


CHSSN

# Equitable access to health and wellness for English-speaking children, youth, and families

## 2025-2026 YEAR-END REPORT

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Fondation Lucie et André Chagnon

# Acknowledgements

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The views expressed herein do not necessarily represent the views of the Fondation Lucie et André Chagnon.

# Executive Summary

## Overview

**"Equitable access to health and wellness for English-speaking children, youth, and families" *(Accès équitable à la santé et au bien-être pour les enfants, les jeunes et les familles d'expression anglaise)***

**Timeline covered by the report:** April 1, 2025 to March 31, 2026

**Lead organization:** The Community Health and Social Services Network (CHSSN) is a network of over 70 community resources, associations, foundations and other stakeholders dedicated to the development, through partnership, of health and social services for English-speaking communities in Québec. It was founded in 2000 by a group of community leaders who recognized the importance of mobilizing English-speaking communities to ensure access to health and social services in English.

**Purpose:** to improve the well-being and health of English-speaking children, youth and families across Québec

The initiative is implemented through two main programs: the Youth Mental Health Initiative (YMHI) and Bright Beginnings Program (BB).

**Actions:**

- Engagement of hundreds of community, regional and provincial-level partners
- Activities to engage, build solidarity and strengthen skills and capacity of community and regional organizations working with English-speaking children, youth and families
- Direct support for community projects that mobilize partners, engage youth, improve access to services, and develop new resources and programs
- Build relationships with key stakeholders and decision-makers in the field of children, youth and families
- Development of systems-change tools including stakeholder mapping, conceptual frameworks and public policy recommendations

**CHSSN's programs are financed by the Secretariat à la jeunesse (YMHI) and the Public Health Agency of Canada (HEY) with the support of the Lucie and André Chagnon Foundation (BB & YMHI).**

# Results: Youth Mental Health Initiative (YMHI)

## 1.1 CHSSN's Increased Systems-Level Relationship Building and Influence with Youth Mental Health Stakeholders

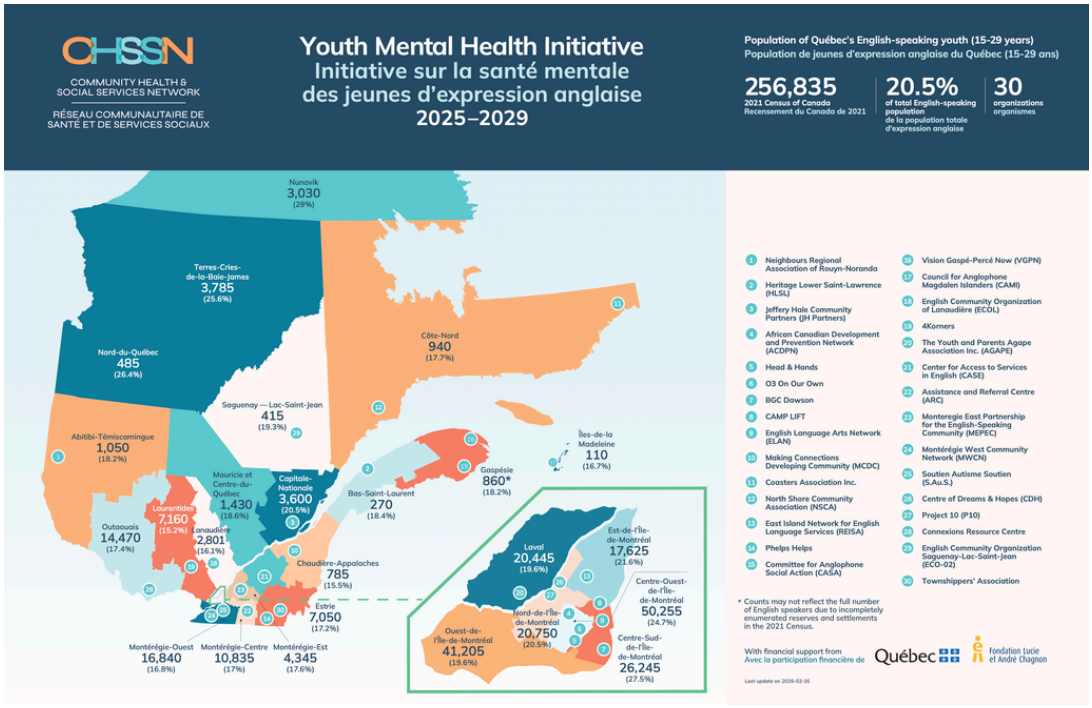
- CHSSN continued in 2025-26 to work towards change in the Québec youth mental health ecosystem, by engaging provincial-level stakeholders and encouraging the inclusion of English-speaking youth in policy consultations and research.

- Through YMHI, English-speaking communities gained greater influence in Québec's youth mental health systems and policies.

- Access was expanded to English-language and culturally relevant mental health resources for youth. In addition to translation, CHSSN successfully encouraged several partners to ensure meaningful linguistic and cultural adaptation of their resources.

- Connections were strengthened between English-speaking community organizations and the wider youth mental health ecosystem.

- Increased capacity for collective action and leadership on English-speaking youth mental health. CHSSN's stakeholder engagement continued to strengthen its role as a coordinating and sector-development organization for English-speaking youth mental health.




*Source: YMHI Map, CHSSN 2025*

# Results: Youth Mental Health Initiative (YMHI)

## 1.2 Community Organizations' Increased Capacity to Advance Youth Mental Health

- In 2025-26, 30 community organizations were active partners in YMHI across all 17 regions of Québec.

- CHSSN offered these organizations many capacity building activities: in-person Mental Health Forum, online Community of Practice, virtual resource centre and group and individual coaching sessions.

- In-person participation was very strong, but participation in the online events and platforms in 2025-26 was lower than previous years, due in part to YMHI's Program Manager being on medical leave, as she held the closest relationships with partner organizations. Plans are underway to increase participation in 2026-27.

- Community organizations increased their ability to address youth mental health in several ways

    - Many organizations reported being more aware of the needs and service gaps for specific populations such as youth in care, Black youth, neurodivergent youth, LGBTQ2S+ youth, rural and isolated youth, and English-speaking youth in low-population regions with limited services.

    - Meaningful linkages with other community organizations, schools, mental health services and programs are being built through YMHI. Networking and relationships with other organizations were reported to be stronger by 96% of organizations.

# Results: Youth Mental Health Initiative (YMHI)

## 1.3 Expanded Youth Engagement and Mental Health Programming

- Over 10,000 young people aged 12-29 took part in the 1740 mental-health related activities and events offered via the community organizations during 2025-26.
- Many of the activities were by and for youth, with youth in leadership roles in event planning or as mental health ambassadors and peer educators.
- 85% of participating community organizations reported improved their engagement of youth within their programs and/or organization as a whole as a result of YMHI.
- However, only 41% reported that they had improved their organization's support for youth in governance or on the board of directors. Based on these findings, CHSSN aims to strengthen this area in coming years.
- Participating community organizations expanded the availability of English-language mental health information for youth by creating, adapting, and translating workshop materials, guides, social media content, pamphlets, resource cards, wellness kits, and presentations.


# Results: Bright Beginnings

Bright Beginnings has experienced much success over the years. Well over a hundred partners have adapted to better reach English-speaking children and families as a consequence of collaborating with regional organizations. Provincial partners have provided opportunities to influence stakeholders and decision-makers as well as create projects to increase awareness, knowledge and community capacity to offer services to English-speaking children and families. There have been many examples of how partners have become allies and champions. For instance, in the early years of Bright Beginnings, Raymond Villeneuve, DG of Regroupement pour la valorisation de la paternité (RVP) began publicly speaking about the necessity of adapting to better reach English-speaking children and families and referring to le réflexe CHSSN. This past year, the Collectif Petite-Enfance included the importance of access to English language health and social services in its **platform of recommendations in advance of the provincial election.**

But there are still stakeholders and potential partners that are reluctant to adapt to better reach English-speaking children and families, despite their knowledge and recognition of the realities of English-speaking children and families. During the past year, CHSSN began exploring and learning more about this reluctance, which led to the development of a new and different provincial-level collaborative project – a how-to guide to making adaptations. Early responses to the first phase have shown promise and will be the focus for the coming year.

| Overview of the BB Program Key Performance Indicators 2019-2026 | | | | | | | |
|---|---|---|---|---|---|---|---|
| **Number of:** | 2019 (Aug-Dec) | 2020 | 2021 | 2022 | 2023 | 2024-25 | 2025-26 |
| Regional organizations funded by BB | 18 | 19 | 21 | 23 | 23 | 23 | 23 |
| Regional organizations BB partners | ----- | 74 | 152 | 195 | 270 | 272 | 275 |
| CHSSN provincial BB partners | 1 | 9 | 9 | 11 | 11 | 12 | 14 |
| Regional orgs collaborative projects | ----- | Not Tracked | Not Tracked | Not Tracked | 172 | 209 | 217 |
| **Success Metric:** | | | | | | | |
| Regional orgs whose partners made changes | ----- | Not Tracked | Not Tracked | Not Tracked | 98 | 134 | 136 |

## 2.1 Regional Organizations' Increased Influence through Partnerships

The regional organizations have built strong and consistent relationships with partners and Tables de concertations over time. During the past year, many recognized new opportunities and had established enough recognition and confidence to develop or join substantive and impactful collaborations with influential partners like CISSSs. Regional organizations continued creating, as well as maintaining, collaborations that led to their partners adapting or making changes to better serve English-speaking children and families, which are leading to shifts in local and regional child and family ecosystems.

Many adaptations or changes were made by new partners or new collaborations with existing partners. Others include adaptations initiated in previous years and maintained. For example, Storytime-Heure du conte en anglais Program, which also developed sessions in Spanish and Arabic, had been scaled throughout the 5 branches of the Bibliothèques de Trois-Rivières. A few adaptations made in previous years by partners weren't maintained, mainly due to changes or challenges at the partner organizations, such as difficulty hiring bilingual staff.

### 2.1.1 Highlights of the types of changes made by partners resulting from regional organizations' collaborations

Collaborations with regional organizations led to 136 of their partners adapting or making changes that created improved access for English-speaking children and families.

The two most frequent types of changes made were partners agreeing: to provide programs bilingually or in English, and to co-animate or jointly offer programs in order to make programs more accessible to English-speaking children and families. This is similar to previous years.

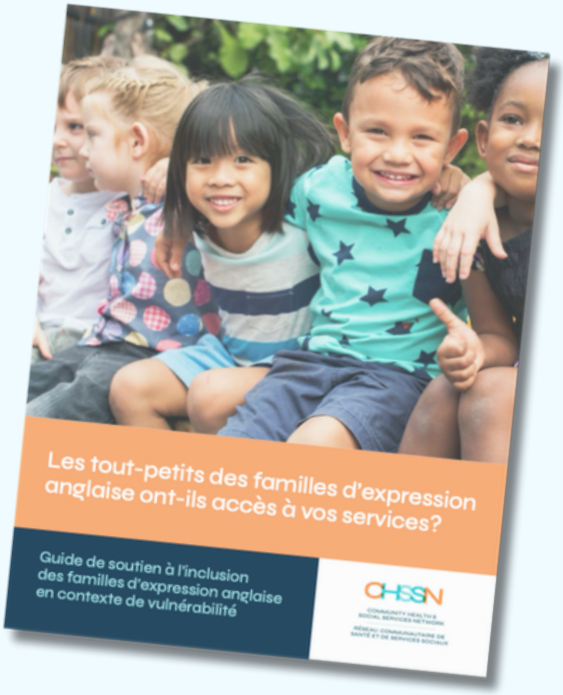
### 2.1.2 Highlights on the kind of partners

- CISSSs: The number of CISSSs collaborating with regional organizations increased during the year, and several regional organizations had multiple collaborations with their CISSS. As one of the most important stakeholders in the child and family ecosystem on local and regional levels, collaborations with CISSSs represent an important result.

- Tables de concertations: the number of tables de concertations collaborating on specific projects to improve access for English-speaking children and families increased significantly, almost doubling from the year before; it had also doubled the previous year. This is a strong demonstration that regional organizations are increasingly integrating into the ecosystem. And since Tables de concertations are also influential and play a key role in planning and decision-making on the regional level, these collaborations have great potential to achieve pivotal changes.

## 2.2 CHSSN's Increased Influence on Provincial Early Childhood Stakeholders

**The highlight of the year**, on the provincial level, was the unexpected success of mobilizing provincial partners for the development of CHSSN's new guide, *Vos services sont-ils accessibles aux tout-petits d'expression anglaise : Guide de soutien à l'inclusion des familles d'expression anglaise en contexte de vulnérabilité (2026).*




Many provincial partners were already strong allies but the invitation to collaborate on the CHSSN *Guide de soutien* brought an even stronger commitment. Every partner that CHSSN approached didn't hesitate to get involved. Partners devoted time reviewing the Guide de soutien, provided their tools, logos and messages to be included and promoted it on social media. Their engagement was visible and very public, and by extension, their support for the proposition of adapting to the needs of English-speaking children, which is essentially what the *Guide de soutien* represents.

### Overview of Results of CHSSN's Collaborations with Provincial Partners

- Total of **14 provincial partners** in 2025-2026, including 2 new partners
- **New partners:** Confédération des Organismes Familiaux du Québec (COFAQ) and Éducaloi, although the first time collaborating with Bright Beginnings, CHSSN had collaborated with Éducaloi previously
- **Collectif Petite-Enfance:** the importance of access to English language health and social services was included among its 21 recommendations in its Collectif Plateforme électorale 2026
- **Regroupement pour la valorisation de la paternité (RVP):** Collaborative projects were particularly dynamic and generated training, many tools and resources for both practitioner and parents.

**14**
**Provincial Partners**

**2**
**New Partnerships**

# Learnings from BB and YMHI

Bright Beginnings and the Youth Mental Health Initiative operate within ecosystems at very different stages of policy and system maturity. Affecting systems change requires awareness of the features of these respective fields.

- Early childhood in Québec is a comparatively established and highly structured field in terms of public policy and the organization of institutions and community service providers. In BB, long-term relationship building is taking place in which stakeholders and partners accept the premise of the importance of early childhood and, in some cases, recognize language as a factor in the well-being of English-speaking children and families.

- Youth mental health, by contrast, is a newer and more rapidly evolving ecosystem. Partnership and influence strategies are necessarily less linear and require more continual adaptation, relationship rebuilding and attention to emerging policy shifts.

BB and YMHI have much to learn from each other. CHSSN could expand its mechanisms for cross-program practice exchange and learnings.

## Capacity building learnings

- YMHI is strengthening community organizations' capacity, but capacity building programming could be improved to be more practical and tailored

- Meaningful youth participation does not become embedded automatically; increasing inclusion in community organization governance requires deliberate and ongoing support.

- For Bright Beginnings regional organizations, strengthening capacity and skills in partnership development and effective Table de concertation participation is a continuous process, even for the more experienced. The challenge for BB continues to be how to best support different experience and knowledge levels.

## Systems change learnings

- Establishing influence in youth mental health requires adaptability and continual relationship rebuilding.

- Language equity alone is often not the strongest entry point; concepts of inclusion, access and intersectionality create broader openings for advancing English-speaking community needs.

- Systems change requires better evidence about who is, and is not, being reached.

- Concrete collaborative projects can move relationships and leverage with system actors to a deeper level.

# Future directions for CHSSN

Over the next year, CHSSN will continue to strengthen its work for English-speaking children, youth and families by continuing to offer existing activities as well as the following refinements and developments:

## YMHI

- Develop the youth mental health ecosystem map and strengthen strategic relationships within it.
- Reinforce CHSSN's role in connecting community organizations to the broader youth mental health system.
- Continue supporting community organizations to advance meaningful youth engagement and board inclusion.
- Adapt capacity-building activities: shorter and more focused sessions, topics grounded in organizations' expressed needs, practical tools that participants can use in their work, and more opportunities for peer exchange and interaction.

## Bright Beginnings

- Continue advancing partner and stakeholder engagement through BB's Early Childhood Communications Strategy and the Guide de soutien project.
- Create more and stronger allies and public champions on the importance of addressing the needs of English-speaking children and families.
- Examine the progress of the ongoing collaborative project between CHSSN, its network of regional organizations and the Fédération Québecoise des Organismes Communautaires Famille (FQOCF) and its member Maisons de familles (MdFs).

## Cross-program

- Improve how information, resources and learning opportunities are communicated to community organizations in CHSSN's network.
- Continue harnessing the experience of funded organizations to strengthen CHSSN's advocacy and representation.
- Increase learning and exchange across CHSSN programs where approaches are transferable.

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# Overview of the initiative

This is a progress and evaluation report on the initiative “Equitable access to health and wellness for English-speaking children, youth, and families” *(Accès équitable à la santé et au bien-être pour les enfants, les jeunes et les familles d'expression anglaise)*. The report provides an update on the activity and results from April 1, 2025 to March 31, 2026.

## Purpose

**This initiative aims to improve the well-being and health of English-speaking children, youth and families across Québec.** CHSSN uses a mobilization model that builds on decades of relationship building with health and social services organizations in Québec. The initiative applies a multi-level strategy to bring about change in the complex child-family-youth ecosystem, with collaborative action at the community, regional and provincial levels.

### The initiative has two main objectives:

1. To strengthen CHSSN's provincial-level and systems-change work to address inequalities in access to services related to language barriers for English-speaking children, youth and families.

2. To build the capacity of partners (i.e. community and regional organizations) in networking, representation and promotion at the regional and local levels, to advance access to health and social services, resources, and programs for English-speaking children, youth and families (including CHSSN’s 23 core community network members and other organizations).

## Actions

### The strategies applied during the initiative include:

- Activities to engage, build solidarity and strengthen skills and capacity of community and regional organizations working with English-speaking children, youth and families
- Direct support for community projects that mobilize partners, engage youth, improve access to services, and develop new resources and programs
- Build relationships with key stakeholders and decision-makers in the field of children, youth and families
- Development of systems-change tools including stakeholder mapping, conceptual frameworks and public policy recommendations

# Overview of the initiative

## The initiative is implemented through two main programs:

### Youth Mental Health Initiative (YMHI)

YMHI promotes the mental health of English-speaking youth by improving their access to resources and services and involving them in the design and implementation of activities that promote their agency and reduce stigma in their peers and community. YMHI is implemented by CHSSN in partnership with 25 to 29 community organizations each year across Québec (the partners sometimes change from year to year). The local partners develop and implement projects to educate and collaborate with stakeholders in the education and health systems, engage youth, develop, translate and adapt mental health resources, and provide youth activities in their regions. CHSSN's role is to build the capacity of local partners as well as undertake provincial level and systems change activities.

### Bright Beginnings (BB)

Bright Beginnings aims to improve the well-being of English-speaking children, youth and their families by developing better access to programs and services.

To develop better access, stakeholders and partners are encouraged to increase their capacity to offer services to English-speaking children, youth and families. Through the program, CHSSN and its network of regional organizations engage stakeholders by developing and implementing collaborations to provide new and adapted services to better reach and support English-speaking children and families.

## Financial Support

The Youth Mental Health Initiative and Bright Beginnings are made possible with funding support from the Lucie and André Chagnon Foundation.

The Youth Mental Health Initiative is also funded by the Secretariat à la jeunesse of the Government of Québec.

CHSSN's other initiatives under its Early Childhood, Youth and Families Program are supported by the Public Health Agency of Canada's Healthy Early Years (HEY) funding program. The HEY Program complements the Chagnon Foundation funding support to Bright Beginnings by supporting direct prevention and early intervention activities for children 0-6 years old and their parents.

Québec

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Fondation Lucie et André Chagnon

# Results: YMHI 2025-2026

# 1. Youth Mental Health Initiative

The main results of YMHI over the past year were deepened relationships between CHSSN and provincial key actors in the youth mental health ecosystem, continued strengthening of community organizations' capacity, increased youth engagement in participating organizations and expanded local youth mental health programming. Each result is discussed below.

## 1.1 CHSSN's Increased Systems-Level Relationship Building and Influence with Youth Mental Health Stakeholders

CHSSN continued in 2025-26 to work towards change in the Québec youth mental health ecosystem. By engaging provincial-level stakeholders and encouraging the inclusion of English-speaking youth in policy consultations and research, CHSSN contributed to increasing stakeholders' capacity to address the needs of English-speaking youth. In the last year, through YMHI, CHSSN strengthened its position as a connector between systems, increasingly linking community organizations with researchers, provincial institutions, national organizations, schools, community networks and specialized service providers. The following are the main four outcomes of the systems-level work undertaken through YMHI in 2025-26. A detailed description of the main relationship-building developments by stakeholder are provided below in Table 4: CHSSN Relationship-Building with Youth Mental Health Stakeholders, 2025–26.

### 1.1.1 Greater influence for English-speaking communities in Québec's youth mental health systems and policies

In 2025-26, CHSSN expanded its direct participation in provincial policy, consultation and service-planning processes. Although CHSSN has continued to be proactive, seeking and requesting a meaningful role in such processes, some government and research partners also increasingly sought CHSSN's data, evaluation findings, service knowledge and assistance in reaching English-speaking organizations and youth.

A key example was CHSSN's involvement with the Ministry of Health and Social Services for their Interministerial Table on Mental Health, Homelessness and Addiction l'*Instance Jeunesse*, where CHSSN secured a place in the provincial youth consultation process informing future action plans. YMHI mobilized participating community organizations to contribute their lived experience, service observations and data, and brought forward issues affecting English-speaking youth, including language barriers, service continuity and the realities of marginalized youth and community organizations.

CHSSN also maintained a key role within *Aire ouverte*'s Comité consultatif national. Aire ouverte is Québec's network of free, public youth wellness hubs for 12 to 25 year olds and their families. The network provides barrier-free, walk-in psychosocial and physical health support including mental health, substance use, and sexual health. To this advisory committee, CHSSN contributed English-speaking community perspectives to discussions on the implementation and evolution of this important integrated youth service model. In addition, evaluators involved in the provincial evaluation of Aire ouverte services specifically identified CHSSN's knowledge of access barriers for English-speaking youth as an important contribution and welcomed CHSSN to participate in the evaluation process.

CHSSN also worked to ensure that English-speaking youth were represented in broader youth consultations, including the *Réseau des carrefours jeunesse-emploi du Québec* (RCJEQ) – Ma Voix Compte consultation and the *Coalition Interjeunes / Y4Y Québec* 2026 Youth Issues consultation. Together, these developments indicate that English-speaking youth perspectives became somewhat more systematically represented in the provincial processes where youth policy, services and priorities are shaped. However, CHSSN reports that additional work is needed to support organizations in considering the importance of collecting data from and meaningfully engaging English-speaking Quebecers, in order to recognize the unique realities and barriers experienced by these communities.

### 1.1.2 Increased access to English-language and culturally relevant mental health resources

CHSSN's stakeholder relationships appear to have produced tangible improvements in access to English-language mental health promotion, prevention and support resources. Through its relationship with the *Mouvement Jeunes et Santé Mentale (MJSM)*, for example, YMHI helped finance the English translation of the *Collectiforce* toolkit following strong interest from organizations participating in the CHSSN Mental Health Forum. This work built on earlier efforts to support participation in, translation of, and dissemination of MJSM's Youth Mental Health Portrait consultation materials, ensuring that the perspectives of English-speaking community organizations and the English-speaking communities they serve were meaningfully represented and heard.

Similarly, YMHI's financial support assisted *Deuil-Jeunesse* in making its Procé-deuil bereavement and postvention resource available in English to schools and institutions. Importantly, CHSSN encouraged the organization not only to translate the resource but also to have it tested by English-speaking users and community partners to assess its cultural and practical relevance. This reflects an emerging role for CHSSN in encouraging partners to think beyond literal translation toward meaningful linguistic and cultural adaptation.

CHSSN played a similar role with Mouvement Santé mentale Québec (MSMQ), supporting English translation of its annual positive mental health campaign, distributing campaign materials throughout the CHSSN network, publishing a blog as an ambassador and speaking at the Journée nationale de la promotion de la santé mentale positive.

The YMHI Program Manager remarked that collaborations such as translation may seem simple, but they often led to deeper conversations on cultural relevance and to more in-depth collaborations. Working on resources and tools together created trust and engaged relationships with several of Québec's francophone mental health and youth organizations that YMHI intends to build upon in the future.

### 1.1.3 Stronger connections between English-speaking community organizations and the wider Québec youth mental health ecosystem

CHSSN increasingly served as a bridge between local and regional English-speaking organizations and key organizations, researchers and service providers in youth mental health. New collaborations broadened the range of youth mental health approaches available to community organizations in the YMHI network, including arts-based mental health, nature-based interventions, youth substance-use prevention, caregiver support, violence prevention, digital service navigation and youth engagement.

One particularly concrete example came from the North Shore Community Association, which identified increasing concerns related to youth violence, homelessness and substance use. CHSSN responded by initiating a connection with *LOVE Québec*, which specializes in youth engagement and violence prevention, to explore possible programming for English-speaking youth in Sept-Îles.

CHSSN also re-established its relationship with the *Centre of Excellence in Youth Mental Health at the Douglas Institute*, creating opportunities to connect local and regional community organizations with researchers and experts and to bring specialized learning on youth and young adult mental health into CHSSN's community of practice.

At the Canadian national level, YMHI's renewed engagement with the pan-Canadian *Knowledge Development and Exchange Hub for Youth Substance Use Prevention* opened access to expertise and resources on youth substance-use prevention, crisis preparedness and the Icelandic prevention model, while creating opportunities for YMHI community organizations to participate in a national community of practice. These relationships helped open doors for community organizations to connect with emerging knowledge, specialized expertise and potential collaborators.

### 1.1.4 Increased capacity for collective action and leadership on youth mental health

YMHI continued in 2025-26 to spearhead its systems mapping initiative to identify and better understand the youth mental health actors across Québec. The mapping initiative has engaged partner organizations in its advisory body so that it is a collective rather than siloed initiative. Organizations on the advisory include: *Association pour la santé publique du Québec, Santé Québec, Santé Québec Estrie-CHUS, Concordia University Youth Behavioural Interventions Lab, Y4Y Québec*, and a Postdoctoral Fellow at *Université de Montréal* who also co-founded CARE Jeunesse.

While the bulk of the work has yet to be done, the goal is to create a dynamic, participatory ecosystem map that will serve as a practical tool to strengthen collaboration and strategic partnerships, including clarifying for CHSSN where to devote its energies in future stakeholder outreach and influence. The engagement of stakeholders in the design of the initiative is also strengthening CHSSN's relationships which it expects to lead to greater collaboration in the future. Developing the systems map is a strategic priority for YMHI in 2026-27.

CHSSN's stakeholder engagement continued to strengthen its role as a coordinating and sector-development organization for English-speaking youth mental health. The clearest example was a renewed role in the provincial programme, *Soutien aux organismes de services en santé mentale aux Québecoises et Québecois d'expression anglaise*. For the 2026–2029 programme, CHSSN will coordinate and support 21 funded organizations, who will deliver direct mental health services in communities for various age groups, including youth. CHSSN's responsibilities include sector development, collaboration, knowledge mobilization, monitoring and evaluation for these organizations. This represents a significant institutionalization of CHSSN's leadership in the mental health sector.

This year's sector relationship developments are increasingly positioning CHSSN not simply as an advocate or information-sharing organization, but also as a sector connector, convenor and intermediary capable of helping English-speaking community organizations act collectively, access expertise, engage youth more meaningfully and participate more effectively in broader youth mental health systems.

## Table 1: CHSSN's Collaboration and Influence with Youth Mental Health Stakeholders, 2025–26

### 1. Government bodies and public health system partners

| Partners/Initiatives | Key advancements and results |
|---|---|
| **Aire ouverte – provincial Advisory Committee, Santé Québec and MSSS** | • CHSSN continued as a member of the Comité consultatif national Aire ouverte, Québec's network of integrated youth services.<br>• CHSSN's presence helped ensure that challenges affecting English-speaking youth were considered in discussions of service implementation and promising practices and advanced discussion around expansion of the Aire ouverte model. |
| **Ministère de la Santé et des Services sociaux – Intersectoral Table on Mental Health, Homelessness and Addiction l'*Instance Jeunesse*** | • CHSSN secured a place in the provincial youth consultation process informing the next interministerial action plans on mental health, homelessness and substance use. CHSSN's brief brought forward issues of service continuity, language barriers, marginalized youth and the realities of community organizations.<br>• MSSS agreed to translate public consultation materials and provide editable versions that CHSSN could circulate within its network. YMHI mobilized community and regional organizations to contribute lived experience, service observations and data concerning English-speaking youth through a focus group and one-on-one outreach with concerned organizations.<br>• This participation increased CHSSN's visibility, put CHSSN in sustained contact with major provincial regroupements and MSSS policy staff, supported exchange of field knowledge, and increased YMHI Program Manager's's experience inpolicy discussions.<br>• MSSS representatives demonstrated growing receptiveness to community-based models and to the specific service-access & navigation challenges experienced by English-speaking youth. |
| **Secrétariat à la jeunesse** | • After meetings with the new representative responsible for the CHSSN file, they offered to connect CHSSN with research networks, funding opportunities and other government resources and confirmed continued interest in including CHSSN in provincial partner activities.<br>• CHSSN was invited to share YMHI evaluation findings and relevant statistics with the Secrétariat's leadership, which increased the Secrétariat's understanding of CHSSN, the impact of YMHI and the realities of English-speaking youth. |
| **Secrétariat aux relations avec les Québecois d'expression anglaise (SQREA)** | • CHSSN assumed a renewed role in the SOS-Santé Mentale programme for 2026–2029, building on the previous CMHI and PAOSM programs. This involved at least seven planning meetings with SQREA, which clarified deliverables and adjusted the working model so that SQREA administers funding directly while CHSSN provides sector support.<br>• CHSSN's responsibilities include coordinating 21 funded organizations and fostering sector development, collaboration, knowledge mobilization, project monitoring and outcome evaluation.<br>• This arrangement represents a further institutionalization of CHSSN's mental health leadership after several years of collaboration with SQREA. |

## Table 1: CHSSN's Collaboration and Influence with Youth Mental Health Stakeholders, 2025–26

### 1. Government bodies and public health system partners

| Partners/Initiatives | Key advancements and results |
|---|---|
| **Government of Québec – Minister Responsible for Relations with English-speaking Québecers** | • CHSSN hosted Minister Christopher Skeete and government representatives during the announcement of funding for the Patient Navigator Network Initiative. An extended discussion provided an opportunity to raise youth mental health issues directly with the Minister.<br>  <br>• The meeting increased government representatives' familiarity with CHSSN and allowed CHSSN to gain a better understanding of current governmental constraints and perspectives. |
| **Federal Office of the Commissioner of Official Languages** | • Increased understanding of English-speaking community vitality and the role of language as a determinant of mental health equity, through in person meeting and sharing CHSSN's policy brief and key messages concerning mental health access.<br>• The in-person discussion may help establish a foundation for future federal engagement. |
| **Federal Youth Mental Health Fund – Health Canada** | • Participated in federal discussions concerning the Youth Mental Health Fund and identified a major barrier affecting Québec community organizations' access to this funding: although the fund was intended to support community-based organizations directly, Québec funding appeared to have been only channelled through the provincial MSSS Aire ouverte service.<br>• CHSSN was among the few organizations that raised this process as a concern and used its federal relationships to bring attention to the need for funding mechanisms that preserve direct federal funding access for Québec community organizations, recognizing their role addressing youth mental health needs. |

## Table 1: CHSSN's Collaboration and Influence with Youth Mental Health Stakeholders, 2025–26

### 2. Youth-focused organizations

| Partners/Initiatives | Key advancements and results |
|---|---|
| **Centre of Excellence in Youth Mental Health – Douglas Institute** | • Identified opportunities to connect community organizations with researchers and experts in the Centre's network, and promoted the Centre's youth mental health offerings to YMHI community organizations.<br>• Explored having the Centre offer a workshop for YMHI community organizations on the onset of mental health disorders among youth and young adults. This may be integrated into a future YMHI community of practice session.<br>• CHSSN continued to participate on the steering committee for the BLOOM research program on youth mental health and resilience, helping connect English-speaking community perspectives with the Centre's work. |
| **Mouvement Jeunes et Santé Mentale (MJSM)** | • CHSSN increased the availability of youth mental health tools in English by contributing to translation costs of the Collectiforce toolkit. MJSM approached CHSSN to support translation of Collectiforce after strong interest from YMHI community organizations attending the 2025 Mental Health Forum. This builds on CHSSN's previous contribution to and translation of MJSM's portrait of youth mental health.<br>• CHSSN continues to build MJSM's familiarity with YMHI through participating in provincial youth mental health spaces and supporting translation, with the hopes of longer-term knowledge mobilization collaboration in the future. |
| **Centre of Excellence in Youth Engagement – Students Commission of Canada** | • CHSSN continued to sustain its relationship with SCC, a national partner specializing in youth engagement and adult allyship.<br>• Exchanged findings from the Youth Pulse research and discussed potential collaboration to share YMHI learning and strengthen youth-engagement practices. |
| **Y4Y Québec** | • Explored alignment between Y4Y's research mandate and CHSSN's service- and systems-mapping work. Y4Y expressed willingness to participate in CHSSN research, and CHSSN explored possible mental health funding opportunities in response to Y4Y's needs.<br>• Discussed Y4Y offering a future training session for YMHI community organizations on strengthening youth participation in governance/on boards of directors.<br>• Worked with Coalition Interjeunes and Y4Y to promote the inclusion of English-speaking youth voices in the 2026 Youth Issues consultation. |
| **LOVE Québec** | • Fostered a connection between LOVE Québec and YMHI member NSCA to explore collaboration in response to increasing gang-related and drug-related violence affecting English-speaking youth in Sept-Îles. They will explore offering workshops using media arts, participatory photojournalism and social-emotional learning as violence-prevention approaches.<br>• CHSSN suggested additional potential connections with English-language community organizations and schools and invited LOVE Québec to the Mental Health Forum and to increase its visibility within CHSSN's network. |
| **Réseau des carrefours jeunesse-emploi du Québec** | • Promoted the inclusion of English-speaking youth voices in the Ma Voix Compte consultation by sharing the opportunity through CHSSN's network and encouraging participation. |

## Table 1: CHSSN's Collaboration and Influence with Youth Mental Health Stakeholders, 2025–26

### 3. Research and knowledge partners

| Partners/Initiatives | Key advancements and results |
|---|---|
| **Projet Aire – Evaluation of Aire ouverte services** | • Projet Aire research evaluation process undertaken by AO is meant to facilitate adoption of a continuous learning service model and review their outreach efficacy regarding their service mission: reaching the underserved, marginalized and hard to reach.<br>• Projet Aire researchers identified CHSSN's expertise in access to services for English-speaking youth as a gap that could strengthen the evaluation. CHSSN contributed knowledge about implementation barriers affecting English-speaking youth and identified potential cross-regional collaborations.<br>• Participation in the provincial AIRE event and Projet Aire's 2026 partners day increased connections with youth advisors, interveners, researchers, Aire ouverte managers and decision-makers from different regions. |
| **Services inclusifs jeunes – L'Institut universitaire SHERPA / CISSS du Centre-Ouest-de-l'Île-de-Montréal** | • CHSSN continued participation in the Capitale-Nationale territorial steering committee for the research project housed at L'Institut universitaire SHERPA / CISSS du Centre-Ouest-de-l'Île-de-Montréal, called Adaptation culturelle des services jeunesse. CHSSN contributed an English-speaking community perspective to research examining service adaptation for immigrant, refugee, racialized and ethnocultural & linguistic minority youth.<br>• The researchers proposed that CHSSN incorporated questions about use of interpreters into our recurring survey on "English language Health and Social Services Access in Québec," to strengthen evidence concerning language access.<br>• The established relationship with SHERPA led to CHSSN being recommended to the Aire ouverte evaluation team (see above).<br>• CHSSN continued to support participant recruitment of youth and community organizations for the research. |
| **Centre RBC d'expertise universitaire en santé mentale – Université de Sherbrooke** | • Initiated a promising new relationship concerning the Zen-ith and Hors-Piste mental health resources used in schools. CHSSN proposed becoming involved earlier in resource development rather than only at the translation stage.<br>• Identified a potential role for CHSSN in testing cultural and linguistic relevance and supporting dissemination through English-language schools and community networks.<br>• The Centre expressed interest in future collaboration and recognized strong alignment between the organizations' objectives. |
| **Knowledge Development and Exchange Hub for Youth Substance Use Prevention (KDE Hub-YSUP)** | • Like YMHI, KDE Hub-YSUP is a funding & knowledge exchange network. CHSSN and its YMHI organizations were invited to participate in KDE Hub-YSUP's community of practice on the Icelandic prevention model and its applicability in Québec. This involvement follows a longstanding relationship in which KDE Hub-YSUP was a previous funder of CHSSN vis Public Health Agency of Canada.<br>• KDE Hub-YSUP shared research, communication tools and resources related to upstream substance-use prevention and artificial intelligence in substance-use care.<br>• KDE Hub-YSUP agreed to identify potential national funding opportunities and viewed CHSSN as a valuable entry point to Québec's English-speaking community network. |
| **Canadian Centre for Caregiving Excellence** | • Established the Centre as a potential partner for future events, knowledge sharing and policy development.<br>• Discussed recruiting a young Québec caregiver to CHSSN's Mental Health Advisory Committee.<br>• Requested input into the CHSSN recurring CROP survey on "English language Health and Social Services Access in Québec," to strengthen data on caregiving, and identified opportunities to incorporate caregiver perspectives into advocacy and election-priority work. |
| **Association pour la santé publique du Québec** | • Promoted inclusion of English-speaking community in the *Ça se cultive* resource-directory survey. |

## Table 1: CHSSN's Collaboration and Influence with Youth Mental Health Stakeholders, 2025–26

### 4. Mental health promotion and prevention organizations

| Partners/Initiatives | Key advancements and results |
|---|---|
| **Deuil-Jeunesse and education-sector partners** | • Called upon by the Direction du soutien au réseau éducatif anglophone, of the Ministère de l'Éducation CHSSN was introduced to Deuil-jeunesse. CHSSN helped make the Procé-deuil resource on bereavement and postvention protocol available in English to schools and institutions, by funding translation and ensuring that the tool was tested with English-speaking users to assess cultural and practical relevance. CHSSN offered to coordinate five English-speaking sector representatives to test the resource.<br>• Discussed a future presentation and launch for school and community partners.<br>• Confirmed that Deuil-Jeunesse would have an English-speaking intervener available to respond to requests, demonstrating readiness to serve English-speaking schools and families. |
| **AMI-Québec** | • AMI-Québec expressed interest in closer collaboration with CHSSN and YMHI organizations.<br>• Identified potential for more coordinated provincial advocacy and discussed AMI-Québec's position regarding the next provincial mental health action plan and CHSSN's policy brief. |
| **CAP Santé Mentale** | • CAP Santé Mentale identified CHSSN as an important long-term partner and demonstrated unwavering commitment to making their network materials bilingual, continuing with the CAP Mieux-Être application, a guided resource-navigation tool for caregivers available in English.<br>• CHSSN ensured CAP Santé mentale had clear translation plans, deliverables, dissemination strategy, timelines and expected reach among English-speaking communities as a condition for contributing financially to the project.<br>• CHSSN has been formally requested to participate on the steering committee for Cap vers l'équité, a five-year project funded by the MSSS that seeks to adapt mental health services to the realities of caregivers from ethnocultural minority groups and English-speaking communities. |
| **Mood Disorders Society of Canada** | • Established a promising new national relationship focused on mental health navigation and resource accessibility.<br>• Explored incorporating English-language Québec mental health resources into the MIRA digital navigation platform.<br>• Identified potential collaboration in awareness, literacy, stigma reduction and research, and discussions are ongoing regarding the specific form of collaboration. |
| **U Nature** | • Established contact to explore nature-based mental health initiatives, resources and training that could be offered in English.<br>• Increased mutual understanding of language-based inequities in access to care and discussed the cultural relevance of nature-based approaches for rural and Indigenous youth.<br>• Awaiting confirmation of U Nature's capacity to provide English-language programming or resources. |
| **Fondation Gardien Virtuel** | • Continued a developing relationship with this organization offering mental health-related training resources, positioning CHSSN as both a funding and capacity-building partner.<br>• CHSSN provided financial support for the English translation of the organization's training manual, helping it expand its base of English-speaking interveners. |
| **Mouvement Santé mentale Québec (MSMQ)** | • Supported MSMQ's annual positive mental health campaign as an ambassador. This included providing financial support for English translation, writing a blog, distributing campaign tools to CHSSN network organizations, and supporting their use across English-speaking communities.<br>• CHSSN spoke at MSMQ's Journée nationale de la promotion de la santé mentale positive. |
| **Association canadienne pour la santé mentale – Montréal (ACSM-Montréal)** | • Provided financial support for the English translation of one of ACSM-Montréal's recent mental health resources, increasing its accessibility to English-speaking communities. |

## 1.2 Community Organizations' Increased Capacity to Advance Youth Mental Health

CHSSN's Youth Mental Health Initiative (YMHI) has focused on strengthening the capacity of community organizations to improve access to mental health literacy, promotion, and prevention for English-speaking Québecers aged 12 to 29.

In 2025-26, 30 community organizations were active partners in YMHI across all 17 regions of Québec. In addition to providing funding for them to undertake tailored activities in their respective regions, CHSSN hosted programming to support community organizations' networking and capacity building. The following table presents the main types of capacity building programming offered and levels of participation.

**Table 1: CHSSN's YMHI Capacity Building Activities 2025–26**

| Activity | Detail |
|---|---|
| **One-on-one Support** | **Ongoing Project Implementation Support, throughout 2025–26**<br>Individual support to local project leads at participating organizations, by CHSSN staff, on implementation and problem-solving. |
| **Mental Health Forum (in-person)** | **Reflect & Rise MH Forum, Feb 2026**<br>Two-day networking and learning session for community organizations working in direct MH services and youth mental health promotion for English-speaking Québecers. Session topics included collaboration, conflict management and community mental-health planning.<br>Community organizations participated = 28 YMHI organizations and 22 additional organizations that offer MH services to a variety of age groups. |
| **Training & Information Sessions (online)** | **Engaging Young Caregivers, Oct 2025**<br>Awareness and engagement of young caregivers. Partner organization: AMI-Québec.<br>*Community organizations participated = 8*<br><br>***Crisis Lines and Linguistic Referral Challenges, Dec 2025***<br>*Crisis-line services and language barriers affecting regional referrals. Partner organization: Tel-Aide.*<br>*Community organizations participated = 16* |

| Activity | Detail |
|---|---|
| **Community of Practice Sessions (online)** | **Cross pollination between Québec community organizations working in direct MH services and in youth mental health promotion, July 2025**<br>Sharing experiences about gaps in services for English-speaking Québecers, visions for change and ideas for solutions.<br>Community organizations participated = 14<br><br>**Partner Engagement Strategies, Dec 2025**<br>Results of partner engagement survey. Practices for engaging and collaborating with multi-sector partner organizations.<br>Community organizations participated = 16<br><br>**Reporting Requirements and Planning, Feb 2026**<br>Guidance on reporting and planning for the following program year.<br>*Community organizations participated = 20* |
| **Group Coaching sessions (online)** | **Action Planning**<br>Support for developing YMHI action plans for the following year.<br>Community organizations participated = 10<br><br>**Reporting**<br>Support for financial and narrative report preparation.<br>Community organizations participated = 5 |
| **Virtual resource centre** | **YMHI Knowledge Hub**<br>The hub was updated with new external and internal resources related to youth mental health, organization contact list to facilitate connections,and project forms and documents. |
| **Facebook group** | **YMHI private Facebook group**<br>This year the group had 112 posts tagged according to the topics discussed, 43 comments and 183 reactions. Most posts were sharing resources related to youth engagement and mental health. |
| **Surveys** | **Mid-Year Monitoring Questionnaire, October 2025**<br>Tool for identifying implementation issues during the program year.<br><br>**Organizational Capacity-Building Survey, March 2026**<br>Gathering feedback and results of participating organizations' capacity-building experiences.<br>*Community organizations participated = 27* |

### 1.2.1 Participation in CHSSN activities

Participation in the in-person 2026 Mental Health Forum remained strong, with 93% of YMHI organizations taking part. Participation in the online capacity building events and platforms in 2025-26 was lower than the previous years. There was an average of only 50% of the YMHI community organizations present at each of the Community of Practice and Information Sessions. Activity in the Facebook group dropped as well. This may be due in part to YMHI's Program Manager being on medical leave, as she held the closest relationships with partner organizations. Increased demands on community organizations are likely also a factor. When asked what held them back from participating in CoP sessions or training workshops, the top reasons reported were time constraints (63%), lack of capacity/staffing (37%) and scheduling (30%). At the same time, 15% of organizations reported that the lack of relevance of the topics to their work was a factor. Some organizations reported not using the Facebook group and suggested using a different platform, while others said they would like to see more exchange of external resources, case examples, and peer discussion to enliven the Facebook group.

That said, those that took part in the online sessions found them helpful and relevant. The great majority of organizations rated Community of Practice sessions as useful (26% very useful; 63% useful) and as well as online training workshops and info-sessions (52% very useful; 33% useful). For qualitative results, see section below, 1.1.4 Greater awareness of and connection to other community organizations, schools, mental health services and programs available to youth.

In the coming year, CHSSN intends to strengthen community organization participation in YMHI capacity-building activities by making them more accessible, relevant, and engaging. Sessions will be shorter (1.5 hours instead of 2 hours), and topics will be guided by organizations' stated interests and needs, with more time devoted to resource sharing, peer exchange, multiple voices, and interactive activities. CHSSN will also improve how information about learning opportunities is communicated. The hiring of a communications staff person will support an organization-wide review of how programs currently share information and help develop a more coordinated and efficient approach. Discussions across CHSSN programs will also help identify common needs and improve access to useful information and resources.


### 1.2.2 Increased ability of community organizations to address youth mental health

There were several positive results in capacity building. CHSSN surveyed participating community organizations in March 2026 to better understand the difference taking part in YMHI had made for them. Across the 27 responding organizations, they reported broad capacity growth, especially in understanding youth mental health needs, awareness of mental services available to youth, access to information and research, and their own knowledge of youth mental health issues.

In addition to these skill and knowledge areas, some organizations reported that they improved their organizational clarity and positioning regarding youth mental health, due to YMHI. They spoke of refining their niche based on their strengths, expanding their mandate to more meaningfully include youth mental health, or clarifying their role in the youth mental health ecosystem. Several organizations also spoke about becoming more confident and active to speak up for and advocate for the needs of English-speaking youth and their families. Overall, the results show that the changes taking place for each organization are often multi-faceted and context-specific.

**Table 3: How participating community organizations' capacity changed through YMHI**

| Capacity Area | Somewhat or much stronger | Much stronger | Somewhat stronger | No change | Less strong |
|---|---|---|---|---|---|
| Understanding mental health needs of young people in the community | 27 (100%) | 14 (52%) | 13 (48%) | 0 (0%) | 0 (0%)) |
| Awareness of other mental health services/programs available to youth | 27 (100%) | 14 (52%) | 13 (48%) | 0 (0%) | 0 (0%) |
| Access to information and research regarding youth mental health | 26 (96%) | 15 (56%) | 11 (41%) | 1 (4%) | 0 (0%) |
| Knowledge about issues related to youth mental health | 26 (96%) | 15 (56%) | 11 (41%) | 1 (4%) | 0 (0%) |
| Access to tools for implementing mental health programs with youth | 26 (96%) | 13 (48%) | 13 (48%) | 0 (0%) | 1 (4%) |
| Networking and relationships with other organizations | 26 (96%) | 12 (44%) | 14 (52%) | 1 (4%) | 0 (0%) |
| Confidence to speak up about youth mental health issues | 25 (93%) | 15 (56%) | 10 (37%) | 2 (7%) | 0 (0%) |
| Motivation to advocate for service access for English-speaking youth | 25 (93%) | 13 (48%) | 12 (44%) | 2 (7%) | 0 (0%) |
| Outreach to youth | 24 (89%) | 9 (33%) | 15 (56%) | 3 (11%) | 0 (0%) |
| Engagement of youth within programs /organization | 23 (85%) | 10 (37%) | 13 (48%) | 4 (15%) | 0 (0%) |
| Support for youth in governance / on the board | 11 (41%) | 6 (22%) | 5 (19%) | 16 (59%) | 0 (0%) |

### 1.2.3 Increased understanding of mental health needs of young people in the community

One of the strongest outcomes of YMHI has been building the knowledge and understanding of participating community organizations across Québec about youth mental health, which 96% of organizations reported was stronger since they started taking part in YMHI (56% reported this capacity as much stronger; 41% somewhat stronger; 4% no change). They have become **more attuned to the challenges for local young people and the service gaps for them**. Many organizations also reported being more aware of the needs and service gaps for specific populations such as youth in care, Black youth, neurodivergent youth, LGBTQ2S+ youth, rural and isolated youth, and English-speaking youth in low-population regions with very limited services.

This learning appears to have been achieved in part through CHSSN's programs and resources. Often much of the learning has come about, however, through the organizations' own efforts to conduct needs assessments and hear directly from youth and service providers working with local youth about gaps in services.

#### In the words of community organizations...

*"We have grown by gaining a more nuanced understanding of the mental health needs of youth, specifically youth in care (group homes) and how these needs may differ from other youth."*

*"Through our participation in YMHI, we have deepened our understanding of the realities facing English-speaking youth across our territory, particularly in relation to mental health needs and service gaps."*

*"We have grown by beginning to understand where there is a gap in mental health resources available geographically in Montreal, specifically for Black communities."*

*"Increased awareness of the importance of youth mental health especially in rural/isolated regions."*

*"A much better understanding of the mental health concerns, issues and needs for the youth population on the Lower North Shore."*

*"Thanks to the YMHI, our staff gained strong knowledge of issues related to youth mental health, and other services / programs available to youth."*

One element of this capacity has been **increased access to information and research** regarding youth mental health, which 96% of responding organizations said was somewhat or much stronger as a result of YMHI. YMHI linked community organizations to data and analysis which appears to have advanced their knowledge and understanding. Some community organizations have already started contributing to mapping tools spearheaded by CHSSN to further increase awareness of resources and services available in different regions.

## In the words of community organizations...

*"Evidence based data from the CHSSN has also helped to better sensitize these partners."*

*[Through YMHI, we're] "having access to more tools and understanding of youth mental health services and issues"*

*"Through the YMHI, we're able to focus much more on the specific mental health needs of our English-speaking youth, notably with the help of the knowledge hub resources and available data."*

*"It built their [our staff's] confidence to speak up about those issues and outreach to youth with helpful and adequate resources."*

*"We're developing the mapping app with CHSSN, which will better equip all our partners within the Townships region."*

### 1.2.4 Greater awareness of and connection to other community organizations, schools, mental health services and programs available to youth

Building meaningful linkages with other organizations appears to be an important capacity being built through multi-year involvement with YMHI. Networking and relationships with other organizations were reported to be stronger by 96% of organizations (44% reported this capacity as much stronger; 52% somewhat stronger; 4% no change). Community organizations also reported they had the **collaboration of 290 mental health professionals** in the youth activities they coordinated throughout 2025-26, **double the number of professionals engaged in 2024-25**. This expansion indicates that YMHI's connections with local service providers are continuing to get stronger. These collaborations were reported to have made it easier for youth to access services and contributed to destigmatized mental health support.

In addition, participating community organizations reported that **a total of 233 of their local partner organizations were better equipped** through their YMHI activities to respond to English-speaking youth and guide them toward appropriate mental health services. This included schools, community organizations, CISSS/CIUSSS partners, youth-serving organizations, and local service providers who gained clearer information about English-language resources, referral options, and youth-friendly tools. This inter-organizational communication and collaboration also created more entry points into services: youth could learn about mental health supports through schools, community organizations, public partners, online content, events, and trusted adults.

Through their own efforts reaching out to other institutions, health services and schools for dialogue and collaboration, community organizations in YMHI have also expanded their knowledge of what is available for youth. All responding organizations reported that their **awareness of other mental health services and programs available to youth has expanded** because of involvement in YMHI (52% said this was much stronger; 48% somewhat stronger). By being more informed and connected, community organizations were better able to refer youth to services that were appropriate and accessible and develop new partnerships to expand programming to benefit English-speaking youth in their areas.

CHSSN's in-person Mental Health Forum and online Community of Practice (CoP) were also important events for building community organizations' connections with each other. The main benefit of the CoP mentioned by participants appears to be exchanging in real time with other YMHI organizations and hearing what has worked well and not worked well in their work for youth mental health. Similarly, building connections was the most widely experienced benefit of the Mental Health Forum held in early 2026. Almost **all respondents, 97.8% (45 of 46), agreed or strongly agreed that they met someone new working on mental health initiatives.** In addition, 87.0% (40 of 46) said they strengthened existing connections with other organizations.

## In the words of community organizations...

*"I like being able to hear and share things that have worked and challenges we are facing. It has served to be very beneficial in making those meaningful connections with other orgs."*

*"Meeting new people and organizations opened my eyes to the resources and tools that already exist across Québec"*

*"One of the most significant areas of growth for our organization through participation in YMHI has been the meaningful connections and networking relationships we established with other organizations that provide mental well-being services for youth."*

*[I gained] "More knowledge in regards to what services are available online for mental health due to the isolation of our communities."*

*[I learned about] "The variety of community services available across the province"*

*"The current format [of the CoP] encourages participation, collaboration, and the sharing of valuable experiences, which makes the sessions both informative and inspiring for organizations working to support youth mental well-being."*

*"The discussion topics [at the CoP] have been excellent, and the activities have been dynamic and engaging, creating a welcoming space for meaningful exchanges and peer learning among participants."*

*[I appreciated] "Learning about initiatives and services shared by other organizations within the YMHI network and beyond"*

*"By attending YMHI Forums I have gotten a better understanding of resources there are for youth and being from Abitibi and not Montreal we have been able to suggest that some organizations if possible offer online services for those not in the region."*

## 1.3 Expanded Youth Engagement and Mental Health Programming

### 1.3.1 Expanded youth mental health activities and programs

Over 10,000 young people aged 12-29 took part in the 1740 mental-health related activities and events offered via the community organizations during 2025-26. **Many of the activities were led by and for youth, with youth** in leadership roles in event planning or as mental health ambassadors and peer educators. The most common types of local and online youth activities were (in order of frequency across the participating communities):

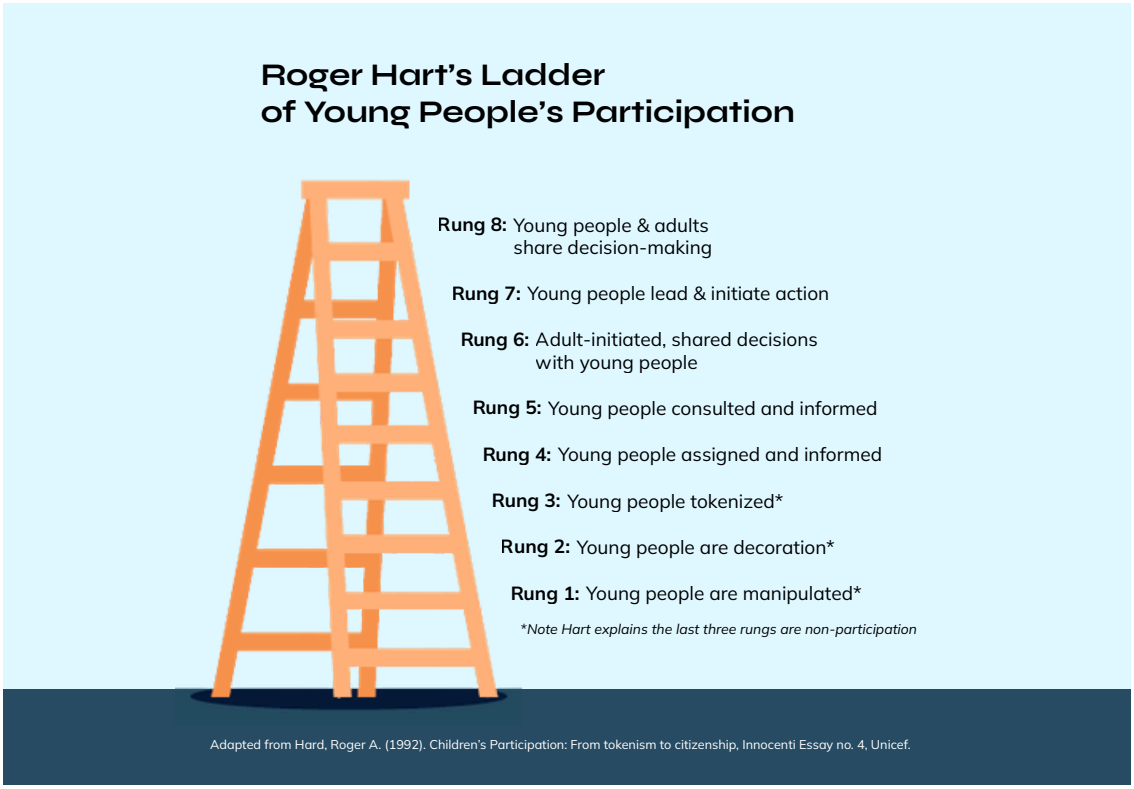
- School-based workshops, kiosks, fairs, classroom sessions, or mental health days
- Wellness, self-care, coping skills, stress/anxiety management, or mindfulness activities
- Creative, arts-based, cultural, music, podcast, film, or expressive activities
- Resource navigation, service information, referrals, or awareness kiosks
- Peer support, drop-ins, youth clubs, safe spaces, or regular group programming
- Youth leadership activities, advisory groups, ambassadors, panels, volunteering, or youth-led initiatives
- Activities that promote mental wellness through connection to nature, sport, movement, or recreation
- Counselling, therapy, support groups, or professional mental health supports
- Healthy relationships, sexual health, violence prevention, anti-bullying, or safety-focused activities

### 1.3.2 Increased youth engagement in community organizations and mental health activities

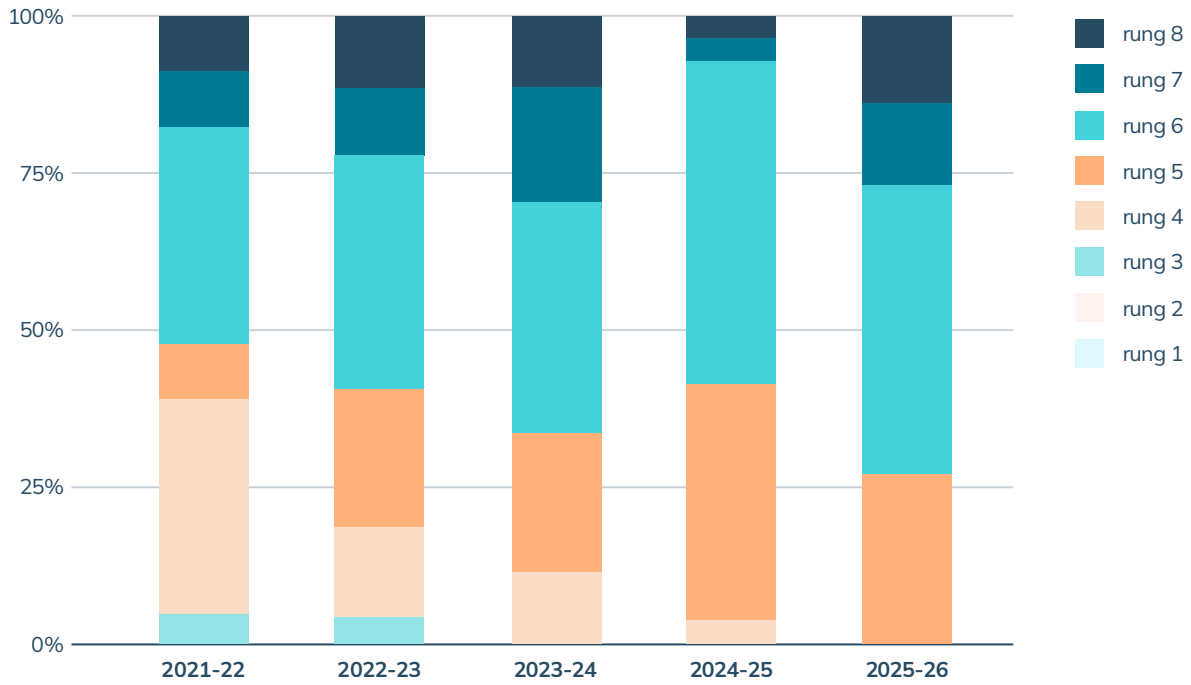
When the 30 participating community organizations were asked what effects participating in YMHI had on their internal capacities, **85% reported that they had improved their engagement of youth within their programs and/or organization as a whole** (37% reported this as much stronger, 48% stronger, and 15% no change). Often youth engagement took the form of youth committees, youth ambassadors, youth representation in decision-making spaces, and youth involvement across the program cycle.

Since the beginning of this initiative, CHSSN has used Hart's Ladder of Young People's Participation[1] as a reflection and assessment tool, with each participating community organization reporting annually about which rung on the ladder they believe they are at.

[1] *See, for example: Registered Nurses' Association of Ontario. (2016). Hart's Ladder of Youth Participation. Retrieved from https://ymhac.rnao.ca/section-one/1.4/page3*




## Assessment on Hart's Ladder of Youth Engagement




Proportion of community organizations at each rung, by year

Over the last year, for the first time, all YMHI community organizations self-assessed at levels 5 and higher, with levels 4 and below involving no youth consultation in design. In addition, the proportion of organizations that self-assessed at rungs 7 and 8 increased from 7% in 2024-25 to 27% in 2025-26. This indicates **advanced levels of youth leadership**. Overall, the trend indicates that being part of YMHI continues to increase the youth participatory nature of the community organizations within their mental health programming over time. This finding reinforces CHSSN's learning that meaningful engagement is built at the speed of trust, and the sustainability of YMHI funding remains central to the consistency required to achieve greater youth engagement.

## In the words of community organizations...

*"Since we've received YMHI funding our youth engagement has grown significantly from only engaging with youth in the classroom to now facilitating youth drop-in events where teens and youth frequent our community centre in large numbers."*

*"YMHI has reinforced our commitment to meaningful youth engagement by integrating youth throughout the full program cycle (from conception and planning to implementation and reporting) ensuring that our initiatives are truly youth-informed and responsive to their lived experiences."*

*"[An] important outcome has been the increased engagement of youth in our programs and initiatives. Through the opportunities and visibility created by YMHI, we were able to reach and actively engage more than 100 young people through various programs and initiatives, strengthening our connection with the youth we serve and expanding the impact of our work."*

*"Outreach and engagement with youth and youth organisations has improved and increased accessibility of services and information"*

### Youth in governance gaps identified

Another aspect YMHI encourages and tracks is the involvement of young people on participating organizations' boards of directors. In 2025-26, 29 people aged 35 and under served as directors on participating organization's boards. However, of the 30 organizations, only 18 (60%) had at least one board member aged 35 and under, and 40% had none. Similarly, when asked what effects participating in YMHI had on their organization's capacities, **41% reported that they had improved their organization's support for youth in governance or on the board of directors** (22% reported this as much stronger, 19% stronger, and 60% no change).

Based on these findings, CHSSN aims to strengthen this area in coming years. Planned actions include promoting Y4Y's Youth on Boards training program and supporting community organizations to learn about the benefits of young people's presence on boards of directors, such as succession and contributing to more informed and inclusive decision-making.

### More access to knowledge resources on youth mental health

Most of the participating community organizations also **expanded the availability of English-language mental health information for youth** by creating, adapting, and translating a wide range of resources including: workshop materials, guides, social media content, pamphlets, resource cards, wellness kits, presentations, and activity-based materials. These resources covered topics such as stress and anxiety, suicide prevention, healthy relationships, grief, self-care, neurodiversity, harm reduction, identity, bullying, youth rights, and service navigation.

Organizations reported that these tools helped make mental health information more accessible, practical, and youth-friendly. They were used in workshops, kiosks, schools, peer support spaces, social media campaigns, and community activities.

# Results: BB 2025-2026

# 2. Bright Beginnings

Bright Beginnings aims to improve the well-being of English-speaking children, youth and their families by developing better access to programs and services. To develop better access, stakeholders are engaged and encouraged to increase their capacity to offer services to English-speaking children, youth and families. Two strategies are used to encourage stakeholders to increase their capacity:

- Increasing stakeholder awareness and knowledge of the realities of the English-speaking children and families, principally the vulnerabilities that are consequences of barriers to access
- Developing and implementing collaborations with stakeholders to provide new or adapted services to better reach and support English-speaking children and families.

*Note*: this approach is informed by CHSSN's foundational framework, the Community Mobilization Model, which has guided the organization's work for over 20 years.

In essence, the Bright Beginnings' theory of change is -- when stakeholders recognize the consequences of the barriers to accessing services on English-speaking children, they will be willing to collaborate to adapt to better reach English-speaking children and families. And further, as these collaborations grow and increase at the regional and provincial levels, the children and family ecosystem will change. This chain of events is based on the assumption that knowledge about the realities of English-speaking children will motivate stakeholders into action.

Needless to say, change and transformation isn't that straightforward. And while Bright Beginnings has experienced much success over the years, there continues to be reluctance on the part of some potential partners and stakeholders to adapt, despite their knowledge and recognition of the realities of English-speaking children and families. In the course of CHSSN's ongoing efforts to encourage stakeholders to increase their capacity, it began to explore and learn more about this reluctance and, during the year, developed a new and different provincial-level collaborative project – a how-to guide on adapting to better reach English-speaking children and families. Early responses to the first phase have shown promise and will be discussed in the report.

This section of the report elaborates on the results of Bright Beginnings' two streams: 1) regional organizations' efforts to encourage change at the regional level; 2) CHSSN's efforts to encourage change at the provincial level. The key performance indicators are presented below in Table 4.

### Table 3: How participating community organizations' capacity changed through YMHI

| Overview of the BB Program Key Performance Indicators 2019-2026 | | | | | | | |
|---|---|---|---|---|---|---|---|
| Number of: | 2019 (Aug-Dec) | 2020 | 2021 | 2022 | 2023 | 2024-25 | 2025-26 |
| Regional organizations funded by BB | 18 | 19 | 21 | 23 | 23 | 23 | 23 |
| Regional organizations BB partners | ----- | 74 | 152 | 195 | 270 | 272 | 275 |
| CHSSN provincial BB partners | 1 | 9 | 9 | 11 | 11 | 12 | 14 |
| Regional orgs collaborative projects | ----- | Not Tracked | Not Tracked | Not Tracked | 172 | 209 | 217 |
| Success Metric: | | | | | | | |
| Regional orgs whose partners made changes | ----- | Not Tracked | Not Tracked | Not Tracked | 98 | 134 | 136 |

## 2.1 Regional Organizations' Increased Influence through Partnerships

CHSSN's network of regional organizations is supported by the Bright Beginnings to create early childhood, youth and family initiatives with partners, with the goal of increasing access to services for the English-speaking community. Support for regional organization projects is for specific activities:

- Improve networking and representation between the English-speaking community organizations and French-speaking service providers
- Develop collaborations and partnerships between the English community organizations and French-speaking service providers
- Outreach to English-speaking children, youth and families
- Develop knowledge on the reality and needs of English-speaking children, youth and families in their region (CHSSN Bright Beginnings Application Guide 2024-2029, p. 3).

Bright Beginnings continued to support projects with 23 regional organizations in 2025-26, from 15 of the 17 Québec regions (excluding the regions of Nord-du-Québec and Nunavik). A list of the 23 participating regional organizations are included in Appendix A: Table A1 - List of Regional Organizations Supported. Their locations can be found on the CHSSN Network Map..

The regional organizations have built strong and consistent relationships with partners and Tables de concertations over time. During the past year, many recognized new opportunities and had established enough recognition and confidence to develop or join substantive and impactful collaborations with influential partners like CISSSs, some for the first time. Regional organizations continued creating, as well as maintaining, collaborations that led to their partners adapting or making changes to better serve English-speaking children and families, which are leading to shifts in local and regional child and family ecosystems.

> *"The Bibliotheque de Bonaventure (Gaspé) has started to develop a habit of considering the needs of English-speaking families and is increasingly recognizing those needs."*
>
> From CASA Report

### 2.1.1 Changes Made by Partners in 2025-2026: Outcomes of Regional Organizations' Collaborations

Most of the regional organizations' collaborative projects led to partners adapting or making changes that created improved access for English-speaking children and families, as in the previous years. The outcomes for the year are shown in Figure 1: Success Metrics and Outcomes for 2025-26.

Many adaptations or changes were made by new partners or new collaborations with existing partners. Others include adaptations initiated in previous years and maintained. For example, the scaling of the Storytime - Heure du conte en anglais Program, which also developed sessions in Spanish and Arabic, throughout the 5 branches of the Bibliothèques de Trois-Rivières. A few adaptations made in previous years by partners weren't maintained, mainly due to changes or challenges of the partner organizations, such as difficulty hiring bilingual staff.

The adaptations or changes made by partners, as reported by the regional organizations, were analyzed and categorized into 11 types. Table 4 below, presents the frequency of each type of change. In addition to the analysis of change types, these outcomes of regional organizations' collaborations are illustrated with examples of each type of change. These examples serve to further demonstrate the different types of changes as well as the diverse areas of activity these collaborations involve.

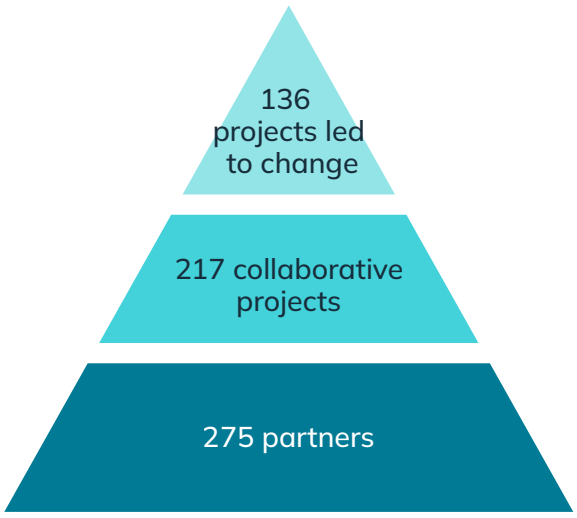



*Figure 1: Success Metrics & Outcomes for 2025-26*

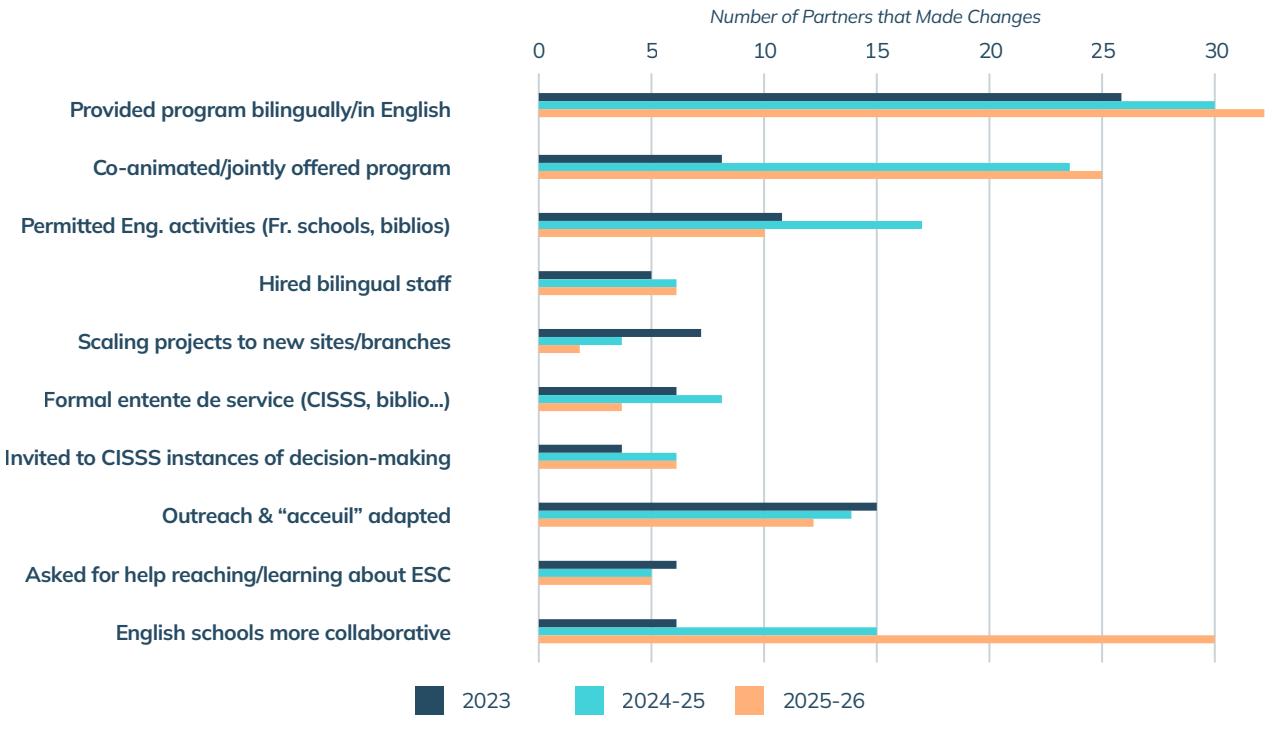
**Highlights of types of changes made by partners resulting from regional organizations' collaborations:**

- The two most frequent types of change made were partners agreeing to provide programs bilingually or in English, and to co-animate or jointly offer programs in order to make programs more accessible to English-speaking children and families. This is similar to previous years.
- The frequency of CISSSs inviting regional organizations to instances of decision-making was the same as last year. CISSSs are one of the most influential stakeholders in local and regional child and family ecosystems, making this an important outcome and demonstrates the level of recognition and potential influence regional organizations have achieved.
- The number of partners who committed to hiring bilingual staff was also the same as last year. This is particularly encouraging because it is a type of change that can require much effort and commitment for partners to implement, often involving the partner's governance board and organizational culture.

*"The early literacy project in 2 libraries now has a small section of English books and games. They have invited the English-speaking community to visit since there are no libraries in Grosse-Île (Magdalen Islands)."*

From CAMI Report

### Table 4: Types of Changes Made by Partners of Regional Organizations



## Examples of the 11 of the Types of Changes Made by Partners of Regional Organizations


**Agreed to provide programs bilingually or in English**

During a group visit to the Bibliothèque Jacqueline-de Repentigny, in Montreal Centre-Sud, the librarian listened to the concerns shared by **BGC Dawson** members. The families expressed that many of the library's activities were offered exclusively in French, which made the environment intimidating. This led the library to develop a new initiative for the following session - five program blocks dedicated to Bilingual Storytelling.

**CAMI's** (Magdalen Islands) partner, Sein Pathique, offered respite care to English-speaking and bilingual mothers of babies 0-18 months for a few hours a week.

**MWCN** (Montérégie West) and the Centre de Ressources Familiales du Haut St-Laurent jointly offered Roll & Stroll, a program for moms to walk and talk together with their young children. MWCN led the program during the summer months when the Centre de Ressources Familiales wasn't able to offer it. The two groups also collaborated on other projects, such as a summer Mom and Baby Potluck.

La Maison de la famille (MdF) and **NSCA** (Côte-Nord) jointly offered bilingual cooking classes, hosted in MdF's kitchen, for francophone and anglophone youth, aged 9-14 years old. The youth were paired into groups of two and had to follow the recipes in both languages.

**Co-animated or jointly offered program**

**Permitted English activities in French school, bibliothèque, etc.**

French school, Ecole Boréale, permitted **ECO-02** to offer bilingual extracurricular activities to their kindergarteners. The nearby Canadian Forces Base Bagotville (Saguenay) brings many out-of-province families to the area, and this project increased the visibility of ECO-02 among parents. The school staff also became more comfortable referring families and reaching out to ECO-02 when an English-speaking parent is looking for services beyond the school's scope.

Hired bilingual staff

**CASE** (Mauricie-Centre-Qc) shared that “La Maison de la famille Chemin du Roi demonstrated a strong commitment to supporting English-speaking families – going as far as hiring an English-speaking staff member”. The MdF continued to help promote activities in English to its members and invited CASE to collaborate on future activities.

**4Korners** (Laurentides) was able to scale its partnership with People Apt at Negotiating Deficits of Attention (PANDA) for programming on Social Emotional Learning (SEL) and Learning Through Art, a program for neurodivergent children. This expansion meant that these after-school programs were available in four more schools in the Sir Wilfrid Laurier School Board. As part of the expanded partnership, PANDA Thérèse-De Blainville was able to contribute specialized expertise on ADHD and used evidence-based practical strategies and tools to help children and their parents. PANDA Basses-Laurentides Sud-Ouest was able to improve its English capacity.

Scaling project to new sites or branches

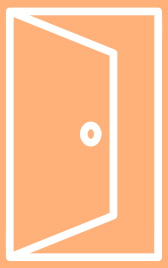
Formal entente de service (CISSS, biblio...)

**4Korners** entered into a 3-year agreement with the CISSS to provide prenatal classes and postnatal support programs, ensuring the delivery of structured, evidence-based sessions for English-speaking expectant and new parents.

**Invited to CISSS instances of decision-making**

**ACDPN** is collaborating with the Agir Tôt staff of the CIUSSS Ouest-de-l'île de Montréal to co-develop a structured referral pathway to connect Black English-speaking parents of young children with ACDPN. The collaboration has led to increased recognition of culturally adapted practices by Agir Tôt staff and that Black English-speaking families navigating early childhood services may require supported navigation, in addition to the standard referral.

After **Neighbours** (Abitibi-Témiscamingue) joined the Comité Persévérance Scolaire, the Maison des jeunes (MdJ) became interested in collaborating with them. The MdJ agreed to present its activities in English to teens at the Noranda School. This was followed up with an invitation to a pizza evening so the students could become familiar with the locale and meet youth who frequent it. The MdJ also welcomed the Grade 6 students for a tour with their teacher and Neighbours' youth coordinator. After the visit, the Grade 6 students were no longer hesitant to join.



**Outreach & "accueillir" adapted**

**Provided access to English-speaking clients, such as in French schools**

**Connexions** was invited by the French school board's Centre de services scolaire des Portages-de-l'Outaouais to participate in a kiosk fair on community services for immigrant families and to outreach to immigrant families who speak English as their first language.

**Asked for help reaching/learning about the English-speaking community**

La Maison de la famille Rimouski-Neigette asked **Heritage** for help preparing a survey to explore offering bilingual activities at the MdF. The Directrice Générale of MdF-RN also met with Heritage for an in-depth briefing about its services and the realities of the English-speaking community in the region. The Directrice Générale then offered to bring those realities to the MdF annual gathering, which was being held in Rimouski, and became a strong advocate and ally for the English-speaking community.

The Riverside School Board invited **ARC** (Monteregie-Centre) **MEPEC** (Monteregie-Est) and **MWCN** (Montérégie-West) to participate in K4 and K5 Orientation/Welcome Days to present their services and help connect families with English-language community resources during the critical school transition period. The Riverside School Board actively included community partners in the school-based transition planning, outreach and activities. As part of the collaboration, the school board and three regional organizations also designed, produced and distributed Welcome to Pre-K/Kindergarten Bags to every K4 and K5 child's family in the school board.

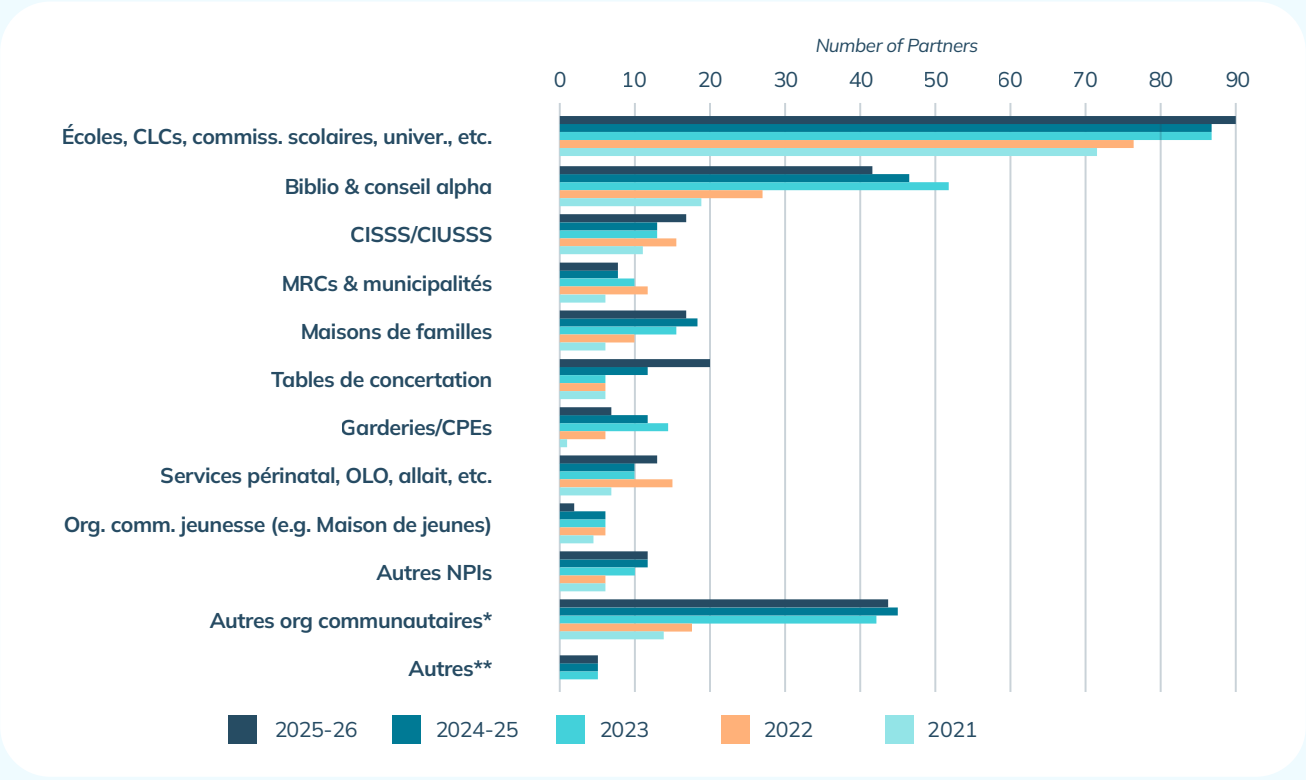
**English schools were more collaborative**

## 2.1.2 Regional Organizations' Partners and Collaborations

The number and types of partners that regional organizations collaborated with are presented below in Table 5. While these numbers are some of the key performance indicators tracked in BB, the most important success metric is the number of partners that adapted or made changes as a result of collaborating with a regional organization, as shown in the triangle diagram in Figure 1 above. And although the number of partners and particularly the types of partners are important, it is the quality and results of a collaboration which are most important, rather than the quantity of partners and collaboration.

The numbers for each of the different kinds of partners are similar to past years. Note that the aggregated data doesn't show that many regional organizations collaborated with new partners, for example, Vision (Gaspé) started collaborating with the OLO Foundation for the first time.

### Table 5: Regional Organizations' Partners 2021-2026




** Autres partenaires communautaires : autisme, diversité/éd sexuelle, immigrantes, bénévole, CHSLD, etc.*
*** Autres : musée, théatre, église, Parc Nationale, Centre ressource-famillies militaires*

- **Maisons de familles (MdF):** Several years ago, the Fédération Québécoise des Organismes Communautaires Famille (FQOCF) developed a project to encourage its member MdFs to engage more English-speaking families. The CHSSN has been on the committee for the project, called Soutien aux organismes communautaires Famille accompagnant les familles d'expression anglaise (SOFEA). One of the strongest results of the project has been more collaborations between MdFs and regional organizations.

The video, *Avez-vous déjà pensé aux tout-petits des familles qui s'expriment en anglais?*, showcasing the collaboration between regional organization ECO-02 and la MdF Chicoutimi, was completed and released in November 2025. The video illustrates the benefits of partnering with English-speaking organizations. Details are provided in Appendix B: Resources Developed in Provincial Collaborations.


However, during the year, there were fewer MdFs collaborating with regional organizations, following an increase in each of the previous four years. There was a first-time collaboration between a regional organization and MdF, so the net loss was one MdF, for a total of 17 for the year. On closer analysis, two collaborations in the previous year were "ponctuel" or one-offs, which weren't repeated or further developed. Nevertheless, considering that not every regional organization has a MdF in their region, partnerships with 16-18 MdFs might be the extent of feasible collaborations. It may be worthwhile to explore other potential explanations during the coming year.

### Collaborations generating evident-based practices and knowledge dissemination:

**Regional organization ACDPN** (Montreal) has been collaborating with the Women's Health Mission, Obstetrics Department at McGill University Health Centre (MUHC) in an action research initiative on barriers in maternal and perinatal care accessibility for Black English-speaking families. A nurse-supervised focus group was conducted that generated lived-experience insights to inform future maternal health and bereavement support models. To date, the initiative has developed practical tools and actionable recommendations to improve planning, responsiveness, and community-informed maternal health services for Black English-speaking families. Collaborating on future pilot initiatives and service adaptations focused on equitable maternal and bereavement care are being explored.

**Regional organizations AGAPE** (Laval) has been collaborating with the Child-Bright Network for many years, including on its virtual program designed to empower families while they wait for services for their children with neurodiversity or brain-based injury. Developed in British Columbia, the virtual program is being tested, in advance of scaling to more locations in Canada, and involves researchers from several universities, including McGill. A specialized Pre-K in Laval is one of four test sites and will focus on English-speaking families. The AGAPE Bright Beginnings coordinator, Natalina Pace, is named as one of many authors and collaborators (a parent-research-partner for a child with a developmental disability) in the 2026 journal article, Online Learning for Caregivers of Children and Youth with Neurodevelopmental Disabilities: A Scoping Review. Physical & Occupational Therapy In Pediatrics, 46(4), 694–730.

*"MdF has committed to hiring more bilingual staff in the future, to be sure that at least one staff member is able to speak English during all activities they host."*

From CASA Report

### 2.1.3 Collaboration Challenges of the Regional Organizations

The challenges reported by the regional organizations were a combination of the common and continual issues of partner alignment and follow-through, participant engagement, particularly working in rural areas, and the recurring obstacles caused by language laws.

One regional organization reported that their CIUSSS actually disputed the necessity of offering material in English, despite evidence to the contrary. The CIUSS had engaged and expressed readiness but as the project developed, "differing perspectives emerged…and the CIUSSS identified that English-language information was already available…but community feedback pointed to gaps in consistent access." This led to postponing the project launch, but dialogue has continued to better align efforts, coordination and coherence.

**Language laws continue to create obstacles and confusion:** For example, a regional organization reported having extensive discussions to reassure partners that the planned collaborative projects didn't contravene any language laws. One of these partners was even representing the English-speaking community.

**Staff consistency and turnover at partner organizations:** Several reported project difficulties and slow development caused by staff turnover at partner organizations as well as partners' staff recruitment challenges.

**Schools and the difficulty working with them:** Several shared their challenges of working with schools and the difficulties of alignment, coordination, communications, follow-through and lack of capacity.

**Reaching and engaging participants, particularly in rural areas:** One regional organization described the challenge of working with isolated English-speaking families in less populated areas, "…it requires sustained outreach and longer-term engagement strategies. Building awareness takes more time and patience, and the need for more tailored approaches when engaging hard-to-reach populations in rural settings." Another regional organization shared how they mitigated their low participation problem by expanding the intended age group and successfully reached enough youth to hold the activities.

### 2.1.4 Representation: Tables de concertation and Influencing Decision-Makers

Participation on Tables de concertations is a crucial strategy for developing new partnerships as well as influencing the local and regional child and family ecosystem. This year, several regional organizations joined more Tables de concertations and overall, regional organizations' participation and engagement in Tables de concertations has been increasing. Combined, they were members of over 70 Tables, ranging from Tables de concertations régionale petite-enfance, jeunesse-enfance famille and persévérance scolaire, to Tables de concertation des saines habitudes de vie and comités de développement local.

As mentioned earlier, the number of Tables de concertations that developed specific collaborative projects to improve access for English-speaking children and families increased significantly during the year. This is in large part due to the influence regional organizations are having as members of Tables de concertations.

An important part of regional organizations' involvement and influence in Tables de concertations is their engagement in countless committees, sub-committees and working groups of the Tables de concertations. Many involved decision-making on priorities setting and action-planning and influenced resource allocation and service delivery. The presence of the regional organizations at these instances of decision-making is an important contribution to improving access to programs for English-speaking children and families as well as shifting the local and regional child and family ecosystem.

**Other outcomes reported by regional organizations participating in Tables de concertations:**

- Several Table ConParle Famille members have initiated contact with ARC to explore collaboration opportunities for community-based projects
- The Table de Concertation de Verdun advocated for BGC's Saturday Free Play program to continue
- The Table d'information et référence d'enfance et familles created publicity and documents for the Semaine Québécoise des Familles and the Grande Semaine des Tout-Petits events in English as a result of ECO-02's participation
- The community organizer at the CISSS approached MCDC to be part of a joint project as a result of MCDC's participation at the Table de promotion et prévention famille-enfance-jeunesse de Lévis
- The Table de concertation Petite Enfance funded MWCA's 6-week session language stimulation program.

*"Members of the Table de concertation secteur famille 0-11 ans, such as the CIUSSS and the CDC, have demonstrated a growing willingness to engage with CASE (Mauricie)--inviting us to participate in planning, events, and service promotion. This shift represents ongoing progress toward more inclusive service delivery and mutual understanding of the English-speaking community."*

From CASA Report

### Other Types of Representation

- **School transition working groups and committees:** 6 regional organizations (CASA, CASE, Connexions and, together in the Montérégie region, ARC, MEPEC, MWCN) participated in early school transition working groups or committees. Some are connected to school boards or schools, while others are collaborations with a Table de concertation. Notably, Connexions has joined a working group which includes a French school board.
- **ECOL** has been elected to the Governing Board of Pinewood Elementary School
- Eva Marsden Centre/WIN continued as a member of the Advisory Committee of the provincial table de concertation Intergénérations Québec
- Neighbours Youth and Families Coordinator continued as a director of Noranda School governing board
- **Neighbours** Youth and Families Coordinator was elected to the Board of Action Reussite and quickly noticed a change towards the English-speaking community.
- Neighbours Youth and Families Coordinator was invited by Action Réussite to attend a special reception held in February at the Québec National Assembly for Les Journées de la perseverance Scolaire as a representative of the English-speaking community of Abitibi-Témiscamingue.

*"The fact of being a director has already changed the dynamic on the board; the other members have taken the presence of the English-speaking community into consideration when planning and making decisions."*

Reported by Neighbours about the Action Réussite Board

## 2.2 CHSSN's Increased Influence on Provincial Stakeholders

The role of CHSSN in advancing the goal of Bright Beginnings -- improved access to programs and services for English-speaking children, youth and families -- is to support and strengthen the capacity of the CHSSN network of 23 regional organizations, and equally important, to promote change in the child and family ecosystem by engaging stakeholders.

**Objectives**: CHSSN encourages stakeholders to increase their capacity to offer services to English-speaking children and families by:

- increasing stakeholder awareness and knowledge of the realities of the English-speaking families;
- building relationships with key stakeholders and decision-makers, such as provincial organizations, government and public instances;
- developing projects and initiatives in partnership with provincial organizations.

The **highlight of the year**, on the provincial level, was the unexpected success of mobilizing provincial partners for the development of CHSSN's new guide, *Vos services sont-ils accessibles aux tout-petits d'expression anglaise : Guide de soutien à l'inclusion des familles d'expression anglaise en contexte de vulnérabilité* (2026). CHSSN developed the *Guide de soutien* as part of the next phase of the Bright Beginnings Early Childhood Communications Strategy, which began two years ago.

The Communications Strategy and its outcomes to date will be discussed in the section, as well as the results of other provincial collaborations and results of government relations. The third and last section summarizes the capacity building activities supporting the CHSSN network of 23 regional organizations supported by Bright Beginnings.



Grille d'auto-évaluation de votre organisme sur l'inclusion des familles d'expression anglaise

CHSSN

Cette grille vise à dresser un portrait général de vos pratiques actuelles et des pistes de développement possibles pour mieux rejoindre et soutenir les familles d'expression anglaise en contexte de vulnérabilité. Il ne s'agit pas d'une liste d'exigences ni d'un plan d'action obligatoire. Chaque organisme évolue selon sa mission, ses ressources et sa réalité. L'objectif est de soutenir la réflexion, de valoriser les actions déjà en place et d'identifier, au besoin, quelques pistes réalistes d'amélioration.

| | DÉJÀ EN PLACE | À RENFORCER | À EXPLORER | NON APPLICABLE |
|---|---|---|---|---|
| **1 Être sensibilisé aux réalités des familles d'expression anglaise en contexte de vulnérabilité** | | | | |
| • Notre équipe a pris connaissance des données sur les familles d'expression anglaise spécifiques à notre région. | | | | |
| • Notre équipe échange avec des organismes anglophones de notre région pour mieux comprendre leurs réalités. | | | | |
| • Notre équipe a suivi un atelier de sensibilisation aux réalités vécues par les familles d'expression anglaise. | | | | |
| **2 Rejoindre les familles d'expression anglaise en contexte de vulnérabilité et leur faire connaître nos services** | | | | |
| • L'information sur nos services est diffusée dans des lieux fréquentés par les familles d'expression anglaise (par exemple, des écoles, des établissements néglueux et des organismes communautaires). | | | | |
| • Notre équipe collabore avec le CHSSN et des organismes anglophones de notre région pour mieux rejoindre les familles d'expression anglaise. | | | | |
| • Nous promouvons nos services et activités en français et en anglais dans le respect de la Charte de la langue française. | | | | |
| • Des familles d'expression anglaise participent à nos activités et bénéficient de notre accompagnement. | | | | |
| **3 Créer un environnement accueillant** | | | | |
| • Notre personnel rassure les familles : elles sont les bienvenues aux activités, quel que soit leur niveau de français. | | | | |
| • Notre personnel accueille les familles avec amabilité, patience et ouverture, peu importe la langue parlée. | | | | |
| • Notre personnel valorise toutes les langues parlées par les enfants. | | | | |
| • Les langues parlées par les membres du personnel sont affichées à l'accueil, à différents endroits dans nos bureaux et sur notre site Internet. | | | | |
| • Les membres du personnel qui parlent d'autres langues que le français portent un macaron ou une cocarde indiquant la ou les langues qu'ils parlent. | | | | |
| • Nos locaux contiennent des éléments culturels inclusifs, comme des jouets ou des livres en anglais. | | | | |

29

## Natifs de Laval

# L'histoire de Sami

Sami, âgé de 4 ans, vit à Laval avec ses parents, dont la langue maternelle est l'anglais. Depuis l'âge de deux ans, ils ont remarqué que leur fils éprouvait des difficultés à s'exprimer et à comprendre des consignes simples. Ignorant que l'apprentissage de plusieurs langues peut favoriser le développement langagier, ils ont choisi de se concentrer exclusivement sur l'anglais. Devant un possible retard de langage soulevé par le médecin, les parents de Sami sont très inquiets et souhaitent obtenir un soutien rapide pour assurer l'avenir de leur enfant.

Hélas, trouver des services en anglais s'avère long et difficile.

Le CLSC offre des documents et des séances d'information, mais uniquement en français. Bien qu'ils aient une base en français, les parents de Sami craignent de ne pas bien comprendre toutes les informations transmises et que cela nuise à la santé et au développement de leur enfant. On leur explique qu'il y a une longue liste d'attente pour rencontrer l'orthophoniste anglophone, qui est actuellement en congé de maternité. Ils sont encouragés à consulter en anglais comme il s'agit de la langue que Sami maîtrise le mieux. Les parents de Sami pensent que ce serait plus rapide au privé, mais ils n'en ont pas les moyens.

### 2.2.1 Building Relationships between Government Stakeholders and BB

Unlike the progress made by YMHI and other CHSSN programs, as well as by Bright Beginnings in previous years, there were indications of growing reluctance by the Québec Government ministries towards improving access for English-speaking children and families. The pre-election year and the Government's focus on the protection of the French language as well as the place the language debate held in political discourse may have been contributing factors.

#### Changes to Critical Research - l'Enquête Québécoise sur la parentalité (EQP)

A case in point was the Ministère de la Famille (MFA) directive to the Institut de la statistique du Québec (ISQ) to limit the questions identifying the language of respondents in the upcoming parents survey, l'Enquête Québécoise sur la parentalité (EQP), which is repeated every five years and planned for 2027.

CHSSN's letter to ISQ clearly articulates the reasons for concern and the repercussions of limiting the data collected on English-speaking parents (see Appendix C: CHSSN Letter). The EQP is a critical benchmark study, not only used by the Government to make policy decisions but by school boards and other community stakeholders, including the CHSSN.

As part of Bright Beginnings' work, CHSSN commissioned the ISQ in the past to analyze the data on English-speaking parents included in the two previous EQP studies. These analyses have demonstrated the challenging realities of English-speaking parents and served as important evidence-based knowledge for CHSSN's work. These ISQ reports, and the CHSSN tools based on them, are listed in Appendix B: Resources Developed in Provincial Partner Collaborations. Ironically, last year the MFA highlighted ISQ's report that the CHSSN had commissioned in its Bulletin de veille. See Appendix D: Ministère de la Famille Bulletin de veille, Janvier 2025.

CHSSN met with MFA staff to discuss its concern about the decision to limit language identifying questions in ISQ's 2027 edition of the EQP parent survey. While MFA staff indicated that they were unaware of the situation, and would look into it, CHSSN has yet to receive any follow up response. However, the ISQ has confirmed, in writing, the decision to remove most language questions in the upcoming EQP.

These developments, together with others, indicate that the MFA has shifted its receptiveness towards the English-speaking community. This contrasts CHSSN's experience with the Ministère de la Famille over the last few years. In fact, the Ministre de la Famille mentioned the need to assist English-speaking children during a press conference in 2021, for the Grande semaine des tout-petits (GSTP).


*Anne-Marie Cech and then Ministre de la Famille, Kateri Champagne Jourdain at the Collectif Petite-Enfance GSTP launch Nov. 2025*

## Other Developments with Government Stakeholders

### Ministère de la Famille (MFA)

CHSSN continues to be a member of the MFA Table des partenaires Famille. As reported last year, CHSSN had been invited to present the data on the realities of English-speaking children and their families. At the May 2025 presentation, CHSSN used the evidence-based tools developed through the Bright Beginnings Early Childhood Communications Initiative and based on the 2022 EQP study; see Appendix B: Resources Developed in Provincial Collaborations. Following the presentation, a comment made by a Table member is worth mentioning because it represents a common reaction to the data. The community stakeholder representative was surprised to learn of the socio-economic differences and higher portion of single English-speaking parents when compared to French-speaking parents. The Table member hadn't had any contact with CHSSN before, and after the discussion, expressed interest in collaborating.

### Launch of the CHSSN Guide de soutien

Two staff members from MFA attended the event in May 2026.

### Ministère de l'Éducation

CHSSN initiated a follow-up meeting with Mireille Abadie, Spécialiste santé et services sociaux en éducation at the Direction du soutien au réseau éducatif anglophone, of the Ministère de l'Éducation. CHSSN learned during the meeting that the committee on early school transition won't be revived, following the departure of a key staff member, due to limited staff capacity.

### MSSS

CHSSN attended a committee meeting at the MSSS concerning English-speaking health partners.

### Secrétariat aux relations avec les Québécois d'expression anglaise (SRQEA)

SRQEA requested a meeting with CHSSN in response to CHSSN's letter to the ISQ concerning the 2027 edition of the EQP parent survey. SRQEA has been supporting CHSSN in its process to have the decision on limiting language identifying questions reconsidered. John McMahon, Sous-ministre adjoint, SRQEA, attended the May 2026 CHSSN launch event for the Guide de soutien.

The diagram in Figure 2 below represents the progression of government relations since the start of Bright Beginnings in 2020.

| Québec Ministères | 2020 | 2021 | 2022 | 2023 | 2024-25 | 2025-26 |
|---|---|---|---|---|---|---|
| Ministère de l'Éducation | FIrst School Transition Forum collaboration | Presented at Ctr of Excellence meeting | Joined First School Transition Proj. Committee | Collaboration Maintained | Collaboration Maintained | Met with Mme Abadie, Spécialiste SSS en éducation |
| Ministère de la Famille | Min. Lacombe attends CHSSN GSTP event | Min. Lacombe mentioned ESC at a press conference | ESC integrated into internal work plan | Invited to presentation event, 1st time | Invited to join Table des partenaires famille | Presented at Table des partenaires |
| MSSS | ----- | ----- | ----- | Invited to a consultation for 1st time | FQOCF helped CHSSN on perinatal dossier | Attended English-speaking health partners committee meeting |

*Figure 2: Progression of Bright Beginnings Relations with the Québec Government*

### 2.2.2 Collaborating with Provincial Organizations

The support demonstrated by many of CHSSN's provincial partners reached a new level of engagement in the year 2025-2026. Many provincial partners were already strong allies but the invitation to collaborate on the CHSSN Guide de soutien brought an even stronger commitment.

As in previous years, CHSSN's provincial partners continued providing opportunities to influence stakeholders and decision-makers as well as create projects to increase awareness, knowledge and community capacity to offer services to English-speaking children and families.

The outcomes of collaborations with all provincial partners are listed at the end of this section, in Table 6.

## Key Results of Collaborations with Provincial Partners

- **Total of 14 Provincial Partners** in 2025-2026, including 2 new partners
- **New partners:** Confédération des Organismes Familiaux du Québec (COFAQ) and Educaloi, collaborating for the first time with Bright Beginnings but not the CHSSN
- **Réseau pour un Québec Famille:** Last year's new partner was particularly engaged with Guide de soutien project; described below.
- **Collectif Petite-Enfance:** the importance of access to English language health and social services was included among its 21 recommendations in its Collectif Plateforme électorale 2026

- F**édération Québécoise des Organismes Communautaires Famille (FQOCF):** The FQOCF began a project several years ago to encourage its member MdFs to engage more English-speaking families. The project, Soutien aux organismes communautaires Famille accompagnant les familles d'expression anglaise (SOFEA), is funded by the SRQEA and the CHSSN is a member of the SOFEA project committee. An achievement of the project has been more collaborations between MdFs and the regional organizations. However, as previously mentioned, the number of MdFs that collaborated with regional organizations decreased to 17, from 18 the year before, after increasing each of the previous 4 years. The change in number represents two MdFs that are no longer collaborating and one new MdF collaborating with a regional organization. While there may be several potential explanations for the downward trend, it may be useful to explore further.

- **Regroupement pour la valorisation de la paternité (RVP):**
  - Developed and launched co-parenting training in English, with a focus on parents of children with disabilities; see Appendix B: Resources Developed in Provincial Collaborations.
  - Collaborative project between RVP and 2 regional organizations, JHCP and MEPEC, on supporting dads during the perinatal period was particularly dynamic and generative:
    - Developed the resource guide, RVP, Resource Supporting Fathers Through the Perinatal Journey: A Practical Resource Guide for Community Organizations and Practitioners (June 2026)
    - Developed a practitioner training in English on supporting dads during perinatal period; includes 15 video clips featuring English-speaking fathers sharing their experiences
    - Produced the video, Partnering from the start: Best practices to engage fathers in prenatal services. In this interview format, the importance of including dads in perinatal services is discussed; released October 3, 2025.

- **RVP - Knowledge generation and dissemination:**
  - CHSSN partnered with RVP on co-parenting research. The survey included a subsample of English-speaking parents. Highlights of SOM English coparents survey results, released June 2026
  - Based on last year's research project by Yannick Sanschagrin and Said Bergheul, *Portrait des pères immigrants d'expression anglaise* (UQAT, 2025), a research article has been submitted to the scholarly journal Minorités linguistiques et société/Linguistic Minorities and Society
  - Said Bergheul presented the research on English-speaking immigrant dads, which was followed by a workshop facilitated by RVP, at the CHSSN GSTP launch event, Nov. 2025
  - CHSSN held a webinar, titled Langue, intégration et paternité: l'expérience des pères immigrants d'expression anglaise au Québec, to present and disseminate the research results to provincial partners in June 2025.

### CHSSN Collaborative Project: the Guide de Soutien

The greatest success of the year on the provincial level was the extent that provincial partners mobilized to collaborate on CHSSN's new guide, *Vos services sont-ils accessibles aux tout-petits d'expression anglaise : Guide de soutien à l'inclusion des familles d'expression anglaise en contexte de vulnérabilité* .

A distinguishing feature of the *Guide de soutien* is CHSSN's decision to develop the project as a collaboration and mobilize its partners to be part of it. Rather than developing the *Guide de soutien* on its own, CHSSN chose to make it a collaborative project and engage a group of partners. And, as detailed below, every partner who was approached, agreed to join the collaboration without hesitation.


The enthusiasm of partners and their commitment to the success of the project was unexpected. Partners devoted time reviewing the *Guide de soutien*, provided their tools, logos and messages to be included and promoted it on social media. Their engagement was visible and very public, and by extension, their support for the proposition of adapting to the needs of English-speaking children, which is essentially what the *Guide de soutien* represents. This engagement of partners in the collaboration can be viewed as an unanticipated early outcome of the *Guide de soutien*, in terms of a strategy, and shows promise for its potential to create change. It will be interesting to learn where the *Guide de soutien* travels, how other stakeholders and partners respond and whether it creates shifts in the eco-system for English-speaking children.

## The inspiration and rationale for the guide

Developed as part of the Early Childhood Communications Strategy that began two years ago, the idea of creating a guide evolved from reflecting on the reluctance to adapt programs to better service English-speaking children and families, and some candid discussions with partners. These discussions and reflection prompted asking why the reluctance and the need to explore the specific obstacles partners face in adapting programs. Subsequent conversations with partners uncovered their preoccupations and challenges, and in particular supporting multi-lingual and bilingual young children. This not only provided opportunities to share evidence-based knowledge and challenge myths about language acquisition but to shift discussions away from language politics and focus on programming, service delivery, language development and the needs of children.

CHSSN's external communications consultant persisted in asking insightful and tough questions about why the resistance to the CHSSN project team. This reflection process led to the concept taking the form of a guide that would address myths and unspoken but strongly held beliefs about risks to the French language. The confusion caused by differing interpretations of language laws by public institutions and governments at all levels was also identified as an issue to address.

## About the guide

Designed as a "how to", the Guide de soutien offers practical tools and emphasizes that the motivation for adapting services is supporting vulnerable children and not preserving the English community or rights-based or politically motivated. CHSSN's web page for the Guide de soutien has the following introduction:

> Il propose des pistes concrètes pour réduire les barrières linguistiques, favoriser l'accès aux services et soutenir le développement des tout-petits, tout en conciliant inclusion et promotion du français. On y retrouve des données, des outils d'autoévaluation, des exemples de bonnes pratiques et des ressources pour accompagner les organismes partout au Québec.

## Legal expertise

Special attention was given to address the legal aspects and concerns with respect to the Language Charter and the suggestions being promoted in the Guide de soutien. A collaboration was developed with Éducaloi, an independent non-profit organization that specializes in clear legal communication and legal education. Éducaloi wrote the section of the Guide de soutien regarding the use of English in community organizations (pages 36-41) and reviewed the self-evaluation tool for organizations from a legal perspective (pages 29-32). Feedback on the legal section is that it is particularly good and meets a demand.

## How provincial partners mobilized to support the development of the guide

Every partner that CHSSN approached to collaborate on the Guide de soutien didn't hesitate to get involved. For example, last year's new provincial partner, Réseau pour un Québec Famille, enthusiastically agreed to have the launch event for the Guide de soutien as a cinq-à-sept following the Réseau's full-day event for the Semaine de la Famille in May 2026. It also promoted the event to its members. Over 30 people attended the launch event for the Guide de soutien.

Other ways provincial partners provided support included:

- Reviewed the Guide de soutien before its publication: the 6 provincial partners approached agreed: Association des haltes-garderies (AHGCQ), Confédération des organismes familiaux du Québec (COFAQ), FQOCF, RVP, Réseau des Centres de ressources périnatales du Québec (RCRPQ), and Réseau pour un Québec Famille
- Logo appeared in Guide de soutien: 5 of the partners, who reviewed the Guide de soutien, agreed
- Tools included in Guide de soutien: 7 organizations agreed to have their tools listed (Centre Mosaïque de Québec, Fédération Québécoise de l'autisme, Fondation Marie-Vincent, Fondation OLO, Naître et Grandir)
- Promoted the importance of the Guide de soutien on social media after its May 2026 release: COFAQ and RVP
- Promoted the Guide de soutien after the May 2026 release in an infolettre: RCRPQ
- Agreed to provide a message of support (see below) to include in the Guide de soutien: 5 of the provincial partners who reviewed the Guide de soutien before its publication.

> Dans l'ensemble des Centres de ressources périnatales du Québec, nous constatons chaque jour que la période entourant la naissance est un moment de grande vulnérabilité pour les familles. Lorsque la barrière de la langue s'ajoute aux autres défis que vivent certains parents, leur capacité à chercher du soutien – et à en bénéficier pleinement – peut en être profondément affectée. C'est pourquoi nous saluons ce guide, qui propose des pistes concrètes, nuancées et réalistes pour rendre nos milieux plus accessibles aux familles d'expression anglaise. Nous sommes fiers de contribuer à cette démarche et de poursuivre, aux côtés de nos partenaires, la construction d'un Québec où chaque famille est accueillie avec respect et bienveillance. (p.5)
>
> Message from Marie-Claude Dufour, Directrice générale, of RCRPQ

## Table 6: Results of CHSSN Collaborations with Provincial Partners 2025-26

| Provincial Partners | Key Results 2025-26 |
|---|---|
| **Collectif Petite-Enfance**<br><br>**Partner since 2018** | • Collectif Plateforme électorale 2026 includes the importance of access to English language health and social services among its 21 recommendations<br>• Elise Bonneville, DG, spoke at the CHSSN Grande semaine des tout-petits (GSTP) 2025 launch event<br>• 10 provincial partners were present at the CHSSN GSTP event<br>• CHSSN continued as a GSTP committee member. |
| **Fédération Québécoise des Organismes Communautaires Famille (FQOCF)**<br><br>**Partner since 2020** | • CHSSN Guide de soutien: assisted in developing<br>• Hosted a session on the realities of English-speaking families at its annual members event, without the assistance of CHSSN<br>• Number of MdF collaborating with regional organizations declined to 17 from 18 in the previous year<br>• CHSSN continued as a member of its collaborative project committee, Soutien aux organismes communautaires Famille accompagnant les familles d'expression anglaise (SOFEA)<br>• Hosted a kiosk and attended 2 CHSSN events (GSTP and Forum for CISSS Partners. |
| **Association Québécoise des Centres de la Petite-Enfance (AQCPE)**<br><br>**Partner since 2020** | • Invited CHSSN to attend and host a kiosk at 3-day AQCPE event, Oct 2025<br>• Disseminated promotional material on the new Early Childhood Education Work-Study Program in CHSSN's network to increase enrollment of English-speaking students. |
| **Naître et Grandir**<br><br>**Partner since 2020** | • *Guide de soutien:* agreed to have its tools listed<br>• Attended the CHSSN GSTP launch event Nov. 2025<br>• Committed to prioritizing the translation of tools that are particularly pertinent for English-speaking families. |
| **Observatoire des tout-petits (OTP)**<br><br>**Partner since 2021** | • Published *Les tout-petits d'expression anglaise : entre vulnérabilité et difficultés d'accès aux services* on its website in Feb. 2026; the article summarizes the research and data on the realities of English-speaking families. |
| **Réseau des Centres de ressources périnatales du Québec (RCRPQ)**<br><br>**Partner since 2022** | • CHSSN *Guide de soutien*: promoted and assisted in developing<br>• Planned to include English-speaking parents in a survey but it wasn't feasible because the firm TACT's database of English-speakers was too small<br>• Released an English version of its press release EN about the survey results, which featured a quote from CHSSN's DG concerning the needs of English-speaking parents<br>• Released The-Perinatal-Experience-of-Parents-2026.pdf, an English version of the survey results. |

## Table 6: Results of CHSSN Collaborations with Provincial Partners 2025-26

| Provincial Partners | Key Results 2025-26 |
|---|---|
| **Réseau pour un Québec Famille**<br><br>**Partner since last year (2024-25)** | • CHSSN *Guide de soutien*: assisted in developing & launch event<br>• Invited CHSSN to join its committee on access to services<br>• Committee on access to services invited 2 CHSSN regional orgs to participate in a focus group for "intervenants"<br>• Invited CHSSN to present CHSSN Map App to members; Feb. 2026 |
| **Association des Haltes-garderies du Québec (AHGCQ)**<br>▪ **Re-established partnership this year (2025-26)**<br>▪ **Partnered in 2021 & 2022** | • CHSSN *Guide de soutien*: assisted in developing<br>• Attended the CHSSN GSTP launch event Nov. 2025. |
| **Confédération des Organismes Familiaux du Québec (COFAQ)**<br><br>**New partner (2025-26)** | • CHSSN *Guide de soutien*: promoted and assisted in developing<br>• Invited CHSSN to its perinatal Table<br>• Invited CHSSN to its event about adoption<br>• DG attended CHSSN GSTP event and Forum on Access to Services for English-speaking Racialized and Immigrant Communities. |
| **Éducaloi**<br>**First time collaboration with BB but not CHSSN**<br><br>**New Partner (2025-26)** | • Important contributor to CHSSN *Guide de soutien*: accompanied and provided clear legal guidance on la Charte de la langue française:<br>• ✔️ Wrote the section explaining la Charte de la langue française and reviewed the self-evaluation tool for organizations<br>• ✔️ The SRQEA funded Éducaloi's Guide de soutien collaboration. |
| **Leading English Education and Resource Network (LEARN)**<br><br>**Partner since 2019** | • LEARN'S CLC coordinators continued to collaborate closely with **6 regional orgs** on early school transition initiatives, among other projects<br>• Invited CHSSN regional orgs to participate in its webinar on early childhood development<br>• Presented at the CoP on School Transition and Perseverence, with Réseau Québécoise pour la réussite éducative in Nov. 2025<br>• CHSSN was a guest on LEARN's ShiftED audio podcast series (4.52K subscribers), as a result of CHSSN's presentation at the QUESCREN Forum (see below). The interview, In conversation with Anne-Marie Cech: Building stronger, healthier communities together, Dec. 16, 2025, included discussing what families and schools are seeing on the ground in Québec. |
| **Québec English-speaking Communities Research Network (QUESCREN) - affiliated with Concordia**<br><br>**First collaborative project in 2024-2025** | • CHSSN presented early childhood data at QUESCREN's Education Forum<br>• As a result of the presentation, CHSSN was interviewed for LEARN's audio podcast series ShiftED (see LEARN above)<br>• CHSSN was a member of QUESCREN's Program Committee for Inter-Level Educational Table Forum. |

## Table 6: Results of CHSSN Collaborations with Provincial Partners 2025-26

### Provincial Collaborative Projects Funded by Bright Beginnings

| Provincial Partners | Key Results 2025-26 |
|---|---|
| **OLO Fondation**<br><br>**Partner since last year (2024-25)** | • *Guide de soutien*: agreed to have its tools listed<br>• CHSSN funded the printing of English version of the OLO cookbook for families<br>• DG of OLO publicly stated, at a Collectif des tout petits gathering, their appreciation of their collaboration with CHSSN<br>• OLO made funding available for regional orgs to host nutrition workshops; 2 regional orgs received funding<br>• Hosted a kiosk & attended 2 CHSSN events (GSTP & Forum for CISSS Partners)<br>• OLO has translated most of its tools. |
| **Comité Jeunes et la protection de la jeunesse (formerly referred to as Les Partenaires Table)**<br><br>**French and English community stakeholders concerned with youth aging-out of government care (DPJ)**<br><br>**CHSSN a member since 2023** | Laurent Commission Follow-Up:<br>A preliminary report on English-speaking youth in Québec youth protection was produced by consultants Michael Udy, former DG of Batshaw, and Amanda Keller, McGill researcher and former youth-in-care. The report showed that there are discrepancies in access to services for English-speaking youth |
| **Fondation Marie-Vincent**<br><br>**Partner since 2022** | • CHSSN *Guide de soutien*: promoted and assisted in developing<br>• CHSSN continued as RVP's English spokesperson about English-speaking immigrant men for the media<br>• CHSSN continued participating in the co-parenting committee<br>• Accompanied **8 regional orgs** in making their activities more dad-inclusive<br>• Developed training in English on co-parenting; see Appendix B<br>• UQAT researcher presented on English-speaking immigrant dads and RVP held a workshop on the research, at the CHSSN GSTP launch event, Nov. 2025<br>• Collaborative project on English-speaking dads and perinatality, with 2 regional orgs, JHCP & MEPEC; Appendix B<br>• CHSSN partnered on co-parenting research. Survey included a subsample of English-speaking parents; released June 2026<br>• Based on last year's research on English-speaking immigrant dads, researchers submitted an article to a scholarly journal<br>• Hosted a kiosk and attended 2 CHSSN events (GSTP and Forum for CISSS Partners). |

### 2.2.3 Strengthening the Capacity of the Regional Organizations

CHSSN acts as the backbone/intermediary organization for Bright Beginnings. It manages the program and accompanies the 23-funded regional organizations in their efforts to develop partnerships, create change and achieve results. Strengthening the capacity of the regional organizations is an important part of this work. An **Advisory Committee**, made up of coordinators from several regional organizations, continued to help guide the capacity building activities. All capacity building activities held in 2025-26 are described below in Table 7. Following each learning activity, participants were asked to answer a survey and/or online poll. Selected results are also included in Table 7.

**An in-person retreat** was held for two days in May 2025, at Manoir du Lac Delage, outside of Québec City. In addition to structured discussions to learn about each other's work and challenges, the retreat included training on partnership development and on how to participate in Tables de concertations to create change. Two staff members from provincial partner FQOCF participated for one day, which provided opportunities to network and learn more about the work of the MdFs.

**Retreat evaluation survey**: participants cited the following elements as the most valuable, in this order: 1) connecting with other colleagues; 2) learning about other colleagues' work; 3) gaining knowledge about Tables de concertations; 4) having new ideas to address challenges.

#### Excerpts from retreat participant survey regarding training to sit on Tables de concertations:

*"Helped me have a deeper understanding and made my role on a table de concertation clearer."*

*"It was very valuable and affirming that I am not the only one who finds this work hard."*

*Breakout Groups at Retreat*

**A measure of success:** some participants reached out to their colleagues after the retreat.

## Table 7: CHSSN's 2025-26 Learning & Capacity Building Activities

### Community-of-Practice (CoP): 3 Sessions

**In-person: Two-Day Retreat, May 21-22, 2025, at Manoir du Lac Delage, outside of Québec City**

- Key focus: learning from each other (show & tell, small group discussions, etc.)
- Trainings: participating in Tables de concertations and co-parenting by RVP

**Sharing on Our Best Practices, September 23, 2025 (online)**

- Presentations made by 3 regional orgs; Connexions on language development activities, JHCP on Dads Program, NSCA on Traveling Literacy Bags (0-5 year)
- Q&A and discussion: Why is it working? What have you learned? Do differently, if started again?

Evaluation Poll Results:

- How helpful was today's session for your practice: almost all replied "very helpful"
- How likely are you to reach out to a presenter post-session: most replied "very likely"

**Early School Transition and Perseverance, November 25, 2025 (online)**

- Presentations made by LEARN, Réseau Québécois pour la réussite éducative, and 2 regional organizations, MEPEC and 4Korners
- Followed by exchange and discussion
- Note: this CoP had very high attendance

Evaluation Poll Results:

- How much did you learn today? Majority responded, "I learned a lot" or "more than expected"
- Is there anything you learned today that you think you'll use in your work? Majority "Yes, definitely"

### Trainings: 4 subjects

RVP continued offering training in English on co-parenting and on working with immigrant dads

- Fondation Marie-Vincent continued offering its training in English to the regional organizations
- LEARN invited the regional orgs to participate in its webinar on early childhood development

### Information Session

**Semaine Québécoise de la paternité, April 16, 2025 (online)**

- RVP presented 2025 campaign plans

### Coaching Workshops: 2 themes

- Coaching sessions on writing year-end reports: repeated 5 times; April 2025 & March 2026
- Coaching session on developing workplans (new); February 2026
- Evaluation Poll:
  - ✔ 100% of participants responded that it was helpful
  - ✔ 90% of participants responded feeling confident in completing workplan requirement

### Other Learning Resources

- Early Childhood Resource Hub maintained
- Private Facebook page continued to be curated

# Overall observations

### Affecting systems change requires awareness of the features and maturity of the respective policy field and ecosystem.

An important cross-program observation from the past year is that Bright Beginnings and the Youth Mental Health Initiative operate within **ecosystems at very different stages of policy and system maturity**. Early childhood in Québec is a comparatively established and highly structured field in terms of public policy and the organization of institutions and community service providers. Québec in fact has been a pioneer in the field and as a result, has a mature childcare system, a long-standing public rationale for investing in early childhood, and relatively well-defined institutional and community-sector actors.

Youth mental health, by contrast, is a newer and more rapidly evolving ecosystem. Awareness, as well as system actors interested in the subject, have expanded significantly since the pandemic, with organizations whose primary mandates are in areas such as employment, youth development and community services increasingly responding to mental health needs. It should be noted that such community organizations have often lacked the resources or formal recognition required to sustain or expand this work, a gap YMHI is partially addressing.

These **differences shape what systems-change work looks like for CHSSN**. In BB, long-term relationship building is taking place within a more mature and formalized field in which stakeholders and partners accept the premise of the importance of early childhood and, in some cases, recognize language as a factor in the well-being of English-speaking children and families. YMHI is working in a less established field, where funding, programs, partners and government priorities continue to shift. As a result, partnership and influence strategies in youth mental health may be less linear and require more continual adaptation, relationship rebuilding and attention to emerging opportunities across sectors.

### Learning across programs within CHSSN

Through reflecting together, we realized YMHI's strategy has in part been deliberately informed by successful approaches developed through BB. In particular, the experience of mobilizing provincial partners around BB's collaborative project (the guide) demonstrated the value of inviting partners into a concrete, **co-creation which made the process itself a vehicle for deeper engagement**. YMHI is applying this learning to its youth mental health systems-mapping work by seeking a more participatory approach in which provincial partners help shape the structure and can become advisors and champions rather than simply recipients of a finished product.

This cross-program learning could become more intentional within CHSSN. The team has identified a need for greater exchange of knowledge across programs, including a stronger understanding of shared partners, common system actors and lessons that can be transferred between early childhood, youth mental health and other areas of CHSSN's work.

## Learning about: Community capacity building

### YMHI is strengthening community organizations' capacity, but capacity building programming could be improved to be more practical and tailored.

One of the clearest findings is that participating organizations are reporting continued growth in their knowledge, relationships, youth engagement and ability to advance youth mental health as a community priority. That said, there are opportunities for CHSSN to refine how capacity building programming is delivered for YMHI organizations: prioritizing practical tools, opportunities for peer exchange, shorter and flexible formats, subject areas to fill gaps in skills and knowledge, and practical content adapted to different roles, regions and organizational realities.

### Meaningful youth participation does not become embedded automatically; increasing inclusion in community organization governance requires deliberate and ongoing support.

While youth engagement in programs appears to have strengthened, participation at the governance level in YMHI organizations is less solid. This year's evidence suggests that putting youth on boards cannot simply be treated as a general expectation. Community organizations likely need practical tools, examples and accompaniment to make youth participation in decision-making sustainable. YMHI appears to be succeeding in strengthening organizations' youth engagement generally, while deeper organizational power-sharing with youth in boards of directors remains a work in progress.

### Bright Beginnings is strengthening regional organizations' capacity to develop partnerships, collaborations and leverage participation on Tables de concertations.

The results of regional organizations' work demonstrate strengthened capacity. Many have built strong and consistent relationships with partners and Tables de concertations over time. They have been able to recognize opportunities and had enough confidence to develop substantive, complex and impactful collaborations. For instance, the case of French school boards realizing newcomer families were underserved and needed assistance from the community. Similarly, other partners were motivated by the strong evidence of the vulnerability of the very young English-speaking children, as in the case in the Outaouais region. Nevertheless, strengthening capacity and skills in partnership development and effective Table de concertation participation is a continuous process, even for the more experienced. The challenge for BB continues to be how to best support different experience and knowledge levels.

## Learning about: Systems-level change

### Establishing influence in youth mental health requires adaptability and continual relationship rebuilding.

YMHI is operating in a relatively new, fast-changing and minimally-structured ecosystem. Partners, policies, programs and funding arrangements are shifting frequently, meaning that stakeholder influence cannot be approached as a simple linear strategy. CHSSN has had to continually identify new entry points, maintain or re-establish relationships as organizations and personnel change, and respond to developments in the broader mental-health system.

### Language equity alone is often not the strongest entry point; concepts of inclusion, access and intersectionality create broader openings for advancing English-speaking community needs.

One of the strategic lessons from YMHI is that arguments framed exclusively around increasing access to English-language services may have limited resonance with potential partners. There appears to be more shared ground around equitable access, cultural inclusion, ethnocultural diversity and reaching underserved groups. This does not make language less important; rather, it suggests that language can be positioned as one dimension of equitable and inclusive service access.

This learning has also emerged in BB. Some regional organizations are gaining access to French language schools because those schools recognize the need to support newcomer families, some of whom are more able to interact with English language services. In these cases, a rationale about providing access for immigrant and newcomer communities has created openings where a justification based on only equity for English language communities does not. Across both initiatives, intersectionality and inclusion may therefore provide a broader coalition-building frame for advancing the needs of English-speaking communities.

There are also indications from YMHI that young people perceive language issues differently from older generations. They are often more comfortable with bilingualism, they don't have barriers to relating with others who have a different mother tongue, and they are interested more broadly in cultural inclusion and ethnocultural diversity.

## Systems change requires better evidence about who is, and is not, being reached.

YMHI's experience with Aire ouverte and other provincial partners highlights an important lesson: it is difficult to demonstrate inequities in access if systems do not collect data capable of identifying underserved populations. Evaluation, population surveys, and disaggregated information therefore become advocacy tools, not simply research activities. For BB, evidence-based data and knowledge has been critical to developing collaborations and allies. The risk of losing population-level surveys, such as the MFA's EQP study discussed earlier in this report, is of great concern.

## Concrete collaborative projects can move relationships and leverage with system actors to a deeper level.

- **Unpacking resistance:** Developing a better understanding of why partners are hesitant to adapt to better serve English-speaking families was pivotal. The external communications consultant was instrumental in the reflection process by asking CHSSN probing questions about what partners were saying about their obstacles to adapting.
- **Discovering openings and shifting conversations** with partners from the political sphere to their program and organizational preoccupations, such as how to support multi-lingual children. Discovering how to start a conversation about the realities of English-speaking children and families meant having difficult conversations with some partners.
- **Tackling tricky and taboo obstacles** (beliefs and language laws) directly and explicitly, even though complex and risky to CHSSN. This required building knowledge to debunk language myths and a clear meaning of the laws.
- **Creating a collective project** that partners could mobilize around and build a sense of ownership. Inviting partners to engage in a concrete project was an unexpected catalyst for greater commitment.
- **Recognizing the moment and opportunity:** The groundwork for mobilizing partners had successfully been done over many years. CHSSN has established itself as a valuable partner in the child and family ecosystem. It had developed strong and consistent relationships, and a lot of trust. CHSSN had also increased stakeholder awareness and knowledge of the realities of the English-speaking children and families by producing and disseminating evidence-based knowledge.

YMHI is consciously applying this learning to the systems-mapping work by involving partners in shaping the process rather than presenting them with a finished product. Co-development can itself be a systems-change strategy: the process can generate ownership, strengthen ties and create champions before the final product is complete. The intention is that these relationships will lead to more and more impactful policy and practice change across Québec as both initiatives continue over the next few years.

## Youth Mental Health Initiative

- **Deepen CHSSN's understanding of the evolving youth mental health ecosystem and strengthen strategic relationships within it.** CHSSN will continue to map the expanding youth mental health ecosystem, identify where English-speaking communities are represented or underrepresented, and strengthen relationships with provincial stakeholders and networks that can help bring their needs and perspectives into broader youth mental health discussions. CHSSN is working with collaborators who bring expertise in the human systems intervention approach to support this mapping initiative.

- **Strengthen CHSSN's role in connecting community organizations to the broader youth mental health system.** Organizations reported that networking, awareness of other services and stronger relationships with partners were important areas of capacity development through YMHI. CHSSN will continue creating opportunities for community organizations to connect with one another and support their collaborative strategies with schools, health and social service institutions, provincial organizations and other partners, particularly where these relationships can improve access to resources, referrals and collaboration.

- **Continue supporting community organizations to advance meaningful youth engagement and board inclusion.** Experience across funded projects demonstrated increasing attention to involving young people in program design, outreach, advisory structures and roles as ambassadors and peer leaders. YMHI will continue helping organizations move toward greater inclusion of young people on their boards of directors and other governance bodies.

- **Adapt capacity-building activities in response to participating organizations' feedback. Feedback** indicated a preference for shorter and more focused session topics grounded in organizations' expressed needs, practical tools that participan use in their work, and more opportunities for peer exchange and interaction. CHS use this feedback to refine the structure and content of training, information sessi and Communities of Practice, including creating more space for organizations to share their own practices, challenges and resources.

## Bright Beginnings

**Continue advancing partner and stakeholder engagement through BB's Early Childhood Communications Strategy and the collaborative guide project.** Create more and stronger allies and public champions on the importance of addressing the needs of English-speaking children and families.

**Next steps in advancing the collaborative guide project**

- **Create a committee of partners** to advise on how to further the strategy of *Guide de soutien* project
- **Share with government stakeholders:** start disseminating the *Guide de soutien* to government stakeholders and start conversations
- Renew collaborative relationships with government stakeholders, particularly the MFA and SRQEA by initiating meetings several times a year
- **Train the regional organizations** to develop their capacity in using the *Guide de soutien* as a tool to develop and strengthen collaborations
- **Capture the outcomes** of the release of the *Guide de soutien* on the provincial and regional levels. Track where the *Guide de soutien* travels. What are the responses to it? Are there indications that the *Guide de soutien* is prompting partners to adapt? What reactions are regional organizations getting from their partners about the *Guide de soutien*?

**Other Plans:** Examine the progress of the collaborative project between CHSSN, FQOCF, MdFs and the regional organizations.

## Cross program: Both BB and YMHI

- **Improve how information, resources and learning opportunities are communicated to community organizations.** Participation in capacity-building activities varied during the year, and internal reflection identified access to and communication of information as one area for improvement. CHSSN will examine how information about training, resources and other opportunities is shared across the network and seek more coordinated and efficient approaches to reaching participating organizations.

- **Continue harnessing the experience of funded organizations to strengthen CHSSN's advocacy and representation.** The year generated greater knowledge about the needs of English-speaking youth and families, gaps in services and the experiences of organizations attempting to respond to those needs. CHSSN will continue bringing this community-level knowledge into provincial and federal consultations, committees and relationships with decision-makers, while supporting regional and community organizations to develop their own capacity to speak about children, youth and families' needs.

- **Increase learning and exchange across CHSSN programs where approaches are transferable.** Reflection during the year identified opportunities for YMHI to learn from CHSSN's experience in other program areas, while recognizing important differences between the youth mental health and early childhood ecosystems. CHSSN will create more intentional opportunities for program teams to share strategies, relationships and lessons and to identify practices that can be adapted appropriately across programs.

# Appendix

## Appendix A: Table A1 - List of Regional Organizations Supported by BB in 2025-2026

| | Organization Name | Acronym | Region |
|---|---|---|---|
| 1 | 4Korners Family Resource Center | 4Korners | Laurentides |
| 2 | African Canadian Development and Prevention Network | ACDPN | Montréal |
| 3 | The Youth and Parents AGAPE Associations Inc. | AGAPE | Laval |
| 4 | South Shore Assistance & Referral Centre | ARC | Montérégie-Centre |
| 5 | BGC Dawson | BGC | Centre-Sud-de-Montréal |
| 6 | Council for Anglophone Magdalen Islanders | CAMI | Magdalen Islands |
| 7 | Committee for Anglophone Social Action | CASA | Gaspésie |
| 8 | Centre for Access to Services in English | CASE | Mauricie-Centre-Qc |
| 9 | Coasters Association | Coasters | Côte-Nord |
| 10 | Connexions Resource Centre | Connexions | Outaouais |
| 11 | English Community Org. of Saguenay – Lac-Saint-Jean | ECO-02 | Saguenay/Lac-Saint-Jean |
| 12 | English Community Organization of Lanaudière | ECOL | Lanaudière |
| 13 | Heritage Lower Saint Lawrence | HLSL | Bas-Saint-Laurent |
| 14 | Jeffery Hale Community Partners | JHCP | Ville de Québec |
| 15 | Megantic Community Development Corp | MCDC | Chaudière-Appalaches |
| 16 | Montérégie East Partnership for English-Speaking Comm. | MEPEC | Montérégie East |
| 17 | Montérégie West Community Network | MWCN | Montérégie West |
| 18 | NDG Seniors' Council/Eva Marsden Centre/WIN | EMC/WIN | Montréal |
| 19 | Neighbours Regional Association of Rouyn-Noranda | Neighbours | Abitibi-Témiscamingue |
| 20 | North Shore Community Association | NSCA | Côte-Nord |
| 21 | East Island Network for English Language Services | REISA | Montréal l'Est-l'Île |
| 22 | Townshippers' Association | Townshippers | Estrie |
| 23 | Vision Gaspé Percé Now | Vision | Gaspésie |

## Appendix B: Resources Developed in BB Provincial Collaborations

**Guide de soutien**
Developed in collaboration with 7 provincial partners and 4 expert contributors: Éducaloi, Fannie Dagenais, Experte-conseil en communication, Saïd Bergheul, Professeur et Directeur du laboratoire de recherche, Université du Québec en Abitibi-Témiscamingue and Kristy Findlay, Orthophoniste et Co-fondatrice, Centre Mosaïque de Québec.
CHSSN, Vos services sont-ils accessibles aux tout-petits d'expression anglaise : Guide de soutien à l'inclusion des familles d'expression anglaise en contexte de vulnérabilité (CHSSN, Québec, 2026).

**Video: Avez-vous déjà pensé aux tout-petits des familles qui s'expriment en anglais?**
The five-minute video showcases the collaboration between la Maison de la famille Chicoutimi and the regional organization ECO-02. Developed as part of the Bright Beginnings Early Childhood Communications Strategy, it illustrates the benefits of partnering with English-speaking organizations. Its target audience is Francophone family organizations; released Nov. 2025.

**Mobilization Tool Kit**
The Early Childhood Partner Mobilization Tool Kit developed last year (2024-2025) continues to be accessible through the CHSSN Early Childhood Resource Hub. All material is grounded in evidence-based research drawn from three key sources commissioned by CHSSN in previous years. See commissioned research at the bottom of this Appendix. The Tool Kit includes infographics, a customizable PowerPoint deck and a series of infographics on the socio-demographic profiles of 17 regions. There are French and English versions of each tool.

### Dad-Inclusive Resources for English-Speaking Practitioners, developed by RVP

**Perinatal collaborative project with regional organizations JHCP and MEPEC**

1. Video, Partnering from the start: Best practices to engage fathers in prenatal services; video interview discusses including fathers in the delivery of perinatal services; on Vimeo platform, October 3, 2025.
2. RVP, Resource Supporting Fathers Through the Perinatal Journey: A Practical Resource Guide for Community Organizations and Practitioners (June 2026).
3. Training for English-speaking practitioners on supporting dads during perinatal period; includes 15 video clips featuring English-speaking fathers sharing their experiences.

## Appendix B: Resources Developed in BB Provincial Collaborations

### Coparenting resources developed by RVP for English-speaking practitioners

1. Video, Promoting coparenting in a caregiving context, focuses on parents of children with disabilities. The 30-minute video in English presents an overview of coparenting; released September 2025, on the Vimeo platform.
2. Co-parenting for parents of children with disabilities, online training: "In this 45-minute self-guided training session, you will gain a better understanding of the issues and challenges of co-parenting for parents of children with disabilities, to better welcome, include, guide and support them." (RVP, 2025).
3. Other RVP coparenting written resources for parents, in English: Coparenting and work-life balance; Close-up on telework; Coparenting during separation; online https://rvpaternite.org/coparents/.

### Research Reports

- **Observatoire des tout-petits (OTP),** *Les tout-petits d'expression anglaise : entre vulnérabilité et difficultés d'accès aux services*, February 2026, on its website. The article summarizes the research and data on the realities of English-speaking families.
- **Réseau des Centres de ressources périnatales du Québec (RCRPQ)**, The-Perinatal-Experience-of-Parents-2026.pdf. This is an English version of the survey results; it wasn't possible to include English-speakers in the survey.
- **RVP**, Highlights of SOM English coparents survey results (June 2026). CHSSN partnered on this co-parenting research. The survey included a subsample of English-speaking parents.
- Yannick Sanschagrin et Said Bergheul, Rapport de recherche : Portrait des pères immigrants d'expression anglaise au Québec (Université du Québec en Abitibi-Témiscamingue, 2025). In collaboration with **RVP** and CHSSN.

### Research previously commissioned by CHSSN

- Paquette et Groleau, *La vulnérabilité chez les enfants de maternelle 5 ans anglophones au Québec* (ISQ, 2024).
- Lavoie et Summerhays, *La parentalité au Québec en 2022 : une analyse comparative selon le groupe linguistique* (ISQ, 2024).
- Pocock, *Socio-demographic profile of children aged 0 to 5 and their parents, Québec, 2021* (CHSSN, 2024).

## Appendix C: CHSSN Letter to ISQ

Québec, le 11 février 2026

**Amélie Ducharme**
Direction des enquêtes et des indicateurs sociaux
Institut de la statistique du Québec
1200, avenue McGill College, 5e étage
Montréal (Québec) H3B 4J8

À transmettre au comité des partenaires de l'Enquête Québecoise sur la parentalité (EQP)

**Objet : Préoccupation concernant le retrait des questions linguistiques du questionnaire de l'Enquête Québecoise sur la parentalité (EQP) 2027**

Madame Ducharme,

Il a été porté à notre attention que les partenaires de l'EQP, en préparation du questionnaire de l'enquête 2027, ont décidé de retirer deux des trois questions permettant l'identification linguistique des répondant(e)s. Le Réseau communautaire de santé et de services sociaux / Community Health and Social Services Network (CHSSN) est vivement inquiet des répercussions de cette décision, qu'il vous invite à reconsidérer.

L'EQP, en raison de l'étendue des sujets qu'elle examine et de la précision des données qu'elle produit, constitue un outil sans pareil pour éclairer les décideurs gouvernementaux, mais aussi un grand nombre d'organismes partenaires, au sujet des besoins des parents Québecois. Ces informations soutiennent et orientent la mise en œuvre d'une grande variété de stratégies, programmes, services et activités offerts par plusieurs ministères du gouvernement du Québec et organisations de la société civile. Il s'agit d'un actif informationnel de premier ordre.

Le CHSSN a pour mission de soutenir les communautés d'expression anglaise du Québec en favorisant un accès équitable aux services de santé et aux services sociaux en anglais et en agissant sur les déterminants sociaux de la santé par l'établissement de relations, le partage des connaissances, l'habilitation et la formation. La possibilité de disposer de données populationnelles comme celles issues de l'EQP joue donc un rôle central dans la réalisation de cette mission et bénéficie à plus d'une cinquantaine d'organismes membres, réparties dans tout le territoire Québecois, lesquelles offrent des services directs à ces communautés.

Le retrait de deux des trois questions linguistiques, à toutes fins utiles, rendra malheureusement impossible l'utilisation des données de l'EQP pour informer le gouvernement du Québec et les organisations partenaires de la société civile des réalités et enjeux propres aux parents d'expression anglaise.

## Appendix C: CHSSN Letter to ISQ

**Un enjeu méthodologique**
Dans le contexte Québecois et canadien, l'identification des groupes linguistiques en fonction des langues est complexe. La méthode reconnue est celle de la Première langue officielle parlée (PLOP), développée par Statistique Canada. Cette méthode requiert de connaître la langue maternelle du répondant, la ou les langue(s) parlée(s) à la maison et sa capacité de soutenir une conversation en français ou en anglais. Prises isolément, aucune de ces informations ne permet d'identifier avec précision les populations d'expression anglaise.

**Plusieurs facteurs de vulnérabilité**
La possibilité d'examiner les réalités des familles d'expression anglaise à partir des données de l'EQP est d'autant plus importante que ces familles font face à plusieurs facteurs de vulnérabilité, notamment :

- Des difficultés d'accès aux services (services de garde, soutien à la famille, activités communautaires pour le développement des enfants)
- Des vulnérabilités accrues dans le développement des enfants d'expression anglaise
- Une précarité financière plus fréquente au sein de ces familles
- Des parents d'expression anglaise plus susceptibles que les parents francophones de se sentir dépassés par leurs responsabilités parentales

Ces constats sont, justement, appuyés par une analyse comparative selon les groupes linguistiques réalisée à partir des données de l'EQP 2022[1].

À l'instar de nombreux autres organismes, le CHSSN produit depuis plus de 20 ans des analyses démographiques fondées sur le concept de la PLOP afin d'acquérir une solide connaissance des caractéristiques sociodémographiques des communautés d'expression anglaise du Québec. Celles-ci comprennent les niveaux d'éducation, la structure familiale et l'âge, ainsi que les indicateurs socio-économiques.

La capacité d'aligner les profils communautaires sur les données essentielles recueillies dans le cadre d'enquêtes telles que l'EQP est cruciale à l'élaboration de programmes efficaces et à une planification communautaire solide.

**Un gain d'efficacité modeste pour une perte de grande ampleur**
Nous comprenons que le motif principal derrière la décision de retirer deux des trois questions linguistiques du questionnaire de l'EQP est le souhait d'en réduire le temps de réponse pour les répondants. Il nous semble qu'il s'agit d'un gain modeste, voire négligeable, au regard de la perte encourue, soit toute possibilité d'utiliser les données de l'EQP pour examiner les réalités propres aux parents Québecois d'expression anglaise. Nous croyons que d'autres avenues devraient être envisagées pour réduire la durée du questionnaire sans entraîner de perte aussi importante.

## Appendix C: CHSSN Letter to ISQ

En conséquence, le CHSSN vous demande de réviser votre décision et de conserver les trois questions permettant l'identification de la première langue officielle parlée (PLOP) pour la collecte de données de 2027, et ce, afin de préserver la continuité historique des données et protéger la capacité d'utiliser les données futures pour répondre aux besoins des familles d'expression anglaise.

Dans l'attente de votre réponse, nous vous prions de recevoir nos salutations distinguées.

Jennifer Johnson
Directrice générale
Réseau communautaire de santé et de services sociaux
Community Health and Social Services Network (CHSSN)

c.c. Anne Desruisseaux, Directrice des politiques et de la lutte contre l'intimidation, Ministère de la Famille
Mélanie Cantin, Coordonnatrice, Directrice des politiques et de la lutte contre l'intimidation, Ministère de la Famille
Nancy Gervais, attachée politique cabinet de la ministre de la Famille Philip Vlahogiannis, attaché politique cabinet de la ministre de la Santé
John McMahon, Sous-ministre adjoint, Secrétariat aux relations avec les Québécois d'expression anglaise (SRQEA)
Louis-Pierre Légaré, Directeur, Secrétariat aux relations avec les Québécois d'expression anglaise (SRQEA)

[1] *LAVOIE, Amélie et David SUMMERHAYS (2024). La parentalité au Québec en 2022 : une analyse comparative selon le groupe linguistique, [En ligne], Québec, Institut de la statistique du Québec, 72 p. https://statistique.Québec.ca/fr/fichier/parentalite-Québec-2022-groupe-linguistique.pdf*

## Appendix D: MFA Bulletin

## Ministère de la Famille Bulletin de veille, Janvier 2025

Accueil - Ministère de la Famille Ministère Bulletin de veille Janvier 2025

### Janvier 2025

BULLETIN DE VEILLE

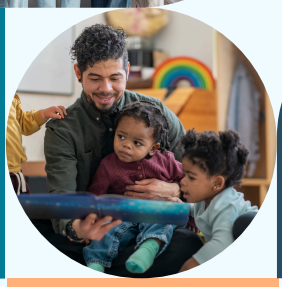
Préparé par la Direction de la veille et des connaissances stratégiques.
La veille a pour but d'alimenter la réflexion stratégique en rendant disponibles des informations pertinentes, utiles, rigoureuses et fiables sur des thèmes stratégiques pour le ministère de la Famille. Elle permet d'identifier les nouvelles tendances, pratiques émergentes et enjeux susceptibles d'influencer la prise de décision et de repérer les signes permettant d'anticiper les changements importants. Les conclusions des publications présentées dans ce bulletin ne reflètent pas nécessairement les points de vue ou les positions du Ministère.

Pour toute question, n'hésitez pas à communiquer avec l'équipe de la veille.

**Famille**
Qc – La parentalité au Québec en 2022 : une analyse comparative selon le groupe linguistique

Ce fascicule préparé par l'Institut de la statistique du Québec (ISQ) s'intéresse au vécu des quelque 175 000 parents d'enfants mineurs dont la première langue officielle parlée est l'anglais, au Québec. **Les données présentées sont tirées de l'Enquête Québecoise sur la parentalité réalisée en 2022 par l'ISQ et permettent de comparer la situation des parents anglophones à celle des parents d'expression française.** On dresse d'abord leur profil sociodémographique et économique, qui se distingue de celui des parents francophones notamment par le fait que plusieurs parents d'expression anglaise sont nés à l'étranger et qu'ils tendent à être davantage scolarisés que les parents francophones. Ils sont aussi moins présents en emploi, travaillent plus fréquemment selon des horaires atypiques et bénéficient de revenus généralement plus faibles. Ces caractéristiques peuvent teinter plusieurs aspects de leur parentalité. Sur ce plan, on observe que les parents anglophones sont plus nombreux à vivre un niveau élevé de conflit travail-famille et de stress parental, et à ne pas bénéficier du soutien dont ils auraient besoin pour accomplir leur rôle de parent.

https://www.mfa.gouv.qc.ca/fr/ministere/ministere/bulletin-veille/Pages/bulletin-2025-01.aspx



CHSSN

# Equitable access to health and wellness for English-speaking children, youth, and families

## 2025-2026 YEAR-END REPORT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