

Report of the
Advisory Committee on
Francophone Affairs
Government of Saskatchewan



July 2016

Francophone Seniors

Letter of Transmittal

The Honorable Nadine Wilson:

It is my pleasure to present this report of the Advisory Committee on Francophone Affairs following our meeting which took place on November 20, 2015, in Regina.

Under the theme of Francophone seniors, we met with community organizations and senior representatives from the Ministry of Health to discuss the delivery and access to healthcare services in French, as well as initiatives that would support “aging in place”.

We are facing an unprecedented growth in our aging population. Studies suggest there are seniors who require home care but are not receiving it, or those who are receiving home care but services are inadequate. These seniors are faced with negative impacts on their well-being and mental health. Seniors want to live at home as long as possible and their wishes are also congruent with the provinces desire to develop less costly strategies to deal with the unprecedented growth of the segment of the population aged 65 and over.

This report and the recommendations therein, are meant to guide the Ministry of Health, as well as Regional Health Authorities, in the delivery of French-language services to our aging Francophone population that wish to “age in place”.

On behalf of members of our Committee, I am pleased to present to you today our recommendations in support of Healthcare for Francophone seniors.

Sincerely,

A handwritten signature in blue ink, appearing to read 'M. Dubé', is positioned above the printed name and title.

Michel Dubé
Chair of the Advisory Committee

February 2016

Executive Summary

Aging in place “means to remain at home in familiar intergenerational neighborhoods while maintaining independence, activities and social lives”. (*Aging in Place: A Saskatchewan Perspective*) We are facing an unprecedented growth in the segment of our population that falls in the category of seniors, or those aged 65 and over. As Saskatchewan’s seniors are living longer and with less chronic illness or disability than generations before them, they are choosing to stay in their communities, surrounded by familiar places and faces.

In order to accommodate their wishes, community support services play an important role in addressing the needs of these seniors. As language can be a critical barrier to accessing quality healthcare, developing French-language services that support Francophone seniors in our province is an important step in maintaining their well-being, mental health, and ultimately their quality of life.

After meeting with representatives from the Ministry of Health, the Committee is aware of ongoing efforts and projects in the Ministry when offering services to seniors in French. The Committee was also made aware of current challenges when offering assistance to Francophone seniors. Representatives from Regional Health Authorities were invited to the meeting held in November 2015, but were unable to attend. However, a written response was received from the Five Hills Health Region.

The Committee believes that our seniors desire to live at home as long as possible is congruent with the provinces desire to develop alternate strategies to deal with healthcare needs of this growing segment of our population. The Advisory Committee on Francophone Affairs has developed the following recommendations:

Recommendations:

1. That Regional Health Authorities put a process in place to identify employees who speak, and are willing to offer services in, French.
2. That the Ministry of Health and each Regional Health Authority designate a ‘champion’ who would work with the Francophone Affairs Branch and Francophone organizations to develop and promote French-language programs and services for seniors.
3. That the Ministry of Health and Regional Health Authorities include the development of French-language services in their annual strategic planning.
4. That Regional Health Authorities include in their monthly board meetings, an update on French-language services in order to establish awareness, best-practices and uniformity, and encourage collaborations.



5. That the Ministry of Health and Regional Health Authorities strengthen their relationships with the *Réseau santé en français de la Saskatchewan* (RSFS) and the *Fédération des aînés francophones* (FAF) in order to better understand the needs and challenges faced by Francophone seniors.
6. That emphasis be placed on developing French-language skills among staff pertaining to the prevention, diagnosis and treatment of mental illnesses in seniors.

Committee Mandate

In 2003, the Government of Saskatchewan adopted its French-language Services Policy. With this Policy, the Government of Saskatchewan committed to “enhancing services offered to the Francophone community of Saskatchewan in support of the development and vitality of this community.”¹

The Policy is organized according to three areas:

1. Communication;
2. Development and delivery of services; and,
3. Consultation.

The mandate of the Advisory Committee on Francophone Affairs is to advise the Legislative Secretary through the review and analysis of programs and policies to guide the implementation of Saskatchewan’s French-language Services Policy.

Meeting Objective

On November 20, 2015, the Advisory Committee on Francophone Affairs met with officials from the Ministry of Health and community organizations to discuss the delivery of and access to healthcare services in French, as well as initiatives that would support ‘aging in place’.

Following this meeting, the Advisory Committee on Francophone Affairs developed six recommendations for consideration by the Legislative Secretary responsible for Francophone Affairs.

¹ Government of Saskatchewan French-language Services Policy :
<http://www.saskatchewan.ca/~media/files/executive%20council/bonjour/french%20language%20services%20policy.pdf>



Context

According to a study done by Statistics Canada in 2013, population aging in our province will be a “prominent and inevitable feature of the population change in the coming years”. Statistics show that in the next 50 years, the proportion of seniors, aged 65 and over, would increase from 14.2% to anywhere between 19% and 23% of the population in Saskatchewan. This can be attributed in great part to the baby boomers that are reaching the age of 65 and over. Where growth would be most pronounced is between 2013 and 2030, which means we are already confronted with the many challenges of population aging.

In the report *Aging in Place: A Saskatchewan Perspective* (March 2013) it is stated that Saskatchewan’s seniors are living longer and with less chronic illness or disability than generations before them. Once again, looking at statistics produced by Statistics Canada, we can determine that between 2026 and 2045, baby boomers will enter the age group of 80 and over. By 2045, this age group will represent about 10% of our total population. If we look even further down the road, the number of centenarians will multiply nine times by the year 2063.

The Francophone population in our province is faced with the same challenges. In fact, according to the 2011 census, the Francophone community has a median age of 55 which is considerably higher than the provincial median which sits at 38.2.

Like a growing number of seniors, Francophones wish to remain in their homes and live in their cultural environment as long as possible. However, due to the lack of supports in their communities – whether medical, social or emotional – seniors are currently unable to remain in their homes and are forced to move to unfamiliar surroundings resulting in challenges such as cultural uprooting and language barriers. Leaving these familiar surroundings after so many years causes anxiety, confusion and even depression. This phenomenon of being culturally and socially isolated inevitably affects their quality of life and well-being.

We are failing to prepare for this demographic shift that will see ever increasing demands being placed on our Healthcare system that is already at capacity.

Putting processes in place to increase and facilitate the delivery of French-language services

It is important to recognize that language is an integral part of delivering quality health services:

“It is generally agreed that the best communication is achieved where health care providers and patients speak the same language.” (Language Barriers in Access to Health Care, Sarah Bowen, B.A, M.SC. 2001 Health Canada.ca)



Often Francophone seniors communicate with their health care providers in English to facilitate this understanding. However, the impact of aging can affect their ability to continue to do this as time goes by.

“As you become elderly, however, you begin to lose your ability to communicate in your second language and, often without noticing, find yourself speaking your native tongue. You might think you are speaking English, but those around you hear more and more elements of your first language coming through.”
(Researchers study second language loss in elderly, March 14, 2007, Madison Papple).

The inability to communicate effectively can be frustrating and pose challenges for both the patient and the healthcare provider in areas such as patient confidentiality and obtaining informed consent. Effective communication is also a key factor to ensuring that seniors adhere to a treatment plan.

By improving French-language services in Public Health and partnering with community-based organizations (CBOs), health regions can help individuals to manage their chronic diseases while also meeting their social needs and avoiding the social isolation that many seniors wish to avoid.

“As our health care system transforms more quickly than ever ... providers have strong incentives to ensure that their patients’ care plans are reinforced and supported outside the clinical setting in people’s homes and communities.”
(Anand Parekh and Robert Schreiber – Health Affairs Blog healthaffairs.org)

An important first step to ensuring seniors are not confronted with language barriers when facing medical challenges would be to:

- Determine where French-language services for seniors are most needed, and
- Ascertain our current ability to provide services in French by encouraging health care workers with the capacity to provide these services to identify themselves.

Recommendation # 1

That Regional Health Authorities put a process in place to identify employees who speak, and are willing to offer services in, French.

As the demographic changes are already being felt in the Health Care system, collaboration between health regions, provincial government ministries and French-language CBOs, are needed to build on and improve French-language services to support the aging population, in their communities and in a language



they understand. Support, promotion and evaluation of programs and services being offered in French are paramount to ensure their success.

The idea of a Champion has been suggested in previous reports. The Champion could be an existing health region employee who will raise awareness regarding the importance of French-language services in the region, as well as coordinate the development and delivery of services and programs. The Champion would also act as a liaison officer between the Ministry of Health as well as the Francophone Affairs Branch.

Recommendation # 2

That the Ministry of Health and Regional Health Authorities designate a 'champion' that would work with the Francophone Affairs Branch and Francophone organizations to develop and promote French-language programs and services for seniors.

As we look closer at actions that may be helpful within the health regions themselves, a collaborative approach has been suggested in reports published by Health Canada and other organizations.

"There is a need for development of national standards related to language access to health care". (Language Barriers in Access to Health Care, Sarah Bowen, B.A, M.SC. 2001 Health Canada.ca)

We could take a similar approach within our health care system: Developing standards for services and programs, in collaboration with all health regions within the province and the Ministry of Health, and facilitating the sharing of best-practices. Sharing these practices would ensure coherence in the delivery of available programs and services across the province.

Including the development and delivery of French-language services in the health regions' strategic planning processes could help to:

- identify where and which services are needed in French;
- clarify how the region wishes to offer these services in the future; and
- define strategies and actions required to change the region's current situation and achieve the desired outcome of improved services for Francophone seniors.

Recommendation # 3

That the Ministry of Health and Regional Health Authorities include the development of French-language services in their annual strategic planning.



Senior executives are ultimately responsible for the process of strategic planning and providing the health region with a clear plan for the future. The committee was informed that senior officials from Regional Health Authorities meet on a monthly basis to discuss the status and progress of their organizational goals. As Francophone seniors are a small portion of the overall senior population, including a discussion on French-language services, would facilitate achieving consensus on common goals and best-practices while keeping French-language services top of mind.

Recommendation # 4

That Regional Health Authorities include in their monthly board meetings, an update on French-language services in order to establish awareness, best-practices and uniformity, and encourage collaborations.

Better collaboration to improve awareness: A first step

In June 2000, the Government of Saskatchewan appointed a Provincial Advisory Committee on Older Persons. The Committee's primary focus was the development of a Provincial Policy Framework and an Action Plan for Older Persons. The Action Plan would identify the needs and concerns of Saskatchewan's seniors and recommend ways to address them. Their vision was the protection and promotion of the health, dignity, and well-being of all older persons in Saskatchewan.

Six goals were developed by the Provincial Advisory Committee on Older Persons:

- Ensure provision of and access to affordable and supportive housing and services for older persons.
- Provide safe and affordable transportation for older persons.
- Ensure the access and availability to the continuum of quality and appropriate health care services for all older persons.
- Promote active living and lifelong learning.
- Enhance the recognition of contributions of older persons.
- Ensure the safety and security of all older persons.

The committee heard that Francophone organizations have identified these same goals and have been working towards ensuring the provision of services for French speaking seniors.

The *Réseau santé en français de la Saskatchewan* (RSFS) and the *Fédération des aînés francophones* (FAF) are two important stakeholders within the Francophone community with an interest in developing services for seniors. These organizations can provide important insight as to the needs and challenges faced by Francophone seniors. Their active participation in the



development of strategies and the conceptualization and implementation of French-language services would ensure they are appropriate and available when and where they are needed.

Recommendation # 5

That the Ministry of Health and Regional Health Authorities strengthen their relationships with the *Réseau santé en français de la Saskatchewan* (RSFS) and the *Fédération des aînés francophones* (FAF) in order to better understand the needs and challenges faced by Francophone seniors.

Our Committee fully supports the goal set by the Provincial Advisory Committee on Older Persons of ensuring access and availability to a continuum of quality and appropriate health care services for older persons. It was brought to our attention, however, that the mental health of seniors, and the services to address these challenges, is often overlooked.

Because physical health and mental health are so closely related, the physical changes experienced by seniors can create stress and uncertainty which can result in mental illness. A number of social and psychological determinants make seniors more apt for mental illness. Physical changes, retirement, loss of a spouse, social isolation and loneliness can contribute to the onset of late life depression and can intensify cognitive disorders such as Alzheimer's and dementia.

Studies have shown that depression among seniors in a community setting is similar to the Canadian national average. It is significantly higher among seniors in long-term care facilities and those with chronic medical conditions. However, studies have also shown that Long-term care facilities typically offer little in the way of geriatric psychology. Mental health services are largely limited to hospitals and mental health specific facilities.

There is a *“practice of warehousing seniors with mental illnesses. Rather than focusing on recovery...the system too often choses to put seniors with mental illnesses out of sight”* (Canadian Senate Committee on Social Affairs, Science and Technology, 2006)

It would be important to encourage family physicians and home support workers to provide preventative, diagnostic and therapeutic services. This would allow seniors to stay at home longer and out of long-term care facilities when possible.

Diagnostic services in particular were brought to the attention of the Committee by the Francophone community. As an example, concerns were raised that Francophone seniors are testing positive for Alzheimer disease and upon further investigation, it was discovered that tests are being administered in English. The



test is currently available in French; the challenge is that the test needs to be administered by bilingual specialists.

While it can sometimes be challenging to identify resources on Alzheimer's disease and care management, it can be even more difficult for an individual seeking assistance that cannot communicate concerns with a health care provider or receive critical information because of language barriers. (Alzheimer Society Canada)

As mentioned earlier in this report, seniors tend to naturally revert back to their first language spoken as they grow older. Therefore, the results of tests administered to Francophones in English could be misleading.

Recommendation # 6

That emphasis be placed on developing French-language skills among staff pertaining to the prevention, diagnosis and treatment of mental illnesses in seniors.

Conclusion

We are facing a significant demographic shift in the province and across Canada. There are increasing numbers of seniors who will be living longer, and they will require various degrees of care. These same seniors have expressed a desire to remain at home and in their communities as long as possible. This presents an opportunity for us to collaborate and build supports within the current system to help them live their lives, as long and as safely as possible, in their own homes. It is essential that seniors themselves be consulted in the decision-making process. The development of programs and services that can be delivered in French for Francophone seniors will alleviate the strain on in-patient services as well as provide a sense of wellbeing and a standard of living that our seniors deserve.



ADVISORY COMMITTEE ON FRANCOPHONE AFFAIRS LIST OF APPOINTED MEMBERS

Michel Dubé (Chair), Prince Albert

Mr. Michel Dubé was born in Duck Lake, Saskatchewan. He has been involved with the Fransaskois community for a long time, notably in community development and education. He was a member of the board of the Assemblée communautaire fransaskoise (ACF) from 1999 to 2010, first as community representative from the Prince Albert district and then as president from 2006 to 2010. He is currently the president of the Société canadienne-française de Prince Albert.

Mr. Dubé has been a journalist, consultant and entrepreneur. He has owned several businesses including a produce farm and a fishing lodge. He is now owner of a small store featuring local goods and operates a bison farm north of Prince Albert.

Élizabeth Perreault, Hoey

Ms. Élizabeth Perreault and her husband own and operate a farm in Hoey. Ms. Perreault has volunteered within many organizations in her community, including the local Francophone association and the Francophone school in her area. She has represented the St-Isidore school district (Bellevue) on the Conseil scolaire fransaskois since 2008.

Martin Prince, Delmas

Mr. Martin Prince is one of the owners of Prince Valley Farm Ltd., a family farm operation. He has a BA in political science and history from the University of Ottawa and a Bachelor of Science (agriculture business and food management) from the University of Alberta. He sat on the Provincial Youth Advisory Committee between 2001 and 2003. Mr. Prince volunteers with his local parish, the Francophone community centre and Francophone school. He and his wife have four children.

Luc Leblanc, Regina

Mr. Luc Leblanc was raised in New Brunswick where he earned a diploma in sheet metal fabrication and later earned his Red Seal Journey Person Certification. He is currently the president of Luxury Mechanical/LMC Projects, a business specialized in residential mechanical ventilation systems. As a volunteer, he sits on the board of directors at Centre éducatif Gard'Amis (a Francophone daycare) and is a ringette coach. Mr. Leblanc and his wife have worked with youth facing substance abuse issues. He is a regular speaker at Portage Atlantic Adolescent Substance Abuse Rehabilitation Program Center and its parent support program.



Jean Nepo Murwanashyaka, Regina

Mr. Jean Nepo Murwanashyaka has lived in several countries and in several regions of Canada before settling in Saskatoon. Working with a firm of engineers in the mining sector, he has developed knowledge and expertise in project management, process engineering and problem analysis. Mr. Murwanashyaka is also very active in the French-speaking African community of Saskatoon

Guylaine Patenaude, Saskatoon

Ms. Guylaine Patenaude was born in Manitoba but moved to Saskatchewan at a very early age. She worked for more than 10 years with the Association jeunesse fransaskoise (youth organization) and just recently received her certification in special events coordination. In 2010, she was awarded the Prix Jeune femme remarquable du Canada by the Alliance des femmes de la francophonie canadienne (alliance of Canadian Francophone women).

Joanne Perreault, Hoey

Ms. Joanne Perreault worked for more than 10 years with the Assemblée communautaire fransaskoise, several years of which as deputy director. Living in Hoey, Ms. Perreault is self-employed, providing consultation and coordination services, and continues to be involved with the Fransaskois community.

Françoise Sigur-Cloutier, Regina

Originally from France and established in Saskatchewan for more than twenty-five years, Ms. Sigur-Cloutier has worked within the Francophone community both at the provincial and national levels. Having completed postsecondary studies in philosophy and education, she has also studied in the area of administration. Ms. Sigur-Cloutier worked as director of communications for Radio-Canada and is presently employed as a consultant. Ms. Sigur-Cloutier is president of the Assemblée communautaire fransaskoise.

