



Bright Beginnings

**AN ADAPTED
APPROACH TO
SUPPORTING
ENGLISH-SPEAKING
CHILDREN (0-5) AND
FAMILIES**
in the
province of Quebec

APRIL 2018

About this document

The primary objective of this document is to further encourage and inspire English-speaking communities to collaborate with stakeholders in their regions offering programs and services to children and families.

The document may also serve as a useful tool for stakeholders to become more aware of specific needs often faced by English-speaking children and their families and learn about some of the adapted approaches and initiatives underway.

This document was created by the Community Health and Social Services Network (CHSSN) in collaboration with a variety of English community organizations throughout Quebec. We would also like to acknowledge the additional support provided by Kim Harrison from the Committee for Anglophone Social Action (CASA) in the development of the document and from *Avenir d'enfants* for their review of the French version.

Finally, the CHSSN would like to recognize the collaborative efforts of Community Learning Centres (CLC) and Literacy Quebec in supporting young children and their families. For more information about them, please visit:

www.literacyquebec.org
www.learnquebec.ca/clc

Ce document est disponible en français
sur le site web du CHSSN

www.chssn.org



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The views expressed herein do not necessarily represent the views of Health Canada.



Health Canada Santé Canada

WHAT IS Bright Beginnings?

Bright Beginnings is an adapted approach to supporting English-speaking children and families. It originated through a collaboration between three English community organizations on the Gaspé Coast and Magdalen Islands. They began to work with their regional and local partners to better adapt programs and services to support English-speaking children 0 to 5 years old and their families. Their efforts and experiences along with other English community organizations across Quebec helped inform the development of this provincial framework (see map for listing of community organizations).

ADDRESSING UNIQUE RISK FACTORS

Bright Beginnings is an approach that responds to specific risk factors often faced by English-speaking children and their families such as:

- lack of services available in English;
- increased isolation and mental health problems; and
- high percentage of parents living on low incomes (poverty).

Source: Bright Beginnings, Supporting English-speaking children and families in the Gaspé and Magdalen Islands. CASA, CAMI & VGPN, 2017.



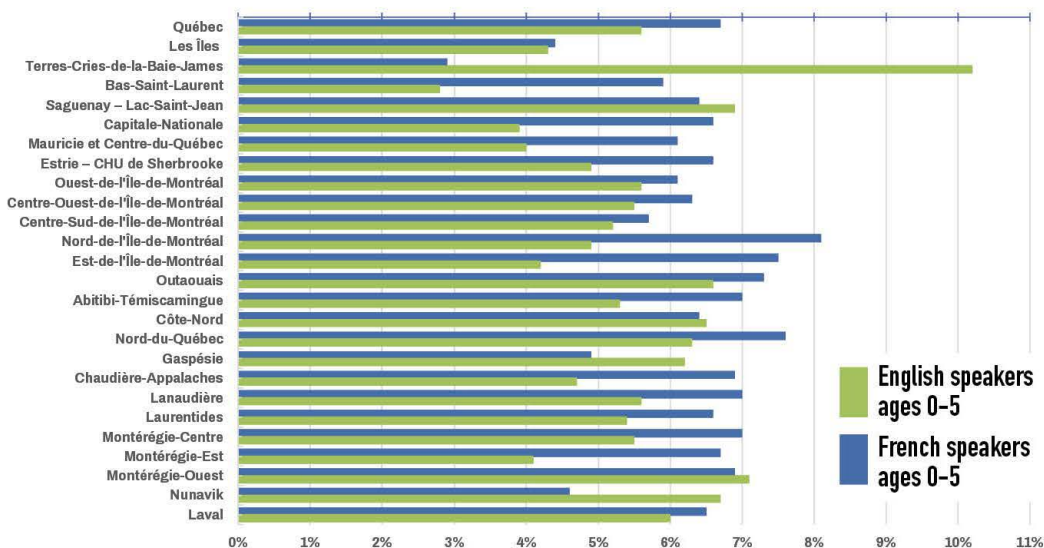
Original partners of *Bright Beginnings* from the Gaspé and Magdalen Islands • Left to right: Jessica Synott (VGPN), Manon Guité (*Avenir d'enfants*), Helena Burke (CAMI) and Cathy Brown (CASA).

A survey conducted on the Gaspé coast and Magdalen Islands revealed that out of the 37 programs offered to children and families in their region, only 6 were available in English. Other English community organizations in different regions across Quebec identify similar realities.

PORTRAIT OF English-speaking Children (0-5)

- The proportion of English-speaking children (5.6%) is somewhat smaller than that of the French-speaking children (6.7%). The regions with the highest proportion of English-speaking children are in the Réseau Territorial de Services (RTS) Terres-Cries-de-la-Baie-James (10.2%), Montérégie-Ouest (7.1%) and Saguenay Lac-Saint-Jean (6.9%).

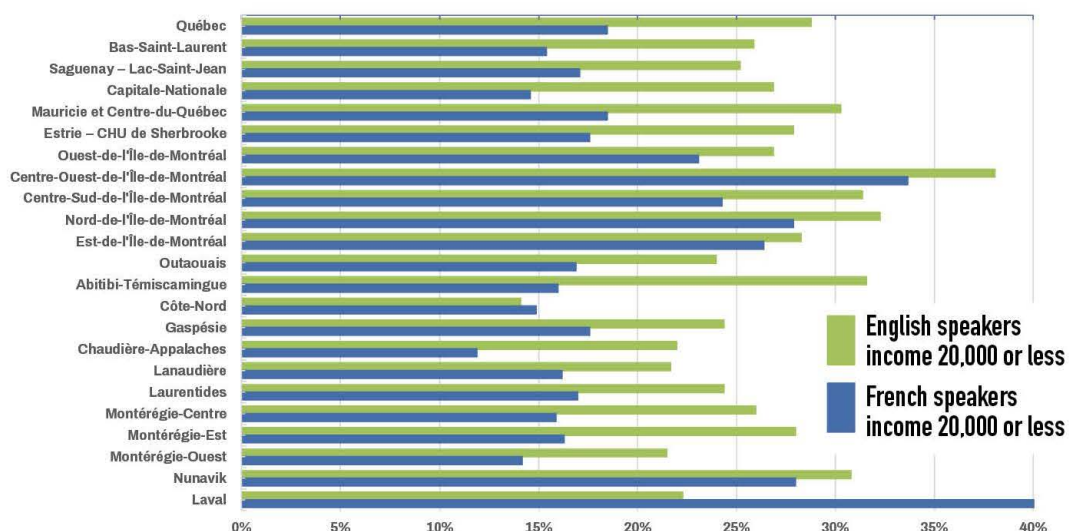
Proportion of Children (0-5) in the English and French-speaking Population



INDIVIDUALS OF PARENTING AGE (AGES 25 TO 44)

- Among Quebec's English speakers aged 25-44, 8.9% are unemployed compared to 6.9% of French speakers. The regions with the greatest proportion of unemployed English speakers are RTS de la Côte-Nord (25.3%) and de la Gaspésie (24.4%).
- In 21 of the 22 administrative regions, the percentage of English-speakers in low income situations (\$20,000 or less) is higher than French-speakers.

Population aged 25 to 44 income \$20,000 or less



Source: JPocock Research Consulting, based on data from the 2016 Census of Canada, Statistics Canada, 100% sample. Language concept is First Official Language Spoken with multiple responses distributed equally

The following infographic was created as a way to encourage English-speaking communities and their partners to invest in child and adolescent mental health promotion.

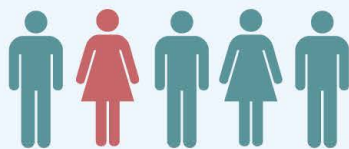
MENTAL HEALTH FOR A CHILD = MENTAL WEALTH FOR ALL



“75 per cent of mental health problems and illnesses have an onset in childhood, adolescence or young adulthood. Investing in mental health promotion and early intervention can stem the tide of economic losses and lessen the human burden of illnesses”.

– Mental Health Commission of Canada, 2017

ONE IN FIVE



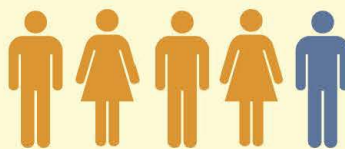
Each year 1 in 5 **CANADIANS** experience a mental health problem.

ONE IN FOUR



Only 1 in 4 who are **CHILDREN** or youth seek and receive services.

ONE IN FIVE



Each year in **QUEBEC** 1 in 5 people experience a mental health problem.

-8 YEARS

MEN

-5 YEARS

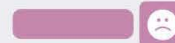
WOMEN

Compared to the general population, their **LIFE EXPECTANCY** is reduced by 8 years for men and 5 years for women.

ONE IN THREE



1 in 3 Quebec **KINDERGARTEN CHILDREN** living in a disadvantaged environment is vulnerable to problems in their development.



Children with **ACCESS TO CHILD CARE SERVICES** are 1/2 as likely to be vulnerable as their peers with no services.



2 - 3 TIMES

MORE QUEBEC HIGH SCHOOL STUDENTS have a high level of self-esteem when they receive a high level of social support from family, friends, school.

The risk of **DROPPING OUT** of school decreases among students receiving high social support.



40% VS 17%

The **RISK OF DROPPING OUT** among young people with **ADHD** is higher than among those without it (40% versus 17%).

YOUNG PEOPLE between 1 and 17 years of age with **ADHD** have more than tripled in Quebec since 2000.

ADHD
19,500

2000-2001

ADHD
63,600

2013-2014

The infographic was disseminated at a conference on school-based mental health promotion hosted in 2017 by three provincial partners listed below.

MENTAL HEALTH FOR A CHILD = MENTAL WEALTH FOR ALL

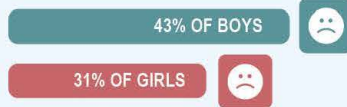


OVER 1/3 REPORT VIOLENCE



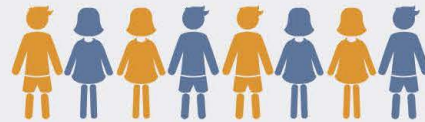
Over 1/3 of Quebec high school students reported experiencing **VIOLENCE AT SCHOOL** or on the way to school.

VICTIMS

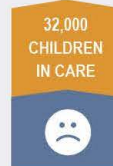


VICTIMIZATION affects 43% of boys and 31% of girls.

ONE IN TWO



1 out of 2 Quebec children between the ages of 6 months and 17 years of age is repeatedly victimized by **PSYCHOLOGICAL ATTACKS** each year.

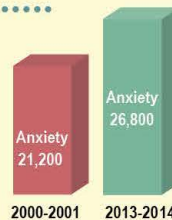


1/2 VICTIMS

In 2015-2016 almost 1/2 of the 32,000 children in care under the Youth Protection Act were **VICTIMS OF NEGLECT**.

INCREASED ANXIETY

Quebec children and adolescents (1-17 years) with **ANXIETY OR DEPRESSIVE DISORDERS** increased from 21,200 in 2000-2001 to 26,800 in 2013-2014.



SUICIDE #1 CAUSE

Suicide is the **#1 CAUSE OF DEATH** for Quebecers 18-44.



Every day almost **3 PEOPLE TAKE THEIR LIVES** in Quebec.

3/4 of those who die by suicide are men.



Directeur national de santé publique (2016). *La santé de la population : portrait d'une richesse collective*. www.msss.gouv.qc.ca
 Mental Health Commission of Canada (2012). *Changing Directions, Changing Lives: The Mental Health Strategy for Canada*. www.mentalhealthcommission.ca
 Mental Health Commission of Canada (2017). *Strengthening the Case for Investing in Canada's Mental Health System: Economic Considerations*. www.mentalhealthcommission.ca

Promoting an ecosystemic approach within English-speaking communities

An ecosystemic approach promotes the development of strategies that reinforce protective factors which have a positive impact on the child, family and community. It encourages collaboration between partners and engages them in a joint planning process from pregnancy to early adulthood. This approach is beneficial for English-speaking communities as it reinforces their role in collaborating with 0-5 stakeholders in their community.



“Protective factors serve to shield children from difficulties. The more present they are in the life of a child, the better the child’s chances of developing their full potential, sustaining a positive educational experience, and fully assuming his/her parenting role as an adult”.*

PROTECTIVE FACTORS BY SYSTEM**

CHILD	FAMILY	COMMUNITY
<p>ORAL AND WRITTEN COMMUNICATION SKILLS</p> <p>Ability to understand and express oneself through oral language Early reading and writing skills</p>	<p>SOCIO-ECONOMIC LEVEL</p> <p>Family income Level of educational achievement</p>	<p>NEIGHBOURHOOD’S PHYSICAL AND SOCIAL ENVIRONMENTS</p> <p>Availability of safe green spaces Housing quality (hygiene and affordability) Social cohesion Social capital</p>
<p>COGNITIVE SKILLS</p> <p>Sustained attention ability/memory Early numeracy skills General knowledge</p>	<p>PARENTS’ ATTITUDES</p> <p>Sense of being competent (self-esteem/confidence) Mother’s/father’s aspirations with regard to their child’s educational achievement Mother’s/father’s association with reading and writing</p>	<p>ACCESSIBILITY AND QUALITY OF SERVICES</p> <p>Daycare services Healthcare services Social services Community services Public transportation</p>
<p>SOCIAL AND EMOTIONAL SKILLS</p> <p>Peer relationships Sense of being competent/self-esteem</p>	<p>PARENTING PRACTICES</p> <p>Quality of the emotional and cognitive parent-child interactions Exposure to a variety of educational experiences Parent-child reading habits (early start, frequency)</p>	<p>MOBILIZATION ON BEHALF OF EARLY CHILDHOOD EDUCATION</p> <p>Collaboration between child, family and intervention practitioners Intervention practitioner’ beliefs The community’s involvement (alliances/partnerships)</p>
<p>PHYSICAL SKILLS AND HEALTHY LIFESTYLE HABITS</p> <p>Fine and gross motor skills Diet Sleep Physical activities</p>		

* Source: Taken from the Ecosystemic Partnership Approach guide – a handbook intended for local groups of partners by *Avenir d’enfants*.

** Source: Taken directly from www.agirtot.org

Important issues TO CONSIDER



ENGLISH-SPEAKING CHILDREN

A significant percentage of English-speaking children come from vulnerable socioeconomic family environments. They are also faced with additional challenges of learning a second language and feeling a greater sense of isolation. Communication skills and social and emotional development could be, in many cases, priority protective factors to reinforce. Other important protective factors include motor skill development and the adoption of a healthy lifestyle.

ENGLISH-SPEAKING FAMILIES

Due to language, cultural and economic barriers, English-speaking families in low income situations may experience additional social isolation and discrimination. They may also be unaware and even reluctant to participate in programs and services provided to them. Culturally and linguistically adapted outreach strategies that engage English-speaking parents and help them in adopting positive parenting attitudes and practices is an important consideration.

ENGLISH-SPEAKING COMMUNITIES

English-speaking communities lack accessible 0-5 programs and services. These communities must be mobilised and proactive in supporting their service providers. Some examples include increasing availability of child care services in English particularly for vulnerable families and ensuring English families can access child protection services in their language.

IMPORTANCE OF THE EARLY YEARS

A comprehensive approach to supporting our little ones involves long-term planning right from pregnancy until early adulthood. These early life transitions as indicated in the following infographic are crucial in developing a solid foundation lasting a lifetime.

Importance of the early years

Early childhood - the best time for taking actions



agirtot.org

Community Action Program for Children



The Coasters Association, in collaboration with the Lower North Shore Coalition for Health partners, oversees the management of the Community Action Program for Children (CAPC) program. The CAPC program was created in 1993 by the Public Health Agency of Canada in response to Canada's agreement to invest in the well being of vulnerable children, made at the United Nations World Summit for Children in 1990.

CAPC sites on the Lower North Shore partner with many other organizations such as schools, daycares and health and social service partners in order to provide locations where families can connect with their local community and obtain information, referrals and access to public health and social services.

CAPC sites adapt their activities to meet the needs of the participants they serve. Programming includes family resource centers, parenting classes and drop-in groups, parent/child groups, home visiting and more specialized programs when needed.

While every CAPC site is unique, they all share the same guiding principles as their foundation (see page 7).



Children participating in an early literacy program offered at one of the CAPC sites along the Lower North Shore.

Source: image taken directly from
<https://www.canada.ca/en/public-health/services/health-promotion/childhood-adolescence.html>

Guiding Principles

Promoting such guiding principles to other English-speaking communities across Quebec could have an important and positive impact on their capacity to improve the lives of children and families.

CHILDREN FIRST

Children are the primary consideration in each program.

STRENGTHENING & SUPPORTING FAMILIES

Families are central to the healthy development of children.

EQUITY & ACCESSIBILITY

All children are entitled to equal opportunities to develop their potential.

FLEXIBILITY

The program may be adapted or changed to address particular community needs and reach vulnerable families.

PARTNERSHIPS & COLLABORATION

The capacity of communities to support children and families increases when everyone works together.

COMMUNITY-BASED DELIVERY

Community-based models are effective in delivering services to children and their families, in part because of the community's understanding of its own culture and specific needs.





Supporting English-speaking Children & Families in the province of Quebec

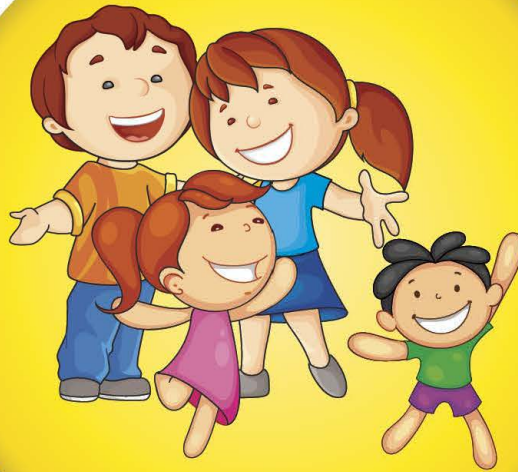
English-speaking communities

Government & service providers

COLLABORATION

Creating new and innovative programs and services

Child



Family

Adapting existing services

Community

Outreach to vulnerable children and families

VALUES

Preserving Identity

Social Inclusion

Equity

Model developed by



Community Health And Social Services Network Réseau communautaire de santé et de services sociaux

Financial contribution by



Health Canada

Santé Canada

BRIGHT BEGINNINGS Framework



COLLABORATION BETWEEN ENGLISH-SPEAKING COMMUNITIES, GOVERNMENT AND SERVICE PROVIDERS

The *Bright Beginnings* framework promotes a collaboration between English-speaking communities, government and service providers. This collaboration fosters increased dialogue and understanding of the issues and challenges facing English-speaking children and families. It also promotes the development of a trusting relationship between the principal actors to facilitate positive change.

LINGUISTIC AND CULTURAL ADAPTATION OF EXISTING PROGRAMS AND SERVICES

Once a strong base of collaboration is established, this framework encourages English-speaking communities to support government and service providers in adapting existing programs and services (linguistically and culturally) to better meet the needs of English-speaking children and families.

CREATION OF NEW AND INNOVATIVE PROGRAMS AND SERVICES

In some cases, creating new and innovative programs and services designed to effectively meet the unique needs of English-speaking children and families may be a preferred and only option. Pilot projects can be an effective way to test and evaluate the effectiveness of a new approach!

OUTREACH TO VULNERABLE ENGLISH-SPEAKING CHILDREN AND THEIR FAMILIES

English-speaking communities are well positioned to support government and service providers by reaching out to vulnerable English-speaking children and families and helping them connect with programs and services.

Values

English community organizations have identified three key values that they hold in common. By adopting these values, it will have the greatest impact on the overall health and well-being of English-speaking children and families.

PRESERVING IDENTITY

Receiving essential child and family-based programs and services that are linguistically and culturally adapted not only enables participants to fully benefit from them, but also helps to preserve their identity (acceptance of who they are) which is critical to their overall mental health and well-being.

SOCIAL INCLUSION

Many English-speaking children and families feel socially excluded. This can be mitigated through creating greater understanding and acceptance of differences.

EQUITY

Minority communities must be active participants in supporting governments and service providers to ensure an equitable distribution of programs and services available to them.

OTHER initiatives underway



0-5 BILINGUAL OUTREACH WORKER

In the Haut-Saint-François, the *HFS Fou de ses enfants* hired an outreach worker to better support and reach vulnerable English-speaking families with children in the 0-5 age group. Some activities include building trust, providing information and resources of services available and making links with a variety of local organizations.

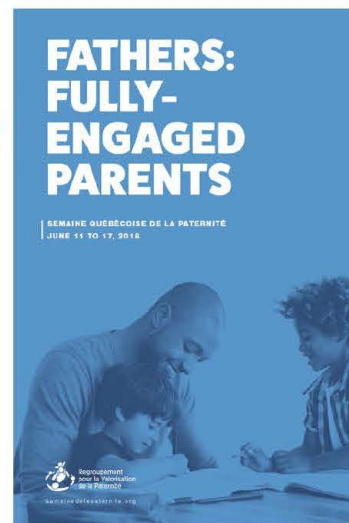
IT'S EARLY CHILDHOOD WEEK!

The CHSSN is a proud partner in supporting *Avenir d'enfants* in their efforts to promote the Early Childhood Week campaign to the English-speaking community of Quebec. Their website and promotional materials were translated into English and the CHSSN is honored to act as the English media representative for the campaign. Numerous English community organizations participate during this week by sponsoring local events that engage English-speaking children and their parents in positive activities.



FATHERS: FULLY-ENGAGED PARENTS

In collaboration with the *Regroupement pour la Valorisation de la Paternité* (RVP), the CHSSN has become an active member in promoting resources, information and campaign material to the English-speaking community. This collaboration will help us to reach more English-speaking fathers, encourage them in their parental role, and if required, support them in accessing programs and services in English.



SCHOOL READINESS

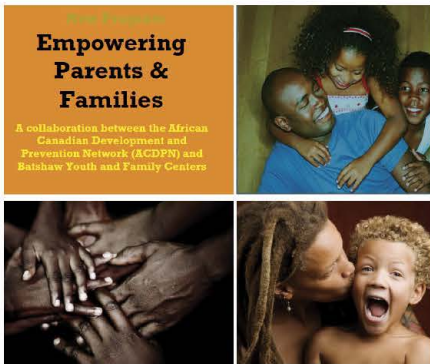
Connexions Resource Centre, in collaboration with the Western Quebec School Board (WQSB) and CEGEP Heritage College Early Childhood Education program, offers a *School Readiness Kit* to parents and their children entering kindergarten. Translated and adapted resources in the kit provide English-speaking families help to prepare their children for the transition from home or daycare to school. The contents of the kit include information on establishing routines and healthy lifestyles, early literacy and numeracy activities and pertinent health and community services. The kits are distributed during kindergarten open-houses at targeted schools of the WQSB and through the CLSCs in Gatineau.





BREAKING ISOLATION AND CREATING NETWORKS

In collaboration with *Baie-des-Chaleurs Active et en Santé* and *Avenir d'enfants*, CASA and VGPN offer Wiggle, Rhyme & Storytime workshops throughout the Gaspésie. These parent-child workshops incorporate nursery rhymes, reading, crafts and physical activities aimed at increasing children's motor and sensory skills. Parents gain the knowledge and confidence needed to create positive outcomes for their children.



Empowering Parents & Families

A collaboration between the African Canadian Development and Prevention Network (ACDPN) and Batshaw Youth and Family Centers

EMPOWERING PARENTS IN THE ENGLISH-SPEAKING BLACK COMMUNITY

A collaboration between the African Canadian Development and Prevention Network (ACDPN) and Batshaw Youth and Family Centers offers workshops to parents in the English-speaking black community of Montréal. Before each workshop, the families have a meal together, and then reunite to participate in a fun group activity. In addition to providing some important tools and information, the main objective is to create a social support network for parents facing the same everyday challenges.



PARENT-CHILD MOTHER GOOSE

Thanks to the Community Learning Centre Initiative (CLC), English schools are taking a greater interest in developing programs and services to support young children and their families. For example, the Richmond and Region CLC offers a *Parent-Child Mother Goose* Program to English-speaking children and parents. The program was first implemented in 2014 as part of the eco-systemic approach to support pre-literacy taken by the local Table Concertation des Familles. To expand the program in a cost-effective way, the CLC collaborated with the Townshippers' Association and provided a training opportunity for community volunteers to become certified as mother goose animators. This resulted in the creation of 3 new Mother Goose programs in the Estrie region.

TELL ME A STORY – RACONTE-MOI UNE HISTOIRE

This series of bilingual stories helps English and French-speaking children learn both English and French language skills. It was created by members of the English and French-speaking communities in the Quebec City region to promote the importance of bilingualism. Language exchange workshops are underway bringing together English and French-speaking children and families.



AGIRTÔT.ORG SUPPORTING ENGLISH-SPEAKING COMMUNITIES

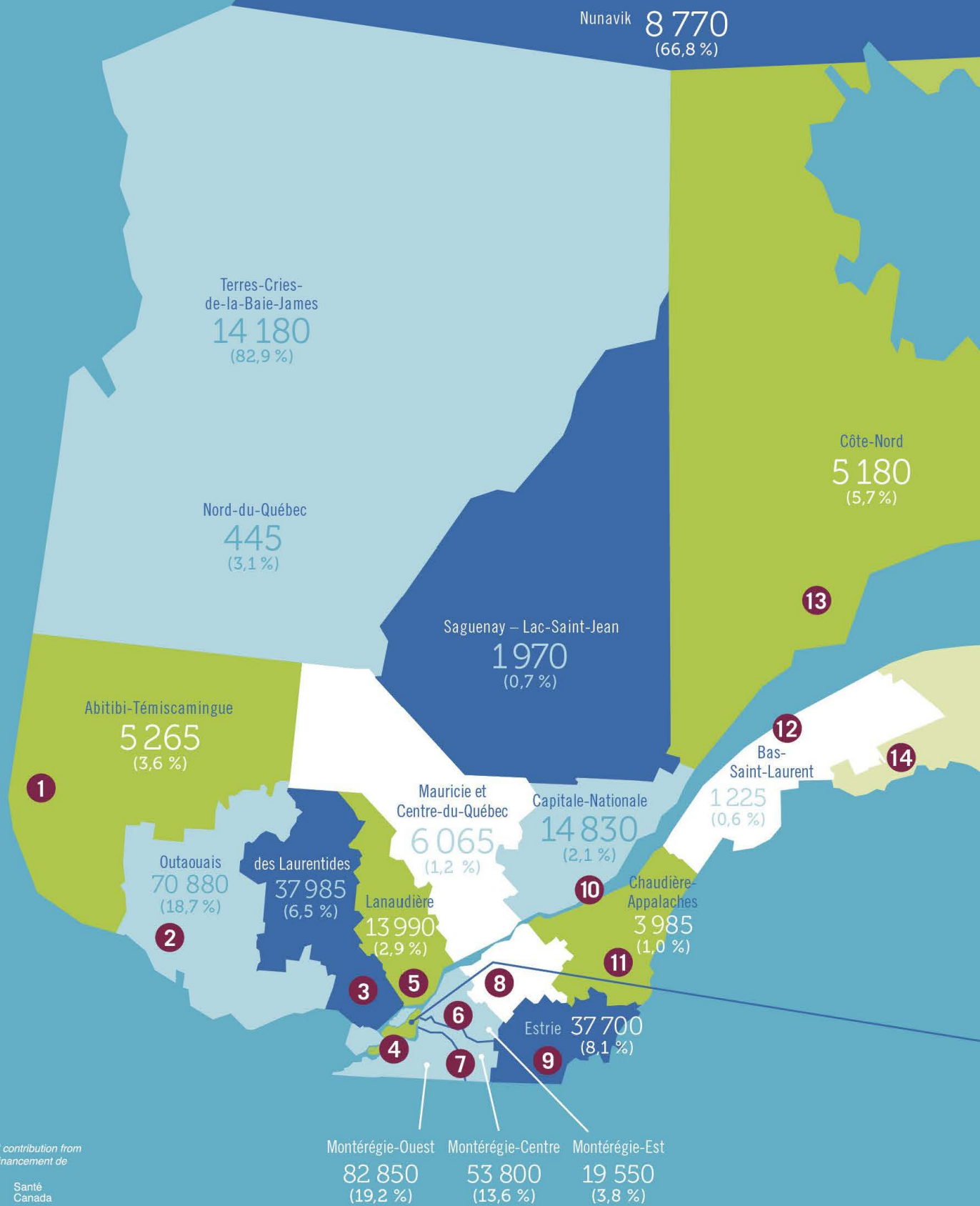
The CHSSN participated on a committee with *Avenir d'enfants* representatives in order to translate the *agirtôt* website. This initiative makes accessible a variety of information, resources and tools for English community organizations, schools and parents regarding early childhood development.



PREVENTING CHILD ABUSE AND NEGLECT

In certain regions such as the Cote-Nord, there is an unfortunately high percentage of reported child abuse cases. Efforts are undertaken by English organizations in that region such as the Coasters Association, to ensure service providers like the *Direction de la protection de la jeunesse (DPJ)* are supported and equipped to offer services in the English-language.





Financial contribution from
Avec le financement de

POPULATION

1 103 475 13,7%

2016 Census of Canada
Recensement du Canada, 2016

of Quebec
du Québec



The CHSSN NPI* Network

Le réseau NPI* du CHSSN

- 1 Rouyn-Noranda**
Neighbours Regional Association of Rouyn-Noranda
- 2 Gatineau**
Connexions Resource Centre
- 3 Deux-Montagnes**
4 Korner's Family Resource Center
- 4 Châteauguay**
Montréal West Community Network (MWCN)
- 5 Rawdon**
English Community Organization of Lanaudière (ECOL)
- 6 Brossard**
Assistance and Referral Centre Health & Social Services (ARC)
- 7 Lac-Brome**
Townshippers' Association
- 8 Drummondville**
Centre for Access to Services in English (CASE)
- 9 Sherbrooke**
Townshippers' Association
- 10 Quebec City**
Jeffery Hale Community Partners
- 11 Thetford Mines**
Megantic English-speaking Community Development Corp. (MCDC)
- 12 Métis-sur-Mer**
Heritage Lower Saint Lawrence
- 13 Baie-Comeau**
North Shore Community Association (NSCA)
- 14 New Carlisle**
Committee for Anglophone Social Action (CASA)
- 15 Gaspé**
Vision Gaspé-Percé Now (VGPN)
- 16 Grosse-Île**
Council for Anglophone Magdalen Islanders (CAMI)
- 17 St. Paul's River**
Coasters Association (LNSCH)
- 18 Verdun**
Collective Community Services (CCS)
- 19 Laval**
AGAPE – The Youth & Parents AGAPE Association Inc.
- 20 Côte-des-Neiges**
African Canadian Development & Prevention Network (ACDPN)
- 21 Saint-Léonard**
East Island Network for English-language Services (REISA)

* Networking and Partnership Initiative