

Community Portrait: Sutton



April 2013

Portrait of the English-speaking Community of Sutton

“Reaching beyond government to involve civil society and the voluntary and private sectors is a vital step towards action for health equity. The increased incorporation of community engagement and social participation in policy processes helps to ensure fair decision-making on health equity issues.” (WHO, 10).

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TABLE OF CONTENTS

BACKGROUND

A project on community development	4
Building healthy communities.....	4
Access to health care among minority language groups.....	6
Changing realities among English speakers in Quebec.....	6
Six portraits of English-speaking communities in Quebec	9

SUTTON

Historical Trajectory	11
Early Settlement	11
Twentieth Century Changes	12
Recent Demographic Trends	13
English Speakers in Townships	14
Age Structure of the Population.....	15
Language Dynamics	17

COMMUNITY PERSPECTIVES ON SUTTON

Drawing a portrait of Sutton: methods and sources	19
Community Life in Sutton	21
Educational attainment	25
Economic conditions	29
The natural and built environment.....	36
Towards community and personal health and well-being.....	40

Summary and Conclusion	44
------------------------------	----

Moving Forward.....	46
---------------------	----

Endnotes	47
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A project on community development

In 2009, the Community Health and Social Services Network (CHSSN) concluded an agreement with Quebec's Institut national de santé publique (INSPQ) to develop knowledge on the English-speaking population of Quebec as part of a program concerning health projects for official language minority communities. Gaining a better understanding of English-speaking communities in Quebec is one of the objectives of that collaboration, and it is explored here through the lens of community development.

Community development

has been defined as “a voluntary cooperative process of mutual assistance and of building social ties between local residents and institutions, with the goal being to improve physical, social, and economic living conditions.”¹ The idea is for community members to take collective action and generate solutions to common problems by planning the development of all aspects of community well-being. The goal is to improve people's quality of life and to reduce social inequalities.

There are many different approaches to community development and many different groups that are engaged in it. Public health workers are one of those groups. In the Quebec context, community development has been identified as one of the main intervention strategies in public health. Many regional health boards and health centres are therefore engaged in community development.

The process of community development is grounded on several strategies:

- Community engagement
- Empowerment
- Intersectoral collaboration and partnership
- Political commitment leading to healthy public policy
- Capacity building

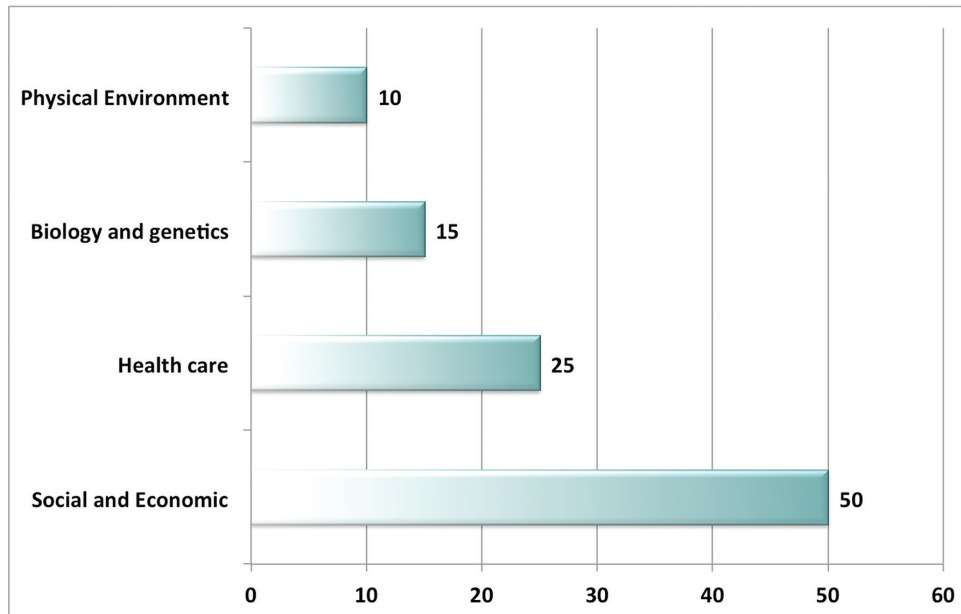
The underlying principle is that individuals and communities need to be empowered to take greater control over their health and future, with a view to reducing inequality among community members.²

Building healthy communities

In keeping with the CHSSN's commitment to a population health approach that takes into account the range of health determinants, this project adopts a holistic view of health. This means examining ways to improve people's health, and the health of the community more broadly, through a socio-environmental approach, which considers health as a product of social and environmental determinants that interact to influence our health status.

The many different factors that contribute to health are referred to as health determinants. Health determinants are defined as the individual, social, economic and environmental factors that can be associated with specific health problems or with overall health status.³ Although there are many health determinants— income and social status, social support networks, education, employment and working conditions, physical environments, biology and genetics, health services, and more—research shows that socio-economic and physical environments are among the main determinants of health.

Even within the same region, there are major differences between communities in terms of health, well-being, and quality of life and some of these differences are related to varying social and economic conditions.



This means that communities can have an impact on the health and well-being of their residents by working to reduce inequalities among people, and by creating a “healthy community.”

A healthy community is considered to be one in which:

- Residents have access to **quality drinking water, food and housing**
- Residents **feel safe** in their community
- Residents have **access to work** that satisfies them
- Residents enjoy a clean, safe, high-quality **physical environment**
- The community has a wide range of well-coordinated **support groups**
- Residents maintain connectedness with their past, their cultural and biological heritage and with other individuals there by developing a real **sense of belonging to their community**
- A wide variety of **social, sports and cultural activities** encourage residents to adopt active and healthy life residents have easy **access to public and private services**
- Economic activity in the municipality has a **strong and diversified base**
- Residents are **active participants** in the decisions that affect them
- Residents have access to **appropriate health care services** and generally enjoy good health⁴

A significant number of health determinants are beyond individual control and only the community can have an impact on them. Therefore, just as individual empowerment is important for health and well-being, so too is community empowerment. This means building the community capacity to structure itself in ways that help to improve the quality of life of its members. Beyond such traditional indicators as the economy and demographics, we must take into account factors such as democratic life, community dynamics and social capital, all of which testify to the health of a community as a living entity⁵.

Access to health care among minority language groups

After social and economic conditions, health care is the next most significant determinant (estimated to account for about 25% of people's health). Having access to health and social services is therefore vital. However, many factors can play a role in facilitating or hindering access to such services. Research shows that language is one of these factors and can therefore be considered a health determinant.



Crédit: http://phil.cdc.gov/PHIL_Images/

Language barriers can create inequalities in health status because problems in communication and understanding reduce the use of preventative services, increase the amount of time spent in consultations and diagnostic tests, and influence the quality of services where language is an essential tool—such as mental health services, social services, physiotherapy and occupational therapy. Language barriers also reduce the probability of compliance with treatment and diminish the level of satisfaction with the care and services received⁶. Minority language communities often have greater difficulty obtaining services in a language they understand well, and even official language communities face barriers.

Among English-speaking Quebecers, access to health and social services remains a challenge for many, in spite of the fact that rates of bilingualism in this group are on the rise, and English speakers are more likely than other language groups to be able to converse in both French and English⁷. There is, as well, a wide variation in accessibility and quality of health and social services in English across the province⁸.

The Community Health and Social Services Network was founded in 2002 in response to these difficulties experienced by English-speaking communities. It was established to support communities in their efforts to develop community infrastructure and build strategic relationships and partnerships within the health and social services system to improve access to services⁹. In doing so it aims to support English-speaking communities in Quebec in their efforts to redress health status inequalities and promote community vitality. Through a series of projects and partnerships that link community and public partners, the CHSSN is working to strengthen networks at the local, regional and provincial levels in order to address health determinants, influence public policy and develop services.

How is it that a group that is the linguistic majority in all other provinces (indeed in North America as a whole) needs such support? The situation of English-speaking Quebecers has changed over recent decades and a better understanding of those transformations can help shed light on current realities.

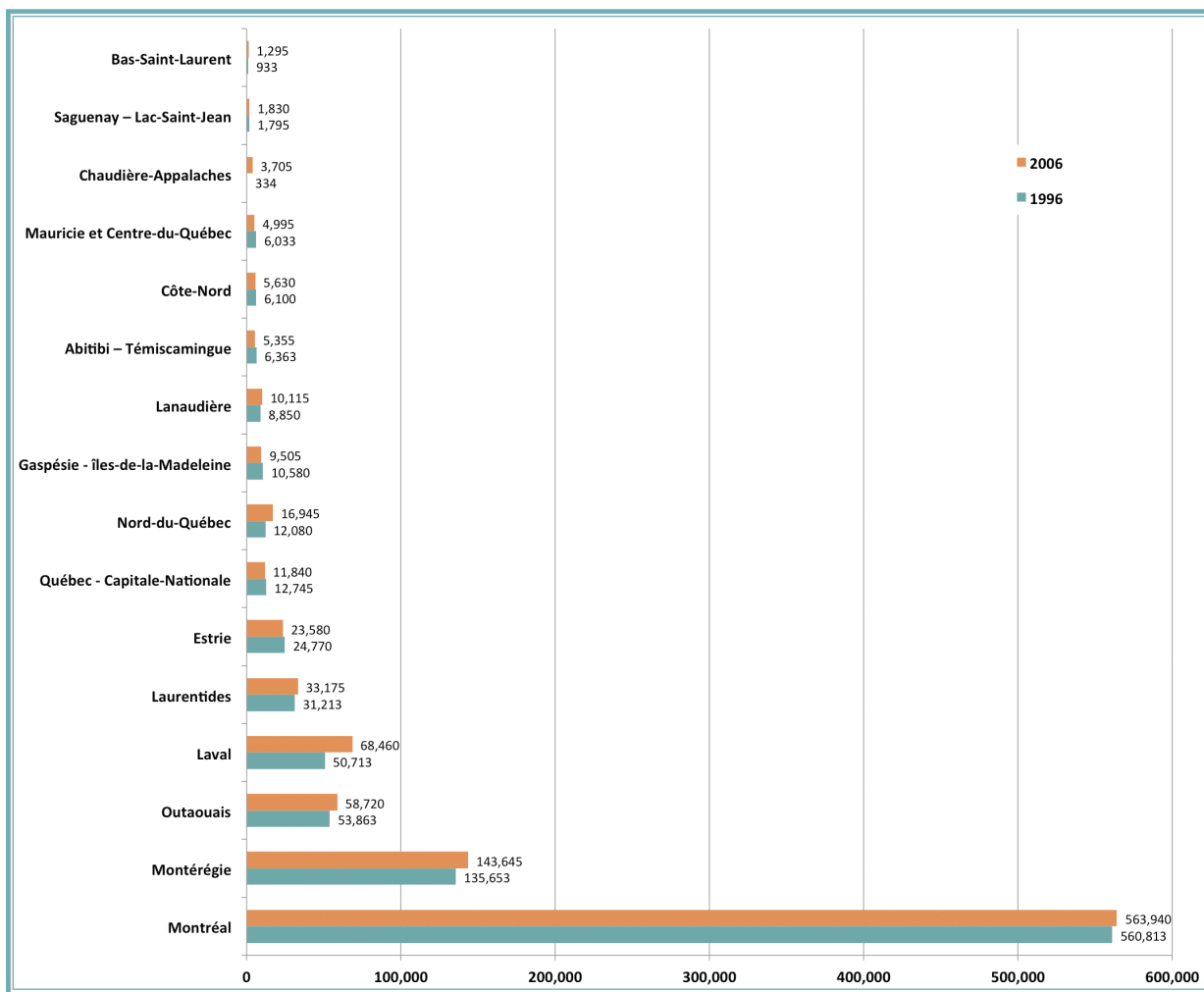
Changing realities among English speakers in Quebec

Since the British Conquest in 1759, the English-speaking population of Quebec has experienced significant demographic, political and economic changes. Following the defeat of the French forces, increasing numbers of English speakers came to settle in what is now Quebec. While by no means were all these settlers well-off, historically the English-speaking population has been well-represented among Quebec's economic and political elite. The position of English speakers remained strong until at least the mid-20th century, however

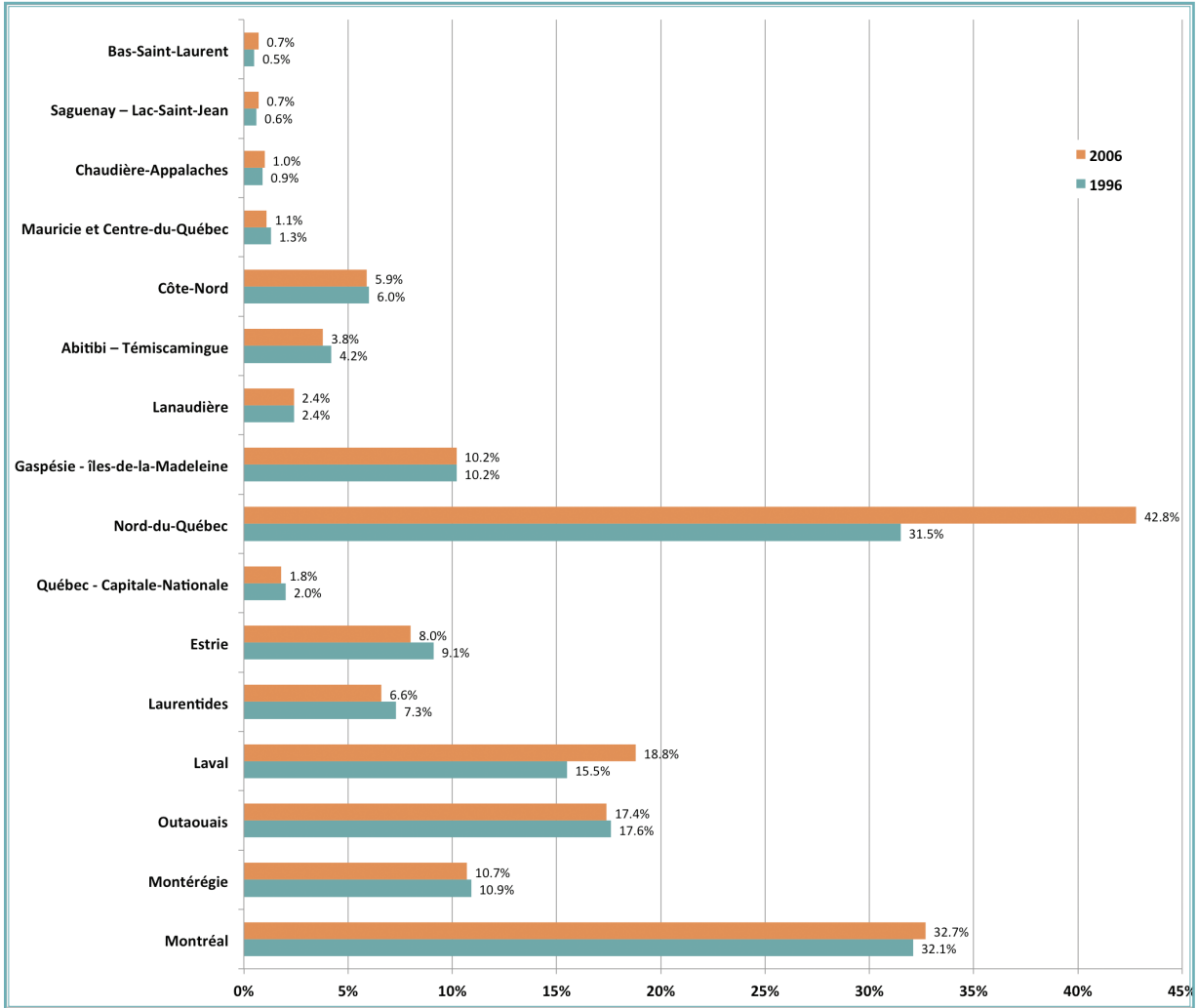
changing political circumstances led to an increasing outflow of English speakers from the province and a decline in the vitality of some of the communities they composed. Thus, from 1971 to 2001, the population who spoke English as their mother tongue dropped by 25% and its share of Québec's population fell from 13.1% to 8.3%. Meanwhile, the French-speaking population rose slightly (from 80.7% to 82.5%) while speakers of other languages almost doubled their share of the total population (from 6.2% in 1971 to 10.3% in 2001)¹⁰.

However, over the 1996 to 2006 period, the English-speaking population in Quebec grew by 68,880, while its share of the provincial population was slightly higher in 2006 than it had been in 1996. The 2001-2006 period was one of growth for most English-speaking regional populations, with only the English-speaking groups in Côte-Nord and Gaspésie - Îles-de-la-Madeleine showing a decrease in size over that period. Relative to the total population, only Estrie and Laurentides experienced a drop in their share of the regional population. The regions in which the English-speaking population grew most were Montreal, Laval, Montérégie and the Outaouais.

Changes in Size of the English-speaking Population, 1996-2006¹¹



Changes in Proportion of Regional Population, 1996-2006¹¹



But what is an “English-speaker”? The English-speaking population of Quebec includes citizens throughout the province who choose to use the English language and who identify with the English-speaking community. For some of those people English is their mother tongue, while for others English is the first official language they speak, and their mother tongue is a language other than English or French. In areas with high levels of immigration (notably in the Montreal area), the decline of the English-speaking population has been mitigated by some of these Allophones who speak English as a second language.

The English-speaking community has always been diverse in its make-up (originally comprising English, Scottish, Welsh and Irish, Catholics, Jews and various Protestant denominations, among others), and that diversity has increased over time to encompass people from a broad range of origins around the world. Today the English-speaking community is made up of many sub-communities that are multicultural and multiracial.¹² In addition, the contexts in which they are located vary greatly. **While the majority of the population with English as their first official language lives in the Montreal area (about 80%),¹³ many English-speaking communities are located in rural or remote areas of the province. In some cases, English speakers are a very small proportion of the local population, while in other municipalities they may represent a significant percentage, or even a majority.**

These changing demographic realities present a number of challenges to English-speaking communities, such as the issues related to an aging population and to outmigration among caregivers and youth. For example,

among the population who speak English as their mother tongue, 8.3% left Québec for the rest of Canada between 1991 and 1996, and that percentage rose to 8.9% between 1996 and 2001. The rates for the total population were only 1.6% and 1.7% for those periods. Younger English speakers were the most likely to leave the province: 15.8% of those between 25 and 34 years old moved away, while fewer people age 65 and over left.¹³ This means that the **generations that represent the future of their communities and can take care of ageing relatives are often not around to do so. Those who stay can be overburdened with care-giving**, and the age structure of the community becomes skewed towards the older age groups. The impact on health and the need for services can be significant.

Another challenge is the socio-economic status of English speakers in Quebec. Although poverty does not affect all English-speaking Quebecers, it is a reality for many, and the gap can be significant between French and English speakers. For instance, **in some regions, English-speaking families are more likely to have a low income compared to their French-speaking neighbours. The same is true for educational attainment: in some regions English speakers are less likely than their French-speaking peers to have completed high school or to have pursued post-secondary education.**¹⁴

These issues are good indicators of demographic vitality, an important dimension of community health. Demographic vitality refers to community characteristics such as the rates of ageing and unemployment, the proportion of caregivers to seniors, population size, and in the Quebec context, level of bilingualism.¹⁵ Understanding demographic vitality allows health care workers, municipalities, policy makers and community residents to plan properly for services, activities and programs which will meet the needs of the community. For example, when a community has a large proportion of seniors the burden of care is greater on the care-giving generations, and steps may need to be taken to address the needs of both seniors and their care-givers. Or **when a community is losing its population, community services and institutional structures lose vital human capital and social networks are eroded, so planning needs to focus on strengthening the social fabric.**

This project is being carried out within the context of these transformations, and we therefore aim to document and illustrate the wide diversity of English-speaking communities in Quebec. This is being done through community portraits.

Six portraits of English-speaking communities in Quebec

In order to get a more detailed understanding of current realities in English-speaking communities, this action research project adopts a participatory method by which a “portrait” is drawn of the community. Six of the CHSSN’s Networking and Partnership Initiatives chose one community in their area to participate in a process aimed at developing a portrait of that community. In keeping with community development principles, this project is carried out in the spirit of community-based participatory action research. In practice this means that the work is centred on the community (village, neighbourhood, community of identity), involves community members in the process, aims to inform action (future directions for policy, programs, and projects), and involves the systematic collection of information. It is predicated on the conviction that the community is the expert on itself. Through participatory action research, participants develop knowledge, the ability to think critically, and a culture of learning. Communities are then better able to identify and develop local solutions to local problems. Researchers who work with this method find that individuals and communities can be empowered through the process.¹⁶ Empowerment is the process of increasing the capacity of individuals or groups to make choices and to transform those choices into desired actions and outcomes. Central to this process are actions that build individual and collective assets, and

improve the efficiency and fairness of the organizational and institutional contexts which govern the use of these assets.

In choosing the communities to involve in this phase of the project we aimed for diversity. Some communities are in urban, multicultural environments, others in rural, small town communities, and others in remote communities of Québec. In some places English speakers are a very small percentage of the population; in others they represent a larger proportion. Some communities are thriving while others are more vulnerable. Consideration was also taken for local interest and capacity for being involved in doing a community portrait. In some cases a community was chosen because the Networking and Partnership Initiative (NPI) coordinator or host organization felt it was a good opportunity to reach out to that community and get to know it better. In other cases, there was a convergence of interests that made it a good time to bring together stakeholders and pool knowledge and resources, for instance, as a municipality developed a family and seniors policy, or as a health centre assessed the needs of the English-speaking community.

The six communities selected for this phase of the project are as follows:

Community	Region	Regional Association
Sutton	Montréal-Est	Townshippers' Association
St-Leonard	Montréal-Est	Réseau de l'est de l'île pour les services en anglais (REISA)
Laval	Laval	Youth and Parents AGAPE Association Inc.
New Carlisle	Gaspésie	Committee for Anglophone Social Action (CASA)
Sept-Îles	Côte-Nord	North Shore Community Association (NSCA)
Bonne-Espérance	Basse-Côte-Nord	Coasters Association

The method for completing the community portraits is inspired by various approaches used by groups active in community development, notably in the Healthy Communities movement (Réseau québécois de Villes et Villages en santé), among municipalities and by public health boards. There are several steps to completing these portraits. The first is to engage local stakeholders in the process. The second is to gather existing data, in the form of statistics, past reports and other information on the community. The third step is to obtain qualitative data via a town hall meeting (community consultation) where various themes are discussed and community members are asked to share their perspectives on their community. In some cases, in order to ensure that all perspectives are heard and a wide range of people are contacted, focus group interviews or individual discussions may be held with other community members.

The information gathered is then analyzed and summarized by theme, focusing in each case on the community's assets, and the challenges it faces as concerns social and community life, the economy and incomes, education, the environment, and health and well-being. The information is then summarized and a portrait drawn up, after which it is validated with community members and other stakeholders. This portrait presents the result of that process. The portraits can then be used to plan actions based on local realities, as defined by community members. Since each community is different, the way of addressing issues will necessarily vary, as will outcomes.

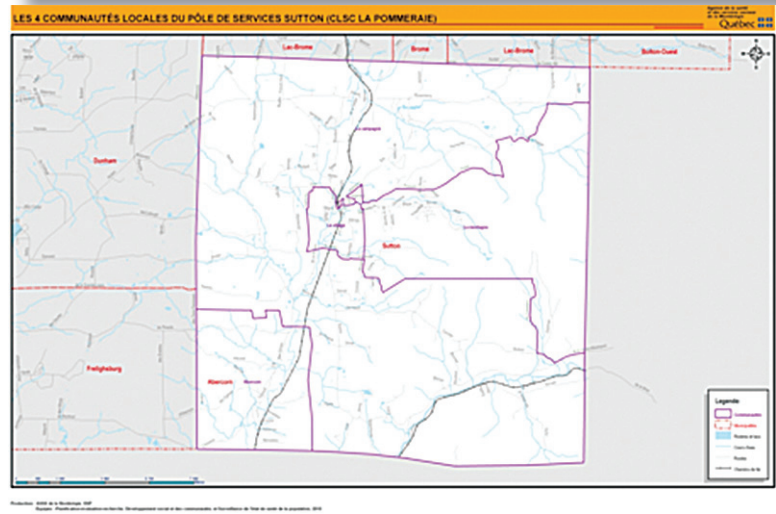
SUTTON:

A VILLAGE, A MOUNTAIN, A RURAL TOWNSHIP

Sutton is a rural municipality located in the Montérégie administrative region, and part of the Brome-Missisquoi regional county municipality (MRC). It is in the most southerly area of Quebec, near the border with Vermont in the United States. Sutton is part of the historical Eastern Townships, a large region which includes the Estrie administrative region and parts of Montérégie, Centre-du-Québec, and Chaudière-Appalaches.

Sutton is located in a rural region featuring rolling hills, farmland, forest and rivers. The surrounding area boasts a downhill ski station, hiking and bicycle trails, vineyards and other tourist attractions. It is located about 110 kilometres from Montreal to the west, 84 kilometres from Sherbrooke to the east and 12 kilometres from the Vermont border to the south.

This portrait covers the village and the township of Sutton, including Abercorn, Sutton Junction, North Sutton and Glen Sutton. They are all part of the territory covered by the La Pommeraie health centre (CSSS).



Source: (top) Source: http://www.radio-canada.ca/television/la_petite_seduction/emissions/2010/sutton/ and (bottom) ASSS de la Montérégie, DSP

Historical trajectory of Sutton

EARLY SETTLEMENT

The territory around Sutton was inhabited by Aboriginal groups long before Europeans arrived in North America¹⁷. In the 1770s when it was being explored for the British government, Abenaki groups were established in the area.

Settlement of the region by Europeans began after the American War of Independence. Following the Declaration of Independence in 1776, war spread throughout the 13 colonies. People in the United States who remained loyal to King George—“Loyalists”—were declared traitors in all states except Georgia and South Carolina. Their property was seized and sold, they lost their right to vote and they were forbidden from holding public office. They were given the choice of resettling in other British colonies or returning to England. As a result, in 1783-1784, between 40,000 and 50,000 Loyalists fled to Canada, many of them to what is now Quebec.

In the late 1700s (1792 – 1800) nine families of squatters settled in what would become the Township of Sutton. Family names included Spencer, Griggs, Soles, Westover, Marsh, Shepard, Miller, Hastings, and Burnett. Then, in March 1802, the Township of Sutton was founded and 200 acres of land was granted to each of 181 people, including those already settled in the area.

By the 1840s, good land was becoming scarce in the seigneurial area of Canada East, and the French-speaking population began looking elsewhere for land. They moved into the Eastern Townships and the families Dubé, Gendron, Godue, Lusignan and Métivier came to Sutton. The first French-speaking person to participate in municipal politics was Baptiste Saint-Pierre who was named assessor in 1858.

TWENTIETH CENTURY CHANGES

In 1890, Mansonville Utilities installed the first telephones in Sutton and continued to provide service until about 1950 when the company was bought by Bell Canada. After World II, telephone service was extended to the rural areas and a program of rural electrification was undertaken by the Quebec government. By the mid 1950s, most homes in the region were equipped with both services.

Those old enough to remember what Sutton was like in the early to mid-1900s talk of the many businesses and industries that shaped the community¹⁸: a grain mill, several grocery stores, a garage, Shepard's hardware, the telephone building, a barber shop, women's and men's apparel shops, Riggs gift and stationery shop, Southern Canada Power, Basnett's meat market, the convent school, the RCMP, Garage Gingras, a butcher's, Buckle's sewing and grocery store, a shoemaker, a restaurant, a doctor's office, a casket company, a sawmill, a creamery, and more. Public transport to Montreal is said to have been easier several decades ago, with trains departing a few times a day. People would sometimes go to Montreal for the day to do errands.



Source: <http://infosutton.com/fr/autre-info-sutton/une-page-dhistoire.html>

The railroad, which reached Richford, Vermont in 1871, ran on to Sutton, sparking an economic expansion by allowing the export of agricultural and forest products from the region and promoting the development of light industry. The area was not to see a similar boom until the opening of the ski hill on Sutton Mountain in 1960. The Mount Sutton ski hill was developed by the Boulanger family, paving the way for the development of the tourist area on the lower slopes of the mountain. Many housing developments followed, beginning in 1983, and sewer and water systems were built to service them.

Changes to farming also transformed the community: increasing agricultural mechanization made the hill farms more difficult to work and many of the farms were sold. People from Montreal looking for a vacation home or a place to retire bought some of these properties, shifting the population towards a greater proportion of part-time residents and retirees (who represent about half of today's population).

RECENT DEMOGRAPHIC TRENDS

Unlike many rural areas and villages in Quebec, the population of Sutton has increased steadily in recent decades. Its attractiveness as a place not only for weekenders, skiers and tourists, but also for city-dwellers in search of a quieter rural lifestyle is largely responsible for the increase in population.

Population change in Sutton, 1991-2011

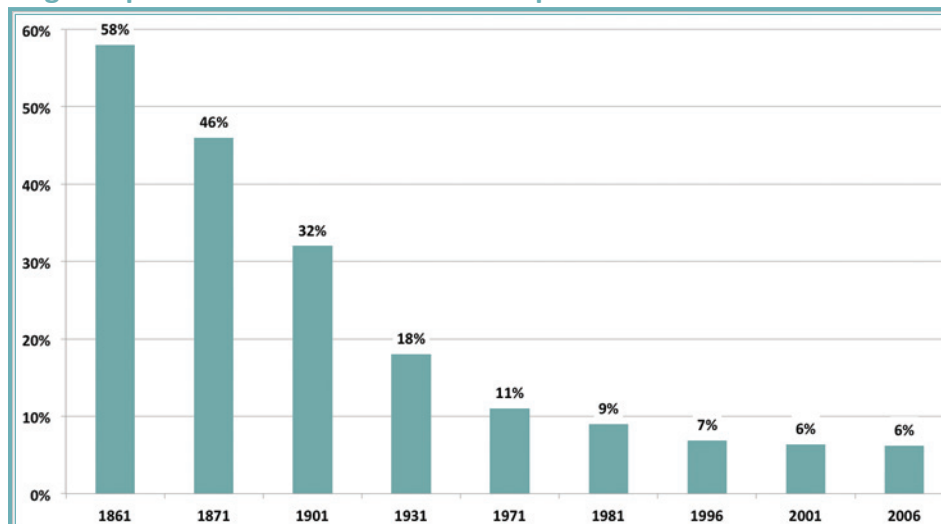
Total population				
1991	1996	2001	2006	2011
3,084	3,318	3,524	3,805	3,906
Population Change				
	1.9% (town) 13.6% (countryside)	6.2%	8.0%	2.7%

Source: Statistics Canada, Community Profiles, Sutton, Québec

ENGLISH SPEAKERS IN THE TOWNSHIPS

As we can see, many of the original settlers in the Townships were English-speaking Loyalists, followed later on by Francophone settlers looking for land as the St-Lawrence Valley became more densely occupied¹⁹. As such, the historical Eastern Townships is one of the few places in Quebec where the first European settlers were not French speakers. Although the first settlers were Loyalists motivated by political allegiances to leave the United States, those that came after had very different reasons for immigrating. Some were American pioneers seeking good land and opportunity; others were immigrants from the British Isles (Ireland, Scotland, Wales, and England), many of whom left their homelands because of poverty and famine; then later waves of immigration came from other European countries such as Germany, Switzerland and Holland. The English-speaking population was therefore diverse in its roots.

English speakers in the Eastern Townships 1861-2006



In 1861 the population of the Townships was 58% English-speaking and had the largest regional concentration of English speakers in Quebec, more than in Montreal. The proportion of English speakers, however, has decreased steadily in the eastern Townships since the late nineteenth century, and continues to do so.

Source: Pocock, Joanne and Brenda Hartwell, 2010. Portrait of the English-speaking Community in the Eastern Townships, Townshippers' Association.

Between 1976 and 1986, a total of 96,980 Quebecers aged 20-64 left the province, and 70,035 of these had English as their mother tongue. In the Townships, between 1996 and 2001, while the French-speaking population increased, the English-speaking population declined. However for the first time in generations, the English-speaking population of the Townships experienced growth between 2001-2006, about a third of which was due to immigration from outside Canada.

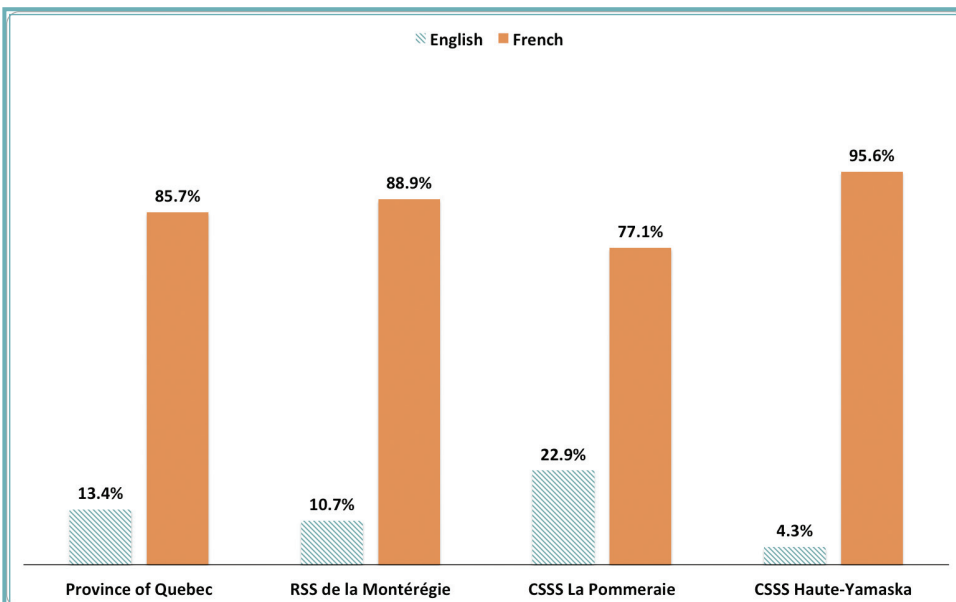
Although the Eastern Townships was settled in part by English speakers, and continues to have a larger proportion than many other areas of Quebec, these English speakers are not evenly distributed throughout the Townships. In fact, the percentage of English speakers in the different MRCs ranges from less than 1% to over 22%. The population map below shows the number of English speakers in each MRC (based on the 2001 census) and their percentage of the total population.

The English-Speaking Community, Historical Eastern Townships



Of all MRCs, Brome-Missisquoi—where Sutton is located—has the highest percentage of English speakers, at 22.7%, as well as the largest number of English speakers (10,492 in 2001).

Source: Pocock, Joanne and Brenda Hartwell, 2010. Profile of the English-speaking Community in the Eastern Townships, p. 7. Townshippers' Association.



For the territory covered by the CSSS La Pommeraiie (a smaller area than the MRC of Brome-Missisquoi), the figures are similar: 22.9% of the population is English-speaking, compared to its neighbour to the north, Haute-Yamaska, with only 4.3%.

Source: CHSSN 2009-2010 Baseline Data Report 2009-2010 (2006 Census of Canada)

First official language spoken for different territories

Population Size		Province of Quebec	RSS de la Montérégie	CSSS La Pommeraié	CSSS Haute-Yamaska
FOLS-English	number	994,720	143,645	11,120	3,715
	percentage	13.4%	10.7%	22.9%	4.3%
FOLS-French	number	6,373,223	1,190,635	37,488	82.4%
	percentage	85.7%	88.9%	77.1%	95.6%
Total Population	number	7,435,900	1,339,790	48,635	84,465
	percentage	100%	100%	100%	100%

Source: CHSSN 2009-2010 Baseline Data Report 2009-2010 (2006 Census of Canada)

AGE STRUCTURE OF THE POPULATION

In general, the population of the Eastern Townships has a high proportion of seniors and a low proportion of children compared to other regions, and this is even truer for the English-speaking population than for Francophones. In fact the number of English speakers 45 years and older increased from 2001-2006 while the number of younger people decreased.

In the La Pommeraié territory, the situation is similar. The table below shows that the proportion of English-speaking children in the La Pommeraié CSSS territory is lower than the proportion of French-speaking children; it is also a lower proportion than for Quebec as a whole and for the Montérégie region. On the other hand, the proportion of English-speaking seniors is much higher than the proportion of French-speaking seniors (21.7% as compared to 13.5%); it is also much higher in La Pommeraié than it is in the Montérégie region and in Quebec overall.

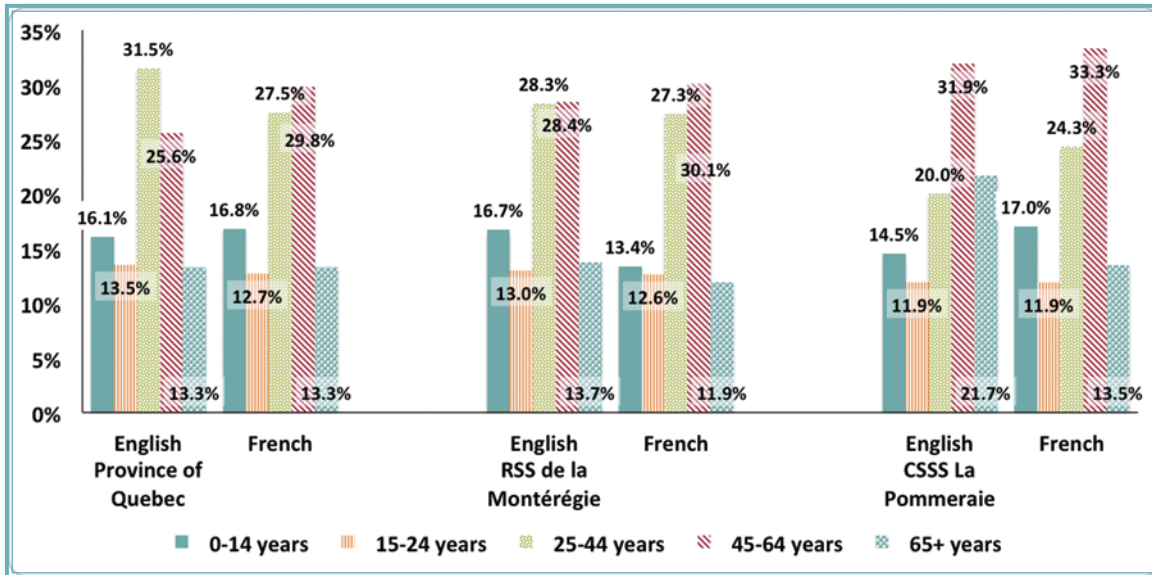
Age structure of the population by language (first official language spoken)

	Province of Quebec		RSS of the Monteregie		CSSS La Pommeraié	
	English	French	English	French	English	French
Total - Age groups (number)	994 720	6 373 223	143,645	1,190,635	11,120	37,488
0-14 years	159 660	1 068 283	23,995	215,385	1,610	6,363
15-24 years	134 400	808 725	18,635	150,510	1,325	4,465
25-44 years	313 505	1 749 930	40,620	325,225	2,220	9,120
45-64 years	254 675	1 899 995	40,755	358,350	3,550	12,465
65 years +	132 480	845 290	19,640	141,165	2,415	5,076
Total - Age groups (percentage)	100%	100%	100%	100%	100%	100%
0-14 years	16.1%	16.8%	16.7%	13.4%	14.5%	17.0%
15-24 years	13.5%	12.7%	13.0%	12.6%	11.9%	11.9%
25-44 years	31.5%	27.5%	28.3%	27.3%	20.0%	24.3%
45-64 years	25.6%	29.8%	28.4%	30.1%	31.9%	33.3%
65 years +	13.3%	13.3%	13.7%	11.9%	21.7%	13.5%

Source: CHSSN 2010. Baseline Data Report 2009-2010

The chart above shows the same information. On the territory of La Pommeraiie the 45-64 age makes up a higher proportion of the population among both French and English speakers. Seniors compose a very high proportion of the population among English speakers. In addition, the proportion of the English-speaking population that is in the 25-44 age group is significantly lower than among Francophones. It is also lower than in Quebec overall for both language groups.

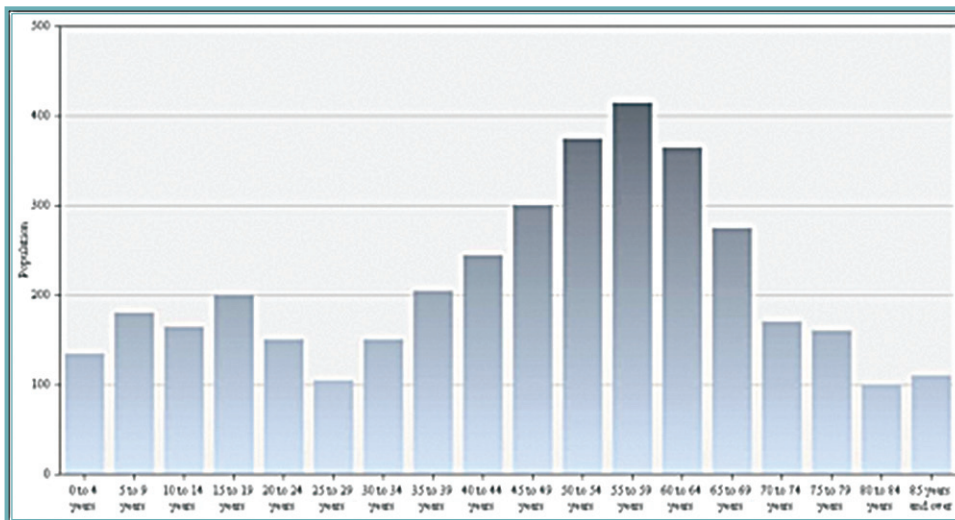
Age structure of the population, by language (first official language spoken)



Source: CHSSN 2010. Socio-Economic Profiles of Quebec's English-Speaking Communities

This trend is what is often referred to as the “missing middle generation” because the middle generation between children and seniors is under-represented in the population. The consequences include heavier care-giving burdens and declining levels of volunteer involvement. This affects the English-speaking more than the French-speaking population.

Age structure for Sutton



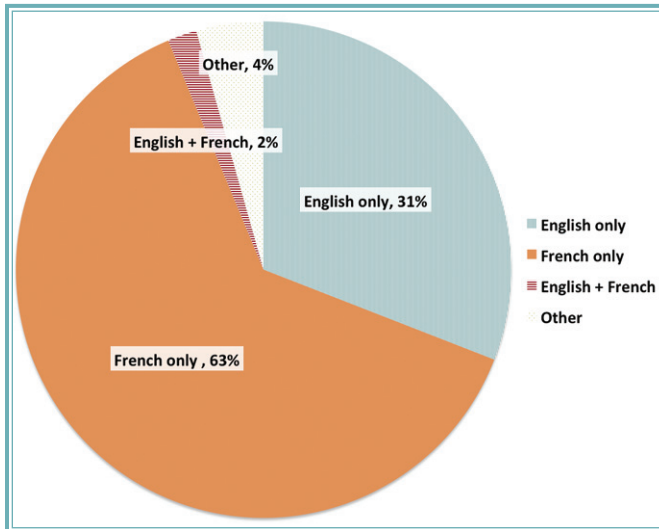
In Sutton, a fairly large percentage of the population is between 40 and 80 years of age. The median age of the population is 51, whereas it is 41 for Quebec as a whole. The regional and local trends toward ageing populations therefore holds true in Sutton as well.

Source: Statistics Canada, Community Profile for Sutton, 2006 Census data.

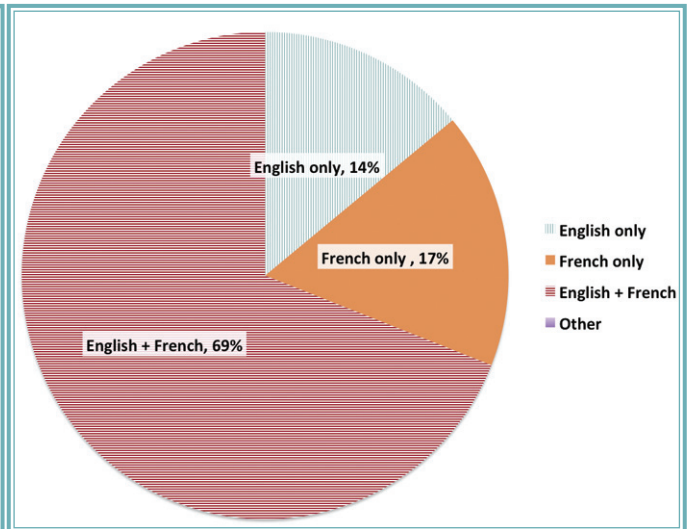
LANGUAGE DYNAMICS: A HIGH RATE OF BILINGUALISM

In Sutton the mother tongue of about two-thirds of the population is French, while it is English for about one-third of the population. However, a majority of people (69%) speak both languages. A similar proportion of Francophones and Anglophones are unilingual: 14% speak English only and 17% speak French only. This makes it a fairly unusual town in Quebec both because of the high proportion of English speakers, and because of the high level of bilingualism.

Mother tongue, Sutton



Knowledge of official languages, Sutton

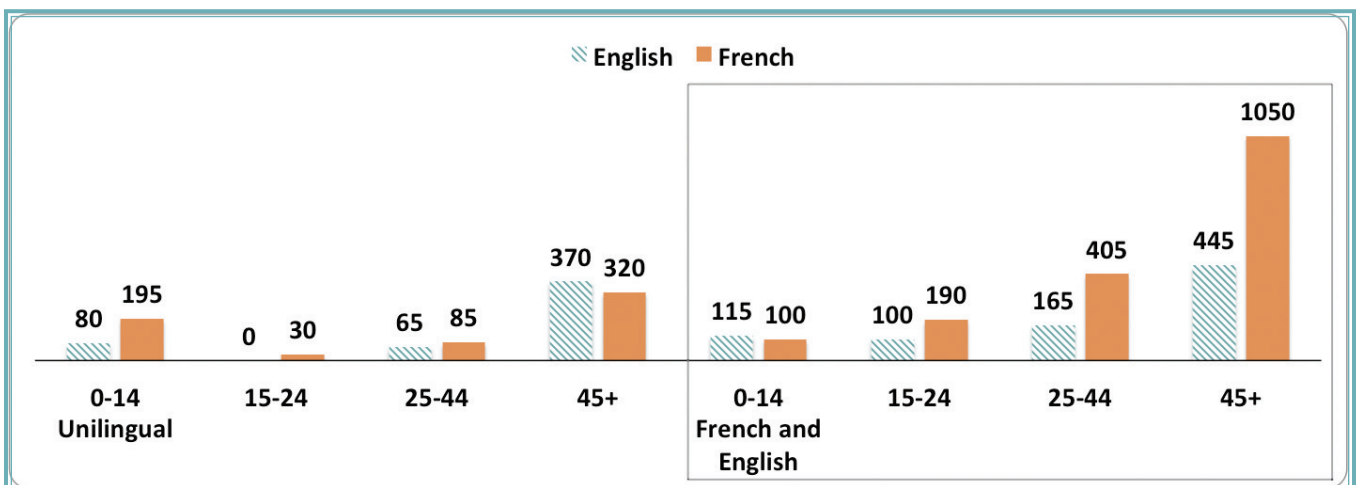


Source: Statistics Canada, 2006 Community Profiles, Sutton, Québec

According to Statistics Canada, in 2006 almost 70% of English speakers in Quebec were bilingual and approximately 90% of English-speaking youth in Quebec were able to converse in both French and English at age 21.

In Sutton, rates of bilingualism are higher among French speakers than among English speakers in the older generations; however English speakers between 0-24 are more likely than French speakers to speak both languages. The trend therefore seems to have reversed over time: in the past Francophones were more likely to speak English, whereas today English-speakers are more likely to speak French.

Bilingualism, Sutton



This can be seen as a positive development for the younger generations because of the education and employment advantages of speaking both official languages. It also facilitates relationships with people from outside one's language group and can help build social cohesion between different groups within a community. On the other hand, the sense of belonging to one's linguistic community may be diminished as people identify less with that community.



Credit: Mary Richardson

COMMUNITY PERSPECTIVES ON SUTTON

Drawing a portrait of Sutton: method and sources

From the perspective of a community development approach, it is important to engage and mobilize the population to get involved in issues that they care about. While statistics are a good starting point, and help to shed light on certain realities that affect a community, it is important to go beyond statistics and gather the perspectives of residents.

To begin this process in Sutton, the project leader (Mary Richardson) made an initial visit in May 2011 to meet with the members of the community development table in Sutton, present the project to them and gauge their interest. A second visit was made in September 2011 to meet with other community “stakeholders”. These are people or groups that have a particular interest in different aspects of community development. They included the community organizer from the CSSS, the coordinator of the Maison des jeunes, a resident responsible for developing a family and seniors policy for the municipality, and a senior who grew up in Sutton and could talk about the changes she has seen over time. In October 2011 another visit was made to plan the community consultation with the English-speaking community. Two active community members involved in different church congregations were involved in planning the event.

On November 5, 2011 a community consultation was held. The invitation was extended to all community members and was publicized widely. The gathering took place in the basement of the United Church. About 30 people attended, mainly middle-aged people and seniors.

Townshippers’ Association was the main contact organization because it sponsors one of the CHSSN’s Networking and Partnership Initiatives and is connected to a vast range of initiatives in the region. It is a not-for-profit association established in 1979. Its mission is to promote the interests of the Eastern Townships’ English-speaking community, to strengthen its cultural identity, and to encourage the full participation of the English-speaking population in the community at large. It is led by a volunteer board of directors who represent different sectors of the English-speaking community in the Eastern Townships. The head office in Lennoxville and a branch office in Knowlton are staffed by fourteen employees who work with volunteer committees to carry out various aspects of the Association’s plan of action, mission and objectives.

In drafting this portrait, we have also integrated information from past surveys and reports, existing statistics, historical information, and studies carried out by government agencies and academic researchers.

In the sections below, we will discuss community perspectives on five themes, as they were discussed at the consultation: community life, education, the economy, health and well-being, and the environment. The order roughly follows the theme’s importance in determining health; since socio-economic conditions account for about 50% of people’s health status (as explained above), we present community life, education and the economy followed by the environment and health and well-being.

In each case, we will highlight the community’s strengths and challenges, and some perspectives for the future. A summary table is presented at the end of the document. This overview can be used to inform decision-making and to stimulate community engagement. The shaded box at the beginning of each section provides an overview of the importance of this aspect for community and personal health, based on scientific evidence.

Community Life in Sutton

A cohesive community aims to remain unified

In this section we present the perspectives expressed by community members at the consultation held in July 2011 concerning social and community life in Sutton, followed by some relevant statistics and perspectives for the future.

Social Determinant of Health

Support from families, friends and communities is associated with better health. Support networks are important in helping people solve problems and deal with adversity. They contribute to an individual's sense of control over life circumstances. Support networks support a feeling of well-being and act as a buffer against health problems. In the 1996-97 National Population Health Survey (NPHS), more than four out of five Canadians reported that they had someone to confide in, someone they could count on in a crisis, someone they could count on for advice and someone who makes them feel loved and cared for. Some experts in the field have concluded that the health effect of social relationships may be as important as established risk factors such as smoking, physical activity, obesity and high blood pressure.

The importance of the social environment can also be seen in the level of social cohesion in the broader community. Social cohesion refers to the willingness of members of a community to cooperate for the well-being of all, and it is known to exert a positive influence on personal health. The strength of social networks within a community are often referred to as civic vitality, and it is reflected in the institutions, organizations and informal giving practices that people create to share resources and build attachments with others. In addition, social stability, recognition of diversity, safety, good working relationships, and cohesive communities provide a supportive society that reduces or avoids many potential risks to good health. Social or community responses can add resources to an individual's repertoire of strategies to cope with changes and foster health²⁰.

Sutton has a broad range of organizations that serve the community. These include:

- Maison des jeunes
- Centre d'action bénévole
- Seniors' residence
- Ressource famille
- Forum citoyen/Citizen's forum
- Women's Institute
- ecumenical group
- Curling club
- Churches
- Businesses: bank, drugstore, convenience store, grocery, bakery, restaurants and more.
- Services des loisirs/Recreation
- Club d'âge d'or/50+ Club
- Community kindergarten
- Daycare centre (Centre de la Petite Enfance)
- Day centre
- PRRP (crafts workshop)
- 42 first responders
- Legion
- Food Bank

Some of these specifically serve the English-speaking population.

SUTTON'S STRENGTHS

The community members who participated in the May 2011 consultation identified several strengths related to the social and community life of Sutton. When asked what they felt proud of in their community, or what they valued about it, many of the responses spontaneously focused on social and community life.

First, participants pointed to the **friendliness** of people in the community. Many mentioned the **community spirit, the warmth and sincerity of local residents** and the fact that they have good friends and family nearby. Several people also said that they **feel safe** in the community. A couple of the responses also referred to a sense of belonging to the community where people know each other and can count on a helping hand. Two comments referred to the **country life** surrounding the village.

Regarding social relations, many participants also specifically noted that **different groups co-exist well**, for example visitors and permanent residents, as well as Anglophones, Francophones and Allophones. Because the **town is largely bilingual**, people say there are no problems with communication. Some also mentioned that the **population is multicultural** with people from everywhere. Relations between the various groups are considered to be peaceful and these **different groups work together** to make the community better.



Credit: Mary Richardson

A **large number of services and activities** were also mentioned, which contribute to a positive social and community life. People feel that the **community is vibrant** with its school, shops and cultural activities. They mentioned the **library** with its English books, the active **ecumenical group** that initiates joint activities with the churches, the Sutton **volunteer bureau, activities for younger people**, as well as the **theatre and sports facilities**. The **volunteers** and the services they provide (library, first respondents, Salle Pelletier, Foyer) are also greatly appreciated. The **artists and craftspeople** also contribute to an active cultural life and an interesting atmosphere.

CHALLENGES FACING SUTTON

In spite of this very positive attitude towards the community, some challenges were identified. First, **housing** is a concern because of a **lack of intermediary-sized and moderately-priced housing**, be it apartments or smaller houses. These would be mainly for people who want to downsize as they get older, or for young families who cannot afford a larger home. Many of the homes in Sutton are expensive and participants at the community consultation felt

that affordable housing was an issue for the village.

Secondly, in terms of social relations, people felt that there was a **lack of intergenerational activities and connections**; many people tend to know and associate only with others in their age group. One issue that some believe may affect community life is that **families may leave Sutton** because of the lack of jobs in sectors other than services and tourism, because of the high cost of housing and because there is a long waiting list for daycare in Sutton.

Some also felt that although relationships are generally good, there are **some tensions between natives and new residents** in Sutton. They believe that more contacts between these groups would improve relations.

Another issue of concern is **traffic**. The arrival of visitors during vacations and on weekends has the effect of increasing traffic in the village, particularly on the 139 road and on Maple Street. Many people do not feel safe. Some suggest a direct route from the mountain to the 215 so that people who are in a rush to get to or from the condos or the ski hill do not need to access Main Street or Maple



Credit (both images): Mary Richardson

near Main Street.

Language was also mentioned, as more and more people in the village are Francophones, and even English speakers are increasingly sending their children to French school. The participants recognized the importance of learning and practicing French, but also wanted to **feel comfortable expressing themselves in their mother tongue**, for example, when speaking at town council meetings where French predominates.

SOME STATISTICS ON SOCIAL AND COMMUNITY LIFE

In order to get a sense of the level of social support that people have, we can look at the number of people in lone-parent families or living alone, as these people are less likely to have help with day-to-day tasks or on-going emotional support. Living with relatives may, on the other hand, provide greater social support.

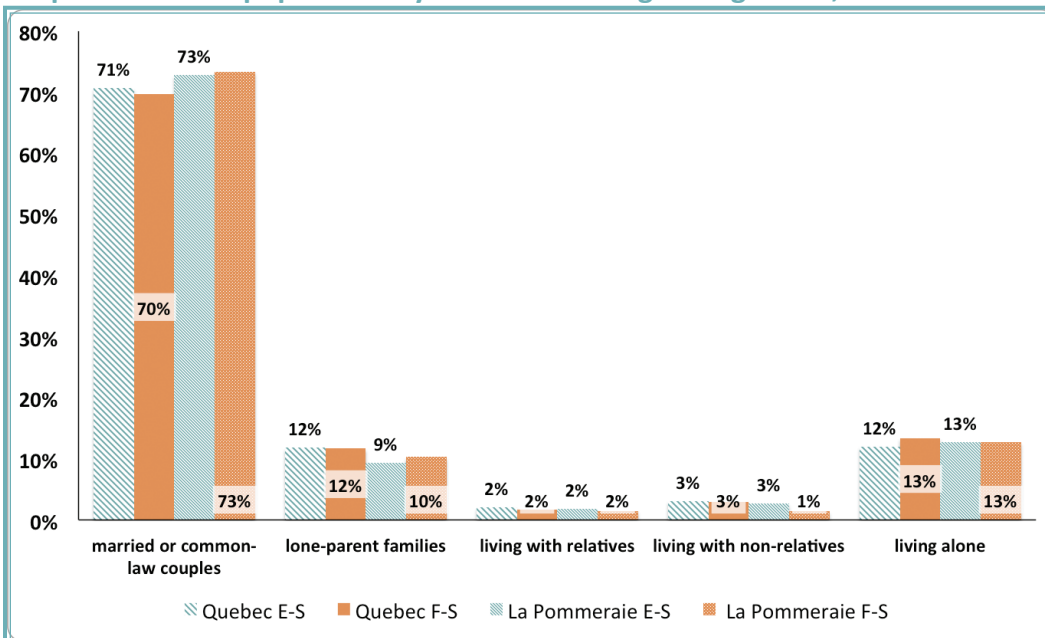
In Quebec as a whole, about 70% of people live in married or common-law couple families, nearly 12% live in lone-parent families, and about 13% live alone. Provincially English speakers are more likely to be living with relatives and less likely to be living alone. On the La Pommerai  territory, English speakers remain more likely than Francophones to be living with relatives, much more likely to be living with non-relatives only, and equally likely to be living alone.

Population by Household Living Arrangement and first official language spoken

	Province of Quebec		RSS de la Montérégie		CSSS La Pommeraiie	
	English	French	English	French	English	French
Total - Persons in private households	99,7%	99,4%	99,7%	99,6%	99,3%	99,3%
Total - Persons in Census family households	82,5%	81,4%	87,0%	85,1%	82,1%	83,7%
Persons in married or common-law couples families	70,7%	69,7%	75,9%	73,8%	72,8%	73,4%
Persons in lone-parent families	11,8%	11,7%	11,1%	11,3%	9,4%	10,3%
Total - Persons in non-Census family households	17,2%	18,0%	12,7%	14,5%	17,2%	15,5%
Living with relatives	2,1%	1,7%	1,9%	1,4%	1,8%	1,5%
Living with non-relatives only	3,1%	3,0%	1,8%	2,2%	2,7%	1,4%
Living alone	12,0%	13,4%	9,0%	10,9%	12,7%	12,7%

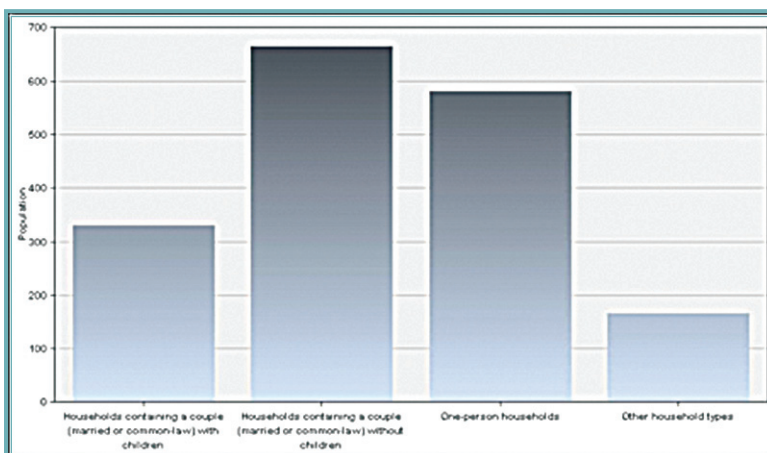
Source: CHSSN 2010. Socio-Economic Profiles of Quebec's English-Speaking Communities

Proportion of the population by household living arrangement, and first official language spoken



The situation in the La Pommeraiie area is similar to that for English speakers in Quebec as a whole, with a slightly lower proportion of English speakers in lone-parent families and a slightly higher percentage living alone.

Source: CHSSN 2010. Socio-Economic Profiles of Quebec's English-Speaking Communities.



In Sutton, while we do not have the data by language group, we can see that a very large proportion of households contains one person or a couple without children.

Source: Statistics Canada, Community profile for Sutton, 2006 Census data.

PERSPECTIVES FOR THE FUTURE

The community consultations ended with a discussion of what participants would like to see for the future of their community. Concerning the issue of traffic, an **alternate route to the mountain** (via route 215) was suggested in order to avoid traffic in town. This theme will also be covered in the section on the environment below.

Concerning social relations particularly between different language groups, an **informal social event** such as a bilingual breakfast could be initiated. Participants wanted to have **more places and moments to meet** together, for example a Legion brunch, or line dancing.



To tackle the issue of affordable housing, people suggested **creating more transitory apartments** between a full size house and a one-room apartment. The former Filtex factory was seen as a good place to create affordable housing along with other uses.

Another suggestion was that **seniors could put up a photo exhibition**, as an extension of a project that was done previously in the area for artists and youth.

Finally one person suggested that the **town council have this type of conversation**.



Credit (both images): Mary Richardson

SUMMARY Community Life

Sutton is seen by residents to be a safe and vibrant community with many different community groups and activities. The population is made up of French and English speakers as well as people from other backgrounds, and they are all said to live well together. Still, some tensions between newer and more long-time residents are perceived as the community has grown quickly with many newcomers settling in the area. The main challenges facing Sutton are related to these economic and demographic changes: there is a need for moderate and low-priced housing, and traffic on Main Street is a cause for concern, particularly as it affects pedestrian safety. Participants at the consultation suggested an alternate route to the mountain to decrease traffic in the village centre, as well as more opportunities to meet with other community members.

Educational attainment:

Good educational opportunities but young English speakers lag behind

In this section we present the perspectives expressed by community members at the consultation held in November 2011 concerning education in Sutton, followed by some relevant statistics and perspectives for the future.

Social Determinant of Health

Health status improves with level of education. Education is closely tied to income and social status and provides knowledge and skills for problem solving. It helps provide a sense of control and mastery over life circumstances. It increases opportunities for job and income security, and job satisfaction. Education improves people's ability to access and understand information to help keep them healthy.

People with higher levels of education have better access to healthy physical environments and are better able to prepare their children for school than people with low levels of education. They also tend to smoke less, to be more physically active and to have access to healthier foods. In the 1996-97 National Population Health Survey (NPHS), only 19% of respondents with less than a high school education rated their health as "excellent" compared with 30% of university graduates. Canadians with low literacy skills are more likely to be unemployed and poor, to suffer poorer health and to die earlier than Canadians with high levels of literacy. In general, people with a higher level of education have more social relations, adopt a healthier lifestyle and have the feeling of being able to influence and control their lives²¹.

SUTTON'S STRENGTHS

One of the strengths identified by participants at the consultations is the **elementary school where both English and French schools are under the same roof**. The children share recess time, lunch, school daycare facilities and more. The governing board is the same even though there are two different school boards. Although there can be some challenges, this is viewed very positively. People also felt that the **preschool is very good**. Another strength is the fact that Sutton is **located near two universities**, one French and one English (Sherbrooke and Bishops).

CHALLENGES FACING SUTTON

Although the elementary school with both French and English is appreciated, some point out that it is **not actually bilingual**, but the two sides simply share a playground where children can mix. Some participants noted that **French is limited in the English-speaking community**. For some, **basic fluency is a major problem**. Students can reach secondary 5 (the end of high school) and not speak French to appropriate standards, limiting their prospects for post-secondary education and good employment opportunities. In addition, although an **internet connection is key**, whether for employment or education, **not everyone has access**.

For children under 5, **subsidized daycare is not accessible**; there is a 3-year waiting list for a Centre de la petite enfance (CPE). On the other hand, **private daycare cost \$35.00 a day**. In addition, the CPE is completely French.

As in many areas, **boys are most likely to drop out of school**, and the rates are said to be high. Participants believe that the **attraction of growing marijuana dissuades some from completing high school**. The large amounts of money generated by the marijuana trade make it easy to start up a company, which may have a detrimental effect on other businesses. Some people feel this is a disruptive force for the community.

SOME STATISTICS ON EDUCATION

In the province as a whole, educational levels have risen in recent generations; younger generations are more likely than older Quebecers to have completed high school or to have pursued post-secondary education. Overall, English Quebecers are more likely to have a university degree than are French-speakers (24.6% compared to 15.3%).

In the Montérégie region overall, both French and English speakers have slightly lower rates of university education, and the rates for La Pommeraiie are lower still (14.1% for English speakers and 10.2% for French speakers). The rates are higher for those aged 45-64 for both language groups, indicating higher levels of post-secondary education among the older generation than among those 25-44 years old. The rates of college-level education are lower among English speakers in La Pommeraiie than among Francophones, for all age groups. Concordantly, a higher proportion of English speakers has attained at most a high school certificate.

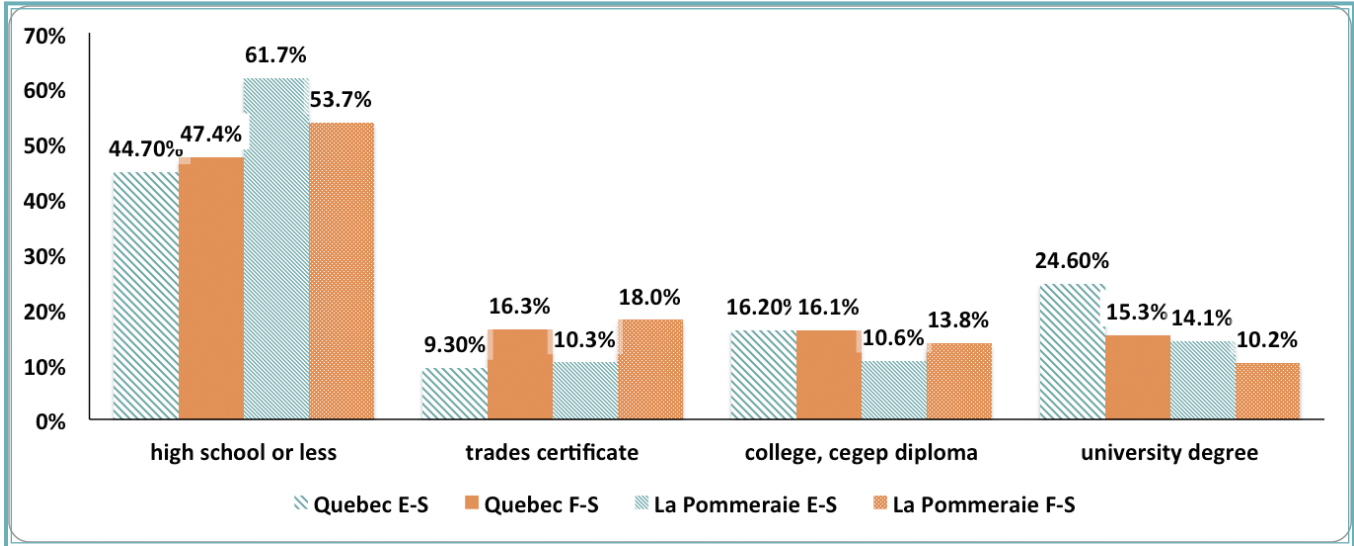
Highest educational attainment by age group

		Province of Quebec		RSS de la Montérégie		CSSS La Pommeraiie	
		English	French	English	French	English	French
High school certificate or less	Total	44,7%	47,4%	46,7%	48,2%	61,7%	53,7%
	25-44 years	30,2%	29,9%	32,2%	31,5%	53,8%	39,7%
	45-64 years	43,3%	46,1%	45,4%	47,0%	58,9%	50,9%
Apprenticeship or trades certificate or diploma	Total	9,3%	16,3%	11,1%	16,3%	10,3%	18,1%
	25-44 years	10,1%	21,2%	12,6%	21,1%	14,4%	24,9%
	45-64 years	10,8%	17,6%	11,9%	17,0%	10,4%	18,7%
College, CEGEP or other non-university certificate or diploma	Total	16,2%	16,1%	17,4%	16,4%	10,6%	13,8%
	25-44 years	19,3%	20,7%	21,3%	21,2%	13,3%	18,9%
	45-64 years	14,3%	14,9%	15,9%	14,9%	9,4%	12,0%
University certificate or diploma below the bachelor level	Total	5,2%	4,8%	4,9%	5,0%	3,3%	4,4%
	25-44 years	5,8%	4,8%	5,0%	4,7%	3,4%	3,6%
	45-64 years	5,8%	6,0%	5,7%	6,3%	3,8%	6,1%
University certificate, diploma or degree	Total	24,6%	15,3%	19,9%	14,2%	14,1%	10,2%
	25-44 years	34,7%	23,5%	28,9%	21,4%	15,1%	13,0%
	45-64 years	25,8%	15,5%	21,1%	14,9%	17,0%	12,2%

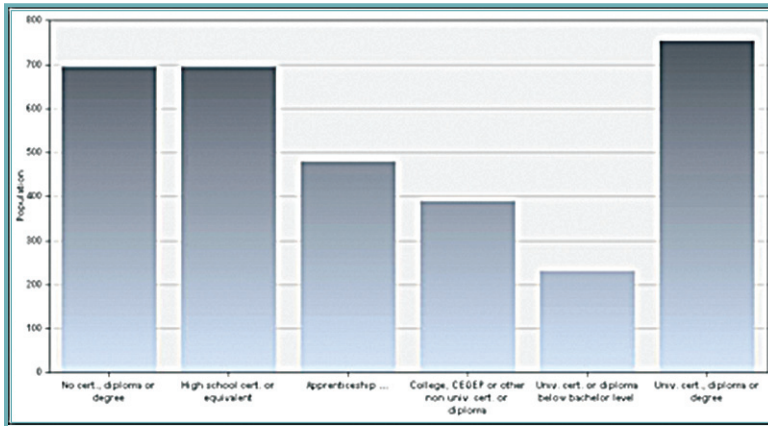
Source: CHSSN 2010. Socio-Economic Profiles of Quebec's English-Speaking Communities

The chart below illustrates the situation for Quebec as a whole and for the La Pommerai  territory for both French and English speakers. English speakers in La Pommerai  are more likely than Francophones both to have a university degree and to have a high school certificate or less; and they are less likely to have a trades certificate or a college-level diploma. This suggests a certain polarization at both ends of the educational spectrum.

Educational attainment in La Pommerai  CSSS territory, by first official language spoken



Source: CHSSN 2010. Socio-Economic Profiles of Quebec's English-Speaking Communities



In Sutton, there also seems to be a polarization between the relatively high number with university degrees and the high numbers who have no certificate at all or a high school certificate at most.

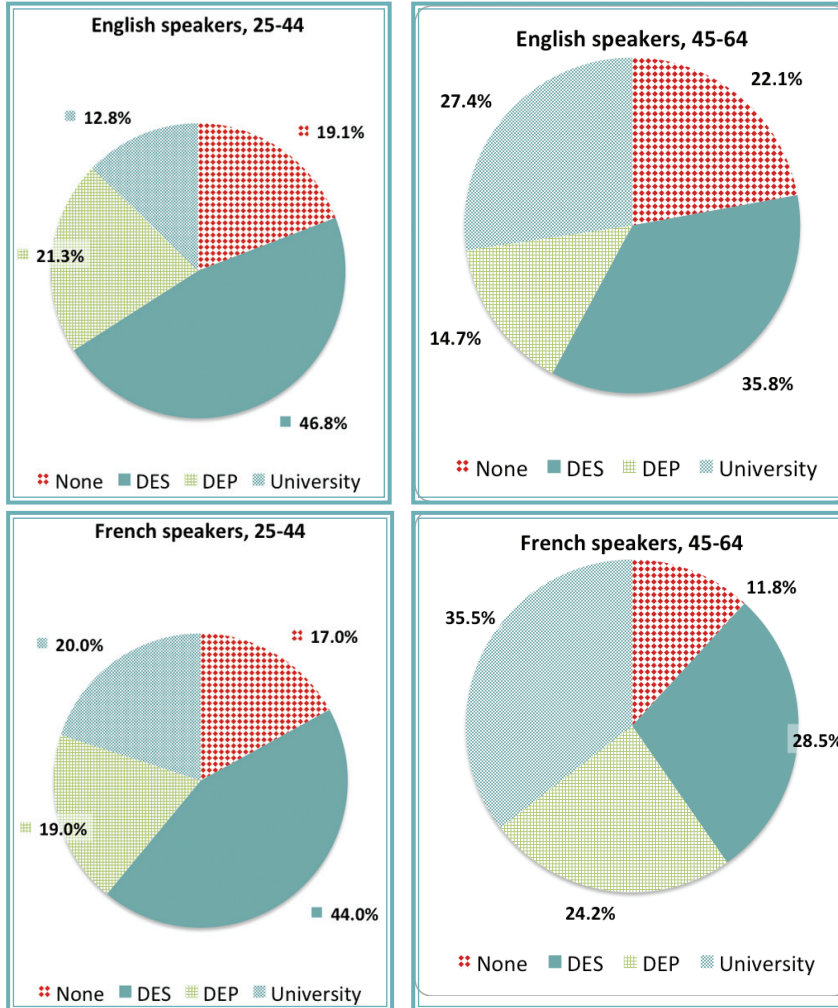
Source: Statistics Canada, Community profile for Sutton, 2006 Census data.



Credit: Mary Richardson

When we look at the situation for different language and age groups, the group most likely to have a university degree are French speakers between 45 and 64 years of age (35%). English speakers in the same age group are next most likely (at 27%), while English speakers aged 25-44 are the least likely to have a university degree (at 13%). They are also the most likely to have no certificate or a high school certificate at most (fully two-thirds).

Educational attainment for Sutton, by language group



These figures indicate a certain socio-economic disadvantage for English speakers and for the younger generation in both language groups, as well as a social inequality between French and English speakers. In addition, literacy levels may be low among those who did not complete high school, which is related to difficulties finding and understanding written information, accessing services, and interacting with health or education professionals²².

Source: Statistics Canada, 2006 Census of Canada, data extracted by Institut national de santé publique

PERSPECTIVES FOR THE FUTURE

There were no specific suggestions for moving forward in the area of education.

SUMMARY Education

The school in Sutton is considered very good and quite unique, placing children in interaction with kids from the other language group. However, day care services, particularly in English, are limited. As elsewhere, drop-out rates among boys especially are considered high. The younger generation of English speakers has lower levels of educational attainment compared to those in the older generations and to French speakers.

Economic conditions:

A service economy with significant income disparities

In this section we present the perspectives expressed by community members at the consultation held in November 2011 concerning economic conditions in Sutton, followed by some relevant statistics and perspectives for the future.

Social Determinant of Health

There is strong evidence that higher social and economic status is associated with better health. These two factors are considered to be the most important determinants of health. Health status improves at each step up the income and social ladder. Higher incomes promote optimal living conditions, which include safe housing and good food. The degree of control people have over life circumstances and the ability to adapt to stressful situations are key influences. Higher income and social status generally result in more control and more resources to adapt.

Studies are showing that limited options due to limited means and poor coping skills for dealing with stress increase a person's vulnerability to a range of diseases. For example, only 47% of Canadians in the lowest income bracket rate their health as very good or excellent, compared to 73% of Canadians in the highest income group. Low-income Canadians are more likely to die earlier and to suffer more illnesses than Canadians with higher incomes.

And perhaps most interesting of all, studies show that large differences in income distribution (the gap between rich and the poor) are a more important health determinant than the total income that a population generates. Income gaps within and between groups increase social problems and poor health. In other words, the more equitable a society, the better people's health is likely to be.

Of course, incomes are closely related to economic conditions and employment opportunities. Unemployment, underemployment, stressful or unsafe work are associated with poorer health. People who have more control over their work circumstances and fewer stress related demands of the job are healthier and often live longer than those in more stressful or riskier work and activities.

In addition, employment has a significant effect on a person's physical, mental and social health. Paid work provides not only money, but also a sense of identity and purpose, social contacts and opportunities for personal growth. When a person loses these benefits, the results can be devastating to both the health of the individual and his or her family. Unemployed people have a reduced life expectancy and suffer significantly more health problems than people who have a job. A major review done for the World Health Organization found that high levels of unemployment and economic instability in a society cause significant mental health problems and adverse effects on the physical health of unemployed individuals, their families and their communities. Lack of employment is associated with physical and mental health problems that include depression, anxiety and increased suicide rates²³.

SUTTON'S STRENGTHS

The economy of Sutton is largely reliant on **tourism and services for vacationers**. This is both a strength and a challenge. Sutton has a **broad range of retail outlets** and good amenities. It is considered **big enough to offer services and small enough to still feel “homey”**. There are **many farms and good food**, as well as some fine restaurants. Businesses are seen to be doing well, for example in farming and speciality products. Participants also pointed out that if it were not for the **mountain**, the economy would be much less dynamic and development would be limited.

CHALLENGES FACING SUTTON

One of the challenges related to the type of economy in Sutton is that tourism and services for vacationers offer **mainly seasonal jobs**, for example at the ski hill, in landscaping, lawn mowing and more. During the off-season, many jobs are **part-time** or cease altogether. In addition, many jobs are said to be **low paying**. Participants also mentioned that young families tend to be **self employed or employed outside of Sutton**.

Again, participants in this focus group too mentioned the problem of **affordable housing**. They observed that **people leave the community**, often to Cowansville or further, because they can't find anything affordable. Even finding a place to rent seems to be difficult. The **youth in particular tend to leave** and some say “they probably won't come back until retirement”. The increase in population is therefore linked to the **arrival of retirees**, not young people. In addition, **part-time residents** are said to be investing in the area. The large number of condos being built is to meet the needs of these two groups.



Credit: Mary Richardson

Sutton gives an appearance of affluence and economic success, however participants point out that **there is poverty**; “*we just don't see it*”. Moreover, a majority of those going to the food bank are observed to be English-speaking.

An entrepreneur at the consultation has found it **difficult to hire young people**, since they tend to quit and seem unmotivated. Some observe that a **large proportion of English-speaking youth are vulnerable and have very limited employment opportunities**. This refers back to the situation with educational attainment, where drop-out rates are said to be high mainly among boys, as is the case in general in the province.

As mentioned above, some believe that the attraction of growing marijuana can encourage boys, in particular, to leave school. In addition, the **marijuana industry is viewed as a disruptive force in the community** because of the disproportionate amount of cash it brings in, the problems of security and more. Yet, people recognize that the amount of disposable income can have a positive effect on the economy. Still, it can lead to an inflation in housing prices, speculation and businesses founded on illegally-earned income.

SOME STATISTICS ON ECONOMY, EMPLOYMENT AND INCOMES

An interesting indicator of the economic and demographic vitality of a community is provided by the development index calculated by the Ministère des Affaires municipales, des Régions et de l'Occupation du territoire (MAMROT). This index is based on data on population variation, employment and unemployment rates, rates of educational achievement, government transfers, low-income earners and average household incomes. A figure below zero means that the municipality is considered devitalized and the lower the number, the more so. A figure above zero indicates economic and demographic vitality.

In Brome-Missisquoi, of the municipalities with over 2,000 residents only Bedford scored below zero, and the next lowest score was for Cowansville, at 1.64. Most of the others were above 4, which are quite high scores, indicating positive development. Sutton scored 5.27 and Abercorn 5.3²⁴.

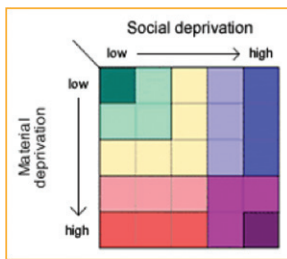
Development Index for selected municipalities

Community	Population in 2006	Population variation 2001-2006 (%)	Employment rate 15 years and older	Unemployment rate 15 years and older	% of the population 15 years and older without diploma	Government transfers (%)	Low income before tax (%)	Average household income	Development index 2006
Bedford	2,612	-2.06	56.76	3.69	37.05	15.9	16.9	47,250	-0.58
Dunham	3,396	5.63	67.51	5.08	22.74	13.2	7.6	60,292	5.31
Sutton	3,805	7.97	58.09	5.51	21.30	11.0	8.7	64,920	5.27
Lac-Brome	5,629	3.4	56.48	5.55	19.38	10.4	10.4	74,194	5.55
Cowansville	12,182	1.25	59.37	4.7	29.62	15.3	12.1	49,959	1.64
Brigham	2,408	7.02	68.46	5.34	30.77	11.3	7.9	59,787	4.91

Source: Ministry of Municipal Affairs and Regions (MAMROT)
<http://www.mamrot.gouv.qc.ca/developpement-regional-et-rural/indice-de-developpement/>

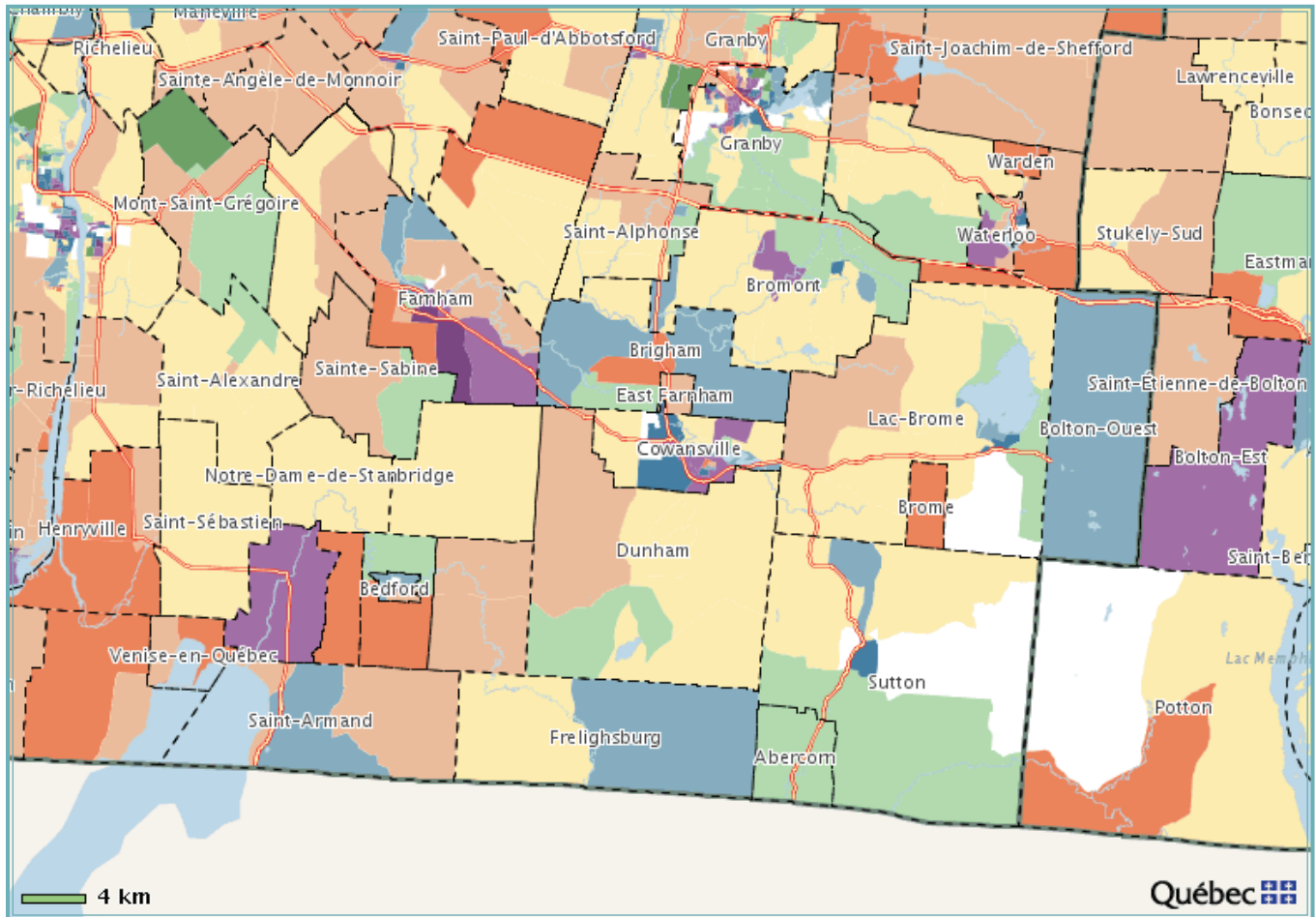
A slightly different picture is given by the deprivation index calculated by the Ministère de la santé et des services sociaux, which makes it possible to map out variations in the level of social and material deprivation. The purpose is to describe the geographic distribution of social and health inequalities. Different levels are calculated taking into account disparities in material and social conditions: material deprivation reflects a lack of everyday conveniences while social deprivation refers to a poor social network both at the family and community levels²⁵. Territories are ranked as privileged, intermediate, deprived, and very deprived.

For the area of Sutton, Abercorn is considered privileged, the area north of Sutton is intermediate and the village of Sutton is socially (but not necessarily materially) deprived.



Territories are ranked as privileged, intermediate, deprived, and very deprived. The cube to the left shows to what extent some areas are socially deprived, materially deprived or both. Areas of the map in orange indicate strong material deprivation. Areas in blue suggest strong social deprivation. Areas in purple and violet indicate strong material and social deprivation. According to this tool, it is people in these areas that are most vulnerable to health problems. Those areas in dark and light green would be considered the least vulnerable neighbourhoods.

National variations in the deprivation index for 2006, La Pommeraiie territory



Source: Ministère de la Santé et des Services sociaux du Québec, Atlas de la Santé et des Services sociaux du Québec: <http://www.msss.gouv.qc.ca/statistiques/atlas>

This can be seen as complementary to the work done on the Index on community development, an index developed to support community development workers in developing community profiles based on detailed knowledge of locally-defined “communities.” The index can be used to identify the potential of different communities and to mobilize them to address issues they face. The index is based on different social and health determinants, with associated statistics in the areas of income, employment, educational attainment, housing, food security, transportation, social support, mobility, participation, mortality, youth protection and disabilities. As we will see, it makes it possible to get a more detailed picture of smaller geographic areas than the deprivation index, adding nuance.

For the community of Sutton, four different sectors were identified: the countryside, the mountain, the village of Sutton and Abercorn. Results show that many indicators for the village of Sutton and for Abercorn are significantly less advantageous than they are for the surrounding countryside or the mountain. For example, in Abercorn the socio-economic status of residents is lower on the whole than for the other sectors: incomes are lower, the proportion of

the population living under the low-income cut-off is higher, the unemployment rate is higher, and the proportion of housing in need of major repairs is much higher. In addition, there is a higher proportion of seniors living alone and unpaid caregivers. In the village of Sutton, it is the social factors that are of greater concern: there are a higher number of families with children, and a higher proportion of single-parent families, of divorced, separated or widowed persons, and of elderly persons living alone. There is also a higher proportion of unpaid caregivers and disabled persons. The village of Sutton is also the sector with the highest percentage of English speakers (41.3%).

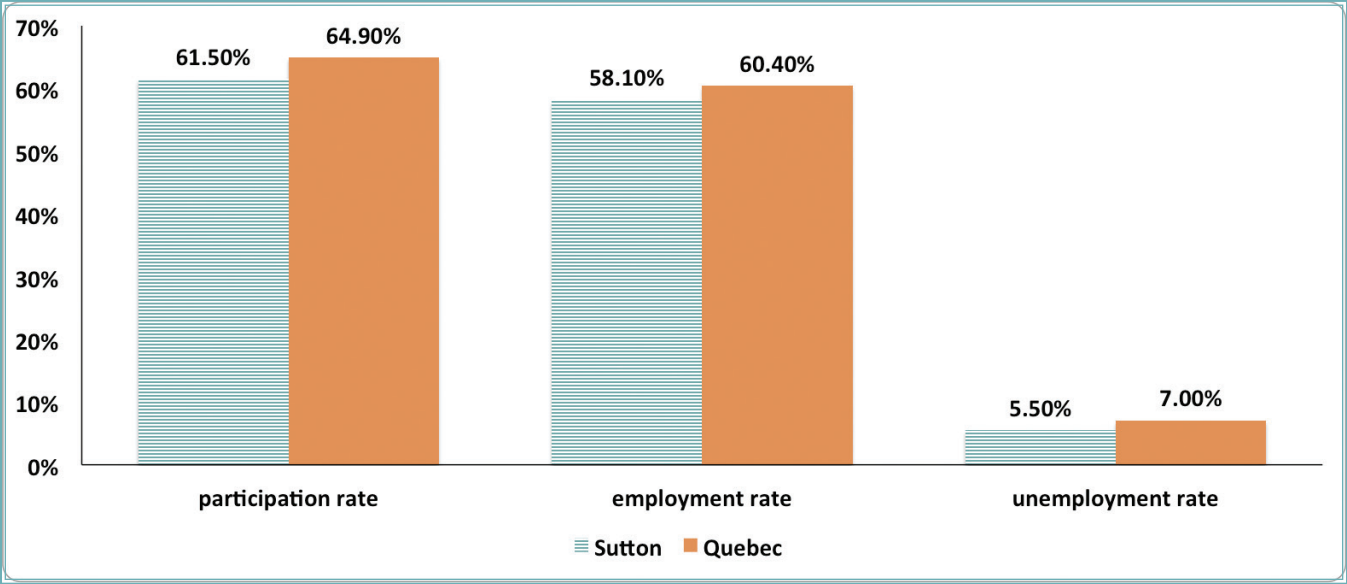
In Quebec as a whole, English speakers are more likely than French speakers to have incomes under \$10,000 but also to have incomes over \$50,000. In the Montréal region, however, English speakers are more likely to have incomes below \$10,000 but not over \$50,000. In La Pommeraiie, English speakers are more likely than French speakers to have incomes below \$10,000 and between \$10,000 and \$29,999. They are less likely to be in higher income brackets, but this is true for both French and English speakers in La Pommeraiie as compared to the region as a whole.

Income, population age 15+

	Province of Quebec		RSS de la Montérégie		CSSS La Pommeraiie	
	English	French	English	French	English	French
Under \$10,000	27.6%	23.4%	26.5%	21.8%	26.9%	22.9%
\$10,000-\$29,999	35.8%	36.9%	33.9%	34.6%	42.9%	39.2%
\$30,000-\$49,999	19.4%	23.1%	21.2%	24.5%	18.9%	24.2%
\$50,000 and over	17.2%	16.6%	18.4%	19.1%	11.4%	13.7%

Source: CHSSN 2010. Socio-Economic Profiles of Quebec’s English-Speaking Communities

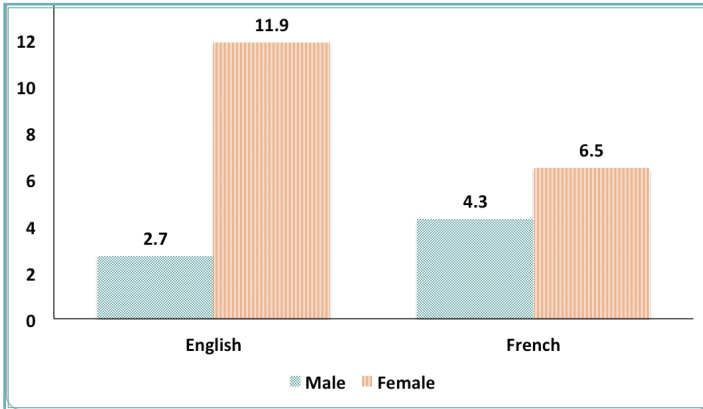
Labour force activity for Sutton and Quebec



Source: Statistics Canada, 2006 Census of Canada, data extracted by Institut national de santé publique

In the province of Quebec, about 65% of the population is in the labour force and of that number, about 93% is employed. The unemployment rate among French speakers is 6.6% and among English speakers it is 8.8%. In general, compared to the province as a whole, Sutton has slightly lower rates of labour force participation and employment, as well as a lower unemployment rate. This apparent contradiction likely reflects the high proportion of retirees who are not in the labour force, not employed, but also not unemployed. It could also reflect a larger portion of individuals on social assistance.

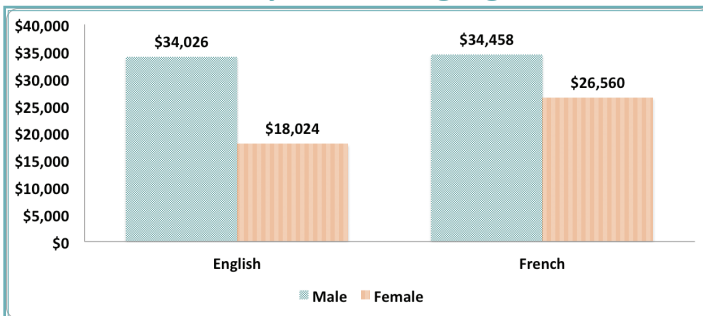
Unemployment rate in Sutton by sex and language



Unemployment rates in Sutton are lower for English-speaking than for French-speaking men (2.7% versus 4.3%), but they are much higher for English-speaking women than for French-speaking women (11.9% versus 6.5%). The graph shows that the disparity between men and women is much greater among English speakers than among French speakers.

Source: Statistics Canada, 2006 Census of Canada, data extracted by Institut national de santé publique

Income in Sutton, by sex and language

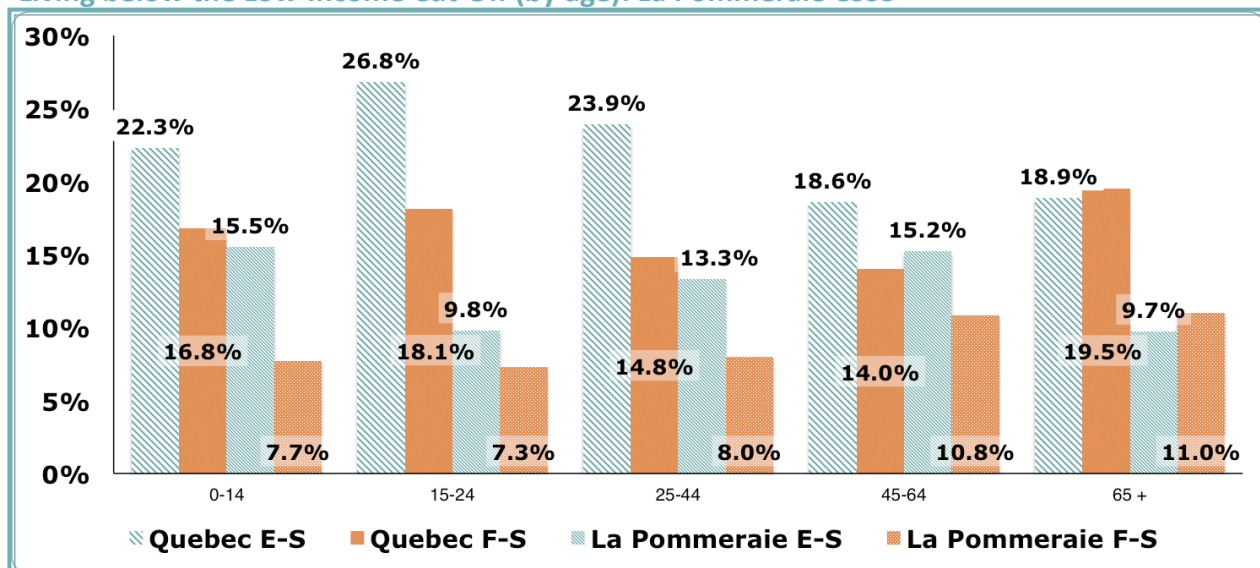


Likewise, the disparity between men's and women's income levels is greater among English speakers than it is for Francophones in Sutton. While English- and French-speaking men have similar income levels, English-speaking women have significantly lower incomes than French-speaking women.

Source: Statistics Canada, 2006 Census of Canada, data extracted by Institut national de santé publique

The proportion of the population living below the low-income cut-off (LICO) is another way to get a picture of the rates of poverty in a population. In Quebec as a whole and in the La Pommeraiie territory a higher proportion of English speakers than French speakers lives below the low-income cut-off for all age groups except those 65 or over. In La Pommeraiie, a lower proportion of the population generally lives below the LICO than in Quebec overall. Thus, poverty is less prevalent in La Pommeraiie and rates are generally lower for the older generation.

Living below the Low-Income Cut-Off (by age): La Pommeraiie CSSS



Source: Statistics Canada, 2006 Census of Canada, data extracted by Institut national de santé publique

PERSPECTIVES FOR THE FUTURE

At the consultation, participants imagined what they would like to see develop in Sutton in the area of the economy, incomes and employment. One of the main topics concerned housing. People would like to see an empty building be transformed into a mixed-use building for people living alone that would be affordable and eco-friendly. The Filtex factory was discussed specifically, with a vision of a **multi-use centre, including affordable housing, studios, a market, a community center and a park. Affordable housing** whether in such a building or elsewhere is needed particularly for small families with one or two children.

In the area of business and employment, participants imagined **another grocery store and more variety of stores on Main Street**. They also wanted to see **new employers who give decent salaries and interesting jobs**. Some suggested that they do not need any more service industry jobs.

SUMMARY Economy

The strength of Sutton's economy is largely due to the services offered to tourists, vacationers and part-time residents. However, this sector is also the source of some of the community's challenges, such as low-paying, part-time and seasonal jobs, the lack of affordable housing and hidden poverty. The participants' perspectives for the future therefore include more affordable housing, more stores that provide basic everyday necessities and employment opportunities with better salaries and conditions.

The natural and built environment

A beautiful village and surrounding environment

In this section we present the perspectives expressed by community members at the consultation held in November 2011 concerning the natural and built environment in Sutton, followed by some relevant statistics and perspectives for the future.

Social Determinant of Health

The natural and built environment is one of the determinants of health as it plays an important role in people's quality of life as well as their physical and psychological well-being. At certain levels of exposure, contaminants in our air, water, food and soil can cause a variety of adverse health effects, including cancer, birth defects, respiratory illness and gastrointestinal ailments. In the built environment, factors related to housing, indoor air quality, and the design of communities and transportation systems can significantly influence our health, both as individuals and as communities.

Where people live affects their health and chances of leading flourishing lives. Communities and neighbourhoods that ensure access to basic goods, that are socially cohesive, that are designed to promote good physical and psychological wellbeing, and that are protective of the natural environment are essential for health equity.

For example, it has been shown that various elements of the built environment and services environment affect people's behaviours, such as the amount of physical activity they do or their diet, which in turn can have an effect. When compared with all English speakers in Quebec, we find that the English-speaking population in Laval has proportionally fewer persons in the older age cohorts and has a much higher proportion of children under the age of 15³³. In addition, Laval has a slightly higher birth rate than the rest of the province³⁴. Also, compared to French speakers, there are more English-speaking Lavalers in the younger half of the working population (25-44)³⁵. on physical characteristics such as body weight. Since obesity has become one of the most troubling public health problems in recent years—described as an epidemic by the World Health Organization—researchers and health organizations are seeking to better understand how to promote healthy lifestyles and prevent weight-related problems. There are many ways to change the environment to encourage people to use active transport, to eat healthier foods and to interact with their neighbours. For example, neighbourhoods can be designed with a blend of commercial and residential uses, with walking and biking paths, and with easy access to public transit and recreational infrastructures. This makes it easier for residents to do a number of activities in a walkable radius and have more frequent contact with neighbours²⁶.

SUTTON'S STRENGTHS

At the discussions held in November 2011, participants enthusiastically pointed out many assets in Sutton, some of which related to the environment. Many people mentioned that the **town is beautiful**, and some pointed to the **aesthetic improvements** of recent years in the downtown, such as flower displays, buried wires, and renovated or new buildings. They appreciate **Main Street as the centre of the village**.

The environmental assets also include **clean air, clean water, and abundant and relatively unspoiled natural spaces**. The fact that the Nature Conservancy of Canada owns large tracts of the Sutton mountains ensures **protected areas**. Some people also mentioned the many and diverse **environmental groups** and the **environmental consciousness** of residents.



Credit: Mary Richardson

Sutton's location makes it **easy to access larger urban centres**, and **bus services** facilitate transportation. Finally, participants pointed out that there are many **farms** in the region and lots of **good food** available.

CHALLENGES FACING SUTTON

The challenges discussed by participants at the consultation generally touch on maintaining and improving quality of life in Sutton. As mentioned above, the issue of encouraging **“walkability”** in and around the village is a challenge, given the amount of traffic for such a small area. People feel that there are not enough sidewalks, and that **sidewalks need to be elevated** to make them safe. This would encourage people to get out and walk more.

Another challenge identified was how to **balance development with concerns about conservation, environmental protection and quality of life**. While some groups are pro-business and want to see more development in Sutton, others want Sutton to stay the way it is. There is concern that the trend of large and expensive houses will blow over, and that people actually need smaller, lower-cost housing. Although the development of the mountain is often targeted as questionable, some participants point out that the mountain is very important to Sutton's economic vitality. One person mentioned that **Sutton River is not too clean** because of silt from the mountain.

A final challenge mentioned by participants is the **noise made by the train** as it goes through the village. The track is right next to the seniors' residence, where 70 seniors live. Although by law trains are required to honk, people wonder if the number of times they honk could be reduced.

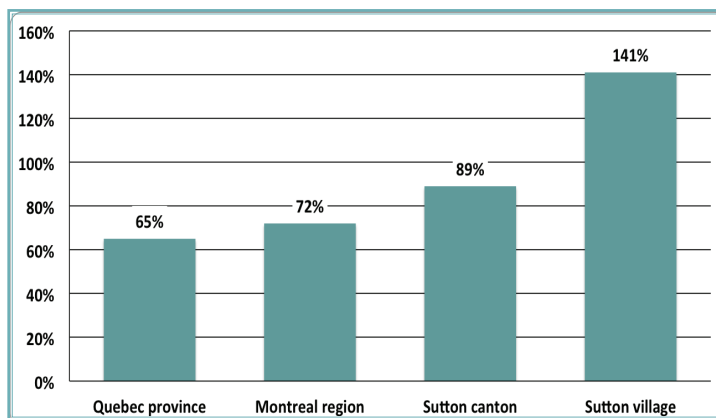
SOME STATISTICS ON THE ENVIRONMENT

In the Montérégie region as a whole, large areas of forest and wetlands have been lost to farmland, urban areas and residential development, to the point that only a fraction of what existed before European settlement still exists today. This has impacts not only on the ecosystem, but also on the economy and social life, since deforestation and the destruction of wetlands tends to decrease the amount and quality of fresh water, as well as topsoil. Between 2004 and 2009 almost 5000 hectares of forests were cut²⁷. Although this is more characteristic of the areas of Montérégie where intensive agricultural activities and urban centres are prevalent than it is of Sutton, it remains part of the regional context.

The current trend by which the countryside becomes developed as more people want to live closer to nature can have a detrimental impact on the environment, particularly when residential development is dispersed, and displaces natural areas, farming or forestry. Watersheds can be degraded, biodiversity can be reduced, and property values often soar. What is more, land use conflicts sometimes arise because of differing visions of how the countryside should be used²⁸.

In Sutton, the beauty of the landscapes, recreational services and the proximity to Montreal all make it attractive for city dwellers in search of a quieter, more natural environment. The municipality sees approximately 50 new houses built each year, most of them on the mountain and in the former township outside the village. These zones are also the most ecologically sensitive. Indeed the Sutton mountain chain is part of the Appalachian corridor strategy, which aims to create a protected ecosystem, migration corridors and buffer zones for species typical of the region. Sixty square kilometres of mountain habitat has been preserved in the municipalities of Sutton and Potton.

Percentage increase in average property values, 2001-2006(by age): La Pommeraiie CSSS



Source: Groupe de réflexion et d'action sur le paysage et le patrimoine (GRAPP), 2010.
Habiter la campagne...sans la détruire

One of the unanticipated effects of this, combined with a more general trend, has been property speculation in the region. Statistics Canada data shows that in Quebec in general property values skyrocketed between 2001 and 2006, but in Sutton even more so: in Quebec they rose by 65%, in Montreal by 72%, in the former township of Sutton by 89%, and in the village they increased by 141%. This increase in prices makes it very difficult for many people, particularly low-income earners, to buy property.

As concerns environments that support physical activity and healthy lifestyles, researchers have identified indicators of the built environment that make it possible to assess how well a community scores. A residential neighbourhood with high “walkability” is one that is more densely populated, with many shops and services and with interconnected streets. This is positively correlated to the practice of active transportation among residents (walking, cycling, using public transit) and a lower prevalence of overweight²⁹. Levels of obesity have increased at alarming rates in all regions of Quebec and in developed countries, and are considered a world-wide epidemic and public health issue³⁰. In Quebec in general, 21.5% of people are obese. Concerns regarding land use, infrastructure and development are therefore shared by many other municipalities and stakeholders, including public health.

PERSPECTIVES FOR THE FUTURE

At the gathering held in November 2011, participants imagined many positive developments for the environment in Sutton. In keeping with the above, they wanted **better housing options** to be developed. In the area of transportation, they suggested many ways to **make Sutton a safe place to walk and drive**, for example: create an alternative route to the mountain (via route 215) in order to avoid traffic in town; add sidewalks, crosswalks and lights on Main Street; make the Couche Tard intersection a 4-way stop; put in a 3-way stop at Maple and Main street; have more walking paths in the village; establish sensible and consistent speed limits which are respected; close Main Street on Sundays; funnel traffic (especially trucks) down westward road to the 139. Another suggestion was to have passenger service by train for Montreal.

They also wanted to see **bike trails and hiking trails extended**, including the creation of a hiking trail from the centre of the village to the mountain. One person suggested creating a boardwalk (perhaps with an interpretive aspect) in Boyce Marsh; however others worried about the risk of contaminating the water. Some people would like to adopt a **dark sky policy** similar to the one in Megantic or to see Mount Sutton adopt **sustainable development plan**.



Credit: Mary Richardson

SUMMARY Environment

Sutton is considered to be a very beautiful town surrounded by protected areas, farms and natural spaces. While being in a quiet countryside, it has easy access to larger urban centres such as Montreal. Balancing the increasing development of the area with concerns about conservation, environmental protection and quality of life remains the biggest challenge currently. Improving walkability in order to encourage physical activity and pedestrian safety for all age groups is a concern for many people. In the future, participants at the consultation would like to see more bicycle and hiking trails, and better affordable housing options. A dark sky policy and a sustainable development plan for Mount Sutton are two suggestions made for maintaining the environmental assets of the area.

Towards community and personal health and well-being

In this section we present the perspectives expressed by community members at the consultation held in November 2011 concerning community and personal health and well-being in Sutton, followed by some relevant statistics and perspectives for the future.

Social Determinant of Health

Many different aspects of a community affect health and well-being in a myriad of sometimes complex ways. Social and physical environments—including social support networks, community organizations, educational opportunities, employment, incomes and social status, the natural environment, urban planning, transportation systems and the state of buildings, for example—are what most affect the health of both individuals and communities.

Health and social services also have a role to play in maintaining good health, preventing illness and treating people for health and social problems. In fact, the health care system itself is seen as a health determinant as well as a basic human right. Being able to access such services in an effective, efficient and reassuring way is therefore important. In Canada, we have a universal health care system that requires provinces to provide all “medically necessary” services on a universal basis. Yet access to care remains better for those in higher income brackets, and drug prescriptions are less likely to be filled by low-income earners. Many low- and moderate-income Canadians have limited or no access to non-insured health services such as eye care, dentistry, mental health counselling and prescription drugs.

People’s health and well-being are affected by the interconnections between all the health determinants. A good example of this is the issue of food insecurity. Food is one of the basic human needs and it is an important determinant of health and human dignity. Food insecurity more often affects households with lower incomes, lower educational levels, and other forms of deprivation. People who experience food insecurity are unable to have an adequate diet in terms of its quality or quantity. They consume fewer servings of fruits and vegetables, milk products, and vitamins than those in food-secure households. Dietary deficiencies – more common among food insecure households – are associated with increased likelihood of chronic disease and difficulties in managing these diseases. Food insufficient households were 80% more likely to report having diabetes, 60% more likely to report high blood pressure, and 70% more likely to report food allergies than households with sufficient food. Finally, increasing numbers of studies indicate that children in food insecure households are more likely to experience a whole range of behavioural, emotional, and academic problems than children living in food secure households. Additionally, food insecurity produces stress and feelings of uncertainty that can have a negative impact on health³¹.

SUTTON’S STRENGTHS

Sutton has many different strengths in the area of health and well-being. Participants at the community consultation mentioned a broad range of assets that they appreciate. In the area of health and social services, participants generally feel that they have access to **good quality health services** at the hospital, the medical clinic and the CLSC. Although there are no English signs at the hospital in Cowansville, a project has recently been developed whereby **coloured footprints** are placed on the floor to direct people who speak languages other than French. At the

Sherbrooke Hospital, participants say that they **can always find someone to explain things in English**. At the local clinic, there are four family doctors, who are quite available and it is believed that **everyone has access to a family doctor**. The CLSC nurse goes to this clinic and works very closely with the doctors. Participants mention that **everyone speaks English at the Sutton clinic**, but say that “we get into trouble when we leave our little ‘bubble’” because few professionals speak English in Cowansville, and Granby is “even worse.” The CLSC La Pommeraie offers services to residents of Sutton, and participants feel that **homecare services are very good in Sutton**. In fact, some people were surprised at the range of services offered.

In the area of community services, one community member notes that “community services here are far and beyond what they are in Ontario.” **Meals on wheels** and the **first respondents** were mentioned specifically. The **Fédération de l'Âge d'Or du Québec (FADOQ)** was also said to bring the community together, with activities such as line dancing, osteoporosis activities, and a walking group. **Recreational activities** are also seen as assets for health and well-being in Sutton, including swimming, soccer, and baseball, but also courses in yoga, tai chi and meditation. The **Sutton Foyer** was also mentioned as an asset to the community.

In the area of psychosocial health, there is an **Alcoholics Anonymous (AA) group, a Narcotics Anonymous (NA) group and ALANON** which hold groups in town. **AMI Quebec** is becoming more popular with their telehealth program.

CHALLENGES FACING SUTTON

Participants also identified some challenges facing Sutton in achieving optimum health and well-being. The emergency room at the hospital is said to have **long wait times**, and **only one doctor** is believed to be available there. Participants feel that the region has a **shortage of health care professionals who speak English**; for example, there are no staff who speak English in the psychiatric sector.

Although the English-speaking population is said to volunteer a lot, there is a **shortage of volunteer caregivers**. For example the caregivers' home that provides respite in Cowansville needs volunteers and volunteers are also needed for Alzheimer's patients. Residents agree that the population is aging and that this area will need to be developed.

Another challenge to health and well-being in Sutton is the **lack of sidewalks** in many sectors outside the village centre. This limits people's ability to take walks near their homes and decreases the possibility for exercise. It can also be a security issue for all residents, particularly seniors and children. In addition, the **town is not wheelchair accessible** for the most part. The sidewalks are in bad shape and most businesses and buildings have steps to go up.

As mentioned in some of the previous sections, community members are concerned about **marijuana production and the presence of organized crime** in Sutton. Residents are aware of the problem and feel afraid because landowners sometimes receive threats from growers, and marijuana may be grown on people's land without their



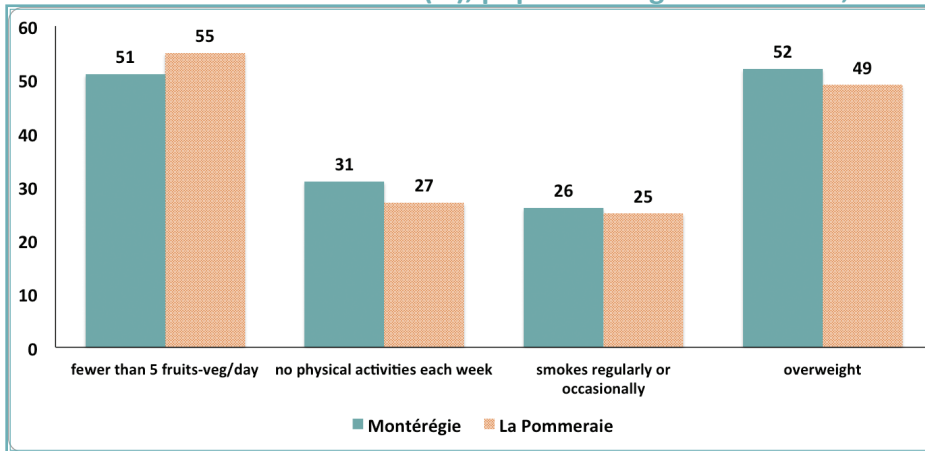
Credit: Mary Richardson

knowledge. Residents sometimes hear gunshots or see suspicious cars in the area. It is unknown whether this makes drugs more accessible to youth or if there is an issue with drugs in the schools.

SOME STATISTICS ON HEALTH AND WELL-BEING

Statistics for the community of Sutton are not available, much less the English-speaking population. Using data for the Montérégie region can be misleading since the realities of the areas where the population is concentrated (in Longueuil and urban centres near Montreal) are very different from the realities of Sutton. Data for the La Pommerai local service territory are likely to be more representative of realities in Sutton, although differences may also exist.

Risk factors for chronic disease (%), population age 18 and over, Montérégie and La Pommerai, 2005



These figures show the rates of four different risk factors for chronic disease for Montérégie as a whole and for La Pommerai. La Pommerai residents have a higher rate of people who do not eat at least five fruits and vegetable per day, however for the other risk factors, they fare better in general.

Source: Baron, G. and coll. 2005. Prevalence of screening and counselling for cancers and cardiovascular disease in the Monteregie, 2005.

Surveys have shown that English speakers in Quebec tend to turn to family first when in need, rather than public institutions, unlike French speakers³². It seems that this is related to apprehensions about accessing the public system, or lack of knowledge about it, rather than poor service or an unwelcoming attitude. Service providers who work with English speakers say that the apprehensions could be based on fears concerning their ability to understand and navigate the system. It has been observed that once services are offered, usage levels climb.³³

Another reality that can have an impact on health and well-being for the English-speaking population is the burden of care-giving. Because of the high proportion of seniors in the local English-speaking population, and a low proportion of people in the middle years, much of the unpaid family care-giving can fall on the shoulders of the same people. These caregivers may experience negative health effects such as stress, as well as difficulties putting in their work hours or finding time for social activities.³⁴

PERSPECTIVES FOR THE FUTURE

At the consultation held with community members, participants envisioned an attitude towards **seniors as a resource** for the community. They also shared the same concerns mentioned above about improvements to safety by **reducing traffic in the centre of the village**. A final suggestion was to have **well-indicated numbers on houses** and reflective materials on poles near homes in order to facilitate identification in case of emergency.

SUMMARY Environment

Sutton residents have access to high quality health care services in English most of time, including homecare services, community services and groups for people fighting addictions. However, while the Sherbrooke Hospital seems to have staff who can speak English, this is less true in Cowansville and Granby. There also is said to be a shortage of volunteer caregivers. The concerns related to marijuana production is a cross-cutting issue as it affects the economy, educational attainment, social and community life, and health and well-being. Still, lifestyle habits are generally better in La Pommeraiie CLSC territory than they are in the region as a whole.



SUMMARY AND CONCLUSION

Sutton is located in the historical Eastern Townships region between Montreal, Sherbrooke and Vermont. It is in a rural area whose landscape is shaped by mountains, rolling hills, farmland, forest and rivers. Tourists, vacationers and weekenders are attracted to the area because of these beautiful surroundings as well as the services offered: a downhill ski station, hiking and bicycle trails, vineyards and other attractions.

Like much of the rest of the Townships, Sutton was originally occupied by First Nations groups, specifically Abenaki. In the 1780s, however, United Empire Loyalists settled in the area, followed later on by Francophones looking for land as the St-Lawrence Valley became more densely occupied. British and other European immigrants also came in search of better living conditions, land and opportunity.

By the twentieth century, Sutton was a small but bustling town with manufacturing, retail, resource extraction, farming and other economic activities. The railroad supported much of this development. The ski hill has also been an economic driver since the 1960s when it was opened, and it has oriented much of the local development, including real estate. Changes to agriculture have also influenced development, as agricultural mechanization made the hill farms harder to work and many farms were sold. Some of these were bought by people looking for a vacation home or a place to retire, shifting the population towards older, more affluent residents.

This is part of the general demographic profile of the Townships today, particularly among the English-speaking population, which tends to be older in general, and has declined in relative importance. Although English speakers in Sutton and the surrounding area remain well represented in the population compared to other areas, the proportion of French speakers has increased steadily over the years, and continues to do so.

COMMUNITY STRENGTHS, CHALLENGES AND PERSPECTIVES FOR THE FUTURE

In view of stimulating community development in the present-day context, a community consultation was held in November 2011. Various community assets and challenges were identified, as were perspectives for the future.

Sutton is seen by residents to be a safe and vibrant community with many different community groups and activities. Residents of different backgrounds are said to live well together, although some tensions between newer and more long-time residents are perceived as the community has grown quickly with many newcomers settling in the area. The main challenges facing Sutton are related to these changes: there is a need for moderate and low-priced housing, and traffic on Main Street is a cause for concern, particularly as it affects pedestrian safety. Participants at the consultation suggested an alternate route to the mountain to decrease traffic in the village centre, as well as more opportunities to meet with other community members.

The school in Sutton is considered very good and quite unique, placing children in interaction with kids from the other language group. However, day care services, particularly in English, are limited. As elsewhere, drop-out rates among boys especially are considered high. The younger generation of English speakers has lower levels of educational attainment compared to those in the older generations and to French speakers.

The strength of Sutton's economy is largely due to the services offered to tourists, vacationers and part-time residents. However, this sector is also the source of some of the community's challenges, such as low-paying, part-time and seasonal jobs, the lack of affordable housing and hidden poverty. The participants' perspectives for the future therefore include more affordable housing, more stores that provide basic everyday necessities and employment opportunities with better salaries and conditions.

Sutton is considered to be a very beautiful town surrounded by protected areas, farms and natural spaces. While being in a quiet countryside, it has easy access to larger urban centres such as Montreal. Balancing the increasing development of the area with concerns about conservation, environmental protection and quality of life remains the biggest challenge. Improving walkability in order to encourage physical activity and pedestrian safety for all age groups is a concern for many people. In the future, participants at the consultation would like to see more bicycle and hiking trails, among other things.

Sutton residents have access to high quality health care services in English most of time, including homecare services, community services and groups for people fighting addictions. However, while the Sherbrooke Hospital seems to have staff who can speak English, this is less true in Cowansville and Granby. There also is said to be a shortage of volunteer caregivers. The concerns related to marijuana production is a cross-cutting issue as it affects the economy, educational attainment, social and community life, and health and well-being. Still, lifestyle habits are generally better in La Pommeraie CLSC territory than they are in the region as a whole.

Moving forward

All of the above information is relevant in improving health and well-being. Improving areas such as income and social status, education, employment and economic development, as well as social support are all likely to result in improvements in health status. Actions in these areas can be taken by a wide range of actors, from community members and organizations, to municipalities and health and social service institutions. In cases where services need to be adapted for the English-speaking population, this often means more than simply translating information. Instead it requires adaptations to the social, economic and demographic reality of the English-speaking community. In the Townships, this means developing strategies to reach and engage younger, less educated, less employable and more sceptical and apprehensive people.

Community development strategies are central to health promotion, and require community mobilization, led by an engaged voluntary sector and strong local community organizations. However the missing middle class and middle-aged group may limit the capacity of the English-speaking community to expand community development efforts³⁵.

The information contained in this portrait can be used to further community development actions in Sutton at many different levels: institutional, community and individual. This community portrait is intended to encourage conversations about what people care about, what they can do to contribute to the quality of life in their community, and how that commitment can be translated into actions. In some cases, an institution may decide to address an issue, most likely in partnership with another organization or group of individuals. In another case, ordinary citizens may decide to organize an activity or project that they feel is within their reach. Community organizations may focus on some aspect of community life that they feel empowered to change, in collaboration with other community actors. Whatever the case, the ultimate goal is individual, community and organizational empowerment, and community development actions will be based on local assets. The strategies for getting there ideally include intersectoral partnerships, community engagement and political commitment. However large or small the actions are, when they emerge out of people's sense of commitment to and caring for their community they all have a role to play in building a healthier community.

Summary	COMMUNITY LIFE	EDUCATION	ECONOMY	ENVIRONMENT	HEALTH
<p>Strengths</p> <ul style="list-style-type: none"> • friendliness, community spirit, warmth and sincerity of local residents • safe community • country life • different groups co-exist well • town is largely bilingual • population is multicultural • different groups work together • large number of services and activities • community is vibrant • library • ecumenical group • volunteer bureau and all the volunteers • activities for younger people • theatre and sports facilities • artists and craftspeople 	<ul style="list-style-type: none"> • elementary school where both English and French schools are under the same roof • preschool is very good • located near two universities 	<ul style="list-style-type: none"> • tourism and services for vacationers • broad range of retail outlets • big enough to offer services and small enough to still feel “homey” • many farms and good food • mountain is key to economy 	<ul style="list-style-type: none"> • town is beautiful • aesthetic improvements in the downtown • Main Street as the centre of the village • clean air, clean water, and abundant and relatively unspoiled natural spaces • protected areas • environmental groups and environmental • consciousness of residents • easy to access larger urban centres (ex.: bus services) • farms and good food 	<ul style="list-style-type: none"> • Good quality health services at the hospital, the medical clinic and the CLSC • Coloured footprints at the hospital direct patients to people who speak languages other than French • Staff can explain things in English at the Sherbrooke Hospital • Everyone has access to a family doctor • Everyone speaks English at the Sutton clinic • Homecare services are very good in Sutton • Community services are good • Recreational activities • Sutton foyer • Alcoholics Anonymous, Narcotics Anonymous, ALANON and Ami Quebec services 	
<p>Challenges</p>	<ul style="list-style-type: none"> • housing: lack of intermediary-sized and moderately-priced housing • lack of intergenerational activities • some tensions between natives and new residents • traffic • feeling comfortable expressing oneself in English (in more formal situations such as town hall meetings) 	<ul style="list-style-type: none"> • elementary school not actually bilingual • French is limited in the Anglophone community • internet connection is key and not everyone has access • subsidized daycare is not accessible • private daycare cost 35\$ a day • the CPE is completely French • boys are most likely to drop out of school, and the rates seem to be high • attraction of growing marijuana dissuades some from completing high school 	<ul style="list-style-type: none"> • many seasonal, part-time and low-paying jobs • many people self-employed or employed outside Sutton • lack of affordable housing, leading to people (particularly the young) leaving the community • population increase mainly retirees and part-time residents • there is poverty, but it is hidden • large proportion of English-speaking youth are vulnerable and have very limited employment opportunities • marijuana industry is a disruptive force in the community 	<ul style="list-style-type: none"> • improving walkability (sidewalks need to be elevated) • balancing development with concerns about conservation, environmental protection and quality of life • Sutton River is not too clean • noise made by the train 	<ul style="list-style-type: none"> • Long wait times at the hospital emergency room • Shortage of health care professionals who speak English • Shortage of volunteer caregivers • Sidewalks need improving and wheelchair accessibility is lacking • Marijuana production and organized crime
<p>Future</p>	<ul style="list-style-type: none"> • alternate route to the mountain • informal social event such as a bilingual breakfast and more places and moments to meet • more transitory apartments • seniors could put up a photo exhibition • town council have this type of conversation 	<ul style="list-style-type: none"> • There is a committee based at the regional high school in Cowansville whose focus is to decrease the rate of dropping out. It aims activities at parents, students and the community at large. Results will be seen in the long term. 	<ul style="list-style-type: none"> • more affordable housing • transform unused building into a multi-use centre, including affordable housing, studios, a market, a community center and a park • another grocery store and more variety of stores on Main Street • new employers who give decent salaries and interesting jobs 	<ul style="list-style-type: none"> • better housing options • make Sutton a safe place to walk and drive • extend bike trails and hiking trails • adopt a dark sky policy • sustainable development plan for Mount Sutton 	<ul style="list-style-type: none"> • involve seniors as a resource • Reduce traffic in village centre • Well-indicated numbers on houses for emergencies

Endnotes

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17. Much of the information in the section was excerpted from the website of the town of Sutton: <http://infosutton.com/en/other-sutton-info/history.html>
18. An elder resident of Sutton was interviewed and shared her memories of the town's past.
19. Much of the information in the section was excerpted from: Pocock, Joanne and Brenda Hartwell, 2010. *Portrait of the English-speaking Community in the Eastern Townships*, Townshippers' Association. See the publication for specific references.
20. See Public Health Agency of Canada, "What Makes Canadians Healthy or Unhealthy?" www.phac-aspc.qc.ca; Ministère de la Santé et Services sociaux du Québec 2007, "Health, in other words..." www.mssss.gouv.qc.ca; CHSSN 2003, *A Community Guide to the Population Health Approach*, www.chssn.org; Juha Mikkonen and Dennis Raphael, 2010. *Social Determinants of Health, The Canadian Facts*. Toronto: York University School of Health Policy and Management.
21. See Public Health Agency of Canada, "What Makes Canadians Healthy or Unhealthy?" www.phac-aspc.qc.ca; Ministère de la Santé et Services sociaux du Québec 2007, "Health, in other words..." www.mssss.gouv.qc.ca; CHSSN 2003, *A Community Guide to the Population Health Approach*, www.chssn.org; Juha Mikkonen and Dennis Raphael, 2010. *Social Determinants of Health, The Canadian Facts*. Toronto: York University School of Health Policy and Management.

22. Although educational attainment is not directly equated with literacy, people with lower levels of education are more likely to have lower literacy (and vice-versa).
23. See Public Health Agency of Canada, “What Makes Canadians Healthy or Unhealthy?” www.phac-aspc.qc.ca; Ministère de la Santé et Services sociaux du Québec 2007, “Health, in other words...” www.mssss.gouv.qc.ca; CHSSN 2003, A Community Guide to the Population Health Approach, www.chssn.org; Juha Mikkonen and Dennis Raphael, 2010. Social Determinants of Health, The Canadian Facts. Toronto: York University School of Health Policy and Management.
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