AGING AND RURAL MINORITY COMMUNITIES: THE CASE OF HATLEY TOWNSHIP

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Introduction

This article is a revised version of a presentation to the colloquium entitled "Rural Communities in an Aging Society" hosted by the Eastern Townships Research Centre at Bishop's University in October, 1998. The oral presentation was made by Joanne Pocock assisted by William Floch. To retain the interactive nature of this presentation, we have decided to present the article in the form of a conversation.

The notion of dialogue also applies to the data sources on which the article is based. The first information source is demographic data describing Hatley Township, Memphremagog MRC, the Estrie Region, Quebec and Canada. Using this data, we will provide a demographic description of an aging community and will attempt to explain the demographic patterns which are present. We will also attempt to weigh the specific impacts of being "rural" as well as being a "minority" and will draw some comparisons between the Anglophone and Francophone communities of Quebec to better understand the community aging experience.

The second source of information is a series of inter-generational interviews conducted with Anglophone and Francophone families living in Hatley Township.¹ With these we would like to share the concrete experiences of families in an aging community; how they are coping; how the traditional roles of the family are affected, specifically, the nature of the care-giving function.

The demographic data provides a macro portrait of the community which is necessarily quantitative and somewhat impersonal. The data drawn from interviews is anecdotal and, by definition, personal. The interplay between these types of data has proven to be a challenging one. Together, we believe, they tell an interesting story.

Q: When people think about aging among individuals, they think of greying hair and wrinkled skin. But societies age too. What do we bring to mind when we think of an aging society?

We think about the proportion of age groups in a population: young, mature, and aged. The United Nations groups the ages of societies by the proportion of their populations aged 60 years and over. A population is considered "aged" if 10% or more of the population is aged 60 and over. Canada's population, for example, is one of the oldest in the world. In 1986, Canada qualified as an aged nation since 2,697,600 people or 10.7% of its population was 65 and over. By the year 2031 the proportion of Canada's population—almost five times the proportion of older people in 1900.²

Q: *What are the causes of this aging trend?*

We tend to study three conditions that affect a population's size and structure—migration, death rates, and fertility rates. To understand the aging trend in Canada and modern industrial societies in general we need to consider these factors and examine their interplay. The two most significant forces in the case of Canada are the drop of fertility and death rates. The drop of the death rate, or put differently, the increase of life expectancy of its citizens over the course of the 20th century means that Canada has one of the highest life expectancies in the world. More people enter old age than ever before in history.

The drop in fertility rate starting in the 1960s has meant a sharp decline in the proportion of young people in the population. By 1971, the fertility rate among Canadians had fallen to below the replacement rate of 2.1. Statistics Canada projects a continuing decline in the portion of young people under the age of 20 into the next century. It is projected the young will account for less than 20% of the population while the older population will grow to 25%.³ Of course it is important to keep in mind that the ratio of young, mature, and old varies from region to region in Canada and also within the regions. The consequences of the aging trend will vary as they combine with different social, political, and economic conditions.

Q: How have these trends played themselves out in the Quebec context specifically?

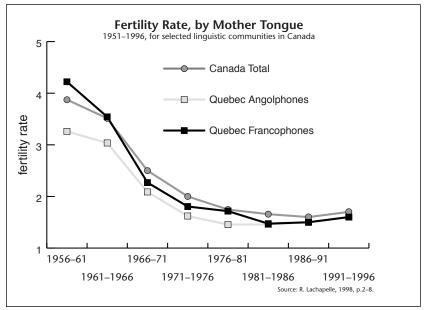
We have to keep in mind that Quebec consists of two main linguis-

tic constituencies and the distinctive status and character of each means they are affected differently by the trends. The total population of Quebec is 7.3 million and the size of the Anglophone population, a minority within the province, is estimated to be about 925,000 or approximately 13% of the population, While a minority, this community is still larger than several Canadian provinces. Although the majority of Quebec Anglophones live in the greater Montreal area, there still remains a sizable proportion of the Anglophone community in the various outlying regions of Quebec. The Anglophone population of what is referred to as "mainland" Quebec consists of approximately 140,000 people.

Like other western industrialized societies, Quebec has seen life expectancy extended to unprecedented levels in the 20th century.

The fertility rate of Quebec Francophones was traditionally higher than the national average until the late 1960s when the cumulative effect of the Quiet Revolution coincided with emerging trends in western societies to produce a drop-off in fertility rates approaching that of the rest of Canadian society.

In the 1970s, this trend, combined with the perception that immigrants were tending to join the Anglophone community rather than the Francophone community, inspired Quebec legislators to adopt a series of language laws which were designed to protect the French language and to ensure its continued viability and hegemony in Quebec.



It is interesting to note that, apart from the 1986–1991 period, the fertility rate of Quebec Anglophones has always been lower than that of Quebec Francophones. Despite a slight up-turn in fertility rate in recent years, the continued low fertility rate of Anglophone women, combined with the massive out-migration of Anglophone men and women, many in their prime child-bearing years, over the past 25 years, means that it is easy to understand that the Quebec Anglophone communities face serious demographic challenges to their survival.

Q: So far, you have addressed the Quebec context in general. What about your specific target group in Hatley Township?

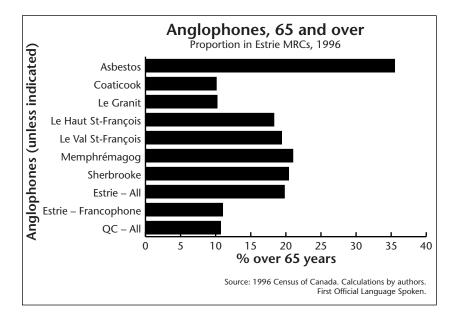
For the purpose of our research we have narrowed our focus to Hatley Township, which consists of the municipalities of Hatley, Ayer's Cliff, North Hatley and Ste-Catherine de Hatley (Katevale) surrounding Lake Massawippi.⁴ The township is part of the modern administrative district of Mempremagog in the administrative region of Estrie and also one of the historical Eastern Townships. There are currently some 4,855 residents of Hatley Township, of whom 1950 (or 40%) have English as their "first official language spoken." This community is an interesting example to us because of its rural nature and also due to the high rate of aging, particularly among the minority Anglophone community.

Similar to other parts of Quebec, the Anglophone population in this area has experienced political and economic pressures which in turn created an unprecedented exodus of the population in the late 1970s and early 1980s. For Quebec as a whole during this period, fully one-third of all Anglophones between the ages of 20 and 29 left the province and this out-migration also resulted in the loss of onequarter of Anglophones with university education. While Anglophones have always shown a tendency toward mobility, this outmigration was unusual both in its scope and for the fact that in-migration slowed to a trickle during this period. The effects of these events, which continued in later years at reduced rates, are still being played out in much the same way as the baby boom was a demographic phenomenon from the late 1940s and 1950s which continues to shape our social reality years later.

One impact, as illustrated in the accompanying table, is that 19.8% of Anglophones in the Estrie region of Quebec are 65 years of age or older. This makes the Estrie Anglophone community the most aged community of 34 linguistic communities in Quebec (2 language groups in 17 administrative regions).

Administrative Region	Anglo	Franco	LCAI
Bas St-Laurent	8.1%	12.5%	0.65
aguenay Lac-St-Jean	10.9%	9.6%	1.13
Québec	15.7%	11.6%	1.35
Mauricie	18.4%	13.3%	1.38
strie	19.8%	11.0%	1.79
⁄lontréal	13.3%	13.6%	0.98
Dutaouais	9.8%	8.2%	1.19
Abitibi-Témiscamingue	14.4%	8.9%	1.61
Côte-Nord	8.9%	7.0%	1.28
Nord-du-Québec	1.2%	2.7%	0.43
Gaspé-Îles-de-la-Madeleine	16.0%	12.2%	1.31
Chaudière-Appalaches	6.9%	7.1%	0.97
aval	9.2%	10.6%	0.86
anaudière	15.9%	8.4%	1.90
aurentides	16.0%	8.7%	1.83
Montérégie	11.6%	8.9%	1.31
Centre-du-Québec	15.5%	11.1%	1.39
Total – Quebec	12.8%	10.7%	1.19

It should also be noted that the post-exodus population pattern in the Estrie region has contributed to an age structure that is now dramatically different in the Anglophone and Francophone communities. Using a measure which we call the **Linguistic Community Aging Index** (LCAI), we can examine the aging trend between linguistic communities. As can be seen in the table, Anglophones in the Estrie region have an index of 1.79 relative to their Francophone counterparts. In this instance, it means that they have 79% more individuals in the 65 and over age group than do Francophones on the same territory. On a provincial basis, the LCAI for Anglophones across Quebec is 1.19 which means that the Anglophone population is generally older than the Francophone population. It remains, however, that this trend is felt more strongly in Estrie than in any other region.



Q: You have clearly managed to identify a characteristic that not only differentiates the Anglophone and Francophone communities in Estrie but also distinguishes Estrie from other Quebec regions. How do these trends play out within Estrie?

Within the Estrie region which we are currently examining, there are 7 regional municipal counties (MRCs) which are crucial to the planning, organization and offering of provincial government services, including health and social services. As can be seen in the accompanying graph, the strong trend toward aging among Anglophone communities is consistent across the region and is substantially more pronounced when compared to the population of Estrie and of Quebec.

The following table situates Hatley Township in the regional municipal county (MRC) of Memphrémagog, which in turn is part of Estrie, which is one of Quebec's 17 administrative regions. Moving outward from the local (Hatley Township), it can be seen that the proportion of seniors declines continuously in the Anglophone community whereas there is little variance in the rate of aging among the respective Francophone communities irrespective of the geographic unit.

The aging tendency is quite pronounced among the Anglophone community in Hatley Township where we find 21.1% of Anglo-

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phones in the seniors age group. This aspect is considerably different from the situation among the surrounding Francophone community in Hatley Township (10.7%) and across Quebec (10.7%) as well as significantly different from the situation among the Anglophone groups across Quebec (12.8%) or in Canada (11.2%).

Q: You've talked about the seniors. What about the other age groups, especially the adults who provide informal support to seniors?

For the Anglophone community of Hatley Township, this aging phenomenon is exacerbated by an under-representation in the 35-54 year age cohort who are generally counted upon to provide a wide array of informal support services to elderly family and community members. This "caregiver generation" (35–54 years of age) is only slightly more numerous than the senior population. In 1996, there were 560 Anglophone community members between ages 35–54 in Hatley Township, compared to 410 seniors, thereby yielding a "caregivers to seniors" ratio among Anglophones in Hatley Township of 1.37. This ratio is dramatically different in the Francophone community of Hatley Township where we find 3.13 community members between 35-54 for every senior (970 to 310). Another way of representing this data is to understand that Anglophones in Hatley Township have only 44% of the caregivers for their senior population relative to the surrounding majority. If the age structure of the Anglophone community were similar to that of the Francophone community, and if the number of Anglophones over 65 remained constant, there would be another 723 individuals in the 35-54 (caregiver) age cohort. This population gap has obvious consequences for the care of the seniors but also must be understood as representing a considerable loss for community leadership in general. Among the 17 administrative regions of Quebec, the relative "caregivers to seniors ratio" in the Estrie region shows the greatest variance for the minority when compared to the majority. For the province as a whole, the Anglophone community has a ratio of 0.77 indicating that there are 77% of the caregivers cohort in the minority Anglophone community when compared to the majority Francophone community.

Q: At this point, could you sum up the aging pattern in Estrie?

The Anglophone population of the Estrie region is the most aged linguistic community in the province and it also diverges dramati-

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cally from the Francophone community with which it cohabits the region. This demographic reality is clearly evident in Hatley Township. Needless to say, these demographic factors have tremendous importance in terms of community needs and priorities and in terms of public policy when it is considered that the demographic profile of the majority population is so dramatically different from that of the minority.

Q: Okay, you've established that Anglophones in Estrie are, by any measure, an "older" population. What about such characteristics as "rural" and "minority"? How do they affect the experience of aging for this group?

Let us examine the rural nature of this community. To begin with, it should be mentioned that many Anglophones, like their Francophone neighbours, live in the cities, both large and small, across the province of Quebec. This being said, another distinguishing characteristic of the Anglophone population in the Estrie region is that it is is more rural than its Francophone counterpart. The Anglophone population shows a greater tendency to dwell in more rural settings while the Francophone population tends to be located in more urbanized centres. There are, of course, historical and cultural reasons for this.

By way of examples of the stated tendency for Anglophones to reside in rural areas in greater numbers than their Francophone counterparts, we can look at Coaticook MRC where we find that 44% of Francophones live in the town of Coaticook, while only 20% of the MRC's Anglophones live in that town. Similarly, in the Haut-St-François MRC, we find that the two largest municipalities (East Angus and Ascot Corner) contain 33% of the MRC's Francophones but only 9.6% of the MRC's Anglophones. This trend is confirmed with the largest urban centre in Estrie: the MRC of Sherbrooke contains the contiguous cities of Sherbrooke, Fleurimont and Rock Forest, which have 87.3% of the MRC's Francophone population but only 51.6% of the MRC's Anglophones.

As can be seen from the table on page 21, while the Anglophone community represents more than 40% of the Hatley Township population, their relative weight diminishes at the MRC level (21.8%) down to 9% at the Estrie administrative level before rising to 13.3% at the provincial level, owing to the influence of the larger Anglophone community in the Montreal region. This demographic fact has important consequences in terms of political influence.

The higher tendency toward aging and the accompanying tendency to reside in rural areas has obvious implications for service delivery.

Q: Could you give us an example to illustrate this?

Yes, let's take the example of the Memphremagog MRC which surrounds Lake Memphremagog. This MRC includes Hatley Township as well as a number of other municipalities which surround Lake Memphremagog. Magog is the largest municipality in the MRC, with approximately half of the MRC's population. Interestingly, we find that 62% of the older members of the Francophone population in the CLSC are concentrated in the Magog and Magog Township area whereas only 19% of the Anglophone elderly are found in Magog and environs. Accordingly, those providing health and social services out of the Alfred-Desrochers CLSC (which serves the MRC) have understood that a Magog-centred set of services might be appropriate for a majority of the Francophone elderly in the region but would fall far short of meeting the needs of the Anglophone elderly who are much more scattered in the villages and smaller towns which comprise Memphremagog CLSC. Unless the particularities of the demographic distribution of the Anglophone elderly are known and understood by service planners, it is more than likely that services such as day activities or information sessions which were concentrated in the Magog area would attract little interest from the largely rural Anglophone elderly. Ironically, even wellintentioned offers of service, unless appropriately planned, would fall short. Exploration by service providers of itinerant day-services or considering support for volunteer-based organizations in the villages where Anglophone seniors reside are a couple of examples of initiatives which could be considered. Similarly, given Magog's status as the main commercial/administrative centre for the territory, efforts toward reliable transportation services facilitating senior travel to Magog, could also be considered.

This means a difference in access to health and social services which have become increasingly centralized in the region as elsewhere in the province. We have noted that the aging trend is accelerated in the Anglophone constituency when compared to the Francophone. Clearly, then, those most likely to need services are least likely to find them easily accessed and by not using them as frequently these services will have less likelihood of being designed for them. The literature documents the trend among the 60 and over age group to relocate to urban centres to be closer to services—this is not the trend in this particular constituency.⁵ While there is some relocation to follow family members, children usually, there is little evidence of a pattern among Anglophones in Estrie to move from the rural setting (from the countryside or small community) to the urban centres within the region. As we noted earlier, the young professional class are the most mobile in the Anglophone population and the rural farming families tend to be the most stable.

Q: If rural Anglophone families have not tended to frequent these services how have they coped with the needs of their elderly or for that matter of any age group?

Historically there has been a strong tradition of informal support among rural Anglophone families. The level of institutionalization of the elderly has been and still is significantly low. The choice is clearly to provide support for any of those in need through a local network of family, friends, and neighbors. Small private homes located in rural villages, visiting nurses, extended family households, "meals on wheels," have been the mainstay for support. Let us be clear here also that our research as well as that of Health Canada underlines that the majority of those 65 years and over enjoy good health, live independently, and are very active in their families and communities.⁶ That being said, the accelerated aging of this community combined with its minorization means that families now are not as co-present and in some rural villages the ratio of young and old is so askew that to be 60 is to be counted among the young generation!

The community has coped remarkably well, considering the pressure it has been under in the last few decades—clearly there are lessons to be learned from this experience. However, projections for the future may be more bleak. The tradition of informal support is jeopardized precisely at a time when the measures of the government, such as closure of hospitals with an attendant emphasis on home care, assumes the family can step in to assume the responsibility for care. And this is not merely the practical matter of services like transportation and medical needs. The role of caring embraced by the model of informal support is highly valued by the members of this collective.⁷ It is a sacred occasion among family and friends for social exchange between young and old and when this is put at risk the issue becomes one of leadership. A way of life is at risk.

Q: Besides being rural and older, one of the unique characteristics

of this community is its status as a minority. How does this work?

The answer to this question is not an easy one. The very questions of "what is a minority?", "what does it mean to occupy a minority status?", are ones which deserve much more attention then we can give in the confines of this discussion.⁸ We generally conclude that it means "fewer in number" and in our democracy "the less powerful" but these are simply negative comparisons with the majority. We rarely address the positive role of the minority or define its place within the whole in what could be potentially effective terms. We seldom speak of the minority status as something worth pursuing or as a position a community accepts or even desires. It is more likely to be viewed as simply an unfortunate circumstance and we presume every minority seeks to be a majority or at least to wield the power that a majority is understood to hold. We presume, in other words, that the minority wishes to be something other than what it is.

The distinction between the minority and the majority is not a new one. Socrates, too, spoke of the few and the many. What is new, perhaps, is the tendency to reduce this distinction to merely a quantitative one. Here what makes a minority a minority is sheerly an aggregate of bodies so designated by counting population. The challenge of the minority, in this light, is to nurture itself as a community and to resist the conventional thinking which would reduce it to merely a set number of individuals in a measurable geographical location. Yes, the minority is this, but also more. *Community* suggests a shared vision—a sense of being particular which is more than merely quantitative. The strength of the minority in this sense does not lie in manipulating or imitating the majority nor in the capaci-ty to gain advantage over other groups. As a community its strength lies in its efforts to develop its own sense of self—its own centre if you will—in its efforts to clarify and care for its unique history and character for example. Put simply, the strength of the majority and the strength of the minority coincide.

Q: Still, the question remains as to the consequences of the aging trend for the Anglophone population in Hatley Township specifically. Could you be more concrete?

Yes, well, there are a number of factors to consider when we address this population specifically. The Anglophone population has undergone a rapid change in status in the last 30 years so its minority position is still relatively new. It is still unsure and has yet to embrace this role, old avenues for solving problems are uncertain, avenues for communication and even the established ways of self-understanding are problematic. It is a crisis or let's say a critical time for rethinking and negotiating the place of the community within the larger whole. There is a correlation, of course, between the vitality of the aging community—like any community—and the strength of its self-understanding. The aging of this population, then, is coupled with the destabilizing effects of minorization which can only exacerbate its fragmentation. For example, we have indicated where the ratio between young and old is disproportionate the traditional network of support is fragile. The aging of the community has led to a crisis in leadership just when becoming a minority has made it a crucial need.

Another important point is that here in Canada minority status differs from province to province. The Anglophone minority in Quebec are in effect "a minority within a minority" and this makes their predicament a little different. Historically, Francophone Quebec has viewed itself as a threatened minority within Canada and this has led some opinion leaders in Quebec to view the Anglophone minority as a "fifth column," "Trojan horse" or as "the enemy within." For a long time the political objective of the province has been to strengthen the position of the majority and being generous towards its minority almost seemed like a contradiction. To many Anglophones, the campaign to make French more secure by promoting its status as the "public" or "common" language is threatening because there are no *a priori* limits which could suggest that sufficient progress toward protecting French has been made.

The perceived strength of its minority is even now felt as a potential threat to the continued well-being of the status and culture of the Francophone majority. It may well be that opinion makers have been unable to distinguish between the vitality of the English language in international and North American terms and the fragility of the English-speaking or Anglophone communities of Quebec. This stands in stark contrast to other situations in Canada where the strength of the minority is seen to enhance the well-being of the province as a whole. For example, in the course of this research we had assistance from a Bishop's University graduate who is an Acadian from New Brunswick. She was quite surprised to see the difference between her minority experience in New Brunswick and that of the Anglophone youth she interviewed. She noted particularly her sense of being celebrated-the festivals, the universities, and other programs and initiatives designed to recognize and support the development of the minority-which seemed lacking in the experience of the Quebec Anglophone youth. This gap in experience leads to the legitimate question: If Anglophone youth are dispirited and without recognition then how can a sense of responsibility for the community be fostered? Would the majority itself not be better served where this pride is cultivated?

While it is somewhat commonplace to assume the institutions of a society are organized around the culture of the majority which always represents something of an obstacle to the minority, in Quebec, there exists a heightened anxiety regarding the priority and perceived needs of the majority and the objective of preserving this priority is most explicit. While the catchword everywhere in Canada is "multiculturalism" with the attendant challenge to make our institutions more accessible to an increasingly diversified population, in Quebec this follows upon a long history of social policy designed to protect first and foremost the culture and status of a single linguistic group. The decidedly homogenous nature of the Quebec public service (98.5% of employees are white Francophones) is a clear demonstration of this bias toward the majority.

The aging trend in the Anglophone population of Hatley Township intertwines in many significant ways with its minority status. We cannot emphasize enough the significant insights to be gained by placing this population in the context of those in Canada and elsewhere who share a similar predicament.⁹ Yet, its distinctiveness as Canada's only Anglophone minority community has provided it with few obvious kindred spirits, unlike the Francophone and Acadian minorities of other provinces where Franco-Ontarians, for example, have been able to make common cause and share inspiration with Acadians from the Maritimes or with Francophones in Western Canada.

Q: It seems that the aging of a community is not unlike that of an individual; it is a time to take stock of where we have been and where we want to go; a time to take a measure of ourselves. Besides demographic information I understand your research entailed conducting interviews with families living in Hatley Township. Could you tell us something about these?

Thus far we have interviewed twelve three-generational families, 10 Anglophone and 2 Francophone.¹⁰ A formal questionnaire was designed and used in each interview. In each case, the interview was approximately two hours long and was videotaped. A video based on the accumulated tapes is planned.

In each interview conducted we included 3 or 4 generations of a given family. In one or two cases this may have included members

in a "home" and in every case members from several households. Each interview tends to include the spectrum from elementary school age children to some individuals celebrating their 98th year. We have not as yet gathered as many interviews as we would like. Our research plan also includes both Anglophone and Francophone families but we have had much more difficulty gaining access to the French-speaking households. We can only speculate as to why, but the demographic comparisons indicate that the aging trend is not yet causing as much pressure for this constituency and perhaps this accounts for less interest in the topic. Historically, this group has been more comfortable with the formal institutions providing services for the elderly and as the majority in the province they are likely to have greater confidence in services meeting their needs. Perhaps they do not feel the same urgency as their Anglophone counterparts who have been in crisis for some time. We were also less successful in locating Francophone families of more than one or two generations in Hatley Township than we were Anglophone.

Q: Why, when the topic is aging, would you be interested in school age children?

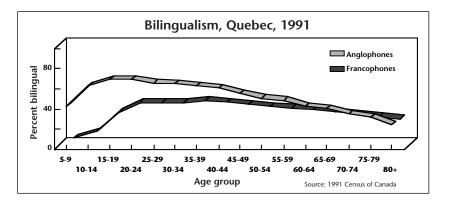
Our habit of mind when we hear the term "aging" is to think of elderly people. Literature on aging communities also falls into the trap of focusing on the older segment of the population and individual process to the exclusion of the relation between all the parts of the collective. For example, research is often devoted to exploring every aspect of the older constituency—their state of health, their political behaviour, their recreational habits, and so on.

We would suggest just as any individual life consists of youth, the middle years, and the golden years so too a collective consists in the dynamic between these parts. The experience of one part depends on the experience of another; a crisis in one part will have repercussions for every other part. An aging community is one where the equilibrium between its parts is affected. This places pressures and demands upon some of its roles which have not necessarily been experienced before. We would want to draw attention to the need for support which recognizes this underlying interdependency. If we now devote our attention to the elderly exclusively we may be overlooking aspects of aging which are affecting our youth or our middle years group and actually misconstrue the cause of problems faced by those in later life.

Q: How does this work in the case of Hatley Township?

The easiest thing might be for us to proceed by looking at each generation and then we'll attempt to draw some general conclusions. If we start with the generation 65 years and over we find that many in their 60s still have aging parents. Again, as research by Health Canada underlines, the majority of this cohort enjoy good health and are disability free, the majority live independently, most have little need for formal services and are very active in their families and local communities. Just to illustrate, a portion of our interview was designed to learn about the experiences of the Anglophone group with services—hospitalization especially—but we learned very little as most had not yet had any contact with them!

• The 65 years and older group is more likely to be unilingual English. The workplace of those of the middle years placed more pressure upon them to acquire French as a second language. Bilingualism is clearly understood to be a requirement for the youngest generation and many expressed dissatisfaction with the English-language schools in their capacity to produce this skill. As the accompanying graph illustrates, the level of bilingualism is much higher among younger Anglophones than among older Anglophones and Anglophones are now considerably more bilingual than their Francophone counterparts.



• In Hatley Township, 57.7% of the Anglophone community are bilingual, compared to 47.2% of the Francophone community. The levels of bilingualism in the township are closer than those shown by the two linguistic communities on a regional basis, where 63% of Estrie Anglophones are reportedly bilingual, as compared to 32.8% of their Francophone counterparts.

- It is worth noting that many families had been in the Townships for generations and could speak of 200 year old farms established by their ancestors. This attachment to place—often as founding families—is frequently cited among this group as their reason for staying in the region.
- As is typical of this group in an aging society they are experiencing a narrowing of their possible network—their peers and family. This is exacerbated by the degree of aging in the context of being a minority and living in a rural area. Many feel marginalized but are still, remarkably, able to live in a largely Anglophone world. This cannot be generalized to all areas of the Estrie region.
- There is a very high level of participation by this group in volunteer activities which have always been and, are increasingly, a mainstay of the community. Historical societies, civil service, aid programs, informal care services, tutoring, board of directors, etc. One woman from one small town claimed if we withdrew the retired and older persons from such positions the town would collapse! This group is also very active in their families, offering much needed support for child care, financial assistance, emotional support, mentorship, and so on.

Q: *Their experience seems to be, for the most part, positive then?*

How one experiences this time of life seems to vary according to family size, level of financial security, one's location vis-à-vis the middle generation, and accessible social outlets. To illustrate we can select two gentlemen both from the 65 years and older group and same generation. One is living in a small town, let's call him John, and the other, George, in the nearby countryside on the family farm.

John farmed the family dairy farm most of his life and for a number of reasons was forced to sell. His occupational role has not been replaced and so the family income has been affected as well as the identity he drew upon for many years. John is a unilingual Anglophone and mourns the loss of peers and siblings as the result of social and political trends as well as death. One of his children has effectively left the province for employment elsewhere and the remaining child, still living at home, does not feel sufficiently bilingual to contemplate a future in Quebec. John expressed extreme dissatisfaction with the quality of life of his community and with institutionalized services. His younger wife continues to be active in the community, employed, and more strongly connected in terms of family relations and peers but also appears ready to follow her children. The family, at the time of their interview, is planning on leaving the region and the province.

In contrast, George has farmed the family farm most of his life and continues in this role now with the help of his wife and children. He has several children all of whom have settled in the area with some joining the family enterprise to become farmers. Both he and his wife, seeing a future for themselves in the area, have become bilingual in their later years. Both are very active in the farming community and express a high level of satisfaction with their lives. They expressed a strong sense of a network of peers and extended family. They are also very satisfied with the limited contact they have with formal services.

Q: The reorganization of hospitals and medical services in the Estrie region has received much media attention. What did the families have to say about this in particular?

All families, both Anglophone and Francophone, expressed a fear of hospitalization. Those who could not confidently rely on the intervention of their families (i.e. their presence at the hospital, assistance in decision-making with physicians), which is increasingly the case for Anglophones, were the most anxious. It would be interesting to try to measure the degree to which this stress itself plays into the level of health of the community in the sense of delaying the pursuit of treatment, affecting the success rate of treatment, and prolonging time spent in recovery. I don't think we know the answers to these questions.

Q: If we look at the middle generation of these families, how does the aging of the community affect them?

When considering the middle generation (those between 35–60 years), it is important to keep in mind that the quality of the aging experience has been shown to depend largely on this group. In other words, the well-being of the young and old is a consequence in fact of the situation of this group.¹¹

Clearly, the reduction of formal medical and social services implies greater emphasis on informal care. Being more bilingual the middle generation is called upon to mediate the larger public sphere. Our investigation of Hatley Township certainly bears out the hypothesis that private homes (an option historically preferred by Anglophones) are overburdened. What has always been a cultural preference has become a forced option, that is, the family must take responsibility for care. Given the demographic trend we've been describing this has expanded for some families to include those older Anglophones whose immediate family have left the province.

In our interviews we were most struck by the crisis the aging trend in this community has created for those in their middle years. The overburdening of the middle generation as the culmination of various factors threatens the entire social fabric of this population. It is important to note that the primary caregiver in these cases, for both younger and older groups, is the woman in her middle years. There are instances of men who are in fact the primary caregivers of their parents but these are statistically much fewer. Also it should be emphasized that giving this care is still highly desired by those who do assume responsibility and very strongly culturally supported. The problem is that care for the caregiver is far from sufficient.

Q: How does this actually manifest itself in these families?

We actually have a case in mind, let's call it the case of Susan, whose situation is sufficiently paradigmatic for us to cite as an illustration of this cohort in general.

Keep in mind, too, that there are certain trends in the Canadian family which combine with the phenomenon of aging and minorization to shape the lives of these women.¹² Women are having their children later in life and

Susan's Family		
Mother	70s, widowed, unilingual English, 3 children (one of whom has left the region);	
Susan	50s, re-married, functionally bilingual, 2 children (one of whom has left the region);	
Daughter	20s, single parent, under- employed, bilingual, 4 children (aged 2, 4, 7, 11)	

the years of dependency by the children upon the family has lengthened. There is an increase of dual-earning families, an increase in divorce, and in single-parent female-headed families. As an aside, the fertility rate of Quebec Anglophones is up slightly and I noted among these families that young couples were typically having 3 to 4 children.

Let us consider Susan's case. As you can see from the table, she is in her 50s and living, as do the others in the table, in a small rural community of about 800 people. Her first language of choice is English and she can communicate in French. She is married and at the time of our interview, was embarking on a new career as owner of a small business in the community. This is something she has always wanted to do and her employment history appears to prepare her well for this undertaking.

Susan's mother lives in the same small town, is a widow in her late 70s, and living independently. She and her daughter are quite close. She is unilingually English. While it is her choice to maintain her own apartment, and her family is willing to support her, it is important to realize that acceptable options are not readily at hand. There is a recently-constructed "Centre d'acceuil" ("reception centre" or senior's residence) in the village but rooms that were considered adequate for one are now reportedly housing three individuals. There is a waiting list for those wishing to enter and the clientele tends to be sicker than it was even five years ago. There has been a shift of the burden for health services from hospitals to facilities like the one in this village so they face greater medical demands and house fewer ambulatory clients. What used to be referred to as "homes" offering a homelike setting to elders who no longer wished to maintain their own places has been slowly redefined to a place offering medical services. These increased demands have not necessarily been met with a prepared staff or more staff and their complaints attest to the period of adjustment the centre is undergoing.

Q: What about the role of the CLSC in such settings?

The closest CLSC is located in another village some 20 minutes away by car and there is no public transportation. Transportation is a problem for the elderly in rural settings. Although improving in recent years, there has been a historical lack of communication between the CLSC and the Anglophone community—resources available to them are simply not known about. Few Anglophones are represented among the staff of such agencies and as a result there is little in the way of an informal network of information and experience sharing. The nearest hospital, given the recent closure of facilities in the region, is about 45–50 minutes away by car and again there is no public transportation.

To continue with our case, Susan's daughter is in her late 20s, a single parent with four children two of whom are not yet school age, She is presently unemployed and reliant upon government assistance. Susan has been very active in supporting her daughter and assisting in the upbringing of her grandchildren. Susan volunteers at the local elementary school as a regular tutor. Citizens of the community play an increasingly important role in the school as their budget has been cut.

Susan's mother recently suffered a stroke with complications

and it was Susan who was the primary caregiver with some assistance from one sibling and sister-in-law. The new business is now closed. Susan has withdrawn from her volunteer activities as family demands have increased. In fact, since the period of our interview Susan's husband's parents, also in the area, have needed assistance. Unfortunately Susan herself has recently become ill with mostly stress-related symptoms.

The case of Susan is very typical of the families interviewed. The cases illustrates clearly where, to our mind, much of the pressure of an aging community is felt. The increased burden of the middle generation, coupled with the demographic pattern of out-migration resulting in fewer numbers in this age group, has as its consequences a certain absence of leadership at the local level. In Susan's case, for example, the role of caregiver without the co-presence of an extended family and with limited resources for support from the public arena entails withdrawal from volunteer activities and the creation of a business. Where do we find care for the caregiver?

Q: What is happening to the youth in the midst of this? You said earlier that in an aging community the youth are also affected. The overburdening of the middle generation seems to have some consequences. Who is there for the youth?

Some general comments. We found generally the level of integration of the youth¹³ in the larger social world tended to affect other generations. It is not simply that the elders set the pace for their successors; the capacity of the youth to embrace their social world affects the level of satisfaction of their parents and grandparents.

Our research seems to prove that an increased rate of bilingualism among Anglophone youth (when compared to their Francophone counterpart) does not necessarily translate into confidence in their future in Quebec.¹⁴ There is an increased rate of intermarriage and, by virtue of this, youth whose "network" extends into the Francophone world more than previous generations. When questioned with respect to their future plans, most indicated their intention to leave the province at least for a period of time. Generally, for the Anglophone youth, attendance at university is seen as a time to look around and, if affordable, an opportunity to explore other regions and cultures. Not one of the individuals of this group considered attending a French-language university in Quebec as an attractive option!

This area needs more study before anything concrete is worthy of generalization. Our interviews indicated that while more Anglo-

phone youth are taking the option of attending French-language elementary and secondary schools, and while English-language schools have supposedly taken steps to improve French instruction, Anglophone youth in rural communities still live in a divided world. They do not tend to socialize with their Francophone neighbors or form friendships which enable them to bridge the two solitudes.¹⁵ Because of this limited sphere of participation the problem of leadership returns. It is not evident from the present behaviour of the youth that they would feel it appropriate to take up leadership positions perhaps the gap in the previous generation makes it less a considered option or they already are effectively disenfranchised and do not feel the community is "theirs." The language skills are present but the social milieu is such that there seems to be a strong inhibition in their use.

Q: You mentioned earlier that the older generation has a strong sense of this place as "theirs." Many speak of ancestors who pioneered the area—of family farms which they have worked for 200 years or more—of a history which they live and continue to create. How is it this does not seem to be shared by the younger generation?

It is not evident that the youth feel this as strongly and we can only speculate as to why. Perhaps simply because they are young and invited to forge their identity in different terms. Perhaps a strong sense of place-of belonging-is not the opposite of wanting to take leave of that place if only to see what is unlike it. In some ways, would we want to nurture a younger generation who never wanted to leave home? Maybe you can only find the place that is yours by exploring others. So, this could be a feature of being "youthful" and not necessarily threatening. On the other hand, we must come back to the problem of being a minority and the need to overcome the fragmentation which has resulted from a number of the factors we've been discussing. The sense of a "people" is something that is continuously in need of recollecting and rejuvenating. I think a strong sense of self-of the particularity of the minority-is developed through occasions for exchange with others who are different and who, too, pursue their excellence. Youth exchanges between the Francophone and Anglophone communities in this and other regions must certainly be encouraged.

Conclusion

Our study underlines the high rate of aging among the Anglophone community of Estrie. This Anglophone community is very distinctive in this regard when compared with its Francophone counterpart in the region and with Anglophone minorities in other regions. Even as this particularity must be recognized, it is also important to realize that this situation will be shared by the rest of Quebec and the rest of Canada in the near future. In the broader context, it will be the large numbers of baby-boomers born between 1945 and 1960 who will enter their later years as a bloc which will skew the usual age pyramids. For Quebec Anglophones, the demographic imbalance was caused by massive out-migration of young adults in the 1976 to 1986 period which has now caused a dearth of middle-aged people.

Clearly, this Anglophone minority has felt itself to be under pressure, yet it has managed remarkably well. Families have been living with a vague sense of difficulty but have perhaps been unable to grasp the relation between their situation and the larger social patterns. We feel it is important for a rural, minority community and all ages—such as we find in Hatley Township to see the relevance between the aging trend and the events of its everyday life. The issue of leadership, for example, is not reflective of a character flaw or failing of the community nor can it be attributed to vague external agencies. It is, for the most part, a demographic condition. Forums like the October 1998 Colloquium at Bishop's University are most useful in encouraging discussion and establishing a perspective in these terms. Every regional community of this linguistic minority in Quebec ought to be encouraged to explore its own distinct situation and to work toward strategies to respond to its needs.

Our study indicates the need to ensure greater support for those primarily implicated in assuming responsibilities in the informal care-giving model. "Care for the caregiver" is essential in order to render the pressures in this role more manageable. Such support could range from support groups to financial incentives such as tax reductions for those involved in services to the older segment of the population. The current situation being experienced by the Anglophone community of Estrie is clearly of interest to social and health policy managers since it is a microcosm of the projected future in demographic terms. Pilot programs or research initiatives on these issues could be most instructive for the broader Quebec and Canadian society which will undergo these types of pressures in the next two decades.

There is also a clear challenge to aid the youth in their search for their place in a community which is itself evolving. We must promote young people who show promise into leadership roles which allow them to develop and to contribute to their community. The higher rate of bilingualism among youth suggests that they have an invaluable contribution to make on behalf of their aging grandparents and parents who are less bilingual. As the numbers of minority youth diminish, it is natural that they will seek out other youth and institutions organized around their needs and interests, whether in minority language situations or, as is increasingly commonplace, in contact with the majority culture. The smaller rural communities, which have a disproportionate number of elderly, cannot afford to further divide themselves along linguistic lines without forcing their youth to depart altogether. The isolation of the minority youth could become increasingly intolerable. It needs to be clear, for example, that youth groups funded by municipal authorities in small towns are inclusive of both linguistic communities.

In sum, the rural Anglophone community needs to celebrate its language, its culture and its dreams. The current aging pattern is but an opportunity to break new ground in the very tradition of the pioneers who first made Hatley Township home two hundred years ago.

RESUME

Les récentes tendances démographiques laissent supposer que la communauté rurale anglophone du Québec compte parmi les populations les plus « âgées » du Canada. Cette communication explore la tendance au vieillissement particulière à cette population, dans le contexte des tendances au vieillissement de ses voisines québécoises et canadiennes et des sociétés industrielles modernes en général. On souligne les conséquences sociales du vieillissement d'une communauté pour une population rurale appartenant à un groupe linguistique minoritaire. Cette communication s'appuie sur de récentes enquêtes démographiques ainsi que sur des interviews de familles anglophones et francophones des Cantons-de-l'Est enregistrées sur bandes vidéo. La discussion porte sur le leadership et sur la relation entre les segments jeunes et âgés de la communauté, car c'est de cette relation cruciale que dépend la vitalité de la collectivité.

NOTES

- 1 The interviews in Hatley Township were made possible by funding from the Eastern Townships Research Centre in the summer of 1997.
- 2 Statistics Canada. "*A Portrait of Seniors in Canada.*" Minister of Supply and Services Canada: Ottawa, 1990. Cat. No. 89-519. The figures for 1991–2021 are estimates.
- 3 Novak, Mark. *Aging and Society: A Canadian Perspective*. Nelson Canada: Scarborough, 1990, p. 78.
- 4 The choice of the township rather than the more modern Municipalité regional de comté (MRC) is a conscious decision to reflect the outlook of the Anglophone minority for whom the modern administrative unit is less meaningful than the established, historical pattern.
- 5 Health Canada, "The Majority of Seniors Live in Urban Areas," in *Aging and Seniors*, prepared by the Canadian Council on Social Development for the Division of Aging and Seniors, Health Canada. 1998, p. 1.
- 6 Health Canada, "Most Seniors Live Independently," in *Aging and Seniors*, prepared by the Canadian Council on Social Development for the Division of Aging and Seniors, Health Canada. 1998, p. 1.
- 7 In this respect, it should be mentioned that the participants in the interviews described later in this paper were selected on the basis of three generations of the same family who are still resident in the area. One of the purposes of the study was to consider the differences and similarities of experiences and viewpoints between generations. This being said, there are many older Anglophones who have no family remaining in the area and there may be greater stress in their situations. There is, however, strong anecdotal evidence of informal networks which supplement not only the public system, but family-based care and services for these individuals.
- 8 Gilles Deleuze and Felix Guattari take up these questions in thought-provoking ways in their work *Kafka: Toward a Minor Literature*. University of Minnesota Press: Minneapolis, 1986.
- 9 Michael Ignatieff for one situates not just the population of Quebec, but the Anglophones and Francophones of Estrie, among others across the world who share similar social and political conditions in his *Blood and Belonging: Journeys into the New Nationalism.* National Film Board film and Toronto: Viking Press, 1993.

- 10 We would like to take this opportunity to thank the families who so graciously welcomed us into their homes.
- 11 Novak, op. cit., chapter 13.
- 12 For a summary of the demographic patterns in the Canadian family, see G.N. Ramu, ed. *Marriage and the Family in Canada Today*. Prentice Hall Inc.: Scarborough Ontario, 1993, chapter 5.
- 13 For present purposes, we can refer to youth as those under 35 years of age. This includes children and students but also includes young adults who are typically forging careers and starting families.
- 14 This is borne out, for example, by Uli Locher in "Youth and Language," volume II. "Language Use and Attitudes Among Young People Instructed in English." (Secondary IV through CEGEP). Minister of Supply and Services Canada, 1994.
- 15 See Locher, ibid.