

# Promoting Recovery in French

**DIRECTIONS  
IN MENTAL  
HEALTH  
IN FRENCH**



REVISED EDITION

	Message from the President of the Board of Directors	1
<b>1</b>	<b>Background and Introduction</b>	2
<b>2</b>	<b>Mental Health, Mental Illness, and Recovery</b>	4
<b>3</b>	<b>Language in Mental Health for Francophone and Acadian Communities</b>	6
<b>4</b>	<b>Mental Health in French Directions and Outcomes Sought</b>	8
	Conclusion	13
	Bibliography	15
	Appendix 1: Summary Table of Outcomes Sought	16
	Appendix 2: Courses of Action	18
	Glossary, Acronyms and Initialisms	20

## Acknowledgements

The *Société Santé en français* thanks everyone who contributed to the realization of Directions in Mental Health in French.

We are especially thankful to those who participated in various stages of meetings and consultations or who offered their views. We want to emphasize the major contribution of Ginette Goulet, Louise Lapierre, Sylvie Rivard, Roxanne Valade, Howard Chodos, Paul d'Entremont and Eugène Leblanc. Their information, opinions and expertise account for a significant portion of this document. It is through their collaboration that we were able to understand the realities of mental health in French and identify the directions to be developed.

The *Société Santé en français* led this initiative in close collaboration with the French Language Health Services Network of Eastern Ontario (the *Réseau*), the resource network on mental health. Accordingly, we wish to recognize the work of Isabelle Morin and Caroline Vézina who wrote this document and coordinated the process with the support of consultant Rosanne Émard.



## Message from the President of the Board of Directors

*Société Santé en français* is proud to reintroduce a revised version of its **Directions in Mental Health in French**, previously released in November 2012. Communication is key in mental health services. In numerous cases, it is the preferred method toward recovery. Therefore, making sure communication is clear and effective is related to questions of quality of services and security for the users of the system. We are happy to be able to contribute to the array of tools in mental health available for Francophones and Acadians living with a mental problem or illness.

This reprint of the *Directions in Mental Health in French* comes at an important time for the *Société Santé en français* and its networks. We are taking action. From 2014 to 2017, a new mental health project will be implemented by the *Société* and French Language Health Networks across the country to educate health professionals on issues related to mental health in a minority language context. We aim to equip professionals, strengthen the community capacity in mental health, and promote the involvement of the communities themselves in issues related to mental health. In this project, the *Directions in Mental Health in French* will serve as a foundation and help, among other things, to offer first aid training in mental health for Francophone communities.

The *Directions in Mental Health in French* are the product of a long process between several partners. Let me emphasize the essential work that has been done by the French Language Health Services Network of Eastern Ontario (the *Réseau*) acting as the resource network in mental health, as well as the work of every French Language Health Network in Canada, the team at *Société Santé en français*, and the contributions of our many partners. I finally want to acknowledge the input of my predecessor, Dr. Brian Conway. He oversaw the project in its inception, and witnessed its advancement and conclusion with the first unveiling of the *Directions in Mental Health in French* back in November 2012.

The work in mental health for Francophone and Acadian minority communities continues and evolves, and I invite you to participate in future activities put forward by the Networks. Any one of us can contribute.

Thank you for your collaboration on this important issue,

A handwritten signature in dark ink, appearing to read 'Aurel', with a long, sweeping horizontal line extending to the right.

**Dr Aurel Schofield**  
President  
*Société Santé en français*



# Background and Introduction

## Promoting Recovery in French

### 1.1 Background

Since 2002, the *Société Santé en français* in close collaboration with its 16 member networks, has supported projects and initiatives aimed at improving health services in French. The Mental Health Commission of Canada (MHCC), created in 2007, developed a mental health strategy for Canada [1] in 2012, whose publication provided a surge of momentum to the field of mental health. Now is the time to stimulate the engagement of various stakeholders and revitalize the issue of mental health. The provincial and territorial governments are being led to review their policies and directions in order to provide more appropriate and effective responses to those affected and their families.

A number of the *Société's* member networks and their regional, provincial and territorial partners are working on the issue of mental health in French in minority contexts. In fact, this issue has driven health-in-French stakeholders for several years. In addition, the theme of mental health became one of the priority sectors during the call for 2010-2013 project proposals.

In order to support and guide the MHCC's work in the field of mental health in French, the *Société* joined the MHCC as a collaborator in 2010. Thus together with the MHCC, the *Société* coordinated the *Table ronde sur la santé mentale des francophones en situation minoritaire* during consultations on the Canadian Strategy. To date, the benefits of the *Table ronde* - for example stakeholder networking and mobilization - seem promising. Through our collaboration with the MHCC, we were able to identify issues, create an inventory of best practices, and propose avenues of action<sup>1</sup> to complete *Directions in Mental Health in French*.

The *Société* reached another milestone in 2011 with the nation-wide meeting mandated to define directions in mental health in French. Clearly, the stakeholders wish to take action and the *Société* is now recognized as leader in the field.

Lastly, as was mentioned, Canada recently adopted a mental health strategy (2012). The action of the *Société* complements one of the MHCC priorities:

"Strengthen the response to the mental health needs of minority official language communities (Francophone and Anglophone):

4.4.1 Improve access to mental health information, services, treatments and support for minority official language communities.

4.4.2 Develop programs to identify, train, recruit and retain mental health service providers who can offer services in the language of minority official language communities" [1].

<sup>1</sup> Appendix 2.



## 1.2 Introduction of *Directions in Mental Health in French*

The aim of *Directions in Mental Health in French* is to inspire the Mouvement de la Santé en français throughout the country. The purpose of the document is to increase both the number and quality of services offered in order to promote a better state of mental health among Francophones. The *Société* wishes to equip member networks in order to influence national, provincial and territorial stakeholders regarding mental health. This document should therefore be a catalyst to promote a mental health system that provides Francophones in minority communities with services that are universal, equitable and accessible alike, or in other words, a mental health system meeting the various needs of people and communities.

In a spirit of continuity, *Directions in Mental Health in French* reflects the *National Strategy Statement for French-Language Health Promotion in Canada* [2].

Moreover, *Directions in Mental Health in French* are part of the *Société's* strategic plan for 2013-2018 whose vision is as follows: "All Francophones and Acadians have access to excellent health services in French." From this vision, four major strategic initiatives emerge: the organization of services that seek to improve access to quality health services; a human resources structure whose objective is to increase the number and availability of workers equipped to meet the needs of Francophones; action on health determinants aimed at universal, intersectoral action; and, lastly, networking and capacity building for promoting the development and sharing of best practices.

The *Société* wants the *Directions in Mental Health in French* to support its action and that of its member networks and Francophone and Acadian communities in order to influence and equip health professionals, managers (service providers), decision makers and researchers.

## The Four Directions



In the first part of the document, the concepts of mental health, mental illness, and recovery are presented. Next, the reality of Francophones and Acadians in minority communities will be discussed, as will be the importance of taking action to support mental health in French. Finally, the four major directions chosen will be set out.

# 2

## Mental Health, Mental Illness, and Recovery

As mentioned in the background, the *Société* endorses the MHCC strategic framework and strategy. This section of the document briefly outlines the meaning of mental health, mental illness, and the concept of recovery.

According to the World Health Organization (WHO), **mental health** is defined as “a state of well-being in which the individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his own community” [3]. Therefore, mental health is not merely the absence of mental health problems and illnesses. This definition of mental health is widely shared in Canada, including by the MHCC.

Building on the MHCC’s work, the *Société* has adopted the expression “**mental health problems and illnesses.**” The phrase ‘mental health problems and illnesses’ refers to the full range of patterns of behaviour, thinking or emotions that bring some level of distress, suffering or impairment in areas such as school, work, social and family interactions or the ability to live independently [4; p.123].

“About one in every five people living in Canada will experience diagnosable mental health problems or illnesses” [4; p.123]; this represents 20% of the total population.

Every family in the country is directly or indirectly affected by the consequences of mental illness.

These mental health problems or illnesses generally appear during childhood or adolescence and, in some cases, they are life-long [4; p.152]. Mental health problems or illnesses therefore affect everyone, to a greater or lesser extent, at some point in their lives.

The prevalence<sup>2</sup> of mental health problems or illnesses will vary in accordance with various social health determinants such as age, gender and culture.

Here are some statistics for the Canadian population as a whole [5]:

- Anxiety disorders affect 12% of the general population, causing mild to severe impairment
- 8% of adults will experience major depression
- 3% of women will be affected by an eating disorder over the course of their lives
- 15% of children and youth in Canada suffer from mental health illness [6; p.4];
- 25% (estimated) of people 65 years of age and older live with mental illness [7; p.3].

The prevalence of mental health problems and illnesses among seniors is on the increase when diagnoses related to age or cases of dementia such as Alzheimer’s and delirium are included.

<sup>2</sup> See the glossary at the end of the document for a definition of the term “prevalence.”



### Recovery

Recovery is the approach recommended by the Canadian mental health movement and the *Société* in order to understand the experience of people living with mental health problems and illnesses.

“Recovery is understood as a process in which people living with mental health problems and illnesses are empowered and supported to be actively engaged in their own journey of well-being. **The recovery process builds on individual, family, cultural and community strengths** and enables people to [...] achieve their full potential” [4; p.122].

It is also a way of living a satisfying, helpful and contributing life even with limitations caused by illness. Recovery involves the development of new meaning and purpose in one’s life. [8].

Taking a systemic perspective, the MHCC defined objectives that should support the health system geared toward the recovery of people with mental health problems or illnesses. Among other things, the strategic framework targets a mental health system meeting the various needs of everyone living in Canada. The MHCC wishes to have a system where “people have equitable and timely access to appropriate and effective programs, treatments, services and supports that are seamlessly integrated around their needs” [4; p.7].

This strategic framework gave rise to six major directions “*Changing Directions, Changing Lives: The Mental Health Strategy for Canada*” [1; p.123] broken down into priorities including the priority for official language minority communities as presented above.

# 3

## Language in Mental Health for Francophone and Acadian Communities

Francophone and Acadian minority communities represent over 1,000,000 people whose first official language is French; these communities are spread out over nine provinces and three territories (excluding Quebec) [9]. On a national scale, Francophone communities present a large variety of social and demographic characteristics.

Francophone and Acadian communities have relatively few young people, i.e. 19% are under 20 years of age. The population in these communities is generally aging more quickly than in the overall population [10]. People 50 years of age and over make up about 32% of the Canadian population, but over 38% in the Francophone population [11].

Nationally, 21% of Francophones in minority communities have not completed their secondary studies (12% of Anglophones). Francophones in minority communities have lower incomes than Anglophones. In addition, 30% of Francophones live in a rural area (18% of Anglophones) [12].

More Francophones than Anglophones say that they experience stress related to their problem or state of physical health [13]. All these characteristics impact on the state of individuals' health [14] and their ability to access health services.

The full recognition and use of French in Canadian society in a context of linguistic duality can be promoted by the vitality of Francophone minority communities.

According to a survey conducted by the *Société* in 2011 [15], health services are a very important issue for Francophone minority communities. **Over 85% of Francophones in minority communities deem it important to receive health services in their language, regardless of the type of services.**

According to the literature consulted, language barriers decrease the use of communication-based services such as mental health, rehabilitation, and social services [16;p.51].

### Impacts of Language Barriers [17]

- Use of preventive health services is lower
- Consultations are longer
- Diagnostic tests are more likely to be used
- Error in diagnosis and treatment is more likely

“When I’m sick, I’m not bilingual.”  
(user of the system)





In a number of regions in the country, access to health services in French is considered difficult. This raises various issues [17; p.18] for Francophones and Acadians living with a mental health problem or illness. For example, one study of Franco-Ontarians shows that:

- 53% of respondents never or almost never have access to mental health services in French (except in psychiatric hospitals)
- 66% never have access to emergency shelters offering services in French
- 66% never or almost never have access to addiction treatment centres offering services in French
- 77% never or almost never have access to alcohol treatment centres offering services in French [18; p.26].

Mental health problems and illnesses do not uniformly affect all social groups. People with adverse circumstances and the least resources are the most vulnerable [19; p.17].

In any given year, about one in every five people living in Canada will experience diagnosable mental health problems or illnesses [4; p.10], i.e. nearly 200,000 Francophones in minority communities.<sup>3</sup> At least 1% of the population is likely to have a severe and persistent mental health problem or illness, i.e. 10,000 Francophones in minority communities in only one year [20; p.5-6]. Moreover, more Anglophones than Francophones age 65 years and over say that they are in good mental health [13; p.43]. More Francophones (14.3%) than Anglophones (11.4%) say that have suffered a major depressive episode [13; p.52] during their lifetime.

**1 out of 7 Francophones says having experienced depression, versus 1 out of 9 Anglophones [13].**

**Francophones in minority communities experience difficulty in obtaining the services or support necessary to keep them in balance in terms of mental health or to recover.** They do not receive services, or they receive fewer services, or the services received do not meet their needs.

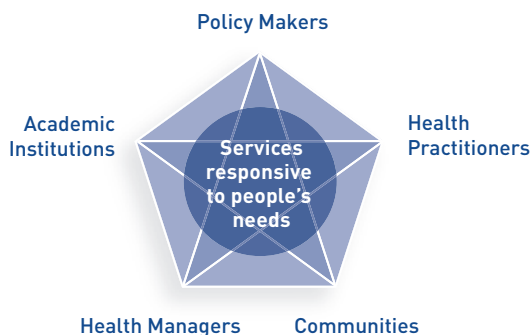
<sup>3</sup> Approximation not taking into account protective factors or specific risks related to French-speaking populations living in a minority situation.

# 4

## Mental Health in French Directions and Outcomes Sought

The *Société* recommends a vision in which “[translation] all Francophones and Acadians have access to excellent health services in French” [21]. This vision takes its inspiration from our values and the values indicated throughout the process of defining *Directions in Mental Health in French*, namely leadership, equity, collaboration and transparency.

The *Société* acts as a point of convergence for the various health sector stakeholders in order to promote the development of an active offer<sup>4</sup> of health services in French.



**The *Société* ensures the meeting of the five groups of partners recommended by the WHO [22].** The *Société* ensures the meeting of the five groups of partners recommended by the WHO [22]. In addition to these partners are sectors that work on health determinants, such as justice, education, and early childhood services. These intersectoral partners are important for living in good health in French, in all spheres of life.

The *Société* and its member networks in each province and territory are working together to promote an accessible mental health system that is culturally and linguistically appropriate for all Francophones and Acadians. Since language and culture are at the base of identity, they are a key ingredient in the rehabilitation process [23].

This is why the *Société* and its member networks work to promote recovery, in their language, of Francophones in minority communities.

The directions proposed aim to inspire, guide and support the initiatives, projects and future programs for meeting the needs of Francophones in minority communities and who have mental health problems or illnesses. The directions are first briefly introduced, and then followed by outcomes sought by the *Société* and its member networks. In addition, Appendix 2 presents the avenues of action that were suggested for each direction during the process.

### Directions and Outcomes Sought

Some provinces and territories have already considered mental health as an action priority, but others are just getting started with the arrival of the Mental Health Strategy for Canada. With these four directions, the *Société* and its member networks can work in their respective areas.

### The Four Directions



<sup>4</sup>See the glossary at the end of the document for a definition of the term “active offer.”



DIRECTION

**Raising the Awareness of Francophone Communities**

The *Société* and its member networks wish to make Francophone and Acadian communities more aware of the meaning of mental health, and mental health problems and illnesses. They also wish to raise awareness of the issues stemming from minority language contexts.

This direction is an absolute must for these communities, especially due to their many vulnerability factors. For Francophones in minority communities, **it is important to understand the major role of language for expressing how mental health problems and illnesses are experienced, and for promoting the recovery process.**

This awareness can take on different forms depending on where the provinces and territories, the various levels of government, and the communities are in the matter. The possible means of raising awareness include a campaign to fight stigmatization, television public service announcements on mental health at work, and a workshop led by a public health regional office offered in a school. All these actions put together can make a difference. A community that is aware of the reality and issues of mental health problems and illnesses will be better able to welcome difference in a non-judgmental way and mobilize to have an influence on services offered. Its community capacity will be strengthened thanks to the sharing of knowledge, among other things.

Efforts to raise awareness of issues related to mental health problems or illnesses in a minority language context must also be directed to professionals, service providers and partners acting on health determinants. Networking and information sharing will enable the *Société* and member networks to mobilize around this direction, and strive toward the outcomes sought.

**The Outcomes Sought Are to:**

- Promote mental health, raise awareness of mental health problems and illnesses in the Francophone community, and fight stigma
- Promote the importance of the active offer of services in French supporting recovery
- Raise awareness of issues related to mental health problems and illnesses in a minority language context among health professionals
- Raise awareness among intersectoral partners acting on health determinants of the issues related to a mental health problem or illness in a minority language context

# Mental Health in French Directions and Outcomes Sought

## DIRECTION

### Building Community Capacity

Community capacity is produced by existing strengths in a community. Strengths are assets that translate into key individual, collective, and environmental resources to overcome challenges. "Building capacity means working on multiple levels. People, organizations, and communities do not exist in isolation. Each is part of and affected by the other. By increasing the capacity of one, we can also strengthen others, and progressively build a strong, integrated system that supports one another" [24].

The *Société* and its member networks wish to build community capacity in mental health in French. Even though articulated in different ways, capacity building must capitalize on the skills the community already possesses, for instance by giving people with a mental disorder or a mental illness and their families the necessary leeway. Participation, leadership, community structures and knowledge [25] are some of the characteristics that should be part of good practices to ensure capacity is built.

**The *Société* and its member networks favour a networking approach that promotes intersectoral partnerships that act on health determinants.** These partnerships make it possible to break down the silos inherent to the field of health and those of related fields such as justice, education, housing, etc. This type of approach promotes the exchange of knowledge, good practices and tools that facilitate community capacity-building.

Needless to say, capacity can be built in different ways depending on context.

#### The Outcomes Sought Are to:

- Promote the involvement of the Francophone community in the sharing of best practices and thereby build community capacity in mental health
- Identify innovative practices for building community capacity in mental health in French
- Equip health professionals to build community capacity in mental health in French
- Equip intersectoral partners acting on health determinants to build community capacity in mental health in French



#### DIRECTION

### Strengthening Services in French along the Entire Mental Health Continuum

All kinds of services are offered in response to symptoms of mental health problems and illnesses. Mental health services are part of Canada's health system. However, as recommended by the MHCC, it is important that this system be transformed to direct it toward recovery.

The *Société* and its member networks are part of this movement and thereby emphasize the importance of language as a primary tool in the process of recovery for Francophones in minority communities. **Language is indeed essential for getting messages across and comprehension on both sides, which is vital for an individual and for determining the degree of symptoms** such as suffering, distress and hopelessness.

To transform the offer of mental health services in French, service models appropriate to the needs of Francophones in minority communities must be promoted, among other things. To do this, the communities must be engaged in defining these services, since they are the first to be affected. It is with this in mind that the *Société* and its network members have defined the outcomes sought for strengthening services in French along the entire mental health continuum.

#### The Outcomes Sought Are to:

- Mobilize and equip Francophone minority communities to determine mental health services in French
- Identify innovative models and practices for organizing mental health services meeting the needs of Francophone minority communities
- Equip health professionals to actively offer linguistically appropriate mental health services
- Equip intersectoral partners acting on health determinants to offer linguistically appropriate services

# Mental Health in French Directions and Outcomes Sought

DIRECTION  
Promoting  
Research as well as  
the Transfer and Use  
of Knowledge

These days, knowledge is one of the essential foundations of all social movements. In the field of health, there is a strong desire to base reflections, planning and decision making on reliable knowledge such as evidence. **For a decade now, the *Mouvement de la Santé en français* has been working to promote knowledge specific to Francophones in minority communities. Current circumstances are such that now is the time to continue these efforts, especially in the field of mental health.**

For the *Société* and its member networks, establishing partnerships to develop a body of knowledge on mental health appropriate to minority language contexts is imperative. Without such knowledge, there is no doubt that it would be difficult to raise Francophone community awareness, build their community capacity, or improve the continuum of services offered for meeting the needs of Francophones in minority communities who have mental health problems or illnesses.

Drawing on knowledge gained, the *Société* and its member networks will be better able to support decisions made with evidence reflecting the needs of minority communities. These organizations can also support the transfer and use of knowledge by health professionals. To ensure efforts are optimal, it is necessary to mobilize people with a mental disorder or a mental illness in the development of knowledge and throughout the process of knowledge transfer. Here are some of the outcomes desired for meeting the long-term needs of Francophone and Acadian communities.

## The Outcomes Sought Are to:

- Establish partnerships to promote the development and transfer of knowledge in the field of mental health appropriate for the Francophone language minority
- Promote applied research on innovative practices in mental health appropriate for the Francophone language minority
- Promote the transfer and use of linguistically appropriate mental health knowledge among health professionals
- Promote the transfer of appropriate mental health knowledge for the Francophone language minority with intersectoral partners acting on health determinants

# Conclusion



Mental health problems and illnesses are among the priorities of all health systems in Canada and around the world. Mental health intervention is based almost entirely on communication; it is a key tool for recovery and wellness. As stated above, there is much evidence emphasizing the importance of the language barrier with regard to access to services in French, as well as to the process of recovery in one's language.

The *Société* and its member networks wish to continue their action to increase the accessibility and quality of mental health services for Canada's Francophone and Acadian communities. *Directions in Mental Health in French* suggests the most relevant ways to achieve that goal: raise the awareness of Francophone communities; build community capacity; strengthen services in French along the entire mental health continuum; and support research as well as the transfer and use of knowledge. The strategic outcomes proposed and the numerous avenues of action will make it possible to target the work according to the various contexts.

It has been said: "When I'm sick, I'm not bilingual." In a language minority context, this is the reality that Francophones must face. From the outset, the *Société* and its member networks have chosen networking as the best way to promote collaboration between all partners. The synergies necessary to achieve sustainable outcomes and attain genuine recovery in French can be created with these partnerships.

**Thanks to the opportunity created by the publication of the Mental Health Strategy for Canada developed by the MHCC, and thanks to the efforts of numerous provincial and territorial partners, there is reason to believe that significant progress will be made in the field of mental health in the coming years. This is the path that the *Société* and its member networks will take in the years to come.**



# Promoting Recovery in One's Language



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## Directions in Mental

### Raise the Awareness of Francophone Communities



### Build Community Capacity



Société Santé en français Strategic Planning

#### Capacity Building

Promote mental health, raise awareness of mental health problems and illnesses in the Francophone community, and fight stigma.

Promote the involvement of the Francophone community in the sharing of best practices and thereby build community capacity in mental health.

#### Organization of Services

Promote the importance of the active offer of services in French supporting recovery.

Identify innovative practices for building community capacity in mental health in French.

#### Human Resources

Raise awareness of issues related to mental health problems and illnesses in a minority language context among health professionals.

Equip health professionals to build community capacity in mental health in French.

#### Action on Health Determinants

Raise awareness among intersectoral partners acting on health determinants of the issues related to a mental health problem or illness in a minority language context.

Equip intersectoral partners acting on health determinants to build community capacity in mental health in French.

# Health in French

## Strengthen Services in French along the Entire Mental Health Continuum



## Promote Research as well as the Transfer and Use of Knowledge



Mobilize and equip Francophone minority communities to determine mental health services in French.

Establish partnerships to promote the development and transfer of knowledge in the field of mental health appropriate for the Francophone language minority.

Identify innovative models and practices for organizing mental health services meeting the needs of Francophone minority communities.

Promote applied research on innovative practices in mental health appropriate for the Francophone language minority.

Equip health professionals to actively offer linguistically appropriate mental health services.

Promote the transfer and use of linguistically appropriate mental health knowledge among health professionals.

Equip intersectoral partners acting on health determinants to offer linguistically appropriate services.

Promote the transfer of appropriate mental health knowledge for the Francophone language minority with intersectoral partners acting on health determinants.

## Courses of Action

### Suggestions for Avenues of Action for Direction 1:



### Raise the Awareness of Francophone Communities

- Develop a plan for distributing and exchanging information on mental health in French, the resources available, and the impact of language on health.
- Raise community awareness and develop the ability to ask for services in French, while also working on active offer.
- Raise awareness of all health system stakeholders, especially in mental health, to the importance of the active offer of mental health services in French, and promote this active offer.
- Provide public education on wellness and mental health in a culturally and linguistically appropriate context.

### Suggestions for Avenues of Action for Direction 2:



### Build Community Capacity

- Encourage community engagement in order to assert the contribution of Francophone minority communities to the development of service delivery models and appropriate practices.
- Support participation of Francophone minority communities in the planning and development of service as well as in taking charge of their health.
- Encourage Francophone community engagement and collaboration in developing policies, service delivery models, etc. to meet their specific mental health needs.
- Foster the peer support movement and service user-groups.
- Inform Francophone and Anglophone professionals of resources, tools and services that are culturally and linguistically appropriate, approved and available in French.
- Support caregivers in order to develop a Francophone environment conducive to recovery.
- Act on health determinants via intersectoral collaboration (sustainable network of links).
- Encourage development of inclusive communities where there is access to housing, education, work and community activities.

### Suggestions for Avenues of Action for Direction 3:



## Strengthen Services in French along the Entire Mental Health Continuum

- Assess service needs, planning and offer.
- Encourage active offer of services along the continuum.
- Encourage the integration of recovery in French in vision statements, mission statements, and guiding principles in order to update the organizational plans of health service providers.
- Develop a continuum of integrated services promoting recovery and wellness as well as a better quality of life.
- Support recruitment and retention of workers and managers representing the Francophone community in the service continuum.
- Promote the emergence and dissemination of evidence-based practices in the field of mental health in a minority context.

### Suggestions for Avenues of Action for Direction 4 :



## Promote Research as well as the Transfer and Use of Knowledge

- Encourage the development of Francophone networks of workers, managers and other key mental health stakeholders.
- Raise the awareness of key collection, transfer and data analysis stakeholders to the importance of the linguistic factor.
- Implement projects that can be used to assess the mental health service and program needs of Francophones in minority communities.
- Implement research projects to assess needs as well as the scope and impact of existing mental health programs offered in French.
- Promote the transfer and use of knowledge among various stakeholders (professionals, community organizations, families, caregivers, decision makers, etc.).
- Support the development of initial training and professional development programs for mental health workers.
- Encourage research on (especially action research) and the development of knowledge regarding the importance of language in mental health as a recovery and wellness tool or obstacle.

# Glossary

## ACTIVE OFFER

According to Société Santé en français, active offer means that French services are visible, available, and easily accessible. Active offer aims to create an environment where people are comfortable using the official language of their choice. In Manitoba, active offer includes four aspects:

- Bilingual welcome and service in the official language of choice of the user;
- Bilingual signage (including the wearing of buttons or pins by bilingual staff);
- Bilingual documentation (including web sites);
- Services of quality comparable to English services

## COMMUNITY

In the context of this document, the term "community" includes all people with a mental disorder or a mental illness, service users, families, loved ones, and community stakeholders, as well as the wider community.

## HEALTH

"Health is a state of complete physical, mental and social well-being, and not merely the absence of disease" [2].

## HEALTH PROFESSIONALS

Health professional refers to any person working toward the wellbeing of a person living with a mental health problem or illness.

## MENTAL HEALTH

"Mental health is different from the absence of mental illness, and is integral to our overall health. Mental health is a state of well-being in which the individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his own community" [1].

## MENTAL HEALTH PROBLEMS AND ILLNESSES

"There are many different kinds of mental health problems and illnesses. They range from more common mental health problems and illnesses such as anxiety and depression to less common problems and illnesses such as schizophrenia and bipolar disorder. This [document] does not attempt to draw a firm line between 'problems' and 'illnesses', or to resolve all of the controversies surrounding the choice of terminology. Rather the term 'mental health problems and illnesses' has intentionally been chosen to be respectful of a wide range of views.

In [this document], the phrase 'mental health problems and illnesses' refers to the full range of patterns of behaviour, thinking or emotions that bring some level of distress, suffering or impairment in areas such as school, work, social and family interactions or the ability to live independently.

The type, intensity and duration of symptoms of mental health problems and illnesses can vary widely from person to person as well as by type of problem or illness. Symptoms do not always follow a regular pattern, and can be a one-time event or cause episodes over many years. Some mental health problems and illnesses can bring about profound feelings of hopelessness and worthlessness, which can lead to thoughts of suicide. People who live with chronic diseases, addictions, and neurological conditions such as dementia, developmental and learning disabilities, and autism can experience mental health problems and illnesses at the same time. While [this document] does not address the full scope of issues relating to the many health, behavioural, and neurological conditions that are closely linked to mental health problems and illnesses, it does include recommendations to strengthen the coordination of prevention efforts as well as the delivery of services." [1].

## PREVALENCE

In epidemiology, prevalence is a measurement of the state of health of a population at any given time. For a given condition, the number of cases of illness at any point in time is calculated relative to the total population (regardless of whether the diagnosis is recent or was made some time in the past.) Prevalence is a proportion generally expressed as a percentage [26].

## RECOVERY

"Recovery is described as a deeply personal, unique process of changing one's attitudes, values, feelings and/or roles. It is a way of living a satisfying, helpful and contributing life even with limitations caused by illness. Recovery involves the development of new meaning and purpose in one's life." [8].

# Acronyms and Initialisms

**MHCC:** Mental Health Commission of Canada

**WHO:** World Health Organization

**Société:** Société Santé en français



Réseau-action Communautaire

Réseau-action Organisation des services

Réseau-action Formation et recherche



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This initiative is made possible through funding from the Roadmap for Canada's Official Languages 2013-2018: Education, Immigration, Communities.

The views expressed here do not necessarily reflect those of Health Canada.