Author

Mary Richardson, Ph.D., anthropologist and consultant

Mary Richardson phd 418 848-1090

Cover page design

Acknowledgements

Publication of this document has been made possible through a financial contribution from Health Canada.







This document was produced in collaboration with Connexions Resource Centre.



Contents

INTRODUCTION	2
Community development	
Building healthy communities	4
Community mobilization in English-speaking communities in Quebec	5
ENGLISH-SPEAKING POPULATIONS	6
Quebec, Outaouais and Pontiac	6
Age structure	7
Territory of Pontiac	8
COMMUNITY PERSPECTIVES	10
Methods used	10
Consultations and an on-line survey	10
Analysis of qualitative data	11
Different sources of quantitative data	12
Overall, what do we value most in our community?	13
Health and well-being	14
Language use in health care encounters	14
Health services in the Pontiac	18
Healthy lifestyles	23
Community vitality	24
Social and community life	24
Education	27
Economic conditions	30
Environment	34
Conclusion	36
Vision for the future	37

PONTIAC

INTRODUCTION

This portrait has been completed by the Connexions Resource Centre and the Community Health and Social Services Network (CHSSN). Connexions is a not-for-profit community organization whose mission is to serve and promote the health, well-being and vitality of the English-speaking population of the Outaouais region. It is committed to strengthening networks within the English- and French-speaking population as well as encouraging community development initiatives.

The main objective of this portrait is to contribute to a more in-depth understanding of the English-speaking communities of the Pontiac area. To do so, different sources of information have been gathered from:

- 1. reports and other documents
- 2. some key statistics from the 2016 census data
- 3. community perspectives, as expressed during focus group conversations held in these communities in the fall of 2017 and through an on-line survey (completed by 131 respondents in January 2018)

The on-line survey was developed to gather the perspectives of a broader range of community members than was possible at the community gatherings, which were attended by relatively small numbers of people. While such a survey has limitations (particularly in terms of engaging participants in a collective dialogue and in gathering detailed, nuanced qualitative information), it helped to ensure that a larger number of community members were able to share their perspectives on the topics being explored. We will draw on all these sources of information throughout this document.

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."

Institut national de santé publique du Québec (2002). La santé des communautés : perspective pour la contribution de la santé publique au développement social et au développement des communautés. Québec : INSPQ, 46 p. www.inspq.qc.ca

The central idea and purpose of community development is for community members to take action collectively and to generate solutions to shared 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. In Quebec, community development has been identified as one of the main intervention strategies in public health. Many regional health boards and health centres are actively engaged in community development.

Community development strategies

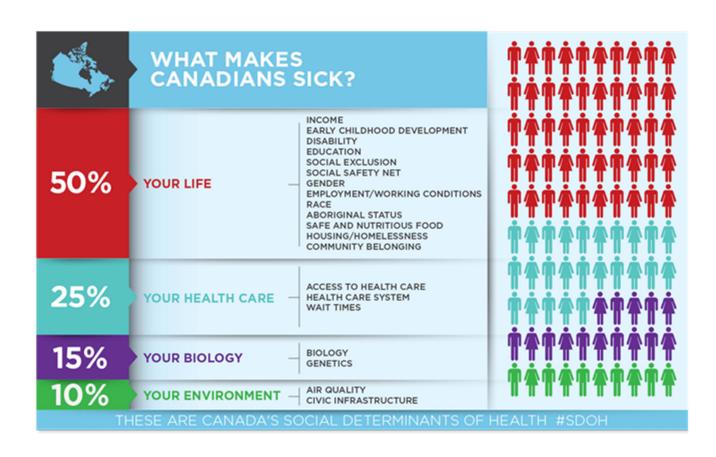
- Community engagement
- Empowerment (of individuals and communities)
- Intersectoral collaboration and partnership
- Political commitment leading to healthy public policy
- Reducing social and health inequalities

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.

Building healthy communities

In keeping with Connexions' and 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. 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 environments ("your life") are the main determinants of health: factors such as your income, education, social safety net, employment and housing.



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 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 entity.

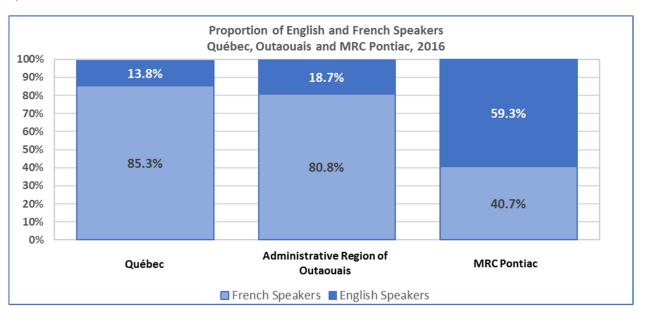
Community mobilization in English-speaking communities in Quebec

A network of English-speaking communities in Quebec is working towards this goal of community empowerment and improved health and well-being. The provincial network is composed of nineteen community health and social services networks, which act as drivers of change in mobilizing English-speaking communities. These community health and social services networks implement three key action strategies: improving access to health and social services, increasing the availability of health promotion and disease prevention programs, and fostering social innovation. They engage a broad range of local partners in an intersectoral networking and partnership approach to take action on priority health determinants, focusing on specific populations. This work is rooted in a number of principles and values that guide the development of the networks, with the ultimate aim of improving the health and well-being of English-speaking communities in Quebec and enhancing community vitality (see model in appendix). This approach to community mobilization and intersectoral partnership has fostered hundreds of partnerships including health and social service centres delivering primary level care, other public institutions in Quebec, as well as a wide variety of community organizations. A partnership between the CHSSN and the Institut national de santé publique du Québec (INSPQ) has supported these networks in gaining knowledge and experience in community development. This community portrait is part of that support.

ENGLISH-SPEAKING POPULATIONS

Quebec, Outaouais and Pontiac

There are about one million (1,097,925) individuals living in Quebec whose first official language is English. Quebec's English-speaking communities comprise 13.8% of the Quebec population. In the Outaouais, the English-speaking population accounts for 18.7% of that region's total population, making it one of the regions with the highest proportion of English speakers.



In Pontiac, we find 8,315 English speakers where they represent 59.3% of the population. This proportion is much higher than that represented by English speakers across Outaouais territory (that is, in the other MRCs).

Number and Proportion of English and French Speakers in Outaouais, by Territory, 2016				
Geography Total French English of				Proportion of English Speakers
Outaouais	376,905	304,625	70,575	18.7%
Papineau	22,360	20,895	1,455	6.5%
Gatineau	271,850	225,415	44,740	16.5%
Les Collines-de-l'Outaouais	48,885	36,255	12,620	25.8%
La Vallée-de-la-Gatineau	19,795	16,345	3,450	17.4%
Pontiac	14,030	5,715	8,315	59.3%

Source: JPocock Research Consulting, 2016 Census, Statistics Canada. Population in private households - 25% sample. The linguistic concept is First Official Language Spoken with multiple responses distributed equally between English and French.

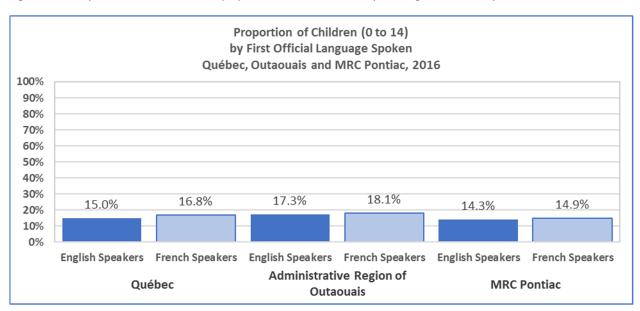
Age structure

The age structure in a population is important in understanding the distinct health needs and resources of each age group and linguistic community. Each stage of life tends to be associated with specific health and social service needs, which can be met by public agencies and various community-based resources. The age structure in the majority and minority populations is often different, resulting in differing needs.

Across Québec, there were 165,085 English-speaking children aged 0-14, representing 15.0% of the English-speaking population, whereas among French speakers children represent 16.8% of Quebec's population.

In Outaouais, in 2016, there were 12,205 English-speaking children aged 0-14, representing 17.3% of the population. This is similar to the proportion of children in the regional French-speaking majority population (18.1%). This proportion is higher than the level for English-speaking children across the province.

In Pontiac, children represent a smaller percentage of the population than in the region or province as a whole, among both English and French speakers. English-speaking children aged 0-14 represent 14.3% of the population and French-speaking children represent 14.9%.

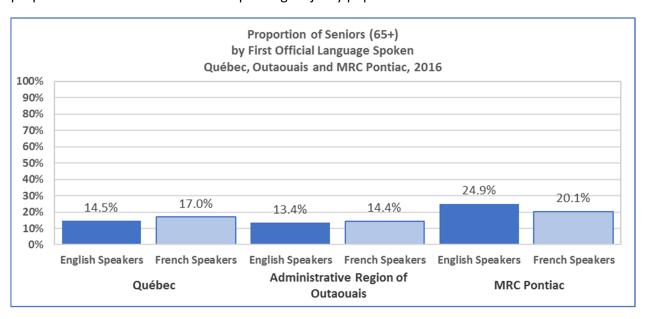


The proportion of seniors in the population is also important to understand, since they have specific health and social services needs. Across Québec, there were 159,670 English-speaking seniors aged 65+, representing 14.5% of the English-speaking population. The proportion of seniors in the English-speaking population is lower than that found in the French-speaking majority population in Quebec (where they represent 17.0%).

In Outaouais region, in 2016, there were 9,475 English-speaking seniors aged 65+, representing 13.4% of the population. This share is lower than that of English-speaking seniors across the province. The proportion of seniors in the regional English-speaking

population is lower than their proportion in the French-speaking majority population (14.4%).

In Pontiac, we find 2,070 English-speaking seniors aged 65+ where they account for 24.9% of the population, compared to 20.1% among French speakers. This share is much higher than that of English-speaking seniors across Outaouais region, and is also much higher than the proportion of seniors in the French-speaking majority population in the Pontiac.



This age structure shows a much older population, with a smaller proportion of children in Pontiac MRC than is the case in the province as a whole and in the region of Outaouais. This general trend is similar among French speakers, but is even more accentuated among English speakers.

Territory of Pontiac

Pontiac MRC is located to the north-west of the city of Gatineau in a rural area with small towns and villages. It has a large proportion of English speakers and is strongly influenced by the proximity to Ontario, where many Pontiac residents go regularly for a variety of purposes (social connections, health care, shopping, and more). There are large forested areas with lakes and rivers, and some farmland as well. We will see below how the residents of Pontiac view their living environment.

Find better map/check copyright



Danielle I did not include information on languages spoken (as in the Collines de l'outaouis portait) because Joanne did not have that data for 2016 (at least not in the report she sent).

Is there anything else you want to include in this section on the MRC Pontiac??

COMMUNITY PERSPECTIVES

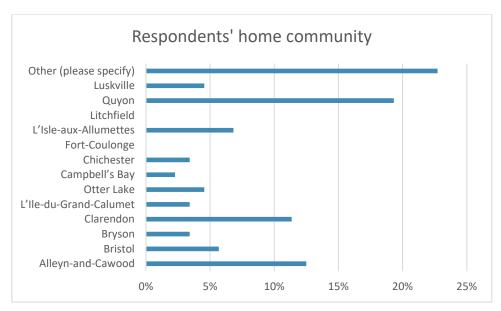
In the sections below, we will discuss community perspectives on health and well-being, and on community vitality. These perspectives were expressed through two processes: one was a series of community consultations (focus groups discussions), and the second was an online survey distributed in January 2018 to English-speakers in Pontiac. In each case, we will highlight the communities' strengths and challenges, and some perspectives for the future. This overview can be used to inform decision-making and to stimulate community engagement.

Methods used

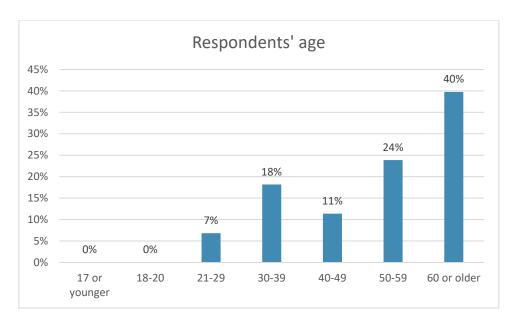
Consultations and an on-line survey

The consultations were held in five communities in the Pontiac: Chapeau, Fort Coulonge, Otter Lake, Quyon and Shawville. Between 4-9 residents attended in each case. Because of the small number of participants, Connexions made the decision to conduct an on-line survey to gather a more representative overview of the perspectives of community members.

A total of 131 people completed the survey. The rates of response, however, vary by question, as some people skipped questions. Responses were from residents of the communities listed in the chart below. Those who answered "other" were mainly from Shawville, with a few from other communities.



About 90% of respondents were women and 10% were men. Respondents were mostly in the older age groups, as shown below.



The issues raised therefore are likely to over-represent the concerns of older women, and under-represent those of men and younger residents. As a result, planning will need to take this into account and may require gathering complementary information.

The survey contained questions about health and social services, followed by questions about community vitality. These questions focused on sense of community, participation, what people like most and least about their community, as well their perspectives on the assets and challenges in five areas: social and community life, education, health and well-being, economic conditions and the environment. The same themes were discussed at the community consultations; it is all these responses and perspectives that will be summarized below.

Analysis of qualitative data

The notes from the community consultations and the comments (qualitative data) from the on-line survey were compiled together by theme, grouping together comments made on: the assets, the challenges and the ideas for community actions. The content of the comments gave rise to sub-themes through an inductive process; thus these sub-themes (presented below) are a function of what respondents chose to comment on within the more general themes.

Survey responses related to "what I like most about my community" were grouped into the the assets section of the related theme, while responses related to "what I like least about my community" were grouped into the the challenges section of the related theme. Survey responses that related to "what would most improve the community" were included in the ideas for future actions.

In many cases, the information presented below is a summary of several people's comments; sometimes just one or two people mentioned a given point, so we cannot presume that all residents of the territory share all the perspectives mentioned below. Still,

a large number of the comments point in the same direction, which we summarize in the conclusion.

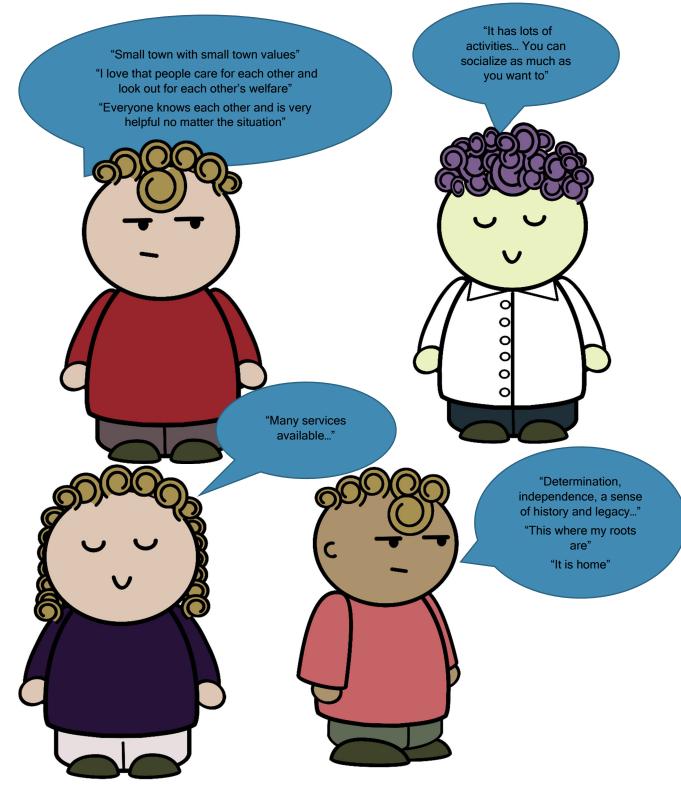
The objective here is not to interpret the information according to a given theoretical framework, but rather to present it in an organized way so that it can stimulate dialogue and inform future actions. We encourage any and all groups in the communities concerned to use whatever information is useful in building a healthy community and taking collective action.

Different sources of quantitative data

The on-line survey made it possible to gather a certain amount of quantitative data on access to health and social services as well as language use, which is presented below.

Another source of quantitative data is provided by analyses carried out with the 2016 Census of Canada, by language group. These analyses are part of a Baseline Data Report produced By Joanne Pocock for the Community Health and Social Services Network (CHSSN) with funding from Health Canada (see: http://chssn.org/document-center/baseline-data-reports-2003-2013/). It provides some context for the comments made by respondents concerning the themes of education, economic conditions and demographics.

Overall, what do we value most in our community?



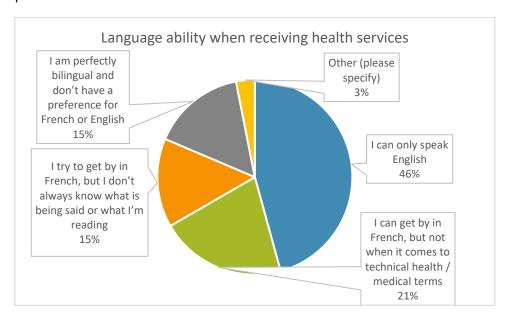
Health and well-being

Residents' perspectives on their health and well-being were gathered both through focus group discussions and through a set of survey questions focusing specifically on communicating with health care staff, including the language used and the written information available. Group discussions and written comments also address issues related to health services (the types, availability, quality, and more), whether public, private or community-based.

Language use in health care encounters

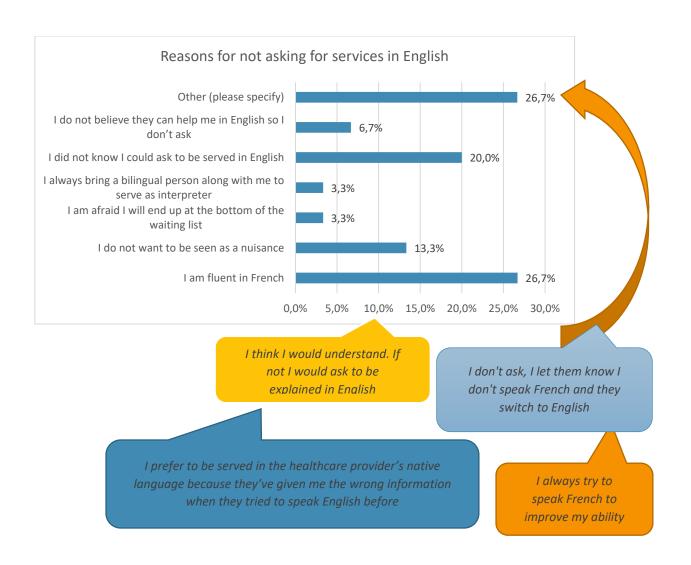
Results from the on-line survey show that when receiving health services, the vast majority of respondents are most comfortable in English (88%), with 2% being comfortable in both French and English.

However, when receiving health services, in reality, these respondents use French and English to differing degrees (see chart below). They may try to get by in French, but not always know what is being said or what they are reading (15%); some (21%) can get by in French but not when it comes to technical and medical terms; and many (46%) said they can only speak English; about 15% stated that they are perfectly bilingual and do not have a preference.



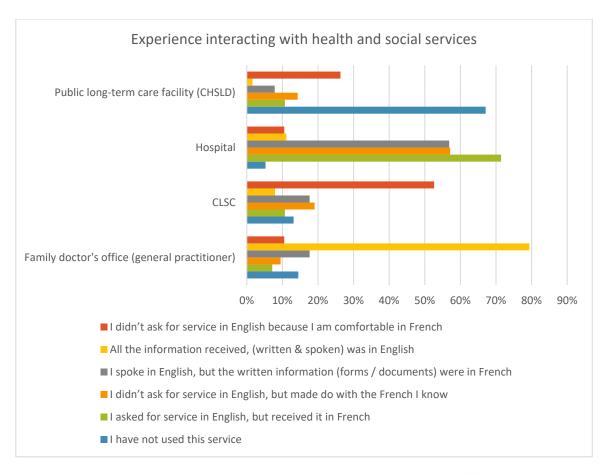
When asked if they request to be served in English when receiving health services, about 77% said "yes," about 19% said "no" and about 4% answered "other".

Among those who do not ask to be served in English, the reasons given are presented in the graph below (n=30). Various explanations were provided when answering "other" and appear in the bubbles below.

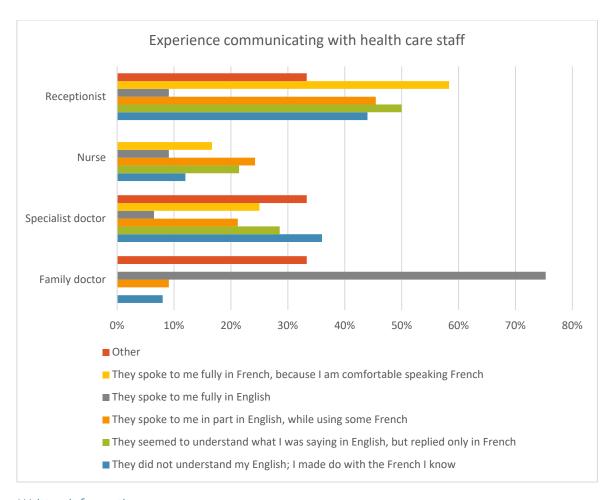


Experience communicating with service providers and staff

When asked about their experience with the health and social services they have used, responses indicate that the family doctor's office is the place where they are most likely to receive services entirely in English, while hospitals were most likely to provide services and documents in French. At CLSCs, more of the respondents were comfortable in French, however response rates were lower for this category. Few people had used the services of a long-term care facility. The chart below shows the responses: these 2 questions had some technical glitches so people could not always select what they wanted to answer. Do we still include them? Maybe we just take out the chart??

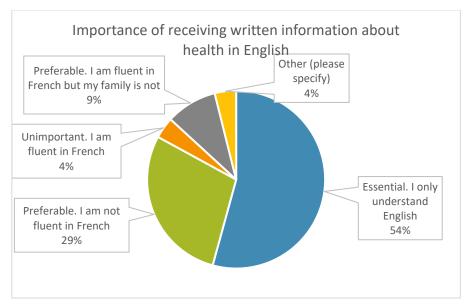


When asked about their experience communicating with health care staff, again the family doctor was most likely to communicate fully in English, followed by specialists. Nurses and receptionists seem to use both French and English to communicate, to varying degrees.

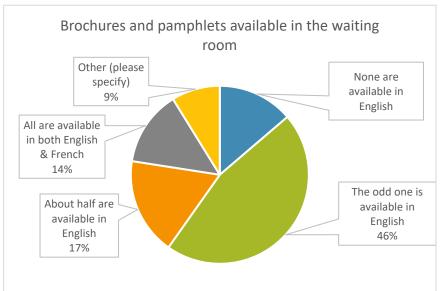


Written information

For written information about their health, 54% of respondents said that it is essential for them to receive such information in English; 29% said it is preferable because they are not fluent in French and another 9% answered "preferable" because a family member is not fluent; 4% said it is unimportant since they are fluent in French.



However, only 14% of respondents answered that all written documents were available in English, with the same percentage (14%) saying that none were. There seems to be a "hit or miss" situation with regards to written information, although more than half of respondents consider it essential to receive



information about health in English.

Health services in the Pontiac

The table below summarizes the comments made—both in the on-line survey and in community consultations—regarding health services in MRC Pontiac. This provides an overview of the community's assets, the challenges it faces and some ideas put forward to improve the situation.

Health services

We have	However	What if we
vve nave	However	wilat ii we
\odot	oximes	⊕
Hospital in Hull/Gatineau	There are many challenges with the hospital in Hull/Gatineau - Wait times can be long both to consult and to get results - The Hull and Gatineau Hospitals are often cited as lacking in English language	Provide more services in English
Shawville Hospital - People appreciate having a hospital in their area - It is a small community hospital that is more personal	Shawville Hospital - People are worried about the move to take services away & move the services to Gatineau - No walk-in clinic - Long wait times - Large case load - Lack of healthy food while waiting	Maintain and build on what we already have Hire more staff, including specialists, pharmacists and other therapists. Advertise wait time at the emergency so people can return later, or have a ticket system Rotate doctors during lunch and supper Separate ill from injured in the emergency to avoid spreading disease Provide better food for those waiting to be seen
Specialists - There are some specialists in the area	Many specialized services are not available locally No pediatrician, optometrist, speech therapist and others Patients have to travel to urban centres, such as Gatineau or Montreal Wait times are very long, resulting in frustration Obstetrics services not available in Shawville for multiple births and premature babies	Have more visiting specialists
CLSC - Offer a range of services - People appreciate Fort Coulonge CLSC with its Emergency service	CLSC - No emergency in Quyon - CLSC doctors are only available to their own patients - Family doctors are difficult to get, the waiting list is long	Increase the number of services offered, such as cancer treatments, dialysis, wound care, concussion care.

- Chapeau CLSC offers some great services	 CLSC in Otter Lake open only 3 days/week; nurse does not do home visits, flu shots, blood work No walk-in clinic (Quyon) 	
Senior care	 Senior care More is needed Not enough long-term care for seniors 	Create a residence for isolated seniors: bright and modern Have a seniors centre Have assisted living option Social workers are needed to help families make decisions about living arrangements for seniors
Communication in English - Some feel language has not been an issue while others have found communicating difficult - Some doctors are able and willing to communicate in	Communication in English is spotty Available services are not always well-known There is a lack of services in English (often mentioned for Hull and Gatineau Hospitals) This can cause nervousness, discomfort and stress	Better communication about the services offered at CLSCs Be accommodating of English speakers
English, while others are not		
Private services - Chiropractor mentioned in Fort Coulonge - Pharmacy on Otter Lake does deliveries twice a day Clinic in Shawville - Great asset - Offers vaccines	 Mental health services and support are difficult to access Lack of mental health services, especially if you cannot pay out of pocket Mental health services in schools are badly needed Psychological evaluations used to be done at the hospital or CLSC (but now only in Hull, Gatineau, Montreal) 	Mental health support groups are needed Mental health services in schools

Several comments are very critical of the current government's policies, and their impact on health care, specifically pointing to the lack of investment in the Pontiac area, cut-backs and a decrease in services. There is a worry that the Liberal government's reforms are "robbing" Pontiac's health services and cutting local jobs. Residents also worry that if they get sick and are transferred to Gatineau or Hull, they will not be served in English and will feel "like a stranger in my own country" as one person put it. One respondent stated that "CISSSO needs to understand that the centralization of health services, while making fiscal sense, does NOT make good sense for the health and well-being of affected populations. Representation of outlying populations should be mandatory at the executive level and the

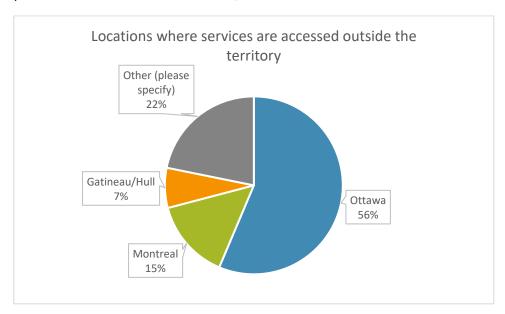
opinions, suggestions and ideas of those representatives be given more weight during discussions concerning their respective populations than the rest of the executive."

These worries are heightened by a sense of being far from services, isolated, even "forgotten" (for example in funding opportunities and economic development). One respondent stated "We need government programs designed for rural communities, separate from the same programs geared for cities". Distance and lack of transportation is a major issue that crosses all themes. Many respondents mentioned that the distance from services is a challenge, especially for those in the more remote communities. They note that it is hard for some people to travel, especially seniors and those who do not drive. This presents problems for people needing to get to appointments with specialists, many of which are outside the area or even region. In addition, many people mentioned that the roads are in poor condition.

Travelling outside the area for health services

About a third of respondents to the on-line survey (37%) stated that they have gone outside their area (Pontiac) for health and social services, specifically so that they can be served in English. Some also mentioned that they have travelled outside their area, but not because of language; instead it was because of proximity, because of the specialists they needed to see, or because a loved one does not speak French.

The vast majority have gone to Ottawa (see chart below). Those who replied "other" named places in Ontario such as Pembroke, Renfrew or Cornwall.



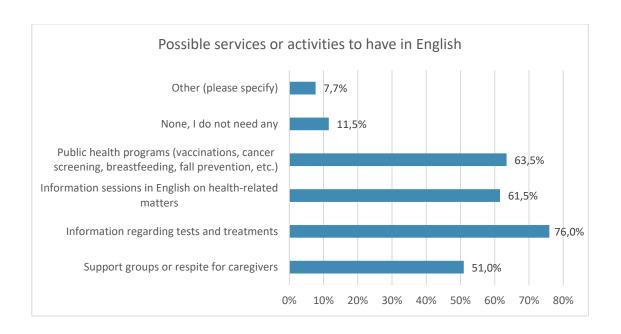
Information from focus groups and qualitative responses in the survey suggests that some residents hold an Ontario address so they can access services in Ontario, which are said to be much quicker. Several people believe that they should be able to more easily receive health services out of province, and not be obligated to receive all their health care in Quebec.

Helpful health-related services or activities

In addition to the institutional services, there are also other types of health-related services.

We have	However	What if we
Excellent nurses from the Gracefield/Low CLSC Help line service (necklace or bracelet) is appreciated In-home services are provided (e.g. Quyon)	Home care services can be hard to access It can be hard to get services (such as cleaning)	Provide more home care services
Community services - There are community services and activities for seniors (Staying Active, cards, Golden Age, etc.) - Support groups - 811 works well Good neighbours - Neighbours help each other out	Some people have limited incomes Makes it difficult for some people to prevent health problems and access services (good food, dental care, hearing aids, etc.) Addictions there is no support for drug and alcohol abuse (counselling, rehab, etc.)	Have addictions services

In the on-line survey, respondents were also asked what activities or services they would like to have in English (which Connexions and its partners could provide). The greatest number of answers concerned information regarding tests and treatments, with public health programs and information sessions almost as frequently mentioned (see below). Several respondents also mentioned mental health services and support, and one person suggested services related to developmental delays, speech therapy and occupational therapy.



Healthy lifestyles

The territory of the Pontiac has many assets that promote healthy lifestyles, such as a good natural environment and a few services for healthy eating. However it was not considered by some to be very deeply rooted in local culture and few people mentioned this aspect of health.

Healthy lifestyles

We have	However	What if we
Healthy lifestyles Wonderful natural environment that can support healthy living	- Not much support for healthy living - It is not very ingrained in the culture	

Overall, health and well-being is a significant concern for many residents of the Pontiac. Respondents and focus group participants are worried about the loss of services and the need to travel to cities for more specialized services where they may not be served in English. Since this population tends to be older and more unilingual, these concerns are heightened, and some turn to Ontario where they may be able to access certain health-related services more easily in English. At the same time, respondents express gratitude and

appreciation for the services they have in the Pontiac, such as the Shawville hospital, local CLSCs and clinics.

Community vitality

The notion of community vitality brings together dimensions related to demographics, the economy, education, arts and culture and other factors that affect the vitality of a community and its ability to create the conditions for a good quality of life for its citizens.

In this section we present the main points raised by participants in the on-line survey and community conversations concerning social and community life, education, economic conditions and the environment.

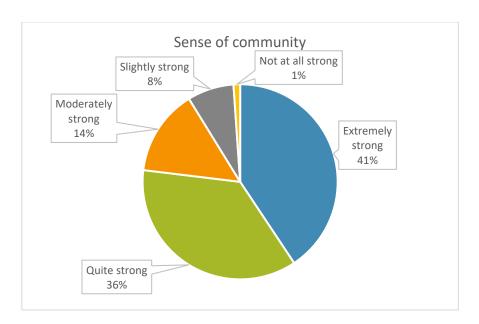
Social and community life

Comments made regarding social and community life focused on the great people (residents), community groups, institutions, services, and activities and events.

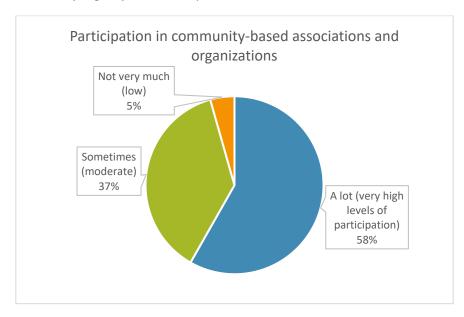
We have	However	What if we
Great people - Community members - Volunteers - Employees Community spirit, caring, involvement	People are not as diverse and involved as we would like - Lack of diversity - Ageing population, with many retirees - Many people travel to Ontario for activities - Many seasonal residents (cottagers) Some note that there is too much gossip	Encourage sense of pride and belonging to give people a desire to effect positive change Attract new residents and keep current ones. Get people more involved
Community groups - Community centres - Family centre - Lions Club & Lionettes - Rotary Club - Golden Age club - Knights of Columbus - Women's Institute Institutions - Churches - Schools - CLSC	There are as number of community issues - Sparse population - Lack of transportation options and large distances between communities - Isolation in rural areas - Lack of affordable food and housing - Large numbers of people on social assistance	Have a website for planning community events (pool resources and avoid overlap) Activities for middle-aged people

	community groups that collapse when too few volunteers get no help funding can be a challenge communications and reaching people	
Services	Some services are lacking	Get high speed internet
 Meals on wheels TranspoAction Daycare Golden Peaks services for seniors Women's shelter Food bank Taxi service Libraries 	- Lack of high speed internet - It is hard to get volunteer drivers because if you are driving to the city it makes for a long day	Have more services for seniors in Chapeau Have a repertoire of locally-available services that is easy to access
Activities	Activities could be improved	A gym would be nice
- Sports: hockey, soccer,	- Need more for seniors and young	A place to walk in the
baseball, skating, golfing, swimming, biking and	people, both children and teensNeed more for middle-aged people	wintertime
other Good programs for seniors and youth Cards, sports for seniors, bingo and more Crafts: quilting, knitting, painting Park in Shawville, arena	- Language barriers: English speaking people can tend to be left out of functions when their French is limited	Have a swimming pool
Events		
- Shows, parties, fairs, festivals		

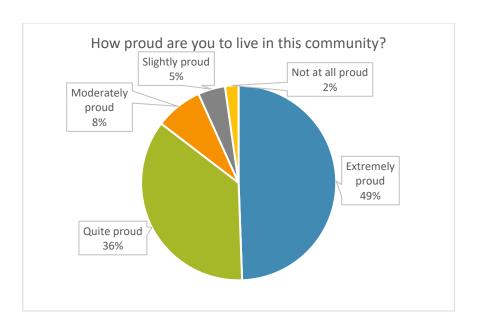
In the on-line survey, respondents were asked about the sense of community in their area. Over 77% rated it as extremely or quite strong.



They were also asked about participation and sense of pride, two other indicators of people's sense of engagement in and belonging to their community. Participation was rated to be very high by 58% of respondents.



Moreover, 85% of respondents said they were extremely or quite proud to live in their community.



Overall, social and community life seems to be strong in the Pontiac, with many people showing a strong sense of community. Some of the things residents most appreciate are the good neighbours, the solidarity and the caring people show each other. They also name a number of community groups, clubs, services, activities and events that enrich their lives and the life of the community as a whole.

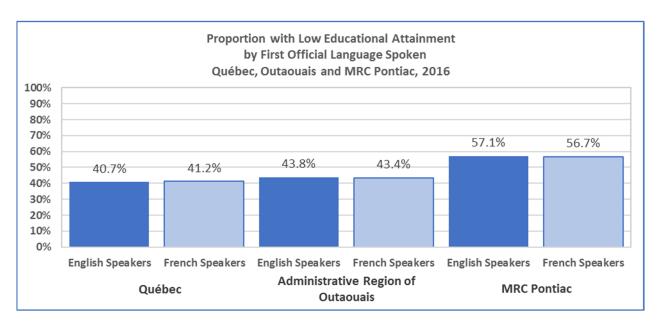
Education

Comments concerning education focused mainly on schools, continuing education and literacy.

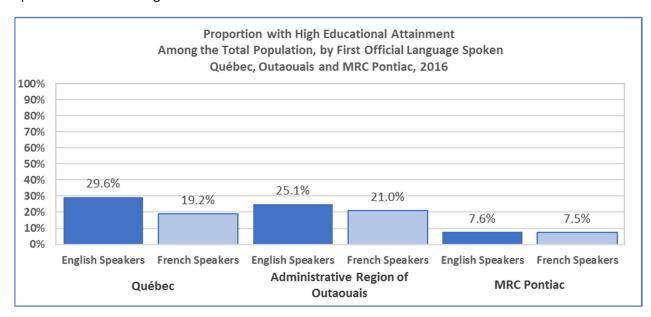
We have	However	What if we
	oxives	
 Educational institutions Daycare services Various schools in the different communities (Elementary & High schools) in both French and English A variety of extra-curricular activities are offered Adult education in Shawville There are strong teachers who start up new programs There are parents who are committed 	Some educational institutions are lacking - Not all communities have a high school - There is no local CEGEP, so some students move to Ontario after high school (at a very young age) - No post-secondary education is available in the area, so students must leave, and many do not come back - Some specialized fields of study are only available outside the region or province	Invest more in schools Provide financial support for vocational schools

- Small schools where you know everyone Programs - Breakfast Club at schools - Quebec en Forme programs Continuing education - Heritage College satellite location & continuing education opportunities - On-Line courses	- Small student population, and a decrease in enrollment makes it a challenge to keep schools open - Increase in drop-outs - Funding/financial resources is a challenge - Some parents do not support the kids in after-school activities and sports Lack of French language proficiency can create barriers for some - Some people cannot finish high school because their level of French is insufficient French language training is needed - Access to second language training is insufficient, whereas ES need more French training (ideally free of charge) Professional development - We must continue to offer professional development so	Have continuing education for job creation Have second language training on an on-going basis, with follow-up for higher levels (not just beginner)
Literacy	young people will be able to make a life here Literacy is an issue for some	
- There is a literacy organization	- either because people cannot read French very well, or they do not have a high level of literacy in English	
Specialized services	Specialized services are lacking - There are not enough resources for special needs	

If we look at the situation in the territory, English and French speakers aged 15 and over are more likely than the population of the Outaouais in general, or Quebec as a whole, to have low levels of educational attainment (i.e., to have a high school diploma or less). Indeed, 57.1% of English speakers in MRC Pontiac have low education, and the situation is similar for French speakers.



The reverse is true of high educational attainment, as both English and French speakers aged 15 and over are much less likely than the population of the Outaouais in general, or Quebec as a whole, to have high levels of educational attainment (a university degree or higher). In MRC Pontiac, we find 545 English speakers aged 15 and over with a university degree or higher where they represent 7.6% of the English-speaking population. This is similar to the proportion among the French-speaking population in the same territory. The proportion of those aged 15 and over with a university degree or higher in the territory's English-speaking population is much lower than the proportion exhibited by English speakers across the region.



These statistics point to a population with low levels of education as a whole, with very few people who have a university degree. This may translate into less favourable economic conditions, such as job opportunities in the community and support for businesses.

Economic conditions

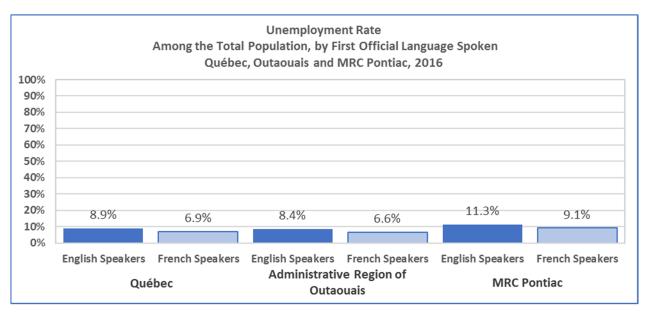
Comments concerning economic conditions covered topics such as business support and employment.

We have	However	What if we
\odot		
Business support - Hire local and shop local commitments - Funding for businesses and mentorship	Some communities have very few businesses Business development needs more support from the community - Community support for local businesses is not always there - The consumer base is small & shrinking - People do their shopping in Ottawa or Gatineau - Not enough competition to have competitive pricing and encourage creativity - Many families are on government support (purchasing power is limited) Better infrastructure is needed - Lack of high-speed internet limits business development (e.g. home-based businesses) - Mobile phone service is not good in some areas - Public transportation is limited or non-existent - Language restrictions must be respected and may create certain barriers	Educate youth in community involvement so they want to contribute and perhaps stay in the area Have high-speed internet Provide financial support to people who want to start a small business (could be municipal incentives) Spend our money locally
Employment Certain sectors provide employment - tourism - schools - hospitals - farms - forest	Employment opportunities are limited-poor - Many jobs are low income, and few jobs offer decent incomes - Many people leave the region for work or else commute - This has a negative impact on the economy - Many jobs require fluency in French	Create jobs, possibly by attracting industry or further developing the tourism sector Offer employment opportunities for youth to encourage them to stay

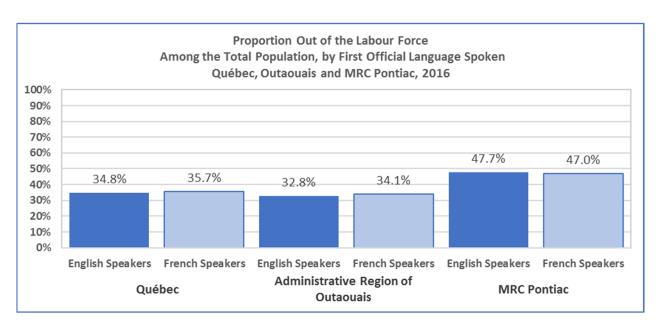
	Offer work placements to
	entice students to stay
	Find employment
	opportunities in the off-
	season
	More jobs in health services

Employment

Statistics show that in the Province of Quebec, the tendency to be unemployed in 2016 was much higher among English speakers (8.9%) compared to French speakers (6.9%). In the Outaouais, the levels of unemployment were also much higher among English speakers compared to their French-speaking neighbours. This remains true in the territory of Pontiac, where levels of unemployment are higher than in the region or province in general, and where English speakers also have much higher rates of unemployment (11.3%) compared to their French-speaking neighbours (9.1%).

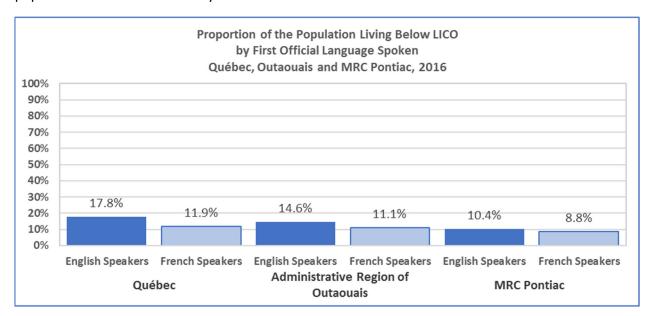


It is also worth noting that the proportion of the English-speaking population that is out the labour force (not working or on employment insurance) is much higher in MRC Pontiac (47.7%) than in the Outaouais region (32.8%) or the province (34.8%). This is also true for French speakers.



Income

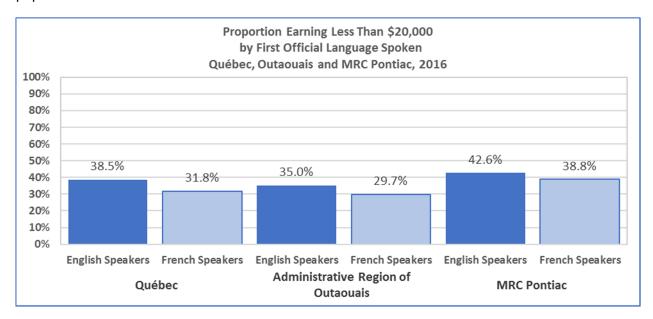
In the Province of Quebec, the tendency to be living below the low-income cut-off (LICO) was much higher for English speakers (17.8%) than for French speakers (11.9%). This was also true in Outaouais. However, in MRC Pontiac, rates of low income are lower for both French and English speakers (8.8% and 10.4%) compared to the region as a whole. Yet this level is higher among English speakers than the proportion for the French-speaking majority population in the same territory.



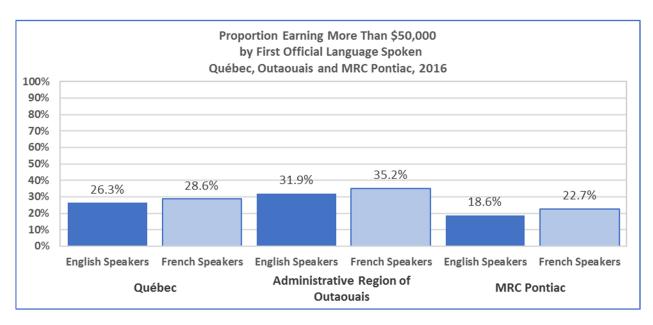
A slightly different portrait emerges when we look at incomes in general. Across Québec in 2016, 38.5% of the English-speaking population aged 15+ had incomes under \$20,000. The proportion of English speakers with income under \$20,000 is much higher than that found in the French-speaking majority population in Quebec. In Outaouais region, that proportion

was 35.0% which is also higher than the proportion in the French-speaking majority population.

In Pontiac, English speakers aged 15+ with income under \$20,000 account for 42.6% of the population. This share is much higher than that experienced by English speakers across Outaouais. The proportion of those with income under \$20,000 in the territory's English-speaking population is higher than the proportion for the French-speaking majority population in Pontiac.



The reverse is true for people aged 15 and over earning more than \$50,000: a lower proportion of English speakers has a high income compared to their French-speaking peers at all levels (province, region, MRC). In Pontiac, 18.6% of the English-speaking population aged 15+ has a high income, compared to 22.7% among French speakers. This share is also much lower than that of English speakers high across Outaouais region.



Overall, the proportion of people living below the low-income cut-off in Pontiac is lower than the average for the province or for the Outaouais region. However, there is a large proportion of the population earning less than \$20,000 a year, and a very low percentage earning more than \$50,000 a year. This points to an English-speaking population with relatively limited financial resources. In the comments made, quite a few people mentioned high rates of people on "welfare" (social support), which they perceive as a problem and an obstacle to growth.

Environment

Participants in community conversations and survey respondents had much to say about the environment. Their comments concern the natural environment, water quality, the built environment, waste management and transportation.

Natural environment

We have	However	What if we
		<u> </u>
Natural environment	The natural environment	Develop tourism
- Ottawa River	needs to be protected	and natural
- Lakes	- Some are concerned about	resources
- Parkland	pollution of the Ottawa	
- Wildlife	River	
 Breath-taking and scenic natural 	- Public spaces are not well-	
environment, good for tourism	maintained or taken	
- Lots of forests and water	advantage of	
- Open spaces and well-managed farmland		

 Clean air Outdoors activities The Luskville Falls is a huge tourist attraction, with many visitors every year enjoying the falls and trails Fishing, hunting and outdoors activities attract many people to the Otter Lake, Ladysmith and Danford Lake area. Leslie Lake Park has a campground with many activities 	 People think trees and water will never run out Some farmers spray pesticides Environmental bylaws need to be enforced 	
Water quality - a new water treatment centre provides drinkable water in Quyon - the septic treatment plant in Quyon has been improved	Water quality is not the same everywhere - The water system in Shawville needs updating There is no water treatment centre in Bristol The water in portage is not drinkable.	

Built environment

We have	However	What if we
	Θ	:
Nice towns - Shawville residents beautify their town: Trees, flowers, flags line the road in the summer & window displays are well maintained by business owners - Chapeau is much appreciated	Improvements are needed - Sidewalks are needed (Mill Dam Road) - We need to avoid overdevelopment - Municipal leaders do not do enough to build green communities and protect the environment - Keep towns clean	Once a year, have a community cleanup of the roadsides
Waste management - We have a good recycling program	Waste management can be improved	
J , J J	 People need to change their habits and do more recycling Garbage disposal needs to be more accessible 	
	There are controversies over toxic waste disposal	
	 disposal of asbestos at the Mill in Portage radioactive waste disposal in Chalk River 	

Healthy eating/Local foods		
 A garden stand in Otter Lake gives access to fresh, healthy, affordable produce 		
Transportation	Transportation infrastructures need improvement	Invest money in road infrastructure
	 Transportation routes are a challenge: 148 can only handle so much Road infrastructure needs repairing and maintaining There is no public transportation available 	Taxis on the weekends and special occasions, or Uber-type services

Conclusion

The English-speaking population of the Outaouais region accounts for 18.7% of the total population, making it one of the regions of the province with the highest proportion of English speakers. In the territory of Pontiac, the proportion of English speakers is even higher, since more than half the population speaks English as their first official language. The English-speaking population is proportionately older than among Francophones and, conversely, the proportion of young people is lower in the English-speaking population.

Most survey respondents said they are most comfortable in English when receiving health care services, including written information, which the vast majority prefer to have in English. Many respondents expressed concern for the health services in the territory, particularly the availability of specialized services and current policies that are eroding existing services. They are also concerned about having to access health services in Gatineau, Hull or Montreal where they fear they will not be served in English, and which also require driving long distances on poor roads. They also expressed concern about access to senior care and home care, as well as to mental health services. It was noted that many residents of the area travel elsewhere to access services, most often to Ottawa, Pembroke or Renfrew (all in Ontario).

In socio-economic terms, statistics show a population with low levels of educational attainment and low incomes, on average. This is compared to Francophones and also compared to Anglophones in the Ouatouais in general, and in the province as a whole. English-speaking residents of Pontiac are also more likely to be out of the labour force and to be unemployed.

The question of community vitality seems to pivot mainly around the question of economic development, which is seen as poor, with insufficient numbers of businesses and employment opportunities. The fact that the population tends to be older and less economically advantaged is not conducive to a vibrant economy. Nonetheless, social

connections seem to be strong, as people spontaneously name their neighbours as the greatest asset to community life, as well as the many community groups, activities and events that create opportunities for socializing. The Pontiac area is considered to have a beautiful natural environment with many assets such as forests, rivers, lakes and more. The challenge is to protect this natural heritage and to improve the built environment. In particular, transportation infrastructure is considered in need of maintenance, and public transportation options are needed so that older, less mobile persons can participate fully in social and community life.

Vision for the future

Taken together, the ideas for action provide an overall vision for the future of the Pontiac territory. Some ideas may apply only to one or two municipalities, while others may be applicable to the whole area. Although many of these ideas were put forth by a few people, and would therefore need to be debated and refined, the main points envision:

A community that has complete health services in both official languages

- * Adequate health care personnel (including specialists, pharmacists, mental health professionals and other therapists)
- * Improved emergency room conditions, with shorter wait times or a process allowing people to go home and return later, and better food on site
- * More treatments offered locally so fewer people have to travel outside the territory
- * Seniors services, such as a centre, a residence, assisted living, and social workers
- * More support for those with mental health difficulties
- * Support for those dealing with addictions

A community that supports healthy active lifestyles

* With fitness facilities such as a gym, walking paths, a pool, etc.

A supportive social environment

- * Residents are proud of their community and involved in community and social life
- * New residents are attracted to the area
- * There are activities for all age groups
- * Local activities and services are well-advertised
- * Young people want to stay in the area and see a future for themselves

Economically dynamic communities

- ★ High-speed internet
- * Support for small businesses and new start-ups
- * Local support for businesses (buy local)

- * Local employment creation, year-round employment and work placements
- * Develop tourism and natural resources

More transportation options

- * improved road network
- * improved and expanded public transit
- * taxis and Uber-type services

Education opportunities

- * Good school options locally with well-funded schools
- * Continuing education opportunities
- * Second-language training on an on-going basis

These points can serve as a basis for planning, but also for individual, community-based and public-sector initiatives at all scales. Community development and the on-going efforts to create healthy communities can only be enhanced by actions at all levels and a sense of empowerment fostered by such initiatives. As the community mobilization model in the appendix shows, intersectoral networking and partnership can contribute to action on the various health determinants, with a long-term effect on community well-being and vitality. The values of social inclusion, equity and preserving identity are what informs the process, and this is what residents of Pontiac also seem to value.

