



Réseau Recommendation

Application of the Inclusive Definition of Francophone (IDF)

Goal

A clear and health-care-specific recommendation for the LHINs and health service providers on applying the Inclusive Definition of Francophone (IDF).

Background

In 2009, the Ontario Office of Francophone Affairs adopted a new inclusive definition of Francophone (IDF), which takes into consideration the significant diversity of the Francophone community and is based on more than just mother tongue.

“This new inclusive definition captures those whose mother tongue is neither French nor English, but who have a particular knowledge of French as an Official Language, and use French at home, including many recent immigrants to Ontario.”¹

“Those persons whose mother tongue is French, plus those whose mother tongue is neither French nor English but have a particular knowledge of French as an Official Language and use French at home.”²

This definition should be used by the Government of Ontario from now on. For example, the IDF should be used for the next analyses of data from the 2011 Census.

Challenges

Establishing a client’s linguistic identity is a key part of ensuring that he or she receives proper care in a health-care facility and within the health-care system. The IDF outlined above works well in a statistical context and is well suited to census purposes. *However, the three variables that make up the IDF present certain practical difficulties when applied in a health-care services setting.* Having to ask three questions to determine a client’s linguistic identity

¹ Office of Francophone Affairs. *More Inclusive Definition of Ontario’s Francophone Population*. Page viewed on June 19, 2012 on the Web Site of the Office of Francophone Affairs: <http://www.ofa.gov.on.ca/en/franco-definition.html>.

² Ibid





may prove to be arduous (for example, in comparison with a sole question asked to any other linguistic group). Particularly in emergency situations, neither the client nor the professional will want to prolong the conversation. Moreover, more questions mean more complicated information technology systems. And lastly, the use of three questions is not necessarily possible or appropriate in all surveys and questionnaires.

Réseau recommendation

Given these challenges, the Réseau conducted a thorough examination on the application of the new definition in a planning context. We discussed the issues with a number of provincial and national stakeholders: the Ministry of Health and Long-Term Care's French Language Health Services office, the Office of Francophone Affairs, the French Language Service Commissioner, the Champlain and South-East LHINs, the Société Santé en français and the Consortium national de formation en santé. We also reviewed the relevant literature, particularly a study on the current practices of health-care providers in the Champlain region.

The Réseau thus recommends that the following two questions be used for planning purposes when it is not possible to apply the full IDF:

- **What is your mother tongue?**
- **If your mother tongue is neither French nor English, in which of Canada's official languages are you more comfortable?**

This combination is in favour of the inclusion of new immigrants whose mother tongue is not French but who know and understand French as an official language, as hoped for by the IDF. The two-variable system will also be easier to integrate into forms, databases, and other client identification processes than a three questions algorithm. These two questions are used to establish a client's linguistic identity.



Applied IDF or “Preferred language”?

The answer to the question on the “language of preference” does not determine a client’s linguistic identity, but rather his or her language preference in a specific service context.

In addition to the recommendation above, the Réseau recommends not asking clients about their “preferred language” of health services because data provided by this question tends to be unreliable when used in the planning of the health-care services. The literature indicates and a number of data pairing exercises confirm that at moments of vulnerability such as health problems, Francophones may not request service in French for fear that their language preference may have a negative effect on quality of service, accessibility of all treatment options, wait times, etc. As well, a recent study by Statistics Canada clearly shows that the presence of health professionals capable of holding a conversation in French and the proportion of Francophones in a given area have an impact on the use of French with various health professionals.³

The question on “language of preference”, relevant in some service delivery situations, may be added to questions about a client’s linguistic identity, but should not replace those questions.

Relation to an active offer

When linguistic identification of clients occurs as part of the admission or reception process, we strongly recommend that French-language services be actively offered.⁴ An active offer is one that is visible, audible, non-random and guarantees quality service. It has been proven that this improves the process of identifying Francophone clients.

³ Corbeil, J.P. & Lafrenière, S. (2011). *Portrait of Official-Language Minorities in Canada: Francophones in Ontario*. Statistique Canada, p. 48.

⁴ Active offer: Active offer is the capacity of an organization to provide clients and citizens with a clear and consistent signal that, no matter where they are, they can receive quality health services in French. For a health facility, this means creating an environment that encourages demand, anticipates the specific needs of Francophones and their community, and guarantees quality service comparable to that offered to Anglophone clients. *Adapted from the French Language Services Commissioner’s Annual Report 2009–2010.*



Who are we ?

The *Réseau des services de santé en français de l'Est de l'Ontario* / French Language Health Services Network of Eastern Ontario (the Réseau) is a Francophone organization that engages the Health-care Community and the Francophone Community in all its diversity to improve the offer and the quality of French Language Health Services in Eastern and South-Eastern Ontario.

The Réseau was appointed by the province as French Language Health Planning Entity for Eastern Ontario on July 1st, 2010.

As such, the Réseau has a mandate to provide advice to the regional health authorities - the Champlain LHIN and the South-East LHIN - on all health issues for the regional Francophone community.

The Réseau is also member of Société Santé en français, a national umbrella organization that brings together the 17 French language health services networks of Canada.

