

Réseau Santé – Nouvelle-Écosse

2009 Community Consultations

Executive Summary

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Executive Summary

Background

In December 2004, the French-language Services Act was proclaimed, confirming Nova Scotia's commitment towards promoting the development of its Acadian and francophone community and maintaining the French language for future generations. The French-language Services Regulations came into effect December 31, 2006. They clarify the responsibilities of each designated department, office, and agency (designated public institutions) in regards to the Act and have as objective to ensure that there are substantive and measurable improvements to the French language services offered by the Government of Nova Scotia. The regulations require that provincial government departments and agencies like District Health Authorities (DHAs) must develop and publish a French-language Services Plan to show how they intend to increase or improve their French language services. One of the corporate objectives of the plan is to consult the Acadian and francophone community to become more aware of the community's needs and to be better able to establish and prioritize French language services delivery.

In 2009, Réseau Santé submitted a project proposal to the Government of Nova Scotia to conduct community consultations across the province to identify the health and wellness needs and priorities of the Acadian and francophone community.

Consultations

In March and April of 2009, over 100 community members, primary health care providers and other health care stakeholders from ten communities across the province were consulted to:

- Identify what improvements have been made to access and quality of services in the past five years;
- Identify the health care and wellness needs of the Acadian and francophone population; and to
- Identify what gaps remain (needs and priorities) in providing health care services to the francophone and Acadian population.

In December 2009 a separate consultation was held with youth representatives from across the province to discuss the same issues.

Community Stakeholders were asked about their thoughts in the areas of:

- Early Childhood
- Youth
- Adolescents
- Women
- Seniors
- Mental health
- Promotion and Prevention
- Continuing/long term care
- Home care
- Training of health professionals

Consultations: What Did People Say?

Participants in the consultations made the following points – based on their perceptions and experiences.

About seniors:

Older people often revert to their mother tongue and there is a general lack of nursing homes and nursing home staff that can provide French language services. The language barrier itself can contribute to isolation, lack of social contact and in general, deterioration of seniors' health. There is also a need for French language services outside of nursing homes and hospitals such as among home support/home care support groups and respite services as well as services to help the transition to nursing homes.

About Youth and Adolescents:

The need for French youth health centres and French education and services related to mental health, stress, sexuality, sexual health and addictions were all identified. Youth need places to feel safe, where they can contribute to planning, development and their own health management. Programs for youth need to be coordinated across school, community and health services.

About mental health:

Existing French mental health programs and services need to be made better known, and access to mental health services must be improved for all age groups.

About the health system:

Although much progress has been made, people feel that French language services must be addressed more consistently through a more coordinated approach across all health system planning, implementations, service delivery and evaluations.

The “Bonjour!” program, which helps to identify French speaking staff and throughout the province must be strengthened in terms of communication among providers, participants and the public, increasing its visibility and raising awareness, ensuring consistency across regions and services and broadening the scope of the program to include a wider range of health services.

Recommendations

The following specific recommendations stem from the consultations with the community:

1. Explore opportunities to raise the profile of the Acadian and francophone population both inside and outside of the healthcare system. Work with community-based organizations to use awareness raising, signage and promotional material to help reinforce, normalize and recognize the French cultural identity present in Nova Scotia.

2. Review how health care settings may enhance opportunities for people to be able to ask for services in French. Health care providers, site managers and decision makers involved in making French language services available should participate in the review.
3. Conduct a broad and detailed assessment and analysis of the health status and needs of Acadian and francophone communities and the French health services available to them to form the basis of planning.
4. Work with decision makers and stakeholders to establish formal structures and processes at the local, district and provincial levels to ensure a coordinated approach to planning for French health care services.
5. Collaborate with educational institutions to ensure that French training programs continue and are developed where they will have an effective impact.
6. Develop and implement recruitment and retention programs to attract Acadian and francophone Nova Scotians to Nova Scotia's French language health care programs, using existing French speaking health care providers as part of the recruitment efforts.
7. Develop attractive incentives and return of service agreements for Nova Scotian Acadian and francophone students who study in French programs in other jurisdictions.
8. Provide linguistic and cultural competency training to staff at nursing homes and continuing care facilities in Acadian and francophone communities.
9. Increase opportunities for seniors in nursing homes and continuing care facilities to receive services in French.
10. Increase awareness among stakeholders, including community-based organizations, government departments, service providers, and DHAs, etc. about the importance of the delivery of services in French to Acadian and francophone seniors.
11. Create additional opportunities for social contact between nursing home residents and other French speaking members of the community, linking with local community service organizations, businesses, schools and community volunteers.
12. Work with community and health care stakeholders to create support for the development and implementation of youth health centres in the Acadian and francophone communities where they do not currently exist.
13. Ensure that the youth health centres can address the need for mental health services, sexual health education and addictions services for youth.
14. Strengthen existing Personal Development and Relationships course material to include additional content on sexuality, addictions, mental health, healthy nutrition and lifestyle choices and how to make wise, informed decisions.
15. Consider program offerings outside of traditional classroom and student counseling approaches to foster a safe environment for discussion of mental health issues.

16. Develop alternative ways to encourage physical activity other than traditional sports.
17. Coordinate program and service offerings so that school, community and health services all work together to help youth learn to cope with stress.
18. Make sure that youth health centres are able to encourage active participation by youth in program and service offer design including development of peer education programs.
19. Develop mechanisms to educate parents to better understand health risks and to better communicate with their children.
20. Work with local community health boards and District Health Authorities to identify and respond to the need for mental health services.
21. Undertake public education in the broad community and within schools to increase awareness about mental health issues and the negative consequences of the stigma associated with mental illness.
22. Develop and implement a social marketing campaign to remind/educate the public of the purpose of the “Bonjour!” program, the program’s symbols and materials.
23. Develop and implement an awareness campaign targeted at health care providers and administrators to ensure that all staff know about the “Bonjour!” program, how to access program symbols and materials, the expectations and requirements of the program.
24. Establish a regular review process to ensure that health care facilities, programs and services appropriately use the “Bonjour!” program symbols or materials.
25. Evaluate the feasibility of expanding the “Bonjour!” program for instance to third party providers such as the VON, homecare, etc. in an effort to enhance visibility of French language services.
26. Expand the directory of French language health care providers on the Department of Health’s web site to include all Government of Nova Scotia health promotion and prevention materials that are available in French, who publishes the French copy and contact information for obtaining the material.
27. Include health promotion and prevention related material in the French language from community-based organizations and not-for-profit groups in the directory of French language health care providers available through the Department of Health web site.
28. When developing health promotion and prevention information and materials, be sure to plan for the time and funding required to translate the materials so that English and French materials can be released simultaneously.
29. Make sure that English language materials that are also available in French, say so *in French* in the English version.
30. Ensure that the provincial HealthLink system will provide services in French.
31. Ensure that social marketing/public education campaigns regarding the provincial HealthLink system are available in French.