-de-l'Île-de-Montréal (3.8%) and RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (7.3%) were the least likely to report they were not at all satisfied with local English-language prenatal services.

Satisfaction with English-language Prenatal Services

	Variable	1 = not at all satisfied	2	3	4	5 = totally satisfied	Did not use
	Male	10.3%	11.2%	33.9%	22.6%	22.1%	63.3%
gender	Female	19.8%	9.8%	22.3%	21.2%	26.9%	57.5%
	Total	15.3%	10.4%	27.7%	21.9%	24.6%	60.4%
	18-24 years	4.9%	3.8%	17.8%	47.8%	25.7%	68.5%
	25-44 years	16.6%	9.6%	32.3%	17.6%	23.9%	42.1%
age	45-64 years	15.9%	13.3%	26.7%	20.2%	23.9%	65.3%
	65 years and over	16.8%	12.8%	17.3%	22.5%	30.6%	82.6%
	Total	15.2%	10.3%	28.0%	21.9%	24.6%	60.3%
	less than \$30k	16.1%	4.8%	14.0%	18.2%	46.9%	67.9%
ĺ	\$30-70k	15.0%	11.8%	33.6%	24.4%	15.2%	50.5%
household income	\$70-100k	6.1%	6.6%	33.1%	25.3%	29.0%	49.7%
meome	\$100k and over	24.0%	7.8%	22.6%	16.6%	29.0%	56.9%
	Total	16.4%	8.6%	27.5%	21.2%	26.3%	55.3%
knowledge of	bilingual	16.2%	9.7%	29.9%	21.5%	22.7%	59.8%
English and	unilingual English	11.5%	13.7%	18.5%	23.6%	32.7%	63.1%
Fre n ch	Total	15.4%	10.5%	27.8%	21.9%	24.6%	60.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
Q52E. On a scale from 1 to 5, where 1 means not satisfied at all and 5 means totally satisfied, how satisfied are you with the following services offered in English in your region... e) prenatal services?

English-speaking females were more likely to report they were not at all satisfied with local English-language prenatal services (19.8%) than were their male counterparts (10.3%).

Across age groups, English speakers who were aged 65 years and over were the most likely to report they were not at all satisfied with local English-language prenatal services (16.8%) while those aged 18-24 years were the least likely (4.9%).

With respect to income, those who earned \$100k and over were the most likely to report they were not at all satisfied with local English-language prenatal services (24.0%) while those earning \$70-100k were the least likely (6.1%).

English-speakers who were bilingual were more likely to report they were not at all satisfied with local English-language prenatal services (16.2%) than their unilingual English counterparts (11.5%)

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22 Volunteering

22.1.1 Member of a Social Club or Organization

Member of a Social Club or Organization **English Speakers French Speakers** Region yes no yes no 88.0% 031 Capitale-Nationale (n=202) 26.7% 73.3% 12.0% 051 Estrie - CHU de Sherbrooke (n=106) 24.3% 75.7% 17.8% 82.2% 061 Ouest-de-l'Île-de-Montréal (n=484) 24.9% 75.1% 8.9% 91.1% 062 Centre-Ouest-de-l'Île-de-Montréal (n=465) 32.0% 68.0% 7.9% 92.1% 063 Centre-Sud-de-l'Île-de-Montréal (n=226) 15.5% 84.5% 9.9% 90.1% 064 Nord-de-l'Île-de-Montréal (n=251) 10.6% 89.4% 22.8% 77.2% 065 Est-de-l'Île-de-Montréal (n=215) 12.5% 87.5% 15.5% 84.5% 071 Outaouais (n=200) 21.5% 78.5% 10.9% 89.1% 111 Gaspésie (n=75) 36.3% 63.7% 16.6% 83.4% 94.8% 131 Laval (n=257) 16.1% 83.9% 5.2% 141 Lanaudière (n=75) 42.3% 57.7% 9.9% 90.1% 61.7% 89.6% 151 Laurentides (n=110) 38.3% 10.4% 161 Montérégie-Centre (n=150) 80.8% 11.9% 88.1% 19.2% 162 Montérégie-Est (n=77) 12.5% 87.5% 18.9% 81.1% 163 Montérégie-Ouest (n=240) 24.0% 76.0% 8.7% 91.3% 22.4% 12.9% Total (n=3,133) 77.6% 87.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q53A. In the past 12 months, were you a member or participant in a social club or organization?

Among English speakers, 22.4% were a member of a social club or organization. This was much higher than the proportion reported for French speakers (12.9%).

We observe that English-speakers in the regions of RTS de Lanaudière (42.3%), RTS des Laurentides (38.3%) and RTS de la Gaspésie (36.3%) were the most likely to be a member of a social club or organization.

English speakers in the regions of RTS du Nordde-l'Île-de-Montréal (10.6%), RTS de la Montérégie-Est (12.5%) and RTS de l'Est-de-l'Îlede-Montréal (12.5%) were the least likely to be a member of a social club or organization.

Member of a Social Club or Organization

Variable		English S	Speakers	French Speakers		
		yes	no	yes	no	
	Male	23.2%	76.8%	11.6%	88.4%	
gender	Female	21.7%	78.3%	14.1%	85.9%	
	Total	22.4%	77.6%	12.9%	87.1%	
	18-24 years	28.0%	72.0%	11.6%	88.4%	
	25-44 years	15.4%	84.6%	9.8%	90.2%	
age	45-64 years	21.9%	78.1%	7.7%	92.3%	
	65 years and over	33.5%	66.5%	17.7%	82.3%	
	Total	22.4%	77.6%	12.8%	87.2%	
	less than \$30k	16.7%	83.3%	16.9%	83.1%	
	\$30-70k	24.1%	75.9%	14.6%	85.4%	
household income	\$70-100k	25.6%	74.4%	8.5%	91.5%	
meome	\$100k and over	22.8%	77.2%	10.7%	89.3%	
	Total	22.8%	77.2%	12.5%	87.5%	
knowledge of English and French	bilingual	22.7%	77.3%			
	unilingual English	21.4%	78.6%			
	Total	22.5%	77.5%			

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q53A. In the past 12 months, were you a member or participant in a social club or organization?

English-speaking males were more likely to be a member of a social club or organization (23.2%) than were their female counterparts (21.7%).

Across age groups, English speakers who were aged 65 years and over were the most likely to be a member of a social club or organization (33.5%) while those aged 25-44 years were the least likely (15.4%).

With respect to income, those who earned \$70-100k were the most likely to be a member of a social club or organization (25.6%) while those earning less than \$30k were the least likely (16.7%).

English-speakers who were bilingual were more likely to be a member of a social club or organization (22.7%) than their unilingual English counterparts (21.4%).

22.1.2 Importance of Social Club or Organization's Language

Importance of Social Club or Organization's Language

Region	extremely important	very important	important	not very important	not at all important
031 Capitale-Nationale (n=65)	8.6%	16.7%	20.7%	23.7%	30.3%
051 Estrie – CHU de Sherbrooke (n=41)	22.0%	28.6%	16.0%	21.8%	11.6%
061 Ouest-de-l'Île-de-Montréal (n=151)	16.1%	35.0%	23.5%	15.7%	9.7%
062 Centre-Ouest-de-l'Île-de-Montréal (n=129)	48.8%	15.9%	12.9%	13.3%	9.1%
063 Centre-Sud-de-l'Île-de-Montréal (n=47)	20.8%	10.6%	13.9%	31.7%	23.0%
064 Nord-de-l'Île-de-Montréal (n=35)	22.0%	31.6%	10.3%	18.6%	17.5%
071 Outaouais (n=51)	20.9%	23.7%	8.9%	17.2%	29.4%
111 Gaspésie (n=32)	15.5%	22.5%	27.6%	15.3%	19.1%
131 Laval (n=41)	31.2%	22.8%	14.4%	24.6%	7.0%
141 Lanaudière (n=30)	8.7%	49.2%	4.8%	29.2%	8.1%
151 Laurentides (n=37)	2.8%	18.1%	45.3%	30.2%	3.6%
161 Montérégie-Centre (n=44)	16.4%	44.0%	9.9%	20.0%	9.8%
163 Montérégie-Ouest (n=75)	11.0%	29.8%	23.5%	17.8%	17.9%
Total (n=830)	24.0%	25.4%	17.6%	18.6%	14.4%
					

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who were a member or participant in a social club or organization in the past 12 months (Q53A):Q53B. How important was the language of the social club or organization in your decision to join. Was it extremely important, very important, important, not important or not important at all?

Among English speakers who were members of a social club or organization, 24.0% felt the language of their social club or organization was extremely important.

We observe that English-speakers who were members of a social club or organization in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (48.8%), RTS de Laval (31.2%) and RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (22.0%) were the most likely to feel the language of their social club or organization was extremely important.

English speakers who were members of a social club or organization in the regions of RTS des Laurentides (2.8%), RTS de la Montérégie-Est (3.4%) and RTS de la Capitale-Nationale (8.6%) were the least likely to feel the language of their social club or organization was extremely important.

Importance of Social Club or Organization's Language

	Variable	extremely important	•	important	not very important	not at all important
	Male (n=308)	18.5%	22.7%	19.1%	21.8%	18.0%
gender	Female (n=522)	29.7%	28.2%	16.1%	15.2%	10.7%
	Total (n=830)	24.0%	25.4%	17.6%	18.6%	14.4%
	25-44 years (n=50)	25.7%	22.6%	19.9%	16.8%	15.1%
2.00	45-64 years (n=300)	16.2%	25.7%	17.8%	22.5%	17.8%
age	65 years and over (n=444)	20.6%	30.7%	20.7%	15.8%	12.2%
	Total (n=812)	23.8%	25.0%	17.8%	18.8%	14.6%
	less than \$30k (n=95)	16.5%	31.0%	17.0%	23.9%	11.5%
h a coa a h a l al	\$30-70k (n=242)	25.5%	27.7%	15.5%	22.4%	8.9%
household income	\$70-100k (n=113)	21.8%	21.0%	17.2%	18.5%	21.5%
111001110	\$100k and over (n=181)	22.7%	17.8%	14.6%	23.6%	21.3%
	Total (n=631)	22.8%	23.2%	15.7%	22.1%	16.1%
knowledge of	bilingual (n=629)	23.6%	20.4%	18.5%	19.9%	17.6%
English and	unilingual English (n=200)	25.4%	46.3%	14.1%	13.0%	1.2%
French	Total (n=829)	24.0%	25.4%	17.6%	18.6%	14.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who were a member or participant in a social club or organization in the past 12 months (Q53A):Q53B. How

important was the language of the social club or organization in your decision to join. Was it extremely important, very important, important, not important or not important at all?

English-speaking females who were members of a social club or organization were more likely to feel the language of their social club or organization was extremely important (29.7%) than were their male counterparts (18.5%).

Across age groups, English speakers who were members of a social club or organization who were aged 45-64 years were the least likely to feel the language of their social club or organization was extremely important (16.2%).

With respect to income, those who were members of a social club or organization who earned \$30-70k were the most likely to feel the language of their social club or organization was extremely important (25.5%) while those earning less than \$30k were the least likely (16.5%).

English-speakers who were members of a social club or organization who were unilingual English were more likely to feel the language of their social club or organization was extremely important (25.4%) than their bilingual counterparts (23.6%).

22.1.3 Participated in Unpaid Volunteer Work Within the Past Year

Participated in Unpaid Volunteer Work Within the Past Year

	English S	peakers	French S	peakers
Region	yes	no	yes	no
031 Capitale-Nationale (n=202)	39.6%	60.4%	26.7%	73.3%
051 Estrie – CHU de Sherbrooke (n=106)	49.4%	50.6%	38.5%	61.5%
061 Ouest-de-l'Île-de-Montréal (n=484)	40.3%	59.7%	32.6%	67.4%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	47.2%	52.8%	48.5%	51.5%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	26.1%	73.9%	26.8%	73.2%
064 Nord-de-l'Île-de-Montréal (n=251)	23.6%	76.4%	27.8%	72.2%
065 Est-de-l'Île-de-Montréal (n=215)	18.1%	81.9%	17.7%	82.3%
071 Outaouais (n=200)	36.4%	63.6%	35.2%	64.8%
111 Gaspésie (n=75)	40.6%	59.4%	29.1%	70.9%
131 Laval (n=257)	34.6%	65.4%	22.2%	77.8%
141 Lanaudière (n=75)	36.5%	63.5%	23.5%	76.5%
151 Laurentides (n=110)	51.3%	48.7%	24.9%	75.1%
161 Montérégie-Centre (n=150)	42.1%	57.9%	33.1%	66.9%
162 Montérégie-Est (n=77)	26.6%	73.4%	30.6%	69.4%
163 Montérégie-Ouest (n=240)	30.5%	69.5%	30.1%	69.9%
Total (n=3,133)	36.4%	63.6%	28.6%	71.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q54A. In the past 12 months, did you do any unpaid volunteer work?

Among English speakers, 36.4% participated in unpaid volunteer work within the past year. This was much higher than the proportion reported for French speakers (28.6%).

We observe that English-speakers in the regions of RTS des Laurentides (51.3%), RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (49.4%) and RTS du Centre-Ouest-de-l'Île-de-Montréal (47.2%) were the most likely to have participated in unpaid volunteer work within the past year.

English speakers in the regions of RTS de l'Est-de-l'Île-de-Montréal (18.1%), RTS du Nord-de-l'Île-de-Montréal (23.6%) and RTS du Centre-Sud-de-l'Île-de-Montréal (26.1%) were the least likely to have participated in unpaid volunteer work within the past year.

Participated in Unpaid Volunteer Work Within the Past Year

			Speakers	French Speakers		
Variable		yes	no	yes	no	
	Male	36.9%	63.1%	26.3%	73.7%	
gender	Female	35.9%	64.1%	30.7%	69.3%	
	Total	36.4%	63.6%	28.6%	71.4%	
	18-24 years	45.8%	54.2%	28.8%	71.2%	
	25-44 years	35.6%	64.4%	27.0%	73.0%	
age	45-64 years	34.4%	65.6%	27.5%	72.5%	
	65 years and over	35.5%	64.5%	30.2%	69.8%	
	Total	36.4%	63.6%	28.6%	71.4%	
	less than \$30k	22.2%	77.8%	23.6%	76.4%	
ĺ	\$30-70k	31.7%	68.3%	27.6%	72.4%	
household income	\$70-100k	42.5%	57.5%	30.2%	69.8%	
meome	\$100k and over	40.0%	60.0%	30.6%	69.4%	
	Total	35.2%	64.8%	28.5%	71.5%	
knowledge of	bilingual	38.7%	61.3%			
English and	unilingual English	27.1%	72.9%			
French	Total	36.4%	63.6%			

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q54A. In the past 12 months, did you do any unpaid volunteer work?

English-speaking males were more likely to have participated in unpaid volunteer work within the past year (36.9%) than were their female counterparts (35.9%).

Across age groups, English speakers who were aged 18-24 years were the most likely to have participated in unpaid volunteer work within the past year (45.8%) while those aged 45-64 years were the least likely (34.4%).

With respect to income, those who earned \$70-100k were the most likely to have participated in unpaid volunteer work within the past year (42.5%) while those earning less than \$30k were the least likely (22.2%).

English-speakers who were bilingual were more likely to have participated in unpaid volunteer work within the past year (38.7%) than their unilingual English counterparts (27.1%).

22.1.4 Language Used in Unpaid Volunteer Work

Language Used in Unpaid Volunteer Work

Region	English	French	English and French equally	another language
031 Capitale-Nationale (n=93)	34.5%	54.3%	7.9%	3.3%
051 Estrie – CHU de Sherbrooke (n=51)	43.1%	41.2%	15.6%	-
061 Ouest-de-l'Île-de-Montréal (n=191)	72.6%	8.8%	16.5%	2.1%
062 Centre-Ouest-de-l'Île-de-Montréal (n=187)	83.6%	5.0%	5.9%	5.6%
063 Centre-Sud-de-l'Île-de-Montréal (n=71)	48.7%	30.0%	13.7%	7.7%
064 Nord-de-l'Île-de-Montréal (n=52)	71.3%	9.4%	12.8%	6.5%
065 Est-de-l'Île-de-Montréal (n=45)	50.5%	12.9%	32.1%	4.6%
071 Outaouais (n=78)	66.8%	6.0%	27.2%	-
111 Gaspésie (n=31)	62.6%	12.3%	25.2%	-
131 Laval (n=65)	43.3%	10.4%	43.2%	3.1%
151 Laurentides (n=44)	48.6%	43.1%	8.3%	-
161 Montérégie-Centre (n=61)	71.1%	15.3%	13.0%	0.6%
162 Montérégie-Est (n=32)	56.8%	5.9%	37.3%	-
163 Montérégie-Ouest (n=91)	59.7%	13.8%	26.5%	-
Total (n=1,121)	65.0%	14.1%	17.9%	3.0%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who volunteered in the past 12 months (Q54A):Q54B. What was the main language you used in your volunteering activity?

Among English speakers who had volunteered within the previous year, 65.0% used English primarily in their volunteering activity.

We observe that English-speakers who had volunteered within the previous year in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (83.6%), RTS de l'Ouest-de-l'Île-de-Montréal (72.6%) and RTS du Nord-de-l'Île-de-Montréal (71.3%) were the most likely to have used English in their volunteering activity.

English speakers who had volunteered within the previous year in the regions of RTS de Lanaudière (26.6%), RTS de la Capitale-Nationale (34.5%) and RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (43.1%) were the least likely to have used English in their volunteering activity.

Language Used in Unpaid Volunteer Work

	Variable	English	French	English and French equally	another language
	Male (n=400)	62.3%	16.8%	18.5%	2.5%
gender	Female (n=721)	67.9%	11.3%	17.4%	3.5%
	Total (n=1,121)	65.0%	14.1%	17.9%	3.0%
	25-44 years (n=119)	57.2%	22.8%	15.5%	4.4%
2.50	45-64 years (n=484)	61.4%	13.1%	22.0%	3.5%
age	65 years and over (n=466)	71.7%	6.6%	19.5%	2.2%
	Total (n=1,096)	64.9%	14.2%	17.9%	3.0%
	less than \$30k (n=117)	74.7%	9.8%	13.7%	1.9%
ĺ	\$30-70k (n=284)	60.0%	10.0%	22.0%	7.9%
household income	\$70-100k (n=166)	72.0%	12.7%	12.0%	3.3%
meome	\$100k and over (n=282)	55.2%	19.1%	24.3%	1.5%
	Total (n=849)	62.2%	14.2%	19.8%	3.8%
knowledge of	bilingual (n=897)	61.3%	15.9%	19.9%	2.9%
English and	unilingual English (n=223)	87.3%	2.9%	6.3%	3.5%
French	Total (n=1,120)	65.0%	14.1%	17.9%	3.0%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who volunteered in the past 12 months (Q54A):Q54B. What was the main language you used in your volunteering activity?

English-speaking females who had volunteered within the previous year were more likely to have used English in their volunteering activity (67.9%) than were their male counterparts (62.3%).

Across age groups, English speakers who had volunteered within the previous year who were aged 65 years and over were the most likely to have used English in their volunteering activity (71.7%) while those aged 25-44 years were the least likely (57.2%).

With respect to income, those who had volunteered within the previous year who earned less than \$30k were the most likely to have used English in their volunteering activity (74.7%) while those earning \$100k and over were the least likely (55.2%).

English-speakers who had volunteered within the previous year who were unilingual English were more likely to have used English in their volunteering activity (87.3%) than their bilingual counterparts (61.3%).

22.1.5 Average Number of Hours Per Month Spent Volunteering

Average Number of Hours Per Month Spent Volunteering

	English Speakers				French Speakers			
Region	over 30 hours per month	between 15 hours and 30 hours per month	between 5 and 15 hours per month	between 1 and 4 hours per month	over 30 hours per month	between 15 hours and 30 hours per month	between 5 and 15 hours per month	between 1 and 4 hours per month
031 Capitale-Nationale (n=87)	8.7%	13.9%	26.3%	51.1%	4.6%	39.1%	25.8%	30.5%
051 Estrie – CHU de Sherbrooke (n=49)	5.7%	7.9%	31.0%	55.4%	20.7%	43.5%	25.4%	10.4%
061 Ouest-de-l'Île-de-Montréal (n=181)	3.1%	26.5%	26.6%	43.7%	16.4%	6.6%	18.0%	59.1%
062 Centre-Ouest-de-l'Île-de-Montréal (n=171)	8.7%	18.7%	21.5%	51.1%	-	19.3%	18.3%	62.4%
063 Centre-Sud-de-l'Île-de-Montréal (n=66)	10.5%	6.9%	43.1%	39.5%	-	11.0%	42.7%	46.3%
064 Nord-de-l'Île-de-Montréal (n=48)	4.2%	23.5%	51.8%	20.5%	22.3%	18.0%	16.1%	43.6%
065 Est-de-l'Île-de-Montréal (n=43)	21.2%	18.0%	26.7%	34.1%	17.3%	-	58.3%	24.4%
071 Outaouais (n=74)	6.5%	25.3%	28.5%	39.7%	29.7%	4.1%	42.2%	24.0%
111 Gaspésie (n=30)	25.3%	25.0%	41.1%	8.6%	1	-	-	-
131 Laval (n=63)	1.0%	18.6%	33.4%	47.0%	8.0%	31.5%	23.6%	36.8%
151 Laurentides (n=44)	5.9%	47.4%	14.5%	32.2%	4.7%	25.9%	37.4%	32.1%
161 Montérégie-Centre (n=61)	11.4%	7.1%	34.4%	47.1%	4.6%	-	26.8%	68.6%
162 Montérégie-Est (n=30)	3.2%	12.8%	58.1%	25.9%	18.2%	18.5%	21.8%	41.4%
163 Montérégie-Ouest (n=89)	15.9%	12.0%	48.8%	23.3%	-	9.0%	23.4%	67.6%
Total (n=1,065)	7.4%	20.5%	30.5%	41.6%	12.5%	20.1%	29.9%	37.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who volunteered in the past 12 months (Q54A):Q54C. On average, about how many hours per month do you volunteer?

Average Number of Hours Per Month Spent Volunteering

		English Speakers				French Speakers			
Variable		over 30 hours per month	between 15 hours and 30 hours per month	between 5 and 15 hours per month	between 1 and 4 hours per month	over 30 hours per month	between 15 hours and 30 hours per month	between 5 and 15 hours per month	between 1 and 4 hours per month
	Male (n=386)	7.1%	19.4%	26.5%	47.0%	19.7%	21.8%	27.7%	30.8%
gender	Female (n=679)	7.6%	21.7%	34.7%	35.9%	6.3%	18.7%	31.7%	43.3%
	Total (n=1,065)	7.4%	20.5%	30.5%	41.6%	12.5%	20.1%	29.9%	37.5%
	25-44 years (n=116)	5.5%	22.7%	21.5%	50.3%	12.9%	11.9%	22.7%	52.6%
2.00	45-64 years (n=467)	9.4%	16.1%	37.6%	36.9%	13.1%	3.8%	27.9%	55.1%
age	65 years and over (n=435)	14.2%	20.7%	45.4%	19.6%	10.6%	26.4%	39.6%	23.4%
	Total (n=1,043)	7.4%	20.6%	30.2%	41.7%	12.1%	20.2%	30.0%	37.7%
	less than \$30k (n=108)	21.3%	22.2%	28.5%	27.9%	49.7%	21.9%	17.3%	11.2%
ĺ	\$30-70k (n=272)	10.2%	20.8%	37.9%	31.0%	9.4%	21.6%	29.6%	39.4%
household income	\$70-100k (n=160)	5.1%	12.7%	36.5%	45.7%	10.0%	11.5%	42.0%	36.5%
meome	\$100k and over (n=276)	6.6%	19.3%	28.3%	45.9%	7.4%	10.2%	25.7%	56.8%
	Total (n=816)	8.6%	18.4%	32.8%	40.1%	13.6%	15.5%	29.5%	41.4%
knowledge of	bilingual (n=849)	6.9%	21.5%	28.8%	42.8%				
	unilingual English (n=215)	10.3%	15.0%	40.0%	34.7%				
French	Total (n=1,064)	7.4%	20.5%	30.5%	41.6%				

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who volunteered in the past 12 months (Q54A):Q54C. On average, about how many hours per month do you volunteer?

22.1.6 Volunteering Done as Part of a Group or Organization

Volunteering Done as Part of a Group or Organization

	English S	peakers	French Speakers	
Region	yes	no	yes	no
031 Capitale-Nationale (n=92)	85.5%	14.5%	76.8%	23.2%
051 Estrie – CHU de Sherbrooke (n=51)	55.0%	45.0%	71.4%	28.6%
061 Ouest-de-l'Île-de-Montréal (n=190)	76.0%	24.0%	86.6%	13.4%
062 Centre-Ouest-de-l'Île-de-Montréal (n=186)	86.7%	13.3%	78.9%	21.1%
063 Centre-Sud-de-l'Île-de-Montréal (n=72)	85.6%	14.4%	82.3%	17.7%
064 Nord-de-l'Île-de-Montréal (n=52)	82.1%	17.9%	81.4%	18.6%
065 Est-de-l'Île-de-Montréal (n=45)	94.4%	5.6%	87.6%	12.4%
071 Outaouais (n=76)	63.7%	36.3%	88.5%	11.5%
111 Gaspésie (n=30)	90.1%	9.9%	-	-
131 Laval (n=65)	83.7%	16.3%	100.0%	-
151 Laurentides (n=44)	89.4%	10.6%	84.7%	15.3%
161 Montérégie-Centre (n=60)	81.4%	18.6%	86.0%	14.0%
162 Montérégie-Est (n=32)	76.6%	23.4%	75.9%	24.1%
163 Montérégie-Ouest (n=92)	82.0%	18.0%	85.5%	14.5%
Total (n=1,116)	80.5%	19.5%	81.9%	18.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who volunteered in the past 12 months (Q54A):Q54D. Was your volunteer work done as part of a group or organization?

Among English speakers who had volunteered within the previous year, 80.5% did so as a part of a group or organization. This was similar to the proportion reported for French speakers (81.9%).

We observe that English-speakers who had volunteered within the previous year in the regions of RTS de l'Est-de-l'Île-de-Montréal (94.4%), RTS de la Gaspésie (90.1%) and RTS des Laurentides (89.4%) were the most likely to have done so as a part of a group or organization.

English speakers who had volunteered within the previous year in the regions of RTS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (55.0%), RTS de l'Outaouais (63.7%) and RTS de l'Ouest-de-l'Île-de-Montréal (76.0%) were the least likely to have done so as a part of a group or organization.

Volunteering Done as Part of a Group or Organization

		English S	peakers	French S	Speakers
	Variable	yes	no	yes	no
	Male (n=401)	84.2%	15.8%	82.1%	17.9%
gender	Female (n=715)	76.7%	23.3%	81.8%	18.2%
	Total (n=1,116)	80.5%	19.5%	81.9%	18.1%
	25-44 years (n=119)	79.3%	20.7%	89.1%	10.9%
2.00	45-64 years (n=483)	79.6%	20.4%	88.9%	11.1%
age	65 years and over (n=462)	78.8%	21.2%	77.5%	22.5%
	Total (n=1,091)	80.6%	19.4%	81.8%	18.2%
	less than \$30k (n=115)	69.3%	30.7%	76.3%	23.7%
	\$30-70k (n=284)	81.3%	18.7%	75.6%	24.4%
household income	\$70-100k (n=166)	84.0%	16.0%	88.8%	11.2%
meonic	\$100k and over (n=282)	80.3%	19.7%	89.3%	10.7%
	Total (n=847)	80.4%	19.6%	83.3%	16.7%
knowledge of	bilingual (n=893)	81.5%	18.5%		
English and	unilingual English (n=222)	74.7%	25.3%		
French	Total (n=1,115)	80.5%	19.5%		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who volunteered in the past 12 months (Q54A):Q54D. Was your volunteer work done as part of a group or organization?

English-speaking males who had volunteered within the previous year were more likely to have done so as a part of a group or organization (84.2%) than were their female counterparts (76.7%).

With respect to income, those who had volunteered within the previous year who earned \$70-100k were the most likely to have done so as a part of a group or organization (84.0%) while those earning less than \$30k were the least likely (69.3%).

English-speakers who had volunteered within the previous year who were bilingual were more likely to have done so as a part of a group or organization (81.5%) than their unilingual English counterparts (74.7%).

22.1.7 Volunteering by Type of Organization

Volunteering by Type of Organization Among Anglophones

Region	school	church, synagogue , mosque	sports	health or social services institution	community resource	municipal affairs	Youth Organization	Art / Culture group organization	Non profital organization (S.P.)	Seniors' group/ass ociation / Veterans	other: specify
031 Capitale-Nationale (n=75)	31.6%	10.3%	24.7%	18.8%	26.0%	6.4%	2.1%	5.4%	1.4%	2.4%	8.8%
051 Estrie – CHU de Sherbrooke (n=43)	23.3%	38.3%	5.0%	13.8%	38.6%	4.7%	4.2%	10.0%	1	2.1%	-
061 Ouest-de-l'Île-de-Montréal (n=144)	19.1%	27.4%	24.0%	17.6%	25.7%	2.4%	1.3%	1.4%	2.4%	1.4%	4.9%
062 Centre-Ouest-de-l'Île-de-Montréal (n=140)	26.1%	21.8%	8.5%	12.5%	35.4%	4.2%	3.7%	10.0%	3.7%	0.6%	1.1%
063 Centre-Sud-de-l'Île-de-Montréal (n=57)	35.2%	29.7%	16.4%	13.8%	26.2%	0.4%	-	0.4%	4.3%	-	2.6%
064 Nord-de-l'Île-de-Montréal (n=37)	19.1%	64.7%	10.9%	8.1%	10.5%	1.2%	-	0.6%	-	-	4.4%
065 Est-de-l'Île-de-Montréal (n=38)	17.7%	16.3%	21.2%	22.1%	40.0%	1.4%	-	-	-	4.8%	-
071 Outaouais (n=58)	7.9%	18.6%	15.2%	7.5%	48.0%	3.8%	1.2%	0.6%	0.9%	4.9%	10.6%
131 Laval (n=54)	29.3%	8.5%	23.1%	20.5%	32.8%	14.4%	0.6%	-	-	2.2%	3.2%
151 Laurentides (n=35)	54.1%	6.5%	37.5%	3.1%	6.3%	39.8%	0.6%	-	-	3.1%	4.8%
161 Montérégie-Centre (n=47)	35.1%	32.5%	18.4%	5.7%	18.7%	2.4%	1.9%	6.4%	-	0.9%	-
163 Montérégie-Ouest (n=73)	25.4%	31.0%	23.7%	10.2%	28.3%	8.3%	0.9%	1.1%	-	2.4%	3.5%
Total (n=878)	25.8%	25.1%	18.3%	13.0%	29.5%	6.6%	1.7%	3.7%	1.7%	1.7%	3.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who volunteered in the past 12 months (Q54A):Q54E. Which of the following types of organizations do you volunteer for? (List by order of most time spent in volunteer activity) 6 POSSIBLE **MENTIONS**

Volunteering by Type of Organization Among Anglophones

	Variable	school	church, synagogue , mosque	sports	health or social services institution	community resource	municipal affairs	Youth Organization	Culture	Non profital organization (S.P.)	Seniors' group/ass ociation / Veterans	other: specify
	Male (n=322)	23.3%	20.9%	24.7%	11.2%	28.3%	8.8%	0.5%	5.4%	0.4%	0.8%	4.1%
gender	Female (n=556)	28.5%	29.8%	11.3%	15.0%	30.9%	4.2%	2.9%	1.9%	3.1%	2.6%	2.1%
	Total (n=878)	25.8%	25.1%	18.3%	13.0%	29.5%	6.6%	1.7%	3.7%	1.7%	1.7%	3.2%
	25-44 years (n=98)	37.4%	19.8%	19.5%	7.7%	36.9%	9.5%	-	0.3%	0.3%	-	1.5%
	45-64 years (n=382)	22.4%	30.7%	24.1%	13.0%	28.2%	3.5%	2.2%	3.0%	0.7%	1.6%	1.7%
age	65 years and over (n=361)	8.6%	33.7%	7.3%	22.5%	33.2%	7.3%	0.7%	4.0%	0.4%	6.7%	4.6%
	Total (n=861)	26.0%	24.9%	18.4%	13.1%	29.4%	6.6%	1.7%	3.6%	1.7%	1.7%	3.2%
	less than \$30k (n=76)	4.0%	53.3%	3.7%	10.3%	35.1%	2.3%	-	4.5%	1.8%	4.5%	1.3%
[\$30-70k (n=224)	21.9%	24.2%	10.7%	10.2%	40.4%	13.2%	1.0%	1.7%	0.4%	3.6%	2.9%
household income	\$70-100k (n=135)	27.2%	36.7%	14.1%	8.4%	22.7%	2.7%	0.3%	3.6%	-	0.5%	5.1%
micome	\$100k and over (n=232)	28.0%	13.8%	32.2%	19.6%	33.4%	5.9%	1.7%	0.8%	0.8%	0.6%	3.8%
	Total (n=667)	24.1%	25.5%	19.4%	13.4%	32.9%	6.9%	1.0%	2.1%	0.5%	1.8%	3.7%
knowledge of	bilingual (n=715)	28.3%	24.0%	19.0%	13.0%	28.4%	7.3%	1.9%	3.8%	1.8%	0.8%	3.0%
English and	unilingual English (n=162)	9.5%	31.8%	14.4%	12.8%	36.8%	2.2%	-	3.3%	0.5%	7.0%	4.4%
French	Total (n=877)	25.8%	25.1%	18.3%	13.0%	29.5%	6.6%	1.7%	3.7%	1.7%	1.7%	3.2%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who volunteered in the past 12 months (Q54A):Q54E. Which of the following types of organizations do you volunteer for? (List by order of most time spent in volunteer activity) 6 POSSIBLE MENTIONS

Volunteering by Type of Organization Among Francophones

	Variable	school	church, synagogue , mosque	sports	health or social services institution	community resource	municipal affairs	Youth Organization	Art/Culture group organization	other: specify
	Male (n=90)	14.9%	13.5%	30.3%	19.1%	32.1%	9.1%	4.0%	5.5%	1.8%
gender	Female (n=147)	30.8%	10.3%	10.9%	21.9%	27.7%	6.8%	4.1%	1.9%	11.3%
	Total (n=237)	23.9%	11.7%	19.4%	20.7%	29.6%	7.8%	4.1%	3.5%	7.1%
	25-44 years (n=50)	32.8%	6.2%	27.5%	27.5%	24.5%	9.1%	7.2%	2.3%	2.7%
2.00	45-64 years (n=42)	21.7%	5.9%	32.5%	14.4%	29.8%	7.3%	3.6%	3.7%	2.1%
age	65 years and over (n=140)	12.7%	21.6%	10.3%	18.7%	40.2%	7.1%	2.4%	5.1%	6.6%
	Total (n=236)	24.0%	11.8%	19.5%	20.8%	29.8%	7.3%	4.1%	3.5%	6.6%
	\$30-70k (n=68)	9.1%	17.4%	10.2%	14.6%	45.6%	7.1%	2.0%	2.8%	6.7%
household	\$70-100k (n=45)	44.1%	8.3%	22.2%	8.9%	34.9%	4.0%	6.4%	8.6%	2.1%
income	\$100k and over (n=68)	30.4%	6.8%	35.9%	20.6%	19.7%	13.9%	7.1%	2.1%	3.7%
	Total (n=203)	24.3%	12.1%	21.9%	20.2%	30.7%	8.1%	4.7%	3.6%	4.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who volunteered in the past 12 months (Q54A):Q54E. Which of the following types of organizations do you volunteer for? (List by order of most time spent in volunteer activity) 6 POSSIBLE MENTIONS

22.1.8 Type of Volunteering Work Done

Type of Volunteering Work Done Among Anglophones

				Care or		Unpaid		Organizing	Distributing	Sport	Arts,	Church work	
Region	Housework	Outdoor maintenance	i i i alisbul tatiuli	support to the sick, elderly	Unpaid childcare	teaching or coaching	Fundraising	events / Planning activities	food / Preparing Meal	activities / Entertain ment	crafts and culture	/ Community outreach	Professional services
031 Capitale-Nationale (n=91)	4.2%	5.3%	11.9%	25.3%	6.6%	26.1%	8.3%	5.9%	4.1%	0.4%	1.1%	11.1%	1.6%
051 Estrie – CHU de Sherbrooke (n=47)	3.1%	7.5%	25.2%	12.2%	13.1%	15.8%	2.5%	-	5.1%	0.7%	3.0%	-	2.8%
061 Ouest-de-l'Île-de-Montréal (n=186)	2.4%	11.2%	5.8%	23.6%	8.0%	37.7%	3.4%	1.5%	6.2%	2.8%	1.1%	14.3%	1.0%
062 Centre-Ouest-de-l'Île-de-Montréal (n=181)	7.9%	1.5%	11.0%	14.0%	14.2%	36.0%	2.4%	10.6%	2.7%	0.9%	8.6%	8.6%	4.7%
063 Centre-Sud-de-l'Île-de-Montréal (n=69)	16.8%	8.3%	9.6%	20.9%	13.8%	44.8%	3.2%	7.3%	1.9%	1.6%	0.7%	4.1%	0.7%
064 Nord-de-l'Île-de-Montréal (n=48)	2.0%	2.4%	4.1%	21.9%	2.9%	44.4%	2.4%	2.2%	26.8%	11.4%	1.8%	3.8%	3.1%
065 Est-de-l'Île-de-Montréal (n=41)	1.8%	1.7%	10.5%	19.9%	-	50.1%	5.2%	8.6%	3.9%	1.2%	3.6%	0.9%	-
071 Outaouais (n=77)	3.2%	30.5%	9.3%	38.5%	2.2%	15.1%	5.8%	2.9%	2.5%	1.2%	-	3.8%	3.3%
111 Gaspésie (n=30)	1.6%	22.4%	27.5%	34.4%	15.2%	34.7%	-	-	9.5%	-	3.7%	-	14.0%
131 Laval (n=63)	9.3%	19.1%	17.2%	25.7%	1.3%	30.8%	1.7%	1.6%	4.9%	8.7%	0.6%	9.6%	-
151 Laurentides (n=41)	1.3%	2.9%	31.2%	33.2%	1.1%	46.9%	17.4%	-	4.4%	1.1%	18.0%	3.0%	3.9%
161 Montérégie-Centre (n=60)	6.9%	8.1%	15.3%	14.3%	4.4%	50.7%	1.6%	10.5%	14.7%	1.7%	1.5%	2.0%	4.1%
162 Montérégie-Est (n=31)	8.8%	3.8%	28.3%	13.1%	6.0%	27.4%	18.4%	-	1.1%	21.2%	-	7.2%	1.2%
163 Montérégie-Ouest (n=91)	11.0%	9.7%	23.0%	24.2%	6.4%	37.2%	5.2%	1.8%	3.5%	2.4%	2.8%	3.1%	2.0%
Total (n=1,085)	6.0%	9.1%	13.1%	21.6%	7.7%	36.4%	4.1%	4.8%	5.9%	3.0%	3.8%	7.2%	2.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who volunteered in the past 12 months (Q54A):Q54F. Please think about the type of unpaid help you gave others in the past 12 months. Which of the following ways did you volunteer help? 6 POSSIBLE MENTIONS

Type of Volunteering Work Done Among Anglophones

	Variable	Housework	Outdoor maintenance	Liransportation	Care or support to the sick, elderly	Unpaid childcare	Unpaid teaching or coaching	Fundraising	events /	Distributing food / Preparing Meal	Sport activities / Entertain ment	Arts, crafts and culture	Church work / Community outreach	Professional
	Male (n=391)	3.0%	11.6%	12.9%	16.9%	0.8%	37.7%	4.6%	4.5%	4.0%	3.2%	5.7%	7.1%	1.7%
gender	Female (n=694)	8.9%	6.6%	13.3%	26.4%	14.6%	35.2%	3.7%	5.0%	7.9%	2.8%	1.8%	7.4%	3.4%
	Total (n=1,085)	6.0%	9.1%	13.1%	21.6%	7.7%	36.4%	4.1%	4.8%	5.9%	3.0%	3.8%	7.2%	2.5%
	25-44 years (n=117)	9.3%	11.1%	14.3%	18.0%	9.1%	44.9%	4.7%	5.3%	6.3%	2.7%	2.5%	5.4%	1.0%
age	45-64 years (n=471)	3.3%	8.9%	12.4%	22.8%	7.7%	43.5%	5.3%	3.3%	6.4%	1.7%	2.9%	4.8%	1.8%
age	65 years and over (n=449)	7.6%	6.8%	22.5%	28.1%	5.6%	21.1%	4.2%	1.9%	8.0%	1.5%	3.0%	6.3%	5.2%
	Total (n=1,063)	5.7%	9.2%	13.2%	21.7%	7.7%	36.6%	4.1%	4.7%	5.9%	2.9%	3.8%	7.3%	2.6%
	less than \$30k (n=115)	9.0%	8.7%	20.0%	33.5%	2.2%	25.2%	1.1%	0.7%	9.8%	9.3%	1.8%	2.7%	5.6%
	\$30-70k (n=276)	12.2%	13.9%	14.9%	19.0%	10.1%	38.4%	3.2%	2.5%	4.5%	1.1%	7.2%	8.6%	1.9%
household income	\$70-100k (n=158)	3.0%	6.1%	11.4%	17.2%	9.8%	41.0%	1.7%	11.8%	6.2%	0.8%	2.1%	8.3%	1.5%
meome	\$100k and over (n=278)	2.8%	8.9%	9.4%	21.6%	8.8%	48.7%	4.1%	4.1%	4.7%	4.0%	0.4%	2.8%	0.8%
	Total (n=827)	6.1%	9.6%	12.4%	21.0%	8.8%	41.8%	3.0%	5.1%	5.5%	3.0%	2.8%	5.7%	1.7%
knowledge of	bilingual (n=872)	5.9%	7.2%	11.5%	20.3%	7.5%	38.6%	4.3%	5.3%	4.9%	3.4%	4.1%	7.6%	2.9%
English and	unilingual English (n=212)	6.1%	20.7%	22.4%	29.7%	8.6%	23.9%	3.0%	1.5%	12.0%	0.8%	1.8%	5.0%	0.5%
French	Total (n=1,084)	6.0%	9.1%	13.1%	21.6%	7.7%	36.4%	4.1%	4.8%	5.9%	3.0%	3.8%	7.2%	2.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who volunteered in the past 12 months (Q54A):Q54F. Please think about the type of unpaid help you gave others in the past 12 months. Which of the following ways did you volunteer help? 6 POSSIBLE MENTIONS

Type of Volunteering Work Done Among Francophones

	Variable	Housework	Outdoor maintenance	Transportation	Care or support to the sick, elderly	Unpaid childcare	Unpaid teaching or coaching	Fundraising		Distributing food / Preparing Meal	Sport activities / Entertain ment	Arts, crafts and culture	Church work / Community outreach	Professional services
	Male (n=106)	8.3%	8.9%	7.5%	32.6%	2.7%	22.7%	1.6%	-	4.4%	13.4%	1.8%	14.2%	3.6%
gender	Female (n=176)	4.8%	2.4%	10.3%	26.4%	13.8%	22.4%	9.3%	2.5%	2.2%	6.3%	6.0%	9.8%	1.0%
	Total (n=282)	6.4%	5.3%	9.0%	29.2%	8.8%	22.6%	5.9%	1.4%	3.2%	9.5%	4.2%	11.8%	2.2%
	25-44 years (n=53)	5.0%	7.9%	10.4%	23.0%	11.2%	25.0%	5.8%	2.9%	4.0%	11.8%	-	12.5%	1.2%
2.50	45-64 years (n=45)	2.2%	3.2%	8.5%	27.1%	8.6%	37.6%	3.0%	-	3.3%	8.4%	1.1%	12.2%	-
age	65 years and over (n=176)	7.5%	5.8%	10.8%	34.5%	9.7%	11.0%	3.5%	1.2%	3.4%	4.4%	5.6%	11.8%	4.4%
	Total (n=281)	6.4%	5.3%	9.1%	29.3%	8.9%	22.7%	5.9%	1.4%	3.2%	9.5%	4.2%	11.8%	2.2%
	less than \$30k (n=36)	26.1%	5.7%	19.7%	32.4%	11.5%	24.6%	1.1%	0.8%	-	-	-	7.4%	-
[\$30-70k (n=87)	5.7%	5.8%	4.3%	34.6%	11.4%	19.8%	4.8%	0.8%	1.6%	2.3%	3.4%	11.9%	5.7%
household	\$70-100k (n=48)	4.5%	11.7%	10.4%	21.3%	6.1%	24.5%	2.3%	-	6.7%	10.2%	5.1%	7.8%	0.9%
[come	\$100k and over (n=74)	2.7%	3.7%	9.2%	23.7%	8.0%	22.9%	5.8%	3.1%	3.1%	14.6%	1.5%	15.1%	1.0%
	Total (n=245)	7.2%	6.3%	9.3%	27.8%	9.1%	22.5%	4.1%	1.4%	3.0%	7.8%	2.6%	11.5%	2.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who volunteered in the past 12 months (Q54A):Q54F. Please think about the type of unpaid help you gave others in the past 12 months. Which of the following ways did you volunteer help? 6 POSSIBLE MENTIONS

23 Community Organizations Promoting Interests of the English-speaking Community

23.1.1 Community Organizations Promoting Interests of the English-speaking Community

Know of Local Community Organizations Promoting Interests of the English-speaking Community

yes	no
42.9%	57.1%
26.4%	73.6%
22.0%	78.0%
23.6%	76.4%
19.5%	80.5%
8.7%	91.3%
5.9%	94.1%
16.8%	83.2%
60.4%	39.6%
7.4%	92.6%
18.9%	81.1%
31.5%	68.5%
12.9%	87.1%
15.4%	84.6%
19.1%	80.9%
18.4%	81.6%
	42.9% 26.4% 22.0% 23.6% 19.5% 8.7% 5.9% 16.8% 60.4% 7.4% 18.9% 31.5% 12.9% 15.4% 19.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q55. Do you know about the activities of a community organization in your region promoting the interests of the English-speaking community in health and social services?

Among English speakers, 18.4% knew of local community organizations promoting interests of the English-speaking community.

We observe that English-speakers in the regions of RTS de la Gaspésie (60.4%), RTS de la Capitale-Nationale (42.9%) and RTS des Laurentides (31.5%) were the most likely to know of local community organizations promoting interests of the English-speaking community.

English speakers in the regions of RTS de l'Est-de-l'Île-de-Montréal (5.9%), RTS de Laval (7.4%) and RTS du Nord-de-l'Île-de-Montréal (8.7%) were the least likely to know of local community organizations promoting interests of the English-speaking community.

Know of Local Community Organizations Promoting Interests of the English-speaking Community

	Variable	yes	no
	Male	14.5%	85.5%
gender	Female	22.4%	77.6%
	Total	18.4%	81.6%
	18-24 years	14.1%	85.9%
	25-44 years	16.0%	84.0%
age	45-64 years	16.8%	83.2%
	65 years and over	27.8%	72.2%
	Total	18.2%	81.8%
	less than \$30k	18.2%	81.8%
l a salada	\$30-70k	19.8%	80.2%
household income	\$70-100k	18.3%	81.7%
meome	\$100k and over	15.3%	84.7%
	Total	17.8%	82.2%
knowledge of	bilingual	17.7%	82.3%
English and	unilingual English	21.5%	78.5%
French	Total	18.4%	81.6%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q55. Do you know about the activities of a community organization in your region promoting the interests of the English-speaking community in health and social services?

English-speaking females were more likely to know of local community organizations promoting interests of the English-speaking community (22.4%) than were their male counterparts (14.5%).

Across age groups, English speakers who were aged 65 years and over were the most likely to know of local community organizations promoting interests of the English-speaking community (27.8%) while those aged 18-24 years were the least likely (14.1%).

With respect to income, those who earned \$30-70k were the most likely to know of local community organizations promoting interests of the English-speaking community (19.8%) while those earning \$100k and over were the least likely (15.3%).

English-speakers who were unilingual English were more likely to know of local community organizations promoting interests of the English-speaking community (21.5%) than their bilingual counterparts (17.7%).

24 Sources of Support

24.1.1 Source of Support if III

Source of Support if III

			English Speaker	·s				French Speaker	·s	
Region	Relatives	Friends	Community resource, volunteer or religious organization	Public social service institutions (hospitals ,CLSC)	Nobody	Relatives	Friends	Community resource, volunteer or religious organization	Public social service institutions (hospitals ,CLSC)	Nobody
031 Capitale-Nationale (n=202)	70.3%	15.0%	2.4%	7.7%	4.5%	84.5%	3.8%	1.2%	5.0%	5.5%
051 Estrie – CHU de Sherbrooke (n=106)	56.5%	31.4%	2.0%	4.8%	5.3%	87.5%	7.1%	-	4.0%	1.5%
061 Ouest-de-l'Île-de-Montréal (n=484)	79.9%	7.1%	0.7%	8.9%	3.4%	79.2%	9.3%	1.2%	3.6%	6.8%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	62.1%	13.3%	2.0%	12.9%	9.7%	66.5%	9.6%	0.9%	6.4%	16.6%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	62.0%	18.0%	2.5%	12.2%	5.3%	64.5%	17.8%	1.8%	1.0%	15.0%
064 Nord-de-l'Île-de-Montréal (n=251)	65.8%	13.0%	0.9%	10.5%	9.8%	70.6%	13.0%	2.6%	8.4%	5.4%
065 Est-de-l'Île-de-Montréal (n=215)	70.0%	5.1%	1.5%	4.9%	18.5%	81.0%	2.9%	6.2%	6.7%	3.3%
071 Outaouais (n=200)	66.6%	9.3%	5.2%	8.8%	10.0%	79.4%	5.2%	5.8%	4.5%	5.0%
111 Gaspésie (n=75)	56.0%	23.1%	1.5%	13.6%	5.8%	87.1%	7.7%	-	-	5.2%
131 Laval (n=257)	81.6%	9.3%	0.9%	4.8%	3.4%	82.6%	4.6%	2.1%	7.3%	3.5%
141 Lanaudière (n=75)	74.1%	13.0%	0.2%	8.0%	4.6%	79.9%	6.3%	-	2.7%	11.1%
151 Laurentides (n=110)	81.4%	7.9%	0.5%	4.0%	6.2%	71.8%	10.7%	4.3%	8.2%	5.0%
161 Montérégie-Centre (n=150)	77.1%	4.6%	1.9%	5.8%	10.6%	76.4%	10.8%	0.8%	4.1%	8.0%
162 Montérégie-Est (n=77)	75.3%	10.6%	0.1%	5.3%	8.7%	81.9%	10.1%	-	5.3%	2.8%
163 Montérégie-Ouest (n=240)	71.7%	10.9%	1.6%	8.1%	7.6%	81.9%	8.5%	-	7.5%	2.1%
Total (n=3,133)	70.8%	11.1%	1.7%	8.7%	7.7%	79.1%	7.9%	1.9%	5.4%	5.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q56A. If you became ill, who other than your spouse would you likely turn to for support?

Source of Support if III

				English Speaker	rs				French Speaker	·s	
	Variable	Relatives	Friends	Community resource, volunteer or religious organization	Public social service institutions (hospitals ,CLSC)	Nobody	Relatives	Friends	Community resource, volunteer or religious organization	Public social service institutions (hospitals ,CLSC)	Nobody
	Male	68.1%	10.9%	1.3%	10.4%	9.3%	79.7%	6.3%	1.5%	5.0%	7.5%
gender	Female	73.4%	11.3%	2.0%	7.0%	6.2%	78.6%	9.4%	2.3%	5.7%	4.0%
	Total	70.8%	11.1%	1.7%	8.7%	7.7%	79.1%	7.9%	1.9%	5.4%	5.7%
	18-24 years	72.4%	3.5%	1	20.6%	3.5%	91.8%	3.7%	-	ı	4.5%
	25-44 years	73.4%	11.3%	1.9%	4.0%	9.5%	84.5%	6.3%	1.2%	2.1%	6.0%
age	45-64 years	69.6%	12.9%	1.6%	7.8%	8.1%	72.4%	11.0%	2.4%	7.3%	6.9%
	65 years and over	67.0%	12.7%	2.6%	11.8%	6.0%	74.0%	9.1%	2.6%	8.8%	5.4%
	Total	70.8%	11.1%	1.7%	8.7%	7.7%	79.1%	8.0%	1.8%	5.4%	5.7%
	less than \$30k	62.8%	11.5%	3.4%	9.0%	13.3%	76.9%	5.2%	3.1%	8.8%	6.0%
[\$30-70k	70.3%	13.5%	1.6%	7.4%	7.3%	78.5%	7.5%	1.9%	6.2%	5.8%
household income	\$70-100k	71.7%	11.5%	1.3%	8.8%	6.8%	72.9%	8.4%	4.4%	6.2%	8.1%
Income	\$100k and over	72.5%	10.8%	1.4%	9.9%	5.4%	86.1%	9.5%	0.1%	2.4%	1.9%
	Total	70.2%	11.9%	1.7%	8.8%	7.5%	79.5%	7.9%	2.1%	5.4%	5.1%
knowledge of	bilingual	72.6%	10.6%	1.5%	8.5%	6.8%					
English and	unilingual English	62.9%	13.3%	2.5%	9.7%	11.7%					
French	Total	70.8%	11.1%	1.7%	8.7%	7.7%					

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q56A. If you became ill, who other than your spouse would you likely turn to for support?

24.1.2 Distance from Relatives Able to Support

Distance from Relatives Able to Support Among Anglophones

Region	they live in the same house/building	less than 15 minutes	15-30 minutes	30-60 minutes	1 -3 hours	more than 3 hours
031 Capitale-Nationale (n=202)	5.7%	38.5%	21.7%	7.4%	4.0%	22.8%
051 Estrie – CHU de Sherbrooke (n=106)	6.5%	44.5%	21.9%	12.2%	7.0%	7.9%
061 Ouest-de-l'Île-de-Montréal (n=484)	24.2%	28.5%	26.1%	9.8%	6.6%	4.7%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	17.8%	34.0%	21.5%	12.3%	5.1%	9.3%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	18.3%	22.2%	16.9%	10.9%	9.5%	22.2%
064 Nord-de-l'Île-de-Montréal (n=251)	17.9%	25.6%	27.5%	9.1%	12.5%	7.4%
065 Est-de-l'Île-de-Montréal (n=215)	18.5%	30.9%	32.3%	8.6%	8.1%	1.6%
071 Outaouais (n=200)	12.4%	40.9%	18.3%	8.8%	13.9%	5.8%
111 Gaspésie (n=75)	0.8%	49.3%	19.9%	17.9%	3.0%	9.2%
131 Laval (n=257)	8.8%	29.2%	34.9%	15.5%	9.8%	1.8%
141 Lanaudière (n=75)	15.6%	11.9%	31.5%	27.9%	9.4%	3.7%
151 Laurentides (n=110)	2.4%	44.0%	13.5%	10.2%	24.7%	5.2%
161 Montérégie-Centre (n=150)	24.5%	22.5%	16.9%	13.1%	14.5%	8.4%
162 Montérégie-Est (n=77)	20.0%	50.3%	19.4%	4.0%	4.0%	2.3%
163 Montérégie-Ouest (n=240)	13.7%	21.6%	27.5%	17.5%	7.1%	12.6%
Total (n=3,133)	16.7%	30.5%	24.3%	11.6%	9.0%	7.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Distance from Relatives Able to Support Among Francophones

Region	they live in the same house/building	less than 15 minutes	15-30 minutes	30-60 minutes	1 -3 hours	more than 3 hours
031 Capitale-Nationale (n=202)	10.1%	36.3%	32.1%	9.1%	6.4%	6.0%
051 Estrie – CHU de Sherbrooke (n=106)	18.0%	32.2%	23.1%	9.4%	12.3%	4.9%
061 Ouest-de-l'Île-de-Montréal (n=484)	18.1%	16.2%	36.1%	15.3%	13.0%	1.2%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	20.8%	11.8%	23.6%	15.5%	13.3%	15.1%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	17.6%	23.9%	25.2%	19.0%	5.5%	8.8%
064 Nord-de-l'Île-de-Montréal (n=251)	13.0%	26.6%	30.1%	19.3%	6.1%	4.9%
065 Est-de-l'Île-de-Montréal (n=215)	30.3%	18.5%	22.5%	15.6%	13.1%	-
071 Outaouais (n=200)	14.5%	15.4%	30.8%	6.2%	13.7%	19.4%
111 Gaspésie (n=75)	10.2%	34.7%	22.3%	20.5%	-	12.3%
131 Laval (n=257)	6.6%	34.8%	30.6%	19.7%	6.9%	1.3%
141 Lanaudière (n=75)	9.5%	45.3%	4.1%	15.7%	18.7%	6.7%
151 Laurentides (n=110)	5.9%	28.3%	30.3%	26.5%	5.8%	3.2%
161 Montérégie-Centre (n=150)	17.6%	33.7%	24.0%	19.4%	5.4%	-
162 Montérégie-Est (n=77)	15.8%	28.6%	33.0%	18.2%	4.4%	-
163 Montérégie-Ouest (n=240)	13.9%	48.2%	20.1%	8.4%	5.9%	3.5%
Total (n=3,133)	14.2%	30.8%	25.9%	15.4%	8.9%	4.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Distance from Relatives Able to Support Among Anglophones

	Variable	they live in the same house/building	less than 15 minutes	15-30 minutes	30-60 minutes	1 -3 hours	more than 3 hours
	Male	19.6%	29.7%	23.7%	11.5%	8.8%	6.7%
gender	Female	13.9%	31.2%	25.0%	11.7%	9.2%	9.0%
•	Total	16.7%	30.5%	24.3%	11.6%	9.0%	7.8%
age	18-24 years	46.7%	35.7%	5.5%	7.4%	4.1%	0.7%
	25-44 years	15.1%	29.0%	26.5%	9.3%	10.9%	9.2%
	45-64 years	12.2%	29.9%	27.4%	14.7%	8.4%	7.5%
	65 years and over	8.1%	31.6%	27.2%	14.0%	9.1%	10.0%
	Total	16.8%	30.6%	24.3%	11.7%	8.9%	7.7%
	less than \$30k	17.0%	23.9%	23.6%	12.6%	11.4%	11.6%
	\$30-70k	10.9%	37.6%	24.5%	11.3%	8.3%	7.4%
household income	\$70-100k	9.7%	27.6%	28.6%	12.5%	12.5%	9.2%
meome	\$100k and over	18.0%	30.8%	25.1%	11.9%	6.8%	7.4%
	Total	14.0%	31.3%	25.3%	11.9%	9.0%	8.4%
knowledge of English and	bilingual	17.1%	32.1%	24.0%	11.9%	9.1%	5.9%
	unilingual English	15.3%	23.5%	26.0%	10.5%	8.7%	16.1%
French	Total	16.7%	30.5%	24.3%	11.6%	9.0%	7.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Distance from Relatives Able to Support Among Francophones

	Variable	they live in the same house/building	less than 15 minutes	15-30 minutes	30-60 minutes	1 -3 hours	more than 3 hours
	Male	12.1%	30.0%	27.1%	14.3%	10.1%	6.4%
gender	Female	16.2%	31.5%	24.8%	16.5%	7.8%	3.3%
	Total	14.2%	30.8%	25.9%	15.4%	8.9%	4.8%
	18-24 years	51.1%	12.8%	13.1%	14.8%	2.0%	6.2%
	25-44 years	8.5%	33.5%	27.9%	14.5%	11.5%	4.2%
age	45-64 years	16.7%	28.9%	30.0%	13.9%	5.8%	4.7%
	65 years and over	7.4%	34.2%	26.3%	17.3%	9.8%	5.0%
	Total	14.1%	30.7%	26.0%	15.5%	8.8%	4.8%
	less than \$30k	7.5%	29.0%	25.6%	19.7%	14.0%	4.1%
l	\$30-70k	11.7%	30.0%	30.1%	15.1%	10.3%	2.9%
household income	\$70-100k	9.6%	29.7%	29.5%	15.8%	8.1%	7.3%
HILOHIE	\$100k and over	11.7%	35.8%	26.1%	13.2%	7.5%	5.6%
	Total	10.6%	31.6%	28.0%	15.3%	9.5%	4.9%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

24.1.3 Distance from Friends Able to Support

Distance from Friends Able to Support Among Anglophones

Region	They live in the same house/building	15	15-30 minutes	30-60 minutes	1 -3 hours	More than 3 hours
031 Capitale-Nationale (n=202)	1.5%	41.7%	33.7%	18.8%	1.9%	2.4%
051 Estrie – CHU de Sherbrooke (n=106)	2.8%	54.4%	34.9%	4.8%	2.4%	0.8%
061 Ouest-de-l'Île-de-Montréal (n=484)	1.2%	47.6%	28.7%	13.6%	6.6%	2.2%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	3.2%	41.5%	29.4%	15.2%	9.6%	1.2%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	2.7%	34.5%	27.9%	21.4%	12.1%	1.4%
064 Nord-de-l'Île-de-Montréal (n=251)	3.2%	31.3%	32.0%	20.4%	10.4%	2.7%
065 Est-de-l'Île-de-Montréal (n=215)	1.1%	28.6%	46.5%	15.6%	7.4%	0.9%
071 Outaouais (n=200)	0.6%	53.6%	22.5%	10.1%	8.4%	4.9%
111 Gaspésie (n=75)	-	62.4%	30.0%	4.4%	0.7%	2.6%
131 Laval (n=257)	1.0%	34.2%	29.0%	24.0%	11.2%	0.6%
141 Lanaudière (n=75)	1.1%	37.0%	28.2%	28.3%	3.6%	1.8%
151 Laurentides (n=110)	2.4%	58.1%	30.2%	5.6%	3.1%	0.7%
161 Montérégie-Centre (n=150)	5.8%	36.7%	40.3%	7.5%	5.1%	4.5%
162 Montérégie-Est (n=77)	7.7%	36.8%	21.5%	22.9%	6.9%	4.3%
163 Montérégie-Ouest (n=240)	1.4%	39.2%	31.1%	19.9%	5.5%	3.0%
Total (n=3,133)	2.2%	41.2%	30.9%	15.8%	7.9%	2.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Distance from Friends Able to Support Among Francophones

Region	They live in the same house/building	Less than 15 minutes	15-30 minutes	30-60 minutes	1 -3 hours	More than 3 hours
031 Capitale-Nationale (n=202)	5.4%	37.3%	39.6%	12.2%	4.1%	1.3%
051 Estrie – CHU de Sherbrooke (n=106)	1.9%	37.1%	51.0%	5.3%	2.3%	2.3%
061 Ouest-de-l'Île-de-Montréal (n=484)	4.4%	12.9%	34.9%	44.8%	1.9%	1.2%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	-	19.9%	21.5%	39.4%	17.6%	1.7%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	=	30.6%	34.0%	25.0%	10.3%	-
064 Nord-de-l'Île-de-Montréal (n=251)	6.7%	30.9%	38.0%	21.1%	3.4%	-
065 Est-de-l'Île-de-Montréal (n=215)	0.8%	39.6%	29.2%	25.9%	3.7%	0.8%
071 Outaouais (n=200)	-	36.0%	49.8%	9.6%	3.9%	0.8%
111 Gaspésie (n=75)	6.4%	44.9%	21.4%	27.2%	-	-
131 Laval (n=257)	1.2%	25.4%	44.0%	20.9%	8.6%	-
141 Lanaudière (n=75)	2.6%	41.8%	19.0%	21.6%	3.5%	11.5%
151 Laurentides (n=110)	4.7%	44.7%	34.5%	12.9%	3.2%	-
161 Montérégie-Centre (n=150)	0.8%	37.4%	28.8%	30.5%	2.5%	-
162 Montérégie-Est (n=77)	0.5%	23.7%	51.7%	16.4%	6.2%	1.5%
163 Montérégie-Ouest (n=240)	-	44.9%	36.0%	10.5%	8.6%	
Total (n=3,133)	2.4%	35.4%	37.3%	18.3%	4.9%	1.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Distance from Friends Able to Support Among Anglophones

	Variable	They live in the same house/building	Less than 15 minutes	15-30 minutes	30-60 minutes	1 -3 hours	More than 3 hours
	Male	1.8%	42.6%	30.1%	14.5%	8.3%	2.8%
gender	Female	2.6%	39.8%	31.7%	17.1%	7.5%	1.4%
•	Total	2.2%	41.2%	30.9%	15.8%	7.9%	2.1%
age	18-24 years	-	57.9%	20.9%	11.4%	6.6%	3.1%
	25-44 years	1.2%	39.7%	30.1%	17.9%	9.6%	1.5%
	45-64 years	2.4%	36.8%	35.6%	15.2%	7.6%	2.4%
	65 years and over	5.8%	40.8%	30.0%	15.3%	6.1%	2.0%
	Total	2.2%	41.3%	30.8%	15.7%	7.9%	2.1%
	less than \$30k	4.9%	32.7%	27.7%	22.5%	9.2%	3.1%
ĺ	\$30-70k	2.6%	37.1%	29.3%	19.4%	8.6%	3.0%
household income	\$70-100k	2.3%	44.7%	35.3%	11.4%	5.1%	1.2%
meome	\$100k and over	0.9%	43.1%	33.5%	15.3%	6.0%	1.2%
	Total	2.3%	40.1%	31.7%	16.9%	7.1%	2.0%
knowledge of	bilingual	1.8%	42.0%	31.3%	15.6%	7.3%	2.0%
English and	unilingual English	4.0%	37.8%	28.7%	16.7%	10.4%	2.4%
French	Total	2.2%	41.2%	30.8%	15.8%	7.9%	2.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q56C. Using their normal means of transportation, approximately how much time would it take for friends to come to you? Is it ...

Distance from Friends Able to Support Among Francophones

	Variable	They live in the same house/building	15	15-30 minutes	30-60 minutes	1 -3 hours	More than 3 hours
	Male	1.8%	33.6%	41.1%	17.2%	4.2%	2.2%
gender	Female	3.0%	37.1%	33.7%	19.3%	5.6%	1.3%
	Total	2.4%	35.4%	37.3%	18.3%	4.9%	1.7%
	18-24 ye a rs	-	38.6%	42.5%	15.7%	3.2%	-
	25-44 ye a rs	2.5%	31.8%	40.6%	19.1%	2.9%	3.0%
age	45-64 years	0.5%	37.6%	34.6%	21.0%	4.6%	1.6%
	65 years and over	4.0%	36.5%	34.2%	17.3%	7.3%	0.7%
	Total	2.4%	35.3%	37.4%	18.4%	4.9%	1.6%
	less than \$30k	3.7%	27.2%	46.9%	16.8%	2.5%	2.8%
l	\$30-70k	4.7%	36.4%	33.1%	19.1%	4.8%	2.0%
household income	\$70-100k	1.3%	35.1%	38.3%	21.6%	3.6%	-
moonic	\$100k and over	0.8%	34.5%	40.7%	15.2%	6.8%	2.0%
	Total	2.6%	34.2%	38.6%	18.0%	4.9%	1.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

24.1.4 Provide Unpaid Care for a Vulnerable or Dependent Person

Provide Unpaid Care for a Vulnerable or Dependent Person

	English S	peakers	French S	peakers				
Region	yes	no	yes	no				
031 Capitale-Nationale (n=202)	10.5%	89.5%	10.5%	89.5%				
051 Estrie – CHU de Sherbrooke (n=106)	10.7%	89.3%	10.7%	89.3%				
061 Ouest-de-l'Île-de-Montréal (n=484)	18.3%	81.7%	18.3%	81.7%				
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	20.5%	79.5%	20.5%	79.5%				
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	12.3%	87.7%	12.3%	87.7%				
064 Nord-de-l'Île-de-Montréal (n=251)	20.8%	79.2%	20.8%	79.2%				
065 Est-de-l'Île-de-Montréal (n=215)	6.5%	93.5%	6.5%	93.5%				
071 Outaouais (n=200)	14.0%	86.0%	14.0%	86.0%				
111 Gaspésie (n=75)	14.0%	86.0%	14.0%	86.0%				
131 Laval (n=257)	14.9%	85.1%	14.9%	85.1%				
141 Lanaudière (n=75)	13.6%	86.4%	13.6%	86.4%				
151 Laurentides (n=110)	27.0%	73.0%	27.0%	73.0%				
161 Montérégie-Centre (n=150)	12.4%	87.6%	12.4%	87.6%				
162 Montérégie-Est (n=77)	8.2%	91.8%	8.2%	91.8%				
163 Montérégie-Ouest (n=240)	16.0%	84.0%	16.0%	84.0%				
Total (n=3,133)	16.2%	83.8%	16.2%	83.8%				

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q57A. Do you provide (unpaid) care for a vulnerable or dependent person?

Among English speakers, 16.2% provided unpaid care for a vulnerable or dependent person. This was much lower than the proportion reported for French speakers (24.9%).

We observe that English-speakers in the regions of RTS des Laurentides (27.0%), RTS du Nord-de-l'Île-de-Montréal (20.8%) and RTS du Centre-Ouest-de-l'Île-de-Montréal (20.5%) were the most likely to report providing unpaid care for a vulnerable or dependent person.

English speakers in the regions of RTS de l'Est-de-l'Île-de-Montréal (6.5%), RTS de la Montérégie-Est (8.2%) and RTS de la Capitale-Nationale (10.5%) were the least likely to report providing unpaid care for a vulnerable or dependent person.

Provide Unpaid Care for a Vulnerable or Dependent Person

		English S	peakers	French Speakers		
	Variable		no	yes	no	
	Male	14.6%	85.4%	20.8%	79.2%	
gender	Female	17.8%	82.2%	28.9%	71.1%	
	Total	16.2%	83.8%	24.9%	75.1%	
	18-24 years	17.8%	82.2%	16.9%	83.1%	
	25-44 years	13.8%	86.2%	19.7%	80.3%	
age	45-64 years	19.8%	80.2%	25.4%	74.6%	
	65 years and over	13.5%	86.5%	30.7%	69.3%	
	Total	16.2%	83.8%	24.7%	75.3%	
	less than \$30k	12.8%	87.2%	32.6%	67.4%	
	\$30-70k	16.0%	84.0%	25.2%	74.8%	
household income	\$70-100k	11.5%	88.5%	29.1%	70.9%	
	\$100k and over	17.0%	83.0%	18.0%	82.0%	
	Total	15.0%	85.0%	24.9%	75.1%	
knowledge of	bilingual	17.1%	82.9%			
English and	unilingual English	12.5%	87.5%			
French	Total	16.2%	83.8%			

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q57A. Do you provide (unpaid) care for a vulnerable or dependent person?

English-speaking females were more likely to report providing unpaid care for a vulnerable or dependent person (17.8%) than were their male counterparts (14.6%).

Across age groups, English speakers who were aged 45-64 years were the most likely to report providing unpaid care for a vulnerable or dependent person (19.8%) while those aged 65 years and over were the least likely (13.5%).

With respect to income, those who earned \$100k and over were the most likely to report providing unpaid care for a vulnerable or dependent person (17.0%) while those earning \$70-100k were the least likely (11.5%).

English-speakers who were bilingual were more likely to report providing unpaid care for a vulnerable or dependent person (17.1%) than their unilingual English counterparts (12.5%).

24.1.5 Source of Support Services for those Providing Unpaid Care

Source of Support Services for those Providing Unpaid Care Among Anglophones

Region	public health and social service institution	private services	community organization	family and friends close-by	I have no access to support services
061 Ouest-de-l'Île-de-Montréal (n=74)	32.2%	7.8%	13.3%	36.0%	10.7%
062 Centre-Ouest-de-l'Île-de-Montréal (n=68)	27.5%	7.7%	15.6%	37.5%	11.7%
063 Centre-Sud-de-l'Île-de-Montréal (n=31)	7.1%	25.4%	5.3%	29.5%	32.7%
064 Nord-de-l'Île-de-Montréal (n=48)	46.8%	1.1%	-	43.0%	9.1%
131 Laval (n=50)	40.1%	8.7%	1.2%	25.9%	24.0%
163 Montérégie-Ouest (n=40)	27.4%	15.6%	3.7%	48.1%	5.2%
Total (n=468)	34.6%	8.0%	7.0%	38.3%	12.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who provide unpaid care for a vulnerable or dependent person (Q57A):Q57B. Where do you turn for support services? (respite care, counselling, home care assistance) ONLY ONE POSSIBLE ANSWER

Source of Support Services for those Providing Unpaid Care Among Anglophones

	Variable	public health and social service institution	private services	community organization	family and friends close-by	I have no access to support services
	Male (n=149)	41.7%	8.8%	1.8%	37.6%	10.0%
gender	Female (n=319)	28.8%	7.4%	11.3%	38.8%	13.8%
	Total (n=468)	34.6%	8.0%	7.0%	38.3%	12.1%
	25-44 years (n=51)	44.2%	8.8%	16.2%	23.2%	7.6%
	45-64 years (n=259)	31.1%	9.6%	2.2%	39.8%	17.2%
age	65 years and over (n=145)	35.9%	4.5%	5.2%	38.2%	16.1%
	Total (n=461)	34.7%	7.6%	7.0%	38.5%	12.2%
	less than \$30k (n=54)	50.8%	3.0%	5.3%	26.5%	14.4%
	\$30-70k (n=118)	22.8%	1.5%	12.7%	43.9%	19.1%
household income	\$70-100k (n=61)	35.0%	11.8%	1.8%	41.3%	10.2%
meome	\$100k and over (n=121)	26.1%	18.0%	1.2%	44.5%	10.2%
	Total (n=354)	29.6%	9.7%	5.6%	41.4%	13.7%
	bilingual (n=382)	33.1%	8.9%	7.6%	39.1%	11.3%
English and	unilingual English (n=86)	42.6%	3.5%	3.6%	33.9%	16.4%
French	Total (n=468)	34.6%	8.0%	7.0%	38.3%	12.1%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who provide unpaid care for a vulnerable or dependent person (Q57A):Q57B. Where do you turn for support services? (respite care, counselling, home care assistance) ONLY ONE POSSIBLE ANSWER

Source of Support Services for those Providing Unpaid Care Among Francophones

	Variable	public health and social service institution	private services	community organization	family and friends close-by	I have no access to support services
	Male (n=86)	25.2%	4.4%	9.1%	26.0%	35.3%
gender	Female (n=179)	29.6%	4.9%	3.0%	27.6%	34.9%
	Total (n=265)	27.8%	4.7%	5.5%	26.9%	35.1%
	25-44 years (n=38)	40.9%	5.1%	7.5%	27.4%	19.1%
2.50	45-64 years (n=41)	32.4%	2.5%	2.5%	30.4%	32.2%
age	65 years and over (n=180)	20.8%	4.9%	6.4%	24.8%	43.2%
	Total (n=263)	28.2%	4.2%	5.6%	27.3%	34.7%
	less than \$30k (n=49)	28.3%	1.8%	5.2%	36.4%	28.3%
	\$30-70k (n=87)	27.5%	2.5%	6.6%	27.8%	35.6%
household income	\$70-100k (n=43)	32.5%	2.1%	1.9%	34.7%	28.9%
	\$100k and over (n=46)	31.5%	8.5%	1.9%	19.1%	39.1%
	Total (n=225)	29.7%	3.6%	4.1%	29.1%	33.4%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who provide unpaid care for a vulnerable or dependent person (Q57A):Q57B. Where do you turn for support services? (respite care, counselling, home care assistance) ONLY ONE POSSIBLE ANSWER

24.1.6 Satisfaction with English-language Caregiver Support Services

Satisfaction with English-language Caregiver Support Services

Region	1-Not satisfied at all	2	3	4	5-Totally satisfied
061 Ouest-de-l'Île-de-Montréal (n=57)	7.5%	22.7%	40.1%	14.0%	15.7%
062 Centre-Ouest-de-l'Île-de-Montréal (n=47)	9.8%	15.1%	11.2%	17.8%	46.0%
064 Nord-de-l'Île-de-Montréal (n=38)	41.4%	3.5%	11.9%	21.1%	22.1%
131 Laval (n=42)	28.3%	18.9%	36.0%	9.0%	7.8%
163 Montérégie-Ouest (n=31)	8.0%	30.0%	30.0%	16.4%	15.6%
Total (n=361)	19.5%	16.8%	23.2%	18.8%	21.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who provide unpaid care for a vulnerable or dependent person (Q57A):Q57C. How satisfied are you with the caregiver support services offered in your region in English?

Among English speakers who provided unpaid care, 19.5% were not at all satisfied with local English-language caregiver support services.

English speakers in RTS du Nord-de-l'Île-de-Montréal (41.4%) and RTS de Laval (28.3%) were the most likely to report not being satisfied at all with Englishlanguage Caregiver Support Services.

English speakers in RTS de l'Ouest-del'Île-de-Montréal (7.5%) and RTS de la Montérégie-Ouest (8.0%) were the least likely to report not being satisfied at all with English-language Caregiver Support Services.

Satisfaction with English-language Caregiver Support Services

	Variable	1-Not satisfied at all	2	3	4	5-Totally satisfied
	Male (n=126)	15.5%	13.6%	25.0%	24.0%	21.8%
gender	Female (n=235)	23.4%	19.8%	21.5%	13.7%	21.5%
	Total (n=361)	19.5%	16.8%	23.2%	18.8%	21.7%
	25-44 years (n=38)	18.6%	21.2%	18.9%	24.5%	16.8%
	45-64 years (n=198)	23.4%	17.3%	26.7%	16.9%	15.6%
age	65 years and over (n=116)	14.0%	12.0%	34.4%	20.0%	19.7%
	Total (n=355)	18.8%	16.8%	23.4%	19.0%	22.0%
	less than \$30k (n=48)	40.4%	1.5%	25.1%	15.9%	17.0%
	\$30-70k (n=92)	21.3%	15.0%	18.0%	14.5%	31.3%
household income	\$70-100k (n=46)	2.0%	37.0%	25.3%	18.0%	17.7%
meome	\$100k and over (n=87)	21.1%	17.2%	22.7%	16.5%	22.4%
	Total (n=273)	21.5%	16.8%	21.8%	15.9%	24.0%
knowledge of	bilingual (n=286)	19.0%	18.6%	19.0%	18.8%	24.6%
English and	unilingual English (n=74)	22.1%	7.8%	44.0%	18.8%	7.3%
French	Total (n=360)	19.6%	16.8%	23.2%	18.8%	21.7%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. For those who provide unpaid care for a vulnerable or dependent person (Q57A):Q57C. How satisfied are you with the caregiver support services offered in your region in English?

English-speaking females who provided unpaid care were more likely to report they were not at all satisfied with local English-language caregiver support services (23.4%) than were their male counterparts (15.5%).

Across age groups, English speakers who provided unpaid care who were aged 45-64 years were the most likely to report they were not at all satisfied with local English-language caregiver support services (23.4%).

With respect to income, those who provided unpaid care who earned less than \$30k were the most likely to report they were not at all satisfied with local English-language caregiver support services (40.4%) while those earning \$70-100k were the least likely (2.0%).

English-speakers who provided unpaid care who were unilingual English were more likely to report they were not at all satisfied with local English-language caregiver support services (22.1%) than their bilingual counterparts (19.0%).

24.1.7 Provide Unpaid Care for Someone Other Than a Relative

Provide Unpaid Care for Someone Other Than a Relative

Region	yes	no	
061 Ouest-de-l'Île-de-Montréal (n=87)	23.3%	76.7%	
062 Centre-Ouest-de-l'Île-de-Montréal (n=74)	13.5%	86.5%	
063 Centre-Sud-de-l'Île-de-Montréal (n=37)	21.0%	79.0%	
064 Nord-de-l'Île-de-Montréal (n=50)	14.5%	85.5%	
071 Outaouais (n=31)	5.4%	94.6%	
131 Laval (n=55)	8.2%	91.8%	
163 Montérégie-Ouest (n=44)	11.0%	89.0%	
Total (n=514)	18.4%	81.6%	

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who provide unpaid care for a vulnerable or dependent person (Q57A):Q58. Do you provide (unpaid) care for someone other than a relative? Among English speakers who provided unpaid care to a vulnerable or dependent person, 18.4% did so for someone other than a relative.

English speakers who provided unpaid care to a vulnerable or dependent person in the region of RTS de l'Outaouais (5.4%) were the least likely to report doing so for someone other than a relative.

Provide Unpaid Care for Someone Other Than a Relative

	Variable	yes	no
	Male (n=164)	18.9%	81.1%
gender	Female (n=350)	4) 18.9% 350) 17.9% 4) 18.4% (n=55) 18.3% (n=274) 12.1% dover (n=169) 29.4% 5) 18.1% 30k (n=57) 20.5% 130) 16.7% =71) 16.6% over (n=129) 16.4% 7) 17.0% =417) 16.7% English (n=96) 27.8%	82.1%
	Total (n=514)		81.6%
	25-44 years (n=55)	18.3%	81.7%
2.00	45-64 years (n=274)	12.1%	87.9%
age	65 years and over (n=169)	29.4%	70.6%
	Total (n=506)	18.1%	81.9%
	less than \$30k (n=57)	20.5%	79.5%
	\$30-70k (n=130)	16.7%	83.3%
household income	\$70-100k (n=71)	16.6%	83.4%
meome	\$100k and over (n=129)	16.4%	83.6%
	Total (n=387)	18.9% 17.9% 18.4% 18.4% 18.3% 12.1% 12.1% 12.1% 16.5% 18.3% 16.6% 17.0% 16.7% 17.0% 17.0% 18.1%	83.0%
knowledge of	bilingual (n=417)	16.7%	83.3%
English and	unilingual English (n=96)	27.8%	72.2%
French	Total (n=513)	18.4%	81.6%
	·		

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who provide unpaid care for a vulnerable or dependent person (Q57A):Q58. Do you provide (unpaid) care for someone other than a relative?

English-speaking males who provided unpaid care to a vulnerable or dependent person were more likely to report doing so for someone other than a relative (18.9%) than were their female counterparts (17.9%).

Across age groups, English speakers who provided unpaid care to a vulnerable or dependent person who were aged 65 years and over were the most likely to report doing so for someone other than a relative (29.4%) while those aged 45-64 years were the least likely (12.1%).

With respect to income, those who provided unpaid care to a vulnerable or dependent person who earned less than \$30k were the most likely to report doing so for someone other than a relative (20.5%) while those earning \$100k and over were the least likely (16.4%).

English-speakers who provided unpaid care to a vulnerable or dependent person who were unilingual English were more likely to report doing so for someone other than a relative (27.8%) than their bilingual counterparts (16.7%).

25 Language of Social Contacts with Friends

25.1.1 Language of Social Contacts with Friends

Language of Social Contacts with Friends

Region	in English	in French	Both English and French	or in another language	English and another language	Both English and French and in another language
031 Capitale-Nationale (n=202)	12.9%	17.5%	67.5%	-	0.2%	1.9%
051 Estrie – CHU de Sherbrooke (n=106)	41.8%	0.8%	57.4%	-	-	-
061 Ouest-de-l'Île-de-Montréal (n=484)	55.3%	0.5%	38.2%	1.6%	1.8%	2.4%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	72.1%	0.3%	17.5%	2.0%	6.9%	1.1%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	54.8%	2.1%	30.9%	2.1%	4.5%	5.6%
064 Nord-de-l'Île-de-Montréal (n=251)	38.0%	6.0%	41.7%	8.6%	2.1%	3.6%
065 Est-de-l'Île-de-Montréal (n=215)	48.1%	0.3%	46.5%	1.3%	1.5%	2.4%
071 Outaouais (n=200)	55.0%	4.2%	38.9%	1.0%	-	1.0%
111 Gaspésie (n=75)	56.0%	7.4%	36.5%	-	-	-
131 Laval (n=257)	54.2%	1.5%	35.7%	1.2%	3.4%	4.0%
141 Lanaudière (n=75)	10.8%	6.1%	79.9%	-	0.3%	2.8%
151 Laurentides (n=110)	48.6%	4.2%	46.3%	-	-	0.9%
161 Montérégie-Centre (n=150)	57.3%	1.0%	36.7%	2.0%	0.9%	2.0%
162 Montérégie-Est (n=77)	27.8%	3.0%	62.7%	-	3.2%	3.3%
163 Montérégie-Ouest (n=240)	56.0%	1.2%	39.5%	1.3%	1.6%	0.4%
Total (n=3,133)	53.8%	2.0%	37.2%	2.0%	2.7%	2.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q59. Do your social contacts with friends generally take place...

Among English speakers, 53.8% reported that their social contacts with friends generally took place in English.

We observe that English-speakers in the regions of RTS du Centre-Ouest-de-l'Île-de-Montréal (72.1%), RTS de la Montérégie-Centre (57.3%) and RTS de la Montérégie-Ouest (56.0%) were the most likely to report that their social contacts with friends generally took place in English.

English speakers in the regions of RTS de Lanaudière (10.8%), RTS de la Capitale-Nationale (12.9%) and RTS de la Montérégie-Est (27.8%) were the least likely to report that their social contacts with friends generally took place in English.

Language of Social Contacts with Friends

	Variable	in English	in French	Both English and French	or in another language	English and another language	Both English and French and in another language
	Male	53.3%	2.2%	38.7%	1.8%	1.7%	2.3%
gender	Female	54.4%	1.8%	35.7%	2.2%	3.7%	2.2%
	Total	53.8%	2.0%	37.2%	2.0%	2.7%	2.3%
	18-24 years	56.5%	4.9%	31.5%	-	2.3%	4.7%
	25-44 years	53.0%	1.4%	39.0%	3.4%	2.7%	0.5%
age	45-64 years	52.9%	1.5%	38.4%	1.4%	3.1%	2.7%
	65 years and over	54.9%	2.0%	35.9%	1.8%	2.1%	3.3%
	Total	53.7%	2.0%	37.3%	2.0%	2.7%	2.3%
	less than \$30k	57.7%	2.5%	29.8%	4.7%	4.4%	0.9%
la a consideration	\$30-70k	53.0%	1.8%	35.9%	2.7%	3.4%	3.1%
household	\$70-100k	54.1%	1.4%	37.9%	1.5%	3.3%	1.9%
Income	\$100k and over	54.7%	2.3%	39.2%	0.6%	1.2%	2.1%
	Total	54.5%	2.0%	36.5%	2.0%	2.8%	2.2%
knowledge of	bilingual	48.0%	2.2%	42.9%	1.7%	2.5%	2.7%
English and	unilingual English	77.9%	1.2%	13.7%	3.2%	3.5%	0.5%
French	Total	53.9%	2.0%	37.2%	2.0%	2.7%	2.3%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey. Q59. Do your social contacts with friends generally take place...

English-speaking females were more likely to report that their social contacts with friends generally took place in English (54.4%) than were their male counterparts (53.3%).

Across age groups, English speakers who were aged 18-24 years were the most likely to report that their social contacts with friends generally took place in English (56.5%) while those aged 45-64 years were the least likely (52.9%).

With respect to income, those who earned less than \$30k were the most likely to report that their social contacts with friends generally took place in English (57.7%) while those earning \$30-70k were the least likely (53.0%).

English-speakers who were unilingual English were more likely to report that their social contacts with friends generally took place in English (77.9%) than their bilingual counterparts (48.0%).

26 Confidence in the Future of the English-speaking Community

26.1.1 Confident in the Future of the Local English-speaking Community

Confident in the Future of the Local English-speaking Community

Yes	No
57.0%	43.0%
54.5%	45.5%
63.0%	37.0%
67.6%	32.4%
58.4%	41.6%
57.5%	42.5%
39.6%	60.4%
57.2%	42.8%
58.1%	41.9%
42.4%	57.6%
41.1%	58.9%
54.7%	45.3%
41.8%	58.2%
38.9%	61.1%
68.5%	31.5%
56.9%	43.1%
	57.0% 54.5% 63.0% 67.6% 58.4% 57.5% 39.6% 57.2% 58.1% 42.4% 41.1% 54.7% 41.8% 38.9% 68.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q60A. Are you confident about the future of the English-speaking community in your region?

Among English speakers, 56.9% reported they were confident about the future of their local English-speaking community.

We observe that English-speakers in the regions of RTS de la Montérégie-Ouest (68.5%), RTS du Centre-Ouest-de-l'Île-de-Montréal (67.6%) and RTS de l'Ouest-de-l'Île-de-Montréal (63.0%) were the most likely to report they were confident about the future of their local English-speaking community.

English speakers in the regions of RTS de la Montérégie-Est (38.9%), RTS de l'Est-de-l'Île-de-Montréal (39.6%) and RTS de Lanaudière (41.1%) were the least likely to report they were confident about the future of their local English-speaking community.

Confident in the Future of the Local English-speaking Community

	Variable	Yes	No	
	Male	64.2%	35.8%	
gender	Female	49.5%	50.5%	
	Total	56.9%	43.1%	
	18-24 years	78.5%	21.5%	
	25-44 years	55.7%	44.3%	
age	45-64 years	50.4%	49.6%	
	65 years and over	58.1%	41.9%	
	Total	57.2%	42.8%	
	less than \$30k	62.3%	37.7%	
	\$30-70k	52.0%	48.0%	
household income	\$70-100k	61.2%	38.8%	
meome	\$100k and over	58.4%	41.6%	
	Total	57.5%	42.5%	
knowledge of	bilingual	57.4%	42.6%	
English and	unilingual English	55.0%	45.0%	
French	Total	56.9%	43.1%	

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q60A. Are you confident about the future of the English-speaking community in your region?

English-speaking males were more likely to report they were confident about the future of their local English-speaking community (64.2%) than were their female counterparts (49.5%).

Across age groups, English speakers who were aged 18-24 years were the most likely to report they were confident about the future of their local English-speaking community (78.5%) while those aged 45-64 years were the least likely (50.4%).

With respect to income, those who earned less than \$30k were the most likely to report they were confident about the future of their local English-speaking community (62.3%) while those earning \$30-70k were the least likely (52.0%).

English-speakers who were bilingual were more likely to report they were confident about the future of their local English-speaking community (57.4%) than their unilingual English counterparts (55.0%).

26.1.2 Reasons to Feel Confident About the Future of the Local English-speaking Community

Reasons to Feel Confident About the Future of the Local English-speaking Community

Region	There are a lot of English-speaking people where I live	English-speaking people are a strong community / Stick togeter	Possible to receive services in English	Anglophones and Francophones get along well	English speaking community has been / will be in Quebec for a long time	I never had a problem / No reason to worry	English is a universal language/Most people are bilingual	Children today are bilingual from early age/English taught in School	Rights protected by organizations / laws / government	Other
031 Capitale-Nationale (n=92)	34.7%	14.9%	6.6%	8.1%	4.4%	4.0%	6.6%	5.6%	0.7%	7.4%
051 Estrie – CHU de Sherbrooke (n=52)	25.3%	3.7%	2.5%	21.2%	2.9%	0.7%	8.8%	0.4%	1.2%	35.0%
061 Ouest-de-l'Île-de-Montréal (n=238)	55.6%	19.5%	3.6%	7.5%	4.4%	2.6%	2.8%	1.5%	0.8%	0.7%
062 Centre-Ouest-de-l'Île-de-Montréal (n=258)	49.1%	12.1%	4.3%	5.7%	4.2%	12.3%	3.5%	0.8%	2.7%	2.9%
063 Centre-Sud-de-l'Île-de-Montréal (n=110)	49.5%	21.3%	2.5%	9.6%	5.9%	3.1%	3.4%	0.2%	1.7%	4.3%
064 Nord-de-l'Île-de-Montréal (n=103)	36.3%	19.3%	9.1%	20.4%	1.7%	3.1%	5.1%	1.3%	0.5%	2.5%
065 Est-de-l'Île-de-Montréal (n=70)	44.4%	30.9%	2.5%	9.8%	-	0.7%	2.5%	3.4%	-	2.2%
071 Outaouais (n=114)	62.5%	6.3%	5.9%	14.0%	1.6%	2.8%	4.1%	0.5%	4.3%	1.9%
111 Gaspésie (n=40)	37.6%	30.3%	4.1%	6.1%	6.5%	4.0%	-	1.3%	6.0%	4.9%
131 Laval (n=96)	52.4%	9.9%	5.4%	14.5%	4.8%	7.4%	2.9%	1.5%	0.4%	2.4%
151 Laurentides (n=46)	47.4%	5.0%	1.0%	3.2%	26.4%	-	5.7%	0.6%	1.8%	3.5%
161 Montérégie-Centre (n=52)	62.5%	12.1%	8.5%	5.3%	6.9%	5.8%	4.3%	1.8%	2.0%	-
163 Montérégie-Ouest (n=120)	51.0%	12.0%	7.3%	8.5%	7.0%	2.0%	8.6%	1.6%	4.4%	2.9%
Total (n=1,445)	49.6%	15.1%	4.8%	9.8%	5.0%	4.9%	4.3%	1.3%	1.9%	3.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

For those who do feel confident about the future of their local English-speaking community (Q60A):Q60B. Why do you feel confident about the future of the English-speaking community in your region?

Reasons to Feel Confident About the Future of the Local English-speaking Community

	Variable	There are a lot of English- speaking people where I live	English-speaking people are a strong community / Stick togeter	Possible to receive services in English	Anglophones and Francophones get along well	English speaking community has been / will be in Quebec for a long time		English is a universal language/Most people are bilingual	Children today are bilingual from early age/English taught in	Rights protected by organizations / laws / government	Other
	Male (n=623)	47.4%	17.2%	3.2%	9.5%	6.3%	5.6%	3.6%	1.0%	1.3%	4.6%
gender	Female (n=822)	52.5%	12.4%	6.8%	10.2%	3.3%	4.1%	5.2%	1.7%	2.6%	2.0%
	Total (n=1,445)	49.6%	15.1%	4.8%	9.8%	5.0%	4.9%	4.3%	1.3%	1.9%	3.5%
	18-24 years (n=42)	64.5%	9.7%	2.7%	7.7%	0.6%	13.0%	0.4%	-	-	1.1%
•	25-44 years (n=161)	52.7%	19.4%	4.5%	5.9%	6.4%	0.4%	3.2%	0.8%	1.6%	4.9%
age	45-64 years (n=615)	43.5%	15.1%	5.8%	11.4%	4.3%	3.9%	8.3%	2.7%	2.6%	3.3%
	65 years and over (n=615)	38.5%	12.8%	6.1%	17.1%	7.3%	7.3%	3.9%	1.2%	2.9%	3.7%
	Total (n=1,433)	49.6%	15.2%	4.8%	9.9%	4.9%	5.0%	4.3%	1.3%	1.8%	3.5%
	less than \$30k (n=222)	33.0%	22.8%	6.7%	14.2%	5.8%	4.4%	3.8%	0.9%	2.5%	3.2%
ĺ	\$30-70k (n=375)	47.7%	12.4%	4.9%	15.1%	6.7%	3.5%	5.0%	1.2%	1.6%	2.7%
household income	\$70-100k (n=203)	48.0%	17.1%	4.4%	7.8%	4.3%	2.2%	5.6%	1.5%	3.6%	2.4%
	\$100k and over (n=321)	59.1%	14.1%	4.5%	7.2%	5.7%	1.9%	4.9%	1.9%	1.7%	2.6%
	Total (n=1,121)	49.4%	15.6%	5.0%	10.7%	5.7%	2.8%	4.9%	1.4%	2.2%	2.7%
knowledge of	bilingual (n=1,109)	50.0%	14.5%	3.8%	10.6%	5.6%	4.8%	4.4%	1.2%	1.9%	3.8%
	unilingual English (n=335)	47.8%	18.0%	8.9%	6.5%	2.4%	5.4%	3.7%	1.4%	1.5%	2.1%
French	Total (n=1,444)	49.6%	15.1%	4.8%	9.8%	5.0%	4.9%	4.3%	1.3%	1.9%	3.5%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who do feel confident about the future of their local English-speaking community (Q60A):Q60B. Why do you feel confident about the future of the English-speaking community in your region?

26.1.3 Reasons to Not Feel Confident About the Future of the Local English-speaking Community

Reasons to Not Feel Confident About the Future of the Local English-speaking Community

Region	Few(er) English- speaking people in my community	Access to health and social services in English	I live in a Francophone area / Everything is in French	Anglophones	Quebec government does not support the English speaking community	There are no signs in English / Small lettering in signs	immigrants /	Few/Decrease of services / information in English	Decreasing access to English schools	No respect / Hostility toward English- speakers	Stricter French language protection laws	More (job) opportunities for English speakers outside Quebec
031 Capitale-Nationale (n=73)	17.7%	5.6%	39.2%	4.2%	9.3%	-	0.5%	4.6%	0.4%	2.8%	6.1%	0.1%
051 Estrie – CHU de Sherbrooke (n=51)	28.3%	13.1%	19.2%	10.9%	15.9%	-	-	7.1%	1.9%	0.8%	14.1%	1.5%
061 Ouest-de-l'Île-de-Montréal (n=188)	19.6%	5.0%	11.7%	2.4%	27.5%	0.5%	1.8%	7.0%	6.3%	15.9%	3.5%	1.7%
062 Centre-Ouest-de-l'Île-de-Montréal (n=145)	17.5%	8.3%	6.7%	14.6%	29.9%	1.6%	-	7.0%	4.5%	6.6%	5.7%	-
063 Centre-Sud-de-l'Île-de-Montréal (n=84)	8.1%	4.4%	12.9%	1.6%	14.2%	0.1%	5.2%	5.1%	20.2%	7.4%	2.3%	-
064 Nord-de-l'Île-de-Montréal (n=111)	15.9%	8.1%	28.5%	6.1%	17.6%	1.8%	1.4%	5.5%	5.3%	4.7%	6.9%	1.3%
065 Est-de-l'Île-de-Montréal (n=126)	15.5%	7.2%	30.0%	5.4%	11.9%	5.7%	1.4%	7.0%	5.0%	4.6%	0.2%	0.3%
071 Outaouais (n=68)	11.8%	7.5%	22.3%	2.9%	9.1%	1.3%	-	13.4%	0.6%	7.7%	7.2%	3.0%
111 Gaspésie (n=31)	30.7%	-	23.8%	13.0%	3.4%	1.7%	-	14.4%	6.9%	10.6%	0.9%	9.1%
131 Laval (n=143)	25.9%	7.9%	29.1%	5.4%	13.1%	-	1.0%	6.2%	6.9%	7.0%	5.6%	-
141 Lanaudière (n=40)	13.9%	0.6%	25.9%	3.4%	5.3%	-	0.6%	10.5%	2.4%	-	0.3%	1.7%
151 Laurentides (n=51)	38.4%	1.5%	16.0%	3.1%	14.7%	4.9%	-	13.0%	0.7%	14.7%	6.6%	-
161 Montérégie-Centre (n=82)	31.1%	1.6%	20.0%	1.1%	17.8%	-	2.3%	3.9%	2.8%	15.7%	2.6%	-
162 Montérégie-Est (n=46)	48.7%	5.7%	31.4%	3.5%	0.9%	4.2%	-	5.6%	-	6.7%	-	-
163 Montérégie-Ouest (n=88)	32.7%	9.1%	11.0%	3.7%	27.2%	1.4%	-	8.7%	2.4%	4.4%	3.1%	-
Total (n=1,327)	21.3%	6.5%	19.4%	5.4%	18.2%	1.5%	1.2%	7.2%	5.4%	8.3%	4.5%	0.8%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who do not feel confident about the future of their local English-speaking community (Q60A):Q60C. Why do you not feel confident about the future of the English-speaking community in your region?

Reasons to Not Feel Confident About the Future of the Local English-speaking Community

	Variable	Few(er) English- speaking people in my community	Access to health and social services in English	I live in a Francophon e area / Everything is in French	Young Anglophone s are leaving Quebec	Quebec government does not support the English speaking	There are no signs in English / Small lettering in	Influx of non- English speaking immigrants / Immigrant	Few/Decreas e of services / information in English	Decreasing	No respect / Hostility toward English- speakers	Stricter French language protection laws	More (job) opportunities for English speakers outside
	Male (n=447)	25.7%	4.9%	18.5%	4.3%	19.1%	0.9%	0.6%	3.7%	7.5%	8.1%	5.1%	0.9%
gender	Female (n=880)	18.1%	7.6%	20.1%	6.2%	17.6%	2.0%	1.7%	9.8%	3.9%	8.5%	4.0%	0.6%
	Total (n=1,327)	21.3%	6.5%	19.4%	5.4%	18.2%	1.5%	1.2%	7.2%	5.4%	8.3%	4.5%	0.8%
	18-24 years (n=20)	21.3%	7.2%	10.4%	5.1%	26.0%	=	-	11.3%	2.9%	5.1%	12.9%	-
	25-44 years (n=142)	15.7%	5.1%	24.6%	5.0%	13.0%	1.9%	0.8%	2.6%	6.8%	12.1%	2.3%	0.8%
age	45-64 years (n=637)	25.2%	8.7%	17.1%	5.7%	19.9%	1.1%	2.0%	10.5%	4.3%	6.0%	4.7%	0.6%
	65 years and over (n=498)	27.1%	5.1%	16.4%	6.1%	20.0%	2.4%	1.0%	9.1%	5.4%	5.0%	5.8%	1.3%
	Total (n=1,297)	21.7%	6.6%	19.3%	5.5%	17.7%	1.5%	1.3%	7.3%	5.3%	8.1%	4.5%	0.8%
	less than \$30k (n=153)	16.6%	4.1%	23.3%	6.9%	14.0%	9.5%	1.3%	9.1%	2.1%	6.0%	3.7%	0.4%
l	\$30-70k (n=342)	16.7%	4.0%	33.3%	5.7%	10.0%	1.0%	1.4%	5.6%	9.3%	5.8%	6.3%	0.2%
household income	\$70-100k (n=179)	22.5%	16.7%	18.9%	6.1%	15.0%	0.5%	1.0%	8.8%	3.2%	7.7%	1.1%	1.2%
meonie	\$100k and over (n=291)	20.2%	4.5%	12.5%	2.6%	30.9%	0.6%	1.7%	7.2%	3.9%	12.1%	3.6%	1.7%
	Total (n=965)	18.9%	6.4%	22.5%	4.9%	18.4%	1.9%	1.4%	7.2%	5.5%	8.2%	4.2%	0.9%
knowledge of	bilingual (n=1,015)	21.6%	6.9%	20.6%	4.7%	19.0%	1.4%	1.3%	6.8%	6.1%	8.0%	3.7%	0.8%
English and	unilingual English (n=311)	20.2%	5.0%	14.7%	8.1%	15.2%	1.8%	1.1%	8.7%	2.9%	9.6%	7.5%	0.5%
French	Total (n=1,326)	21.3%	6.5%	19.4%	5.4%	18.2%	1.5%	1.2%	7.2%	5.4%	8.3%	4.5%	0.8%

Source: IPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.
For those who do not feel confident about the future of their local English-speaking community (Q60A):Q60C. Why do you not feel confident about the future of the English-speaking community in your region?

26.1.4 Most Important Issues for the English-speaking Community

Most Important Issues for the English-speaking Community

Region	jobs	education / schools	health care	access to public services in English	young anglophones leaving / shrinking community	equal rights for anglophones / discrimination	/ gov.	billinguism	Better written information in English	Learning to speak French	Protect English community/ Save English culture	Communication / Getting information in English	Entertainment in English / Social activities in English	The right to speak freely	Nothing
031 Capitale-Nationale (n=202)	14.4%	46.1%	32.8%	34.3%	4.0%	2.1%	0.8%	1.5%	5.6%	5.5%	1.7%	0.5%	0.8%	-	16.0%
051 Estrie – CHU de Sherbrooke (n=106)	22.3%	25.8%	31.0%	26.9%	11.7%	4.2%	0.9%	0.3%	1.0%	-	2.0%	0.9%	-	18.3%	5.8%
061 Ouest-de-l'Île-de-Montréal (n=484)	13.0%	35.0%	35.3%	31.0%	9.9%	5.9%	3.5%	3.5%	0.8%	1.7%	3.9%	1.8%	0.4%	1.9%	10.0%
062 Centre-Ouest-de-l'Île-de-Montréal (n=465)	13.9%	30.8%	28.0%	35.3%	15.7%	9.7%	1.1%	0.8%	1.5%	0.3%	4.7%	1.2%	0.7%	4.3%	7.2%
063 Centre-Sud-de-l'Île-de-Montréal (n=226)	19.6%	30.4%	23.7%	36.5%	14.8%	1.9%	0.3%	0.8%	0.2%	1.3%	0.5%	0.2%	-	0.5%	19.2%
064 Nord-de-l'Île-de-Montréal (n=251)	13.1%	27.9%	30.1%	43.9%	4.6%	8.0%	1.8%	3.5%	0.8%	0.1%	1.9%	0.8%	1.1%	2.2%	13.1%
065 Est-de-l'Île-de-Montréal (n=215)	20.7%	33.6%	32.4%	33.8%	10.0%	10.0%	0.9%	0.6%	0.1%	0.9%	0.3%	0.4%	1.8%	2.7%	13.6%
071 Outaouais (n=200)	9.7%	23.3%	40.4%	37.9%	4.1%	4.3%	1.7%	1.9%	0.3%	4.1%	0.4%	1.7%	2.3%	3.2%	8.6%
111 Gaspésie (n=75)	23.1%	24.0%	47.4%	37.4%	26.1%	1.7%	0.5%	0.7%	5.3%	1.5%	-	2.7%	-	-	3.8%
131 Laval (n=257)	9.8%	22.6%	29.5%	42.0%	9.4%	5.3%	5.9%	2.0%	0.4%	0.7%	0.9%	3.9%	3.9%	0.6%	11.7%
141 Lanaudière (n=75)	19.6%	26.9%	29.2%	45.7%	10.3%	6.0%	0.9%	-	24.2%	-	1.2%	1.1%	0.2%	5.0%	7.2%
151 Laurentides (n=110)	8.5%	27.8%	33.5%	23.5%	3.4%	4.8%	9.6%	0.3%	0.1%	-	-	-	14.7%	1.2%	14.7%
161 Montérégie-Centre (n=150)	14.6%	43.2%	33.4%	30.7%	11.1%	8.0%	1.5%	5.8%	1.9%	-	2.1%	5.4%	1.5%	1.4%	7.9%
162 Montérégie-Est (n=77)	35.9%	22.5%	38.3%	25.7%	7.4%	1.2%	-	2.6%	-	10.4%	5.2%	4.9%	2.4%	0.8%	10.0%
163 Montérégie-Ouest (n=240)	8.6%	22.6%	35.9%	40.1%	11.5%	5.1%	7.6%	1.2%	2.8%	0.3%	0.8%	1.9%	4.7%	1.2%	12.6%
Total (n=3,133)	14.2%	29.9%	32.1%	35.3%	10.4%	6.4%	2.8%	2.0%	1.3%	1.2%	2.2%	1.7%	2.0%	2.8%	10.9%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q61. What is, in your opinion, the MOST IMPORTANT issue for the English-speaking community? (PROBE) What is the second most important issue for the English-speaking community?

Most Important Issues for the English-speaking Community

	Variable	jobs	education / schools	health care	access to public services in English	young anglophones leaving / shrinking community	equal rights for anglophones / discrimination	/ gov.	billinguism	Better written information in English	Learning to speak French	Protect English community/ Save English culture	Communication / Getting information in English	Entertainment in English / Social activities in English	The right to speak freely	Nothing
gender	Male	13.3%	30.2%	24.7%	33.4%	11.7%	7.0%	3.5%	1.7%	1.6%	1.1%	2.7%	1.8%	2.6%	4.1%	13.8%
	Female	15.2%	29.5%	39.3%	37.2%	9.1%	5.7%	2.1%	2.2%	1.0%	1.2%	1.8%	1.6%	1.4%	1.5%	8.1%
	Total	14.2%	29.9%	32.1%	35.3%	10.4%	6.4%	2.8%	2.0%	1.3%	1.2%	2.2%	1.7%	2.0%	2.8%	10.9%
age	18-24 years	21.3%	32.5%	12.6%	33.2%	11.5%	3.2%	3.4%	4.9%	-	2.1%	4.6%	1.1%	1	4.6%	16.2%
	25-44 years	14.2%	27.2%	26.9%	37.4%	9.8%	7.7%	3.2%	1.0%	1.9%	1.2%	1.6%	1.3%	4.3%	2.5%	13.1%
	45-64 years	14.5%	33.1%	38.7%	34.2%	9.6%	6.4%	2.3%	1.6%	1.1%	1.0%	2.3%	2.1%	0.9%	3.1%	7.8%
	65 years and over	10.1%	27.6%	43.7%	34.9%	12.5%	5.3%	2.8%	2.4%	1.4%	1.0%	1.5%	2.2%	1.1%	1.7%	8.4%
	Total	14.4%	29.9%	32.2%	35.3%	10.4%	6.3%	2.9%	1.9%	1.3%	1.2%	2.2%	1.7%	2.0%	2.8%	10.8%
	less than \$30k	11.5%	20.6%	35.5%	46.0%	10.1%	8.3%	4.0%	1.2%	0.4%	0.7%	2.7%	2.4%	1.8%	2.0%	8.9%
	\$30-70k	13.9%	26.2%	29.9%	32.8%	12.3%	6.9%	2.3%	1.2%	3.0%	1.8%	1.0%	1.3%	2.8%	0.9%	15.0%
	\$70-100k	19.9%	34.8%	34.2%	34.6%	8.5%	3.6%	2.4%	3.8%	1.0%	2.4%	3.3%	3.6%	0.1%	2.4%	10.5%
	\$100k and over	8.2%	33.8%	32.9%	34.9%	13.2%	9.8%	3.1%	1.1%	1.2%	0.9%	1.0%	0.7%	1.7%	4.2%	11.4%
	Total	12.8%	29.7%	32.6%	35.8%	11.6%	7.5%	2.8%	1.7%	1.6%	1.5%	1.7%	1.7%	1.8%	2.5%	12.0%
English and	bilingual	14.5%	30.7%	30.7%	35.2%	10.1%	6.9%	3.2%	2.0%	1.4%	1.2%	2.4%	1.7%	1.9%	2.3%	11.2%
	unilingual English	13.2%	26.1%	38.3%	35.7%	11.5%	3.9%	0.9%	2.0%	1.0%	0.8%	1.3%	1.5%	2.5%	4.9%	9.6%
	Total	14.2%	29.9%	32.1%	35.3%	10.3%	6.4%	2.8%	2.0%	1.3%	1.2%	2.2%	1.7%	2.0%	2.8%	10.9%

Source: JPocock Research Consulting, from the 2019 CHSSN/CROP Community Health and Social Survey.

Q61. What is, in your opinion, the MOST IMPORTANT issue for the English-speaking community? (PROBE) What is the second most important issue for the English-speaking community?

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