

HEALTHY EARLY YEARS COMMUNITY SERVICES PLAN (HEYCSP)

2019-2024







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NOTE TO READERS

The following abbreviations are used in this document.

CD Census Division

ECC Early childhood centre

FCFA Fédération des communautés francophones et acadienne du Canada

FOLS First official language spoken

GDP Global Development Plan

HEY Healthy Early Years

HEYCSP Health Early Years Community Services Plan

MFAC Minority Francophone and Acadian communities

PEIFHN PEI French Health Network

PHAC Public Health Agency of Canada

SSF Société Santé en français



EXECUTIVE SUMMARY

Background -

Most minority Francophone and Acadian communities (MFACs) in the country, like those on Prince Edward Island (PEI), do not have access to a wide range of services in French, particularly when it comes to the health and development of children aged 0 to 6.

The Healthy Early Years (HEY) program, funded by the Public Health Agency of Canada (PHAC), is part of a dynamic approach whereby community and government stakeholders work together, joining forces and expertise to develop French-language programs and services in the early childhood health sector.

Minority children -

When dealing with the health and development of children, we must, of course, address their physical and mental health. We must also take into account the socio economic and family environment in which they live. Furthermore, we need to consider the transmission of language and culture, which are essential components of the overall health of minority children.

Methodology -

The suggested methodological approach to developing this Healthy Early Years Community Services Plan (HEYCSP) includes forming a committee made up of community and government partners, a literature search, a series of interviews with provincial departments, analysis of data obtained from Statistics Canada, regional forums, analysis of information gathered by means of a survey of parents and early childhood professionals, and a provincial forum.

Early childhood profile -

Compared with all children of the same age, minority children on the Island seem to live in favourable socio-economic and family conditions, which, in principle, have an impact on their health and development. Despite this, access to services in French is necessary if we want to meet their needs and help them to develop their linguistic and cultural identity, which is an integral part of their overall health.¹

¹ From the data obtained from Statistics Canada, we noted the discrepancy between minority children and all children of the same age in terms of socio-economic and family conditions. Without calling the data into question, early childhood professionals, who are in regular contact with children aged 0 to 6 and their parents, do not have the same perception of reality.

Government programs and services -

A non-exhaustive inventory of programs and services for children aged 0 to 6 and their families was prepared. However, services offered in French, whether through the provision of documentation in French or the delivery of services by employees able to express themselves in French, are fairly limited.

Clients groups and needs -

The research and consultations done showed that the strategy must take into account four specific client groups, each with its own needs. These four client groups are children, parents and families, grandparents, and early childhood professionals (ECC educators, among others). This last group must deal with issues related to children's health and development on a daily basis.

The consultations showed that the top priorities for the first client group—children—are French-language services in pediatrics, speech language pathology, and mental health.

The priorities for the second client group—parents and families—are as follows: getting the tools and support they need to participate in their child's development, knowledge of the resources available in French for parents and families (during pregnancy, at birth, and during a child's first years of life), and knowledge of meeting places for participating in activities in French with their child.

The main needs for grandparents were setting up support groups and having access to information about early childhood health and development.

The priorities for the fourth client group—early childhood professionals—are training and workshops, and access to online information about various subjects of interest.



Findings -

A certain number of findings must be taken into account when the strategy is developed and implemented.

- In its Global Development Plan (GDP), the Acadian and Francophone community of PEI made early childhood a priority.
- The situation is such that it is not possible to fully address the determinant of health related to access to health care services which assumes the delivery of services in the language of children and their families.
- Under the *French Language Services Act*, the Government of PEI undertakes, in accordance with its abilities, to meet the needs of the Acadian and Francophone community with respect to services in French.
- Professionals and service providers who are able to deliver services in French do not systematically make this known.
- The strategy, which is based primarily on children's health and development, must take parents and families into consideration and reflect the important role played by grandparents and early childhood professionals.
- Health programs and services intended for children aged 0 to 6 come under several departments. As a result, government employees do not appear to be familiar with all the services and programs, particularly those offered in French. This situation does not make the provision of information for parents and early childhood professionals any easier.
- There needs to be more cooperation among stakeholders and better information sharing if we are to meet the needs of the target client groups as effectively as possible.
- The development of this strategy enabled parents and professionals to express their views and set priorities. Similar priorities emerged from all the regions. However, certain regional characteristics must be taken into account.
- Community and government partners are willing to collaborate in the hope of coming up with solutions together.



Strategy and focus areas -

The strategy is based on three focus areas, with each comprising two themes:

Focus Area 1 • Access to professionals in French

- 1.1 Promoting existing public services and expanding the offer
- 1.2 Engaging service providers from the private sector

Focus Area 2 • Parent and early childhood capacity building

- 2.1 Support for parents and families
- 2.2 Support for early childhood professionals

▶ Focus Area 3 • Cooperation and knowledge sharing

- 3.1 Collaboration and networking
- 3.2 Research

The courses of action arising from each theme must be implemented as part of an ongoing collaborative effort by community and government partners.

Last of all, the committee set up at the start of the strategy development process must remain active. The expertise brought to the table and the momentum generated within the committee will help in implementing the strategy.



BACKGROUND

Many of the minority Francophone and Acadian communities (MFACs) across the country do not have access to a wide range of services in French, particularly when it comes to the health and development of children aged 0 to 6.

The Healthy Early Years (HEY) program, funded by the Public Health Agency of Canada (PHAC), is part of a dynamic approach whereby community stakeholders in each province and territory work together, joining forces and expertise to develop health promotion programs and services for the early childhood sector in the MFACs.²

This program supports Healthbound 2018-2023, a strategy developed by the Société Santé en français (SSF) and its 16 French health networks working within the Canadian Francophonie.³

▶ The ultimate goals of the HEY program are as follows:

- 1. Plan culturally and linguistically adapted global interventions and health promotion programs to improve the health and development of children (aged 0 to 6) and their families;
- 2. Improve access to early childhood health promotion programs with a view to reducing early childhood health inequities in these communities.⁴

The target outcomes of the HEY program are as follows:

- for Francophone children to have access to a full range of services and programs in French before and after birth and during childhood;
- for parents to receive the support they need to be able to put in place all the conditions required for the healthy development of their children;
- for parents to have equitable access to health care services in French;
- for there to be a sufficient number of health professionals able to provide services in French;
- for there to be enough resources to help the Francophone population rally together and collaborate:
- for there to be more data on the health status of minority Francophone children;
- for there to be more data on the impact of health care services available to Francophone children.⁵

As part of the HEY initiative, the PEI French Health Network (PEIFHN) and its partners worked together on developing a healthy early years community services plan (HEYCSP), as had been done in the other provinces and territories.⁶

Implementation of this five-year strategy hinges on the actions of community and government partners. The projects suggested by proponents must reflect the focus areas set out in the strategy.

² Guide d'accompagnement pour l'implantation du projet Petite enfance en santé, p. 5.

³ Ibid., p. 10.

⁴ Ibid.

⁵ Ibid., p. 10-11.

⁶ Ibid., p. 5.

Minority children -

When dealing with the health and development of children, we must, of course, address their physical and mental health. We must also take into account the socio-economic and family environment in which they live. Furthermore, we need to consider the transmission of language and culture, which are essential components of the overall health of children.

We believe that offering services in French helps to better meet the physical and mental health needs of children. Also, it promotes the transmission of language and culture.

METHODOLOGY



A **committee made up of community and government partners** was formed to validate the key steps in the development of the strategy, while participating in the process. This committee met on December 13, 2019, and on February 18, 2020.



A **literature search** was done between January 2 and 15, 2020 (see "Documentary Resources" section). During that period, **data about early childhood** on PEI were obtained from Statistics Canada. We focused on data we could use to identify the linguistic, socio-economic, and family conditions in which minority children live, compared with all children of the same age.



Interviews were conducted from January 9 to 17. Those interviews were with employees of provincial departments that offer programs or services for children aged 0 to 6 or that have an impact on their health and development. Among these programs and services, we identified those that are offered in French. Four managers or officials from the Department of Health and Wellness, one manager from the Department of Social Development and Housing, and one official from the Department of Education and Lifelong Learning were contacted. (See Appendix 1 for the programs and services identified as being offered in French based on the information gathered during the interviews and research done beforehand on the provincial government's website. To obtain information about all the provincial government's programs and services that are intended for children aged 0 to 6 or that have an impact on their health and development, please contact the PEIFHN.)





Regional forums were held between January 21 and February 3, bringing together 53 participants. At those forums, held in Charlottetown, Summerside, Evangeline, Rustico, West Prince, and Eastern Kings, the participants—mostly parents of children aged 0 to 6, grandparents, and early childhood professionals (such as ECC educators)—had the opportunity to express their views not only on the priority health needs of children, but also on the support their parents and families would need. Because some of the parents could not express themselves in French but had children who attend or will attend a French-speaking child care centre or school, the forums were held in both official languages. (See Appendix 2 for the presentation, which includes the questionnaire used at the forums, and Appendix 3 for a profile of the participants. The parents of children aged 0 to 6 were able to vote electronically at the forums.)



A **survey** was distributed between February 4 and 14 to the parents of children aged 0 to 6 and to early childhood professionals. A total of 59 parents and 7 professionals completed the questionnaire. The regional forums made it possible to validate and improve the questionnaire used in the survey. (See Appendix 4 for the questionnaire used and Appendix 5 for the profile of the survey respondents.)



A **provincial forum** was held in Summerside on February 22. That forum brought together 15 participants and provided an opportunity to present the main outcomes of the consultations, as well as the focus areas and themes of the HEYCSP. It also provided an opportunity to collect other comments, which were used to improve the strategy, particularly the courses of action. Projects aligned with the strategy's focus areas were proposed as well. Before the strategy was looked at, Dr. Elaine Deschênes, a pediatrician, gave a talk on social pediatrics. (See Appendix 6 for the provincial forum program and Appendix 7 for a profile of the participants.)

In the next section, we look at the profile of children aged 0 to 6 in the Acadian and Francophone community of PEI.

EARLY CHILDHOOD PROFILE

The data obtained from Statistics Canada were used to determine the **number of families on PEI** with at least one child under the age of 7. Variables such as child's mother tongue, first official language spoken (FOLS), language spoken most often at home, crossed with median family income, average family income, parents' educational attainment, and family structure, enabled us to identify the linguistic, socio-economic, and family situation of minority children compared with that of all children on PEI.

According to Table 1, there are 10,120 children under the age of 7 on PEI, which represents 7.1% of the population.

Table 1. Number and percentage of children under the age of 7 by census division, Prince Edward Island, 2016

Geographical region	Total population	Number of children under the age of 7	% of children under the age of 7
Prince Edward Island	142,905	10,120	7.1
Kings	17,160	1,090	6.4
Queens	82,020	6,020	7.3
Prince	43,730	3,010	6.9

Source: Statistics Canada, Census of Population, 2016, Table 98-400-X2016004.

Table 2 shows that the **mother tongue of children** is French in 180 families with at least one child under the age of 7. Table 3 shows that these families have a **median income** higher than that of all families on the Island with at least one child under the age of 7, or \$83,320 compared with \$72,570. **Average income** is \$95,326 compared with \$81,407.

Table 2 also shows that **first official language spoken** is French in 135 families with at least one child under the age of 7. Table 3 shows that these families have a **median income** higher than that of all families on the Island with at least one child under the age of 7, or \$87,000 compared with \$72,570. **Average income** is \$99,501 compared with \$81,407.

Table 2 also shows that **French is spoken most often at home** in 135 families with at least one child under the age of 7. Table 3 shows that these families have a **median income** higher than that of all families on the Island with at least one child under the age of 7, or \$88,745 compared with \$72,570. **Average income** is \$98,035 compared with \$81,407.



Table 2. Families with at least one child under the age of 7 according to different linguistic¹ variables of the child, by census division, Prince Edward Island, 2016

Geographical region	Total families	Families w whose mot is Fre	ther tongue whose first official		Families with a child who speaks French most often at home ⁴		
	Number	Number	Percentage	Number	Percentage	Number	Percentage
Prince Edward Island	7,105	180	2.5	135	1.9	135	1.9
Kings	755	0	0.0	0	0.0	0	0.0
Queens	4,300	85	2.0	60	1.4	65	1.5
Prince	2,050	95	4.6	75	3.7	70	3.4



¹ If there is more than one child under the age of 7 in the census family, the language of the oldest child will be used.

 $^{^{\}rm 2}$ French as mother tongue includes French with or without another language.

³ French as first official language spoken (FOLS) includes French with or without another language.

⁴ French as language spoken most often at home includes French with or without another language.

Table 3. Families with at least one child under the age of 7 according to different linguistic variables¹ of the child and median income² and average income³ of the family, by census division, Prince Edward Island, 2016

Income	Total families	Families with a child whose mother tongue is French ⁴	Families with a child whose first official language spoken is French⁵	Families with a child who speaks French most often at home ⁶		
Prince Edward Island						
Median income	\$72,570	\$83,320	\$87,000	\$88,745		
Average income	\$81,407	\$95,326	\$99,501	\$98,035		
Kings	Kings					
Median income	\$69,346	N.A. ⁷	N.A.	N.A.		
Average income	\$74,729	N.A.	N.A.	N.A.		
Queens						
Median income	\$75,254	\$118,287	\$118,671	\$118,532		
Average income	\$86,686	\$106,166	\$119,531	\$115,479		
Prince						
Median income	\$67,995	\$80,153	\$80,036	\$83,108		
Average income	\$72,773	\$84,531	\$83,120	\$82,019		

¹ If there is more than one child under the age of 7 in the census family, the language of the oldest child will be used.

² Median income: "The median income of a specified group is the amount that divides the income distribution of that group into two halves, i.e., the incomes of half of the units in that group are below the median, while those of the other half are above the median." Statistics Canada, Census of Population, 2016, special order.

³ Average income: "Average income of a specified group is calculated by dividing the aggregate income of that group by the number of units in that group. Average incomes of individuals are calculated for those with income (positive or negative)." Statistics Canada, Census of Population, 2016, special order.

⁴ French as mother tongue includes French with or without another language.

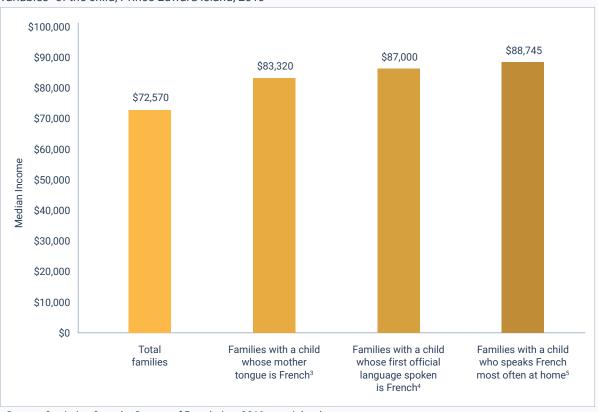
⁵ French as first official language spoken (FOLS) includes French only.

⁶ French as language spoken most often at home includes French with or without another language.

⁷ Data are not available because of small population.

Data on median income and average income, according to linguistic variables, are represented in Chart 1 and Chart 2.

Chart 1. Median income¹ of families with at least one child under the age of 7 according to different linguistic variables² of the child, Prince Edward Island, 2016



¹ Median income: "The median income of a specified group is the amount that divides the income distribution of that group into two halves, i.e., the incomes of half of the units in that group are below the median, while those of the other half are above the median." Statistics Canada, Census of Population, 2016, special order.

² If there is more than one child under the age of 7 in the census family, the language of the oldest child will be

³ French as mother tongue includes French with or without another language.

⁴ French as first official language spoken (FOLS) includes French only.

 $^{^{\}rm 5}$ French as language spoken most often at home includes French with or without another language.



Chart 2. Average income¹ of families with at least one child under the age of 7 according to different linguistic variables² of the child, Prince Edward Island, 2016

¹ Average income: "Average income of a specified group is calculated by dividing the aggregate income of that group by the number of units in that group. Average incomes of individuals are calculated for those with income (positive or negative)." Statistics Canada, Census of Population, 2016, special order.

 $^{^{2}}$ If there is more than one child under the age of 7 in the census family, the language of the oldest child will be used.

³ French as mother tongue includes French with or without another language.

⁴ French as first official language spoken (FOLS) includes French only.

⁵ French as language spoken most often at home includes French with or without another language.

Table 4 shows that families with Francophone or exogamous parents and at least one child under the age of 7 have a **median income** higher than that of all families on the Island with at least one child under the age of 7, i.e., \$86,928 compared with \$72,570. **Average income** is \$97,714 compared with \$81,407.

Table 4. Median income¹ and average income² of Francophone³ or exogamous parents⁴ with at least one child under the age of 7, by census division, Prince Edward Island, 2016

Income	Total families	Families with Francophone or exogamous parents			
Prince Edward Island					
Median income	\$72,570	\$86,928			
Average income	\$81,407	\$97,714			
Kings	Kings				
Median income	\$69,346	N.A. ⁵			
Average income	\$74,729	N.A.			
Queens					
Median income	\$75,254	\$92,881			
Average income	\$86,686	\$106,690			
Prince					
Median income	\$67,995	\$86,717			
Average income	\$72,773	\$88,644			

Source: Statistics Canada, Census of Population, 2016, special order.

Data on median income and average income, by Francophone or exogamous families, are represented in Chart 3.

¹Median income: "The median income of a specified group is the amount that divides the income distribution of that group into two halves, i.e., the incomes of half of the units in that group are below the median, while those of the other half are above the median." Statistics Canada, Census of Population, 2016, special order.

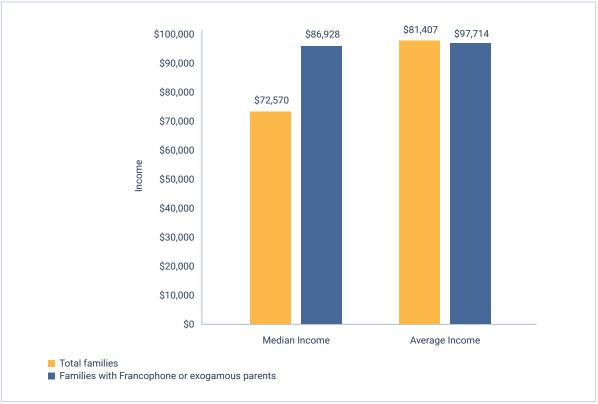
² Average income: "Average income of a specified group is calculated by dividing the aggregate income of that group by the number of units in that group. Average incomes of individuals are calculated for those with income (positive or negative)." Statistics Canada, Census of Population, 2016, special order.

³ Francophone parents are parents whose mother tongue is French, with or without another language. In this calculation, either both parents are Francophone or one parent is Francophone (exogamous couple).

⁴ Parents include parents in couples, single parents, different-sex parents, and same-sex parents.

⁵ Data are not available because of small population.





- ¹ Median income: "The median income of a specified group is the amount that divides the income distribution of that group into two halves, i.e., the incomes of half of the units in that group are below the median, while those of the other half are above the median." Statistics Canada, Census of Population, 2016, special order.
- ² Average income: "Average income of a specified group is calculated by dividing the aggregate income of that group by the number of units in that group. Average incomes of individuals are calculated for those with income (positive or negative)." Statistics Canada, Census of Population, 2016, special order.
- ³ Francophone parents are parents whose mother tongue is French, with or without another language. In this calculation, either both parents are Francophone or one parent is Francophone (exogamous couple).
- ⁴ Parents include parents in couples, single parents, different-sex parents, and same-sex parents.

Table 5 shows that **educational attainment** within Francophone or exogamous families with at least one child under the age of 7 is higher than that of all families with at least one child under the age of 7. Also, 42.3% of Francophone or exogamous families have a certificate, diploma, or university degree at the bachelor's level or above compared with 28.4% for all families.

Table 5. Families with at least one child under the age of 7 by educational attainment of Francophone¹ or exogamous parents,² Prince Edward Island,³ 2016

Educational attainment	Total fa	Total families		Families with Francophone or exogamous parents ⁴	
	Number	Percentage	Number	Percentage	
Total—Highest certificate, diploma, or degree of reference person	7,100	100	355	100	
No certificate, diploma, or degree	530	7.5	20	5.6	
High school diploma or equivalency certificate	1,840	25.9	60	16.9	
Apprenticeship or trades certificate or diploma	470	6.6	0	0.0	
College, CEGEP, or other non-university certificate or diploma	2,095	29.5	110	31.0	
University certificate or diploma below bachelor	150	2.1	0	0.0	
Certificate, diploma, or university degree at bachelor's level or above	2,015	28.4	150	42.3	
Bachelor	1,380	19.4	90	25.4	
University certificate, diploma, or degree above bachelor	640	9.0	55	15.5	

Source: Statistics Canada, Census of Population, special order.

Data on educational attainment, by Francophone or exogamous families, are represented in Chart 4.

¹ Francophone parents are parents whose mother tongue is French, with or without another language. In this calculation, either both parents are Francophone or one parent is Francophone (exogamous couple).

² Parents include parents in couples, single parents, different-sex parents, and same-sex parents.

³ Owing to the small number of Francophone families in the census divisions (CDs) on Prince Edward Island, the educational attainment of parents is not presented for the geographical regions because these data should be interpreted with caution.

⁴ Because of random rounding by Statistics Canada, the totals (number and percentage) may not correspond to the sum of the values indicated in the columns.

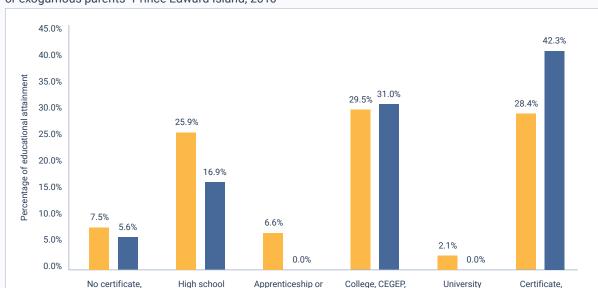


Chart 4. Families with at least one child under the age of 7, by educational attainment of Francophone¹ or exogamous parents² Prince Edward Island, 2016

Source: Statistics Canada, Census of Population, 2016, special order.

diploma

or equivalency certificate

diploma, or degree

■ Families with Francophone or exogamous parents

■ Total families

¹ Francophone parents are parents whose mother tongue is French, with or without another language. In this calculation, either both parents are Francophone or one parent is Francophone (exogamous couple).

trades certificate

or diploma

or other

non-university certificate

or diploma

certificate

or diploma below bachelor diploma, or

university degree at bachelor's level

or above

² Parents include parents in couples, single parents, different-sex parents, and same-sex parents.

Table 6 shows that the **family structure** of Francophone or exogamous parents with at least one child under the age of 7 is characterized by a higher percentage of couple families compared with all families with at least one child under the age of 7: 94.4% for Francophone or exogamous families and 78.2% for all families.

Table 6. Families with at least one child under the age of 7, by family structure of Francophone¹ or exogamous parents,² Prince Edward Island,³ 2016

Family structure	Total families		Families with Francophone or exogamous parents	
	Number	Percentage	Number	Percentage
Total—Structure of census family	7,100	100	355	100
Two-parent families	5,555	78.2	335	94.4
Single-parent families	1,550	21.8	20	5.6

Source: Statistics Canada, Census of Population, 2016, special order.

Data on family structure, by Francophone or exogamous families, are presented in Chart 5.



¹ Francophone parents are parents whose mother tongue is French, with or without another language. In this calculation, either both parents are Francophone or one parent is Francophone (exogamous couple).

² Parents include parents in couples, single parents, different-sex parents, and same-sex parents.

³ Owing to the small number of Francophone families in the census divisions (CDs) on Prince Edward Island, the family structure of parents is not presented for the geographical regions because these data should be interpreted with caution.

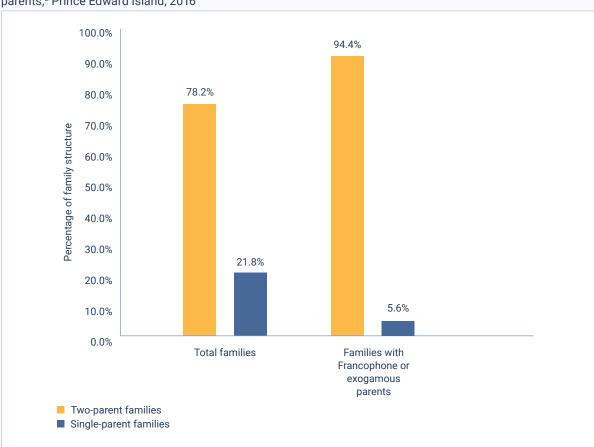


Chart 5. Families with at least one child under the age of 7, by family structure of Francophone¹ or exogamous parents,² Prince Edward Island, 2016

Source: Statistics Canada, Census of Population, 2016, special order.

Although Francophone children seem to be living in more favourable socio-economic and family conditions, which have, in principle, an impact on their health and development, we believe that receiving services in French is necessary if we want to better meet their needs and promote the development of their linguistic and cultural identity, which, as was mentioned earlier, is an essential part of their overall health.⁷

Before looking at needs, we will turn our attention to government programs and services.

¹ Francophone parents are parents whose mother tongue is French, with or without another language. In this calculation, either both parents are Francophone or one parent is Francophone (exogamous couple).

² Parents include parents in couples, single parents, different-sex parents, and same-sex parents.

⁷ Without calling into question the data received from Statistics Canada, early childhood professionals, who are in regular contact with children aged 0 to 6 and their parents, do not have the same perception of reality.

GOVERNMENT PROGRAMS AND SERVICES

The research and interviews done with managers in the provincial public service enabled us to prepare a non-exhaustive inventory of programs and services that are provided for children aged 0 to 6 and their families or that have an impact on them.

According to the grid we used to gather information, different provincial government departments offer programs and services in the following areas: mental health; nutrition; hearing care; eye care; occupational therapy; motor skills; dental care; promotion of physical activity; screening; care during pregnancy, birth, and the first years of life; healthy parent-child relationships; development of parenting skills; safety and well-being; language development; language skills and francization; and transmission of the French language and Francophone identity.

Services offered in French, whether through the provision of documentation in French or the delivery of services by employees able to express themselves in French, are fairly limited. (See Appendix 1 for the programs and services identified as being offered in French based on the information gathered during the interviews and research done beforehand on the provincial government's website.)

Admittedly, the parents and professionals consulted noted that certain services are available in French. However, they are not sufficiently available. Furthermore, the children of some parents are on waiting lists.

The following section looks at the priority needs expressed during the consultations.



CLIENT GROUPS AND NEEDS

The research and consultations that were done showed, within the context of the Acadian and Francophone community of PEI, that the strategy needs to take into consideration four specific client groups, each with its own needs. Those needs were expressed particularly at the regional forums, in the survey, and at the provincial forum.

The parents and early childhood professionals who participated in the regional forums, the survey, and the provincial forum started off by expressing the needs of the first client group—children aged 0 to 6. Parents and families, who need support in some cases, are the second client group. The third client group is grandparents, mostly because of their importance in the transmission of the French language and Francophone identity to their grandchildren. Last, early childhood professionals—for example, educators at early childhood centres (ECCs) or daycare homes—make up the fourth client group to be considered. This last group has to deal with issues related to children's health and development, but they do not always have the expertise and the support they need to act effectively.

Tables 7 to 13 show the needs expressed by parents and early childhood professionals during the strategy development process.

Each table looks at the prenatal period (9 months), including birth, the postnatal period, and the first years of life (0 to 6). For each of these periods, the priority needs of each client group are indicated. These needs were prioritized on the basis of a list of options identified beforehand and used at the regional forums and in the survey.

The options proposed for the first client group—children—were physiotherapy (physical rehabilitation), occupational therapy (physical, psychological, and intellectual rehabilitation), speech language pathology (language), audiology (hearing), optometry (vision), dental care, mental health, and nutrition.



The options proposed for the second client group—parents and families—were as follows:

- Knowledge of the resources available in French for parents and their families (during pregnancy, at birth, and during the child's first years of the life);
- · Having access to screening programs related to children's health and development;
- More knowledge about the financial supports available (especially for housing, food, purchase of safe equipment, physical activity, etc.);
- Knowledge of how to better manage stress and emotions;
- · Attending meeting groups with other parents;
- Knowledge of meeting places for participating in activities in French with their child;
- Having free transportation to access programs and services in the community;
- · Learning how to make more time for themselves;
- · Having access to counselling services (psychological support).

The third client group—grandparents—was not given response options. We just collected their views, particularly at the regional forums and during discussions. Setting up support groups and having access to information about early childhood health and development were the main needs expressed.

The response options for the fourth client group—early childhood professionals—were as follows: training and workshops, documentation (leaflets, etc.), and online information.

Tables 7 to 12 show all of the proposed response options and the options that were priorities in each of the six regions of the province: Charlottetown, Summerside, Evangeline, Rustico, West Prince, and Eastern Kings. The priorities were identified at the regional forums. Table 13 presents the priorities that were identified across the province based on the options presented in the survey.⁸

At the forum in Charlottetown, the priorities identified by the participants for children, as shown in Table 7, were speech language pathology, dental care, mental health, and nutrition, with some services ranked equally. For parents and families, the participants prioritized knowledge of resources available in French, access to meeting groups with other parents, and knowledge of meeting places for participating in French activities with their child.

At this forum, the participants did not prioritize specific services for grandparents or early childhood professionals, as was done at the other regional forums. However, they did have several opportunities to stress the important role of grandparents, as well as the importance of supporting professionals in their work with children aged 0 to 6.

⁸ Maurice Chiasson Consultants Inc. Petite enfance en santé (PES): Rapport de sondage présenté au Réseau Santé en français Î.-P.-É (RSFÎPÉ), February 15, 2020, p.5.

Table 7 • Region: Charlottetown

	9 months	0 t	o 6
	Prenatal period (pregnancy)	Postnatal period (including birth)	First years of life
Client group 1	Children	Children	Children
Services			Physiotherapy Occupational therapy Speech language pathology Audiology Optometry Dental care Mental health Nutrition
Client group 2	Parents and families (Francophone, Anglophone, and other—and newcomers)	Parents and families (Francophone, Anglophone, and other—and newcomers)	Parents and families (Francophone, Anglophone, and other—and newcomers)
Services	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French* Free transportation Time for myself Counselling	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French Free transportation Time for myself Counselling	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French Free transportation Time for myself Counselling
Client group 3		Grandparents (Francophone)	Grandparents (Francophone)
Services		Support groups Information	Support groups Information
Client group 4		Professionals (kindergartens, ECCs, after-school services, family daycare homes, family resource centres)	Professionals (kindergartens, ECCs, after-school services, family daycare homes, family resource centres)
Services		Training and workshops Documentation Online information	Training and workshops Documentation Online information

^{*} Starting in postnatal period.

At the forum in Summerside, the priorities identified by the participants for children, as shown in Table 8, were speech language pathology, dental care, mental health, and nutrition, with some services ranked equally. For parents and families, the participants prioritized knowledge of resources available in French, access to meeting groups with other parents, and knowledge of meeting places for participating in activities in French with their child.

Table 8 • Region: Summerside

	9 months	0 t	o 6	
	Prenatal period (pregnancy)	Postnatal period (including birth)	First years of life	
Client group 1	Children	Children	Children	
Services			Physiotherapy Occupational therapy Speech language pathology Audiology Optometry Dental care Mental health Nutrition	
Client group 2	Parents and families (Francophone, Anglophone, and other—and newcomers)	Parents and families (Francophone, Anglophone, and other—and newcomers)	Parents and families (Francophone, Anglophone, and other—and newcomers)	
Services	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French* Free transportation Time for myself Counselling	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French Free transportation Time for myself Counselling	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French Free transportation Time for myself Counselling	
Client group 3		Grandparents (Francophone)	Grandparents (Francophone)	
Services		Support groups Information	Support groups Information	
Client group 4		Professionals (kindergartens, ECCs, after-school services, family daycare homes, family resource centres)	Professionals (kindergartens, ECCs, after-school services, family daycare homes, family resource centres)	
Services		Training and workshops Documentation Online information	Training and workshops Documentation Online information	

^{*} Starting in postnatal period.

At the forum held in the Evangeline region, the priorities identified by the participants for children, as shown in Table 9, were speech language pathology, dental care, and mental health. For parents and families, the participants prioritized knowledge of the resources available in French, knowledge of the financial supports available (for housing, food, purchase of safe equipment, physical activity, etc.), and knowledge of meeting places for participating in activities in French with their child.

Table 9 • Region: Evangeline

	9 months	0 t	o 6
	Prenatal period (pregnancy)	Postnatal period (including birth)	First years of life
Client group 1	Children	Children	Children
Services			Physiotherapy Occupational therapy Speech language pathology Audiology Optometry Dental care Mental health Nutrition
Client group 2	Parents and families (Francophone, Anglophone, and other—and newcomers)	Parents and families (Francophone, Anglophone, and other—and newcomers)	Parents and families (Francophone, Anglophone, and other—and newcomers)
Services	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French* Free transportation Time for myself Counselling	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French Free transportation Time for myself Counselling	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French Free transportation Time for myself Counselling
Client group 3		Grandparents (Francophone)	Grandparents (Francophone)
Services		Support groups Information	Support groups Information
Client group 4		Professionals (kindergartens, ECCs, after-school services, family daycare homes, family resource centres)	Professionals (kindergartens, ECCs, after-school services, family daycare homes, family resource centres)
Services		Training and workshops Documentation Online information	Training and workshops Documentation Online information

^{*} Starting in postnatal period.

At the forum in Rustico, the priorities identified by the participants for children, as shown in Table 10, were speech language pathology, dental care, and mental health. For parents and families, the participants prioritized knowledge of the resources available in French, knowledge of the financial supports available, knowledge of how to better manage stress and emotions, and knowledge of meeting places for participating in activities in French, with some services ranked equally.

Table 10 • Region: Rustico

	9 months	0 t	o 6
	Prenatal period (pregnancy)	Postnatal period (including birth)	First years of life
Client group 1	Children	Children	Children
Services			Physiotherapy Occupational therapy Speech language pathology Audiology Optometry Dental care Mental health Nutrition
Client group 2	Parents and families (Francophone, Anglophone, and other—and newcomers)	Parents and families (Francophone, Anglophone, and other—and newcomers)	Parents and families (Francophone, Anglophone, and other—and newcomers)
Services	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French Free transportation Time for myself Counselling	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French Free transportation Time for myself Counselling	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French Free transportation Time for myself Counselling
Client group 3		Grandparents (Francophone)	Grandparents (Francophone)
Services		Support groups Information	Support groups Information
Client group 4		Professionals (kindergartens, ECCs, after-school services, family daycare homes, family resource centres)	Professionals (kindergartens, ECCs, after-school services, family daycare homes, family resource centres)
Services		Training and workshops Documentation Online information	Training and workshops Documentation Online information

^{*} Starting in postnatal period.

At the forum in West Prince the priorities identified by the participants for children, as shown in Table 11, were occupational therapy, speech language pathology, audiology, and mental health, with some services ranked equally. For parents and families, the participants prioritized knowledge of the resources available in French, knowledge of the financial supports available, and access to meeting groups with other parents.

Table 11 • Region: West Prince

	9 months	0 t	o 6
	Prenatal period (pregnancy)	Postnatal period (including birth)	First years of life
Client group 1	Children	Children	Children
Services			Physiotherapy Occupational therapy Speech language pathology Audiology Optometry Dental care Mental health Nutrition
Client group 2	Parents and families (Francophone, Anglophone, and other—and newcomers)	Parents and families (Francophone, Anglophone, and other—and newcomers)	Parents and families (Francophone, Anglophone, and other—and newcomers)
Services	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French Free transportation Time for myself Counselling	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French Free transportation Time for myself Counselling	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French Free transportation Time for myself Counselling
Client group 3		Grandparents (Francophone)	Grandparents (Francophone)
Services		Support groups Information	Support groups Information
Client group 4		Professionals (kindergartens, ECCs, after-school services, family daycare homes, family resource centres)	Professionals (kindergartens, ECCs, after-school services, family daycare homes, family resource centres)
Services		Training and workshops Documentation Online information	Training and workshops Documentation Online information

At the forum in Eastern Kings, the priorities identified by the participants for children, as shown in Table 12, were occupational therapy, speech language pathology, optometry, and mental health, with some services ranked equally. For parents and families, the participants prioritized knowledge of the resources available in French, access to meeting groups with other parents, and knowledge of meeting places for participating in activities in French with their child.

Table 12 • Region: Eastern Kings

	9 months	0 to 6	
	Prenatal period (pregnancy)	Postnatal period (including birth)	First years of life
Client group 1	Children	Children	Children
Services			Physiotherapy Occupational therapy Speech language pathology Audiology Optometry Dental care Mental care Nutrition
Client group 2	Parents and families (Francophone, Anglophone, and other—and newcomers)	Parents and families (Francophone, Anglophone, and other—and newcomers)	Parents and families (Francophone, Anglophone, and other—and newcomers)
Services	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French* Free transportation Time for myself Counselling	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French Free transportation Time for myself Counselling	Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French Free transportation Time for myself Counselling
Client group 3		Grandparents (Francophone)	Grandparents (Francophone)
Services		Support groups Information	Support groups Information
Client group 4		Professionals (kindergartens, ECCs, after-school services, family daycare homes, family resource centres)	Professionals (kindergartens, ECCs, after-school services, family daycare homes, family resource centres)
Services		Training and workshops Documentation Online information	Training and workshops Documentation Online information

^{*} Starting in postnatal period.

The provincial priorities were based on the survey results. The priorities identified by the parents for children, as shown in Table 13, were pediatrics, speech language pathology, and mental health. The early childhood professionals who completed the survey prioritized the same services.

 $^{^{9}}$ Pediatrics was added to the survey questionnaire as a response option. It was not included in the questionnaire used at the regional forums.

Table 13 • Prince Edward Island

	9 months	0 to 6	
	Prenatal period (pregnancy)	Postnatal period (including birth)	First years of life
Client group 1	Children	Children	Children
Services		Pediatrics	Pediatrics Physiotherapy Occupational therapy Speech language pathology Audiology Optometry Dental care Mental health Nutrition
Client group 2	Parents and families (Francophone, Anglophone, and other—and newcomers)	Parents and families (Francophone, Anglophone, and other—and newcomers)	Parents and families (Francophone, Anglophone, and other—and newcomers)
Services	Provided with tools and support Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French* Free transportation Time for myself Counselling	Provided with tools and support Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French Free transportation Time for myself Counselling	Provided with tools and support Resources in French Screening questionnaires Financial supports Stress and emotions management Meeting groups Activities in French Free transportation Time for myself Counselling
Client group 3		Grandparents (Francophone)	Grandparents (Francophone)
Services		Support groups Information	Support groups Information
Client group 4		Professionals (kindergartens, ECCs, after-school services, family daycare homes, family resource centres)	Professionals (kindergartens, ECCs, after-school services, family daycare homes, family resource centres)
Services		Training and workshops Documentation Online information	Training and workshops Documentation Online information

^{*} Starting in postnatal period.

The priorities identified by the parents for themselves and their families were getting the tools and support they needed to participate in their child's development, howledge of the resources available in French, and knowledge of meeting places for participating in activities in French with their child. The top priority identified by early childhood professionals for parents and families was getting tools and support.

There were no questions intended specifically for grandparents in the survey questionnaire. However, as was mentioned previously, discussions with the grandparents who participated in the consultation made it possible to identify the following services: setting up support groups and the importance of having access to information about children's health and development.

Last, the professionals who completed the survey identified training and workshops and online information as priority supports for their work.

 $^{^{10}}$ This response option was added to the survey questionnaire. It was not included in the questionnaire used at the regional forums.

FINDINGS

Before the strategy's focus areas and suggested courses of action are presented, the goals and target outcomes of the Healthy Early Years (HEY) program should be reiterated. Also, some of the findings arising from the analysis of the information gathered during the research and consultation phase should be reviewed. The strategy is based on these and other findings.

The goals of the HEY program are based on the following:

- Planning culturally and linguistically adapted global interventions and health promotion programs to improve the health and development of children aged 0 to 6 and their families;
- Improving access to early childhood health promotion programs with a view to reducing early childhood health iniquities in the MFACs.¹¹

We believe that the target outcomes provide us with a better understanding of the scope of the program, which deals not only with promotion but also with expanding the delivery of early childhood health care services in French. The target outcomes are as follows:

- for Francophone children to have access to a full range of services and programs in French before and after birth and during childhood;
- for parents to receive the support they need to be able to put in place all the conditions required for the healthy development of their children;
- for parents to have equitable access to health care services in French;
- for there to be a sufficient number of health professionals able to provide services in French;
- for there to be enough resources to help the Francophone population rally together and collaborate;
- for there to be more data on the health status of minority Francophone children;
- for there to be more data on the impact of health care services available to Francophone children.¹²

With respect to these findings, it should be noted that the Acadian and Francophone community of PEI identified early childhood as a priority in its Global Development Plan (GDP).¹³ This implies that children's needs must be met and that children are able to fully embrace the language and culture of their community so they can thrive within that community and contribute to it in the long term.

¹¹ Guide d'accompagnement pour l'implantation du projet Petite enfance en santé, p. 10.

¹² Ibid, pp. 10-11.

¹³ Acadian and Francophone Community of Prince Edward Island. Global Development Plan, 2017-2027, p. 4.

Also, the *determinants of health* include a broad range of personal, social, economic, and environmental factors that determine the health of an individual or a population. The key determinants of health are as follows¹⁴:

- 1. income and social status
- 2. employment and working conditions
- 3. education and literacy
- 4. childhood experiences
- 5. physical environments
- 6. social supports and coping skills
- 7. healthy behaviours
- 8. access to health services
- 9. biology and genetic endowment
- 10. gender
- 11. culture
- 12. race and racism.

We noted, from the statistical analysis, that minority children on PEI live in favourable socio-economic and family conditions compared with all children aged 0 to 6 in the province. This makes it possible to address a certain number of material and affective determinants; however, we can see that this does not make it possible to fully address the determinant of access to health care services, which assumes that services are provided in the language of the child and the child's family.

Under the *French Language Services Act*, amended in 2013, the Government of PEI undertakes, in accordance with its abilities, to meet the needs of the Acadian and Francophone community with respect to services in French. The Government's departments and agencies must table an annual action plan in this regard. Departments and agencies offering programs and services that are intended for children aged 0 to 6 or that have an impact on their health are, of course, subject to this obligation.¹⁵ However, we have noted, on the basis of the research and consultations that were done, that few health care programs and services are provided in French for children aged 0 to 6 and their families.¹⁶

Professionals and service providers who are able to offer services in French do not systematically make this known, and the health care system does not collect this information. According to the last census, 4,865 Islanders (single responses) have French as their mother tongue. However, the number of Islanders who can express themselves in French, including mother-tongue Francophones, would be 17,955.¹⁷ We assume that a certain number of other French speakers work in the health care field.

The strategy, which is based primarily on children's health, must take parents and families into consideration and reflect the important role of grandparents and early childhood professionals. They all have a role to play in child development and must therefore be supported.

¹⁷ Fédération des communautés francophones et acadienne du Canada (FCFA)/ Statistics Canada. 2016 Census.



¹⁴ https://www.canada.ca/en/public-health/services/health-promotion/population-health/what-determines-health.html

¹⁵ https://www.princeedwardisland.ca/en/information/executive-council-office/french-language-services-act-overview

¹⁶ Prince Edward Island. French Language Services Act, c. F. 15-2, December 14, 2013.



The programs and services that are intended for young children or that have an impact on their health and development come under several departments. As a result, government employees do not seem to be familiar with all programs and services, particularly those offered in French. This situation does not make the provision of information for parents and early childhood professionals any easier.

We feel that better cooperation among stakeholders and better information sharing are necessary if we are to meet the needs of the target client groups as effectively as possible.

The process of developing the strategy enabled parents and early childhood professionals to express their views and set priorities. We note that a certain number of similar priorities emerged from all the regions. However, we observe certain regional characteristics that must be taken into consideration when the strategy is implemented, particularly when it comes to support for parents and families. In certain communities, a number of parents wanting their children to be educated in French are Anglophone. Their specific needs include a Francophone space where they and their children can be more exposed to the French language.¹⁸

Last of all, we noted a willingness to work together among community and government partners, who hope to come up with solutions together. The strategy must be implemented with this in mind.

¹⁸ Moreover, we noted that English is the only official language spoken by 51% of parents who completed the survey. Maurice Chiasson Consultants Inc. *Petite enfance en santé (PES)*: *Rapport de sondage présenté au Réseau Santé en français î.-P.-É. (RSFÎPÉ)*, February 15, 2020, p. 5.

STRATEGY AND FOCUS AREAS



The strategy is based on three focus areas:

- ▶ 1 Access to professionals in French
- ▶ 2 Parent and early childhood capacity building
- ▶ 3 Cooperation and knowledge sharing

Each focus area comprises two themes. All themes and courses of action are concerned with both health promotion and the delivery of direct services.



▶ Focus Area 1 • Access to professionals in French

1.1 - Promoting existing public services and expanding the offer

Suggested courses of action:

- **Use a Francophone lens** to ensure more fairness in accessing services in French for children aged 0 to 6 and their families.
- Have access to a **bilingual navigator** within government to refer parents and professionals to public services intended for young children.
- Start a dialogue with the departments to emphasize the importance of **capturing the linguistic variable** of health care professionals.
- Update the list of **bilingual services and professionals** in the health sector. Post this list on the provincial government's website.
- Encourage professionals to register in the **PEIFHN's directory**.
- Prepare a map of existing public services for Francophone families.
- · Promote active offer within the public service.
- Set up flying squads of professionals who can speak French and would ensure a presence in the regions.
- · Set up ad hoc screening clinics.
- Explore the possibility of offering a **prenatal and postnatal support program** in French.
- · Continue efforts to recruit bilingual students in the health sector who are Islanders.
- Encourage Francophone students to **explore career opportunities** in the health sector.
- Offer **incentives** for recruiting Francophone health care professionals.
- Use **electronic means** to access Francophone professionals from other provinces.
- Offer children the following services in French on a priority basis:
 - Pediatrics
 - Speech language pathology
 - · Mental health.

(Take into account the individual needs of the regions – see Tables 7 to 12, pages 29 to 35.)

1.2 - Engaging service providers from the private sector

Suggested courses of action:

- · Promote active offer among private sector professionals.
- Collaborate with professional organizations so they will publicize the linguistic capacities of their members.
- Explore the possibility of hiring professionals working in the private sector to offer services in French. These professionals would be from the Island or elsewhere. They could offer services remotely.

Focus Area 2 • Parent and early childhood capacity building

2.1 - Support for parents and families

Suggested courses of action:

- Provide parents and families with the following supports on a priority basis:
 - · Tools and support for participating in child development.
 - Knowledge of the resources available in French for parents and families (during pregnancy, at birth, and during the first years of a child's life). Development of an information kit.
 - Knowledge of meeting places for participating in activities in French with their child.

(Take into account the individual needs of the regions – see Tables 7 to 12, pages 29 to 35.)

- Set up an **information center** for parents and professionals to inform them about existing early childhood services and activities.
- Inform parents about the **tools available to them** so they can take appropriate action with their child.
- Form a **multidisciplinary team** to inform and support parents and families.
- Offer psychological **support** to Francophone mothers after they give birth.
- Inform newcomers, through the organizations that welcome them, about how the health care system and medical practices operate in Canada.
- Set up **support groups for grandparents** so they can discuss the importance of their role with their grandchildren, particularly when it comes to language and culture transmission.
- Promote exchanges between grandparents and children aged 0-6 who do not have grandparents nearby.
- Encourage **non-Francophone parents** to participate in their children's development and learning in French.
- Create **opportunities for learning French** for non-Francophone parents so they can contribute to their child's Francophone space.
- Adopt mechanisms for connecting effectively with parents of children aged 0 to 6 and their families.

2.2 - Support for early childhood professionals

Suggested courses of action:

- **Inform educators about the health and development services** available to children aged 0-6.
- **Support child care service professionals** in their work, particularly when it comes to **children's mental health**. They could be given mental health training for clients aged 0-6.
- Create **opportunities for exchange** between health care professionals and child care service professionals.
- Offer **online training and information** to professionals based on the specific needs they express.
- Introduce a **mechanism for the ongoing identification of the needs** of professionals when it comes to the health of children aged 0-6.
- **Recognize the value** of child care service employees by making building their capacities a priority.
- Support the **promotion of community organizations** that offer services for children aged 0 to 6 and their families.

Focus Area 3 • Cooperation and knowledge sharing

3.1 - Collaboration and networking

Suggested courses of action:

- Strengthen the **exchange of information and collaborative initiatives** between departments and the community.
- Share best practices with community and government stakeholders.
- Implement **mechanisms for sharing** information, resources, and expertise.
- Support the development and promotion of an **exchange and webinar platform** to promote the transfer of knowledge and the delivery of training in French.

3.2 - Research

Suggested courses of action:

- Increase the community's research capacity.
- **Engage in ongoing data collection** in order to fully understand the health status and development of children aged 0-6.
- Obtain, on a continuous basis, **demographic and socio-economic data concerning the minority community** to identify the environment in which children live.
- · Popularize and publicize research results.
- Implement a **strategic watch** for the purpose of preparing an inventory of best practices.



PROJECT SELECTION CRITERIA

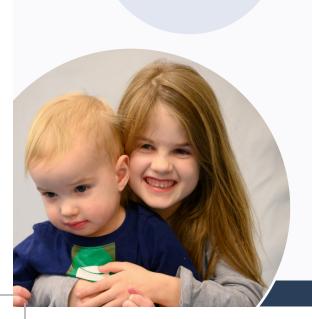
When it comes to implementing the strategy, the PEIFHN, in cooperation with its partners, is responsible for analyzing the proposed projects. (See Appendix 8 – Assessment Grid, taken from the *Guide d'accompagnement pour l'implantation du projet Petite enfance en santé*.)

The proposed project assessment grid is based on the following criteria:

- · PHAC eligibility requirements;
- full alignment of the project with the orientations of the HEYCSP;
- · direct link between the project and health promotion and prevention;
- demonstration of ongoing cooperation with the PEIFHN and stakeholders while the project is being implemented;
- projects whose objectives, indicators, activities, outcomes, and budget are SMART (Specific, Measurable, Achievable, Realistic, Time-based).

Also, in the PEI context, each proposed project must receive approval from all early childhood professionals. It must not benefit just one particular organization. It must have spinoffs for all children aged 0-6, it must have early childhood benefits across all regions of the Island, it must take into consideration the needs of newcomers; and, last of all, the proponent must demonstrate that it has the ability to assess the project outcomes using a data collection mechanism.

Once completed, the analysis grid must be signed by the PEIFHN on behalf of the partners and the proponent. This analysis is an integral part of the proponent's project proposal, which is then forwarded to the SSF for validation by the national early childhood management committee.



CONCLUSION

A strategy designed to improve the health and development of young children in minority settings must, of course, address their physical and mental health. It must also take into account the family and socio-economic conditions in which they live. Furthermore, it must promote the transmission of language and culture, which are essential components of the overall health of children.

We wish to reiterate that the provision of services in French contributes not only to meeting the physical and mental health needs of children more effectively but also to promoting language and culture transmission.

As was mentioned earlier, we have noted a willingness among community and government partners to collaborate to order to come up with solutions together. The strategy must be implemented with this in mind.

Furthermore, the committee made up of community and government partners that was set up at the start of the strategy development process must remain active. We believe that the expertise brought to the table and the momentum generated within this committee will help in implementing the strategy.



DOCUMENTARY RESOURCES

Acadian and Francophone Community of Prince Edward Island. 2017-2027 Global Development Plan, 16 pages.

Kathleen Flanagan. *PEI Early Learning Framework: Relationships, Environments and Experiences: The Curriculum Framework of the Preschool Excellence Initiative,* 2011, 191 pages.

Guide d'accompagnement pour l'implantation du projet Petite enfance en santé, November 5, 2019, 42 pages.

Health and Wellness, Chief Public Health Office (CPHO). *Health for All Islanders*: 2019 2021: CPHO Strategic Plan, 11 pages.

Centre for Health Promotion, Public Health Agency of Canada. *Ce que nous avons entendu*: Consultation de l'Agence de la santé publique du Canada auprès des intervenants travaillant en promotion de la santé pour la petite enfance dans les communautés de langue officielle en situation minoritaire, 22 pages.

Prince Edward Island. French Language Services Act, c. F. 15-2, December 14, 2013.

Maurice Chiasson Consultants Inc. Petite enfance en santé (PES): Rapport de sondage présenté au Réseau Santé en français î.-P.-É. (RSFîPÉ), February 15, 2020, 31 pages.

Webography -

Public Health Agency of Canada

https://www.canada.ca/en/public-health.html

Fédération des communautés francophones et acadienne du Canada https://fcfa.ca/

Government of PEI

https://www.princeedwardisland.ca

Government of Canada

https://www.canada.ca/

Department of Health and Wellness

https://www.princeedwardisland.ca/en/topic/health-and-wellness

Department of Education and Lifelong Learning

https://www.princeedwardisland.ca/en/topic/education-and-lifelong-learning

Department of Social Development and Housing

https://www.princeedwardisland.ca/en/topic/social-development-and-housing

Prince Edward Island French Health Network

http://santeipe.ca/

Statistics Canada

https://www.statcan.gc.ca

APPENDICES



APPENDIX 1 • EARLY CHILDHOOD PROGRAMS AND SERVICES IN FRENCH

Please note that the information provided is not exhaustive.

Department official(s) able to deliver program or service in French		Phone or Internet support	Available in French in the six Acadian and Francophone regions			
Written information available in French (e.g., website, brochures, leaflets, online services)	French website	French website		Yes		
Description	These walk-in clinics offer Islanders immediate support to help with anxiety, life events causing stress, and other mental health issues.	Provides high-quality, no-cost mental health care for children, youth, and their families.	Services for children aged 0-6, offered at home, in ECCs, or at school.	Behavioural support for children aged 4-12 with moderate to severe behavioural difficulties.		
Departments responsible	Health and Wellness	Health and Wellness	Education and Lifelong Learning	Health and Wellness		
Services and programs	Mental Health Walk-in Clinics https://www.princeedwardisland. ca/en/information/health-pei/ mental-health-walk-in-clinics	Strongest Families Program https://www.princeedwardisland. ca/en/information/health-pei/ strongest-families	Bilingual Autism Specialist https://www.princeedwardisland. ca/en/information/public-ser- vice-commission/bilingual-au- tism-specialist	Behavioural Support Team for Children https://www.princeedwardisland. ca/en/information/health-pei/be- havioural-support-team-children		
Theme	1. Mental health st (autism, anxiety, etc.) Bi Est (bit is the control of the con					

Department official(s) able to deliver program or service in French	de office,	0546,	0546, de	Lyanne Bernard, Carla La Bonté-Jones, Natalie Dooks, Michelle Gaudet, Lynne Faubert
Departn able to d or serv	Summerside office, bilingual	1-877-569-0546, option 2 Summerside	1-877-569-0546, option 2 Summerside	Lyanne Bernard, Carla La Bonté-J Natalie Dooks, Michelle Gaudet, Lynne Faubert
Written information available in French (e.g., website, brochures, leaflets, online services)	French website	French website Brochures and application forms in French	French website	Information in French on the website
Description	Behavioural support for children aged 4-12 with moderate to severe behavioural difficulties. Expansion of Disability Support Program to include people with a mental health problem. They are eligible for financial support after undergoing a medical and/ or psychiatric assessment. Financial support can be used for personal supports, supervision, socialization programs, housing, etc.		Financial assistance for illnesses like diabetes. Also provides financial assistance for infant formulas during the first year of life.	Child nutrition assessment tools. Completed through a public health nurse, who assesses the responses and can refer the child and the child's parent to a nutritionist.
Departments responsible	Health and Wellness Social Development and Housing		Social Development and Housing	Health and Wellness
Services and programs	Pediatric Psychology Services https://www.princeedwardisland. ca/en/information/health-pei/pediatric-psychology-services AccessAbility Supports https://www.princeedwardisland. ca/en/information/family-and-human-services/accessability-supports ports		Financial support for people with special dietary needs Nutristep http://www.nutristep.ca/	
Theme	1. Mental health (autism, anxiety, etc.)		2. Nutrition	(healthy eating, food security)

Department official(s) able to deliver program or service in French	Available in French in the ECCs in the six regions	Lyanne Bernard, Carla La Bonté-Jones, Natalie Dooks, Michelle Gaudet, Lynne Faubert			Lyanne Bernard, Carla La Bonté-Jones, Natalie Dooks, Michelle Gaudet
Written information available in French (e.g., website, brochures, leaflets, online services)	Yes		French website	French website. Brochures and application forms in French	Yes
Description		Services for pregnant women, infants, and children	Hearing tests for children, hearing aids for patients aged 21 and under	Offers financial support for hearing tests and for purchasing hearing aids. Must have a certain level of hearing loss to be eligible for the program. Offered once a year.	
Departments responsible	Education and Lifelong Learning	Health and Wellness	Health and Wellness	Social Development and Housing	Health and Wellness
Services and programs	Nutrition guidelines for ECCs http://www.gov.pe.ca/photos/ original/eecd_healthyliv.pdf	Public Health and Family Nutrition Program https://www.princeedwardisland. ca/en/information/health-pei/ public-health-and-family-nutri- tion-program	Audiology Services	Hearing tests	Public health nurses
Theme	2. Nutrition (healthy eating, food security) htt htt caa			3. Hearing	

Theme	Services and programs	Departments responsible	Description	Written information available in French (e.g., website, brochures, leaflets, online services)	Department official(s) able to deliver program or service in French
	Eye SeeEye Learn Program https://www.princeedwardisland. ca/en/information/sante-i-p-e/ eye-seeeye-learn-program	Health and Wellness	Free eye exams for children starting kindergarten. Free pair of glasses if needed	French website	
4. Vision	Eye exams	Social Development and Housing	Offers financial support for eye tests and a pair of glasses if needed. Offered every two years.	French website Brochures and application forms in French	
	Public health nurses	Health and Wellness		Yes	Lyanne Bernard, Carla La Bonté-Jones, Natalie Dooks, Michelle Gaudet
5. Occupational therapy	Student Well-being Teams https://www.princeedwardis- land.ca/en/information/edu- cation-and-lifelong-learning/ student-well-being-teams	Health and Wellness	Student well-being teams work in the schools, offering advice, consultations, and support for students with mental or physical health problems or social problems.	Yes, some information is in French	Anne-Marie Peters, Corinne Giasson-Jean
6. Motor skills	Public health nurses and other professionals	Health and Wellness		Yes	Lyanne Bernard, Carla La Bonté-Jones, Natalie Dooks, Michelle Gaudet, Anne-Marie Peters, Corinne Giasson-Jean

Theme	Services and programs	Departments responsible	Description	Written information available in French (e.g., website, brochures, leaflets, online services)	Department official(s) able to deliver program or service in French
	Dental Public Health Services https://www.princeedwardisland. ca/en/information/health-pei/ dental-public-health-services	Health and Wellness	Dental and preventative services for children aged 3-17	French website	
7. Dental care	Preventative dental services for children in the schools https://www.princeedwardisland.ca/en/information/health-pei/dental-public-health-services.	Health and Wellness	Services offered in French at all Francophone schools on PEI, except École La-Belle-Cloche		Odette Gallant, Chantal Cahill
	Clinical dental care for children https://www.princeedwardisland.ca/en/information/health-pei/dental-public-health-services	Health and Wellness	Service offered in French on request		Summerside and Charlottetown
8. Promotion	Go!PEI - Come and Try Events Active Start Program https://www.gopei.ca/programs/		Provincial funding for non-profit organizations		Funding for certain Acadian and Francophone regions
of physical activity	Physiotherapy	Health and Wellness	Throughout early childhood until kindergarten	Information in French	A few physiotherapists offer services in French
9. Screening	French-speaking public health nurses	Health and Wellness			Lyanne Bernard, Carla La Bonté-Jones, Natalie Dooks, Michelle Gaudet

Department official(s) able to deliver program or service in French	Available in the six regions			Clinics available in French in the six regions		Summerside and Charlottetown	Lyanne Bernard, Carla La Bonté-Jones, Natalie Dooks, Michelle Gaudet, Lynne Faubert	
Written information available in French (e.g., website, brochures, leaflets, online services)			Documentation in French on the website		Yes	Yes	Yes	
Description			Information about fetal, maternal, newborn health, etc.	Health clinic for children. Parents can make appointments at 2, 4, 6, 12, and 18 months, and at 4 years of age.	Prenatal breastfeeding class, individual support from Department's lactation consultant. Community initiatives offered as well.			New government initiative
Departments responsible	Health and Wellness	Social Development and Housing	Health and Wellness	Health and Wellness	Health and Wellness	Health and Wellness	Health and Wellness	Education and Lifelong Learning
Services and programs	Prenatal classes https://www.princeedwardisland. ca/en/information/health-pei/ pei-reproductive-care-program	Food allowance during pregnancy, infant formulas	Reproductive Care Program https://www.princeedwardisland.ca/en/information/health-pei/pei-reproductive-care-program	Launching Little Ones Program https://www.princeedwardisland. ca/en/information/health-pei/ public-health-nursing	Breastfeeding guide http://www.gov.pe.ca/photos/ original/breastfeedbaby.pdf	Baby-friendly initiative	Public health nurses and other professionals	Les 1000 premiers jours de la vie (The First 1000 Days of Life)
Theme	Pre pei pei pei pei pei pei pei pei pei pe							

Theme	Services and programs	Departments responsible	Description	Written information available in French (e.g., website, brochures, leaflets, online services)	Department official(s) able to deliver program or service in French
11. Healthy parent-child	Handle with Care program http://handlewithcarecanada.org/ The-Program.aspx?lang=en-CA	Education and Lifelong Learning	Community initiative funded by the province Helps to promote children's mental health	In French, English, and Aboriginal languages	May be available in French in the six regions Facilitators trained to offer sessions in French
relations and development of parenting skills	Triple P - Positive Parenting Program® https://www.triplep-parenting.ca/ can-en/find-help/triple-p-parent- ing-in-prince-edward-island/	Social Development and Housing	Offers simple, positive advice for parents. Positive Parenting Program.	Offered occasionally in French. See <i>Triple P</i> website. The program has been translated into French.	Lyanne Bernard, Carla La Bonté-Jones, Michelle Gaudet, Lynne Faubert, Anne-Marie Peters
	Children's Commissioner and Advocate https://www.princeedwardisland.ca/en/information/childrens-commissioner-and-advocate	Commissioner	Seeks to improve conditions for PEI children	Website in French	
	Help for Child Care Expenses https://www.princeedwardisland.ca/en/information/social-development-and-housing/help-for-child-care-expenses	Social Development and Housing			Available in French in the six regions
12. Safety and well-being	Child Care Subsidy	Social Development and Housing	This program offers parents who are suddenly unable to cover child care expenses a limited-time subsidy so their child can attend child care (e.g., parent undergoing surgery and unable to look after child while convalescing).		
	Public health nurses and other professionals	Health and Wellness		Yes	Lyanne Bernard, Carla La Bonté-Jones, Natalie Dooks, Michelle Gaudet, Lynne Faubert

Department official(s) able to deliver program or service in French	Julie Savoie, Chanel Charette-Hamelin	Julie Savoie, Chanel Charette-Hamelin	Available in the six regions	Lyanne Bernard, Carla La Bonté-Jones, Natalie Dooks, Michelle Gaudet, Lynne Faubert	Yvonne Gallant Available in the six regions
Written information available in French (e.g., website, brochures, leaflets, online services)				Yes	
Description	At appointments with public health nurses for children aged 2 and 18 months, the mother is given a book. A library card is provided at the 2-month appointment.	Speech language pathologists from two departments, according to age group: 0-4 and 4-6.	Musical instruments and programming	Screening and referrals	Visits and support for ECC directors and educators and continuing education
Departments responsible	Health and Wellness	Health and Wellness Education and Lifelong Learning	Education and Lifelong Learning	Health and Wellness	Education and Lifelong Learning
Services and programs	Early Childhood Literacy: Born to Read and Little Ones Read https://www.princeedwardisland. ca/en/information/education-ear- ly-learning-and-culture/early- childhood-literacy-born-read-and- little-ones	Francophone speech language pathologists https://www.princeedwardisland. ca/en/information/health-pei/ speech-language-pathology	Total Smarts kits	Public health nurses and other professionals	Bilingual early childhood coach—francization component
Theme	BB				

Department official(s) able to deliver program or service in French	Yvonne Gallant Available in French in the six regions	Available in French in the six regions
Written information available in French (e.g., website, brochures, leaflets, online services)	Yes	Community initiative funded by the province
Description	Support and training for young children. Visits and modelling in ECCs. Support for directors and educators to develop best practices. Continuing education and documentation in French are also part of the mentor's role.	Speech language pathologists from two departments, according to age group: 0-4 and
Departments responsible	Education and Lifelong Learning	Education and Lifelong Learning
Services and programs	Bilingual early childhood coach—Francophone identity component	Voir grand program
Theme	14. Transmission of French language and Francophone identity	

You can consult a directory of PEI health care professionals who offer services in French on the PEIFHN website: https://santeipe.ca/repertoire-2/

On the next two pages, you will find the contact information for professionals offering services in French for children aged 0-6. Some of them hold designated bilingual positions within the provincial government.

Name	Poste	Designated bilingual position	Regions served
Lyanne Bernard 902-854-7259 Imbernard@ihis.org	Public health nurse	Yes	Prince County, Wellington office, Francophone schools in the county
Carla La Bonté-Jones 902-438-4490 cllabonte@ihis.org	Public health nurse	No	Summerside and schools in Prince County
Natalie Dooks 902-368-4530 nadooks@ihis.org	Public health nurse	Yes	Queens County, including Francophone schools
Michelle Gaudet Summerside : 905-888-3010 Charlottetown : 902-368-4530	Public health nurse	No	Queens County
Julie Savoie 902-854-7259 jsavoie@ihis.org	Speech language pathologist	Yes	Prince County, Wellington office
Chanel Charette-Hamelin cchamelin@edu.pe.ca	Speech language pathologist	No, not a Health PEI position. This is a shared service with the French Language School Board.	Queens County, on request
Lynne Faubert 902-687-7051 Infaubert@ihis.org	Dietitian	No	Kings County, specifically Souris, but can also offer services in Montague and Charlottetown on request
Anne-Marie Peters Summerside : 902-888-8157 Charlottetown : 902-854-7259	Occupational therapy (physical, psychological, and intellectual rehabilitation)	Yes	Prince County, including the Francophone schools in the county
Corinne Giasson-Jean	Occupational therapist	Yes	Queens County, including Francophone schools in Queens and Kings counties
D ^r Pierre Brunet 902-436-4444	Dentist	On contract	Clients from various regions of the province. Dr. Brunet offers his services one day a week in Summerside and one day a week in Charlottetown.
Odette Gallant 902-888-8145	Dental assistant	Yes	Prince County, Summerside office
Chantal Cahill	Dental hygienist	No	Queens County, Charlottetown office
Yvonne Gallant 902-438-4143 ymgallant@edu.pe.ca	Bilingual early childhood coach	Yes	The province's six Francophone ECCs receive services in French.

I Revised: March 2020 53

APPENDIX 2 • REGIONAL FORUMS: PRESENTATION AND QUESTIONNAIRE









Appendix 2 • Regional Forums: Presentation and Questionnaire (cont.)

Question de l'Agence de la santé publique du Canada Question from the Public Health Agency of Canada 1) Veuillez identifier votre GENRE Please identify your GENDER 1. Femme (Woman) 2. Homme (Man) 3. Autre (Other)

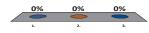
A - SERVICES MÉDICAUX 3. Si oui, pouvez-vous communiquer en français avec le médecin, le pédiatre ou l'infirmière practitienne de votre enfant? If yes, are you able to communicate in French with your child's doctor, pediatrician or nurse? 1. Oui (Yes) 2. Non (No) 3. Sans objet (Not applicable)

A - SERVICES MÉDICAUX

3. Si oui, pouvez-vous communiquer en <u>français</u> avec le médecin, le pédiatre ou l'infirmière practitienne de votre enfant ?

If yes, are you able to communicate in French with your child's doctor, pediatrician or nurse?

- 1. Oui (Yes)
- 2. Non (No)
- 3. Sans objet (Not applicable)





A - SERVICES MÉDICAUX

4. Votre enfant a-t-il des défis particuliers ? (exemples : motricité, langage, maladie chronique, déficience intellectuelle, autisme, allergies alimentaires, asthme)

Does your child have specific challenges? (for example: motor skills, language, chronic illness, intellectual disability, autism, food allergies, asthma)

- 1. Oui (Yes)
- 2. Non (No)





Appendix 2 • Regional Forums: Presentation and Questionnaire (cont.)





B - SERVICES SPÉCIALISÉS

6. Lesquels, parmi les services non offerts ou pas suffisamment offerts en <u>français</u>, sont prioritaires pour votre enfant âgé de 0-6 ans et votre famille? Veuillez identifier trois (3) services.

Among the services not offered or not sufficiently offered in French, which of the following services are a priority for your child (aged 0-6 years) and your family? Please identify three (3) services.

- Physiothérapie réadaptation physique (Physiothe pyrehobilitation)
- Ergothérapie réadaptation physique, psychologique et intellectuelle (Occupational therapy physical, psychological and intellectual rehabilitation)

 intellectual rehabilitation
- 3. Orthophonie le langage (Speech therapy the language)
- 4. Audiologie l'ouïe (Audiology hearing)
- 5. Optométrie la vue (Optometry sight)
- 6. Dentaire (Dental)
- 7. Santé mentale (Mental health)
- 8. Nutrition
- 9. Autre (Other)





B - SERVICES SPÉCIALISÉS

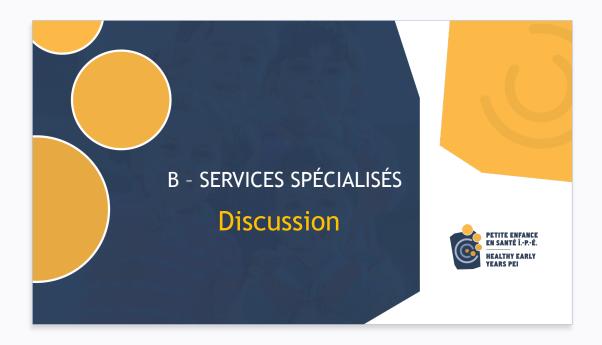
7. Lesquels, parmi les services non offerts ou pas suffisamment offerts en <u>français</u>, sont prioritaires pour les <u>enfants âgé</u> de 0-6 ans de votre RÉGION? Veuillez identifier trois (3) services.

Among the services not offered or not sufficiently offered in French, which of the following services are a priority for children (aged 0-6 years) in your REGION? Please identify three (3) services.

- Physiothérapie réadaptation physique (Physiothe rehabilitation)
- Ergothérapie réadaptation physique, psychologique et intellectuelle (Occupational therapy - physical, psychological and intellectual rehabilitation)
- 3. Orthophonie le langage (Speech therapy the language)
- 4. Audiologie l'ouïe (Audiology hearing)
- 5. Optométrie la vue (Optometry sight)
- Dentaire (Dental)
- 7. Santé mentale (Mental health)
- 8. Nutrition
- 9. Autre (Other)



Appendix 2 • Regional Forums: Presentation and Questionnaire (cont.)



C - SOUTIEN AUX PARENTS ET À LA FAMILLE

8. Quelles sont les priorités, parmi les choix suivants, qui vous aideraient en tant que parent? Veuillez identifier trois (3) priorités.

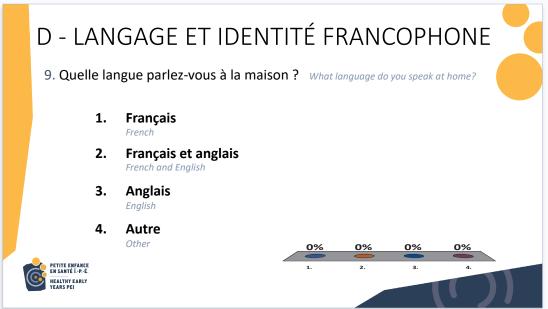
From the following list, which ones would help you the most as a parent? Please identify three (3) priorities.

- 1. Ressources en français Resources in French
- 2. Questionnaires de dépistage
- 3. Soutiens financiers Financial Support
- 4. Gestion du stress et émotions Stress and Emotions managment
- 5. Groupes de rencontre Meeting Groups
- 6. Activités en français Activities in French
- 7. Transport gratuit Free Transportation
- 8. Temps pour moi-même Time for myself
- 9. Counseling Counselling
- 10. Autre Other









Appendix 2 • Regional Forums: Presentation and Questionnaire (cont.)









APPENDIX 3 • REGIONAL FORUMS: PROFILE OF PARTICIPANTS

Regional forum	Number of participants	Number of voters— parents with child(ren) aged 0 to 6
Charlottetown January 21, 2020	15	12 parents 8 women 4 men
Summerside January 22, 2020	10	10 parents 7 women 3 men
Evangeline January 23, 2020	11	6 parents 4 women 2 men
Rustico January 28, 2020	5	4 parents 3 women 1 man
West Prince January 29, 2020	7	5 parents 4 women 1 man
Eastern Kings February 3, 2020	5	4 parents 3 women 1 man
Total:	53	41 parents 29 women 12 men

The other participants in the regional forums who were not the parents of children aged 0-6 were mostly grandparents and early childhood professionals (e.g.,: child care educators).



APPENDIX 4 • SURVEY: QUESTIONNAIRE





RSFÎPÉ - Petite enfance en santé / RSFÎPÉ - Healthy Early Years

Contexte I Context

Le Réseau Santé en français î.-P.-É. (RSFîPÉ) désire connaître les besoins des enfants francophones âgées de 0-6 ans et leur famille. L'information recueillie vise à améliorer les services de santé leur étant offerts.

Nous vous prions de répondre au questionnaire qui suit d'ici le mercredi 12 février 2020. Vos réponses resteront confidentielles.

Durée du sondage : 15 minutes.

Répondre au questionnaire vous donne la chance de gagner un certificat cadeau de votre choix de 200 \$ parmi les participants de votre région et un certificat cadeau de votre choix de 500 \$ parmi l'ensemble des répondants au sondage.

Nous vous remercions de votre collaboration.

Élise Arsenault Directrice générale

The Réseau Santé en français de l'ÎPÉ (RSFÎPÉ) would like to know the needs of Francophone children aged 0-6 and their family. The information that will be collected will be used to improve the health services offered to them.

Please complete the following questionnaire by Wednesday February 12, 2020. Your responses will be kept confidential.

Duration of the survey: 15 minutes.

If you answer this questionnaire, you will have a chance to win a gift certificate of your choice worth \$200 drawn from the list of participants in your region and a gift certificate of \$500 drawn from the complete list of survey participants.

We thank you for your collaboration.

Élise Arsenault Executive Director

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Appendix 4 • Survey: questionnaire (cont.) -

PETITE ENFANCE EN SANTÉ ÎPÉ. HEALTHY EARLY YEARS PEI	Réseau Santé En français L.P.E.	RSFÎPÉ - Petite enfance en santé / RSFÎPÉ - Healthy Early Years
Profil / Profile		
* 1. Sexe du répondar Respondent's gende Femme I Female Homme I Male Autre I Other		
* 2. Première langue con First official language Uniquement le franç Uniquement l'anglais Français et anglais / Autre (veuillez précis	e spoken by the resp ais / French only s / English only French and English ser) / Other (please spec	spondent:
parle(nt) le français d Are you a parent (or	ou que vous avez dé will you be a parent	rent dans quelques mois) d'un enfant (ou plus), âgé(s) de 0 à 6 ans, qu décidé d'éduquer en français? I nt in a few months) of one child (or more), aged 0 to 6 years, who d to educate in French?
Veuillez préciser l'âge exa		de vos enfants) : (par ex. enfant 1 : 2 ans et 4 mois, enfant 2 : 7 mois)/ age: (for ex. child 1: 2 years and 4 months old, child 2: 7 months old)



Profil / Profile (intervenant)

Tion Trone (mervenany					
* 4. Êtes-vous un intervenant en petite enfance (pour enfants âgés de 0 à 6 ans)? I Are you a child care professional (for children aged 0 to 6)?					
Oui / Yes					
Non (Dans ce cas, vous n'avez pas besoin de remplir ce questionnaire.) / No (In this case, you do not have to complete this questionnaire.)					

Appendix 4 • Survey: questionnaire (cont.) -

PETITE ENFANCE EN SANTÉ L-P-É. HEALTHY EARLY YEARS PEI RÉSEAU SANTÉ EN Français L-P-É.	RSFÎPÉ - Petite enfance en santé / RSFÎPÉ - Healthy Early Years						
Profil Profile							
* 5. Dans quelle(s) région(s) travaillez-vou	s?/						
In which region(s) do you work? Charlottetown							
Summerside							
Évangéline							
Rustico							
Prince-Ouest							
Kings Est							
Autre région / Other region							
Mandat provincial / Provincial mandate							
Veuillez préciser : / Please specify:							



HEALTHY EARLY YEARS PEI Services spécialisés / Specialized Services * 6. Selon vous, parmi les services non offerts ou pas suffisamment offerts en français, quels services suivants sont prioritaires pour les enfants âgés de 0 à 6 ans et leur famille? Veuillez identifier trois services. / In your opinion, among the services not offered or not sufficiently offered in French, which of the following services are a priority for children (aged 0 to 6) and their family? Please identify three services. Optométrie (la vue) / Optometry (sight) Pédiatrie / Pediatrics Physiothérapie (réadaptation physique) / Physiotherapy Dentaire / Dental (physical rehabilitation) Santé mentale / Mental Health Ergothérapie (réadaptation physique, psychologique et intellectuelle) / Occupational therapy (physical, psychological Nutrition / Nutrition and intellectual rehabilitation) Autre (veuillez préciser) / Other (please specify) Orthophonie (le langage) / Speech Therapy (language) Audiologie (l'ouïe) / Audiology (hearing) Commentaires : / Comments:

6

Appendix 4 • Survey: questionnaire (cont.)



Wha	veloppement de so t health resources	would you use to	support the pare	nt or future parei	nt in his child's de	evelopment?
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	Formation et ateliers / 7	raining and workshop)S			
	Documentation (dépliar	nts, etc.) / Documental	tion (leaflets, etc.)			
	nformation en ligne / O	nline information				
П.	Autre (veuillez préciser)	I Other (please speci	ify)			
Comr	nentaires : / Comments	·				
Com	ienares : / Comments	•				
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9. C	ommentaires géné	raux : / General C	omments:			
10. É						
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		-	?/			
	tes-vous satisfaits you satisfied with y	-	?1			
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Are	ou satisfied with you if Yes Non (Dans ce cas, utilis	our answers? sez le bouton Préc. afi	in de retourner aux ro			

Appendix 4 • Survey: questionnaire (cont.) -

PETITE ENFANCE EN SANTÉ L.P.É. HEALTHY EARLY YEARS PEI	RSFÎPÉ - Petite enfance en santé / RSFÎPÉ - Healthy Early Years					
Profil Profile (parents)						
* 11. Dans quelle région habitez-vous? / Which region do you live in? Charlottetown Summerside Évangéline Rustico	Prince-Ouest Kings Est Autre région / Other region					
Veuillez préciser : / Please specify:						





Appendix 4 • Survey: questionnaire (cont.) -

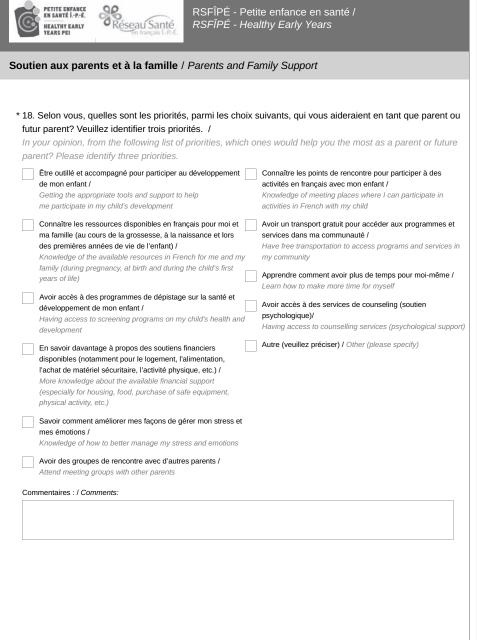
Oui / Yes		
Non / No		
Sans objet / Not applica	able	
Commentaires : / Comments	:	



Services spécialisés / Specialized Services

	nt sufficiently offered in French, which of the following
services are a priority for your child (aged 0 to 6) and	
Pédiatrie I Pediatrics	Optométrie (la vue) / Optometry (sight)
Physiothérapie (réadaptation physique) / Physiotherapy (physical rehabilitation)	Dentaire I Dental Santé mentale I Mental Health
Ergothérapie (réadaptation physique, psychologique et intellectuelle) / Occupational therapy (physical, psychologica and intellectual rehabilitation)	Nutrition / Nutrition Autre (veuillez préciser) / Other (please specify)
Orthophonie (le langage) / Speech Therapy (language)	Addre (vedillez preciser) / Other (prease specify)
Audiologie (l'ouïe) / Audiology (hearing)	
.7. Selon vous, lesquels, parmi les services non offe rioritaires pour les enfants âgés de 0 à 6 ans <u>de vol</u>	tre région? Veuillez identifier trois services. /
17. Selon vous, lesquels, parmi les services non offe prioritaires pour les enfants âgés de 0 à 6 ans <u>de vol</u> n your opinion, among the services not offered or no	tre région? Veuillez identifier trois services. I ot sufficiently offered in French, which of the following
17. Selon vous, lesquels, parmi les services non offe prioritaires pour les enfants âgés de 0 à 6 ans <u>de vol</u> n your opinion, among the services not offered or no	tre région? Veuillez identifier trois services. I ot sufficiently offered in French, which of the following
1.7. Selon vous, lesquels, parmi les services non offe prioritaires pour les enfants âgés de 0 à 6 ans <u>de vol</u> In your opinion, among the services not offered or no services are a priority for the children (aged 0 to 6) <u>i</u> n	tre région? Veuillez identifier trois services. I ot sufficiently offered in French, which of the following on your region? Please identify three services.
2.7. Selon vous, lesquels, parmi les services non offe prioritaires pour les enfants âgés de 0 à 6 ans de voi n your opinion, among the services not offered or not services are a priority for the children (aged 0 to 6) in Pédiatrie I Pediatrics Physiothérapie (réadaptation physique) I Physiotherapy (physical rehabilitation) Ergothérapie (réadaptation physique, psychologique et intellectuelle) I Occupational therapy (physical, psychologica)	tre région? Veuillez identifier trois services. I t sufficiently offered in French, which of the following a your region? Please identify three services. Optométrie (la vue) I Optometry (sight) Dentaire I Dental Santé mentale I Mental Health
2.7. Selon vous, lesquels, parmi les services non offe prioritaires pour les enfants âgés de 0 à 6 ans de voi n your opinion, among the services not offered or no services are a priority for the children (aged 0 to 6) in Pédiatrie I Pediatrics Physiothérapie (réadaptation physique) I Physiotherapy (physical rehabilitation) Ergothérapie (réadaptation physique, psychologique et	tre région? Veuillez identifier trois services. I t sufficiently offered in French, which of the following t your region? Please identify three services. Optométrie (la vue) I Optometry (sight) Dentaire I Dental Santé mentale I Mental Health
pervices are a priority for the children (aged 0 to 6) in pediatric Pediatrics Physiothérapie (réadaptation physique) I Physiotherapy (physical rehabilitation) Ergothérapie (réadaptation physique, psychologique et intellectuelle) I Occupational therapy (physical, psychologica and intellectual rehabilitation)	tre région? Veuillez identifier trois services. / at sufficiently offered in French, which of the following a your region? Please identify three services. Optométrie (la vue) / Optometry (sight) Dentaire / Dental Santé mentale / Mental Health Nutrition / Nutrition

Appendix 4 • Survey: questionnaire (cont.)



votre enfant? Vous pouvez cocher plusieurs choix de	vous appuyer dans le développement et la santé de réponses. /
How would you like to get the information to support y	-
several options.	
Sites Web / Web Sites	Textos / Text messages
Programmes d'apprentissage en ligne (modules) / Online learning programs (modules) Applications téléchargeables (pour téléphones et tablettes) / Downloadable applications (for phones and tablets) Vidéos en ligne / Online videos	Matériel imprimé (p. ex. livrets, dépliants, fiches d'informati etc.) I Printed material (for ex. : booklets, pamphlets, information sheets, etc.) Ateliers en personne I In-person workshops Autre (veuillez préciser) I Other (please specify)
Commentaires : / Comments:	

Appendix 4 • Survey: questionnaire (cont.) -

PETITE ENFANCE EN SANTÉ 1-P-É. HEALTHY EARLY YEARS PEI	Réseau Santé en français IPÉ.		Petite enfance en santé / Healthy Early Years
.angue et ident	ité francophone / Fr	ench Langı	uage and Identity
	ue parlez-vous à la maiso do you speak at home?	on? /	
Français / Frei			
Français et an	glais / French and English		
Anglais / Engli	sh		
Autre (veuillez	préciser) / Other (please spec	rify)	
Commentaires : / C	omments:		
École francopl	de francophone / Francophone none / French School sion / Immersion School ncophone / French babysitter	e daycare	
Autre (veuillez	préciser) / Other (please spec	rify)	
Commentaires : / C	omments:		

	Parmi les organismes su				
	c votre enfant âgé de 0 à	•	•		
	anizations organize activi	ties in which you participa	ate with your cl	hild aged 0 to 6	?? You can select s
opti	ons.				
	Cap enfants				
	Village des Sources				
	Fédération des parents de l'ÎP	É (FPÎPÉ)			
	Comité régional (centre scolair	re-communautaire) / Regional (Committee (schoo	l-community centre	2)
	Service de garde / Childcare S		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,
		iei vide			
	École / School				
	Autre (veuillez préciser) / Othe	er (please specify)			
Com	mentaires : / Comments:				
	Avez-vous des suggestio		:? /		
	Avez-vous des suggestion you have any suggestion.		i? /		
			5? <i>I</i>		
			?!		
Do	you have any suggestion.	s for French activities?	9? I		
Do <u>y</u>		s for French activities?	.?1		
Do <u>y</u>	you have any suggestion. Commentaires généraux	s for French activities?			
Do <u>y</u>	you have any suggestion. Commentaires généraux	s for French activities?			
Do <u>y</u>	you have any suggestion. Commentaires généraux	s for French activities?			
Do <u>y</u>	you have any suggestion. Commentaires généraux	s for French activities?			
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Do <u>y</u>	you have any suggestion. Commentaires généraux	s for French activities?			
Do <u>y</u>	you have any suggestion. Commentaires généraux	s for French activities?			
Do <u>y</u>	you have any suggestion. Commentaires généraux	s for French activities?	27.1		
Do <u>y</u> 24.	you have any suggestion. Commentaires généraux	s for French activities?	27.1		
24.	you have any suggestion. Commentaires généraux	s for French activities?	27.1		





RSFÎPÉ - Petite enfance en santé / RSFÎPÉ - Healthy Early Years

Fin du sondage / End of Survey

Un forum provincial traitant de la santé de la petite enfance aura lieu le samedi 22 février à Summerside. Tous frais payés pour les participants. Des prix de présence seront également remis. Un message pour vous informer des détails de l'événement vous sera envoyé sous peu.

Vous êtes maintenant admissible au tirage pour gagner l'un des prix de participation.

Veuillez cliquer sur Terminé une fois le sondage complété.

Le RSFÎPÉ vous remercie de votre participation!

A provincial forum on early childhood health will be held on Saturday February 22 in Summerside. All fees paid for participants. Door prizes will also be awarded. A message to inform you of the details of the event will be sent to you shortly.

You are now eligible to win one of the participation prizes.

Please click Done when you have completed the survey.

The RSFÎPÉ thanks you for your participation!

25. Veuillez inscrire votre nom et votre adresse courriel ou numéro de téléphone afin que nous puissions vous contacter si vous êtes l'heureux gagnant. /

Please enter your name and email address or phone number so that we can contact you if you are the lucky winner.

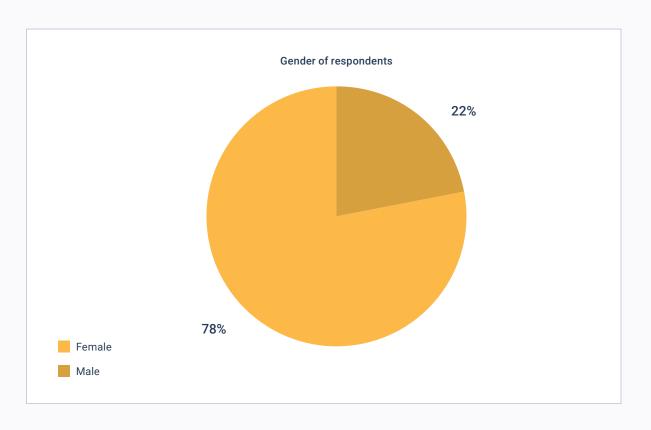
Nom / Name :	
Adresse courriel ou no. de	
téléphone / Email address	
or telephone number :	

APPENDIX 5 • SURVEY: PROFILE OF RESPONDENTS

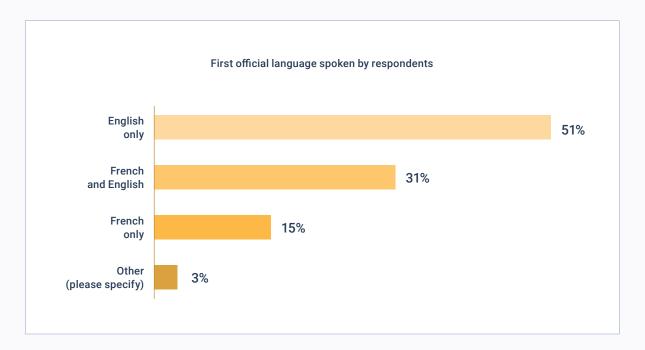
The following tables provide information about the profile of the parents and early childhood professionals who completed the survey.

Parents

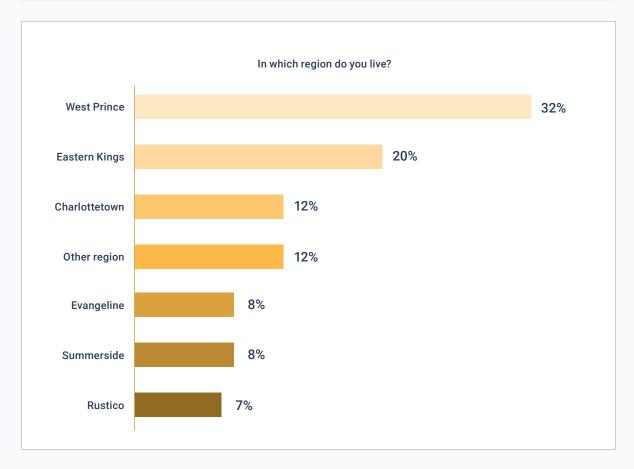
Gender of respondents				
Response options	Percentage of responses	Number of responses		
Female	78%	46		
Male	22%	13		
Other	0%	0		
Number of	59			
Number of person	0			



First official language spoken by respondents				
Response options	Percentage of responses	Number of responses		
English only	51%	30		
French and English	31%	18		
French only	15%	9		
Other (please specify)	3%	2		
Number of	59			
Number of person	ons who did not answer the question	0		



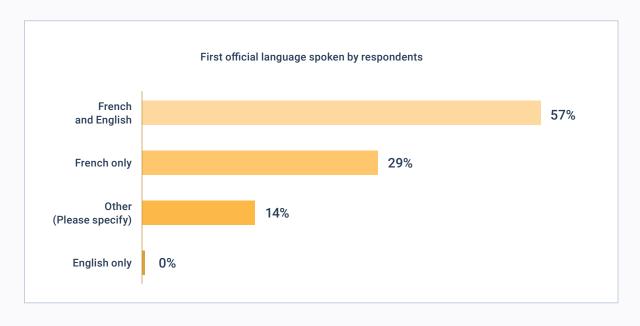
In which region do you live?				
Response options	Percentage of responses	Number of responses		
West Prince	32%	19		
Eastern Kings	20%	12		
Charlottetown	12%	7		
Other region	12%	7		
Summerside	8%	5		
Evangeline	8%	5		
Rustico	7%	4		
Number of p	persons who answered the question	59		
Number of perso	Number of persons who did not answer the question			



Early childhood professionals

Gender of respondents				
Response options	Percentage of responses	Number of responses		
Female	100%	7		
Male	0%	0		
Other	0%	0		
Number of	7			
Number of person	0			

First official language spoken by respondents				
Response options	Percentage of responses	Number of responses		
French and English	57%	4		
French only	29%	2		
Other (please specify)	14%	1		
English only	0%	0		
Number of	7			
Number of person	0			



In which region(s) do you work?				
Response options	Percentage of responses	Number of responses		
Rustico	40%	2		
Eastern Kings	40%	2		
Charlottetown	20%	1		
Summerside	0%	0		
Evangeline	0%	0		
West Prince	0%	0		
Other region	0%	0		
Provincial mandate	0%	0		
Number of	5			
Number of person	2			

APPENDIX 6 • PROVINCIAL FORUM: PROGRAM

▶ Healthy Early Years (HEY)

Centre Belle-Alliance Summerside, PEI – February 22, 2020

10:45 a.m. Greeting of participants

11:05 a.m. Welcome and instructions for the day

11:15 a.m. Talk: Dr. Elaine Deschênes

12:00 p.m. Lunch

12:30 p.m. Background of strategy

12:40 p.m. Presentation of strategy

1:10 p.m. Working sessions: courses of action and projects

1:15 p.m. Bloc A

1:35 p.m. Bloc B

1:55 p.m. Bloc C

2:15 p.m. Prioritization / health break

2:30 p.m. Preparation of project sheets

2:50 p.m. Next steps and acknowledgements

3:00 p.m. End of forum



Healthy Early Years Community Services Plan (HEYCSP) • 2019–2024

APPENDIX 7 • PROVINCIAL FORUM: PROFILE OF PARTICIPANTS

Region	Number of participants	Parents with child(ren) aged 0-6
Charlottetown	1	1 parent 1 woman 0 men
Summerside	5	3 parents 3 women 0 men
Evangeline	7	4 parents 1 woman 3 men
Rustico	0	0 parents 0 women 0 men
West Prince	1	0 parents 0 women 0 men
Eastern Kings	1	1 parent 0 women 1 man
Total:	15	9 parents 5 women 4 men

APPENDIX 8 • PROJECT ASSESSMENT GRID

Name of project:						
Name of proponent:						
Duration of project:						
Start date:		Pro	Project end date:			
✓	Project qualification category	ories for proponents				
	Meets PHAC eligibility requirements. Briefly explain.					
	Full alignment of project with HEYCSP. Briefly explain.					
	Components of early childhood health promotion and prevention project. Briefly explain.					
	Demonstrates proponent's commitment to ongoing cooperation with Network and stakeholders during implementation of the project. <i>Briefly explain</i> .					
	Proposes goals, indicators, activities, outcomes, and budget that are SMART (Specific, Measurable, Achievable, Realistic, Time-based).					
Propo	sed funding					
	2019-2020	2020-2021		2021-2022		
Signature of representative of French Health Network on behalf of the partners		Signature of proponent's representative				
PEIFH	N		Name of p	proponent organization		



