From 'Community Run' to 'Community Based'?
Exploring the Dynamics of Civil Society-State Transformation in Urban Montreal [1]

Michael Orsini
School of Political Studies
University of Ottawa

Résumé

À partir d'une étude de cas de Pointe Saint-Charles, quartier montréalais du Sud-ouest de l'Île, cet article examine l'impact de la restructuration de l'État-Providence sur une communauté connue pour sa riche tradition de militantisme. Se basant sur une série de 23 entrevues semi-structurées avec des « leaders » communautaires et des utilisateurs des services, j'explore comment le rôle et le caractère des groupes communautaires du quartier ont été redéfinis par les changements dans le rôle de l'État. Plus particulièrement, j'identifie les conséquences locales de la transformation de l'État-Providence et j'explore si nous sommes témoin d'un changement subtil mais significatif dans le contrôle des organismes communautaire par les citoyens. Dans ce nouveau contexte, les groupes communautaires se trouvent dépouillés de pouvoir réel pour apporter des changements significatifs dans la vie de leurs membres. De plus, les groupes doivent de plus en plus naviguer un labyrinthe de règles et de politiques complexe pour avoir droit à du financement de l'état. Il n'est pas étonnant, dans ce nouveau modèle d'organisation communautaire qui privilège les groupes offrant des services de première ligne, qu'il y ait de moins en moins de place pour l'action communautaire militante.

Mots clés: communauté; pauvreté; Pointe Saint-Charles; Québec; état providence, activisme

Abstract

Using a case study of Montreal's Pointe Saint-Charles neighbourhood, this article examines the impact that welfare state changes are having on the ground in a community known for its rich activist tradition. Drawing from a series of 23 semi-structured interviews with leaders of community organizations and with users of services, I explore how the role and character of community organizations are being redefined in this neighbourhood and draw out some of the implications for how we understand the impact of welfare state restructuring in local contexts. In particular, the paper asks whether we are witnessing a subtle but significant shift from a model of community 'run' organizations to community 'based' organizations, the latter a watered-down version of citizen involvement in which communities and their respective organizations are mobilized to prop up the sagging legitimacy of governments but not given the requisite power or resources to effect meaningful change. Moreover, these organizations are increasingly being called upon to navigate a complicated maze of government policies and practices in order to qualify for state support. Not surprisingly, in this newfound vision, which privileges organizations with a service mandate, there are concerns that the space is shrinking for old-fashioned advocacy.

Keywords: community; poverty; Pointe Saint-Charles; Quebec; welfare state; activism

Introduction

Decentralization, retrenchment, and the "hollowing out of the state" are some of the terms used to characterize the changing role of the welfare state in the age of neoliberalism (see Jessop 1999; Larner 2000). I follow Larner (2000) in understanding neoliberalism as "both a political discourse about the nature of rule and a set of practices that facilitate the governing of individuals from a distance" (2000, 6). The second component of this definition draws on the governmentality literature, which has been inspired by the later writings of Michel Foucault. What is less understood, however, is the impact some of these sweeping structural changes are having on the ground in local communities, and how they may be altering the field of collective action. Larner correctly points out that many of these Foucauldian analyses, which tend to examine official government documents rather than drawing on the discourses of "oppositional groups", fail to "recognize the imbrication of resistance and rule" (2000, 14). As Smith (2005, 76) explained in her recent analysis of gay and lesbian organizing in Canada, neoliberal policies and practices are reshaping group politics and associational life in "complex and ambiguous" ways; this is only observable, however, once one moves outside the realm of textual analyses to examine what is occurring on the ground in local

spaces. This allows us to capture how presumably impersonal social and economic forces (often lumped under the label "neoliberalism") are affecting communities in their everyday life, and how the local space is being "reimagined as the cause, consequence, and remedy of social and spatial inequality" (Amin 2005, 614).

This paper uses the case study of Pointe Saint-Charles, a vibrant Montreal neighbourhood recognized for its rich history of community activism, to examine the features of this newly emerging relationship between the state and civil society. In Pointe Saint-Charles, organizations are besieged with a host of social problems that have plagued the community for decades, including shortages of affordable housing, food insecurity, and persistent health-related inequalities. Drawing from 23 semi-structured interviews with leaders of community organizations and users of services as well as a review of the scholarly literature and the "grey" literature developed by these organizations, this article explores how the role and character of community organizations are being challenged in this neighbourhood, and asks whether this case yields important insights for how we might understand the broader impact of welfare state changes on civil society.

The title of the paper—"From Community Run to Community Based"—is inspired by a discussion with a local activist and community leader who used this phrase to neatly encapsulate her views of the current situation. She argued that recent policy shifts underscore the importance of the newly prescribed role of community organizations in specific policy fields such as health and social services, but apply more broadly to the community sector, as well. It has not been lost on many activists that this 'hollowing out' of the notion of community involvement is occurring at a time when communities are increasingly being exhorted to build the necessary social capital to respond to the pressing issues of the day. To be clear, this 'hollowing out' does not mean to suggest that communities are being divested of responsibilities; rather, a shift from "community-run" to "community-based" organizations implies that the democratic character of these organizations is being diluted to the point where organizations may be physically based in a given community but no longer run by residents of that community. Instead of organizations deriving their mandates from the will of residents in their respective communities, organizations may be expected to tailor their agendas to the needs and priorities of the state, especially if they want to receive funding. While some organizations have the savvy to carve out their own distinct approach in spite of the state, other organizations, often without the requisite resources or professional know-how, may find it difficult to do so.

The body of the article is divided into four sections. The first section introduces the theoretical concepts that inform the analysis to follow, in particular the social economy approach, which is viewed as an inextricable feature of Quebec society. The second section examines recent policy changes in the area of health and social services that are affecting, albeit indirectly, the roles and responsibilities of com-

munity organizations, in addition to looking at specific policy changes in Québec that have targeted the role of community organizations and the social economy. As is becoming clear in a number of contexts, shifts in the relations between state and civil society actors are occurring in an environment in which the role of the state in health and social service provision is undergoing profound change. As the *Association feminine d'education et d'action sociale et al.* (1998, 83) explain: "The Quebec government has crafted social economy policies and the shift to ambulatory care to fit the mould of state disengagement." In addition, community leaders expressed concern that the recent restructuring of Quebec's Ministry of Health and Social Services occasioned by the passage of Bills 25 and 83 in December 2003 and November 2005 respectively, may have profound implications for how community organizations interact with the state. Under the new legislation, CLSCs (*Centres local de services communautaires*, or local community health centres), residential and long term care centres (CHSLD – Centre hospitalier de soins de longue durée) as well as general and specialized hospital centres (CH – Centre hospitalier) are being merged to form a new institution, *Centres de santé et de services sociaux* (CSSS), or health and social service centres. The third section provides a snapshot of the Pointe, paying attention to the socio-economic profile of the neighborhood as well as its path-breaking role in promoting 'community-run' solutions to social problems. The fourth section examines how the study participants have experienced some of these changes, both as activists and/ or as members of the community. I conclude with some thoughts on the implications of this study for how we understand the evolving role of communities during periods of welfare state retrenchment.

Unpacking "Community" in a Québec Context

From "community economic development" to "community kitchens" to "community health centres", the current political discourse is rife with the "community" descriptor. Increasingly, governments are being judged on their ability to speak for, represent, and engage 'communities', however this term is defined, and to harness the potential of communities to take charge of the issues that affect them. And while it is not always clear whether community is used to denote groupings of citizens *qua* atomized citizens, community as reflected in the ensemble of loosely knit social movements and more institutionalized civil society organizations, or both, one thing is clear: there is significant interest in the contribution of non-state actors to policy processes. Ilcan and Basok (2004, 30) have coined the term "community government" to describe "an ever expanding political project wherein target communities have been identified by political reformers as potential sites of virtue, democracy and efficiency." For Ilcan and Basok, and others adopting a governmentality approach (see Murray 2004), 'government' encompasses "the many programmes or schemes that seek to direct and shape the action of others"

(Ilcan and Basok 2004, 131). Such an approach is useful in paying attention to the range of ways in which power operates through individuals and populations, and how power need not operate always in overtly repressive ways; it may open up opportunities for communities or individual citizens to become engaged in thinking through solutions. That being said, greater attention needs to be paid to how communities engage with these discourses, how they articulate critical responses, and challenge dominant ways of knowing.

While an admittedly slippery concept, defining 'community' in the Québec context is complicated further by at least two factors: the discourse of the social economy, which is refracted through the distinctive political struggles of Québec, and the history of the "community" or "popular" movement in Québec (see Shragge 1997, 2003). First, although the term "social economy" has earlier historical origins (Mendell 2003), many analysts link its re-emergence in popular Québec discourse to the 1995 Bread and Roses March Against Poverty, which became a catalyst for a host of anti-poverty initiatives throughout the province, including the 2002 National Strategy to Combat Poverty and Social Exclusion. Although there is considerable debate in the literature on the appropriate definition, I follow Amin *et al.* (in Graefe 2002, 249) in defining the social economy as "centred around the provision of social and welfare services by the not-for-profit sector." Social economy organizations "break from the 'binary choices' of conventional socio-economy strategies that present market and state as mutually exclusive spheres of economic growth and social regeneration" (Amin *et al.*, in Graefe 2002, 249). The second factor that complicates attempts to define community in the Québec context is related to the distinctive history of collective action in the province, at the center of which has been the community (or popular) movement. Although its importance need not be overstated, especially given the enormous contributions of the feminist and labour movements, for instance, the community movement has been at the centre of many of the innovative policies that mark Québec's progressive approach to welfare provision (e.g.: CLSCs). It is important, however, not to conflate the social economy with the community sector, as if they were of a piece. As White (2001, 44) explains, the term "community movement" normally refers to "that core of ideologically alternative, politicized community groups, and their representative roundtables and associations that play the leadership role in state-third sector relations in the province." The provincial government uses the term "autonomous community action" to refer to groups that share this vision, while "community organizations" generally includes a service component. The social economy could be viewed as part of the community movement in the sense that it (the social economy) valorizes the third sector's role in promoting "responsible" economic growth.[2]

Policy Shifts in Health and Social Services

From its heavily subsidized $7-a-day daycare programs—the first of its kind in Canada—to the recent introduction of a generous parental leave contribution program, Québec governments have won praise for charting a progressive path in the area of social policy. This approach is viewed by some as a defining feature of the Québécois identity, reaching almost mythic status among social policy thinkers inside and outside the province. For some, Quebec's exceptionalism is characterized by a distinctive political culture "that is more collectivist, egalitarian, compassionate, and caring for the poorest and most vulnerable elements of society" (Béland and Lecours 2005, 686). Among Québec nationalists, the Parti Québécois represents the transformative potential of a politics that marries Québécois nationalism with progressive social policy. Nationalists claim that this combination was strong enough to resist the neoliberal juggernaut, but as Béland and Lecours (2005) rightly point out, PQ governments have embraced their share of neoliberal policies, as well. Moreover, less attention is paid to the creeping conservatism of the province's welfare policies which, while not as drastic as Ontario Premier Mike Harris' much criticized "workfare" programs, have chipped away at the "social rights" character of previous policies.

For the sake of clarity, I will refer to both broader policy changes as well as those specific to community organizations dealing with health and social services. In terms of the former, the late 1980s saw the introduction of a sweeping set of welfare reforms—Bill 37—aimed at reducing the government's commitment to persons receiving social assistance. It is generally regarded as the beginning of 'workfare', in which social assistance recipients were forced to accept some employment or risk having their cheques cut by as much as 20 per cent. In the health care arena, the Québec government has been experimenting since 1996 with models of health care delivery which go beyond the usual private/public divide that has animated health care debates in Canada. Beginning in 1995, the PQ government introduced its first major foray into health care reform, termed *virage ambulatoire* (shift to ambulatory care*)*, which sought to reduce the length of hospital stays, increase the number of day surgeries, and, as a result, increase the volume of medical care and services outside of the hospital setting. According to one less than sympathetic account, these reforms "entail a profound reorganization of the system, not only from a management perspective, but also in terms of the delivery of services" (AFEAS *et al.* 1998, 4). These reforms also coincided with the dismantling of the Canada Assistance Plan and the Established Programs Financing and their replacement with the Canada Health and Social Transfer, which reorganized federal transfers for health. One of the most controversial aspects of this reform involved the transformation of mental health services in the province, which has been heavily criticized for decreasing "mental health funding at the hospital level without the promised investment in the community" (Steiner 2002, 1).

Eight months after being elected in 2003, Premier Jean Charest's pledge to re-engineer the state became concrete when the government pushed through nine controversial bills during the Christmas vacation, among them an amendment to the provincial health law, which overhauled the public health system through mergers between health establishments. The newly created CSSS is exclusively responsible for all health and social services on its territory and can contract out services to local community groups and social economy enterprises. The local health centres have a mandate to identify a unique 'clinic project' for the territory in question. This implies that the needs of the local population will be determined by the hospitals, long-term care centres and local health authorities making up the newly formed health and social service centres. While community groups' contribution to this analysis will be sought, it is unclear whether they will play a key role in the elaboration of a clinic project. As groups secure an increasing portion of their funding through contracting with the CSSS, citizens on their boards may find that the needs of the population have been elaborated elsewhere and that their role is reduced to carrying out locally centralized health plans. The new government documents clearly define the community groups as *producteurs de services* (service providers). Bills 25 and 83 reorganize health and social services into nine programs, such as home care and mental health. Under the new legislation, eligibility for long term health and social services will be determined by an individual's perceived vulnerability, whether he or she fits into the targeted area of intervention. Moreover, the law will also permit individuals to lodge formal complaints against community groups for the quality of services rendered.

While at the federal level the Voluntary Sector Initiative (VSI) provided important institutional support to voluntary sector organizations throughout the country, the Québec government responded with a different set of programs and measures to target the role of communities (and specifically community organizations) as agents of social change.[3] In particular, three areas are worth discussing here: the *Chantier de l'économie sociale*; the Secretariat on Autonomous Community Action (SACA), and the National Strategy to Combat Poverty and Social Exclusion. The *Chantier de l'économie sociale*, which was created in 1996, was initially intended to be a temporary body to launch and promote the idea of a social economy; it has since become a permanent independent organization bringing together the promoters of social economy enterprises in various sectors, from home care services to housing to childhood/family services. The social economy sector comprises more than 6,200 cooperative and non profit enterprises that employ 65,000 people and generate more than $4.3 billion in sales (Chantier de l'économie sociale, n.d). The centerpiece of the social economy project is the early childhood centre model, which has created about 145,000 daycare spaces throughout the province.

For some observers of Québec politics, one need not look any further for evidence of "people power" than the government's 2001 policy on autonomous

community action. The policy itself grew out of the efforts of the Secretariat for Autonomous Community Action (SACA), which the government created in 1995. The policy creates a fund, which is financed by the proceeds from provincial lotteries, to recognize the positive contributions made by community organizations working to address issues of social justice and human rights. Three specific areas are identified: groups defending the rights of disadvantaged populations; groups offering services to "vulnerable groups" within a framework of social justice; and support for coalition-building. The policy also seeks to distinguish community organizations from independent community action organizations. Community organizations in general must "be non profit, community-based, associative and democratic, and free to determine their mission, orientations, approaches, and practices" (Gouvernement du Québec 2001, 21). Four additional criteria must be met in order to qualify as an independent community action organization, including the requirement that the organization had to have grown out of a community initiative, that it "pursue a social mission that promotes social change", and that it "use active citizenship practices and broad-based approaches" (Gouvernement du Québec 2001, 21). Community organizations that are not engaged in community action are excluded from the policy, including unions, foundations, and political and religious organizations. Community organizations that offer services that complement those offered by the state would not qualify unless they did so "in an alternative, empowering or democratic fashion" (White 2001, 46).

Finally, the government's adoption of Bill 112, a framework law that includes a National Strategy to Combat Poverty and Social Exclusion, allocates funds to support community organizations working to alleviate poverty and social exclusion, although the strategy provides few details beyond noting that community organizations will assume a "greater role in integrated initiatives targeting the groups most affected by poverty" (Gouvernement du Québec 2002a, 49). Although there has been some criticism of the final product—the National Strategy to Combat Poverty and Social Exclusion—there is general agreement in both activist and academic communities that the policy was a step in the right direction, and that the provincial government should be commended for consulting widely with a number of non state actors before drafting the policy. Indeed, as Noel (2002, 5) describes it, the law would not exist were it not for the work of a broad based coalition, the Collective for a Law on the Elimination of Poverty. Unlike many "motherhood" policy pronouncements that fail to move beyond the rhetoric stage, Bill 112 is enabling legislation that "establishes a policy priority and creates instruments to ensure that this priority is institutionalized". The government's approach is viewed as innovative in its longitudinal perspective on poverty, its expanded understanding of the factors that contribute to poverty, and its focus on "participation and empowerment" (ibid, 6).

Portrait of Pointe Saint-Charles

Pointe Saint-Charles has had a rich, varied and somewhat tumultuous history. During its heyday, the Pointe lay at the heart of industrial growth in the city. The southwestern part of the city of Montreal—which includes Pointe Saint-Charles, Little Burgundy, Saint Henri, and Côte Saint Paul/Ville Emard—was home to a number of important industries that employed many local residents. Between 1951 and 1973, however, these communities lost more than 11,000 jobs when many businesses in the area closed their doors. This had a devastating impact on those less-educated workers who relied on work in the manufacturing industry and who could not be easily retrained to compete in the labor force. Currently, 63.4 per cent of the Pointe's 13,000 residents do not have a college-level education, while 21.8 per cent have less than a Grade 9 education—as compared to 48.4 per cent and 14.7 per cent respectively for the region (Direction de santé publique 2005a). It is estimated that almost half (49.2 per cent) of residents in this community live below the low income cut offs, Statistics Canada's unofficial definition of poverty (Direction de santé publique 2005b). The average 2001 family income in Pointe Saint-Charles is $37,314, compared with $62,409 in Montreal. For single-parent families, income drops to $24,814 and $35,769 respectively (Direction de santé publique 2005c).

While the Pointe and surrounding neighborhoods have no doubt been hard-hit by economic downturns over the last three decades, residents of these neighborhoods have also been in the vanguard of community activism. Pointe Saint-Charles has blazed a trail in the area of "autonomous community development", according to one engaging account by a former municipal councilor and community activist (Sévigny, 2001). Today, he explained in an interview, the community movement is in danger of becoming depoliticized:

> There is an economic dependence of groups on the state. We have not had a debate, for a very long time, about the autonomy of community groups vis-à-vis the state… The state is not neutral and we now find ourselves in an situation where the neoliberal state is advancing. In the past, we associated the social democratic project with nationalism, which was represented in the Parti Quebecois. Since then, the PQ has become a neoliberal party. (Personal interview, July 16, 2004)

Historically, community leaders have been able to mobilize quickly and effectively to take charge of the issues affecting the community. For instance, some research participants recalled a situation when residents thwarted the potential arrival in their neighborhood of the Chagnon Foundation, a high-profile philanthropic organization founded by the former head of the successful cable company, Vidéotron. The Foundation wanted to create programs to help poor families in the neighborhood through an initial $1 million donation. At meetings, community

members openly criticized the Foundation's approach to philanthropy and to poverty and health issues, and the broader implications of the private sector defining and managing community problems. Community members spoke of the dangers associated with a focus on results-based management practices, which impose targets that should be met in the area of lower disease incidence or rates of obesity, and of a perilous shift from the promotion of social rights to a war against the poor. The Foundation's mission is to "contribute to the development and improvement of health through poverty and disease prevention focused primarily on children and their parents" (Website, Chagnon Foundation, n.d.). Community members objected to how the organization defines poverty, which they argued was "too compartmentalized, targeted, and sectoral", focusing solely on a "family" clientele (Action Gardien 2002, 24). In addition, they took issue with the Foundation's individualized approach to alleviating poverty. Indeed, the Foundation's website is clear: "The individual is the focus of all our projects because we at the foundation believe that individuals, whatever their condition, are the architects of their own health, that of their families and, by extension, that of the communities in which they live" (Website, Chagnon Foundation). Eventually, the watchdog group *Action Gardien*, which represents about 30 community organizations in the area, formally declined the donation, citing concerns that the money would have come with the Foundation's strings attached.

The Point Saint-Charles Community Clinic is widely regarded as the community's nerve center, and claims the distinction of being a model for the creation of CLSCs in the 1970s. These community health centres were set up in the early 1970s to provide front-line health and social services. Offering curative, preventive, rehabilitation and reintegration services on their premises as well as in the patient's environment, this comprehensive approach distinguishes such centres from other health care facilities. Despite providing the inspiration for the CLSC movement, the Clinic takes pride in successfully resisting attempts to transform it into a CLSC. It has fought aggressively to remain distinctive in being a clinic fully funded by the state (with an annual budget of almost $5 million), but managed and run entirely by the community.

Other key groups in the community include *Services juridiques communautaires*, a non-profit organization and a local legal aid centre. The centre offers consultation, legal advice and legal representations in court, in civil and family matters, as well as administrative and social law. The legal aid centre has fought many attempts to reduce its accessibility to low-income members of the population. In 2001, the government attempted to shut it down, only to reverse its decision after a successful local fight to retain this community resource. The *Carrefour d'éducation populaire* is a place where citizens are encouraged to learn, think, inform themselves, discuss current events and generally improve their living conditions. The Carrefour uses popular education tools to address subjects such as nutrition and food security.

Community Perspectives

While community leaders have clearly been concerned about local issues affecting the neighbourhood, including the potential relocation of the Montreal casino near the community (a plan that was abandoned in March 2006 after widespread protest), the lack of affordable housing, the integration of new immigrants, and crime in the area, interviews conducted during this study also illustrate the activists' ability to connect what is happening on the ground to broader policy shifts at the provincial and federal levels. For instance, one community leader described the late 1980s and early 1990s as an important turning point for a number of reasons, including that it was the period during which the "government co-opted different organisations." Government funding became tied to priorities identified by government, not by the communities themselves. This came as a shock to organizations in the Pointe, which had worked tirelessly to ensure that the community's priorities were defined from the ground up. The first community groups to emerge in the neighbourhood could not afford staff and thus required active citizen involvement. The increasing financial ability to employ staff has meant that volunteers are less critical in assuring the viability of community organizations. Their place in these groups is further compromised by the increasing complexity of the social, economic and political issues at hand. Staff members need an increasing expertise in management and policy analysis, making it challenging for active citizens to follow, for example, the different issues discussed at board meetings. As one activist put it, "It is harder to get people on board due to the increasing specialization of groups; people wishing to get involved need to be more "professional" (Personal interview, Montreal, August 5, 2004). Although there is greater government recognition of community organizations, groups are becoming hyper-specialized and defined primarily by the services they offer, not by the needs of citizens in their communities. This can have a direct impact on the ability to recruit volunteers and paid staff; those who do wish to be involved need to have the required credentials or expertise to do the work. The role of the average citizen or community member can—and often does—get lost in the shuffle. A local advocacy worker explained: "Over the years, new regulations legislating community group funding has changed the place citizens occupy in these organizations. Rather than being a people's movement, community groups now represent a movement of groups with specialized mandates defined by government priorities, rather than representing a movement defined by citizens' needs" (Personal interview, Montreal, August 5, 2004).

Another informant who was critical of the government's role in the redefinition of the community sector was the one who spoke of a shift from community-run organizations, such as the Clinique Communautaire, to community-based organizations, a much weaker version in which organizations must follow a set of government directives or face the funding axe. Not surprisingly, in this newfound

vision, old-fashioned advocacy groups do not fare as well as groups providing much needed health and/or social services. For instance, the local women's centre, *Madame prend congé*, received only a fraction of the government funding that went to *Familles en Action*, a group in the community that works with families with children under five years of age.

Representatives of community organizations in the Pointe explained that they too are interested in promoting policies—in health and or social services—that have a positive impact on families and children. Family policy involves much more than accessibility to affordable quality day care spaces, not to mention the fact that the universal daycare policy tends to favour middle and upper income earners (see Baril, Lefebvre and Merrigan 2000, 2). Interestingly, however, although they have adopted a critical perspective on the targeting of families and children at the expense of other vulnerable groups, such as the elderly or single individuals, much of the literature produced by these organizations recognizes the benefit of emphasizing programs and services targeted to families and children. Many of the statistics cited by these organizations are related to children, in areas as diverse as dental care and premature births. Fifty five per cent of children in the neighbourhood under the age of 5 have at least once cavity compared with 20 per cent of children in Montreal (Levy 2005), and the Pointe has the highest rate in the province of premature newborns at 9.3 per cent (Direction de santé publique 2005d).

It is not surprising, perhaps, that the discourse of community in this neighbourhood intersects with the newfound focus on the family and children as the centerpiece of a host of policy initiatives. In the "social investment state", children and families have emerged as the privileged target of welfare state intervention (Saint-Martin 2000; Dobrowolsky and Jenson 2004; Chen 2003). A central pillar of the new "child-focused" welfare state architecture is a focus on alleviating child poverty, sometimes but not always with an explicit reference to the family in which the poor child is embedded. As Wiegers (2002, vi) explains, while a policy focus on child poverty may "advance women's equality or reduce women's poverty", it says little for those women who do not or will not have children, not to mention the gendered nature of other forms of caregiving, which are disproportionately performed by women. Although anti-poverty organizations have gone to great pains to remind policy makers that poor children live in poor families, they have been hesitant to abandon a child-centered advocacy strategy for obvious reasons: in the age of government cutbacks, targeting the elimination of child poverty was a "way of keeping poverty on the policy agenda" (Wiegers 2002, 4). In the never-ending struggle to justify support for robust social programs, the figure of the poor child is an important symbolic tool to hammer home the message that failing to "invest" in children can have disastrous effects on the economy. In addition, images of poor, "innocent" children evoke greater public and media sympathy than

do those of their adult parents. And while government support for child poverty traverses ideological lines, there is less support and greater divergence of opinion on the question of social assistance programs for adults (see Wiegers 2002).

Informants expressed concern that the government's construction of target populations and domains which were worthy of state support (e.g.: youth, families, the social economy, and day care centres) is a form of state intervention that normalizes private life. As one community activist explained, "All of these social programs—family, early childhood—have normalized private life. This is a double-edged sword—we are asking the state to intervene in family life while at the same time we are allowing this intrusion" (Personal interview with community activist, Aug. 4, 2004). This reorganization of the state along sectoral lines—for instance, the renaming of ministries that deal with women, youth, children, and families—is mirrored in the organization of the community sector. One such group, which initially dealt with young, single mothers and had the word "young" and "mothers" in its name (Groupe de jeunes mères), changed its name to *Familles en Action*, seemingly in order to be better positioned for potential state funding. Interestingly, however, *Familles en Action* received more than half of its funding in 2004-2005 from Health Canada for two programs, a mentoring program for young mothers and an early child education program. Less than one third of its funding actually came from the provincial government. This suggests that even organizations with deep roots in the local community and strong attachments to the province must nonetheless appeal elsewhere—in this case directly to the federal level—to stay afloat financially.

This compartmentalization of deserving sub-populations was criticized for diluting the idea of a community based movement with multiple and interlocking dimensions. At the same time, there are greater expectations placed on individual citizens to play a pivotal role in these newly reconfigured or reconstituted organizations. Indeed, Québec's Act to Combat Poverty and Social Exclusion states that the prevention of poverty and social exclusion must "focus on developing the potential of individuals" and recognize "the family as the basic unit of personal and social development" (Gouvernement du Québec 2002b).

For activists in the community, the shifts in relations between groups and the Québec government were linked with wider policy changes to the Province's social assistance regime: activists and unemployed members of the community who had formed the backbone of these organizations had to accept paid work within government employment programs or risk having their cheques slashed. More importantly, the adoption of this new law signified a shift away from welfare being a right, a "shift from the welfare state to the helper state, where the new role of the state is to accompany" (Personal interview with community leader, Montreal, August 2004).

With regard to health reform, community groups continue to complain that the government has not invested enough in the sectors that are supposed to pick up the slack. For instance the Community Clinic was able to respond to the increased demand for home care services, but not without having to cut back on preventive care in order to do so. Feminist organizations have added that these changes overlooked the gendered impact on women, who are disproportionately represented in the "helping" professions, such as home care. In addition, the head of the local women's centre explained that women are more closely monitored by the state, especially if they are receiving social assistance. Groups such as hers are being asked to provide more information about the women who visit the centre: "Women on social assistance are being watched more closely. And we are being asked to provide detailed information about them, including their names, which we refuse to do" (Personal interview, Montreal, July 8, 2004). A representative of *Familles en Action* added that she has witnessed a change in the client profile: "The mothers who are coming to see us have more difficulties. We see this in the increase in psychosocial problems among children in daycare. The women have more problems in their socio-affective life. They have seen their social assistance cheques cut" (Personal interview, Montreal, July 21, 2004).

It is widely feared in the community that Bills 25 and 83 (the new health and social services reform) will open the door to widespread private sector delivery of health and social services to the population. Indeed, a recent newspaper article dubbed Montreal "the private health care capital of Canada", where a wide range of diagnostic, surgical, and therapeutic services are available to those who are willing to pay out of pocket (Derfel 2005). A 2005 Supreme Court decision put governments on notice that failing to provide timely access to care could be unconstitutional. (The court did not agree that this violated rights guaranteed in the Canadian Charter of Rights and Freedoms, which is entrenched in the Canadian constitutions, unlike the Québec charter.)

Concern was also expressed that the new health and social service centres will become overly centralized, as health management organizations are in the U.S., and that the newly created sub regional health establishments (the CSSS) will become overly bureaucratic and devoid of genuine citizen involvement. These new centres will form the backbone of 95 local service networks created across the province. Under this new plan, the health and social service centre is charged with the responsibility of ensuring that the population of a given territory has access to a standard basket of health and social services. While these new centres are responsible for ensuring the delivery of health care, they are not responsible for providing the services; they can enter into service agreements with other partners in their network, including private clinics, community organizations and social economy enterprises. This restructuring is a far cry from the previous structures (régies régionales), which were "created to improve the democratic character of

regional governance" (Laforest forthcoming).

Despite what appear to be positive developments vis-à-vis government support for community action to fight against social injustice, community leaders were nonetheless deeply critical of the aforementioned policy changes in the area of health and social services, which they argue will have an important impact on what they do and how they do it.

Conclusion

This article is a preliminary sketch of the contours of the new relationship between civil society actors and the Québec state, through an examination of the experience of one particular local site that has the distinction of being both socio-economically disadvantaged and teeming with grassroots activism. This neighbourhood should not be regarded as a representative sample for the city or the Province of Québec, since the Pointe shares with other neighborhoods a similar socio-economic profile but differs markedly in terms of its historical orientation towards community activism. Rather, I have sought to use this case to illustrate and amplify some of the wider theoretical trends that are beginning to occupy scholars interested in welfare state dynamics in the age of neoliberalism, not to mention leaders on the ground in local communities. Understandably, scholars have devoted considerable energy to examining the diminished capacity of the third sector to respond to increasing demands for health and social service provision occasioned by 'welfare state retrenchment'. What has received far less attention is how policy shifts in the area of health and social services restructure not only the "welfare state mix" but the underlying role and character of community organizations. Although the community has been successful in creating a number of organizations that offer a wealth of much-needed services—the community clinic, the legal aid clinic, and the *Carrefour d'education populaire* stand out—one community leader, while mindful of this, expressed concern that this might be occurring at the expense of making a difference at the provincial level: "The autonomy of the groups enabled us to shape services but we have had less influence in Quebec and this will catch up with us. The context is closing in" (Personal interview with community leader, Aug. 5, 2004, Montreal).

Whether we are witnessing a shift from community run to community based organizations was the primary question posed by this article. The answer is by no means clear-cut, although the analysis presented here might lead one to conclude that the terrain of collective action is shifting in ways that will ultimately delegitimize the "community" voice in setting policy agendas, or at the very least, legitimize some community voices at the expense of others. The fact that this might be occurring in a province long regarded as a beacon for progressively-minded social action is certainly disheartening. To be clear, however, it is critical to distance oneself from a perspective that paints these issues as David and Goliath-type struggles.

Community activists are not easily duped, nor are they always forced to adopt positions with which they wholeheartedly disagree. And governments, to be clear, are neither omnipotent nor omniscient.

Notes

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2 The explosion of interest in Québec's social economy has begun to assume a more critical posture on the potentially perverse effects of partnerships between the community and the state. Graefe (2002) correctly criticizes some of the champions of the social economy for focusing their efforts on "establishing the autonomy of the community sector," and paying less attention to the need for institutional change. Without such change, he explains, the social economy will continue to be defined along neoliberal lines (2002: 248).

3 Although space does not permit a full discussion here, the VSI never resonated in Quebec in the way that it did in other provinces, partly as a result of the fact that Quebeckers do not view community action through a "voluntary" or "charitable" lens. For a discussion of Quebec organizations' reluctance to take part in discussions organized by the Voluntary Sector Initiative, see Chapter 4 of *The Voluntary Sector Initiative Process Evaluation*, Audit and Evaluation Directorate, Strategic Direction, Social Development Canada, April 2004. The report notes, for instance, that "Quebec involvement was not aided by the perception that the VSI process was based on an English-Canadian model."

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