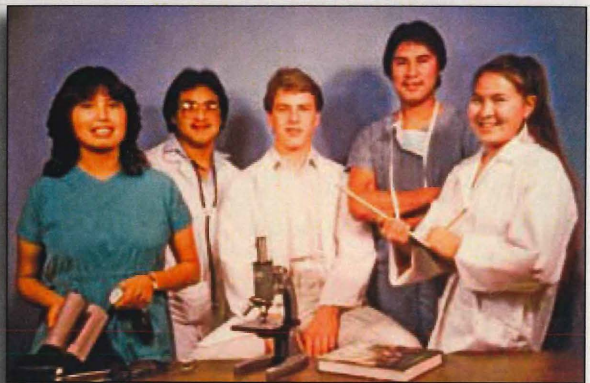
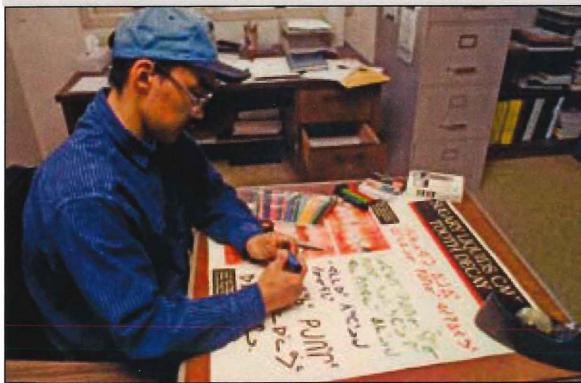


Speaking of Health...

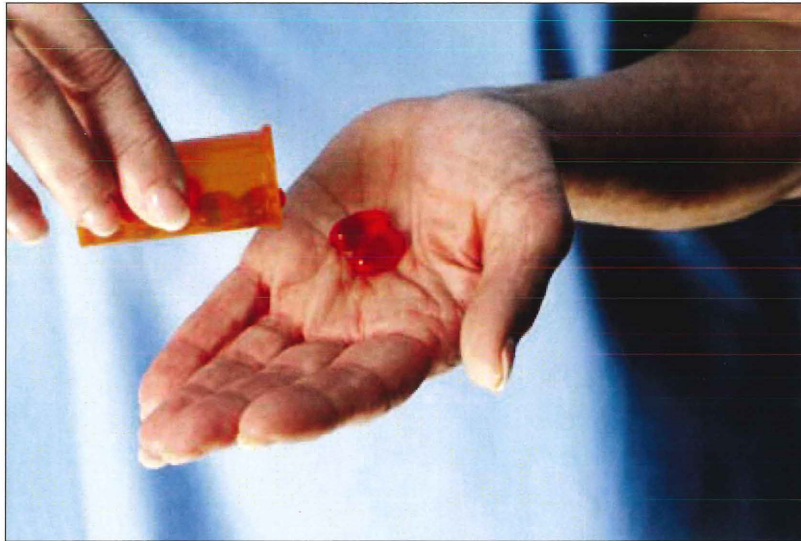


Official Languages as part of Quality Health Care in the Northwest Territories



A Report by the Languages Commissioner of the Northwest Territories

January 2008



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Introduction

One of the most important things that Northerners expect from the Government of the Northwest Territories is quality health care. Part of quality health care is ensuring that patients are comfortable in communicating with health care professionals and can understand what is happening to them. This aids in patients taking responsibility for their health care and encourages them to be active participants in their journey through the health care system.

This report explores the interplay between language rights and health care in the Northwest Territories. It includes a review of current issues, practical considerations for dealing with languages rights in a health care setting, and recommendations for moving forward. The recommendations reached in this report are achievable if the Legislative Assembly of the Northwest Territories and the Government of the Northwest Territories are committed to ensuring that language rights become a vital component of providing health care throughout the Northwest Territories.



The Current State of Affairs in the Northwest Territories

In order to discuss the key issues in this report, it is important to have an overview of the current situation in the Northwest Territories.

Demographics of the Northwest Territories

As of July 1, 2006, the Northwest Territories had a population of 41,861 people. Over half of the population is Aboriginal (see Appendix 1).

According to the 2001 Census, 28,645 out of 36,665 people surveyed, or 78%, indicated that English is their mother tongue. Seven thousand and seventy out of 36,665 surveyed, or approximately 20%, indicated that an Aboriginal language is their mother tongue. Nine hundred and fifty out of 36,665 surveyed, or 2.5%, indicated that French is their mother tongue. "Mother tongue" refers to the first language that a person learns to speak (see Appendix 2).

In 2004, 44% of the population of the Northwest Territories could understand an Aboriginal language, compared to 59.1% in 1984. Between 1984 and 2004, there was a continuous decline in the number of persons who could understand an Aboriginal language. Further, the number of persons who could understand an Aboriginal language varied significantly from community to community (see Appendix 3).

Demographics of Health Care Professionals

It is difficult to determine the exact number of Aboriginal doctors in Canada. The National Aboriginal Health Organization estimates that in 2002, there were 150 Aboriginal doctors in Canada. There has not been a significant increase in the number of Aboriginal doctors over time. The Aboriginal Nurses Association estimates that there are approximately 300 Aboriginal registered nurses in Canada. Other health care groups do not keep records of the number of Aboriginal practitioners.

No clear statistics were available on the number of Francophone doctors, nurses or other health care professionals in Canada.

The Official Languages Act and The Official Languages Policy and Guidelines

The *Official Languages Act* of the Northwest Territories recognizes 11 official languages in the Northwest Territories (Cree, Chipewyan, English, French, Gwich'in, Inuktitut, Innuinaqtun, Inuvialuktun, North Slavey, South Slavey, *Tłı̨chǫ*).

Part of the preamble to the Act states:

“...Being committed to the preservation, development and enhancement of the Aboriginal languages...

...Desiring to establish English and French as official languages of the Northwest Territories having equality of status and equal rights and privileges as official languages...

...Believing that the legal protection of languages will assist in preserving the culture of the people as expressed through their languages...”

The Act does not specifically deal with the issue of language services in a health care setting, but the Act does deal with the issue of services to the public. Section 11 of the Act states:

- “11 (1) Any member of the public in the Northwest Territories has the right to communicate with, and to receive available services from, any head or central office of a government institution in English or French, and has the same right with respect to any other office of that institution where:
- (a) there is a significant demand for communication with and services from the office in that language; or
 - (b) it is reasonable, given the nature of the office, that communications with and services from it be available in both English and French.
- (2) Any member of the public in the Northwest Territories has the right to communicate with, and to receive available services from, any regional, area or community office of a government institution in an official language other than English or French spoken in that region or community, where:
- (a) there is a significant demand for communications with and services from the office in that language; or
 - (b) it is reasonable, given the nature of the office, that communications with and services from it be available in that language.
- (3) In interpreting subsection (2), consideration shall be given to collective rights of Aboriginal peoples pertaining to Aboriginal languages and exercised within the traditional homelands of those peoples, consistent with any applicable lands, resources and self-government agreements, including land claim and treaty land entitlement agreements, and any other sources or expressions of those collective rights.”

The Government of the Northwest Territories has also developed the Official Languages Policy and Guidelines. The Official Languages Policy and Guidelines set out designated areas where the official languages are commonly spoken (see inside back cover for official languages map), and the guidelines set out those services that the public can expect in the official languages of the area. The Official Languages Policy and Guidelines are simply policy, and not regulation, and do not specifically deal with the issue of services in health care facilities.

Findings

Although English is the predominant mother tongue of the population of the Northwest Territories, a significant percentage of the population have another official language as their mother tongue.

The use of Aboriginal languages is on the decline.

The Government of the Northwest Territories has a positive duty to enhance and promote the Aboriginal official languages of the Northwest Territories, and to ensure that English and French have equality of status.

The Health Care System in the Northwest Territories

The Northwest Territories health and social services system consists of a central department and eight regional authorities (see Appendix 4).

Many communities have health centres and there are four hospitals in the Northwest Territories. The Stanton Territorial Hospital, located in Yellowknife, is the largest hospital in the Northwest Territories and is the major referral centre for the Northwest Territories.

The Department of Health and Social Services uses some modern communication technologies as part of providing health care to patients. Telecare-NWT is a free, confidential service available to all residents of the Northwest Territories, and allows residents to receive health information and advice in all of the official languages of the Northwest Territories as well as over 100 languages from around the world. Telehealth services include interactive video systems and high speed computer networks that transfer medical data and virtual reality applications. There are 10 existing sites in the Northwest Territories, with connecting sites in Alberta.



DPW&S/NWT Archives/G-1995-001:6589

Languages and Health Care: Languages as an Integral Part of Health Care

Perspective of Health Care Facilities

It is important to obtain the perspective of those working in the health care field in terms of how language services are being provided.

In 2006, this Office sent a survey to 36 hospitals, clinics, public health units and health care centres in the Northwest Territories. (A copy of the survey is attached as Appendix 5.) Twenty-seven completed surveys were returned. While this does not appear to be a 100% response rate, some of the surveys were completed on behalf of more than one facility (i.e. a health unit and a clinic). Taking this into account, there was a 100% response rate, although it did take a significant amount of time for responses to be returned.

Of course, no survey response is totally objective. Responses will involve the perceptions of the individual who completes the survey. Further, an individual can only complete a survey based on the best information available to him or her, and they may provide answers that are based on faulty information. Nonetheless, a survey can provide some useful information for analysis:

Signs Indicating an Offer of Interpretation/Translation Services

Out of the 27 responses, 22 (81%) indicated that there were no signs advising a patient what to do if he or she wanted interpretation services. Further, some “no” responses indicated that “...the community knows that services are available” or “...there is no need. Everyone can speak and understand English”. Of the five “yes” responses (19%), two (7% of total responses) indicated that the signs were only available in two of the three official languages of that designated area.

These responses are disturbing. First, the fact that most of the facilities do not have signs advising how to obtain interpretation services shows a lack of effort or a lack of understanding of the need to provide a courteous environment that is sensitive to language needs. Further, an assumption that all persons speak and understand English is an assumption that is not well founded. Further, this reaction is not in keeping with the obligation of the government to preserve and promote Aboriginal official languages or to ensure equality of English and French. As well, it is an approach that promotes the assimilation of all cultures through the use of the majority language and results in the erosion of the minority languages. The results also show a failure to treat all official languages equitably, even amongst the official languages of a designated area.

Provision of Interpretation/Translation Services

Of the 27 responses, only nine (33 %) indicated that the facility had a person designated to provide interpretation services. Of those nine responses, five (19 % of total responses) were from the clinics and public health unit in Yellowknife, where they have the ability to access services through Stanton Territorial Hospital. Ten of the 27 responses (37 %) indicated that they would find a staff member to translate. Of those responses, the person assigned could range from a receptionist to housekeeping or maintenance personnel. six of the 27 responses (11 %) indicated that a family member would be asked to interpret. Another four responses (15 %) indicated that “someone” or a “community volunteer” would assist. Last, three responses (11 %) indicated that they had no idea how services would be provided.

Again, these responses are very concerning. First, the responses show that agencies in Yellowknife have greater access to interpretation services and a more concrete plan on how to provide interpretation services. While this is not surprising, it is not acceptable. There must be equitable access to interpretation services in order to provide quality health care. Further, the responses clearly indicate that there is often no particular person assigned to provide interpretation services. It may be anyone from a receptionist to a janitor. This haphazard approach fails to recognize the importance of accurate interpretation in providing safe and comfortable health care. In particular, it fails to recognize the skill set required to understand medical terminology and to provide accurate interpretation. It also fails to recognize that there could be liability on the part of the Government of the Northwest Territories if inaccurate interpretation results in damages to an individual. Further, it is not appropriate to ask family members to interpret. Family members are often in an emotional state, as they are concerned about their loved one, and should not be asked to shoulder this extra burden. In addition, as with most staff members, there is no guarantee that a family member has the skill set to accurately interpret. Most concerning were the responses indicating that the respondent had no idea how services would be provided. This again underlines the lack of understanding of the importance of interpretation services in the provision of health care.

Timeliness of Interpretation Services

The responses indicated that there was no consistency in terms of the timeframe in which interpretation services could be provided. In some cases, like Stanton Territorial Hospital, services would be provided immediately or very quickly during regular office hours. At clinics in Yellowknife, an appointment would need to be set up ahead of time, and this could take approximately one week. In other places, it was totally dependent on the availability of someone to interpret.

The results show a definite inequity in the timeliness of services, dependent at least partially on the location of the facility. This inconsistency and delay undoubtedly affects patient care. Further, a patient cannot always predict when he or she is going to need medical care, plan for the need for interpretation services and make an appointment for a time in the future.

Providing Services in all Official Languages

Of all of the responses, only Stanton Territorial Hospital, and the clinics and public health unit in Yellowknife, indicated that they have the ability to provide interpretation services in all 11 official languages. The other responses indicated that there was no known method to obtain services in all official languages and that services could only be provided in the official languages of that designated area.

Again, these results show a disparity in the ability to provide language services, dependent at least in part on the location of the facility. Further, for reasons that will be elaborated on in this report, the ability to obtain services should not be dependent on the location of the facility.

Findings

There are issues with respect to the provision of language services in hospitals, health units and health centres in the Northwest Territories, including:

- a lack of concern about providing a comfortable environment that is sensitive to the language needs of patients;
- lack of a common approach in regard to providing interpretation services in a timely fashion;
- lack of concern about the quality of interpretation services; and
- lack of equitable treatment as between the various official languages of the Northwest Territories.

Perspective of the Patient

It is hard to gain the perspective of patients when it comes to language services and health care. However, some information is available.

2006 Northwest Territories Hospital Satisfaction Survey

The 2006 Northwest Territories Hospital Satisfaction Survey included a question on interpretation services. The results from the Hay River Hospital and Stanton Territorial Hospital show, at best, moderate satisfaction with language services (see Appendix 6) and certainly room for improvement. However, given the low response rate to this question, the results should not be given much weight.

Complaints Received by the Office of the Languages Commissioner

It is also interesting to look at the complaints received by the Office of the Languages Commissioner since the inception of the Office.

Unfortunately, past Languages Commissioner did not always break complaints into specific categories. As such, it is difficult to determine exactly how many complaints have related to health care services. However, what can be said is that the majority of complaints received in the Office over the years have related to communication services (see Appendix 7).

Findings

There is a need for the government to improve language services to the public in the area of health care.

Adequacy of Legislative Provisions

In reviewing this issue, it is essential to review the provisions of the *Official Languages Act* and consider how they apply to health care in the Northwest Territories.

As already pointed out, section 11 of the *Official Languages Act* deals with services to the public. Section 11 is very problematic. When considered in great detail, section 11(1) of the Act does not make any sense. It specifically deals with the right to receive services in English and French when dealing with a head or central office of a government institution. It then goes on to deal with the issue of English and French language rights when dealing with other offices of that government institution, and is based on the concepts of “significant demand” and “nature of the office”. These terms were derived directly

from the federal *Official Languages Act*, but unlike the federal government, the territorial government did not go on to define those terms. The federal government’s definition of “significant demand” is based almost entirely on a numerical criteria. Regulations under the federal *Official Languages Act* also establish what is meant by the term “nature of the office”. In large part, it refers to basic services being available in either English or French where the office in question deals with issues of health, safety or security of the public.

Without clarification of the terms “significant demand” and “nature of the office”, it calls into question whether there are any English or French language rights in regional or community offices of the Government of the Northwest Territories. Is “significant demand” based on the number of requests, or could it be based on one serious and compelling request for language services, in French, at that office? Is a regional or community hospital or health care centre, by virtue of the “nature of the office”, compelled to provide services in English or French? These are legislative questions that were not thoroughly considered when the *Official Languages Act* came in to being.

Section 11(2) of the Act deals with services in regional or community offices, and gives a person the right to communicate with that office in the official languages of that area, but only where there is a “significant demand” or due to the “nature of the office”. Does this mean that an elder from *Behchoko*, who is unilingual, can demand services at the health centre in *Tłı̄chq̄*? Does that one person’s request constitute a “significant demand” or is the health centre required, due to the “nature of the office”, to oblige all such requests?

The answer to all of the above questions is unknown, and calls into question an individual’s ability to demand language services from the Government of the Northwest Territories in any of the official languages. These issues should have been sorted out before the *Official Languages Act* was passed. At best, the Act is ambiguous.

None of this is to suggest that merely defining the term “significant demand” would fully address the issue. As indicated in the 2005–2006 Annual Report of the Languages Commissioner, the term “significant demand” has caused problems at the federal level, and would be even more problematic in the Northwest Territories. In some instances, we are dealing with extremely small numbers of persons who speak a particular Aboriginal official language. Trying to determine “significant demand” based on such small percentages of the population fails to recognize the special characteristics

of some of these official languages and, in particular, fails to take into account that some of them are in fear of extinction. Further, one of the objectives of the *Official Languages Act* is to preserve and enhance official languages. How can basing language rights on a numerical criteria help to preserve official languages? In addition, fewer and fewer people appear to be speaking an Aboriginal official language over time. If “significant demand” is based on the percentage of the population that speaks a particular official language, then the obligation to provide services in that official language could diminish over time. In effect, the Government of the Northwest Territories could become an active participant in the demise of an official language. Application of a strict numerical criteria could also create an inequity in services between Aboriginal official languages. For example, persons in Whati, where 96.9% of the population speaks an Aboriginal official language, may be entitled to more language services than people in Aklavik, where only 19.3% of the population speaks an Aboriginal official language. How can any of this be said to provide equality of service in the various official languages?

On the other hand, looking at the concept of “nature of the office” may be promising, in that it puts the focus on ensuring that some basic government services are available in all official languages.

Other Considerations

Three other considerations must be looked at when dealing with this issue. First, there is the concept of “informed consent”. The courts have recognized a patient’s right to full information about the risks inherent in a treatment and the omission of relevant information normally amounts to negligence. Further, should a physician perform a procedure without a patient’s informed consent, it may be battery. If there are language issues, and the patient does not fully understand what is going on, there may be serious ramifications.

Second, there is the case of *Eldridge v. British Columbia (Attorney General)* [1997] 3 S.C.R. 624, a unanimous decision of the Supreme Court of Canada. The Supreme Court of Canada found that the failure of the Government of British Columbia to provide interpretation services where they are needed for effective communication in the delivery of health care services violated the Charter rights of the disabled, namely, deaf persons. The Supreme Court of Canada ordered the Government of British Columbia to pay for sign language services when deaf people access health care services.

The *Eldridge* ruling has far-reaching implications, and it is clear that the government cannot escape its Constitutional obligation to provide equal access to public services. This includes equality of access to all persons in health care settings. While the *Eldridge* case dealt with the Constitutional rights of the disabled, the case could just as easily have dealt with the Constitutional rights of a person based on race or colour.

There is a third, and very pragmatic, consideration. Research is clear that the inability to access medical services in your mother tongue can compromise your health by being a serious threat to the quality of health care received (Robichaud 1986). Further, researchers have found that language barriers and cultural differences can result in an under-utilization of health care services by minority groups (Riddick, S., 1998; Watt, I. S. et. al., 1993). It also results in persons being less likely to use primary care facilities and more likely to use emergency services (Adler, N. E. et. al., 1993; Fox and Stein, 1991; Manson, A., 1988; Watt, I. S. et. al. 1993).

Given all of these concerns, it is submitted that interpretation services in all official languages of the Northwest Territories be available throughout the health care system in the Northwest Territories. The question then becomes, how to make this a workable system.

Recommendation

That interpretation services in all official languages of the Northwest Territories be available throughout the health care system in the Northwest Territories.



A Framework for Communication in Accessing Health Care

Knowledge is Power: Using Our Languages to Create Our Healthy Future

We've all heard the saying "Knowledge is Power". Applying this philosophy to health care, there is no doubt that the more information we have in regard to our health issues, the more able we are to take an active role in our health care, and the more able we are to plan steps to achieve optimum health.

In order to reach the greatest number of residents of the Northwest Territories and to help them attain this knowledge, information must be made available in the various official languages of the Northwest Territories. While the government has definitely made strides in this regard, there is still room for improvement.

General Contact Information

The Government of the Northwest Territories, Department of Health and Social Services, has developed a publication called the "HELP Directory". The HELP Directory is available in English and French, and is meant to be a resource for health and social services professionals. It is a useful publication and contains contact information for numerous resources, including health centres and hospitals, not-for-profit support groups, Aboriginal organizations, religious organizations, counsellors, school programs, etc. It is available in hard copy and online.

While the HELP Directory is designed for health and social services professionals, there is no reason why it should not be available more broadly to the public in the various official languages of the Northwest Territories. This would allow persons to consider what services are available and to determine what resources may be best suited to their individual needs.

General Health Information

On the Department of Health and Social Services web site, there is a significant amount of information available on a variety of health related topics, including tuberculosis, food safety, alcohol related issues, HIV/AIDS, influenza and much more. The information is available in English and most of it is available in French.

This type of information is directly related to the health and well-being of all citizens of the Northwest Territories. In order to best serve the public, all of this basic information should be available in all of the official languages of the Northwest Territories. Since there are residents of the Northwest Territories that do not have access to a computer or do not know how to operate one, these materials should be readily available in the various government offices in the Northwest Territories, in the official languages of the region.

A Guide to a Healthier Life

La Réseau TNO Santé en français has developed a wonderful reference entitled “Compilation Des Chroniques”. It is published in French and goes a step further than just providing general health information. It provides extensive information on common diseases and ailments, mental health issues, nutrition, exercise, pregnancy, seniors’ issues and much more. The aim is to assist individuals in obtaining a healthier lifestyle. The publication is an excellent resource to help individuals take control of their health and create a healthy future.

The Government of the Northwest Territories should seriously consider the development of a more extensive publication to ensure optimal health for the citizens of the Northwest Territories. To reach the most people, this publication should be available in all official languages.

Finding

The Government of the Northwest Territories has not taken enough steps to ensure that valuable information on health related issues is available to the population of the Northwest Territories in the 11 official languages of the Northwest Territories.

There is no doubt that it is costly and time consuming to create the type of resources referred to above. Further, Damien Healy, the Communications Officer for the Department of Health and Social Services, indicated that, by the time certain materials are available in the official languages of the Northwest Territories, those materials are often outdated. He expressed that this is a significant concern. Further, the experience of the Office of the Languages Commissioner is that it can take between six months to a year for the completion of translations of even basic material in the Aboriginal languages.

If these resources are important, as is submitted in this report, then the Government of the Northwest Territories must find a way to expedite translation services. This may mean resurrecting the practice of in-house Aboriginal language translation services or hiring dedicated contractors. Further, it is important to note that, once these materials are developed, updating them should be easier than the initial production.

Recommendations

That the Government of the Northwest Territories take all necessary steps to ensure the timely translation of health material in all official languages. This may necessitate the need for in-house Aboriginal language translation services or dedicated contractors for those services.

That the Government of the Northwest Territories take steps to ensure that health information is available in all 11 official languages, both online and in hard copy, and throughout the government offices of the Northwest Territories. These materials should include:

- general contact information for resources;
- general health information; and
- extensive information to assist individuals in achieving a healthy lifestyle.

Accessing the Health Care System: Using Our Languages to Ensure the Healthiest Outcome

At some point, an individual is likely to take the jump from gathering health care information to accessing the health care system. It is important to evaluate that system to determine how to best provide language services.

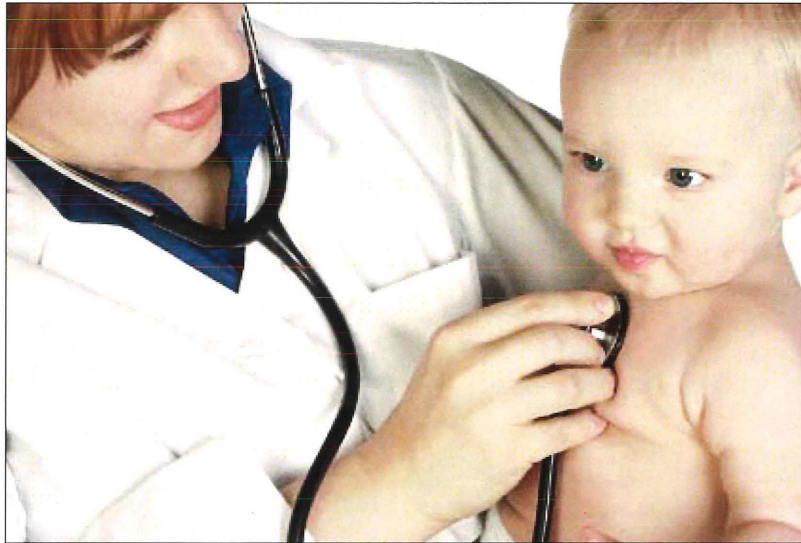
Telecare-NWT

Telecare-NWT is a valuable service that has been operating in the Northwest Territories for over three years. Telecare-NWT is a free, confidential service available to all residents of the Northwest Territories, and allows residents to receive health information and advice in all of the official languages of the Northwest Territories as well as over 100 languages from around the world. Since its inception, the number of calls to Telecare-NWT has continuously increased. It appears, from the subjective evidence, that there is positive feedback from persons who have used this service (see Appendix 8).

The next step would be to do an objective survey in regard to whether persons were able to receive services in their language of choice and if they were satisfied with the level of language services provided.

Recommendation

That the Department of Health and Social Services conduct a survey to determine client satisfaction with language services when using Telecare-NWT.



Improving Our Present Situation – Making the Most of Our Languages

Knowing Your Resources

In an effort to improve access to French speaking health care professionals, the Government of Nova Scotia commissioned the development of a “Directory of French Speaking Primary Health Care Providers in Nova Scotia”. Primary health care providers are encouraged to be included in the directory and it is only one phase in the Government of Nova Scotia’s efforts to better serve the health care needs of French speaking Nova Scotians.

The Government of the Northwest Territories could easily develop a similar resource that highlights the language proficiencies of health care professionals in the Northwest Territories. The creation of such a registry would give government officials a better idea of the language skills of health care professionals and hopefully allow the government to tap into these skills as a means of better serving the public.

Recommendation

That the Government of the Northwest Territories create a directory that highlights the language proficiencies of health care professionals in the Northwest Territories.

Improving on Resources

Interpreter/Translation Services

In almost every annual report from the inception of the Office, including the last two tabled reports, the Languages Commissioner has made a recommendation that the Legislative Assembly and the Government of the Northwest Territories improve interpreter/translator training in the Northwest Territories.

In its response to the 2005–2006 Annual Report of the Languages Commissioner, the Standing Committee on Accountability and Oversight stated:

“With the closure of the Aboriginal Languages Section of the GNWT Language Bureau in the mid-1990s, the Northwest Territories has lost any institution that would be responsible for language standards, terminology development, training and accreditation. The precarious situation of our Aboriginal languages combined with the declining numbers of mother tongue speakers makes the need to actively address the revitalization of the Aboriginal languages more urgent. In recent years, the former Languages Commissioner and the Special Committee on Official Languages addressed the need for capacity building through the development of translation standards as well as training and certification standards for interpreters and translators.

The Standing Committee on Accountability and Oversight recommended in its Report on the Review of the 2004–2005 Annual Report of the Languages Commissioner that "...the GNWT work with Aurora College to deliver a basic interpreter/translator training program for Aboriginal languages as well as specialized training in medical terminology". While the government supports the idea in general, it "delegated" any action to the College and further made any action dependent on "sufficient demand and program funding". The government's response did not indicate any specific steps towards such an undertaking.

In her report, the Commissioner points out that despite the recognition of the importance of interpreter/translator training and certification, little has been done to actually implement any required steps that would address such education and standardization needs. In recommendation five, the Commissioner is clear about her expectations towards the GNWT in this regard.

The Committee also notes that the re-establishment of training and certification for Aboriginal languages interpreter/translator programs would be an important step towards language and terminology standardization as a vital aspect of language revitalization.

Further, in its response to the Report of the Special Committee on Official Languages, the Government of the Northwest Territories recommended that the Minister Responsible for Official Languages work with the Aboriginal language communities to expand certification standards and provide interpreter/translator training. It further recommended that one area of focus be health. It also recommended that there be a review of the development and delivery of interpreter/translator language instructor programs and adult language training.

Despite what appears to be a recognition on the part of the Legislative Assembly and Government of the Northwest Territories that there needs to be improvement in interpreter/translator services, no concrete action appears to have been taken on this issue. It is imperative that the Legislative Assembly and the Government of the Northwest Territories take these recommendations seriously and immediately develop a concrete plan for the training of interpreters/translators, with special training being available in medical terminology.

Recommendation

That the Government of the Northwest Territories immediately implement a plan for the training and certification of interpreters/translators, with special training being available in medical terminology.

In addition to providing training for interpreters/translators, it is important that appropriate resources exist. Many years ago, the Task Force on Aboriginal Languages recommended the immediate development of a dictionary of medical terminology in all Aboriginal languages. This recommendation was to ensure that interpreters/translators could do their job as efficiently as possible.

To date, little progress has been made to ensure that medical terminology dictionaries are available in all Aboriginal languages. It is imperative that the Government of the Northwest Territories take on this initiative as part of an objective to improve translation/interpretation services.

Note should be made that French medical terminology dictionaries do exist.

Recommendation

That the Government of the Northwest Territories take immediate steps to develop a medical terminology dictionary in all Aboriginal official languages.

Input from the Consumer

There is no doubt that the preservation and promotion of languages must be a joint responsibility between the Government of the Northwest Territories and the various language groups. In terms of providing health care that is sensitive to the language groups in the designated areas under the Official Languages Policy and Guidelines, it is important that the language groups in a designated area can dialogue with the regional administration of the health authority in that region. This collaborative approach will assist in identifying language issues that arise, with the hope of improving services.

Recommendation

That a formal process be developed wherein each official language group in a designated area will have direct input to the regional administration of the health authority of that region.

Cultural Training

As indicated, there are very few Aboriginal doctors in Canada. This situation is not likely to change in the near future. Given this, it is important that health care professionals have an understanding of cultural and language considerations when practising in the Northwest Territories. This will assist health care professionals to better serve their patients.

Of note is the fact that the Department of Health and Social Services has developed some orientation materials for health care professionals, including a document entitled “NWT Physician’s Guide”. While this document has a section entitled “Providing Services in the Official Languages of the NWT”, it does not give any specific advice on how to deal with an interpretation request that presents itself to the physician in the course of his or her practice. Physicians are busy and need concrete advice on these issues.

Recommendation

That health care practitioners who come to the Northwest Territories be provided with a basic orientation on cultural and language considerations in the Northwest Territories.

Meeting the Needs of the Aboriginal Population

As already indicated, it is important to look at health care from a broad perspective, and see it as one service in a range of services that can be provided to a community, to ensure individual well-being and the well-being of the community as a whole. The Department of Health and Social Services would appear to be in agreement with this approach to health care. In 2004, the Department of Health and Social Services developed an Integrated Service Delivery Model (ISDM) for health and social services delivery in the Northwest Territories. The objective of the ISDM is to integrate health and social services into a single, seamless service for the public. In this regard, the Great Slave Community Health Centre in Yellowknife is a model that should be encouraged. At the Great Slave Community Health Centre, a broad range of services can be accessed, including mental health services, addictions services, crisis services, public health services and general medical care. At the Great Slave Community Health Centre, interpretation services are provided through Stanton Territorial Hospital. While this is commendable, there is no doubt that patients are more likely to access services if they are readily available onsite. As part of the ISDM, interpretation services

could be made available in the official languages of that designated area. Interpreters would simply become part of a wellness program available to the community. This approach would promote the well-being of the official languages of the designated area. Providing language services would not be seen as an inconvenience, but as part of a holistic strategy to ensure the well-being of individuals and the entire community.

For reasons already indicated, it is also imperative that services be available for all official languages of the Northwest Territories, even if they are not the official languages of the designated area. This may prove to be a challenge, but it is not impossible. Through the use of Telehealth or Telecare type technologies, physicians, nurses and patients could be put in touch with centrally located interpreters.

There is no doubt that there is a cost to this type of endeavour, but if the government is truly committed to the preservation and promotion of official languages and quality health care throughout the Northwest Territories, then the benefits clearly outweigh the costs.

Recommendations

That the Government of the Northwest Territories continue to work towards an Integrated Service Delivery Model for health care throughout the Northwest Territories and that interpreters/translators who speak the official languages of a designated area be employed by health authorities in that area as part of that Integrated Service Delivery Model.

That the Government of the Northwest Territories increase the use of Telecare, Telehealth and other technologies to provide interpretation services in all official languages in all health care settings throughout the Northwest Territories.

Meeting the Needs of the Francophone Population

The approach to providing services to the Francophone population should be somewhat different than the approach taken to providing services to the Aboriginal population. One of the reasons for this is because the Francophone community has more resources that they can rely on from outside the Northwest Territories.

The Societe Sante en francais and La Federation Franco-tenoise reviewed this issue extensively and devised an action plan based on research. In a report entitled “Setting the Stage”, they found that the ISDM did not adequately address the language needs of the Francophone population, and that the model needed to include fully integrated language services as part of the model. This is interesting, in that it mimics the findings of this report.

As part of their research, the study included a review of the Saint Thomas Community Health Centre in Edmonton. In Edmonton, the Francophone community has grown to approximately 30,000 in the last few years. Results of a survey showed that 65% of that population did not have access to French services when obtaining health care, and when those services could be accessed, it was not of the same quality that the Anglophone community could access. Sensing a need to increase French language services, the Capital Health Authority was approached to discuss the issue of creating a Francophone health centre. Apparently, the Capital Health Authority was initially reluctant to allow the French, or any other cultural or linguistic group, to take control over a health centre. However, through collaboration and persistence, the Saint Thomas Community Health Centre was formed. It continues to receive new patients, and the goal is to make services broader and bigger, and to service the needs in the region through Telehealth type technology. By all accounts, the Saint Thomas Community Health Centre is a success, and the report suggests that a French community health centre could be established in Yellowknife. The report further suggests that in order to make the project a success, there would need to be collaboration with the Capital Health Authority and with operations such as the Saint Thomas Community Health Centre.

The report concluded that there is a need for a three step process to improve language services for Francophones in the health care setting:

Step 1: Regional Administration of Health

The report found that Francophones must be directly involved in the regional administration of health in their communities.

Step 2: TeleHealth

The report found that there must be expansion of Telehealth technology in order to improve services to Francophone patients by allowing access to French speaking health professionals in other jurisdictions.

Step 3: Creation of a Community Health Centre

The report recommends the creation of a community health centre in the Northwest Territories that would provide services to Francophone patients. The working and governance of the organization would be in French. By creating services agreements with organizations in Alberta, and relying on the link that already exists with the Capital Health Authority and maintaining relationships with organizations like the St. Thomas Health Centre, the objective would be to have a community health clinic that would provide all health services to Francophone clients in French.

The Languages Commissioner supports this approach and recommends that the Government of the Northwest Territories support and fund the concepts outlined in the report.

Recommendation

That the Government of the Northwest Territories establish a pilot project community health centre in Yellowknife to service the Francophone population. Specifics of the project would include:

- The Francophone community would be directly involved in the administration of the community health centre.
- The working language of the community health centre would be French.
- The facility would collaborate extensively with the Alberta Health Network so that all services could be accessed in French. This would likely involve a heavy reliance on Telehealth technology.
- The facility would be evaluated after a full year of operation and the review would involve input from patients who accessed the facility over the course of the year.



Projecting into the Future – Language, Culture and Medicine

As already indicated, there is a significant shortage of Aboriginal health care workers in Canada. The ratio of Aboriginal physicians to the Aboriginal population is approximately 1:33,000. The corresponding ratio in the general population is approximately 1:515. Further, only about 0.1 % of registered nurses in Canada are Aboriginal. There are no statistics on how many of these individuals speak an Aboriginal language, but based on the demographics previously discussed, this numbers would undoubtedly be low. This is disheartening in that, if health care could be provided by Aboriginals for Aboriginals, it would greatly assist in the Aboriginal population taking control of its own health care needs. The recruitment, training and retention of Aboriginal health care professionals may also help support a “tailored approach” for Aboriginal health care, including a mix of modern and traditional healing practices. As part of this, if services could be provided by Aboriginal physicians and nurses with a working knowledge of an Aboriginal language, it would undoubtedly result in the most comfortable approach to health care for unilingual Aboriginal persons. This would, in turn, benefit the whole Aboriginal community, as it would be a clear example of Aboriginal languages being used in everyday life.

While Aboriginal health care providers providing services in Aboriginal languages may seem like an unrealistic goal, there are many steps that can be taken to make this goal a reality.

Linguistic Competence

The Government of the Northwest Territories and, in particular, the Department of Education, Culture and Employment, has taken numerous steps over time to promote Aboriginal languages. This includes cultural awareness training and Aboriginal language programs for school age children. These steps are to be commended. However, despite these efforts, more needs to be done to ensure competency in Aboriginal languages in order that students use their studies in Aboriginal languages as part of their career plan. This is a huge task, but if the Government of the Northwest Territories is truly committed to the promotion and preservation of Aboriginal languages, it is important to show students that Aboriginal languages can be applicable to their everyday lives.

Recommendation

That the Government of the Northwest Territories continue to promote and develop programs that teach Aboriginal languages and develop a strategy to create youth who are competent in an Aboriginal language.

Targeting Youth to Enter Health Professions

The Government of the Northwest Territories has certainly devised a number of programs, including the Student Financial Assistance Program, that encourage youth to enter post-secondary education programs. This report is not intended to be a review of those programs. However, more can certainly be done to encourage Aboriginal youth to consider careers in the health professions. These students would then hopefully return to the North and be in the best possible position to service Northern residents and the Aboriginal population.

The Northern Ontario School of Medicine has, as its mission, the training of more physicians from Aboriginal backgrounds, rural environments and from Francophone backgrounds. As part of this mission, the Northern Ontario School of Medicine has devised a Summer Science Camp that targets Aboriginal, rural and Francophone youth. The camp is designed to entice students to consider careers in the sciences and, in particular, the medical field. The success of this program is already being seen, with 11 % of its entering class of 2005 being Aboriginal students, 16 % Francophone and 78 % of the class with at least 10 years in Northern Ontario communities. There is no reason why the Government of the Northwest Territories should not devise a similar program, or tap into this type of program, to encourage minority groups and northerners to consider careers in the health professions.

Of course, once an Aboriginal or Francophone student from the Northwest Territories decides to enter a health profession, it is important that they are supported on this journey. As indicated, the Northern Ontario School of Medicine has a solid mission to train Aboriginal and Francophone doctors. Other medical schools, such as the University of Alberta, the University of Manitoba and the University of British Columbia, have also taken steps to promote Aboriginals entering medical schools. The Native Access Program to Nursing/Medicine at the University of Saskatchewan is there to provide for support and retention services for Aboriginal nursing and medical students. The Government of the Northwest Territories must continue to tap into these resources to ensure the success of Northwest Territories students who seek careers in the health fields. It must then create programs that promote the return of these professionals to the Northwest Territories.

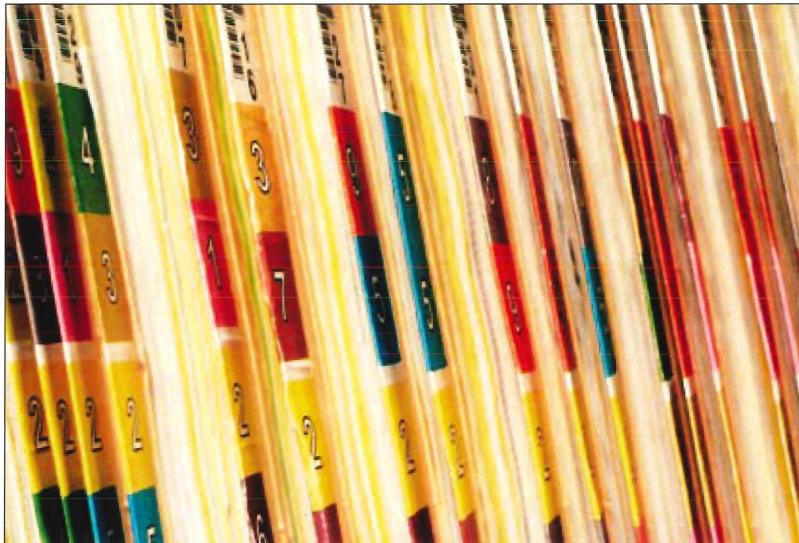
Recommendation

That the Government of the Northwest Territories devise programs that encourage Aboriginal youth to enter careers in the health professions and to return to the Northwest Territories to work.

The government must also recognize the benefits of having bilingual health care professionals, and must devise meaningful and enticing programs to encourage those who speak an Aboriginal official language or French to practice in the health professions in the North and to retain their services. While the Bilingual Bonus Program currently in effect within the Government of the Northwest Territories is positive, it is not enough, in and of itself, to attract bilingual persons to the public sector.

Recommendation

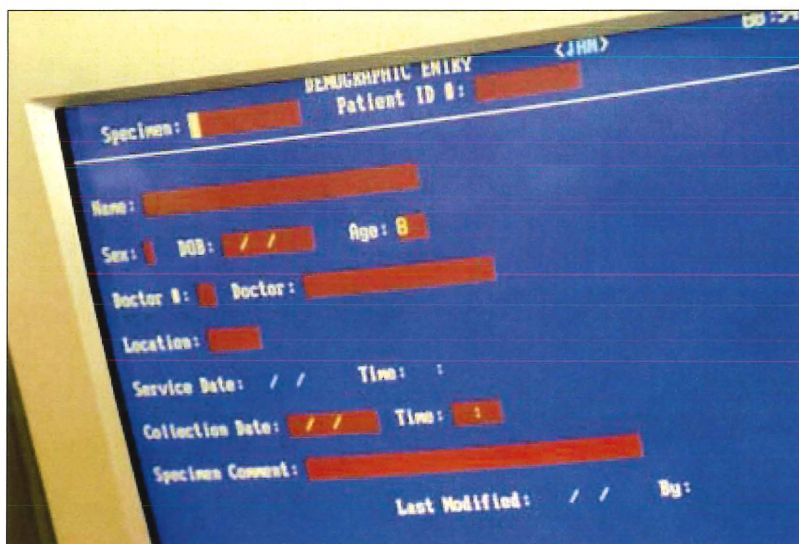
That the Government of the Northwest Territories develop strong incentive programs to encourage those who speak an Aboriginal official language or French to work in the North and to encourage their retention.



Summary of Recommendations

1. That interpretation services in all official languages of the Northwest Territories be available throughout the health care system in the Northwest Territories.
2. That the Government of the Northwest Territories take all necessary steps to ensure the timely translation of health material in all official languages. This may necessitate the need for in-house Aboriginal language translation services or dedicated contractors for those services.
3. That the Government of the Northwest Territories take steps to ensure that health information is available in all 11 official language, both online and in hard copy, and throughout the Government of the Northwest Territories. These materials should include:
 - a. general contact information for resources;
 - b. general health information; and
 - c. extensive information to assist individuals in achieving a healthy lifestyle.
4. That the Department of Health and Social Services conduct a survey to determine client satisfaction with languages services when using Telecare-NWT.
5. That the Government of the Northwest Territories create a directory that highlights the language proficiencies of health care professionals in the Northwest Territories.
6. That the Government of the Northwest Territories immediately implement a plan for the training and certification of interpreters/translators, with special training being available in medical terminology.
7. That the Government of the Northwest Territories take immediate steps to develop a medical terminology dictionary in all Aboriginal official languages.
8. That a formal process be developed wherein each official language group in a designated area will have direct input to the regional administration of the health authority of that region.
9. That health care practitioners who come to the Northwest Territories be provided with a basic orientation on cultural and language considerations in the Northwest Territories.
10. That the Government of the Northwest Territories continue to work towards an Integrated Service Delivery Model for health care throughout the Northwest Territories and that interpreters/translators who speak the official languages of a designated area be employed by health authorities in that area as part of that Integrated Service Delivery Model.
11. That the Government of the Northwest Territories increase the use of Telecare, Telehealth and other technologies to provide interpretation services in all official languages in all health care settings throughout the Northwest Territories.

12. That the Government of the Northwest Territories establish a pilot project community health centre in Yellowknife to service the Francophone population. Specifics of the project would include:
 - a. The Francophone community would be directly involved in the administration of the community health centre.
 - b. The working language of the community health centre would be French.
 - c. The facility would collaborate extensively with the Alberta Health Network so that all services could be accessed in French. This would likely involve a heavy reliance on Telehealth technology.
 - d. The facility would be evaluated after a full year of operation and the review would involve input from patients who accessed the facility over the course of the year.
13. That the Government of the Northwest Territories continue to promote and develop programs that teach Aboriginal languages and develop a strategy to create youth who are competent in an Aboriginal language.
14. That the Government of the Northwest Territories devise programs that encourage Aboriginal youth and Francophone youth to enter careers in the health professions and to return to the Northwest Territories to work.
15. That the Government of the Northwest Territories develop strong incentive programs to encourage those who speak an Aboriginal official languages or French to work in the North and to encourage their retention.



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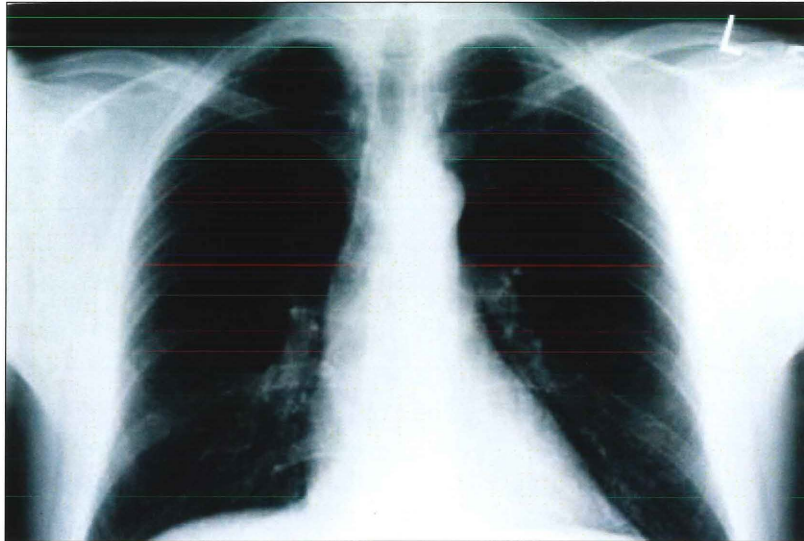
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Appendicies



Mother Tongue	YEARS OF AGE														
	Total	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
Total Responses	37,105	3,015	3,620	3,530	2,930	2,650	2,815	3,175	3,525	3,230	2,680	2,205	1,345	810	1,575
Single Responses	36,665	2,975	3,590	3,510	2,910	2,620	2,780	3,135	3,495	3,185	2,645	2,165	1,320	790	1,545
English	28,645	2,630	3,230	3,135	2,550	2,165	2,255	2,395	2,680	2,365	1,950	1,530	810	370	580
French	950	45	45	40	20	40	75	95	120	130	95	70	65	40	60
Cree	155	-	-	-	-	-	-	10	20	20	10	20	15	15	40
Chipewyan	300	10	-	10	10	10	10	15	35	35	30	30	30	20	75
Dene	150	10	10	10	10	-	15	15	15	20	10	15	10	10	15
Dogrib	1,835	165	140	160	150	180	150	190	145	140	95	90	50	50	140
Inuktitut	760	15	20	20	25	20	25	60	70	80	80	85	80	60	125
Kutchin-Gwich'in (Loucheux)	225	-	10	10	-	10	10	10	10	10	15	20	25	30	85
North Slave (Hare)	830	30	55	55	55	55	60	65	80	80	65	45	45	40	100
South Slave	1,005	25	25	25	40	45	60	95	100	100	95	85	65	65	180
All Other Languages	1,790	70	80	45	50	105	125	165	230	230	170	210	115	100	130
Multiple Responses	440	40	30	20	25	30	35	35	30	45	35	40	25	25	30
English and French	85	15	15	10	-	10	10	-	-	10	10	-	-	-	-
English and non- official language	340	25	15	15	25	25	30	35	25	35	25	30	15	15	25
French and non- official language	15	-	-	-	-	10	-	-	-	-	-	10	-	-	10
English, French and non-official language	-	-	-	-	-	-	-	-	-	-	10	-	-	-	-

Appendix 3 –
 Percentage of Aboriginal Population 15 Years of Age and Older,
 by Ability to Speak an Aboriginal Language, Northwest Territories, 1984 – 2004

Community	2004	1999	1994	1989	1984
Northwest Territories	44.0	45.1	51.0	55.6	59.1
Aklavik	19.3	18.7	28.1	21.8	23.8
Behchoko (Rae Edzo)	93.1	97.9	95.5	94.3	95.0
Colville Lake	65.3	76.2	95.7	95.3	100.0
Deline	95.8	93.4	96.2	98.3	97.1
Detah	82.5	77.4	88.9	94.0	94.6
Fort Good Hope	41.1	47.7	53.8	81.0	69.1
Fort Liard	74.5	78.8	82.4	88.6	88.3
Fort McPherson	22.7	27.4	23.7	30.8	27.2
Fort Providence	60.9	61.1	64.3	68.5	77.1
Fort Resolution	45.9	40.9	49.6	54.6	68.1
Fort Simpson	48.4	54.9	60.9	71.6	74.8
Fort Smith	28.5	23.3	33.7	27.3	36.0
Gamèti (Rae Lakes)	98.5	98.4	100.0	100.0	..
Hay River	23.1	28.7	29.8	33.9	39.0
Holman	76.3	58.2	71.3	96.4	69.8
Inuvik	17.6	24.8	25.3	26.5	35.2
Jean Marie River	63.5	62.0	67.4	83.3	82.5
Kakisa	86.1	67.9	85.3	85.7	72.0
Lutselk'e	77.9	79.5	69.3	90.7	97.4
Nahanni Butte	83.5	74.6	98.7	98.1	88.9
Norman Wells	26.9	28.7	36.4	51.5	65.9
Paulatuk	..	27.0	25.4	32.1	28.6
Sachs Harbour	26.9	27.6	26.1	38.0	43.5
Trout Lake	95.3	90.7	62.3	100.0	100.0
Tsiigehtchic	24.2	31.3	39.8	43.1	74.6
Tuktoyaktuk	28.3	25.3	30.1	37.7	35.8
Tulita	47.3	62.9	61.3	82.0	84.8
Wekweèti	96.1	96.8	98.8	100.0	100.0
Whati	96.9	98.9	97.6	99.1	99.3
Wrigley	79.2	92.0	96.2	100.0	100.0
Yellowknife	25.3	21.9	33.5	36.6	51.5

Prepared by: NWT Bureau of Statistics

Appendix 4 –
Northwest Territories Health and Social Services Authorities



Appendix 5 –
Questionnaire on Interpretation Services an a Health Care Setting

Institution:

Person completing form and position (for record keeping only):

1. What does your organization do when a patient and/or escort requests interpretation services?

2. How does your organization access interpretation services (i.e. are they available onsite? Must someone be brought in?, etc.) Please explain.

3. Does it take time to set up interpretation services once they have been requested? If so, how long?

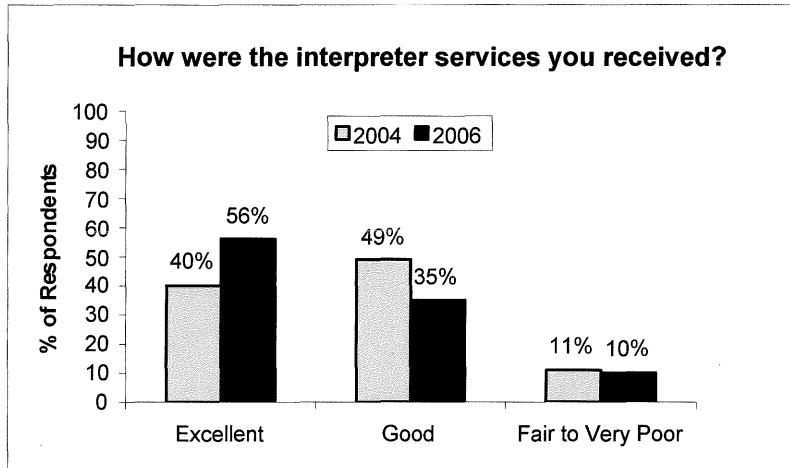
4. Are there any signs in the organization that tell someone what to do if he or she wants interpretation services? If so, please give details.

5. The Northwest Territories has eleven official languages. Does your organization have the ability to provide interpretation services in all eleven official languages? Please give details.

6. Do you have any suggestions that might improve access to interpretation services in health care settings?

Appendix 6 –

Northwest Territories Hospital Satisfaction Questionnaire, Hay River – 2006



2004 n=68
2006 n=66

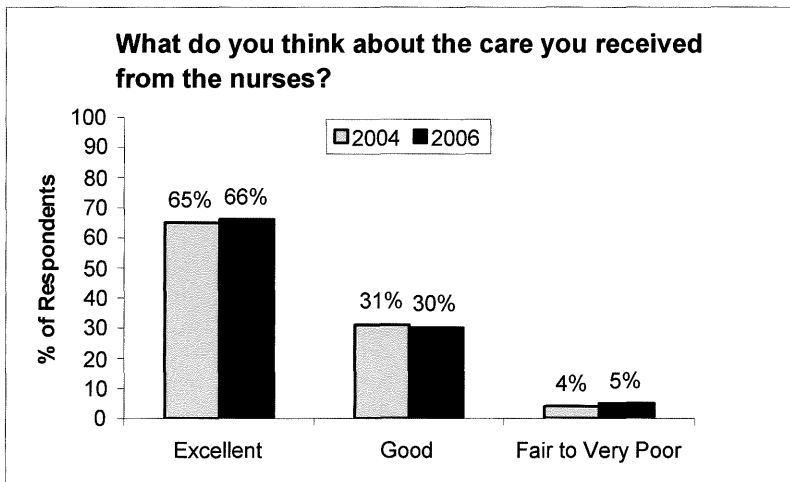
- Interpreter services also saw an increase in satisfaction ratings at the hospital – ratings of excellent rose from 40% in 2004 to 56% in 2006.
- In 2006, one respondent gave a rating of very poor and in 2004 no respondents gave ratings of very poor.

Health Care Providers

The Health Care Provider section of the questionnaire was divided into nurses, doctors and specialized health care providers. Similar questions were asked of each.

Nurses

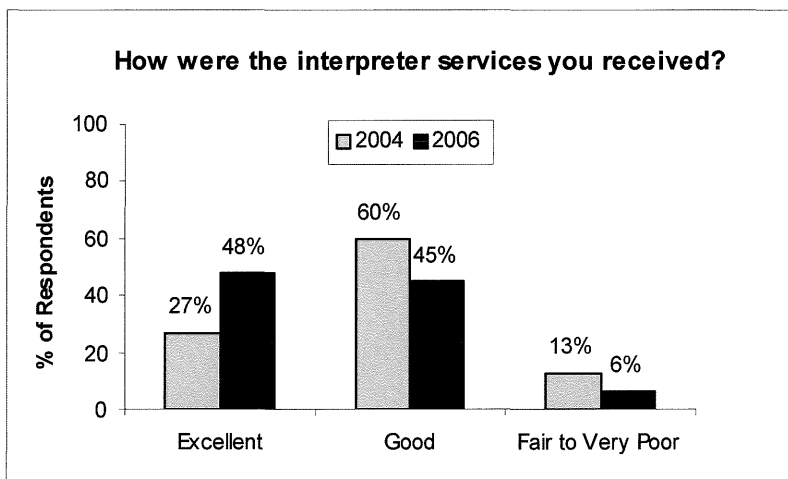
The high level of respondent satisfaction with nurses was evident in the three questions directly related to nursing with 93% or higher of respondents in 2004 and 2006 providing ratings of good or excellent.



2004 n=152
2006 n=206

- The satisfaction ratings for care received from nurses was similar in 2004 and 2006.

Appendix 6 –
Northwest Territories Hospital Satisfaction Questionnaire, Inuvik – 2006



2004 n=70
2006 n=88

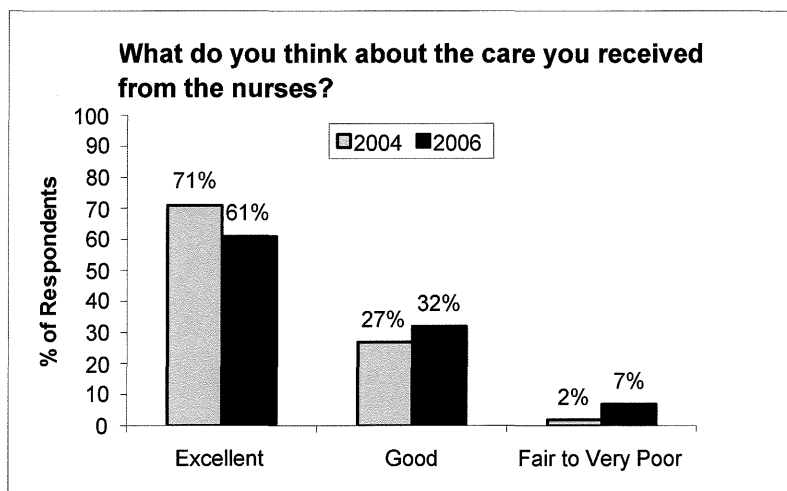
- Interpreter services saw an increase in satisfaction ratings at the hospital – ratings of excellent rose from 27% in 2004 to 48% in 2006.
- In both 2006 and 2004, one respondent gave ratings of very poor.

Health Care Providers

The Health Care Provider section of the questionnaire was divided into nurses, doctors and specialized health care providers. Similar questions were asked of each.

Nurses

There was a high level of respondent satisfaction in the three questions directly related to nursing with 92% or higher of respondents in 2004 and 2006 providing ratings of good or excellent. However, excellent ratings decreased in 2006.



2004 n=176
2006 n=227

- In 2006, excellent ratings declined as more respondents selected ratings of good or fair than in 2004.



In the past three years, the most common symptoms of callers have been:

- Vomiting - Child
- Cough - Child
- Colds - Child
- Chest Pain - Adult
- Fever - Child
- Diarrhea - Child
- Headache - Adult

Here are some health information topics that have been requested by callers in the past three years:

- Breastfeeding
- Medication
- Fever
- Scabies
- Diarrhea
- Flu
- NWT Immunizations



Johanna Grace Hugo

Over the course of the past three years one of the largest groups of individuals accessing Tele-Care NWT have been new parents. Out of a total call volume of 14,451 calls, 25% have been from new parents calling for children under the age of 5. Barbara Beaton is an example of a new mother who has called more than once about her little girl, Johanna Grace, featured above.

Total Number of Calls

Location of Callers by Health and Social Services Authority

HSS Authority	2004/2005	2005/2006	2006/2007
Beaufort Delta	163	297	322
Sahtu	108	204	202
Dehcho	88	182	145
Tli'Cho	56	138	204
Yellowknife	3157	3621	3396
Hay River	344	459	782
Fort Smith	90	186	209
None Specified	13	22	63
TOTAL	4019	5109	5323

Callers are asked to say what they would have done if they had not called Tele-Care NWT. In the past three years, the common answers have been:

- Would have gone or called the Emergency Department or the Health Centre;
- Would have called their Health Care Practitioner;
- Would have waited to see;
- Would have treated at home



Info-Soins TNO

Tele-Care NWT 1-888-255-1010

24 Hours a Day • 7 Days a week / 24 heures sur 24 • tous les jours 1-888-255-1010 (TDD/TTY)

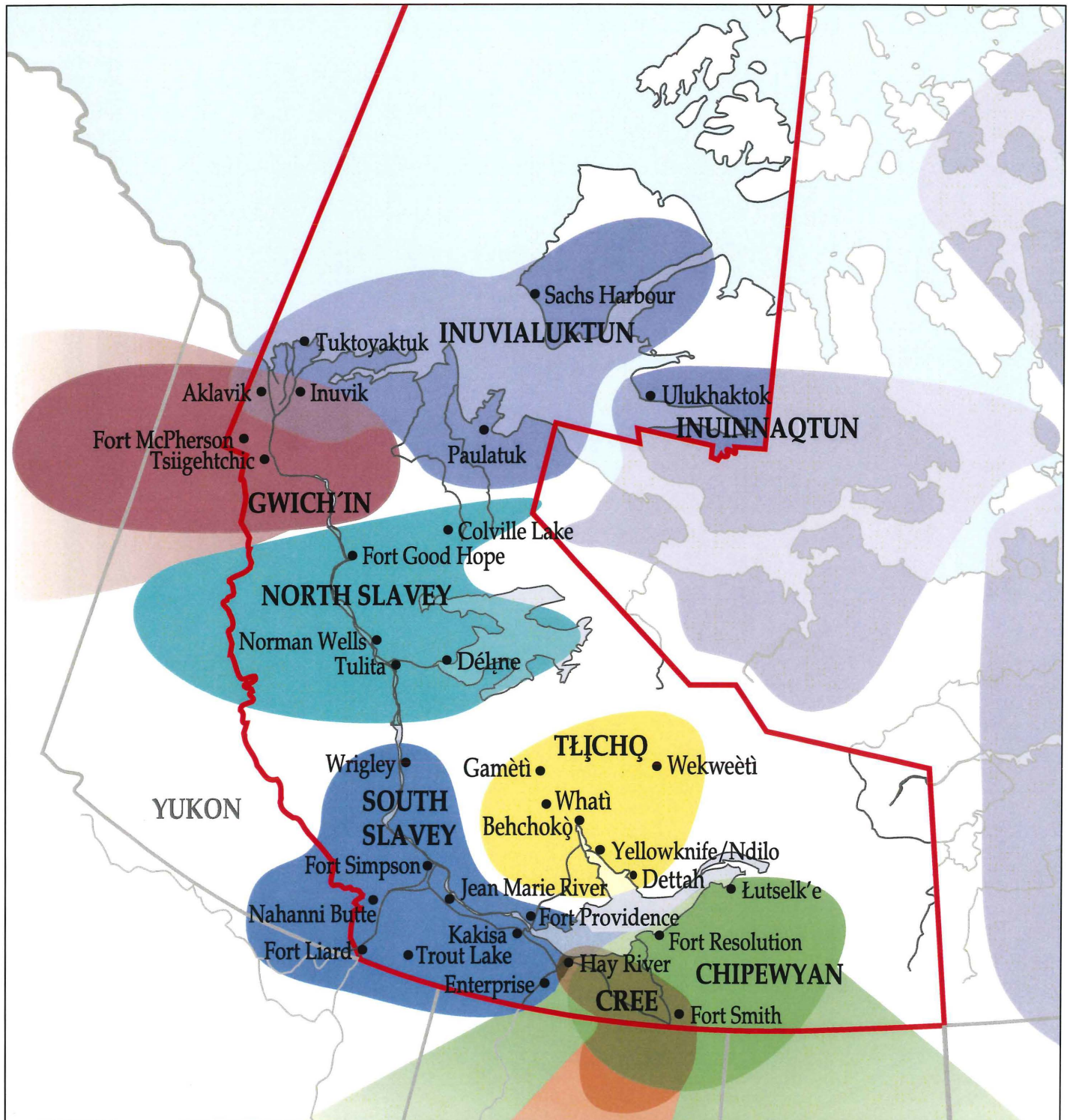


Appendix 8

Review of Complaints

1993-1994	27.7 % of complaints related to communication services 17.4 % of complaints related to interpretation/translation services
1996-1997	52 % of complaints related to communication and services to the public
1997-1998	50 % of complaints related to communication and services to the public
1998-1999	91.67 % of complaints related to communications and services to the public
2000-2001	80 % of complaints related to interpretation/translation services
2005-2006	100 % of complaints related to communications in health care

Official Languages of the Northwest Territories



French is mostly spoken in Hay River, Fort Smith, Inuvik and Yellowknife.
English is spoken throughout the Northwest Territories.
Inuktitut is mostly spoken in Yellowknife.

How To Contact Us

In Person:

5003 - 49th Street
Laing Building 1st Floor
Franklin Avenue Entrance
Yellowknife, NT

By Mail:

Office of the Languages Commissioner
Box 1320
Yellowknife, NT X1A 2P4

By Phone:

(867) 873-7034
1-800-661-0889

By Fax:

(867) 873-0357
1-888-305-7353

