Document prepared by Statistics Canada for the Standing Senate Committee on Official Languages in the context of their study on Minority language health services

November 1, 2024

Statistics Canada, as the national statistical office, has many data sources on health-related topics, such as how Canadians navigate the health care system, including challenges, barriers or discrimination they may face. This document has been prepared to describe the statistical information produced by Statistics Canada in support to the Senate Committee on Official Languages (OLLO), in their study on health services in the minority official language.

In the context of this study, there are a few sources for which data will be available soon that will provide key information related to access to health services in relation with official languages.

Firstly, the <u>Survey on the Official Language Minority Population</u> (SOLMP), to be gradually released starting December 2024, was conducted to get insights on several aspects of the situation of the English-speaking residents of Quebec and French-speaking residents in the other provinces and territories in Canada, as well as their children. The survey asked, among others, questions on education, language dynamics, use of official languages in various contexts as well as access to justice, government, and health services.

With regards to health care services, the SOLMP collected information on the following topics:

- Importance for respondents to get health care or services in the minority official language, with sub-questions on importance to receive these services from a general practitioner, specialist, nurse, psychologist, pharmacist, dentist, paramedic or social worker
- Availability of health care or services in the minority official language in the respondent's community
- Whether respondents were comfortable asking for care or services in the minority official language at a public health institution or community service centre
 - Reason why respondents would be uncomfortable asking for health care or services in the minority official language
- How often the respondent received health care or services in the minority official language in their community
- How often the respondent asked for health care or services in the minority official language
- Satisfaction with the health care or services received in the minority official language
- How often the respondent received health care or services in the minority official language in the following contexts: hospital, clinic, CLSC or community health centre, drugstore, health information line over the phone, over the phone or virtual consultation with a physician, services provided at home, mental health care, end of life care for a relative
- Whether health care or services in the community are actively offered in the minority official language
- Whether the respondent would prefer receiving remote health care services in the minority official language rather than in-person care or services not in the minority official language
 - Why they would prefer remote health care services in the minority official language.

Specifically designed for official language minorities, the SOLMP sample aimed at providing reliable estimates at the provincial and territorial level, as well as at some regional levels, and gets around the limitations related to the small population size. On the other hand, the SOLMP will not provide information on the official language majorities.

Secondly, the <u>Survey on Health Care Access and Experiences – Primary and Specialist Care</u> (SHCAE-PSC), for which a first release is planned in 2025, aims to better understand how Canadians access and use primary health care and specialist care, as well as the challenges or barriers they may face. The survey is a general population health survey and does not specifically target the official language minorities. It asks several questions on the various aspects of health services among adults living in the ten provinces, including information on the respondent's language in relation to their health professionals.

- Language used by respondent with their health professionals
- Usage of the language of their choice with their health professionals
- Discrimination in a health care setting based on their language
- Unmet care needs because of a language problem
- Unmet care needs because of fear to be discriminated against based on their language.

And finally, in 2024, the <u>Canadian Community Health Survey (CCHS)</u> and the <u>Canadian Health Survey on Children and Youth (CHSCY)</u> are collecting data on access and barriers to health care, including language barriers, which could be of interest in the context of the Senate study. For example, these surveys both collect data related to:

- Language barriers being identified as a reason that their health care was not sensitive to their cultural background and identity.
- Unmet mental health needs due to language or cultural barriers.

These surveys are also general population health surveys and do not specifically target the official language minorities. These data are collected to report annually on Share Health Priorities indicators as part of the collaborative work with the federal and provincial governments: Working together to improve health care for Canadians.

These surveys also include language questions as other general population Statistics Canada surveys typically do. These surveys however are often limited in terms of sample and questions when it comes to official language minorities but provide otherwise detailed information on various dimensions of health.

Finally, it is worth noting another initiative, held in collaboration with Health Canada, and currently under development using the 2021 census information on occupations and languages. It aims at drawing a portrait of health-related workers, looking at their knowledge of official languages as well as the language they use at work. This initiative will update an existing profile based on past censuses.