

Introduction

Dear Applicant,

The Department of Pediatrics at McGill University offers advanced pediatric training for senior pediatrics trainees who, after having completed a minimum of four years of core Pediatrics training, choose to develop a career in Social Pediatrics. Completion of training in Pediatrics at the Royal College level or equivalent is expected prior to undertaking the fellowship.

This 12 month fellowship is intended for candidates wishing to develop the medical expertise and skills to care for, engage, collaborate and help empower socially vulnerable populations, and to act as champions of positive change for the health of these populations.

The educational experiences include clinical training, medical education, advocacy, administration and research opportunities.

Our program is intended to offer the necessary flexibility to tailor clinical and academic training to each fellow's future practice and career goals, while meeting the requirements from the Royal College of Physicians and Surgeons of Canada (RCPSC) and the Collège des Médecins du Québec (CMQ).

Sincerely,

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Social Pediatrics Fellowship Fellowship Description and Educational Objectives

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Mission

To advance the field of Social Pediatrics through the provision of Advanced Pediatric Training for pediatricians who will act as champions of positive change for the health of vulnerable populations.

Vision

All graduates will have the medical expertise, advocacy and research skills to care for, engage, collaborate and help empower socially vulnerable populations. These graduates will also possess skills in lobbying for health policy change and health promotion.

Background

The Department of Pediatrics at McGill University has a long history of participating in the care of disadvantaged populations. There has been a core pediatrics rotation in Social Pediatrics for pediatric residents since 2002. A number of pediatricians affiliated with the department practice primarily with socially disadvantaged populations, have links to community-based health organizations and are involved in community-based advocacy. There are long established programs in the care of children new to Canada, Aboriginal health and children under Youth Protection. Finally, there is a long tradition in Global Child Health within the department. Thus the fellow interested in focusing on training in Social Pediatrics and models of care that are community-based and sensitive to social context will have excellent opportunities to do so within the Department of Pediatrics at McGill University.

The evolution of pediatric practice has made the time ripe to develop the idea of a social medicine focus in the training of professionals in child health. Over the last 60 years, pediatrics has evolved from a specialty dealing with largely acute diseases to one with a significant population of children affected by the social determinants of health, with chronic diseases and special needs. In the 21st century, pediatric practice continues to evolve, and research demonstrates that social factors clearly have long lasting effects on the physical and mental health of children, and later as adults.

Medical Training

An understanding of the social determinants of health and the effect of social context on health is integral to the training of all child health professionals. We recognize the need to enrich the community of pediatricians with individuals who possess the requisite knowledge, skills, and sensitivity to act as champions of positive change for the health of disadvantaged populations. Such a pediatrician must possess sound medical expertise in the specific health problems of socially vulnerable populations, the skills to appropriately engage and collaborate with communities, and the attitudes that have social justice as a core value. Clinical rotations are tailored to this training philosophy and are primarily community-based.

Clinical exposures generally run in a longitudinal fashion (e.g., one day/week over several months, mixed in with other similar exposures), and take place in a variety of hospital and community-based settings. These community-based settings have in common that they are rooted in the communities that they serve (providing community empowering models of care among socially vulnerable populations), with clinical supervisors committed to advocacy within the specific populations. A list of organizations is in the Annex.

To round out clinical experiences, fellows are able to undertake longitudinal electives in specific clinical areas (tailored to their needs and future career) in selected specialty and general pediatrics clinics at the Montreal Children's Hospital. Ultimately, we seek to encourage the development of a diverse next generation of pediatricians, who are prepared as a group to respond to the needs of the children of Quebec, Canada, and the World.

The flexibility of this program is unique in the sense that each fellow will design their fellowship based on their unique interests and goals, often around the socially vulnerable populations with whom they have an interest in working and for whom they intend to advocate. For example, fellows may choose to work with one or more of the following socially disadvantaged populations: children of poverty, children of youth protection, children in foster care, indigenous youth, refugee and refugee claimant youth, youth with gender variance, homeless youth, substance-dependent youth, incarcerated youth, youth in global health settings, etc.

Advanced Academic Skills

Experts in Social Pediatrics must not only gain complex medical expertise; they must also develop academic skills (including research and/or advocacy skills) in order to contribute to the improvement of the health of disadvantaged populations at the population health level. We see the social pediatrician as a physician who is able to undertake community-based medical research, who has the skills in community activism and lobbying for health policy change, and who views health promotion as a core value. Such an individual will incorporate this practice within an ethos that seeks to empower the communities that he or she serves.

Academic training, then, for the advanced trainee in Social Pediatrics will make use of the many links that have been made with the leadership in other faculties at McGill University, notably the School of Population and Global Health, Social Work, Law, Epidemiology and Anthropology. The leadership in these faculties is very open to the idea of pediatric trainees receiving training and research supervision with them in order to develop the academic skills needed to function as a positive agent of social change.

Fellows are expected to undertake a major scholarly project in a domain pertinent to Social Pediatrics. Such projects might include: community-based clinical research (e.g., “epidemiology of Hepatitis C among street youth in Montreal”), advocacy (e.g., “improving access to health care for new refugees to Montreal”), or in other scholarly fields such as Medical Ethics, or Medical Education. Projects are assessed for suitability based upon relevance to the care of vulnerable pediatric and youth populations, and to the fellow’s career goals. Protected time will be allocated to work on this scholarly project. Fellows will work on this project under the supervision of appropriate research supervisor(s) at McGill University.

General Principles

- Many of the exposures can be arranged to run longitudinally. However, fellows often complete 1 or 2 elective blocks either on a general pediatric service or in a subspecialty field.
- All fellows are expected to gain expertise in medical education by contributing to the development of the protected teaching curriculum for advanced trainees, providing teaching to pediatric residents and presenting in general pediatrics rounds.
- All fellows are required to participate in the CanMEDS Rounds and are encouraged to participate in the CCHCSP program (The Canadian Child Health Clinician Scientist Program). See Annex for information and sample curriculum.
- All fellows are expected to complete and present the results of a scholarly project. The topic (e.g., advocacy, policy promotion, research), scale and presentation will depend on the fellow’s training and career goals. Protected time will be allotted for the completion of this scholarly project, including 0.5-1 days per week longitudinally (except during elective rotations) as well as 1-2 dedicated month blocks of research.
- All fellows will receive written evaluations from their clinical and academic supervisors once every 3 months. In addition, fellows will meet with one or both of the Social Pediatrics Fellowship Directors at least once every 3 months for feedback and to discuss ongoing training goals.

On call duties. (see Annex) Sample Rotation Training Grid (12 months)

Block	Rotations
1	Research / Advocacy Project or Ambulatory / Community Clinics
2	Sub-specialty elective
3	Junior Ward Attending or Ambulatory / Community Clinics
4	Ambulatory / Community Clinics
5	Ambulatory / Community Clinics
6	Research / Advocacy Project or Ambulatory / Community Clinics
7	Vacation
8	Research / Advocacy Project or Ambulatory / Community Clinics
9	Research / Advocacy Project or Ambulatory / Community Clinics
10	Research / Advocacy Project or Ambulatory / Community Clinics
11	Research / Advocacy Project or Ambulatory / Community Clinics
12	Research / Advocacy Project or Ambulatory / Community Clinics
13	Research / Advocacy Project or Ambulatory / Community Clinics

Educational Objectives of the Social Pediatrics Fellowship
(based on the Royal College of Physicians and Surgeons of Canada document
Physician Competency Framework”)

These objectives are complementary to those described in the Royal College of Physicians and Surgeons of Canada document Objectives of Training in Pediatrics. At the end of the Social Pediatrics Fellowship Program the trainee will demonstrate the following skills:

Medical Expert

- Demonstrate the advanced knowledge, attitude and skills necessary to care for socially disadvantaged children, *including*:
 - Knowledge of the Social Determinants of Health; specifically, the demographics of social vulnerability and the assessment and management of common health problems encountered by socially vulnerable populations, including developmental, mental health and nutritional problems.
 - Identify and explore different models of care that are sensitive to the populations served and empowering of the patients and families. *By the end of their fellowship, fellows should demonstrate their ability to effect positive change in these communities.*
 - Demonstrate proficient assessment and management skills of common health problems encountered by socially vulnerable populations.
 - Assess a child and family’s social context for vulnerability and resilience, and then incorporate this knowledge in the management plan.
 - Identify and explore the major impact exposure to social disadvantage has on health status and the pediatrician’s role in early intervention and ongoing management.
- Demonstrate the advanced knowledge, attitude and skills to identify ethical dilemmas, assemble pertinent information, and conduct an analysis with recommendations; if needed, in consultation with a Clinical Ethicist.
- Demonstrate the advanced knowledge, attitude and skills to conduct the medical evaluation and management of suspected child abuse and neglect.
- Demonstrate knowledge of the mandate of Youth Protection Services and the medico-legal responsibilities of all healthcare workers.
- Perform a complete assessment and develop management plans for children under the care of Youth Protection Services.
- Actively contribute, as an individual and as a member of the team providing care, to the continuous improvement of health care quality and patient safety.
- Recognize and respond to harm from health care delivery, including patient safety incidents.
- Adopt strategies that promote patient safety and address human and system factors.

Communicator

Demonstrate advanced skills in communicating across diverse socially vulnerable populations, *including*:

- Exhibits a respectful, empathetic and non-judgemental approach when interacting with socially diverse populations.
- Becomes an effective partner with families in managing their children's health care by engaging patients and their families in developing plans that reflect the patient's health care needs and goals.
- Develops rapport and trust while addressing challenging communications with patients and families e.g., ensuring comprehension by those who do not communicate in one of the official languages, who may have limited education and/or life experience.
- Discloses harmful patient safety incidents to patients and their families accurately and appropriately.
- Assists patients and their families to identify, access and make use of information and communication technologies to support their care and manage their health
- Exhibits advanced written communication, documentation and listening skills by a. Documenting and sharing written and electronic information about the medical encounter to optimize clinical decision-making, patient safety, confidentiality, and privacy b. Communicating effectively using a written health record, electronic medical record, or other digital technology c. Sharing information with patients and others in a manner that respects patient privacy and confidentiality and enhances understanding.

Collaborator

- Demonstrate an advanced understanding of the role of networks and partnerships between physicians, other health care professionals and community organizations in improving health care delivery to socially disadvantaged populations.
- Participate effectively in interprofessional and interdisciplinary team meetings occurring in a variety of environments e.g., community health centers, schools, outreach centers, Youth Protection centers, child care centers, harm reduction centers, etc.
- Liaise (interface) in various interprofessional environments that meet the needs of socially vulnerable children e.g., community organizations, schools, outreach vans and harm reduction clinics.
 - Hands over the care of a patient to another health professional to facilitate continuity of safe patient care
 - Determines when care should be transferred to another physician or health care professional
 - Demonstrates safe handover of care, both verbal and written, during a patient transition to a different healthcare professional, setting, or stage of care

Leader

Identify and work collaboratively with healthcare professionals in leadership roles, *including*, Health care organizations caring for socially disadvantaged children, and within the Department of General Pediatrics.

- Demonstrate the advanced knowledge, skills, and attitudes necessary to assume leadership roles in interprofessional health care organizations caring for socially disadvantaged children, *including*:
 - Excellent time, resource and management skills, and a vision for positive change.
 - Contributing significantly to the improvement of health care delivery in teams, organizations, and systems, for example a. Applies the science of quality improvement to contribute to improving systems of patient care b. Contributes to a culture that promotes patient safety c. Analyzes patient safety incidents to enhance systems of care d. Uses health informatics to improve the quality of patient care and optimize patient safety.
 - Engages in the stewardship of health care resources.
 - Allocates health care resources for optimal patient care.
 - Applies evidence and management processes to achieve cost-appropriate care.
 - Facilitates change in health care to enhance services and outcome.
 - Identifies and works in a Leadership role with healthcare leaders in inter professional health care organizations caring for socially disadvantaged children.

Health Advocate

- Advocate on behalf of vulnerable populations at the individual and family levels (may include engaging communities, assessing and collectively assigning advocacy strategies to address their needs).
- Identify opportunities for advocacy, health promotion and disease prevention at the individual, community, provincial and federal levels.
- Apply the process of quality improvement to prevention and health promotion e.g., during clinical encounters, simulation exercises, presentations, etc.

Scholar

- Demonstrate an evidence-based approach to the understanding and ongoing learning of health problems related to the social determinants of health.
- Demonstrate the ability to conduct a scholarly or research project reflecting a social issue confronting the pediatric population.
- Demonstrate advanced understanding of the Principles of Ethics.
- Demonstrate effective teaching skills at multiple levels and inter-professionally, including facilitating the education of patients, families, trainees, and other health professional colleagues
- Ensure patient safety is maintained when learners are involved

Professional

- Demonstrate the highest standard of professional behavior with vulnerable populations, including, honesty, integrity, responsibility, self-discipline, compassion, respect and sensitivity to diversity.
- Demonstrate a commitment to society by recognizing and responding to societal expectations in health care.
- Demonstrate a commitment to patient safety and quality improvement.
- Demonstrate a commitment to patients by applying best practices and adhering to high ethical standards.
- Exhibit professional behaviours in the use of technology-enabled communication.
- Integrate bioethical principles in clinical practice including a. Recognizing patient confidentiality issues b. Recognizing own limitations c. Seeking advice when needed d. Demonstrating knowledge of legal and ethical rules of professional behavior .
- Demonstrate a commitment to physician health and well-being to foster optimal patient care, including a. Exhibiting self-awareness b. Managing influences on personal well-being and professional performance c. Managing personal and professional demands for a sustainable practice throughout the physician life cycle d. Promoting a culture that recognizes, supports and responds effectively to colleagues in need.

JM Ferdinand, May 2018

Annex

McGill General Pediatrics Fellowship Committee

Terms of Reference

The General Pediatrics Fellowship Committee supervises and coordinates the training of fellows in the various General Pediatrics Fellowships, which currently include Academic Pediatrics, Pediatric Complex Care, Social Pediatrics, Neonatal Follow-up, Gender Variance, and International Neonatal Medicine.

Composition of Committee

1. The General Pediatrics Fellowship Coordinator chairs the committee.
2. The committee is composed of the Fellowship Directors from each General Pediatrics Fellowship (Academic Pediatrics, Pediatric Complex Care, Social Pediatrics, Neonatal Follow-up, Gender Variance and International Neonatal Medicine), the Pediatrics Residency Program Director, and 1 – 2 fellow representatives .
3. Fellowship Directors remain on the committee for the duration of their term. The fellowship representative(s) is selected by the General Pediatrics fellows each year.
4. The committee has a designated administrator who will be responsible for: booking the meetings, circulating and printing all relevant documents, and drafting minutes.
5. The committee meets a minimum of three times per year (i.e. September, January and June).
6. The General Pediatrics Fellowship Committee reports to the Pediatrics Residency Program Committee.

Responsibilities of the General Pediatrics Fellowship Committee

1. Address crosscutting pedagogical, administrative and scheduling issues (i.e. call requirements for fellows, common protected teaching sessions, recruitment of new trainees) shared by all the General Pediatrics fellowships.
2. Review the academic progress of General Pediatrics fellows in training, make recommendations for remediation or termination for General Pediatrics fellows in academic difficulty, and confirm satisfactory completion of training at the end of fellowship.
3. Review individual Fellowship Reports, including program descriptions and learning objectives, prior to submission to the Pediatrics Residency Program and McGill University every 2 years (as required by McGill University).
4. Review requests for new General Pediatrics Fellowships as they arise and advise on strategies to help build new fellowship programs.
5. Address work and union issues, as they relate to fellowship education and training.

On Call Responsibilities

All General Pediatrics fellows are expected to assume on-call duties. The types of calls and their frequency will depend on the fellowship stream and may be individualized by the fellowship director,

taking into account the fellow's previous experience, their personal training objectives, and their future career scope. A maximum of 2 in-house calls per block on the General Pediatrics inpatient unit may be required.

CanMEDS Rounds

Summary

CanMEDS Rounds are offered to all subspecialty residency program and fellowship program trainees at McGill. These rounds are two hour sessions held 6-7 times each year. These rounds are targeted to advanced pediatric trainees and address topics related to the CanMEDS roles, such as Quality Improvement, Health Advocacy, Health Leadership, and Professionalism. More information can be found at: <https://www.mcgill.ca/peds/education-training/pgme/rounds>

CCHCSP Program

Summary

The CCHCSP (Canadian Child Health Clinician Scientist Program) is a course that encompasses major research topics including research methods, study design, data management, statistics, critical appraisal, research writing skills, time management, and ethics. Courses take place twice per month, and are spanned over one year. Fellows are encouraged to participate. More information can be found at: <https://cchcsp.ca/>

Suggested list of Scholar Competencies Training Opportunities

Advanced Pediatrics Trainee as Learners:

- Faculty Development Workshop, Faculty of Medicine, McGill Conferences
- Fellows weekly teaching
- General Pediatrics Rounds (and all other Rounds at the hospital)

- Graduate level courses

Advanced Pediatrics Trainee as Teachers:

- Interprofessional opportunities (allied health professional rounds within and outside the hospital)
- Medical student curriculum
- Clinical teaching (didactic and/or bedside)
- Physical exam teaching
- General Pediatrics Evidence Based Rounds
- Canadian Pediatric Society - presentations or workshops
- Resident retreat (workshop)
- Practical Problems in Pediatrics
- PALS/NRP
- Elementary/high schools
- Family medicine or pediatric community practices
- Community Pediatricians evening rounds

Community Based Medical Clinics

Fondation du Dr Julien (Includes La Ruelle d’Hochelaga, Le Garage à Musique, CSPE)

La Ruelle d’Hochelaga *requires French

www.fondationdrjulien.org

This holistic clinic operates in an economically disadvantaged part of Montreal (Hochelaga-Maisonneuve district). This practice includes children of extreme social disadvantage (multigenerational welfare, parents with chemical dependence/prostitution). In addition to exposure to social medicine, fellows will have a chance to observe Dr Julien’s considerable advocacy on behalf of his clientele.

Le Garage à Musique* requires French

<http://www.fondationdrjulien.org/en/community-social-pediatrics/garage-a-musique/>

This is a specialized community social pediatrics centre that utilizes tools based on neuroscience, including collective music learning and school access.

Centre de services préventifs à l’enfance de Cote-des-Neiges (CSPE)

www.fondationdrjulien.org

This non profit organisation is located in a disadvantaged part of Côte-des-Neiges district. The Center is oriented to prevention of development problems among children and youth, who are primarily from families new to Canada. This Center operates in collaboration with parents, schools and local non profit organizations.

Batshaw Health Services Clinic

www.batshaw.qc.ca/en/node

This is a Pediatric Clinic for children in foster care which focuses on development and includes multidisciplinary services.

Camp Amy Molson

www.campamymolson.com

Residential camp for children from underprivileged families.

Note that the camp is only open during the summer months

Carrefour Socio-médical jeunesse de Longueuil * requires French

The Carrefour Socio-médical jeunesse de Longueuil provides multidisciplinary assessment of children being assessed for sexual abuse.

Shawbridge

www.batshaw.qc.ca

Shawbridge Clinic is a locked facility of the Batshaw Social Services system, and as such, houses youth incarcerated for a variety of reasons, including behaviour problems (conduct disorder, oppositional defiant disorder etc.).

Clinique Socio-juridique Hôpital Sainte Justine *requires French

www.chu-sainte-justine.org/cliniques

This clinic is dedicated to children under 12 years of age who are victims of physical as well as sexual abuse. The clinic offers a socio-legal expertise to define the elements supporting a suspicion of abuse on physical health, mental health or sexual development.

CLSC Cotes des Neiges *French optional

www.csssdelamontagne.qc.ca/votre-csss/nos-points-de-service/nos-3-clsc/clsc-de-cote-des-neiges/

This clinic offers pediatric consults and developmental assessments in a multicultural context

CLSC Parc Extension *French optional

<https://csssdelamontagne.qc.ca/votre-csss/nos-points-de-service/nos-3-clsc/clsc-de-parc-extension/>

This clinics offers pediatric consults in multicultural context

Douglas Hospital

www.douglas.qc.ca

The Douglas Hospital provides psychiatric in-patient and outpatient services for children, youth and adults.

Head and Hands

www.headandhands.ca

Head and Hands is a non-profit multiservice agency for disenfranchised youth age 12-25 years. They have a variety of programs, from street outreach, to support for parenting teens, legal aid, and counselling. They have a walk-in medical clinic that serves a variety of youth from the neighborhood and beyond, and offers services at low or no cost to youth and young adults not covered by public health insurance, e.g., undocumented immigrants, etc. It is also an important health resource for gay, lesbian, bisexual, and transgender youth.

MAB-Mackay Rehabilitation Centre

www.mabmackay.ca

MAB-Mackay provides family-centered medical, adaptation, rehabilitation and social integration services to children with motor or language impairments, and to persons of all ages who are blind or visually impaired and/or deaf or hard-of-hearing. It includes a medical clinic for these children.

Portage (Le), Mère-enfant program

www.portage.ca

This clinic serves the Mother and Child Program which provides housing and services to substance-dependent mothers and their young children.

Montreal Children's Hospital

Adolescent Medicine Clinic for Young Mothers

Provides services for adolescent mothers and their infants.

Child Protection Consultations

Inpatient and outpatient child protection consultations

Child Psychiatry Clinic

Provides psychiatric services for children with Mental Health disorders.

Clinic for Transgendered Youth- Meraki Centre

Provides services for children and youth with issues related to gender variance.

First Nations and Inuit Clinic

Provides services to First Nations and Inuit children in their own communities or at the Montreal Children's Hospital). Clinics at the Montreal Children's Hospital for children who are visiting from their communities or living in Montreal.

Multicultural Clinic (MCC)

Provides medical screening and management for newly arrived refugee, refugee claimant and immigrant children as well as international adoptees.

Sexual Abuse Clinic

Provides services for children and youth requiring assessments related to suspected sexual abuse.

Sickle Cell Clinic

Diagnosis and treatment of children with Sickle Cell Disease.

Community Partners

Batshaw Youth and Family Services

www.batshaw.qc.ca

Provides psychosocial, rehabilitation and social integration services and ensures the provision of services related to child placement, adoption, adoption disclosure, reunification, expertise to the Superior Court and mediation. Services are provided primarily in accordance with the Youth Protection Act, the Youth Criminal Justice Act and An Act Respecting Health Services and Social Services regarding the placement of children and youths. Batshaw Centres services are provided to the residents of the island of Montreal who wish to receive them in English and to the Jewish community of Montreal, in either English or French. Batshaw Centres also offers rehabilitation placement services to youths from all regions of Quebec who require them in English.

Carrefour Familial Hochelaga

www.carrefourfamilial.com

Created in 1976 to support families in need. One of its programs, Maison Oxygène, was founded in 1989 and welcomes fathers with children living in difficult circumstances.

Centre Communautaire Hochelaga

<https://cchochelaga.org/>

This center exists since 1956 and favours recreational activities, as a means of intervention for the most vulnerable young people aged 4 to 17 years old. It proposes activities at the Hochelaga Community Centre and at 4 elementary schools in the district: after-school activities, day camp, training sessions, etc.

Centre de Loisirs Côte-des-Neiges

www.cclcdn.qc.ca

This Center was created in 1976 and is aimed at people of all ages. It offers a diversity of activities to a multiethnic clientele through recreational activities, public education and community actions.

Centre de Réadaptation MAB Mackay

www.mabmackay.ca

Provides family-centered adaptation, rehabilitation and social integration services to children with motor or language impairments, and to persons of all ages who are blind or visually impaired and/or deaf or hard-of-hearing.

Dauphinelle (La)

www.ladauphinelle.org

La Dauphinelle is an emergency shelter for women victims of domestic violence or in difficulty with or without children. The shelter was created 30 years ago and provides a psychosocial support for women to enable them to recover their autonomy.

Dispensaire diététique de Montréal / Montreal Diet Dispensary

www.dispensaire.ca

This is a non-profit organization created in 1879. It provides support to 1800 pregnant women per year from disadvantaged environments. It is aimed at ensuring the birth of healthy babies as well as promoting and supporting breastfeeding, by providing nutritional counseling and group activities.

Interaction Famille

www.interactionfamille.ca

Interaction Famille is an organization created in 1988 by the will of families of the neighbourhood. Adopting a global approach, it gives the right to the families to speak out and promotes action to enable them to take control of their lives. This organization is aimed specifically at families with children 5 years old or less.

Maison Bleue (La) *requires French

www.maisonbleue.info

La Maison Bleue opened in May 2007. It aims to provide pregnant women, living in a context of vulnerability, and their young children and their families, an environment based on a culture of prevention. The team includes family physicians, a nurse, a social worker, an educator specialist and a midwife.

Maison Haïti

www.mhaiti.org

La Maison Haiti was founded in 1973. Their mandate is to improve living conditions and rights of Quebecers of Haitian origin and other immigrants. This organization enhances the welfare and integration of newcomers by providing various programs, resources and support services.

Maison des enfants de l'île de Montréal (La)

www.lamaisondesenfants.qc.ca

La Maison des enfants de l'île de Montréal was established in 1989. Its mission is to welcome, listen and hear children, aged 5-12 years that come to share their concerns, fears, joys, loneliness and projects. Mostly after school (15h30) on weekdays.

Mountain Sights Community Center

<http://centrecommunautairemountainsights.org/>

The Mountain Sight Community Center exists since 1992 and intervenes with families and residents (adults and children 0-17 years old) on an individual and collective basis. Its activities, services and preventive measures have an impact on the overall health of its community. The district is multiethnic, economically disadvantaged and heavily populated.

Regroupement Entre-Mamans et Papas

<https://entremamans.qc.ca/>

This organization obtained its first charter in 1991. It is a setting where the quality of the parent-child relationship (0 to 5 years old), is enriched through different activities and workshops.

REVDEC (Rêves pour Décrocheurs) and Petit REVDEC

<https://www.revdec.org/>

Revdec stands for *Rêves pour Décrocheurs* and was created in 1985. The organization provides tutoring sessions for the development of young people, 12-16 years old, having school problems or having dropped out of school. **Petit Revdec:** Community agency whose objective is the support of pregnant and parenting adolescents who have left school or who are having school difficulty.

YMCA-PRAIDA Asylum Seekers

<https://www.ymcaquebec.org/en/Community-Programs/Housing-Services>

This organization provides services and houses newly-arrived refugee claimants in Montreal.

Elizabeth House

<http://maisonelizabethhouse.com/home-eng/>

This Elizabeth House is a treatment centre that offers a continuum of intervention and support services to young mothers with children aged 0-5 years.

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