



**ICRML**  
Institut canadien  
de recherche  
sur les minorités  
linguistiques

**CIRLM**  
Canadian Institute  
for Research  
on Linguistic  
Minorities

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### **The offer of health services in French in a minority context**

A study conducted by the Canadian Institute for Research on Linguistic Minorities (CIRLM) presents an analysis of the factors promoting the offer of health services in French within Anglophone-majority health care facilities in New Brunswick (Horizon Health Network), in Nova Scotia (Yarmouth Regional Hospital), in Ontario (Sudbury Regional Hospital) and in Manitoba (St-Boniface Hospital). This study (accessible here [www.icrml.ca](http://www.icrml.ca)) shows the importance of working with Anglophone-majority health care facilities to increase the offer of health services in French. Several avenues for reflection and courses of action can be taken by stakeholders concerned over the offer of health services in French based on the outcomes of this study.

The highlights of the study are outlined in the following pages.

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## MAIN OUTCOMES

The study outcomes indicate that significant progress has been made since the 1990s with regard to the offer of health services in French in the four provinces taking part in the study. However, progress depends of provincial situations and several barriers persist in providing health services in French.

**Offer of services in French:** Results show that active offer of service in both official languages is rather low in all hospitals. Bilingual service pins are not much worn by bilingual, although more in Sudbury. Signage in both languages is used more in Yarmouth and at Horizon, but a relatively significant percentage of departments do not seem to post in both languages.

**Administrative will:** Most of the hospitals have implemented plans to ensure services are actively offered in both official languages. Data show that hospital administrators are, according to staff perception, engaged in the active offer of services in both languages. However, some survey data shows a rather mixed commitment to the offer of services in French.

**Management of services and human resources:** Language is taken into account in many ways in the management of health services: in planning services, in managing human resources, and in written and oral communications. However, in all hospitals, priority seems to be given to reception areas when it comes to bilingualism. For some, this means that once you have been through reception, services in French are not guaranteed.

**Resources:** The survey data shows that the principal means used to encourage the active offer of services in French include using a list of bilingual employees, interpreters and, to a lesser degree, language training. Employee training also seems to be a resource that has limitations. On one hand, access to training is limited and complicated by the fact that sessions are not convenient to employee's schedules. On the other hand, training seems insufficient to help employees become bilingual or sufficiently comfortable to offer services in French.

**Language skills and training:** The French skills of a majority of employees have not been evaluated. Approximately one quarter of employees have had language training. Formation seems to have had little impact on the offer of services in French. The comments point to a possible explanation: employees seem to have few opportunities to offer services or to communicate amongst themselves in French.

**Employee's perceptions:** Generally, employees acknowledge that Francophones have a right to receive services in their language. They have difficulty understanding how, in a multicultural context, more efforts are made for Francophones than for other ethnic minorities. The right of immigrants is considered equal to that of Francophones, the existence of the Official Languages Act being forgotten.

The majority of respondents believe their hospital either does not need to do more to offer services in French, or needs to do a little more, the percentage being higher on the Anglophone side.

Many respondents show a certain lack of understanding of their hospital's willingness or obligation to make an active offer or an offer of service in French. Many respondents will say that it is impossible to do so, because a significant percentage of employees are not bilingual. People do not always seem to understand that not being bilingual does not in itself constitute a barrier to offering services in French.

**Linguistic environment:** Many comments made during the interviews and in the survey underline the predominance of English in the respondent's region. This linguistic environment would create a pressure to communicate in English. It is a fact that most Francophones easily communicate in English. This pushes people to say that there really are no problems, as the demand for services in French is low. This pressure towards English fosters the invisibility of the French presence in the hospitals.

**Demand for services in French:** Many comments suggest that respondents question the commitment or the obligation to offer services in French due to the fact that few patients ask to be served in French. The low demand for care in French is an argument used by many respondents to question the right of Francophones or the necessity to devote resources for services in French.

**Perceived challenges:** Here are the main challenges, from the point of view of the employees, in the offer of services in French:

- the language profile of employees that is mainly English;
- the fact that a proportion of the staff does not consider it necessary or important to offer services in French;
- hiring practices and promotion that tend to favour unilingual English-speaking staff;
- the perception of some hospital administrators (who do not deem it necessary or important to offer services in French);
- the lack of measures established by administrators to help professionals offer services in French, and
- the collective agreement between trade associations and the employer.

**Labour relations – Collective agreements:** What emerges from the comments is the presence of requirements which seem difficult to reconcile: the right of workers and the right of French-speaking patients to obtain services in the language of their choice.

## **VISION AND COURSE OF ACTION**

**Information and assessment tools for managers:** In order to take language into account in the organization of health services, managers have access to little information on the language profile of their employees and of the patients that use their hospitals. Because the language of service contributes to service quality, it would be appropriate and useful to include the language aspect in the assessment of hospital services. This assessment should provide a linguistic profile of employees and to measure how patients receive actively their services in French.

**Employee information and awareness:** The data indicates a certain lack of understanding of the rights and of the status of Francophones in the country. In this context, there is some educational work to be done with managers and employees to heighten their awareness of the status of the French language in Canada as well as the different means available that would allow them to offer services in French.

**Training:** Several employees claim that the training activities are insufficient in making employees comfortable at offering services in French. But the reality is that we know little about the efficiency of the training programs. Because of the investment involved in these training activities, it would be important to assess the impact of these training programs on the offer of French services. Moreover, it would be useful to consider additional activities, other than training, that would facilitate language retention.

**Union position:** It is important to inform unions of the measures that will be taken to promote services in French. Hospitals must establish and maintain a dialogue with unions in order to find ways to carry out the language obligations and commitments of hospitals, all the while respecting the rights of employees.

**The demand for services in French:** We have observed that the demand for health services in French seems to be low. That can be explained by several factors. Francophone community players who promote health services in French could explore the possibility of an awareness campaign informing Francophones about their right to be served in French and about French services that are available. Furthermore, these organizations are the ones best positioned to do this awareness work in Anglophone and bilingual hospitals, with the goal of promoting French services. The goal is to understand the influence of the English-speaking environment on the demand for services in French and to promote measures that will allow the French-speaking patients to feel truly at ease at choosing French as the language of service.