

**UNSETTLING THE CURRENCY OF CARING:
PROMOTING HEALTH AND WELLNESS
AT THE FRONTLINES OF WELFARE STATE
WITHDRAWAL IN TORONTO**

by

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Unsettling the Currency of Caring: Promoting Health and Wellness at the Frontlines of Welfare State Withdrawal in Toronto

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-ABSTRACT-

What does the prevalence of stress and burnout in community-based work reveal about the impacts of welfare state withdrawal? Drawing on the experiences of frontline community organizers in Toronto, this research argues that welfare state withdrawal is subsidized by a 'Currency of Caring' whereby frontline community organizers are expected to fill gaps in the social safety net, working to a point of burnout if necessary, because they care. This research investigates how funders operating within this context can promote health and wellness in community-based work. Broadly, research findings provide insights into how neoliberalism and welfare state withdrawal shape frontline community work in ways that exacerbate stress and burnout, and impede systemic change efforts. In addition, research findings describe the limitations and possibilities for funders to be allies in collective change efforts by being invested in the health and wellness of frontline community organizers.

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OVERVIEW: EXPLORING FRONTLINE COMMUNITY ORGANIZERS EXPERIENCES OF WELFARE STATE WITHDRAWAL

1.1 INTRODUCTION

“To make an observation, is to have an obligation” (Assante, 2008)

This research begins from an observation: the language of grief, trauma and vicarious trauma is being used by grassroots organizers, frontline youth workers, community members and residents in Toronto to describe personal and collective impacts of being involved in frontline community-based work (see FPYN, 2009). Frontline community organizers¹ work within and outside of institutional roles; in paid, unpaid, and precariously paid positions; and are often the ones implementing place-based projects and programs aimed at addressing systemic issues facing marginalized communities (see FPYN, 2009; Skinner and French, 2012B; Abede and Fortier, 2008). As such, these observations offer important insights into the implications of welfare state withdrawal and how current policy and regulatory frameworks, including targeted neighbourhood-based funding practices, are shaping the voluntary sector², community-based work and the people implementing these projects on the ground.

1.2 RESEARCH RATIONALE

Frontline community organizers have been identifying how personal and collective experiences of grief and trauma relate to regulatory frameworks that pathologize individuals and focus on service delivery in lieu of systemic change (FPYN, 2009). These experiences are linked to policy interventions that focus on targeted programs and services as the solution to

¹ ‘Frontline community organizers’ is a term I use to encompass frontline workers and community organizers. I draw on principles of community organizing including efforts to mobilize community members to build collective power, challenge dominant power structures and create positive social change (LISTEN INC, 2000).

² I use the term ‘voluntary sector’ to refer to groups and organizations that act for public benefit, as opposed to shareholder benefit; are self-governing, and are ‘constitutionally independent of the state’ (Milligan, 2007:184).

systemic issues affecting marginalized communities (see FPYN 2009, Adebé and Fortier, 2008). In addition, academic literature exploring welfare state withdrawal and neoliberal restructuring identify the broader implications for communities of being treated as the site of social issues and the appropriate locus of intervention (see Rose, 1999; Ilcan and Basok, 2004, Laforest and Orsini, 2005). These critiques include how some targeted neighbourhood investment strategies build on a contentious assumption of neighbourhood effects³ that mask the systemic barriers facing communities and render marginalized communities responsible for their own poverty (see Cowen and Parlette, 2011; Bauder, 2002). In addition, within trauma studies there is a call to incorporate structural and systemic issues into the analysis of individual and community experiences of trauma, including how racism, social exclusion and marginalization contribute to and can exacerbate trauma (see Bustow, 2004; Waldron and McKenzie, 2008). While critiques within trauma studies and neoliberalism problematize the individualization of systemic issues, there is little research that bridges these two bodies of literature. Drawing on the experiences of frontline community organizers, this research helps fill this gap by illustrating how welfare state withdrawal and neoliberal discourses contribute to creating conditions of stress, burnout and vicarious trauma for frontline community organizers.

1.3 RESEARCH GOALS

The empirical focus of this research is on the experiences of frontline community organizers—individuals who, through voluntary and paid efforts, work to implement community change projects within the context of welfare state withdrawal. This research focusses on the people behind the projects because their experiences often go unseen, yet speak to the direct impacts of working within the confines of neoliberal restructuring. There is a specific focus on how and why funders⁴ should be more invested in the health and wellness of the people implementing funded projects. Specifically, this research is concerned with how funding

³ ‘Neighbourhood effects’ discourse asserts that concentrations of poverty in neighbourhoods lead to behavioural problems that cultivate further poverty as opposed to looking at broader systemic barriers that entrench marginalization (See Bauder, 2002 and Cowen and Parlette, 2001).

⁴ I use the term ‘funders’ to refer to government funders and private philanthropy, as both hold money that is intended to do public good (see Gilmore, 2007; Ahn, 2007) and are seen as part of the Non-Profit Industrial Complex (see Chapter Two). For practical purposes, research findings did not focus on the distinctions between types of funders as much as how funding paradigms impact frontline community organizers.

paradigms that rely on individuals to address systemic issues within their communities as though these issues are generated there and funding strategies that are largely short-term and project-based, contribute to conditions of stress, burnout and precariousness in frontline community work. In this sense, this research is focussed on funders because funding practices can be a literal way of translating neoliberal discourses into practice. This research identifies ways in which changing funding practices can help improve the immediate health and wellness conditions of frontline community organizers but it is ultimately concerned with how reforming funding approaches can support longer-term structural change.

This research explores the following questions:

- *How do people who work at the frontline of downloaded services experience neoliberal restructuring and welfare state withdrawal? What, if any, connections are frontline community organizers making between their personal experiences of stress, burnout, trauma and vicarious trauma⁵, and these broader social and political contexts?*
- *From the perspective of frontline community organizers, what strategies and supports are working to improve their health and wellness?*
- *From the perspective of frontline community organizers, what would it mean for funders to invest in the health and wellness of people doing frontline, community work in Toronto? How might this change funding paradigms?*

Answering these questions helps elucidate two key arguments that this research raises. The first is that frontline community organizers are caught in a cycle of being accountable for improving the material conditions of people experiencing systemic issues including poverty and social exclusion, but are only resourced to provide downstream services that cannot transform the underlying system. In turn, this inability to concretely change systemic issues through short-term projects and interventions can contribute to experiences of stress, burnout and trauma. The second argument is that the execution of welfare state withdrawal relies on an unacknowledged ‘currency of caring’ where people invested in the welfare of their communities

⁵ Throughout this research, I use the terms stress, burnout, vicarious trauma and trauma not as synonymous but to reflect a spectrum of impacts that community organizers have described experiencing by being involved in frontline community work. This paper predominantly use ‘stress and trauma’ as short-form for this spectrum of experiences.

and involved in community-based work are expected to work to the point of burnout, if necessary, because they care.

1.4 RESEARCH APPROACH

This research uses Toronto, Ontario as a case example. Toronto is currently seeing the widespread execution of targeted, neighbourhood-based investment strategies aimed at addressing poverty and marginalization under the banner of “Priority Neighbourhoods” (see UWGTA, 2004). These targeted strategies have led to an influx of short-term, project based funding into specific neighbourhoods and communities. This is timely and relevant research in Ontario, as a recent provincial government report calls to expand targeted neighbourhood investments strategies across the province (see McMurtry and Curling, 2008) while others argue that these investment strategies remain under-evaluated and contentious (see Cowan and Parlette, 2011). In addition, community groups in Toronto are voicing their concerns over funding practices and broader policies that localize systemic issues within particular neighbourhoods and communities (see FPYN, 2013; GYC, 2013; Warner, 2005). Some of these critiques explicitly describe how the people involved in running neighbourhood-based and community-based projects are experiencing stress, burnout and vicarious trauma through this work (FPYN, 2009). As such, Toronto is experiencing both the implications of welfare state withdrawal through the execution of targeted neighbourhood funding strategies and community critiques to these approaches.

The primary source of data for this research is drawn from the knowledge and experiences of frontline community organizers in Toronto. This was obtained through a combination of key informant interviews and community consultations with 19 participants in 2012. Participants were recruited based on having personal experience as frontline workers and community organizers in Toronto. This sample included individuals working as staff of community-based organizations, running their own projects in communities, working as community artists and working as therapists.

While grounded in the theoretical literature on neoliberalism and trauma studies, research findings contribute to community organizing practice by sharing strategies and supports that can increase the health and wellness of frontline community organizers. Further, research findings contribute to promoting changes within funder practices by exploring the particular roles that frontline community organizers feel funders can play in increasing their health and wellness. Broadly, this research contributes to critiques of neoliberal discourses by offering insights into the personal impacts of welfare state withdrawal on frontline community organizers. In addition, this research helps respond to an underexplored relationship in the literature between critical trauma studies and critiques of welfare state withdrawal.

1.5 STRUCTURE OF THESIS

The remainder of this thesis is organized into six chapters. Chapter Two situates the research within key debates in trauma studies and the changing role of community, citizenship and community-based organizations⁶ under welfare state withdrawal. Chapter Three provides an overview of the case example of Toronto including targeted neighbourhood investment strategies and community-based critiques. Chapter Four describes the research design and methods used. Chapter Five focuses on contextual insights from frontline community organizers. Chapter Six identifies strategies and supports frontline community organizers are using to promote health and wellness for themselves and their peers. Chapter Seven outlines recommendations frontline community organizers have for funders investing in community-based work. In conclusion, Chapter Eight summarizes key findings with specific attention to opportunities and limitations for funders to support better health and wellness in community-based work.

⁶ I use the term ‘community-based organizations’ to refer to legally incorporated as nonprofits and/or charities while ‘grassroots groups’ refers to collectives of people that are not a necessarily a legal entity. As a generic descriptor, I use the term ‘community-based organization’ because it implies a mandate, as opposed to ‘nonprofit organizations,’ which denotes an organization’s legal status.

FROM NEOLIBERALISM TO BURNOUT: A CONCEPTUAL LITERATURE REVIEW

2.1 INTRODUCTION

This research draws on the personal experiences of frontline community organizers to elucidate the impacts of macro-level processes such as neoliberal restructuring, and the devolution of services to community organizations and communities. It proposes that the execution of neoliberal state withdrawal, including the reliance on community-based organizations to deliver social services in lieu of the state, depends in part on an unacknowledged ‘currency of caring’ where frontline community organizers are relied on to work to the point of burnout, if necessary, because they care. This research focuses on funding as a mechanism for executing welfare state withdrawal and explores whether funding practices can be adapted to promote health and wellness in frontline community work, recognizing that funders can be complicit in executing neoliberal agendas. This research focuses on funding because state and private philanthropy can play very literal roles in executing welfare state withdrawal, and can shape the framing of systemic issues as community problems. It is also a sector in which I am deeply embedded (see Chapter Four) and can see opportunities to shift funding practices in tangible ways to promote health and wellness in the people behind the projects—those who are relied on to fill gaps in programs and services as a result of welfare state withdrawal.

In order to contextualize the core arguments raised, this research is informed by debates in trauma studies and neoliberalism. This chapter begins by providing a broad overview of critical perspectives in trauma studies. This includes calls to broaden the definition of trauma beyond medical and psychiatric modalities that render trauma an individualized experience and to recognize systemic oppression and racism as contributing to experiences of stress, burnout and trauma. This review explores how ‘helping’ via traditional social service approaches can perpetuate oppression and marginalization in communities, and describes how frontline community organizers can experience vicarious trauma in place-based work. In addition, this chapter provides an overview of geographical perspectives on neoliberalism and welfare state

withdrawal. This includes how neoliberal discourses can place an increased onus on individuals and communities to solve ‘their own’ problems. It further explores the reorientation of community-based organizations to deliver programs and contracts of the state, and how this affects their ability to advocate for and promote systemic change. The conclusion to this chapter bridges these two bodies of literature to illustrate ways welfare state withdrawal can contribute to stress, burnout and vicarious trauma in frontline community work and explores why funders should be concerned with how they are implicated in this. Together, this chapter provides a theoretical grounding for interpreting the research findings and for understanding the broader implications of this research.

2.2: SITUATING TRAUMA

2.2.1: Overview

Frontline community organizers have identified that they experience grief, stress, burnout, trauma and vicarious trauma by being involved in community-based work, working in community-based organizations and implementing grassroots community projects⁷ (FPYN, 2009; Warner, 2005). This research uses the language of stress, burnout and trauma because these are terms that frontline community organizers have used to self-describe their experiences. As such, the intention with this research is not to diagnosis or to compartmentalize frontline community organizers experiences, but to echo and bring attention to their experiences (see FPYN 2009). In order to contextualize the relationship between frontline community organizers’ personal experiences and the broader socio-political contexts in which they work, this chapter begins by providing a broad overview of critical trauma studies.

Trauma is a contested concept that is being explored, reframed and reclaimed in within critical trauma studies. Key debates surrounding trauma are rooted in scholars, practitioners and survivors challenging medical and psychiatric discourses that dominate trauma studies and

⁷ This research is drawing on an observation that several networks and community groups are identifying as a real and unfortunate trend in their work (see FPYN, 2009; Warner, 2005), it does not intend to speak for all frontline community organizers experiences.

how these discourses have informed treatment modalities in ways that can individualize traumatic experiences and pathologize people who experience trauma (see Traverso and Broderick, 2012; Burstow, 2003). In addition, frontline community organizers are using the language of grief, trauma, vicarious trauma, stress and burnout to describe their experiences working in systemically marginalized and under-resourced communities, drawing attention to the systemic factors that contribute to these experiences (see FPYN 2009). In drawing on critical trauma studies, this research contributes to critiques of medical and psychiatric trauma discourses by bringing attention to how social, economic and political contexts, namely neoliberalism, shape frontline community organizers' experiences in ways that can contribute to experiences of stress, burnout, and trauma. In drawing on the relationship between frontline community organizers' experiences and the structural contexts in which they work, this research focuses on the potential for funders operating within this system to change their practices to support health and wellness in community-based work.

There are four particular issues raised in trauma scholarship that I want to draw attention to. The first relates to the call to broaden our understanding of trauma beyond dominant medical and psychiatric discourses. The second relates to calls to acknowledge racism, colonialism and oppression as potentially traumatizing experiences. The third relates to how people in helping positions and professions can experience trauma in their work. The fourth relates to how delivering social services and 'helping' within neoliberal discourses can perpetuate trauma and victimization. Through this discussion, the relationships between neoliberal restructuring and frontline community organizers' experiences of trauma becomes more apparent.

2.2.2: Reclaiming 'Trauma' from Medical Discourse

Trauma studies as a discipline has historically been dominated by psychology and psychiatry. Trauma emerged as a key concept in psychology in the 19th century, used to describe a *“psychological injury produced by the experience of an external event that damaged the individual's sense of self”* (Traverse and Broderick, 2010:5). Predominant medical and psychiatric definitions of trauma have focused on individuals and their ability to cope and recover from their experience of a traumatic event. However, calls to broaden the understanding of trauma, its manifestations and in turn treatment are evident in critical social work and trauma

studies (see Burstow, 2003; Traverso and Broderick, 2010). Key critiques stem from how medical models focus on the individual and their experience of trauma in ways that rarely consider how social, economic and political contexts contribute to trauma. For example, Burstow argues that Post Traumatic Stress Disorder: *“is a grab bag of contextless symptoms, divorced from the complexities of people’s lives and the social structures that give rise to them. As such, the diagnosis individualizes social problems and pathologizes traumatized people”* (2003:1296). Denham (2008) argues that historical and social contexts are not given due attention within dominant trauma discourse as it focuses on a particular incidence or event that harms a person physically or psychologically. Traverso and Broderick (2010) critique attempts to present trauma studies as an overarching paradigm that can encompass all work dealing with trauma, citing explicitly the need to incorporate the relationship between individual and collective/community memory and trauma. In addition, critical trauma scholars argue that the focus on individual experiences of trauma can mask the variety of ways individuals and whole communities can experience trauma indirectly. Burstow (2003) cites the work of Holocaust, Aboriginal/Indigenous, and Eco-Feminist theorists that explore community and trans-generational trauma, where the person may not have directly experienced the trauma but are impacted traumatically nonetheless.

Within these critiques are calls to challenge models and discourses that treat people as deficient or broken. For example, Traverso and Broderick (2010) argue that trauma needs to be interrogated in ways that go beyond someone’s expressions of suffering to emphasize experiences of survival, resilience, struggle and recovery. They argue that *“to reduce all representation of memories and experiences marked by conflict, violence and atrocity to trauma is problematic, as it emphasizes a victim position and potentially fails to give due attention to the expression of agency”* (Traverso and Broderick, 2010: 7). Further, Denham (2008) argues that most analysis of historical trauma does not consider the strengths and resiliency that people and communities display, recounting the traumatic event without describing the ways in which people coped and challenged these experiences. He argues that a trauma response *“may vary from expressions of suffering to expressions of resilience and resistance”* (2008:411). In addition, Burstow (2003) critiques therapeutic models predicated on bringing people who are traumatized back to some degree of ‘normalcy’ and asserts that people who have experienced trauma are more attuned to the world as it is than people who are less traumatized. My research is grounded in this recognition that people who experience stress and trauma have important

insights into the systems and structures that contribute to these experiences. That is why it is being guided by frontline community organizers' insights.

2.2.3: Incorporating Oppression and Marginalization into Trauma Discourses

As the above discussion illuminates, a core critique of dominant trauma discourse is that it focuses on the individual without sufficiently considering the social, economic and political contexts that create traumatizing conditions (see Cole, 2004; Traverso and Broderick, 2010; Burstow, 2003; Denham, 2008). Further, Denham asserts that within medical definitions and treatment of trauma: *“Diagnostic categories frequently compound this tendency by defining social suffering and political upheaval, such as violence, colonialism and poverty, as individual psychological disorders rather than considering social factors and the larger political-economic environment”* (2008: 393). These scholars argue for the need to intentionally incorporate broader contexts into an analysis of someone's personal experience of trauma. They further call for naming how daily lives are shaped by structural and systemic issues that are contribute to trauma including poverty, oppression, racism, and colonization (see Goodleaf and Gabriel, 2009; Burstow, 2003; Waldron and McKenzie, 2008). As Burstow reflects, people are subjected to the:

Insidious traumatization involved in living our everyday lives in a sexist, classist, racist, ableist, and homophobic society: the daily awareness of the possibility of rape or assault, the daily struggles to stretch insufficient wages so that the family eats, encountering yet another building that is not wheelchair accessible, and seeing once again in people's eyes that they do not find you fully human (2003:1308).

She stops short of saying that if we did not live in an oppressive, sexist and racist society, there would be no trauma, but Burstow (2003) does argue that experiences of trauma would be greatly diminished if we did.

In their work “Re-conceptualizing ‘Trauma’: examining the mental health impacts of discrimination, torture and migration for racialized groups in Toronto”, Waldron and McKenzie (2008) argue that social exclusion, social inequity and discrimination create emotional, psychological, spiritual and physical distress that are experienced as trauma by racialized communities. They argue for the need to extend trauma discourse to acknowledge *“how social*

exclusion, social and economic inequality and discrimination based on race, gender, sexual orientation, culture, religion and other social constructs in Canada may produce or exacerbate mental health problems among asylum seekers, refugees, immigrants and Canadian-born racialized groups” (Waldron and McKenzie, 2008:4). Denham echoed this when he described how issues affecting individuals and communities are *“often exacerbated by macro-level socio-economic conditions, poor access to health care, governmental policy and racism”* (2008: 397). These structural issues were further acknowledged by Goodleaf and Gabriel’s (2009) research with Aboriginal frontline workers that found that oppression and colonization are embedded within social systems and that frontline community organizers faced trauma based on these legacies.

These critiques speak to the need to explore and acknowledge how poverty, social exclusion, oppression and structural violence contribute to experiences of trauma. However, this is not widespread in diagnostic and treatment processes:

It is a common but serious mistake to downplay the traumatic impact of the various institutions of the state, either limiting the focus to a discreet traumatic event, extending the analysis only to the traumatic impact of family denial or minimization, or otherwise acting as if the state has no role. It is crucial that the traumatizing of the state and its institutions be explored and, indeed, insofar as possible, coexplored (Burstow: 2003:1314).

The impacts of systemic factors that contribute to people’s experiences of trauma including poverty, racism, and oppression are particularly relevant to this research as frontline community organizers often work in and can share lived experiences with communities that are systemically marginalized. The individualization of trauma experiences mirrors how social and systemic issues are individualized through neoliberal discourse discussed in section 2.3. In both instances, I argue that the focus on individual pathologies renders systemic issues individual responsibilities and hinders attempts to promote systemic changes.

2.2.4: When ‘Helpers’ and Caregivers Experience Trauma

While critical trauma scholars have argued that social service institutions and organizations can perpetuate treatment modalities that do not adequately consider how systemic and structural contribute to trauma, there are also important insights into how people

working in 'helping' professions experience trauma in their work. Experiences of burnout and stress within social work, nursing and counseling are well documented (Ben-Zur and Michael, 2007). Burnout often occurs when the daily expectations and demands placed on employees, workers and volunteers exceed the resources and supports available to them. This can manifest in exhaustion, decreased performance and cynicism (Bemiller and Williams, 2011). Vicarious trauma is another issue that is receiving increased attention in helping professions. Vicarious trauma describes the compounding personal impact on counselors, psychiatrists, social workers and others working in helping positions of hearing traumatic stories from their clients and working with people experiencing trauma (Richardson, 2001; Morrison, 2007). Vicarious trauma can manifest as anxiety and depression; feeling overwhelmed, cynical, sad and distrustful of people and the world, in addition to interpersonal relationship problems (FPYN 2009; Morrison, 2007). In using the language of vicarious trauma to describe these experiences, some scholars caution against pathologizing the traumatic experiences of people in 'helping' roles by treating their reactions as abnormal. Research on the subject recognizes these as "*normal human reactions to repeated exposure to distressing events*" (Morrison, 2007: 3). Further, vicarious trauma is recognized by some as an unfortunate, but inevitable aspect of being involved in helping professions (Goodleaf and Gabriel, 2009). In this sense, it is not abnormal, but indicative of both people's capacity to care and the toll this can take on them.

In addition, the social and organizational contexts in which frontline community organizers work can directly contribute to their experiences of stress, burnout and trauma. Goodleaf and Gabriel (2009) identified several levels of stress that affect frontline community organizers including organizational stressors such as employer expectations and the amount of support they are expected to provide to others; and community stressors such as historical trauma, oppression, and violence. In addition, other structural issues embedded within social services including under-funding, unrealistic case loads, and time constraints have been identified as contributors to stress and trauma (Morrison, 2007; Mann-Feder and Savicki, 2003). As Morrison (2007:10) observes:

Individual workers...exist within a broader social environment, which will also influence the need, ability and propensity of both individual and organizational strategies to deal with vicarious trauma. Workplace policies, legislation and funding will enable, constrain and shape the supports an organization is able to put in place.

In essence, Morrison (2007) argues that organizational environments can play a key role in either supporting wellness or contributing to vicarious trauma in frontline community organizers.

An often unrecognized aspect of frontline work is that frontline community organizers can also be from the communities in which they work or share similar lived experiences to the individuals they are supporting (FPYN, 2009). Goodleaf and Gabriel (2009) described some of the challenges Aboriginal frontline workers face when working in their communities. These included internalized expectations reinforced by community expectations that these workers are equipped to continually respond to crisis; an expectation that they are stronger than other community members and therefore should not need help; and a sense that these people are somehow immune to the systemic issues affecting their communities. In addition, these frontline community organizers navigate complex roles in their personal and professional lives, which can render work/life separation impossible (Goodleaf and Gabriel, 2009). Further, I would argue that these challenges resonate with the experiences of other frontline community organizers who live in or are from the communities they serve; or work in communities that experience many of the forms of oppression and marginalization they have faced. As Frontline Partners with Youth Network's (2009:3) research on stress and burnout in frontline workers in Toronto shared: "*while many youth workers work towards overcoming larger systemic issues facing youth-such as endemic poverty and racism-they are also very much affected by these same issues as many youth workers also come from poor and racialized communities.*" The dynamic of working within one's own community or a community that shares similar lived experiences is of particular relevance to this research as devolution of services to communities including neighbourhood-based funding strategies place people in positions where they are relied on to address issues in their communities that are rooted in contexts outside of their control.

2.2.5 Problamatizing 'Help'

Social services are often predicated on dichotomies of helper/helpee, service provider/client that can embody unequal power dynamics. For example, individuals relegated to the position of being in need of service are rarely afforded opportunities to challenge the discourses that frame them as 'in need.' As the previous discussion outlined, there are many ways in which attempts to 'help' can cause harm by ignoring how systemic issues contribute to

traumatic experiences. For example, in describing social work and counseling practices, Burstow asserted that:

Trauma is magnified exponentially in the name of help, especially by those helping institutions that occupy central locations in the relations of ruling. Moreover, trauma is systematically produced by them. As such, officially mandated institutions of help, especially arms of the state, must be understood as central players in the traumatizing of people and communities (2003:1307).

This argument is supported by critiques of the 'Non-Profit Industrial Complex' (see page 20) which describes how working within social services and non-profit sectors can perpetuate exploitative power structures and keep people in positions of needing services by not focusing on fundamental, systemic change (see INCITE!, 2007). In addition, as someone who works in the field of philanthropy (see Chapter Four), my social positionality as a funder can contribute to reinforcing the notion that funders can identify problems within communities and prescribe solutions to these problems in ways that can reinforce unequal power dynamics and undermine community self-determination. In these instances, 'helping' can be harmful to the degree to which it normalizes problematic discourses and imposes experiences, labels and identities on people. In addition, 'helping' where there are unequal power relationships that are not being confronted and challenged can entrench power dynamics, hindering attempts at systemic transformation.

2.2.6: Bridging Trauma Studies and Neoliberal Critiques

In using the language of trauma, this research is concerned not with diagnosing people as traumatized but in exploring the broader systemic and structural processes that frontline community organizers identify have contributed to their experiences of stress, burnout and trauma. It builds on the critiques raised above including the call for further integration of systemic issues into trauma studies so that the focus is not limited to treating trauma as an individual pathology at the expense of calling into question the social, economic and political factors that contribute to experiences of stress and trauma. The intention here is to expand the discussion from diagnosing and treating individuals as traumatized to unpacking the broader contexts that exacerbate people's experiences of trauma in order for these systemic issues to become a locus of intervention. To do so, this research is further informed by critiques of neoliberalism and welfare state withdrawal. These bodies of work investigate how systemic issues such as poverty, racism and oppression are increasingly being treated as community-

based issues coupled with an increased onus on individuals to address their own needs and those of their communities as though they are separate from broader systemic issues. This is discussed in more detail in the following section.

2.3: TAKING CARE OF ONESELF AND OTHERS

2.3.1: Overview

This research argues that frontline community organizers are experiencing stress, burnout and trauma in part by working at the frontlines of downloaded services and welfare state withdrawal. Further, frontline community organizers are living and working in community settings that experience marginalization and are shaped by neoliberal discourses. However, as the previous discussion illuminates, these systemic issues are not widely incorporated into dominant trauma discourses. In order to help contextualize frontline community organizers experiences of stress, burnout and trauma, this section explores key debates in neoliberalism and welfare state withdrawal.

In the last 30 years, the public sector has increasingly removed itself from providing basic services for its citizens, leaving a gap that is being filled by the voluntary sector (see Milligan, 2007; Ilcan and Basok, 2004; Defillipis, Fisher, and Shragge 2006). With the decline of the welfare state, there has been a shift away from providing universal services to more targeted programs implemented through community-based organizations (Defillipis, Fisher and Shragge, 2006). State divestment in providing a social safety net for its citizens is a key characteristic of neoliberalism. Within this context, the voluntary sector has assumed new significance in responding to the gaps in services once provided by the state (see Milligan, 2007; Ilcan and Basok, 2004; Defillipis, Fisher and Shragge, 2006). However, welfare state withdrawal observed under neoliberalism, many argued, should not be equated with diminished state control over communities and individuals; or increased community-level power (see Herbert, 2005; DeFillipis, Fisher and Shragge; Taylor, 2007). For example, literature focussed on governmentality describes how state control can strengthen despite government devolution as its priorities are internalized by individuals, communities, organizations and whole sectors (see Rose, 1999; Ilcan and Basok, 2004; Herbert, 2005; Taylor, 2007). What has been

observed is a shift in the role of community and community-based organizations that increasingly sees systemic issues conceptualized as local problems that can be addressed at a community level (Rose, 1999). This has significant implications for community-based organizations and communities, as they are increasingly relied on to deliver services in lieu of the state, either through government contracts or by securing funding (Ahn, 2007).

Unpacking the implications of neoliberalism and the decline of the welfare state on communities, community-based organizations, grassroots groups and community organizers provides important grounding for this research. There are two broad aspects of neoliberal scholarship to which I wish to draw attention. The first is how neoliberalism has localized systemic issues within communities and rendered individuals responsible for their own needs and those of their communities. The second relates to how the reorientation of community-based organizations to provide services previously provided by the state has affected their ability to advocate for systemic change. Through this discussion, the overarching context in which frontline community organizers work and how this shapes their experiences of stress and trauma becomes more evident.

2.3.2: Locating Responsibilities in Communities and Citizens

Critical scholarship in neoliberalism and welfare state withdrawal has identified how community and citizenship are constituted in ways to rationalize devolution of services and responsibilities for social welfare to communities and individuals (see Rose, 1999; Defillipis, Fisher and Shragge, 2005; Taylor, 2007; Bauder, 2002). These critiques highlight how the responsibility for addressing social issues has been transferred from the state to communities in ways that localize social and systemic issues within particular communities:

The policy interest in 'social capital', with its implicit assumptions that the most disadvantaged neighbourhoods lack the strong local ties and informal coping systems that allow others to overcome their difficulties, might be seen as another example of transferring responsibilities downwards (Taylor, 2007: 305).

This shift can be seen in targeted funding strategies that focus on particular neighbourhoods and communities as the place of intervention into systemic issues such as poverty, marginalization and social exclusion. These funding and policy approaches imply that

communities are responsible for their own social and economic misfortunes and the issues communities are experiencing can be addressed devoid of tackling broader systemic barriers (Bauder, 2002). For example, in their study of targeted neighbourhood investment strategies in Toronto, Cowen and Parlette (2011) described how a targeted, neighbourhood effects approach assumes systemic issues can be addressed through local infrastructure investments. They outlined how 'neighbourhood effects' discourses assume that the concentration of poverty within neighbourhoods cultivates poverty, and that the solution in part is to focus on behavioral change and increased resident engagement in order to address neighbourhood-level poverty. In practice, these approaches can blame poor people for poverty as: "*the idea of neighbourhood effects can be interpreted as yet another episode in the on-going discourse of inner-city marginality that blames marginal communities for their own misery*" (Bauder, 2002:88). Further, these strategies downplay and render obscure the structural and systemic issues that lead to entrenched poverty (Cowen and Parlette, 2011).

Further, while governments have been simultaneously investing less in basic services and supports, the overarching issue facing marginalized communities has been framed as one of people needing to be supported and empowered to take better care of themselves (Ilcan and Basok, 2004). This focus on self-reliance has manifested in government policies that focus on labour market participation. In Ontario, this is exemplified with the introduction of Ontario Works in 1997 as a workfare program. Under Ontario Works, people are provided with job searching supports, temporary job placements and are expected to volunteer to receive social assistance (Curtis, n.d). With this, the focus is on people increasing their human capital, while reducing their burden on society (Trudeau and Veronis, 2009). In addition, people are expected to take care of those who are not self-reliant, as individual participation in civil society has been treated as the solution to social problems and a sign of good citizenship (see Milligan and Conradson, 2006; Ilcan and Basok, 2004).

Critiques speak to how this focus on promoting individual self-reliance and community participation coupled with the onus on community-level interventions masks systemic and structural issues shaping communities: "*Issues confronting society become ones of individual and collective 'values'-whether or not citizens join associations or groups-rather than macro*

politics and policies” (DeFilippis, Fisher and Shragge, 2006: 677). In addition, Rose (1999) described how ‘community’ is constituted within government and voluntary sector relationships in ways that require people to act from a moral obligation to serve the needs of their communities:

The community of the third sector, the third space, the third way of governing is not primarily a geographical space, a social space, a sociological space, or a space of services, although it may attach itself to any of all such spatializations. It is a moral field binding persons into durable relations (1999:172).

This is leading to a situation where people are increasingly expected to address their own needs and those of their communities without being able to confront and challenge systemic issues such as unequal resource distribution, racism, and oppression that entrench marginalization within certain communities (see Defillipis, Fisher and Shragge, 2006; Brodie, 1996; INCITE!, 2007). Further, I argue that individuals and communities are expected to fill gaps in services, subsidizing the system through ‘the currency of caring’ discussed below.

2.3.3: The Currency of Caring

The reliance on individuals to provide community-based services as a part of welfare state withdrawal is being explored within geographies of volunteerism (see Skinner and Power, 2011; Milligan, 2007). Using the language of carers and caregivers, the literature often define these roles as either *formal*, where someone is reimbursed for their time and care, or *informal*, where care is provided by family, friends or volunteers and there is no financial compensation (Yantzi and Skinner, 2009). Informal caregiving in this context is often described as voluntary. Volunteerism in a broad sense “*refers to the activity of individuals who give of their time to help others, without compulsion and for no monetary pay*” (Milligan and Conradson, 2006:3). Informal care, where healthcare and social services are provided by family, friends and volunteers is seen to both supplement professional care and be a foundational aspect of social welfare delivery (Milligan, 2003). For example, Milligan described how caregivers are treated as a resource the state draws on and “*against whom services are structured*” (2003:457). Skinner and Rosenberg (2006:94) described how:

The Canadian context is characterized by a growing reliance on voluntary organizations, community groups and volunteers to provide healthcare services at the local level both formally and informally. Underlying this transformation, however, is the highly debatable assumption that local informal and voluntary

sector providers have the capacity and willingness to play active and direct roles in the provision of healthcare services.

While geographies of volunteerism have predominately focussed on transfer of formal healthcare services such as elder care and mental health services to communities and informal settings (see Milligan, 2001), I would argue that there is considerable overlap between the types of services frontline community organizers working within marginalized communities provide and the carers/caregivers/ volunteers described within this broader body of literature.

In exploring neoliberal discourses on citizenship and how the withdrawal of state services has left gaps in basic programs and services that people are relied on to fill, this research seeks to challenge some of the underlying assumptions about volunteering and caregiving within this context. For example, the assumption that the work is unpaid presupposes that volunteers are drawing their livelihoods from other sources and it does not encompass ways in which people 'volunteer' (e.g. are not paid) to continue to implement programs and services in their communities that they may have had some initial financial support to implement, through short-term project based funding or contracts. In practice, as funding for projects ends, many individuals have continued to run these initiatives because the community looks to them to fill these gaps and provide these services (see Warner, 2005). In this sense, whether someone is paid or unpaid is a broader indication of the availability of resources to compensate them, rather than the nature of the services they provide. By this I mean caregivers and frontline community organizers are often providing services that someone else, in a different community or professional setting is being paid to do. In addition, the assumption that volunteers act without compulsion understates the reality that welfare state withdrawal has led to increasing gaps in services that I would argue compels people to act.

Ultimately, community-based projects arise in response to local, immediate needs as well as gaps in programs and services (Skinner and French, 2012B; Milligan and Conradson, 2006). This research argues that one implication of welfare state withdrawal is that people are expected to care for themselves and others with very few supports, which in practice contributes to stress and burnout. By this, I argue that downloading service responsibilities to frontline community organizers, volunteers and caregivers has contributed to experiences of stress and

burnout for the people involved in filling these service gaps. I use the term 'currency of caring' to make explicit that when people are providing services and care in informal, unpaid or precariously paid positions, they are implicitly being asked to subsidize the system. In this sense, it is a currency upon which welfare state withdrawal depends. The prevalence of stress and burnout in community-based work also highlights that this is an unequal exchange with potentially deep personal impacts for frontline community organizers.

2.3.4: Community-based Organizations operating in the Shadow State

As discussed above, in response to welfare state withdrawal, the voluntary sector and community-based organizations have taken on increased importance in providing social services, filling in gaps in government programs (Milligan, 2007; Macmillan and Townsend, 2006; Mananzala and Space, 2008; Defillipis, Fisher and Shragge, 2006; Brodie, 1996). A critical question being raised is *"how effective is the voluntary sector at becoming involved in health promotion, delivering services and advocating for change within the system?"* (Skinner and Power, 2011: 4). I would further ask: 'what toll does this take on the people involved in providing these services and responding to these gaps?' Further still, scholars are questioning whether community-based organizations can advocate for changes if they are dependent on state and private funding (INCITE!, 2007).

There are two concepts that have been raised in the literature regarding the role of community-based organizations in welfare state withdrawal to which I wish to draw attention: the shadow state and the Non-Profit Industrial Complex. The 'shadow state' is a term used to describe *"voluntary organizations that have collective service responsibilities that have previously been borne by the public sector...Such organizations are seen to be controlled in both formal and informal ways by the state"* (Milligan, 2005:188). The shadow state provides a framework for understanding how community-based organizations are shaped by their relationship with the state in ways that can restrict their activities (Mananzala and Spade; 2008). The Non-Profit Industrial Complex (NPIC) is a framework that seeks to raise the conversation beyond the role of particular organizations, funders and government bureaucracies to see how these operate within a larger system that undermines the abilities of nonprofits and charities to do transformative social justice work (see Smith, 2007; INCITE!, 2013). The NPIC

Is argued to be an emergent system composed of public agencies, private companies, philanthropic organizations and non-profit social service organizations. This system is argued to emphasize the role of non-profits as service providers, while discouraging advocacy work and political activism. The narrowing of non-profit activities is considered to be compatible with neoliberalism and less threatening to the status-quo (Silverman and Patterson, 2012:438).

Both the shadow state and the NPIC identify how community-based organizations have been restricted in their ability to advocate for and address systemic issues (see Wolch, 2006; Smith, 2007).

Broadly, the literature describes how the increased onus of providing services has changed the role community-based organizations play in their communities and in civil society. Mananzala and Spade (2008: 56) argued that *“the nonprofit industrial complex ultimately maintains politics and institutions of oppression, keeping a lid on radical political work while pushing organizations to provide basic services that quell unrest”*. This is echoed by Kivel (2007:136) who described how *“programs are severely underfunded and overregulated; more, they merely provide services, without addressing the structural issues as required to actually eliminate the injustices or inequality motivating people to organize in the first place.”* Further, Rodriguez (2007) described how conceptually and in practice, the voluntary sector has internalized its role as providing direct services and working with governments to execute social programs. The undermining of community-based organizations role in advocacy is compounded by a perceived ‘advocacy chill’, where it is felt that engaging in advocacy will negatively affect an organization’s relationship with the state and their ability to access funding and contracts (see Laforest and Orsini, 2005; Silverman and Patterson, 2010). This perceived ‘chill’ is reinforced by government legislation that has limited the amount of time and revenues a group can dedicate to advocacy. For example, nonprofit and charitable organizations in Canada cannot dedicate more than 10% of their revenues and activities to advocacy activities (Ilcan and Basok, 2004).

Dependence on government support has also changed the nature of community-based organizations as they increasingly have to learn specific skills in order to align with state priorities (Wolch, 2006). For example, in their research into the voluntary sector in Canada, Laforest and Orsini (2005) described how a government push for ‘evidence-based’ policy

development has transformed the voluntary sector in significant ways. This has included needing to invest in particular types of expertise, namely in research; and feeling unable to make claims based on other forms of knowledge as it will not be treated as legitimate. Laforest and Orsini (2005: 494) argued that:

Evidence-based policy-making not only privileges certain voluntary sector actors who have the requisite skills and knowledge to take part in policy dialogue; it has the potential to divest the sector of its capacity to empower citizens and communities. This problem is exacerbated by the fact that organizations are increasingly relying on data and evidence as a platform for advocacy, rather than turning to their members in order to represent their interests.

This has also led to is a type of 'professionalization' within the voluntary sector, as these groups are more likely to receive government contracts than grassroots, advocacy focussed groups (Wolch, 2006; Laforest and Orsini, 2005).

In addition, there are increased divisions within the nonprofit sector between groups providing direct services and those focussed on systemic change (Wolch, 2006; Mananzala and Spade, 2008). Mananzala and Spade (2008: 57) argued that this separation depoliticizes services as:

Instead of survival services being a point of politicization, a locus from which people can connect their immediate needs to a community-wide issue of injustice or maldistribution, services are provided through a charity or social-work model that individualizes the issues to the particular client and too often includes an element of moralizing that casts clients as blameworthy for their need.

In practice, some scholars point to how meeting funder requirements and delivering services can distance people from their communities, as they have become more accountable to their funders and their employers than to the communities they are mandated to support (Kivel, 2007).

These critiques raise the question of whether it is possible for funders operating within this system to collaborate with and not undermine the social change agendas of community-based organizations and grassroots groups. To begin to broche this question, my research draws on the understanding that foundations are brokering money that is intended to do public good: *"individuals who have dedicated their lives to working for social and economic justice need a major paradigm shift and recognize that foundation money, often the result of exploited*

wealth, is public money” (Ahn, 2007: 74). As such, funders have a key role to play in changing this landscape in order to fulfill their obligations to support public welfare (Gilmore, 2007). While restricted by the structures they embody, I believe there are ways that funders can be better allies, although I recognize it is not simple or unproblematic to do. A starting point, this research argues is for funders to adopt practices that promote, as oppose to undermine, the health and wellness of frontline community organizers.

2.3.5: Integrating Service Provision and Advocacy

While the literature on neoliberalism describes how the reorientation of community-based organizations as service providers is undermining their abilities to advocate for systemic change, there are also spaces of resistance within communities and community-based organizations. Lerner (2005) argued that within neoliberal critiques: “*we are telling partial and possibly unduly pessimistic stories*” and may be missing opportunities to see new political and social spaces that are emerging (2005:11). These spaces can be found both within (see Defilippis, Fisher, and Shragge 2006; Guilloud and Cordery, 2007; Manazala and Spade; 2008; Wakefield et al, 2012) and outside (see Rose, 1999; hooks, 1990; Kivel, 2007; Roderiguez, 2007) community-based organizations and the voluntary sector.

Drawing on the four pillars model for social justice developed by the Miami Workers Center, Mananzala and Spade (2008) present an approach to social justice that integrates efforts to change policies and legislation; increase awareness and change public opinion; provide direct services and help stabilize people's lives; and achieve community autonomy and increase community power; by bringing together organizations and groups that may specialize in one of these areas to work towards common goals. Of significance here is to acknowledge that providing direct service is not necessarily propping up the state, but that it needs to be integrated with other efforts. As Mananzala and Spade (2008:64) asserted: “*trans communities cannot build political power and take up leadership in the variety of movements that concern us if we are not surviving.*” They call for models of social services based on social justice as opposed to charity, and that build political power. While their work speaks specifically to trans communities, I would argue that the need to balance survival with political change is relevant to other systemically marginalized, criminalized and oppressed communities that frontline

community organizers support. In addition, Defillipis, Fisher and Shragge (2006: 687) research concluded that:

Community through local organizations can be part of a wider force of social and political opposition and can make claims to redress social inequality and injustice. However, in order to do so, such local organizations have to be conscious about what they are doing in terms of underpinning ideologies, analyses and stakes.

What these insights offer are insights into ways in which communities, community-based organizations and individuals work against pervasive neoliberal discourses to both meet the immediate needs of their communities and problematize the conditions under which services are being provided. These insights speak to the possibility of working within the system to subvert or change it, something that offers an important basis for thinking through how funders can support social change efforts.

2.3.6 Neoliberalism and Burnout

Within the literature on neoliberalism, some scholars described how community-based organizations respond to welfare state withdrawal by demanding more of themselves and their volunteers (see Trudeau and Veronis, 2009; Lipsky and Smith, 1989-1990). These critiques do not explicitly name how 'demanding more' can contribute to stress and burnout in community-based work, though they alluded to the increased burdens placed on individuals to meet the needs of their communities. For example, in their work exploring community-based organizations providing migrant services in Toronto and Minneapolis-St Paul, Trudeau and Veronis (2009) described how changes in eligibility requirements from funders meant that many of the individuals were no longer eligible to receive their services. The response from these organizations was not to turn people away:

In these situations staff members volunteer their time as liaisons for the immigrants and refugees who are ineligible for the state-funded social service programmes. In this role staff regularly assist with nonprogrammatic (and nonfunded) services, including transportation, acting as an interpreter to schedule appointments, translating documents, assisting with job searches, and mediating misunderstandings with landlords.

Asking staff to volunteer to take on increased workloads was echoed in Lipsky and Smith's (1989-1990: 647) interviews with executive directors of community-based organizations. They concluded that: "*it is not uncommon for employees in these agencies to work on their days-off to help a client or to try to circumvent a government regulation to obtain special programmatic or*

financial help” (Lipsky and Smith, 1989-1990: 647). These examples reflect an acceptance within community-based work that people can take on increased workloads because it is the only way to fill in program and service gaps created by welfare state withdrawal. The expectation that people will care for themselves and their communities and volunteer to offset welfare state withdrawal, my research argues, can have profound negative impacts on the health of these individuals. Further, this expectation that people will do more because they care is subsidizing welfare state withdrawal in subtle and explicit ways.

2.4 CONCLUSION: MOBILIZING RESOURCES TO PROMOTE HEALTH AND WELLNESS

This literature review has focussed on exploring some of the underlying critiques of neoliberal restructuring and trauma discourses. This includes the recognition amongst scholars that welfare state withdrawal and neoliberal discourse are increasingly framing communities as both the source of social problems and the solutions to them (Rose, 1999). In addition, there is recognition that government no longer sees its role as ensuring universal, social welfare for its citizens as individuals are tasked to ensure their own self-reliance and that of their communities (Brodie, 1996; Ilcan and Basok, 2005). Further, there is recognition that community-based organizations are operating as the shadow state, delivering services that the state no longer does (Milligan, 2005). Compounding this, there is recognition that increased dependence on state and private philanthropy is undermining the ability of community-based organizations to focus on systemic change (INCITE!, 2007). An outcome of this, my research argues, is that this contributes to stress, burnout and trauma for the people involved in frontline community-based work. In addition, scholars are recognizing that dominant trauma discourses often fail to embed a structural analysis into people’s experiences of trauma (Burstow, 2004). These literatures share a common concern with how systemic issues are rendered the responsibilities of those experiencing the issues most acutely and how this can mask the structural issues that are beyond the control of people and communities to address.

What the literature alludes to, but does not explicitly address are the various ways people living and working in marginalized communities are personally stretched to fill the needs left by welfare state withdrawal. Broadly, this research suggests that neoliberalism and welfare

state withdrawal is subsidized by a 'currency of caring,' whereby individual workers and volunteers are expected to provide services and supports that the state does not, because they care. This dependence on people's capacity to care, I argue contributes to stress, burnout, trauma and vicarious trauma in frontline community work.

This research is guided by the lived experiences of frontline community organizers. As Frontline Partners with Youth Network, in Toronto asserted:

As people who work directly with youth, we see the systemic barriers they face and we are determined to take them on. At the same time, many of us are dealing ourselves with the effects of systemic racism and oppression. Many of us are suffering from unrecognized trauma and vicarious trauma. And many of us feel burnout (FPYN, 2013).

This research builds from their observations and experiences to inform critiques of neoliberalism. In drawing on frontline community organizers' insights, this research responds to an observation within neoliberal scholarship that the perspectives and experiences of citizens are not often at the forefront of the analysis of welfare state withdrawal: *"much academic work tracks the logic of neoliberal projects, little interrogates the assessment of devolution by the citizens upon whom it presses obligations"* (Herbert, 2005:850).

As subsequent chapters will demonstrate, the practical focus of this research is on how funders, who are intrinsically involved in operationalizing neoliberal agendas, can promote health and wellness for frontline community organizers. The contradictions and tensions in this approach are palpable. Here, I take Michel Foucault's assertion to heart:

My point is not that everything is bad, but that everything is dangerous, which is not exactly the same as bad. If everything is dangerous, then we always have something to do. So my position leads not to apathy but to hyper- and pessimistic – activism (Foucault, 1983: 231-232).

While many critical scholars and activists assert that 'the revolution will not be funded' (INCITE!, 2007), I am interested in practical ways funders can invest resources into the actual people involved in community-based and social change work in ways that reduce stress and burnout. My hope is that by recognizing the inherent stress and trauma experienced by frontline community organizers and working to foster health and wellness in the current funding model, we may begin to address some of the systemic issues obscured by the discourses of welfare

state withdrawal. I argue that to get to this place requires changing current funding strategies and funding mechanisms. In subsequent chapters, this research offers insight into what these changes could encompass.

NEOLIBERALISM AT PLAY IN TORONTO: A CONTEXTUAL LITERATURE REVIEW

3.1: INTRODUCTION

In order to situate this research, Chapter Two provided an overview of neoliberalism and its implications for the voluntary sector, community-based organizations and frontline community organizers, and as well as calls to further incorporate social and systemic issues into trauma studies. This chapter explores how welfare state withdrawal is playing out in Toronto, Ontario drawing on community reports and experiences. In the last 30 years, neighbourhoods and communities in Toronto have undergone rapid and significant changes. This has included pronounced income polarization between higher income and lower income neighbourhoods and the observation that middle income neighbourhoods are disappearing (Hulchanski, 2010). Coupled with this, Toronto has seen the increased racialization of poverty⁸ (Ornstein, 2006). In response to the increased concentration of poverty within certain neighbourhoods, the municipal government and United Way of Greater Toronto (UWGTA) adopted a targeted neighbourhood investment strategy, focussed on communities that are experiencing high poverty (UWGTA, 2004; SNTF, 2005). Launched in 2005, the 'Priority Neighbourhoods' approach has been shaping funding and investment strategies in Toronto as well as the contexts in which frontline community organizers work.

This chapter provides a broad overview of the Priority Neighbourhoods model, the *Roots of Youth Violence* report and the Youth Challenge Fund, highlighting how these policy frameworks and funding strategies have placed an increased onus on residents and individuals to address 'local' problems as a way to tackle poverty and marginalization. This chapter then

⁸ Racialization of poverty refers to disproportionate experiences of low incomes among racialized groups. The increased racialization of poverty being seen in Canadian communities has led some to conclude that: "racialized groups, immigrants, refugees and women have born the brunt of the economic restructuring and austerity" (Galabuzi, 2005:9).

outlines some of the challenges and issues raised by community organizers and community-based groups related to these funding and regulatory frameworks. The critiques raised by community organizers in several community research reports include how the Priority Neighbourhood model has not adequately addressed systemic issues facing communities; how short-term funding cycles has made it difficult for community groups to respond to community priorities in sustained ways; and that community organizers are continuing to experience stress, burnout and trauma as a result of working in this context (see Warner, 2005; Abebe and Fortier, 2008; FPYN, 2009). The widespread application of targeted neighbourhood investment strategies and community critiques of this strategy makes Toronto an important case example of how the reliance on individuals and communities to fill gaps left by welfare state withdrawal has significant implications for the people on whom these responsibilities fall.

3.2: STRONG NEIGHBOURHOODS, SOCIAL CHANGE?

In 2004, the United Way of Greater Toronto released *Poverty by Postal Code*, a comparative analysis of the spatial concentration of poverty in Toronto from 1981-2001 (UWGTA, 2004). In it, the UWGTA described how the changing concentrations, locations and demographics of poverty have seen increased poverty in Toronto's inner suburbs coupled with an increased racialization of this poverty. The report called for putting neighbourhoods on the public policy agenda and identified building strong neighbourhoods as one its primary funding, convening, public education and capacity building priorities (UWGTA, 2004).

3.2.1: Targeted Neighbourhood Investments

Drawing on the perceived success of neighbourhood revitalization strategies underway in Great Britain and the United States of America, the UWGTA and the City of Toronto, through the Strong Neighbourhood Task Force (SNTF) called for the development of targeted investment strategies for neighbourhoods deemed high poverty (UWGTA, 2004; SNTF, 2005). The SNTF comprised private, labour, voluntary and public sector representatives and was convened with the goal of developing neighbourhood revitalization strategies that addressed "*growing neighbourhood poverty and inadequate community infrastructure*" (Harding, Hoy and Lankin, 2005: 3). Developing neighbourhood-based approaches was a way to focus United Way

and municipal investment strategies with the stated goal of having greater impact on addressing social and systemic issues affecting communities (UWGTA, 2004; SNTF, 2005).

However, critiques of neighbourhood-level interventions that draw on 'neighbourhood effects' approaches describe its inability to address the broader social and systemic issues that contribute to marginalization and poverty in communities. For example, in their evaluation of one priority neighbourhood in Toronto, Cowen and Parlette (2011) described how two different issues are conflated under a targeted, neighbourhood effects approach. On the one hand, there are infrastructure and services gaps present in certain neighbourhoods because of historical underinvestment and population change. Addressing these infrastructure gaps can contribute to improving the experiences of residents. On the other hand, 'neighbourhood effects' literature assumes that the concentration of poverty within neighbourhoods cultivates increased poverty and that behavioral change and resident engagement is needed in order to address neighbourhood-level poverty (Bauder, 2002). While infrastructure gaps can be addressed through these targeted investments, systemic poverty will not be eradicated through these local, neighbourhood-based projects and interventions (Cowen and Parlette, 2011). In addition, critiques of this approach speak to the insufficient evidence that neighbourhood-level interventions actually address poverty and systemic issues, as most commonly poverty is displaced to other communities as opposed to addressed (Cowen and Parlette, 2011). Further, community responses to this model have described how it localizes systemic issues within communities and that these targeted interventions have not enabled widespread structural change (Abede and Fortier, 2008).

While it remains a contentious model, targeted neighbourhood approaches have been adopted and entrenched in Toronto with the goal of addressing systemic issues affecting communities. For example, both the UWGTA(2004) report *Poverty by Postal Code* and the SNTF(2005) *Call to Action* report identified systemic issues affecting marginalized communities and residents as being a primary concern. Both reports described inadequate minimum wages; declining social assistance; the inability of new immigrants to enter the labour market; and the disappearance of well-paid manufacturing jobs as key causes of poverty (SNTF, 2005; UWGTA, 2004). However, the primary interventions proposed to address these issues have focussed on

the role community-based organizations and residents need to play in addressing their 'local' problems. As the UWGTA (2004; 59) asserts:

Community funders and government at all levels must work together to build long-term, multi-pronged solutions for stronger neighbourhoods in Toronto. This includes investments in new social infrastructure in high needs neighbourhoods, sustainable funding for existing and new social service organizations, and new investments to help local citizens and community groups develop ownership of their communities and become active participants in the development of solutions to local community problems.

This statement echoes neoliberal citizenship discourse discussed in Chapter Two that individualizes systemic issues and places the responsibility on residents of marginalized communities to address them. In practice, these approaches illustrate a dissonance between the intention to tackle underlying systemic issues that marginalize communities and the development of actual strategies to do so. Poverty in Toronto has become geographically concentrated, but the contributing factors are not localized, neighbourhood-based issues (Black, 2011). While this is acknowledged in the reports calling for the implementation of targeted neighbourhood strategies (UWGTA, 2004; SNTF, 2005), the structural and systemic issues experienced more acutely in some communities are not being sufficiently addressed through these approaches (Cowen and Parlette, 2010).

3.2.2: Violent Neighbourhoods?

In 2005, Toronto saw an increase in gun violence in some neighbourhoods, in what has become known as the 'Summer of the Gun.' This helped propel the adoption of Priority Neighbourhoods as a key strategy for addressing poverty and marginalization. As one Toronto city counselor reflected:

It should just be based on the science, on what the research shows...But ultimately, you need those catalytic factors to get something through a council of 44 random councilors who have very different experiences from one neighbourhood to the next. And one arrived-tragically (Councillor Shelly Carrol, as reported by Dale, 2010).

In addition, the 'Summer of the Gun' led to two broad responses from the Province of Ontario that have shaped the context of frontline community work in Toronto. One was the creation of the Ontario Roots of Youth Violence Secretariat (McMurtry and Curling, 2008) and the other was the mobilization of funding for youth-led and youth focussed projects through the development of the Youth Challenge Fund (YCF) (Abebe and Fortier, 2008).

The Roots of Youth Violence Secretariat undertook research into the causes of youth violence culminating in several recommendations for the Province (McMurtry and Curling, 2008). This report identified lack of services and facilities and the concentration of poverty within defined geographical areas as contributing factors to violence among young people. The report asserted that: *“Ontario needs to focus on addressing the roots where they are the most entrenched and damaging: in neighbourhoods characterized by high concentrations of poverty”* (McMurtry and Curling, 2008:16). In addition, the report (2008, chapter 7) stated that *“if local problems are to be addressed on local turf, and if solutions are to grow out of local strengths, it follows that residents and local agencies must have significant roles in setting policies and priorities.”* As with the UWGTA and SNTF, there is a disconnect between the identification of systemic issues that rest outside particular communities and the onus on programs and infrastructure improvements as the primary solution to these issues. In this case, violence has been framed as a neighbourhood issue that can be solved through local projects. While citing a number of universal strategies that have been implemented to improve society including public education and healthcare, the *Roots of Youth Violence* report asserted that

It seems clear that if we cannot reduce serious income gaps and if people are condemned to live in areas of concentrated disadvantage, largely, and in the case of youth, entirely, for reasons beyond their own control, then the least we as a society can do is to try to counterbalance this with public services (McMurtry and Curling, 2008, chapter 9).

The above statement assumes that poverty cannot be eradicated and providing services is a reasonable alternative and means to temper the impacts of poverty and marginalization.

The Roots of Youth Violence report has been highlighted here because it offers a clear example of neoliberal rationales at work and because one of its main recommendations is the proliferation of targeted neighbourhood strategies to communities across the province (McMurtry and Curling, 2008). To support this recommendation, the report cited the work of the SNTF and UWGTA, describing how these interventions have led to the development of local action teams and enabled internal changes at the City of Toronto and the UWGTA to better respond to the needs of the 13 priority neighbourhoods (McMurtry and Curling, 2008). The primary outcomes lauded of this approach included a new understanding of community partnerships and more coordination between city divisions and service providers (McMurtry and Curling, 2008). I highlight this because there is no clear mention in their analysis of priority neighbourhoods that poverty, marginalization, access to education or criminalization have been

addressed, despite these being named as underlying systemic issues affecting the health and vitality of communities and young people. In addition, the recommendation to expand the priority neighbourhood framework to other communities has been presented despite the lack of clear evidence that these approaches reduce poverty and marginalization.

In addition to the research undertaken by the Roots of Youth Violence Secretariat, the Province responded to the 'Summer of the Gun' with a targeted neighbourhood-based funding strategy, the Youth Challenge Fund (YCF). YCF was a partnership between the Province of Ontario and the UWGTA which invested \$42.5 million in projects and programs by and for Afro-diasporic youth living within the 13 priority neighbourhoods (YCF, 2003). While the funding interventions focussed on neighbourhood-level projects, the challenges that YCF identified as affecting the young people included: *"poverty; precarious employment; limited access to education, affordable housing, safe space within the community, and to relevant, engaging community programs"* (YCF, 2013). From 2006-2009, over 110 youth-led projects were supported, contributing to an increase in youth-led programs and services across these neighbourhoods (YCF, 2013). However, now that this funding has ended, it is questionable how many of these projects and programs have continued in a funded or resourced capacity (GYC, 2013). The development of the Priority Neighbourhood model and the influx of funding through YCF are significant context pieces that have shaped the landscape of community and youth organizing in Toronto, as discussed below.

3.3: FUNDING AS A NEOLIBERAL MECHANISM

How community-experienced issues can be transformed into community-based issues is a subtle process. The UWGTA, SNTF, YCF and *Roots of Youth Violence* reports outlined above start with the premise that communities experience systemic issues outside their control but then go on to propose strategies that render the issues community-based. Dale (2010) reported on the tension between the positive individual impacts these programs can have and the way this can divert energy away from pursuing structural and systemic change. He asks: *"If the priority neighbourhoods campaign saves those 10 lives, one little success by another little success, but fails to fundamentally alter the conditions that put those 10 lives and thousands more in jeopardy, has it succeeded or failed?"* (Dale, 2010). This is a complicated issue as

providing services and programs in places that lack accessible and relevant programs can improve the experiences of residents, but it is not in and of itself a solution to systemic issues such as poverty. Further, I would argue that when regulatory frameworks and associated funding practices ask for systemic change, but then invest in short-term programs and services, it places frontline community organizers in an impossible position by asking them to bear the burden of promoting systemic change while also responding to the immediate and often urgent needs of their communities.

The impact of short-term, neighbourhood-based projects being presented as a solution to systemic issues is something that community organizers have been critiquing, providing insights into how funding practices could be improved (see Abebe and Fortier, 2008; Warner, 2005). Community groups have argued that the influx of project-based funding and attention to 'priority neighbourhoods has had significant impacts on the people suddenly invested in to change the realities of their communities that have not been widely acknowledged by funders and policy makers(see Warner 2005; FPYN, 2013). In practice, individuals have been supported to take on projects in their communities that might not otherwise have been resourced. A positive outcome is the creation of new opportunities for leadership. However, because the funding has not been sustained it contributes to a situation where these projects become dependent on the voluntary efforts of these individuals or they cease to exist once funding ends. The precariousness of these investments and the consequences of short-term funding investments on residents and young people raises concerns related to sustainability and continuity of community programs and community spaces:

Following the year of the gun in 2005, much of the sectors' funding was devoted to "project funding" for youth-led groups all over the city, however these projects are now coming to an end and many of the engaging and successful programs and spaces will have difficulty being sustained (GYC, 2013).

To be clear, funding challenges facing grassroots and community-based groups predated the YCF funding influx, and many groups described the gradual erosion of government support and reduced funding (Abebe and Fortier, 2008). However the infusion of over \$40 million dollars into community-based projects and the lack of continued support at this scale have certainly placed community organizers in the difficult position of trying to sustain their work and the networks they have created despite reduced or eliminated funding (GYC, 2013). As

Chapter Two discussed, many of these groups are filling gaps in programs and services as a result of welfare state withdrawal. Community-based groups emerge because they see needs in their communities and have ideas for how to address systems that are not working. Often these groups are embedded within their communities and draw their mandates from the priorities of their communities (Skinner and French, 2012A). The relationships with community members that have developed and the commitment frontline community organizers have to their communities means that people will continue to work regardless of funding levels and compensation:

The evident dependence of youth-led organisations on a plethora of project-funds, each of which frequently operated on a short time scale and required ample administrative attention (in terms of application and evaluation procedures) only further destabilized youth-led organizations, contributing to administrative incapacitation, program, staff impermanence and ultimately, erosion of community trust, rapport and clientship (though the latter was frequently averted through sheer volunteer will) (Warner, 2005:6).

The reliance on voluntary efforts identified in the above quote subtly speaks to how people are stretched in order to continue to meet the needs of their communities. The need to rely on voluntary efforts to continue to meet community needs is often a result of precarious and short-term funding (Warner, 2005). This was discussed as the 'Currency of Caring' in Chapter Two.

In addition, in a research report focussed on youth-led community groups in Toronto, Warner (2005) identified how a lack of core funding and multi-year funding afforded to grassroots, community based groups contributed to conditions of stress and burnout:

The absence of multi-year, core funding generally contributed to intolerably high levels of staff turnover and burnout, resulting in the continual depletion (and need for repletion) of skilled staff and severing hard-gained community ties and rapport, as an overwhelming number of front-line youth workers found themselves consistently overworked, underpaid and/or in search of new work (Warner, 2005: 6).

In addition, the Frontline Partners with Youth Network (FPYN), described how: *"This combination of insufficient funding, unstable employment and increased workload has created stress and is connected to negative health affects"* (FPYN, 2009: 5). These community-based groups described how project-based funding, lack of operating support and increased workloads contribute to both stress and burnout, and undermined the effectiveness of their work. In raising concerns over funding, the issue is not simply individual livelihoods, but that communities rely

on these groups to provide accessible and relevant programs and services. If these programs end, there is often a void felt in the community.

3.4 COMMUNITY INSIGHTS

People living within and across priority neighbourhoods and systemically marginalized communities in Toronto are actively engaged in their city. This can be seen with the groundswell of grassroots groups that fill gaps in programs and services often adopting innovative and relevant approaches to community development (Warner, 2005). Warner (2005) described that while these groups are working to fill gaps in services, many groups are not under the impression that the issues facing their communities can be solved through more effective programming. Further, these groups are critical of policy and funding approaches that pathologize communities and young people living within these communities, seen most clearly with critiques of the 'at-risk' terminology often used to describe racialized and economically marginalized young people and communities (Warner, 2005).

In Toronto, the Grassroots Youth Collaborative (GYC) consists of close to 20 youth-led organizations representing many young people living in the priority neighbourhoods and marginalized communities. The GYC works to build collective voice around the underlying systemic issues facing people living in marginalized communities (Abebe and Fortier, 2008). For example, in *Rooted in Action* (Abebe and Fortier, 2008), a report commissioned as part of the Review of the *Roots of Youth Violence*, GYC challenged attempts to criminalize young people and particular neighbourhoods:

The reality of youth violence is one that does not only affect the 13 priority neighbourhoods identified by the City of Toronto as dangerous or "at risk". Many of us have come to the realization from our work and relationships with our communities that youth becoming "at risk" comes from a society who puts others "at risk" from being able to participate as equal members (Abebe and Fortier, 2008: cover).

In order to address the underlying issues affecting their communities, GYC's recommendations are structural and systemic in focus (Abebe and Fortier, 2008). It identified the need to raise minimum wage to a living wage, raise social assistance and ODSP, increase social housing and repair current social housing, invest in TTC and accessible transportation, and provide universal

day-care programs (Abebe and Fortier, 2008). These insights contrast the Roots of Youth Violence Secretariats recommendation to expand and enhance targeted neighbourhood-based strategies across the province (McMurtry and Curling, 2008). Community responses like GYC's 'Rooted in Action' illustrate that groups working within and across priority neighbourhoods have called for more investments in systemic-level changes. The contrast between policy and funding approaches that localize issues within particular places, which can render systemic issues community-based; and community-organizing approaches that name the structural issues impacting marginalized communities, focussed on community-experiences of systemic issues can be seen in Figure 1 on page 40 and Figure 2 on page 41.

In addition to identifying systemic and structural barriers that have impacted marginalized communities, there is a mobilized grassroots in Toronto that has called into question how community services are delivered and on what terms. Many community-based groups emerge to counter traditional social service models that they feel are not meeting the needs of their communities and can treat people as the source of their own problems. For example, youth-led groups interviewed in 2005 identified the need to focus on long-term changes and interventions. These groups

Stressed the importance of maintaining a longer-term community-development vision and implementing prevention-oriented programming focused on building stronger, more healthy communities as opposed to (through not to the exclusion of) what was often felt to be one-sided emphasis on crisis intervention in the social service sector (Warner, 2005:18.).

Further, an evaluation of 10 grassroots, youth-led groups, conducted by the Laidlaw Foundation described how youth-led strategies offer critical insights into what needs to change in society in order for young people to feel more included. It asserted that *"youth-led groups and intermediary organizations that support youth organizing work to challenge how social problems are defined and who is engaged in creating solutions"* (Skinner and French, 2012A:9). These insights speak to the frustrations community organizers feel as they try to refocus attention on the underlying structural and systemic issues that entrench poverty, while facing overarching policy frameworks that conflate neighbourhood-level infrastructure investments with being a solution to systemic poverty. Further, these groups have identified how social and systemic issues are treated as individual pathologies, echoing some of the critical trauma discourses outlined in Chapter 2.

Around the same time that funding was increasing for neighbourhood-based projects and services, community organizers identified the need to develop supports for the people implementing these projects (FPYN, 2009). The Frontline Partners with Youth Network (FPYN) was developed to connect frontline youth workers to peer supports around grief and trauma. It was designed to be a collective voice for frontline workers as they often face precarious employment positions, which can hamper their ability to voice their concerns. FPYN members include community organizers working within and across priority neighbourhoods and marginalized communities. It developed as a space for frontline workers to share their experiences and the challenges they face running projects within communities that are systemically marginalized. FPYN's research described the compounding issues facing frontline workers that contribute to stress, burnout and vicarious trauma:

Stuck between being deeply committed to working with young people, compounding grief and trauma, a lack of support from employers, and organizations that reproduce some of the broader systemic inequalities youth are facing, frontline workers are also being infected with the hopelessness they are working to mitigate (FPYN, 2009:4).

As FPYN asserted, frontline community organizers are not just experiencing stress because of the precariousness of their positions, they are also deeply affected by the entrenched marginalization and poverty facing the young people and communities they work with. In this sense, the inability of neighbourhood-based, project-driven interventions to address systemic issues has created conditions where frontline community organizers are perpetually confronting stress and trauma. As Chapter Two outlined, the repeated exposure to trauma can lead to community and vicarious traumatization.

3.5: CONCLUSION

Toronto is an important case example of community impacts and community responses to welfare state withdrawal. It offers insights into the key themes raised in Chapter Two related to the localization of systemic issues in communities, the increased reliance on individuals to fill gaps in services, and the impact of repeated exposure to trauma on people involved in community-based work. The insights from frontline community organizers described above provides a critique of targeted investment strategies that highlight its inability to sufficiently address the systemic and entrenched issues that may be experienced more acutely in some neighbourhoods but are not based there. These insights have further elucidated practical

considerations for funders including how funding surges that are not sustained create sustainability problems for projects that can leave projects under-resourced or dependent on unpaid efforts in order to maintain services in their communities. In addition, the experiences of frontline community organizers have highlighted how the prevalence of short-term, project based funding can create instability for groups and the people implementing community-based projects. Lastly, these insights have demonstrated how working in a context where community-experienced issues are being addressed through project-based interventions leads to stress, burnout and hopelessness for frontline workers as they struggle to meet the needs of their communities while only being resourced to provide basic services.

While this chapter has provided a contextual foundation for this research, empirical findings synthesized in Chapters Five and Chapter Six will provide further insights into the issues affecting health and wellness in community based work; as well as strategies that are being used by frontline community organizers to address stress and burnout. In addition, recommendations frontline community organizers have for how funding practices can be reframed to promote health and wellness are described in Chapter Seven.

CONTRASTING VISUALS OF THE CITY

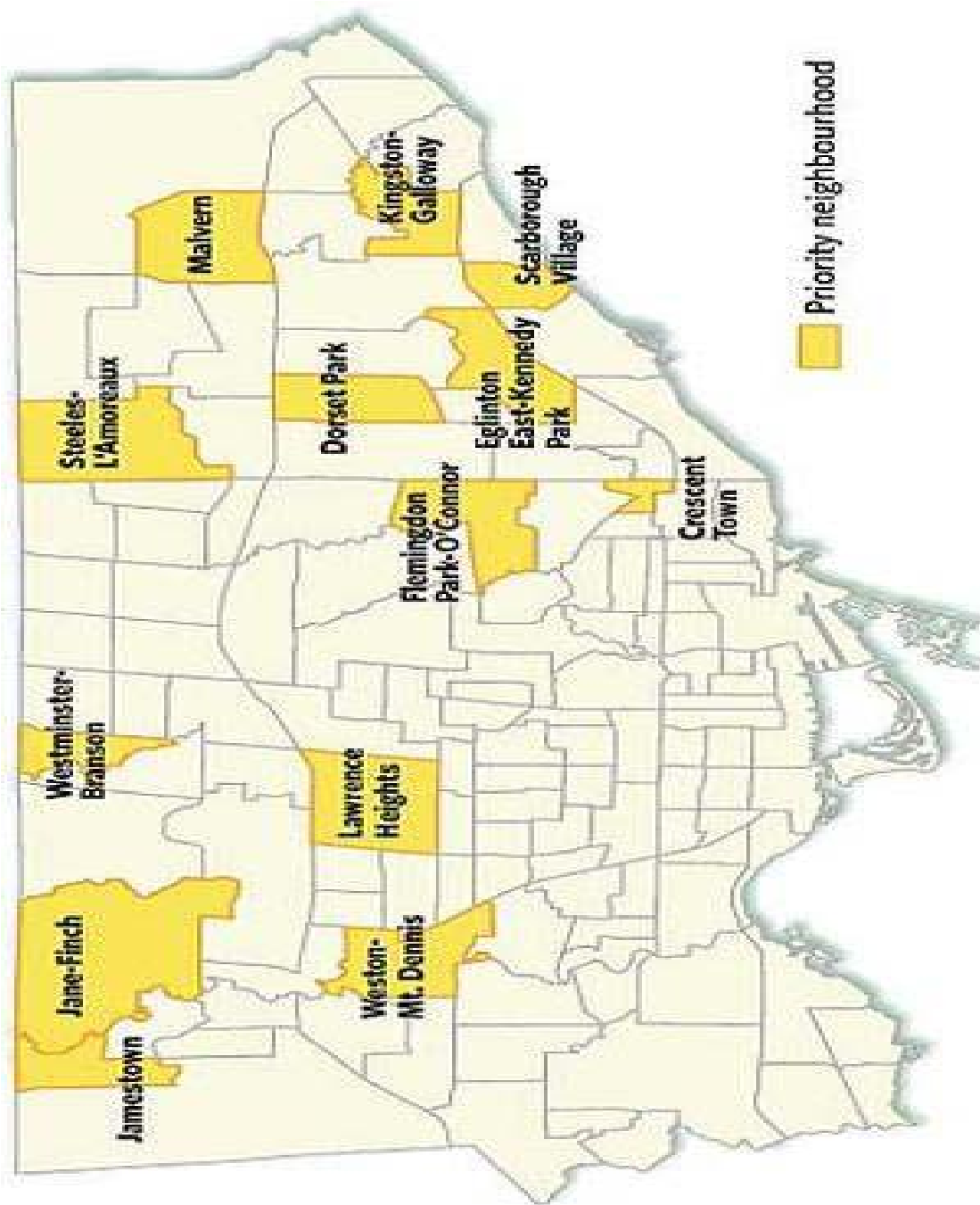


Figure 1: The '13 Priority Neighbourhoods' in Toronto

Source: United Way data, Toronto Star Graphic, July 15, 2012

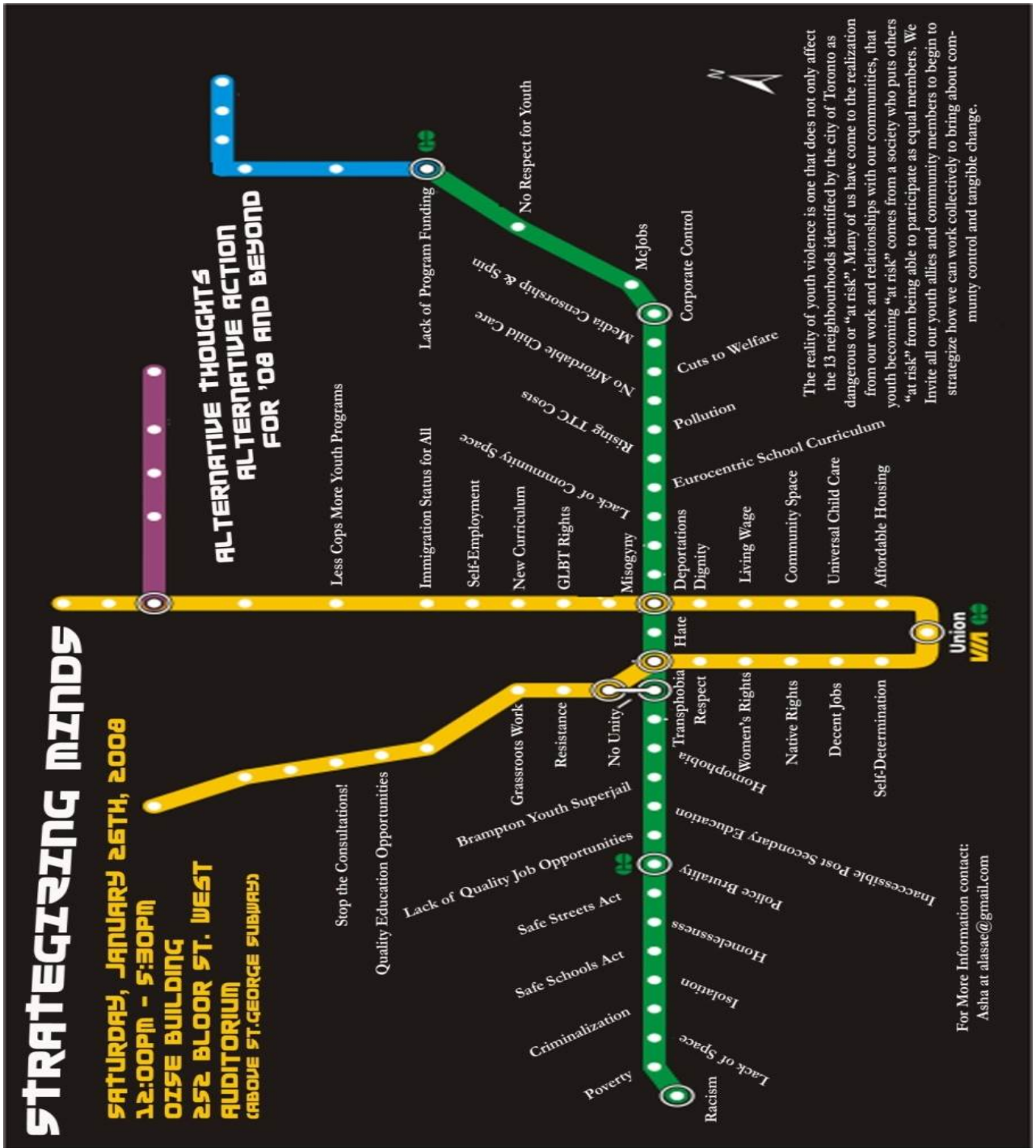


Figure 2: Community Organizing in the City

source: Grassroots Youth Collaborative, (Abebe and Fortier, 2008).

DRAWING INSIGHTS FROM THE FRONTLINES: RESEARCH DESIGN AND METHODS

4.1: INTRODUCTION

This chapter provides an overview of the research strategies used to explore the relationships between welfare state withdrawal, funding practices, and experiences of stress, burnout and vicarious trauma in frontline community work. Using a qualitative research approach, this research has drawn on insights from frontline community organizers in Toronto who have identified vicarious trauma and burnout as critical and often acknowledged issues that arise in community-based work (see FPYN, 2009; Adebé and Fortier, 2008). This research has focussed on strategies and supports that frontline workers and community organizers use to mitigate stress, burnout and vicarious trauma in their work. It further examined the role funders can play in improving the health and wellness of frontline community organizers, while operating within the context of neoliberal restructuring and welfare state withdrawal.

4.2 RESEARCH DESIGN

This research employed qualitative methods in human geography, drawing on principals of community-based research. Community-based research is described as “*research that is conducted by, with, or for communities (e.g., with civic, grassroots, or worker groups throughout civil society)*” (Sclove, Scammell, and Holland, 1998: 1). Community-based research and participatory action research build into the research framework a commitment to supporting positive change, improving communities and grounding the research in community relevance. As described by the Loka Institute (2013):

In communities, we are families, neighbors, and citizens, who recognize the necessity of sharing power and sharing responsibility. To give communities a strong voice in science and technology policy is to refocus science and technology on the most urgent needs of our families, neighbors, and fellow citizens. That can greatly strengthen communities and also breathe new compassion, creativity, and responsibility into research, science, and technology.

In designing this research, there has been a commitment to focusing on uncovering both conceptual implications of the downloading of services to communities, as well as practical recommendations that funding institutions can implement to better support health and wellness in frontline community organizers.

To do so, the research questions and overall research focus was informed by frontline community organizers experiences through preliminary pre-research consultations with several individuals active in the field. It also responded to recommendations within community-based publications for increased exploration of frontline community organizers experiences of stress, burnout and vicarious trauma (FPYN 2009). This research project has been designed to build on bodies of community research and evaluation that speak to frontline community organizers experiences of stress, burnout and vicarious trauma, and explore the broader contexts that contribute to these experiences. A focus on strategies and supports that are working to address stress and burnout, as well as recommendations for funders for how they could promote health and wellness in frontline community organizers was identified during preliminary consultations as a useful contribution to the field. Further, this research was informed by principals of participatory action research in that I have committed to translating research findings in tangible and accessible ways. To date, I have conducted two workshops related to community care for frontline community organizers. In my professional capacity, I have posted a discussion piece about the importance of embedding community care in community-based work geared at sparking discussion with other funders and will continue to create opportunities to further discussion on these issues (see Appendix H).

This research is further informed by principals in Appreciative Inquiry (AI), although it has not followed a traditional AI process. AI is an action research methodology that focuses on identifying what is having a positive impact within a particular community or context, envisioning what could be, and then working to develop strategies to promote positive change. Specifically, this research has drawn from critical appreciative inquiry, which incorporates critical theory into appreciative inquiry to allow for the exploration of challenges and struggles, with the ultimate aim of producing emancipatory research (Grant and Humphries, 2006). In addition, AI has been incorporated into this research as a preventative design strategy. It is important to acknowledge

that the nature of this research project has the potential to elicit deeply personal reflections on experiences of stress, burnout and vicarious trauma. Specifically, this research has focussed on what strategies and supports frontline community organizers are using to address stress, burnout and vicarious trauma. By focusing on strategies that are working, an AI principal, research participants were not asked questions regarding personal experiences of trauma, as FPYN has already amassed significant data that points to this being a critical issue (FPYN, 2009). In this way, people were not asked to relive their experiences of stress and burnout, or to share experiences that are already documented. Instead, research participants were given space to vision what could make these experiences better, with a specific interest in the role funders could play in supporting their health and wellness.

4.3 RESEARCH METHODS

This research grounds the conceptual frameworks outlined in Chapter Two in the lived experiences of frontline community organizers. It did so through in-depth key informant interviews and focus group/community consultations.

4.3.1: Key Informant Interviews and Community Consultations

Key informant interviews and focus groups are a common method in human geography research (Winchester, 2010). This approach was adopted to help reveal patterns and experiences that are not widely documented. It was also the most direct way to explore whether my own observations working in the field resonated with other people's experiences. Interviews and community consultations/focus groups were conducted with 19 frontline community organizers from April to September 2012. Frontline community organizers were recruited through professional networks including funding networks, and grassroots community networks (eg. Frontline Partners with Youth Network). Some snowball recruitment was also used wherein a primary contact identified other people within their organization or networks who would be interested in participating in this research.

In conducting research on people's experiences of stress and burnout, Mann-Feder and Savicki (2003:343) observed that: "*A major consideration for burnout research is that participants be actually functioning in helping professions because it is not possible to conduct simulation studies in this area.*" As such, research participants were recruited based on two criteria: they had experience working in paid or unpaid capacities as community organizers and frontline workers in Toronto; and they were already reflecting on the research content to some degree prior to the interviews/consultations. The rationale for the second criteria was to help safeguard against re-traumatizing or triggering participants because they were already prepared to discuss the content.

Prior to the interviews and consultations, research participants were circulated a short report that outlined research assumptions (see Appendix A). During the interviews and consultations, research participants were asked to share strategies they have used to mitigate stress, burnout and vicarious trauma. They were further asked to share recommendations for how funders, social service institutions and policy makers could improve the health and wellness of frontline community organizers (see Appendix B for research questions). In total, 2 consultations/focus groups and 7 one-on-one interviews were conducted. Interviews lasted 45-60 minutes and consultations spanned approximately 2 hours. In-depth notes were taken that included verbatim quotes. These were circulated to the research participants for review and approval prior to beginning data analysis.

To ensure privacy, all research participants' names and affiliations were kept confidential. In the case of the focus groups/consultations, it was not possible to offer anonymity within the group. Participants were asked not to share any revealing information about the discussion externally. The transcribed notes circulated to research participants for approval also included examples of generic descriptors that would be used to attribute the information. In this way, research participants could see how their information would be identified. No concerns were identified by research participants.

4.3.2: Research Participant Characteristics

The common characteristic that research participants shared was that they identified as community organizers or being involved in community-based, grassroots organizing in Toronto. All participants had experiences working with young people who experience different barriers or supporting frontline workers who work with marginalized youth. The majority of research participants had experiences running grassroots projects and some had experiences starting up grassroots organizations. The majority of participants had experiences using arts-based strategies or worked for organizations that use the arts as a community development tool. In addition, the majority of research participants were from racialized communities, and some clearly identified using their own lived experiences to inform project development. It is unclear how many research participants live in the communities in which they work, although it is likely that some participants do. Research participants ranged in age and cultural backgrounds. Of the 19 research participants, 5 were male and 14 were female.

4.3.3 Study Area

As described in Chapter Three, Toronto offers a significant learning ground for this research. The municipal government and its partners (including the United Way and the Province of Ontario) are in the midst of implementing widespread strategies to improve the health of the '13 priority neighbourhoods.' This regulatory intervention is facilitating increased investments into these communities, though often through precarious, short-term funding strategies. In response to and also predating these regulatory interventions, Toronto has seen a very mobilized and active grassroots, especially amongst youth-led initiatives, that seek to respond to the immediate needs of communities while advocating for systemic changes (see the Grassroots Youth Collaborative; Frontline Partners with Youth Network). This has provided significant lived knowledge and community practice on which this research builds.

4.3.4: Data Analysis

This research drew primarily on oral accounts through interviews and focus groups, with some textual analysis. This involved thematic analysis of community research including

publications by Frontline Partners with Youth Network and the Grassroots Youth Collaborative to inform the scope and questions for primary data collection. This analysis helped identify common themes and research gaps that key informant interviews could help to fill. For example, FPYN's (2009) report *Frontline Systems of Support* outlined frontline experience of stress and burnout, while GYC's (Adebe and Fortier, 2008) report *Rooted in Action* offered critiques of regulatory frameworks that focus on targeted neighbourhood investment approaches.

To identify key themes and guide data analysis, this research employed grounded theory, whereby priorities and findings were derived from what research participants shared (Berg, 2004). Data was analyzed in an ongoing fashion to see what themes emerged. This enabled some adaption and flexibility between the initial research design and actual interview process. For example, the interview category related to 'questions frontline community organizers would ask their funders' was added to subsequent interviews because it arose as an area of interest in the first community consultation.

The findings from key informant interviews and consultations were organized under four broad categories based on the research questions. These included:

- *Context*: reflections on the social, economic, political, community and personal contexts that have shaped frontline community work
- *Strategies*: insights into strategies and supports frontline community organizers have used to address stress, burnout and vicarious trauma
- *Recommendations*: recommendations for how funders, social service organizations and policy makers could invest in health and wellness in frontline community work
- *Questions*: questions frontline community organizers had for their funders related to issues and themes raised by this research project

Findings were further subcoded and organized based on common themes and unique insights. The result of this analysis is presented in Chapters Five, Six and Seven.

4.4: RESEARCHER POSITIONALITY

What are the opportunities and limitations of working in the field of philanthropy while being critical of how funding discourses can shape individual and community experiences? What does it mean to be hopeful that within the unequal distributions of power and resources, funders can be engaged to change systems that funding practices help perpetuate? These questions are intimately tied up in my personal and social positionality.

As a researcher, I play multiple roles in the communities in which this research is situated. While I have experience doing frontline community work as a volunteer and can relate to some of the experiences shared by research participants, I have always had the ability to 'leave my work behind' in the sense of not living in the community in which I work or being economically dependent on frontline work. I currently work with a private philanthropic foundation, managing a grant program that supports grassroots social change projects in Toronto and surrounding regions. As a result, I know many of the participants involved in this research through my professional networks. I see firsthand the impacts funders have on shaping discourse in ways that emphasize certain priorities and omit others, and how this impact how people feel they can describe the world around them. As the one who delivers devastating news to a group that they did not receive funding support, I see how changes in funding priorities create major gaps and challenges for community organizers. It is important to note that I am deeply embedded in philanthropy and funding practices in ways that can shape and limit my interpretation of research findings.

Trauma is a highly contested concept, often imposed on people and their experiences in ways that stigmatize and pathologize them. While I am not seeking to impose labels such as traumatized or burnt-out on frontline community organizers, my social and vocational position as a funder can have this unintended outcome. The reason this research has used the language of trauma, vicarious trauma and burnout is because my colleagues working in their communities described their experiences in these terms. The term 'vicarious trauma' came to me through grantees who shared the personal tolls projects were taking on them and their frustrations at feeling unable to fundamentally change the community and social conditions that the young people they support faced. I highlight this because I do not use this language as a way to

diagnosis or to compartmentalize these experiences, but to echo and honour the language that community stakeholders have used.

In addition to my professional positionality, I also benefit from personal privileges. I am a white, well-educated or at least credentialized woman that was raised in an affluent neighbourhood in downtown Toronto. I have not lived in systemically marginalized and racialized communities nor do I confront systemic and interpersonal racism and classism as many of my colleagues and community organizers involved in this research do. I believe that research is an intervention in the world around us and that by extension all research is activist in nature, or that it is certainly not benign. I believe in being an ally: *“someone who advocates for and supports members of a community other than their own. Reaching across differences to achieve mutual goals”* (Gender Equity Resource Centre, 2013) and seek to embody this through my personal and professional commitments.

4.5 ETHICAL TENSIONS & CONSIDERATIONS

4.5.1: Who benefits?

Often, communities feel over-researched or that research findings are inaccessible or lack community relevance. From the onset, it has been a paramount priority to ensure that this research contributes to community organizing and funding practice. It has also been important that the research is actionable and useful to the communities and stakeholders working to promote community change, so that the net benefit does not rest with me as the researcher. Ensuring this outcome continues to be an ongoing process. To date, it has included facilitating two collaborative workshops for frontline community organizers that explored community care strategies and considerations when developing community-based projects. In the future, I will be convening funder colleagues in my professional capacity to discuss research findings and explore recommendations for how this can impact practice.

4.5.2: Avoiding Retraumatizing

As outlined in the research design, particular attention has been given to adopting research methods that mitigate stress for research participants. This has included developing research questions that would not be likely to trigger participants around particular memories or experiences; or ask them to share personal experiences of stress, burnout and vicarious trauma when it was not necessary to inform this research project. As a preventative measure, I also ensured that participants knew about groups like FPYN and the supports they provide to frontline community organizers experiencing stress, burnout and vicarious trauma.

4.5.3: Ensuring Open Participation

Because I play multiple roles in the community in which this research is situated, it has been critically important that no one felt compelled to participate because of my professional affiliations. In some instances the organization I work for has also provided funding to projects that research participants have been involved with. In the recruitment and consent process, it was clearly stated that participation in this research would have no impact on their work with me in my professional capacity (see Appendix C for participant recruitment information and Appendix D for informed consent form).

4.6: EMPIRICAL FINDINGS

The following chapters outline the empirical findings of this research. Chapter Five offers insights into the context shaping frontline community organizers experiences; Chapter Six describes strategies and supports that have helped improve health and wellness in frontline community organizers in Toronto; and Chapter Seven critically engages with whether funders can support systemic change while operating within the context of welfare state withdrawal, and recommendations frontline community organizers have for how their funders can be invested in their health and wellness.

THE CURRENCY OF CARING IN PRACTICE: INSIGHTS FROM THE FRONTLINES OF WELFARE STATE WITHDRAWAL

5.1 INTRODUCTION

Set against the backdrop of welfare state withdrawal, this research argues that neoliberalism contributes to an increased localization of systemic issues within particular communities and neighbourhoods, while also placing the onus on individuals to address community-based issues. In Toronto, this has been operationalized through a targeted neighbourhood framework focussed on 13 neighbourhoods deemed high priority (see Chapter Two and Chapter Three). While the literature review and contextual review provided a broad overview of the landscape of community organizing in Toronto, it is important to ground this analysis in the insights of frontline community organizers to ensure that it resonates with the lived experiences of those at the frontlines of welfare state withdrawal.

When asked to describe what would enable better health and wellness for frontline community organizers, research participants often prefaced their responses with insights into the challenges they have faced in doing their work. This included structural and systemic barriers that shape and restrict their personal attempts to improve health, wellness and work cultures. This chapter synthesizes frontline community organizers' perspectives on the social, political, organizational and personal contexts that have contributed to stress and burnout in community-based work. These insights encompass how assumptions that frontline community organizers will contribute above and beyond because they care are reinforced by funders and the voluntary sector, while also internalized by frontline community organizers. In addition, this chapter explores frontline community organizers' perspectives on how welfare state withdrawal, the Non-Profit Industrial Complex, funding dynamics and unhealthy organizational environments impact their health and wellness.

5.2. REVISITING THE CURRENCY OF CARING

This research argues that neoliberalism is subsidized by a currency of caring, whereby it is assumed that frontline community organizers will fill the gaps left by welfare state withdrawal, despite the personal tolls it can take on them, because they care about their communities. The expectation that people will provide services and programs regardless of the precarious supports available to do so was identified in Chapter Two and Chapter Three as contributors to stress and burnout. As described, neoliberal discourses have normalized burnout by implying that people can and should be self-sufficient while at the same time responsible for the wellbeing of their communities, in a context of reduced services and precarious funding. An overall lack of recognition that frontline community organizers experience stress and burnout by working in this context was described by research participants: *“The importance of public recognition that community organizers and community artists experience stress, burnout and vicarious trauma is so important” (community consultation participant).*

Further, frontline community organizers described how stress, burnout and trauma have been treated as something they signed up for by becoming involved in community-based work:

There is an assumption that ‘of course frontline work is a burnout job and that frontline workers assume stress as part of their role’. This assumption is a set up for frontline workers as it then falls on them to deal with what is seen as part of the job. And an inability to do so is seen as the individual’s shortcoming (community consultation participants).

The negative experiences of frontline community organizers have been treated as their own individual issue as opposed to embedded in and symptomatic of downloaded community services and neoliberal policies that have increased the pressure on community to respond to service and program gaps. As one community organizer and founder of a youth-led group shared:

The trauma’s we were managing are vicarious because of what is coming up in the community. People being shot, struggling on social welfare, someone’s house burning down. Things happen to people in life, but for people who don’t have a wider social support network, questions like: ‘how do we help people?’ ‘Where do we draw a line?’ The personal relationships we have developed with community members in times of trouble means you can’t just say ‘no we can’t help’ and step outside of your job.

The acceptance of stress and burnout are pervasive in neoliberal discourses and have also infused organizational cultures, public perception of community work, and been further internalized by frontline community organizers. By this I mean that research participants shared that family, friends, employers and other frontline community organizers accepted that people involved in community work should accept that they feel stressed and burnout. However, as the above quote described, frontline community organizers were attuned to structural and systemic issues facing their communities that create conditions of stress and trauma. In addition, frontline community organizers described feeling as though they have to be available to their communities all the time as there were not necessarily other people or resources that their stakeholders could turn to. Assuming that this work is 'voluntary', as Chapter 2 discussed discounts the often essential roles frontline community organizers play in supporting their communities and meeting community needs. These pressures can be internalized, as frontline community organizers described feeling compelled to continue to be there for residents, young people and neighbourhoods who rely on them despite of the negative impacts this can have on their own health and wellness.

5.2.1 Embedded in the Currency of Caring

The reality that many frontline community organizers are deeply invested in the communities and people they support, this research argues, is an externality in voluntary sector that enables welfare state withdrawal to function. Research participants described how personal investments of time, money and energy are assumed by their funders and employers to be inputs frontline community organizers can willingly make. In addition, the idea of personal sacrifice in order to provide care is seen as a reason for why people go into this work:

You have people entering the field who are motivated for reasons other than financial. They are typically paid less. They care. There are huge gaps between what the needs are and what is able to be provided. The frontline worker sits at the intersection of this. Taking on vicarious trauma, not eating well, not being able to care for yourself is part of this landscape“(consultation participant).

Frontline community organizers interviewed for this research reflected on how doing community work required them to be personally invested in the community, often demanding things that fall outside someone's formal responsibilities. For example, the founder of a youth-

led group described how in the voluntary sector, people are expected to put the organization's livelihood ahead of their own financial stability:

We were doing everything we could for the organization's livelihood. This wasn't a realistic individual livelihood. When it came time to work through transition plans, there was a hope to create something that is sustainable for others, that they (people coming into take over founders roles) wouldn't have to work 70 hours a week for low pay. What ended up happening for us, was in order to keep a staff together we stopped paying ourselves and continued to do the work. The organization wasn't robust enough to pay people properly.

In addition, research participants shared that because frontline community organizers are often invested in promoting positive social change, it is somehow accepted that they will be under compensated for their work. As one community organizer reflected:

My skills and the job that I'm doing are to fill gaps and to build on that. When I describe what I do, I describe myself as a coordinator and producer. People interpret it as being involved in NGO, volunteer, community stuff. People interpret it as 'you do really good work, you don't get paid a lot.'

The accepted precariousness and undervaluing of community work was echoed by participants in a community consultation that shared: "*Frontline workers are often seen as employed people. Employment has certain assumptions about capacity. What isn't recognized is the precarious, unstable nature of most frontline employment opportunities or that many frontline workers are minimally employed or not.*" These observations reinforce the critiques raised in Chapter Two around how welfare state withdrawal is subsidized by people who care, as those involved in community work are often framed as volunteers which imply that they are generating their livelihoods elsewhere. It also obscures that these are services that would have had to be paid in another context.

Ultimately, frontline community organizers interviewed for this research described feeling frustrated because they do care and are committed to this work despite its impacts on their own personal sense of security. The perception that frontline community organizers should accept the precariousness of their positions because their work is perceived to be about more than just money was described as an underlying cause of stress and burnout for frontline community workers: "*You begin to feel like you are being abused when you are not able to make a liveable wage. You're getting it from all sides. You hit a breaking point*" (community organizer and founder of a youth-led group). Research participants described the inability to secure salary

funding and a general public perception that people do this work out of love and commitment as reinforcing and rationalizing the lack of stability and support afforded them.

5.2.2 Hero Narratives

As Chapter Two discussed, neoliberalism has led to a marked shift to the reliance on individuals to provide community supports (see Rose, 1999; Defillipis, Shragge and Fisher, 2006). Drawing from the research findings, there are two seemingly conflicted identities imposed on frontline community organizers who provide these services. On the one hand, frontline community organizers are treated by some as heroes and anomalies, people rising above their communities and circumstances to engage in positive change efforts. On the other hand, frontline community organizers often occupy the most precarious positions within community-based organizations and can be treated as easily replaceable workers. Throughout the interviews and consultations, frontline community organizers described how they and their colleagues are treated as ‘heroes.’ This was related to how frontline community organizers are seen as willing to sacrifice personal stability and personal gain in order to do community work. In addition, frontline community organizers can be treated as morally superior for being willing to endure these personal sacrifices. As one community organizer described:

You can’t blame people for having ego when they are so undervalued in so many crucial ways. There is an attitude of ‘watch me do this’. We love what we are doing, we believe in what we are doing. Outside of our circle of peer there is very little recognition. Sometimes this attitude is all we have, a sense that “we make this out of nothing.

Frontline community organizers also reflected on how hero narratives have perpetuated conditions of stress and burnout because they are treated as though they are different than the average person and therefore able to bear stresses that others cannot. The assumption that people involved in community work are immune to the stresses facing their communities or better able to handle them was described by Goodleaf and Gabriel (2009) in their research with Aboriginal frontline workers (see Chapter Two). Challenging these narratives was described as an essential role that groups like Frontline Partners with Youth Network can play:

For FPYN and other support systems, it is important to validate these feelings and experiences, and to name the implications of hero narratives; or that frontline

workers are assumed to be able to cope with things others can't, over and over again. This is really powerful (community consultation participants).

Some research participants identified that a repercussion of these hero narratives is that it privileges the value of the individual over the value of the community. Within this context, there is a sense that the community did not contribute to creating the 'hero,' but that the person developed despite of the community. As one community organizer described:

The narrative and projection of the 'strong black women' is pervasive in stressed and marginalized communities as well as assumed by dominant culture. It has significant implications for how the community and non-profit sector organizes itself and what it means to ask for help in that context. It is a bad marriage between the mainstream and the black community as black women are treated as the source of creating collective community, without recognition of the role community plays in being a source of support for them.

Consultation participants further described how helping activities are happening all the time in communities under stress. These communities can then bump up against neoliberal discourses that rely on 'heroes' as the mode of addressing community issues, disregarding the resilience and strength found in systemically marginalized communities.

In addition, in community-based work, people are often drawing from their own lived experiences to inform the development of projects and strategies. The assumption that because you have lived through a traumatic experience means you have the skills and confidence to support others to do so was described by one research participant as pervasive in community-based work: *"There's an assumption that you know how to do it. A perception that some people are the superstars."* She further described how trauma survivors can become public figures who are thrown in to positions of working with other community members often without receiving any structured supports or training:

People who are deskilled are hired into frontline positions because they are survivors. They are survivors of violence and trauma who speak out early as a way to survive. They are hired because they are perceived to be healed. There isn't training for how to actually do this work.

Treating some people as 'healed' and making that their credential can place immense pressure on them present themselves as put together, especially as the nature of the work means they can confront extremely unstable and precarious situations that most people would have difficulty handling. It does not recognize that people who experience trauma are not abnormal in their

reactions to traumatizing events, but are attuned to realities that may be hidden to others (Burstow, 2004).

The expectations implied in 'hero' narratives are that people can actually address all the issues facing their communities. People working in communities are pressured to be able to handle everything thrown. If they find that they are unable to do so, it can be treated and internalized as their own shortcoming, or indicative that they are perhaps not one of the 'heros' in this work. This reinforces the individualization of stress and burnout, as "*people are not able to ask for help because they have to pretend they know everything.*" (community consultation participant). This has created a set up for frontline community organizers because as neoliberal critiques described in Chapter Two highlighted, the dominant form of investing in short-term projects and through targeted neighbourhoods may address infrastructure gaps, but will not sufficiently promote systemic changes (see Bauder, 2002; Cowen and Parlette, 2011).

5.3 SYSTEMIC CHALLENGES AT THE FRONTLINES OF DOWNLOADED SERVICES

A marked feature of neoliberalism is how it has supported the devolution of services and responsibilities from the state to communities (Milligan 2007; Ilcan and Basok, 2004). Across interviews and consultations, frontline community organizers acknowledged systemic issues facing the communities they work in as contributing to their own frustration, stress and burnout. These included how inadequate social assistance, unstable housing, and precarious employment created instability and crisis in the lives of the stakeholders frontline community organizers support. As consultation participants working with street involved young people shared: "*Obvious things are the systemic issues outside of [our organization]. For example, OW⁹ is a small amount of money, special diet supplement is small. All the things that we know could help a person flourish in society aren't there.*" These situations contributed to frontline community organizers feeling both confined by the systems in which they work and that the systems themselves were not designed to help the communities they work with. This was a prevalent frustration that research participants found contributed to their own feelings of stress

⁹ OW refers to Ontario Works. Ontario Works is the government of Ontario's social assistance program.

and burnout as despite their efforts to support them, their communities have continued to face real barriers to self-sufficiency and self-determination.

Throughout the interviews, frontline community organizers acknowledged the need to go beyond programs and services to address the systemic barriers facing the communities they work with. As one coordinator involved in developing programs for frontline workers reflected:

If you don't change policies and practices like increasing health care for low income families, increasing caregiving for single mothers, more instant help for youth who experience substance abuse and mental health issues, developing better integration processes for newcomers, creating mechanisms so that boards and leadership within organizations reflect the racial and cultural diversity of our communities, these will be forever issues.

In addition to feeling frustrated by the systemic barriers that impede their work, frontline community organizers described how they can feel complicit in maintaining these systems. This was most clearly articulated by a community organizer that works with street involved young people who drew comparisons between the work they are involved in and critiques of other social movements:

Systemically we have to be careful of what we are doing, and talk about the systemic issues. When you look at movements like the movement to end violence against women, there was a push to develop programs that support women to develop their assertiveness. But just teaching them to be more assertive is very victim blaming if we are not doing systems change work.

She drew comparisons to programs and services for homeless and insecurely housed youth that individualize the challenges these youth face and make them the source of their own struggles.

Several research participants echoed the need to be engaged in systemic level advocacy, and to work to change policies and practices that contribute to social exclusion, and marginalization in communities. One community organizer critiqued the entire voluntary sector as perpetuating conditions of marginalization and oppression: *"Our sector is hypocritical. If we lived in a balanced society, there would be no need for initiatives like ours?"* He further described how maintaining the status quo by not working towards systemic transformation props up the system: *"If you don't have systemic transformation, then it's the perpetuation of poverty. Without systemic transformation, nothing is changing. We don't see a lot of systemic*

transformation, and the industry of poverty is getting bigger.” For research participants, working within this context contributed to experiences of stress, burnout and vicarious trauma as they described feeling limited in their ability to promote more transformative action as they ultimately faced the pressures to respond to the urgent needs of their communities.

The limitations and restrictions of working within neoliberal funding and political frameworks, although rarely explicitly named as such by research participants, were palpable across the interviews. There was a sense of frustration and feeling overwhelmed at working to change the system, while operating within it. As one community organizer shared: *“I’m feeling like I can handle this, but then it’s just too much. The life is big, the work I have to do is just too much.”* While research participants recognized that structural and systemic issues contributed to stress and burnout, there was also the reality that on the ground, the onus is on them to do more in their communities in order to see positive action happen.

5.4 FUNDING DYNAMICS

5.4.1 Neighbourhood Effects Discourses in Practice

As community organizers in Toronto, many research participants described the impacts of local policy frameworks such as the ‘Priority Neighbourhoods’ on the individuals and communities in which they work. Specifically, some research participants identified how funding strategies have led to more short-term projects in marginalized communities. This in turn has meant more precariously employed residents and community workers have been running these projects: *“Priority neighbourhood language has really changed the ways that programs are funded. These neighbourhoods now have more freelance workers than they have had historically”* (community artists and organizer). In addition, some research participants described how the focus on particular neighbourhoods has made it more challenging to look at the needs of residents outside these borders. Frontline community organizers described how marginalization and social exclusion are more universal than localized: *“what does it mean to recognize that all people need certain things like safe space, public space, places to go to enjoy each other. Unintended consequences did not get to be talked about fully”* (community organizer). Further, community consultation participants wondered how the policy and

community landscape would be different if things were not broken up into neighbourhood-based approaches: *“What does it mean if we are talking about Toronto and not certain neighbourhoods?”* (community consultation participant). These reflections highlighted some of the tensions raised in critiques of targeted neighbourhood investment approaches that have placed the onus on infrastructure investments in particular neighbourhoods as a solution to widespread marginalization and social exclusion. As research participants described, these strategies have the unintended outcome of creating short-term projects that can then become dependent on voluntary efforts or they cease all together when the funding ends. In addition, neighbourhood-based approaches have made it difficult to address the underlying systemic issues that are not generated within particular communities.

Reflecting on the impact of funding mandates on communities, research participants described how difficult it can be to work outside of ‘priority neighbourhoods’ discourse in Toronto as it is ingrained in local funding strategies and shades community-based work in the city:

Conversations with funders shape groups. Whatever the funder is emphasizing is what the group will focus on or continue until they realize this isn’t the way you have to operate. They aren’t going to challenge it. They will play by the rules, because they don’t know that they can not do this. For example, being told to only hire staff as contract staff because it’s a project; using a priority neighbourhood lens, seeing things as neighbourhood based because it’s the way funding structures it. You may not think to do an integrated approach. It makes you think you have to say that you’re working in specific communities, even if you are working with a community that needs it.

This participant and others interviewed described how regulatory frameworks like the Priority Neighbourhoods have shaped how groups develop their projects, as it is increasingly difficult to find resources if projects do not meet the Priority Neighbourhood criteria. This has made it challenging for groups to secure funding for work outside these geographies.

5.4.2: Bursting Funding Bubbles

For community organizers in Toronto, especially young people and those working with youth, there was a significant influx of project-based funding through the Youth Challenge Fund(YCF) as described in Chapter Three. While an influx of funding may not intuitively be seen as a cause of stress and burnout for frontline community organizers, short-term project-based

funding enabled new leadership positions in communities to develop and these same positions became precarious when the funding ended. For example, one community artists shared that with the emergence of funding opportunities people could suddenly do work that was inspiring to them, but that they did not necessarily have the full spectrum of skills to execute:

Funding opportunities for young people and for artists to do work with young people has meant that more people have been able to launch or run a project...With that amount of work and that amount of people learning as they go, with no structures to rely on, it's always going to be too much. All the wellness and selfcare can only be useful if people are working manageable jobs.

She was clear that a key concern was that young people launching these projects did not anticipate the breadth of personal issues that can come up unexpectedly in their projects and that this potential was not foreseen or acknowledged by their funders.

In addition, an issue with sudden influxes of funding is that many frontline community organizers did not and could not have recognized that these opportunities were a time-limited community investment strategy. As a community artist and youth organizer reflected:

The fact that people were getting all these grants. Grants always being approved. But then when grants stopped being approved, it was so confusing. It really messed me up...When it is taken away, there is part of you that feels so insulted and confused. You feel like everything that you have been building maybe wasn't as amazing as it was. For work that you believe in so much, it's really unsettling.

She further shared that, for her and many of her colleagues, it was a real shock to suddenly find that the support was no longer there: *"We were acting on our beliefs deep within us as human beings. Then we stopped getting supported. I've seen a lot of people go through serious depression in this work."* Another research participant echoed the personal toll of losing funding or being declined for funding: *"Regrouping when you are rejected by funders is a hard process. I remind myself and tell staff: it's really great work and someone is going to love it somewhere."* What is significant to highlight here is that many of these same community organizers scrambled and continued to run projects and programs without funding or with decreased funding levels because ultimately they saw the positive outcomes of their work and felt compelled and pressured to continue.

5.4.3: Lack of Core Support

Across the voluntary sector the shift to project-based funding and contracts has been accompanied by a decline in the availability of operating funding. The lack of core support can create a state of organizational precariousness that contributes to staff stress and burnout. For example, each year, the founder of a youth arts organization that works with street-involved youth, described how in the midst of programming and responding to community priorities, the organization has to fundraise significant amounts to sustain its operations:

Things are always coming up. We are needing to raise money to build space out and then in the middle of each year we have to raise a million dollars for next year's programs. It's really hard. I can't wait and dream for that benefactor.

In addition, research participants reflected on how limited funding opportunities and the onus on project-based funding fuelled competition between groups. As one community organizer reflected: *"There is a set up in funding, where people have to be seen as the ones doing it all. Groups are fighting for small scraps."* An administrator within a youth arts organization reflected on how hard it is for groups to collaborate when their own operations are not stable:

When groups feel insecure, it contributes to lack of trust and collaboration. Reducing the precariousness of individual organizations can strengthen the sector as a whole because people can share more and can invest more in helping new and emerging groups.

Frontline community organizers described how they often feel pressured to deliver unrealistic outcomes that are predetermined by their funders or by their employers, who are responding to pressures from funders. As one community artist described:

There are some activities where you can put the time in and it's ok because it will come to some clear fruition...for example cooking a meal. But in so much of this work, you don't get to see whether it comes to fruition. Finding a balance point with that is hard. It's a strain.

Research participants described how it can feel like they are responding to the realities on the ground in their communities and then needing to translate these into outcomes that will satisfy funder expectations. The pressure to effectively translate community needs into funder expectations was immense as research participants felt like they had to perpetually justify their work to their funders, while trying to maintain integrity in their programs. The founder of a youth arts organization that works with street-involved youth described the particular strains this places on management as they have to simultaneously ensure their frontline staff are supported

to do the work that needs to happen, while translating this into a narrative that their funders are willing to support:

There are differences between being manager and organizational director versus frontline. Managers stand in the gap of getting funds for the work and justifying the work to these external stakeholders, measuring it and at the same time making sure that the people doing the work on the ground are healthy and doing well.

Operating funding, research participant described, offered groups the ability to respond to needs as they come up and not feel pressured to perpetually justify their work to funders. Further, operating funding was described as a show of support and trust by their funders.

The impacts of neoliberal funding approaches were described across interviews and consultations. These mirrored some of the critiques raised in Chapter Two and Chapter Three about operating within the Non-Profit Industrial Complex and welfare state withdrawal. These insights included how short-term funding can create precarious community-based services and leadership positions that become dependent on voluntary efforts to be sustained. Further, research participants described an inability to address systemic issues within a targeted neighbourhood-based paradigm. In addition, frontline community organizers identified how discouraging and sometimes devastating it can be to go from receiving support to suddenly having none, as community organizers are not always cognizant of changing funding priorities or the short-term nature of these investments. These factors were identified as contributors to stress and burnout for frontline community organizers. In addition, the lack of operating support was identified as an underlying challenge facing community-based groups that impeded their ability to collaborate, respond to emerging and critical community issues and ultimately promote systemic change.

5.5 UNHEALTHY WORK ENVIRONMENTS

Frontline community organizers reflected on the unhealthy dynamics within community-based organizations that contributed to stress and burnout in their work. Many research participants described how managing these dynamics caused them more stress and frustration than working with their stakeholders and participants. Consultation participants identified how

within community-based organizations, frontline workers can confront tensions between doing the work they feel needs to happen based on community-identified needs and fitting into the organization's culture. Often, frontline workers, staff and volunteers of community-based organizations translate organizational policies in ways enabled more meaningful and accessible work to happen. This can create tension between frontline staff and management, as frontline community organizers felt as though they needed to protect their community stakeholders from the negative discourses and overbearing requirements. One community organizer and therapist reflected on how really effective youth work is often penalized because it does not fit within traditional organizational approaches. She argued that these models and discourses often criminalize young people or recreate oppressive dynamics:

I was fired from youth positions for challenging therapeutic narratives and how systems are built up for youth. There is not a lot of space within youth work to do this kind of challenging. There is an assumption that someone else will come in and take the job. Turn over is so high, workers are treated as disposable and the youth by extension are treated as disposable.

In addition, research participants described how organizational cultures can impede their ability to be open about their experiences of stress and burnout as they felt pressured to display a certain type of decorum: *"This is counter intuitive to how people deal with extreme stress, trauma and grief-where you are sometimes loud, cry, laugh. This range of human emotion is seen as unprofessional"* (community consultation participant).

The Frontline Partners with Youth Network described how frontline community organizers are often placed in positions where they need to protect the communities they work with from the organizational policies of their employers (2009). Research participants reiterated how funding practices contributed to this tension, as organizations displayed a heightened need to report outcomes to their funders, often requiring staff to collect information that was seen as intrusive and demeaning, or at the very least not relevant to measuring meaningful changes in the community. This can create conflicted accountability, whereby frontline community organizers felt like they were being split between the requirements of their funders and the actual needs of their communities. This tension was identified as an endemic form of stress, both between frontline workers and their employers; and between community organizers and their funders:

Working with funders can create bad dynamics, where organizations feel accountability to the funder and end up caring more about their backs than the

community's needs. Funders play into this by forcing division between communities, organizations serving communities and a conflicted sense of accountability to funders.

This was echoed by critiques of the NPIC as it was seen to create divisions between community-based organizations and the stakeholder they are mandated to serve. In addition, the increased onus on being accountable to funders was described in Chapter Two as contributing to increased distance between organizations and community priorities.

Research participants described how the strategies and mandates of community-based organizations are being restricted by their funders and limited by their perceived role as service deliverers. For example, research participants identified how community-based organizations fill a void by providing services that government no longer does:

The setup of organizations and the non-profit sector is increasingly as an agent of the state, of government. It takes care of people that the government doesn't care for or won't invest in. There is a need for organizations to look at this critically and be able to frame their expectations of frontline workers from there as well as framing their sense of responsibility to the community. If I understood my role through the lens of government constraints placed on the organization, it would have nuanced my role, helped me to locate myself in a broader social-political atmosphere (community consultation participant).

While research participants were attuned to working within the confines of neoliberalism, some identified how understanding the unspoken tensions in their organization related to how funding was shaping the culture of the organization would have helped them feel less confused and resentful of the organization was seemingly failing to meet community priorities. The need for increased transparency related to how organizations felt restricted by their funders was echoed by another community organizer who shared:

Understanding the expectations and constraints placed on organizations helps workers understand their roles better. Instead, the only time people feel informed about constraints is when the organization is under external stress/pressure and frontline workers are expected to change their practices or deliver on new outcomes without understanding where this directive is coming from.

While frontline community organizers acknowledged some of the barriers to operating within the context of welfare state withdrawal, they also highlighted the need for more dialogue on how this affects organizational environments and contributes to unhealthy workspaces. While spaces for open dialogue will not reduce the workloads and administrative burdens placed on

frontline community organizers, it would help increase transparency and shift the conversation to seeing how funding requirements imposed on community-based organizations can exacerbate stress and burnout in frontline community work.

5.6 CONCLUSIONS

Frontline community organizers offer important insights into neoliberalism as many of the challenges and issues raised by research participants reflected their firsthand experiences working at the frontlines of downloaded community services and welfare state withdrawal. Specifically, research participants offered insights into how their efforts subsidized welfare state withdrawal including how 'hero' narratives reinforced neoliberal citizenship discourse in ways that placed the onus on frontline community organizers to solve intractable social issues. In addition, frontline community organizers described systemic barriers to working within targeted neighbourhood investment frameworks including how these can result in short-term precarious leadership opportunities, made it challenging for communities outside specific neighbourhoods to receive investments and localized systemic issues within particular places. Throughout the interviews and consultations with frontline community organizers it was clear that research participants saw how funding institutions were implicated in shaping the day-to-day experiences of frontline workers, community organizers and volunteers. This included how funding requirements contributed to creating unhealthy organizational environments as organizations transferred unrealistic expectations to frontline community organizers. These insights offered firsthand reflections on operating within neoliberalism and how this exacerbates stress, burnout and trauma in frontline community based work.

The following chapter explores strategies and supports that have helped increase health and wellness among frontline community organizers while working within the context of welfare state withdrawal. In addition, Chapter Seven offers recommendations for how funders and other institutions can be invested in the health and wellness of frontline community organizers, and begin to transform the systems and processes that contribute to stress, burnout and trauma in community-based work.

TOWARDS HEALTHIER FRONTLINES: STRATEGIES AND SUPPORTS THAT ARE PROMOTING HEALTH AND WELLNESS AMONG FRONTLINE COMMUNITY ORGANIZERS

6.1 INTRODUCTION

As Chapter Five outlined, insights from frontline community organizers can help surface how individual experiences of stress, burnout and trauma are affected by broader systems. By interviewing frontline community organizers in Toronto, this research sought to gain their diverse perspectives on strategies and supports that have increased their health and wellness. This approach has focussed on uncovering opportunities within welfare state withdrawal to promote systemic change, both in terms of practical strategies and structural reform. This research argues that the health and wellness of frontline community organizers cannot be achieved in sustained ways without addressing the broader social, economic and political contexts that normalize and assume burnout in community-based work.

This chapter provides an overview of research participant reflections on supports and strategies that have contributed to an increased sense of health and wellness. This includes insights into strategies community-based organizations and funders have adopted that have had positive impacts on frontline community organizers, as well as their personal self-care strategies. In framing this analysis, it is important to highlight a concern raised by several research participants who have cautioned that discussing health and wellness can inadvertently place the onus on frontline community organizers to take better care of themselves without acknowledging the organizational and social contexts that contribute to these experiences: *“burnout and vicarious trauma are systemic, organizational, community and personal. It’s on us all to figure out what are the areas that help deal with the daily and personal stuff that comes up” (community organizer)*. As such, the recommendations below are not presented as solutions to welfare state withdrawal, but offer insights into how to promote healthier environments for frontline community organizers.

6.2: SEEING YOUR PERSONAL EXPERIENCES IN A BROADER CONTEXT

Frontline community organizers recruited for this research were already engaged in personal and sometimes collective efforts to address stress, burnout and vicarious trauma in frontline community work. These individuals often possessed an analysis of how underlying structures and systems have shaped the community and social contexts in which they work. This included acknowledging how systemic violence, racism and criminalization impact the institutions and communities they work with. Accessing critical discourse that enabled personal experiences of stress and burnout to be understood as something that other people go through and that is part of a system that overburdens people was described as a protective factor within several interviews and community consultations. For example, research participants described the importance of being able to ground their personal experiences in a broader context: *“The idea of being able to see yourself and that your work is bigger than the sea that you currently think you’re swimming in can enable people to connect to their spirit, feel less isolated and alone”* (community consultation participant). Through both formal strategies like training in anti-oppression and informal peer support networks, research participants described how being able to interpret their own experiences not as personal shortcomings, but as a symptom of broken systems and unhealthy work environments helped them cope with stress and burnout. As a consultation participant described:

Frontline workers are often swamped with the day to day contexts that they are working in. Having a support network that enables you to see a bigger picture and to be taken out of frontline work to be able to offer new context is extremely helpful.

Creating space to connect and exchange ideas with frontline community organizers, funders, people working across the voluntary sector and within government was consistently identified as a strategy that has helped frontline community organizers contextualize their personal experiences of stress, burnout and vicarious trauma. Generally, research participants identified how these experiences were not widely acknowledged as an outcome of frontline community work and they found the silence around these experiences contributed to increased stress because it individualized these experiences of burnout. One frontline worker who has worked for several community-based organizations reflected that: *“working in an organization re-traumatizes people because there is a perpetual expectation of silence and conformity, of not learning or seeing your daily experiences within a broader political context.”* In general, research

participants described how these collective spaces and opportunities to reflect and contextualize their experiences were not the norm within their workspaces, relationships with funders, or within the voluntary sector.

What these insights speak to in part is that neoliberal discourses can render burnout and stress personal shortcomings as opposed to symptomatic of untenable workloads and expectations placed on community-based organizations and frontline community organizers. These insights also highlight that while some frontline community organizers have developed a critical analysis of their experiences that has enabled them to see how their experience is related to systemic challenges facing their communities and the voluntary sector; and can be seen as an outcome of welfare state withdrawal; this was not seen as the norm for other frontline community organizers. Increasing spaces for these conversations to happen was recognized as an important first step in helping promote health and wellness for frontline community organizers. It was also seen as an important way to promote changes within funding organizations and policy makers as it would make visible the outcomes of welfare state withdrawal on the health and wellness of frontline community organizers.

6.3: FEELING INVESTED IN

*“Our messaging around nonprofits needs to change. We are ok to pay someone \$1 million to hit a ball, but we are not ok to pay for someone to go on vacation.”
(community consultation participant)*

The shift towards contracts and project-based supports endemic in welfare state withdrawal has contributed to organizational instability and precarious employment for frontline community organizers. In addition, neoliberal discourses have reinforced the notion that community services are the responsibilities of individual community members (see Chapter 2). In practice, this has meant that basic services are increasingly being delivered by community-based organizations, through voluntary efforts and precariously employed individuals. Throughout interviews, it was acknowledged that many work environments were unhealthy and the fact that people care deeply about their communities is sometimes exploited in community work. For example, some research participants described how it is assumed that they will work longer hours, receive little compensation, and be available 24/7 because they are invested in their work. In addition, many research participants described how the precarious, short-term

nature of their contracts and funding arrangements led to financial and personal insecurity: *“People are used to getting paid nothing and then have to keep adding on more projects and contracts to be able to basically survive. There is a need to ask for more, demand more, not just do everything for honorariums”* (community artist and community organizer). These were seen as contributing factors to stress and burnout in frontline community work.

Working in this context, frontline community organizers described how adequate remuneration and access to professional development opportunities were tangible strategies that reduced their stress and burnout. For example, community consultation participants described the positive impacts of having more financial security and healthcare benefits: *“A very practical thing that works well is having access to benefits. It really matters and it helps.”* These benefits included vacation time, access to trainings, access to extended healthcare. In addition, research participants who manage other staff described the positive impacts they saw when their staff could access professional development and other supports: *“We had budgets for professional development. This included using dollars and aeroplane miles. We wanted to invest in people’s development. People are happier when they feel they are learning and growing. We had always believed in investing in people”* (co-founder of a youth-led organization).

While research participants were clear that there are tangible things that their employers and funders could do to improve their material living conditions, they acknowledged that compensation alone would not eliminate stress and burnout in frontline community work. As one administrator in a youth arts organization put it: *“The organization might think that its investing in wellbeing by offering a job, but its more than employment. It’s about knowing the organization cares about you.”* The importance of personal and organizational values alignment was echoed during a community consultation: *“the identity of your organization and how that resonates with you in your everyday frontline work is so important.”* This was described by another consultation participant who shared that the organization they worked for:

Has a healthy relationship culture. There is a lot of give and a lot of love in the air here. It’s not always like that in organizations. I don’t know if it’s because it’s flatter, that people can speak to the work and have ownership over the space. It helps.

Feeling invested in and trusted by the organization to respond to community needs and priorities was described as a tangible example of values alignment: *“Having room to speak to the organizational values; having autonomy to make decisions based on my values. Being trusted that my values are in line with the organizations values”* (community consultation participant).

While feeling valued and respected by their employer was identified as a protective factor against stress and burnout, research participants went deeper in describing ways in which organizations could achieve this. For example, during a community consultation, creating space for creativity and spirituality was identified as intentional organizational practice used to promote wellness across the team: *“The role of imagination is part to reclaim our identities as humans, creationists, entrepreneurs. It sounds ethereal, but there is huge proof of it here. When people are nourished in their imagination they work better.”* The founder of a youth arts organization that works with street involved youth described how the organization promoted creativity as a team building exercise:

Last year, we spent a lot of time in the community garden. We called it a teaching garden and went there every week for 6 weeks while we were doing organizational and system change work. We would do portraits of plants and commune with plants. It didn't hold any other purpose except communing together. We would be there together and then we would go off for our days.

Another founder of a youth-led organization described how the organization tried to create space for health and healing: *“We organized ‘emotional Tuesday’s’. These were an opportunity to address vicarious trauma. People would share the highs and crashes... It was an opportunity to share with each other as a team.”* While the group saw positive benefits to these spaces, as more pressures were placed on the organization it became harder to maintain these spaces:

They were at first mocked, but then we all went into it and it was an opportunity to call each other out, cry together, laugh together, connect as people. It created a strong sense of solidarity and trust. We kept that together for two years, and then it fizzled off as stuff started getting harder. Maybe if we had kept them, we would have been stronger as a team to manage it.

In these instances, research participants recognized the importance of creating intentional space within an organization for staff to connect to one another and share their challenges and frustrations. This was seen as a way to both validate people's experiences and create greater support networks within and outside the work. In addition, frontline community

organizers identified how feeling as though organizational values are drawn from community priorities, as opposed to funder or government priorities contributed to their overall wellness. Community consultation participants described how this made them feel as though their personal sacrifices and the urgency of the work were recognized and valued:

As a frontline worker, when you are in an organization where the leadership is taking responsibility in naming systemic issues, a certain relaxation can happen on the frontline. There is a clearer context to the work and a sense that a certain responsibility is happening at the right level. Naming systemic issues helps frontline workers contextualize their work and roles. You can feel more belonging to these organizations and you believe in it. This enables frontline workers to not feel like they have split their loyalty between the organization and the community.

Further, research participants described how they became involved in community work because they believe in promoting social justice and social change. Working with organizations that acknowledged systemic and structural issues facing communities enabled frontline community organizers to be part of something bigger than their own efforts. However, the converse of this was described in some interviews, where research participants shared that frontline community organizers often felt they needed to protect the communities they work with from the organizations that are meant to serve them because of the ideologies or practices being employed. This has played out in community setting in ways where research participants described having to label or treat people as deficient, as opposed to seeing their experiences of indicative of broader social inequities. In response, some research participants described how adopting a gatekeeper role in order to protect their stakeholders from organizational ideologies, created added stress, isolation and feelings of alienation. This echoed some of the issues raised in Chapter Two and Chapter Three related to efforts to challenge social service models that treat people as victims, deficient or needing to be fixed.

Throughout the interviews, frontline community organizers described how feeling invested in by their employers contributed to their sense of health and wellness. This sense of investment goes beyond remuneration as frontline community organizers described the need for personal and organizational values alignment. In addition, feeling like the organization they worked with drew its mandate from the community it serves was identified as an important way to create greater sense of health across the organization. In these instances, frontline community organizers described how when the organization acknowledged the systemic issues

facing the communities they worked with, frontline community organizers felt less strain from their workspaces. While this did not address the day-to-day stresses endemic in community work, it did enable frontline community organizers to feel more supported, less isolated and part of something that can have long-term positive impacts. The argument being raised is that while better pay and more stable employment contributed to greater health and wellness in community-based work, research participants were clear that simply increasing wages would not lead to healthier work environments and less burnout. In fact, research participants reflected that how the organizations they worked with and the voluntary sector as a whole responded to the broader contexts affecting their communities was a key contributor to feeling stressed and burnt out or feeling empowered and encouraged in this work.

6.4 CREATING BOUNDARIES, WHILE BEING EMBEDDED IN YOUR COMMUNITY

Setting personal boundaries was an obvious, but challenging strategy identified for reducing stress and burnout in frontline community work. The ability to set and maintain boundaries was seen as a privilege not easily afforded to people who live in the communities in which they work and have been effective at their work because they shared lived experiences with the community members they are reaching. The increased onus on individuals to address personal and community problems under neoliberal discourse exacerbated the challenges in creating boundaries as if it is now expected that people will see not only to their own, but to their entire community's self-sufficiency, how can they effectively create boundaries? For example, one community organizer shared:

If you are working in your community, how do you shut it off? You go to the grocery store and bump into someone. You go to a party and you end up in all this drama when what you really want to do is have fun.

It is important to note that this challenge was not limited to geographical communities, but also social and cultural communities, where there was overlap between a person's community work and community life.

The pressures placed on frontline community organizers to set and manage their own boundaries, some research participants critiqued, was rooted in particular forms of 'helping' that

assumed a social, economic and geographical distance between those who are providing service and those who are receiving it:

Being rooted in medicine, nursing, counselling, it's historically very white, middle class. The idea of 'boundaries' assumes certain things. It is predicated on a type of colonial relationship, it's not so simple. You can't just turn your phone off at 5pm to make boundaries clear.

Research participants described having to be strict and diligent in establishing boundaries:

"Unless you are incredible strict with your boundaries, people will keep relying on you because you care. This can mean calls at all hours. It means you have to be so strict with boundaries."

In this way, the responsibility has fallen on them to create and maintain boundaries, a challenging and problematic strategy as it assumes frontline community organizers can and should distance themselves from their communities.

In addition, to even begin to think about health and wellness, a community organizer argued, people needed to be supported to slow down and say 'no.' She was referring specifically to funding opportunities and partnerships where people had unrealistic expectations of what could be delivered with the available supports:

Recognizing that there are lots of pressures that make things the way it is. There is always a fear of losing the opportunity of doing an amazing and needed project. We often don't have the ability to say it's not enough time, not enough money, to say that we can do 25 percent of it, but not 100 percent.

In this way, boundary setting extended beyond people and their communities and included setting boundaries with their funders and employers. The importance of creating boundaries and self-advocacy in this context was further described by a community organizer:

Being able to say no when you're being asked to take more on and you know you can't do it. Or wouldn't be able to do it without it taking too much from you. Stressing you out, burning you out or stretching you too thin.

Connected with saying "no," a community artist was clear that there also needs to be stronger reactions when funders and organizational partners have unrealistic expectations: *"We assume that the institution knows best, when they are often putting us into positions that compromise our work. For example when their timelines force us to spend out of pocket because we are waiting on cheques."*

While the challenges and barriers to setting boundaries were described in several interviews, research participants shared that even having conversations around the importance of boundaries and that it is ok to set them was powerful: *“Boundaries are really complex. If you are working and living in the community you are working, it’s really complex. It can’t just end at 5pm. Even dialogues around boundaries and workplace are important. Having that middle ground”* (community organizer). This recommended self-care strategy was acknowledged by research participants to be challenging to actualize: *“In spaces where community does get so close, where people live and work in the same place, people have to put up intentional boundaries. It’s hard”* (community organizer). While working to achieve personal boundaries, research participants identified the need to be honest about how difficult this was in practice, so that frontline community organizers did not end up feeling as though it was their own shortcoming that they found it difficult to maintain boundaries despite the need for them.

Some research participants expressed a clear caution around telling frontline community organizers to simply say ‘no’ and set boundaries, as the means by which self-care was actualized in community-based work. Research participants asserted that while they can find ways to say ‘no’, that does not change the underlying pressures they felt from their employers, funders and communities to continue to take on more. Many informants were quite honest about the barriers to being able to think about and invest in their own self-care. These barriers included the precariousness of their work, low wages, lack of benefits and the fact that the communities they work in are often facing acute and systemic crisis. A community artist and organizer described how unless other things let up in someone’s life, asking them to focus on their own health and wellness adds additional pressures on them: *“In this industry, sweat equity is assumed. It’s counted on that you will go above and beyond. Wellness is seen as just another thing we’re expected to do.”* Boundary setting, while a frequently described self-care strategy, was acknowledged to be extremely difficult to actualize. Promoting boundary setting can place the responsibility on frontline community organizers to manage stress and burnout without engaging funders, community-based organizations and others in strategizing how to create more realistic and healthy work environments.

6.5 CONNECTING TO THERAPISTS AND SOCIAL WORKERS

Connecting with therapists, counsellors and social workers was raised by some research participants as an important self-care strategy. However, the importance of working with the 'right' professionals, referring to those who integrate social justice and anti-oppression into their treatment approaches, was described. As one community organizer described: *"It seems kind of banda-aid, but being able to access counselor services would be really helpful. But there is a need to find the right people, people who understand what it is like, and can connect."*

However, the reality for many research participants interviewed was that they do not feel they and many of their colleagues have the benefits that would enable them to access these types of supports. As one community organizer shared:

There have been a couple times where I'm having nightmares from the pressure and intensity of everything. I found a counselor to talk to so that there was someone else who knew what was going on with me, while I was playing the role of counselor to others. All the while having to find money to pay for a counselor.

In addition, some research participants identified the need to incorporate therapeutic practices, tools and strategies into community-based work. One community organizer and therapist spoke specifically to how frontline community organizers running projects in their communities might not have any training or experiences handling the types of personal and interpersonal issues that can come out up:

There is a lot that artists can teach us about how to do better work. Good practice in therapy is through art. But artists need support around how to actually be involved in therapy and bring therapy tools into their practices. How do we build this into grants?

Another community organizer that supervises community artists described how bringing in a social worker to mentor their team created space for people to run through scenarios and ask questions on how best to deal with stressful situations: *"Having clarity puts their minds at ease, gives them confidence to know that they are doing the correct approach. Knowing that they are doing things right takes pressure off. Helps with stress"*. The benefit described included how having space to discuss the different issues that can come up helped frontline community organizers mitigate stress because it meant that they were not feeling alone in facing these issues and had strategies to draw on.

Throughout the interviews and consultations, frontline community organizers recognized the importance of drawing from therapy and social work best practices in order to build their capacity to address personal issues that they may not have anticipated in their projects and programs. Having more tools and skills to draw on were seen as a way to reduce stress as it increased the confidence of frontline community organizers to handle issues as they arose. However, recommendations to integrate social work and therapy modalities into frontline community organizing were prefaced with the need to incorporate a critical and systemic lens to the work, so as not to reinforce discourses that pathologized communities and individualized experiences of stress and trauma.

6.6 CONNECTING TO PEERS AND A COMMUNITY OF SUPPORT

In addition to accessing external counselling supports, some research participants described how connecting with peers around their experiences helped them cope with stress and burnout. For example, during a consultation, research participants referred to FPYN's work and how it enabled frontline community organizers to channel their personal experiences into collective action:

One strategy FPYN uses is naming things so that they are in the room (eg. explicitly naming constraints that people involved in frontline work are facing allows them to feel more relaxed in the space). FPYN is strategically placed to take risks, validate and bring attention to issues facing frontline workers that individual workers often don't feel they can name because they are vulnerable. FPYN deliberately and explicitly names constraints and realities facing frontline workers.

FPYN and other community networks were identified by research participants as spaces where critical dialogue that enabled frontline community organizers to understand their personal experiences of stress, burnout and trauma within broader contexts could happen. These spaces were seen as integral to addressing frontline community organizers' sense of isolation in experiencing stress, burnout and vicarious trauma by enabling them to be part of a community that has brought attention to the structural and systemic issues that create conditions that exacerbated stress and burnout in community-based work. Groups like FPYN were seen to provide a collective voice to these experiences in ways that could increase awareness amongst funders and community-based organizations of how their practices contributed to stress and burnout in frontline community work.

However, among research participants, some cautioned that sharing experiences with peers can have the unintended effect of keeping a person in ‘helping’ mode:

Peer-to-peer counselling can’t address everything. It can lead to mirroring, rescuing, where it builds off one another. People often have a sense of wanting to rescue others. In these spaces, it can inadvertently reinforce expectation that you are going to rescue them or rescue communities.

This caution speaks to how frontline community organizers can internalize their roles as caregivers in ways that make it difficult to be on the receiving end of support. The importance of not relegating self-care to yet another responsibility placed on frontline community organizers was raised, as it reinforced the expectation that they can and should address all the issues facing their communities, including the self-care of other frontline community organizers.

6.7 CONCLUSION: SELF CARE AS SYSTEMIC CHANGE

Across the interviews and consultations, frontline community organizers described that while there are tangible strategies that could promote greater health and wellness; addressing stress, burnout and vicarious trauma was not as simple as asking frontline community organizers to set boundaries or take on less work. Being able to contextualize personal experiences within a broader political context and being able to discuss self-care strategies like boundary setting and why they are important (if not near impossible to achieve) was seen to help frontline community organizers feel less alone in their challenges with stress and burnout. Further, feeling personal values alignment with the organizations they worked with helped frontline community organizers feel less stressed in their work. In addition, having access to training, peer-supports and professional supports were also described as contributing to increased health and wellness. Creating spaces to engage in critical dialogue about how personal experiences of stress and trauma are symptomatic of unhealthy work environments, and welfare state withdrawal were described as integral to supporting personal health and wellness in community-based work.

While offering examples of strategies and supports that helped mitigate stress and burnout, research participants cautioned that it was inappropriate for self-care to become seen

as another requirement placed on frontline community organizers. As one community organizer and artist put it:

It {self care} seems so obvious, but it's about having manageable workloads. In this work, people are always expected to take on more, to cram more into this box of work and life. The box can't always be bursting. You can't keep cramming more in. It's unrealistic and unfair to expect people to just cram health and wellness into an already crammed box.

In this sense, research participants were attuned to how conversations about health and wellness can be positioned and internalized as something people need to do better as opposed to a strategy that can happen in tandem with systemic change efforts. The health and wellness of frontline community organizers is an integral aspect of community work that often goes unseen by funders, community-based organizations and the state. However, the welfare of the people involved in implementing community-based projects is integral to the effectiveness of these initiatives and should be a priority to funders. The opportunities research participants saw for funders to be invested in their health and wellness will be discussed in greater detail in the following chapter.

WORKING WITH FUNDERS TO CHANGE THE SYSTEM? RECOMMENDATIONS AND CAUTIONS FROM FRONTLINE COMMUNITY ORGANIZERS

7.1 INTRODUCTION

“What constraints do funders face? What is getting in the way of working differently with communities?” (Community organizer)

What are the possibilities of addressing structural constraints that exacerbate stress, burnout and vicarious trauma in community-based work by working with funders? Can funders promote systemic change while being deeply embedded in the Non-Profit Industrial Complex and welfare state withdrawal? Broadly, this research has sought to identify how funders can be engaged in subverting systems they have helped perpetuate through the lens of investing in health and wellness. Within critiques of the NPIC are calls to reconcile direct service provision with advocacy efforts in ways that bring seemingly oppositional strategies together in pursuit of a common agenda (see Manazala and Space, 2008). Drawing on these insights, this research explores the potential for funders and community organizers to work towards both practical and structural changes to increase health and wellness in community-based work.

Throughout interviews and consultations, research participants were attuned to the power that funders carried in shaping the landscape of community-based work. Frontline community organizers had critical questions related to how funders, community-based organizations and frontline community organizers could work together towards social change, and whether this was possible. This chapter provides an overview of critiques frontline community organizers raised about how funding systems impact their work. It further explores recommendations frontline community organizers had for how funders could invest in health and wellness in frontline, community-based work.

7.2 CAN FUNDERS SUPPORT SYSTEMIC CHANGE?

The challenges funding institutions faced in changing their practices were acknowledged from the onset by frontline community organizers interviewed for this research. Research participants described uneasiness in working with funders towards systemic change and a sense of possibility that this could happen. As one community consultation participant reflected:

Change is hard and we are asking people to be part of difficult conversations about unintended outcomes; walking into the unknown; occupying that space that is really uncomfortable for everybody. How do we continue to keep space open for the unknown and for tensions? What are funders willing to give up? What are they willing to sacrifice to be part of this change process?

Frontline community organizers were interested in engaging staff within funding organizations in honest conversations about the impacts, constraints and opportunities they faced operating within neoliberal funding approaches. One community organizer asked:

How do we move forward in the not for-profit sector within the current landscape and arrangement where government is stripping away investments in education, health, organisations that work with communities and vulnerable people? How do we actually do it?

Having space to explore these issues with their funders was described as important. However, this type of dialogue, research participants emphasized, should be based in a recognition by funding organizations that power imbalances exist, that these are in part perpetuated by current funding models and that these imbalances can reinforce forms of oppression within communities. Specifically, some research participants wanted to hear whether staff within funding organizations recognized that the paradigms that shaped funding priorities perpetuated oppression and unequal power. As one consultation participant reflected:

Embedded in the language of priority neighbourhoods are streams of unspoken and spoken racism. Funding has colonial, racist and particular models of 'charity' that have top-down, colonial, 'I am helping you' embedded in it. How do funders reflect on this? I have never seen a funder step up to the plate and say that they are doing the best they can in a context that is colonial and racist.

Another community organizer wondered whether:

funders understand how fundamentally oppressive our society is? and how the hell do they expect groups to really change things...I mean I see change happens all the time, but sometimes it can feel like you're going in circles and working against funding arrangements to make things happen.

Beginning with a basic acknowledgement that frontline community organizers felt constrained in their efforts to achieve meaningful community impact by their funders at times was identified as an important step towards working collectively.

Further, research participants further described how the very structure of the voluntary sector undermined attempts at promoting social transformation. One community organizer asked: *“I have questions around the Non-Profit Industrial Complex. Do funders see the links? How do we work to overcome it?”* Some research participants wanted to engage their funders in conversations about whether they believed that a model that was largely short-term and project-based was capable of creating more just, healthy and vibrant communities. As one community organizer reflected: *“Do funders think this model is working? That it is healthy? That it is producing the results they want? Or is it just the only way they know how?”* Another community organizer wondered whether funders believed that: *“funding initiatives that are short-term, or issue focused that are trying to respond to some of the issues affecting our community is enough to tackle the problems that our communities are experiencing?”* In raising these questions, research participants were imploring staff within funding organizations to acknowledge that if the end goal is healthier people and healthier communities, based on their experiences, the current model is not working adequately.

Across the interviews and consultations, there was a clear sense that the status quo of short-term, project based funding was not leading to widespread social change. These strategies could create momentary opportunities, but were not seen to address the structural and systemic issues facing the communities’ frontline community organizers supported:

Creating space is radical and transformative, it’s outside the mainstream and it’s fantastic. But if you walk out that door and are slammed for your gender identity or don’t have a place to stay, or the police are harassing you for the 4th time in a week, it’s transformative but it’s a moment (community organizer).

In order to address these limitations, there was a strong push among research participants to see an increased focus on systemic-level changes coupled with direct programs and services, understanding the positive impacts of community-based projects did not in themselves create safer and more inclusive communities. As one community consultation participant candidly shared: *“Are we making the world a better place through this model? And how is it working and*

at what cost?” When describing the `cost` of the current model, she reflected that strategies based on divisions between service provider/community, helper/helpee reinforced power dynamics that pathologized and further marginalized communities.

Research participants were clear that having funders acknowledge that the systemic issues facing their communities including poverty, racism and oppression could not be addressed through better projects and programs was important to finding common ground. This surfaced explicitly in the conversations frontline community workers would have with their funders if provided a safe space to do so (see above and Appendix F for examples of these questions). These insights highlighted the desire for funders to look at how their processes and ideologies could reinforce the localization of systemic issues within particular communities. This was described as an outcome of project-based, short-term funding approaches largely focussed on fixing people as opposed to tackling underlying issues that entrench marginalization. In addition, research participants did not dismiss the idea that funders could be involved in reforming their practices in ways could promote collaborative action. However, frontline community organizers were clear that there needed to be a common recognition that there are structural and systemic issues such as poverty and racism that fundamentally affected communities and were not adequately being addressed through current funding practices.

7.3 INVESTING IN HEALTH AND WELLNESS

While there was a broad sense that funding bodies operated within and perpetuated a flawed system, research participants had several recommendations for how funders could adapt their processes to promote increased health and wellness in community-based work. These were seen as recommendations that could positively impact the personal experiences of frontline community organizers, but would not necessarily lead to the systemic transformation described above. As such, it is important to emphasize that these recommendations were not seen as solutions to neoliberal funding systems, unequal power and welfare state withdrawal. Instead, they were proposed as more immediate practices funders could adopt that I would argue could help improve frontline community organizers immediate experiences and open up new spaces to engage funders, community-based organizations and frontline community organizers in how to tackle systemic issues that exacerbated stress, burnout and trauma.

7.3.1 Recognize Health and Wellness as a Necessary Outcome

Research participants reflected on how funders (both state and private philanthropy) could influence changes in the voluntary sector because of the privileged positions they occupied. This related to how funding approaches shaped normalized neighbourhood effects discourses and framed social issues as being localized within specific neighbourhoods, as discussed in Chapter Two and Chapter Three. This influence was recognized by research participants as something that could be leveraged to promote sector change, as what funders ask for, applicants feel compelled to deliver:

Imagine seeing an RFP on how to care for your staff well. An RFP that focuses on testing out increasing salaries, goal setting, selfcare, and frontline workers being able to see themselves in a broader context. How could that shape the sector?

The ability for funders to shape the sector was echoed by a community organizer and administrative staff within a youth arts organization:

Lack of investment in staff wellness is partly financial, but it's also sectoral. Only in one application have I come across a question related to staff wellbeing. If funders made that more of a priority, organizations would start to think about it more. It would create an opportunity to reflect.

Here, he was clear that the omission of health and wellness from funding guidelines and proposals was taken as a sign that it was not valued as an essential and legitimate outcome to work towards. In addition, research participants described how it was not common across community-based projects and organizations to talk about health and wellness (FPYN's work was a notable exception). In this sense, across the sector, the health and wellness needs of frontline community organizers were generally absent from formal discussions.

A tangible recommendation shared by several research participants for how funders could put the health and wellness of frontline community workers on the public radar was to actually ask for health and wellness strategies as part of their funding applications. This was seen as a way to help normalize that the health and wellness needs of the people doing the work should be planned for as part of project development: *"The same way evaluation is seen as a requirement of a project; so to is ensuring that frontline workers are cared for"* (community

organizer)¹⁰. The simple act of asking about health and wellness outcomes, some research participants argued, would signal to them that it is ok to be honest about what it can take to do community work and would enable them to be transparent about their strategies they have used to promote healthier workplaces. This was seen as a way to begin to change the sector:

Funders need to operate with a real belief that if the people working in the organization are healthy and feel like they belong, that will have an impact on the work they do and the people they serve and work to support (community organizer).

In addition, several research participants reflected on how funders could positively influence their applicants and grantees by helping them be more aware of unanticipated stress and issues that could arise in community work. For example, a community artists described how funders could help counter the perception that you always have to do more and promise more in order to receive funding:

Having funding program manager's be explicit in their interactions and proposal questions that it's not always about doing more. That having to do more all the time is not sustainable or it can mean that things are done in a rushed way that are not ethical or that people do it but are so burnt out by it.

Another community organizer described how: *"Funders can ask questions about projects, questions like 'who will do individual work with people running the project so that they don't get exhausted'?"* In addition, having actual budget categories to support health and wellness was identified as a key way for funders to show they are committed to incorporating health and wellness into their grants: *"There is some recognition of burnout, but there is no budgeting to cover staff if they take sick days. When someone is sick, it increases the workload for staff, or the work piles up"* (community consultation participant).

While research participants offered clear recommendations for adapting funding practices, there are several structural barriers to funders investing in health and wellness for frontline community organizers in sustained ways. This related back to the lack of core funding

¹⁰ See Appendix G for an example of embedded health and wellness strategies in a project budget. While I would not argue that it is as simple as assigning 2.5% of project costs to self-care, this is one way of demonstrating that self-care and group care are essential aspects of running a community-based project.

and operating funding discussed in Chapter Two and Chapter Three that means that it is increasingly difficult for groups to access staff salaries, let alone additional supports for community workers. This is in part a product of funders investing in projects without investing in the people expected to deliver these projects. In addition, outcomes-based evaluation and accountability structures have made it difficult for groups to report in on more intangible things like health and wellness. Broadly, the perception that frontline community work was inherently stressful (discussed in Chapter Five) and that people did this work because they care (discussed in Chapter Two) was internalized by frontline community organizers, as many research participants described the need to educate their peers that they should not be expected to work to a point of burnout. Normalizing conversations around health and wellness was seen as an important way to change frontline community organizers perceptions of their work and engage funders in how they could support greater health in community organizers. Having funders promote conversations about health and wellness in frontline community work was seen by research participants as a key role they could play in influencing the overall sector.

7.3.2 Be Willing to Hear the ‘Whole’ Story of Community Projects

A barrier to exploring health and wellness needs with funders, research participants identified, was that they felt compelled to only disclose what could translate into a feel good story, or story of success. For example, research participants shared that outcomes-based evaluation requirements have meant that they felt an imperative to show that things are always working. This can leave little room to talk about how community workers are experiencing stress and burnout while running these projects: *“We are in a track of perpetual proving. Always having to prove and justify”* (community organizer). This was echoed by a community consultation participant, who reflected that evaluation and reporting requirements don’t leave space to share what the experiences are like for frontline community organizers: *“we don’t count. We never get to report on ourselves. To be able to report out on how our staff are able to reach their goals as artists, as parents...would be really powerful.”* This inability to share what is really happening was connected to the competitive nature of contracts and grants and to how community-based groups are expected to deliver specific projects and services designed by the state. As discussed in Chapter Two, these can restrict the roles community-based organizations can play to one of service provider as opposed to being a voice for the needs and priorities of the community.

Further, frontline community organizers consistently described how they felt unable to share what was not working in their projects or to discuss what was working that was not part of their actual funded plan. This was seen as endemic to funder/grantee relationships: *“How do we talk about mistakes and be able to experiment? The imperative and fear of covering ass is bred into us in this work”* (community consultation participant). Research participants felt restricted by their funders in being able to be honest and transparent: *“there needs to be a willingness to make mistakes to uncover what is needed. Organizations often don’t feel like they can do this because of funding requirements. Funders need to be willing to make mistakes to actually innovate.”* In real terms, what research participants eluded to was that frontline community organizers felt unable to discuss when programs and services are not in fact meeting the needs of their communities. As such, opening up more honest and reciprocal lines of communication between grantees and funders was seen as an important step in promoting health and wellness strategies, as it would enable all parties to see the complexities of community based work.

An interesting suggestion raised in one consultation was for social services and community focussed funders to take a page from arts funding approaches. Specifically, consultation participants described how there are arts funders that invested in the creative process without expecting clear outputs. Consultation participants wondered how this flexible approach could be adapted to community work: *“Arts funders give huge money with no clear sense of what is going to come back to them. How can this model be adapted to other forms of creative work?”* Consultation participants wondered how the willingness to support creativity could be expanded to frontline community organizing so that people are invested in to innovate and respond to needs that emerge but were not foreseen in the initial funding proposal. Research participants described how they often felt forced to deliver metrics and outputs irrespective of whether these indicated something positive happened as a result of the project. Research participants wondered what it would be like if they were trusted by their funders to reach their participants in the most relevant, creative and innovative ways that might not fit within predetermined outcomes. Consultation participants further sought the ability to report in on the positive outcomes they saw that might be overlooked or undervalued by funders (e.g.. A young person speaking up in a group setting; volunteering to clean up after programming). These outcomes may not seem radical on paper but indicated significant growth depending on where the person was coming from. Feeling trusted to respond to real time needs through

relevant and sometimes out of the box strategies opened up new possibilities for how frontline community organizers imagined approaching their work and their relationships to their funders.

In addition, research participants shared that moving away from project-based funding to more core operating supports would enable them to take risks and try different strategies to positively reach their community stakeholders. As one community organizer reflected: *“The expectation of complete success is misguided. There are key learnings that help people grow. Operating funding enables you to make mistakes, learn from it and not be punished for it.”* This was echoed by another community organizer who described how shorter term funding and unstable funding partnerships *“makes you afraid to make a mistake, it creates an environment of fear and mistrust. If frontline workers are afraid to take risks, they can’t reach the communities. Taking risks enables unexpected changes and impacts to happen.”* Further, operating funding was identified as a tangible way that funders could demonstrate that they trusted their grantees and believed in them to address issues affecting their communities, as opposed to simply delivering specific project deliverables: *“There should be less of an onus on projects and more of a focus on the organization. A signal that we believe in you and your staff, and the organization as a whole to execute. This would stop people from chasing funding, from being stretched.”* In addition, research participants described how having access to core funding would enable them to respond to the needs of their staff more effectively: *“Having access to core funds, and being able to dedicate funds towards relief staff when needed; to supports leaves, training, professional developments, incentive packages and benefits.”*

However, these insights described the subtle, punitive undertones that can manifest within neoliberal funding approaches, as groups worried that they would lose their funding if they were honest about what is actually happening on the ground. As discussed in Chapter Two, within neoliberal funding logics, contracts and project-based funding are seen to save government money by allowing groups to compete to offer services (Lipsky and Smith, 1989-1990). The reorientation of community-based organizations as service delivers has also led to increased accountability measures that did not leave much space for contingency and flexibility. For example, the push for outcomes-based evaluation has meant that groups needed to deliver clear metrics which makes it challenging to capture the significance of more intangible things

like people's health and wellness. Access to core funding would enable groups to be more secure, to support long-term planning and to have more autonomy as their dollars are not tied up in specific projects or deliverables.

7.3.3 Be More Open and Accessible

For community organizers who are already feeling the strain of trying to respond to the needs of their communities, dealing with funding institutions that did not seem to understand or value the efforts frontline community organizers put into this work was an exacerbating stress factor:

Some staff at funding organizations don't treat you like a person or see how much you are doing with so little. They don't treat you like you are doing something that is amazing or recognize that you really care about your work and community.

In addition, one community organizer candidly shared:

I have had experiences where it seemed that the funder was angry at me because the proposal was so wrong. They seemed angry that they had to read it. There wasn't a sense of caring about how much life energy and personal energy went into developing the proposal.

To address these negative experiences, several frontline community organizers urged funding organizations to be more engaged and accessible, and to show better understanding of how challenging community-based work can be.

In addition, frontline community organizers described how administrative burdens placed on them and their groups were a contributor to stress and burnout. Some questioned the impacts this had on supporting community health: *"What does it mean in practice when you are pulling frontline workers off the frontlines to do admin work?"* (community consultation participant). Increasing administrative burdens on groups either presupposed that they would make up for the increased workload by asking more of themselves and their staff, or that the work would somehow get done by someone else. In contrast, consultation participants shared how positive experiences with one funder illustrated to them the possibility of balancing the administrative requirements with the actual work they are passionate about doing. They were:

Struck by the funders that thought about administrative burdens tend to minimize written applications and rely on interaction with applicants more. They have in

their mind how to get to know the most information as quickly as possible. A stronger sense of teamwork between funder and recipient, minimizes admin burden and bureaucracy.

These findings described how challenging it can be for frontline community organizers to work with funders, but also the potential for a more partnership-based approach to be developed. While clear power differentials between funders and community-based groups have been identified, practical strategies that could help reduce strain on groups and open up a more partnership-based approach were also noted.

7.3.4 Support Spaces for People to Unpack Racism, Oppression and Privilege

One research participant, who is the founder of a youth-led group, suggested that funders could invest in opportunities for frontline community organizers, funders and other stakeholders to deconstruct power, privilege and oppression. He saw a key role funders could play in bringing their partners and grantees into these conversations:

Having intentional spaces to explore experiences of privilege and oppression are important to building collective action. But there is a need for more mainstream organizations and institution to engage in this process, to become committed to these processes and familiar with the language so that they don't shut it down.

The need for this to become common practice across funding and community-based organizations was stressed so that racialized and marginalized communities were not deconstructing their own experiences of oppression in isolation:

There is a tension between grassroots and mainstream. Funders are in a mainstream environment and need to support spaces that help people create similarities in their visions of change that gives us a common language around race, class, gender. But this training doesn't just need to be in communities that are seen as oppressed. It's dangerous for it to just be in that place. It needs to be in institutions, in schools. People need to grow up knowing that these dynamics exist. You can't just place these important conversations in community because it's a distancing thing. When communities come back into mainstream spaces, they are using a language that isn't heard or can create division.

In describing the benefits of this approach, the research participant further reflected on how spaces like these can help lead to allyships¹¹ and ways of working collectively towards common social change outcomes:

We need time and space to talk about the different places we come from, that we have similar visions, but this doesn't mean you can authentically work together and see each other as partners without acknowledging the differences and privileges that people have.

Specifically, he suggested that funders working with donors and other economically wealthy individuals could play an active role in educating them about systemic oppression and systemic racism. This was seen as a way to stretch their funding investments by building more allies and supporters within privileged spaces: *“Funders have a role to anchor institutional change work with wealthy, privilege communities. They can explore how to really maximize their philanthropic dollars.”* Having funders intentionally engage their partners and donors in conversations about privilege is a potential tool for beginning to deconstruct how the NPIC operates. It could provide a venue for shared understanding of how current funding models can impede systemic change efforts by reinforcing the localization of systemic issues within particular communities to happen. While these were not seen to be easy conversations to have, identifying a common understanding of how systems perpetuate marginalization within communities was identified as a foundational aspect of building collective change agendas. While not without its challenges, it is possible to engage funders in this process in part by beginning to discuss how the people behind the projects being funded are stressed and strained in ways that impede their abilities to do community-based work.

7.3.5 Support Retreats and Opportunities for People to Get Away

Throughout the interviews and consultations, frontline community organizers described how the communities they work in can face continual crisis. This was linked to welfare state withdrawal as access to basic subsistence and supports were not afforded all individuals and communities (see Chapter Two and Chapter Five). While operating in this context can create conditions under which frontline community organizers and communities felt in perpetual crisis

¹¹ I use the language of allies and allyships to refer to: “someone who advocates for and supports members of a community other than their own. Reaching across differences to achieve mutual goals” (Gender Equity Resource Centre, 2013).

response mode, there are also times when acute crisis hits communities. In these instances, several consultation participants described how the ability to take community members out of their immediate surroundings enabled immediate traumas to be better addressed. Frontline community organizers suggested that funders develop emergency or contingency funding that their grantees could access if something unexpected arose: *“Funders could consider supporting retreats, or strategies that take groups way, outside the city as a crisis response. It could be a crisis response fund.”* With this suggestion, research participants echoed the need for more holistic approaches to addressing traumas that emerge in communities by enabling people affected by trauma to gain a broader perspective on how what happened in their community was connected to social, economic and political contexts that rest outside their neighbourhoods (see Burstow, 2004). ‘Getting away’ was described by research participants as a tangible strategy to gain increased perspective on what individuals or an entire community was going through. It was also described as a way to support collective healing. This recommendation offered insights into some of the critical discourses raised in Chapter Two about how trauma studies can better engage in systemic and collective experiences of trauma so that it did not reinforce the individualization of community-experienced trauma.

In addition, some research participants described the positive impacts travel and time away has had on them:

Getting people outside their environment, you are no longer wrapped up in your environment. You get perspective... There is something about outdoor spaces, you work out your shit. It's such a privilege. It something really something concrete funders could invest in.

In these instances, research participants spoke to how it helped them regain perspective on their work and to see how their personal experiences are part of a broader system (see also Skinner and French, 2012A). The importance of being able to see that stress and burnout was not an individual shortcoming was described as a significant protective factor in Chapter Six. Retreats and ‘getting away’ was one practical strategy identified for gaining this broader perspective on personal experiences of stress, burnout and trauma.

7.3.6 Invest in Training for Frontline Community Organizers

Access to training and mentorship supports for frontline community organizers around health, wellness, and addressing stress and trauma in community-based work was identified by several research participants. One community organizer who is also a therapist described how she supported youth-led projects, either formally as a therapist or informally as a mentor, because the individuals running these projects realized they needed help dealing with issues that they had not anticipated or did not feel they have the skillset to address. For example, when someone discloses very personal experiences of trauma, violence and racism it can trigger other participants:

Youth will develop an arts project about violence and the youth involved in the project are violence survivors. A lot of issues can come up that the youth facilitating the project didn't anticipate or don't have the training to address.

The importance of groups being able to regroup and redirect if they need more support without being penalized by their funders was described. As such, greater awareness among funders that issues related to stress and trauma can arise unexpectedly within programming spaces in ways that directly impact the health and wellness of participants as well as community organizers was seen as an essential.

Developing training spaces focussed on self-care and community-care, research participants described was a strategy that could help equip frontline workers with tools and language to support them and their planning. Training opportunities was seen as a way to make apparent the reality that unforeseen situations can arise in projects that create stress, burnout and trauma for frontline community organizers and their participants. Investing in training was not seen as the solution to stress and burnout as it places the onus on frontline community organizers to be better 'self-carers,' but it was seen as important to raise awareness that these experiences are happening. Engaging funders in conversations about why these trainings were needed was seen as a way to open up discussions about the complexities of community-based work, that are often unacknowledged in neoliberal funding approaches, that contribute to stress, burnout and vicarious trauma.

7.4 CONCLUSION

Across the interviews, frontline community organizers were clear that addressing some of the structural issues facing their communities would contribute to changing the nature of their work and work environments so that burnout, stress and vicarious trauma were not assumed to be foreseeable consequences of community organizing. As one community organizer reflected: *“It feels like a cycle where you run these programs, and the overall systems aren’t changing. Are we complacent when we don’t act out against the state or turn a blind eye to policies that make things even worse?”* In addition, frontline community organizers identified the need for spaces to come to more common understandings of how systemic issues are reinforced by neoliberal funding approaches. In this way, research findings described the complexity and necessity of funders and frontline community organizers challenging assumptions within neoliberal restructuring and welfare state withdrawal as opposed to assuming it cannot be done from within the system.

-8-
**DISCUSSION:
UNSETTLING THE CURRENCY OF CARING**

8.1 INTRODUCTION

This research set out to explore how the prevalence of stress, burnout and vicarious trauma in frontline community work offered insights into the personal and community-level impacts of welfare state withdrawal, drawing on the experiences of frontline community organizers in Toronto. It has focussed on the experiences of frontline community organizers because in many ways they are at the forefront of downloaded services and responsibilities endemic in neoliberal discourses. This research argues that welfare state withdrawal is subsidized by a 'currency of caring' where frontline community organizers, volunteers and informal caregivers are expected to fill gaps in government services and to try to meet the needs of their communities because they care. This research further argues that the reliance on frontline community organizers and community-based organizations to fill gaps in our social safety net has contributed to conditions of stress, burnout and trauma in community-based work.

Against the backdrop of critiques of trauma studies and neoliberalism outlined in Chapter Two and critiques of targeted neighbourhood investment strategies outlined in Chapter Three, this chapter highlights the contributions, implications and limitations of this qualitative research study. It is organized into four sections. The first section provides a summary of research findings. The second section provides an overview of research contributions. The third section offers insights into the research process, including research limitations and areas for future research. The final section comments on the role of funders in promoting systemic transformation.

8.2 SUMMARY OF RESEARCH

8.2.1 Research Process

In order to explore the relationship between frontline community organizers' experiences of stress, burnout and vicarious trauma, and welfare state withdrawal, this research has drawn on key debates in neoliberalism and trauma studies. These included critiques of how neoliberal discourses have placed increased responsibilities on individuals to address systemic issues as though there are localized, community-based issues (see Rose, 1999; Burstow, 2004; Bauder, 2002; Defilipis, Fisher and Shragge, 2006). In addition, this research explored the limitations facing community-based organizations operating as the shadow state and within the confines of the Non-Profit Industrial Complex (see Milligan, 2007; INCITE!, 2007). This research was further informed by an analysis of targeted neighbourhood investment strategies underway in Toronto under the Priority Neighbourhoods framework described in Chapter 3. In order to unpack the relationship between regulatory and funding practices that can contribute to the localization of systemic issues within particular communities and how this can exacerbate stress and burnout in community-based work, this research drew on the firsthand accounts of frontline community organizers. In-depth interviews and community consultations were conducted with 19 people involved in community-based work in Toronto in 2012. Their insights formed the basis for the research findings outlined in Chapter Five, Chapter Six and Chapter Seven.

8.2.2 Summary of Findings

The conceptual literature review in Chapter Two and contextual literature review in Chapter Three raised several issues that informed the interpretation of research findings. These related to how neoliberal discourses have increasingly placed the onus on individuals to address systemic issues as though they are localized issues (Rose, 1999; Ilcan and Basok, 2004). In addition, community-based organizations and the voluntary sector have been increasingly relied on to fill gaps in services and programs left by welfare state withdrawal (Milligan, 2007; Defillipis, Fisher and Shragge, 2006). This has been seen to undermine the capacity of community-based organizations and those dependant on state and private philanthropy to promote systemic change (INCITE!, 2007). In addition, welfare state withdrawal has been operationalized through targeted neighbourhood strategies and short-term, project based funding that reinforced the localization of systemic issues within particular communities,

under the contentious assumption that addressing 'neighbourhood effects' would promote systemic change (see Bauder, 2002). Operating within this context, research findings highlighted, have contributed to experiences of stress, burnout and vicarious trauma in frontline community organizers as they faced increased pressures to respond to urgent and basic needs in their communities, while being unable to fundamentally address the issues that entrenched community marginalization. Addressing the continued downloading of responsibilities to frontline community organizers and informal caregivers rampant in neoliberal discourses, this research further argues necessitates engaging funders in reforming their practices.

Interviews and consultations with frontline community organizers in Toronto provided important insights into the impacts of welfare state withdrawal on the people relied upon to fill gaps in services. These findings further inform the possibility of engaging funders to promote increased health and wellness in community-based work. Below is a summary of key research findings organized around the central questions raised in Chapter One.

1. How do frontline community organizers experience neoliberalism?

Research findings offer important insights into the personal impacts of neoliberal discourses as well as how these discourses have shaped the voluntary sector. This can be seen in the pervasiveness of 'hero narratives' within community-based work described in Chapter Five. Research participants articulated how the expectations placed on frontline community organizers to address the urgent and systemic needs of their communities was internalized by frontline community organizers and reinforced by the voluntary sector, community-based organizations, funders, policy makers and the broader public. An outcome of these narratives was that frontline community organizers felt as though if they could not handle all the stress involved in community work, it was their own shortcoming as opposed to indicative of broader sectoral and systemic pressures that have normalized burnout in community-based work.

In addition, research participants described how there is a widespread moral perception that people became involved in community work because they cared about more than money

and personal financial stability. As such, frontline community organizers reported that it is expected of them to accept that their work environments were stressful and that their positions were inherently precarious and underpaid. These findings illustrate how neoliberal discourses have manifested in community-based work in ways that rationalized the high stress, unstable positions that frontline community organizers faced. In doing so, this research argues, welfare state withdrawal has been subsidized by a 'currency of caring', that presupposes that people will work to the point of burnout, if necessary, to fill gaps in services and ensure the wellbeing of their communities.

In addition, research findings corroborate critiques of neoliberalism that the focus on communities as the source and solution to systemic issues has undermined systemic change efforts (Rose, 1999). Research participants described how they felt limited in their abilities to fundamentally support their stakeholders by the structural and systemic issues their communities faced that could not be addressed through more effective community-based programs, as outlined in Chapter Five. This was seen as a contributing factor to their own experiences of stress, burnout and vicarious trauma. Further, as Chapter Three described, neoliberal regulatory and funding processes have been identified by several community generated research reports as contributing to the precarious status of frontline community organizers and community-based organizations in Toronto. This relationship was corroborated by research findings outlined in Chapter Five as research participants identified how a lack of core funding support restricted their abilities to respond to the actual and changing needs of their communities. Further, research participants identified that the limitations and restrictions placed on community-based organizations through funder-imposed evaluation and accountability measures exacerbated stress in their work. They identified how more transparency and opportunities for honest dialogue with their employers about these restrictions could help them feel less strained.

Moreover, the impacts of short-term funding strategies on the health and wellness of frontline community organizers were raised by research participants. Of particular significance, research findings spoke to how targeted neighbourhood investment strategies such as the Youth Challenge Fund created a funding bubble that enabled new community leadership to

emerge. However, an unintended outcome of this was that when the funding ended, the projects became dependant on voluntary efforts or ceased to exist. These outcomes were also attributed more broadly to short-term, project-based funding strategies. Interviews and community consultations with frontline community organizers revealed how the sudden disappearance of funding opportunities led to stress and burnout for people running community projects.

Overall, frontline community organizers were cognizant of how their own personal experiences of stress, burnout and trauma were impacted by the social, economic and political landscapes in which they worked. In addition, these experiences were compounded by funding strategies that normalized the localization of systemic issues within communities and placed the onus on frontline community organizers to address the needs facing marginalized communities without having the resources to adequately do so.

2. What strategies and supports are working to promote health and wellness?

Working within the context of welfare state withdrawal, a core question that this research explored was *'what strategies and supports are improving the health and wellness of frontline community organizers?'* Predominantly, research findings centred on the need to acknowledge the prevalence of stress and burnout in frontline community work. As Chapter Six outlined, frontline community organizers identified the need for their peers to understand that their personal experiences of stress and burnout were not individual shortcomings and are symptomatic of systemic issues endemic in the voluntary sector. Research participants described how the ability to contextualize their personal experiences of stress and burnout within broader social, economic and political contexts acted as a protective factor that increased their capacity to cope with these experiences. Further, frontline community organizers described how having access to spaces to connect with peers and their funders around the prevalence of stress and burnout in community-based work helped them to not individualize and internalize these experiences.

In addition, research findings identified the importance of personal and organizational values alignment, specifically related to whether organizations were drawing priorities and mandates from communities and their stakeholders, as opposed to their funders. Research participants acknowledged that it was a challenge for community-based organizations to prioritize the needs of their communities, as increasingly organizations felt forced to deliver evaluation metrics and adopt accountability structures that could undermine their ability to respond to the needs of their stakeholders.

Frontline community organizers cautioned against self-care becoming another requirement placed on them, as this reinforced the individualization of systemic issues as opposed to addressing them. For example, discussions around boundary setting were predicated on the need to acknowledge the near impossibility of creating boundaries when you lived in and/or shared lived experiences with the communities you supported. Research participants were attuned to how regulatory and funding processes impacted their abilities to invest in self-care, and urged a stronger focus on increasing opportunities for dialogue around the pervasiveness of stress and burnout as both a means to educate funders and as a way to validate the experiences of other frontline community organizers.

3. What is the role for funders?

Research findings offered important insights into the tensions of working at the frontlines of welfare state withdrawal to transform it. Interviews and consultations with frontline community organizers revealed both a hesitance and willingness to engage their funders towards collective social change efforts as described in Chapter Seven. Research participants were clear that in order for funders to be effective allies, they needed to acknowledge power imbalances and recognize that communities faced systemic issues that could not be addressed through short-term, projects and services.

In addition, research participants identified several ways that funders could be invested in the health and wellness of frontline community organizers. These recommendations centred

on the need to acknowledge that people involved in community-based work experience stress and burnout because of the precariousness of this work and the inability of projects to address the underlying systemic issues facing their communities. Creating spaces for dialogue around how power and privilege manifested in welfare state withdrawal was seen as a tangible way that funders could begin to work towards developing collective change agendas with frontline community organizers.

8.3 KEY CONTRIBUTIONS OF THE RESEARCH

This research is distinct in that it offers underexplored perspectives on the impacts of welfare state withdrawal at the local level through the experiences of frontline community organizers. In terms of theoretical contributions, this research offers insights into the impacts of targeted neighbourhood investment strategies including how short-term, precarious funding can create eventual service gaps that need to be filled through voluntary efforts. This provides an important point of reflection as policy makers consider the unintended impacts of targeted neighbourhood strategies for the people involved in meeting community needs on the ground. In addition, this research offers insights into the impacts of welfare state withdrawal on the people expected to fill gaps in the social safety net. This includes how the expectation that frontline community organizers' could meet the fundamental needs of their communities through short-term programs and services contributed to experiences of stress, burnout and vicarious trauma. This research calls into question how volunteerism is conceptualized in the context of welfare state withdrawal as it does not consider when people are volunteering to provide services that had been previously funded, and are ultimately providing essential services through unpaid or precariously paid positions. This research also elucidates how being from the communities in which your work or sharing similar lived experiences of marginalization can compound experiences of vicarious trauma and community trauma in ways that are not widely explored in the literature.

8.3.1: Funder Implications

This research offers insights into how funders can be engaged in reforming their practices to help mitigate experiences of stress, burnout and trauma in frontline community

work. This research builds on frontline community organizers self-described experiences of grief, stress and trauma (see FPYN, 2009) and identifies how funding practices, and neoliberalism more broadly are implicated in these experiences. It was not the intention of this research to present funders and funding practices as the solution to experiences of stress, burnout and trauma in community-based work, but to identify why and how funders should be concerned with how their practices directly and indirectly contribute to these experiences. By this I mean that funders are part of the problem and have a role to play in addressing how funding practices affect the health and wellness of the people behind the projects being funded. It is not as simple as funding 'health and wellness' strategies, but requires rethinking how funding practices such as short-term, project-based or targeted neighbourhood investment strategies have the unseen or unintended impact of creating conditions of stress and burnout for people running community-based projects.

While being critical of funding practices and how targeted neighbourhood investment strategies have impacted the health and wellness of frontline community organizers, it is important to highlight that these critiques examine how funders can work more holistically with their community partners and begin to see the needs of the people running these projects. The point is not that funders should move away from investing in residents, young people and communities who develop interventions based on their lived experiences and expertise, but that funders should be investing deeper and with more care in these types of projects. In addition, by critiquing targeted neighbourhood strategies, this research does not argue that these approaches should be eliminated but that it is essential to not conflate the need for physical and social infrastructure investments with promoting systemic change (see Cowen and Parlette, 2011). Here there is an opportunity to build on Mananzala and Spade's (2008) call to integrate direct services with systemic change efforts by ensuring that funders adopting targeted neighbourhood approaches are also investing in advocacy and systemic change efforts, not substituting one for the other.

8.4 REFLECTIONS ON THE RESEARCH PROCESS

8.4.1 Research Limitations

As I reflect on the research process there are several limitations to the research design that are important to recognize. For example, this research did not incorporate the perspectives and experiences of people working within funding organizations, except implicitly my own. This limits the scope of social change insights to those of people working outside funding organizations, and does not account for the barriers staff within funding organization face to changing practices, or the opportunities they may see to reform or adapt their processes.

In addition, this research did not explicitly ask frontline community organizers to reflect on their experience working within the Priority Neighbourhoods framework in Toronto. The fact that Priority Neighbourhood's surfaced throughout interviews and consultations is indicative of its perceived importance in shaping frontline community organizers experiences. However, as this remains a largely under-evaluated exercise in Toronto, this research could have more directly sought out insights into its impacts on the ground. This could have included interviews with funders that employ targeted neighbourhood approaches to garner their assessment of the impacts of this model.

Further, this was an exploratory qualitative research project grounded in the experiences of a limited group of people. In this sense, the research is not exhaustive or representative of all frontline community organizers' experiences. It offers insights into the relationships between community organizers and local funding practices in Toronto, which I would argue is relevant to other communities and organizations experiencing welfare state withdrawal.

8.4.2 Potential Areas for Future Research

There are several opportunities for future research. First, this research revealed the importance of understanding how funders perceive their roles within welfare state withdrawal in order to identify opportunities for developing collective change agendas. Related to this, as the

research findings identified the need for spaces for both frontline community organizers and funders to discuss the implications of welfare state withdrawal and targeted neighbourhood investment strategies, there is an opportunity to explore strategies that would promote meaningful and actionable dialogue. Research findings offered some preliminary insights into the role community networks like FPYN play in promoting spaces for collaboration, but more research is needed.

Second, this research revealed a clear disconnect within targeted neighbourhood investment strategies between the stated goals of addressing systemic and structural causes of poverty and marginalization in communities and the implementation of interventions aimed at increasing infrastructure and programs within neighbourhoods (See UWGTA, SNTF and Roots of Youth Violence Secretariat for examples). This presents an opportunity for further research and evaluation of these strategies, including an assessment of what impacts and outcomes funders using targeted neighbourhood approaches have seen that inform the continued adoption and expansion of this approach over other strategies.

Third, this research identified new insights into geographies of volunteerism and care by expanding on assumptions of 'volunteerism' in the context of welfare state withdrawal. There is an opportunity for further research on how frontline community organizers, as an example of informal caregivers, perceive their roles in welfare state withdrawal as well as how community-based organizations perceive the services being rendered. This could help deepen and expand on the currency of caring concept proposed in this research.

Fourth, in terms of building the case for why funders should be preoccupied with the health and wellness needs of frontline community organizers, there is an opportunity to research how stress, burnout and vicarious trauma impacts the effectiveness of community-based projects. Additional research here could help strengthen the case for investing in better health outcomes as a means of achieving a greater community-level impact. However, I caution against simply building the case for health and wellness in ways that rationalize the perpetuation

of welfare state withdrawal, which is what social return on investment-type analyses, can sometimes inadvertently do.

Fifth, in discussion with several colleagues, the question around how being involved in social change work contributes to health and wellness was raised. While this research has focussed on experiences of stress and burnout, there are reasons why people stay involved in community-based change work that go beyond a sense of obligation and urgency. Additional research into the motivations of frontline community organizers to stay the course when it can take significant tolls on them personally could help identify strategies and supports that increase health and wellness and enable people to stay engaged in social change efforts.

Lastly, this research helped elucidate the social and political contexts that contribute to community, intergenerational and systemic trauma, with a specific focus on neoliberalism. This research offered a first step in presenting how neoliberalism contributes to trauma in communities and frontline community organizers. However, additional research into the relationship between neoliberal restructuring and trauma would contribute to broadening critical trauma studies.

8.5 CONCLUSIONS

This research has focussed specifically on the role of funders in operationalizing neoliberal discourses at a local level. This includes how targeted neighbourhood investment strategies, based on a 'neighbourhood effects' rationale, localize systemic issues within communities and render neighbourhoods the source and solution to poverty and marginalization. As frontline community organizers are directly supported and hampered by funding practices, the intention was to explore to what degree funding practices can be adapted and reformed to support increased health and wellness in community-based work. Working to promote greater health and wellness in the current funding model, I argue, is an important first step to opening up opportunities to name and address how funding practices reinforce the localization of systemic issues within individuals and communities in ways that undermine

systemic change efforts. In this sense, this research has been preoccupied with identifying opportunities from within the Non-Profit Industrial Complex to subvert and change this system.

Research findings reinforce the need for more spaces for seemingly disparate groups to come together and work towards common social change agendas. Specifically emphasized, was the need to engage funders in dialogue around the unintended outcomes of trying to implement community-change strategies within the confines of welfare state withdrawal. This is an important first step in exploring opportunities to disrupt the discourses that rationalize welfare state withdrawal through the currency of caring. In addition, it offers opportunities to identify allies within funding institutions who can help increase the health and wellness of frontline community organizers, which may contribute to subverting the NPIC in the process. As the research findings emphasize, the onus needs to shift to changing institutions and structures that reinforce unequal power as opposed to asking frontline community organizers to do more in terms of their own self-care or make do with less by refusing state and private philanthropic funding. This research stresses that while ‘the revolution may not be funded’ directly, there are opportunities to leverage funding towards health, wellness and systemic change.

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-APPENDICES-

APPENDIX A: BACKGROUND DOCUMENT PROVIDED TO RESEARCH PARTICIPANTS

Towards Healing Geographies: social infrastructure strengthening community organizing and frontline workers in Toronto

Purpose:

This is exploratory research to identify strategies and supports that mitigate experiences of stress, burnout and vicarious trauma in place-based community health initiatives, drawing on the experiences of frontline community organizers in Toronto. This research builds on a knowledge-base emerging from frontline, grassroots organizers in Toronto surrounding vicarious trauma, its impacts on community health and well-being and strategies that are supporting frontline workers and community organizers to be healthier.

'To make an observation, is to have an obligation'...to act (Assante, 2008)

This research begins from an observation: the language of trauma and vicarious trauma are frames that grassroots organizers, frontline youth workers, community members and residents working in and across communities in Toronto are increasingly using to describe personal and collective impacts on themselves and others involved in frontline, community-based work (FPYN, 2009). In their report based on interviews with youth workers, Frontline Partners with Youth Network, a grassroots network of youth workers in Toronto (2009), identify how organizers are: “stuck between being deeply committed to working with young people, compounding grief and trauma, a lack of support from employers, and organizations that reproduce some of the broader systemic inequalities youth are facing, frontline workers are also being infected with the hopelessness that they are working to mitigate” (FPYN, 2009: 4).

Frontline organizers are identifying personal and collective experiences of trauma in working within regulatory frameworks that pathologize individuals and focus on service delivery in lieu of systemic change. This manifest in instable, short-term funding that leads to precarious employment and unstable working environments, as well as a general marginalization of their roles in promoting community health and well-being. Front-line workers are dedicated to solving the problems in their community, but are not given the monetary support to both offer long-term sustainable programming that their communities need, nor are there generally supports available to support them to address their grief and trauma. These observations are grounded in significant bodies of research into the changing role of community under neoliberalism (see Rose, 1999; Ilcan and Basok, 2004; Laforest and Orsini, 2005) within the context of frontline, community organizing in Toronto (see FPYN, 2009; GYC 2008).

Background: Community Organizing in Toronto

Where does community organizing happen when community itself is not a fixed place?

In their research into governmentality and the voluntary sector in Canada, Ilcan and Basok (2004: 131) assert that “the seeming naturalness of community has facilitated a mode of

government through communities” where voluntary organizations and the staff within these organizations focus on creating responsible, productive citizens as opposed to advocating for systemic change. Of interest is how particular physical spaces and the people living there become the site of social problems and the focus of solutions, as though they are the problem. It should be noted that particular physical spaces and the people living there are framed by media and government as the site of social problems and the focus of solutions, as if such a community exists in isolation from the wider social factors affecting it. Instead of acknowledging these wider social factors, such communities are constructed as being the source of their own problems.

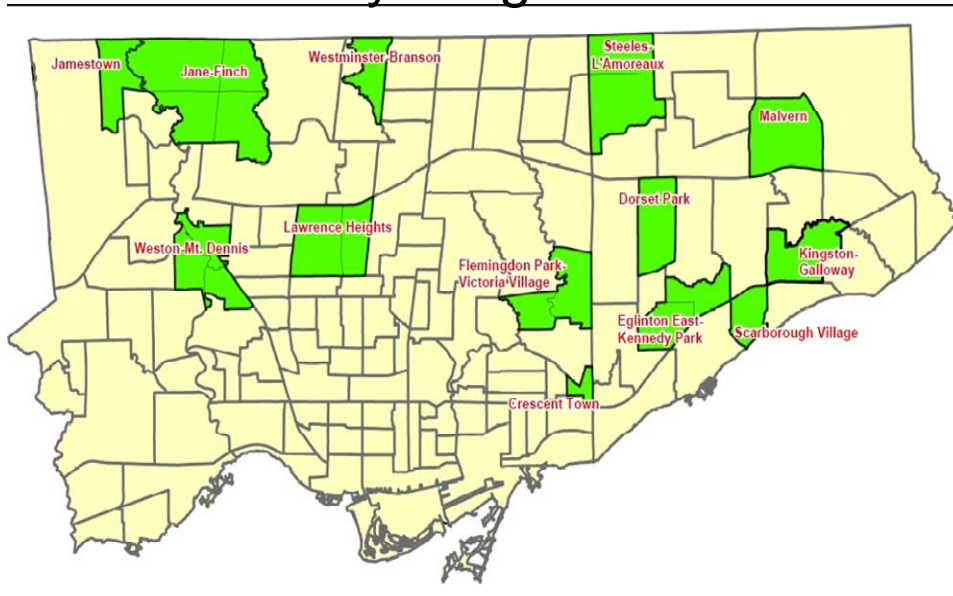
In Toronto, there are explicit policy frameworks that work through community and neighbourhoods as the locus of investment. The ‘13 Priority Neighbourhoods’ model has enabled significant investments to be made into communities that have been identified through systematic, seemingly quantifiable measures of neighbourhood health and challenges, as being most in need (UWGT, 2005). While contributing important resources to communities that are systemically under-resourced, these strategies have also perpetuated a policy discourse that focuses on individuals. Initial reflections after 4 years of investment is that the “macro-level challenges facing the 13 priority neighbourhoods remain extensive and ingrained” (Dale, 2010).

In this context, contrasting how community is defined politically and how community is defined by residents begins to make visible the competing visions for health and change. This is not to call into question whether community as a location exists, but to unpack how it is constituted and used to communicate social problems and social solutions. As a working definition, Defilippis, Fisher and Shragge (2006: 673): “...put forward an understanding of community that is neither dismissive, nor celebratory, but instead argues that communities need to be understood as simultaneously products of both their larger, and largely external, contexts **and** the practices, organizations and relations that take place within them”. Here, they ask us to consider the importance of communities as arenas for social change, while being limited in their abilities to promote change (Defilippis et al, 2006).

So how is community being mapped in Toronto?

This is how existing regulatory frameworks
frame the issues...

13 Priority Neighbourhoods

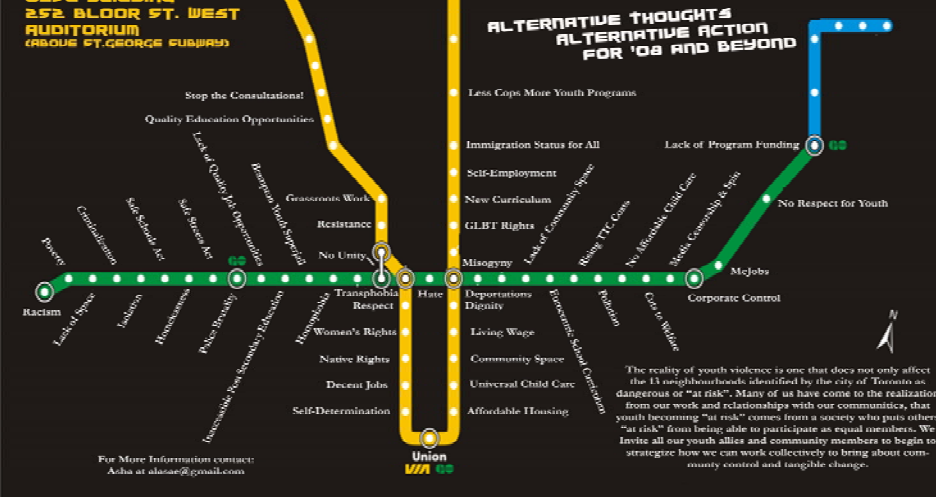


This is how many community organizers in Toronto are seeing the issues...

Youth Organizing in Toronto

STRATEGIZING MINDS

SATURDAY, JANUARY 26TH, 2008
12:00PM - 5:30PM
OTWE BUILDING
252 BLOOR ST. WEST
AUDITORIUM
(ABOVE ST. GEORGE SUBWAY)



It is not arbitrary that these maps look so different. They illustrate top-down community investment strategies developed by the City of Toronto and United Way; and bottom-up community organizing efforts from grassroots groups across the city. The image of Toronto's TTC map, naming systemic issues at each stop, was an active critique by the Grassroots Youth Collaborative (collective of youth-led organizations in Toronto) of the Roots of Youth Violence (McMurtry and Curling, 2008) report commissioned by the Province of Ontario in the aftermath of gun violence in the city. From the onset, the McMurtry and Curling report framed the problem as youth violence (violent youth?), as opposed to root causes of violence affecting young people including poverty, racism, lack of meaningful employment, precarious immigration status etc (GYC, 2008). In the Rooted in Action (2008) report, GYC explicitly identify the systemic nature of the issues facing young people and challenge attempts to criminalize youth and particular neighbourhoods. GYC asserts (Abebe and Fortier, 2008: cover):

“The reality of youth violence is one that does not only affect the 13 priority neighbourhoods identified by the city of Toronto as dangerous or “at risk”. Many of us have come to the realization from our work and relationships with our communities that youth becoming “at risk” comes from a society who puts others “at risk” from being able to participate as equal members”.

Research Context:

Neoliberalism and the changing roles of community

Some of the trends seen in changes in the welfare state and the devolution of responsibilities once offered by the state to communities include individuals being tasked to care for, address and ensure their own well-being and that of their community, in seeming isolation from broader society (Ilcan and Basok, 2004). Systemic issues such as poverty, homelessness and criminalization are entrenched as neighbourhood problems or individual pathologies needing to be fixed through community-level social service programs (Rose, 1999). This inadvertently (or deliberately) masks the systemic roots of these issues and channels resources towards governing individuals instead of reforming, resisting or removing the system.

Within this context, the voluntary sector has increasingly become a vehicle for governing individuals and communities (Laforest and Orsini, 2005). State policies and programming, mediated through the ‘third sector’ (community organizations, the voluntary sector) often depict crime, poverty and violence as located within communities (Rose, 1999). Organizations are increasingly adopting practices in order to deliver on government interests (Laforest and Orsini, 2005). Further, there is an increased vocational and credentialization of ‘community’ work (Rose, 1996). These compounding factors are furthering the distance between organizations and the communities in which they work. Working in this context, community-based organizations, non-profits, charities are not benign, as their ability to advocate for systems-level change is limited (Ilcan and Basok, 2004).

This research builds on critical engagement within current debate on ‘community’ under neoliberalism and its role as both sites of resistance (see hooks, 1990a; hooks 1990b) and sites of governing (see Rose, 1999). Tracing the experiences of frontline workers who are often limited by funding policies and government regulations in terms of the interventions and strategies they can officially use (ie. precarious, short-term funding for direct service), while being fiercely committed to critically challenging policies that pathologize their communities and

improving the material conditions of their communities, offers critical insights into the current landscape.

Regulatory, Policy and Funding Interventions

There are widespread regulatory interventions designed to invest resources into neighbourhoods, based on 'relative disadvantage' (see United Way of Greater Toronto, 2005). This approach, adapted in Toronto as the '13 priority neighbourhoods' identifies neighbourhoods that need service enhancements. This has led to a series of investments in specific spatialized neighbourhoods (United Way, 2005). The Youth Challenge Fund, a multimillion dollar fund from the Province has helped support over 100 youth-led or youth focussed projects within the priority neighbourhoods (Youth Challenge Fund, 2010).

Critical reflections have emerged from frontline organizers regarding the current landscapes in which they operate:

- Youth and community organizers have received some investments in their work, but as the funding ends, so too do the vast majority of projects.
- The focus on specific neighbourhoods means that many organizations, programs and services that create opportunities for young people and communities cannot receive support because of their geographical location
- Collective advocacy, for broader systemic issues including the racialization and criminalization of communities and youth is needed (Abebe and Fortier, 2008).

Investment strategies such as the '13 priority neighbourhoods' are supported for their ability to invest limited resources in places identified through systematic, seemingly quantifiable measures of neighbourhood health and challenges, as being most in need (UWGT, 2005). However, there is an absence of reflection on the implications these strategies have on the people suddenly invested in to change the realities of their communities. A short-term project, run by a youth-led group or increased service delivery is held up as the solution to the structural problems facing communities. However, in reality when the funding ends, many of these strategies end. For example the Youth Challenge Fund leveraged \$30 million dollars to projects within the priority neighbourhoods from 2006-2009 (youth challenge fund, 2010). But this funding has sunset, and there are not resources on that scale available to youth-led and community based groups to support their continued efforts. This has significant implications for these place-based change strategies and the people at the core of them.

Emerging Social Infrastructure and supports for Frontline workers

Increasingly, grassroots community organizers in Toronto are identifying vicarious trauma, stress and burnout as significant health issue affecting people working in communities to address community health and well-being (FPYN, 2009). Short-term funding places community organizers and frontline workers in precarious, unstable working environments as they try to address community health priorities. This exacerbates stress, burnout and vicarious trauma, as workers have access to little by way of job security, institutional/organizational support, and resources to support their health and well-being. In Toronto, intermediary groups and broader social infrastructure is emerging that aims to strengthen the role of frontline organizers in enabling community healing (FPYN, 2009). These groups are developing supports to address issues of community trauma and vicarious trauma; share resources to address critical issues that emerge in grassroots programming and challenge policy discourse that pathologize specific communities and neighbourhoods. (see Grassroots Youth Collaborative, Frontline Partners with Youth Network, 2009). These groups offer critical insights into lived, localized experiences of systemic oppression and transformative grassroots strategies that promote individual and community healing.

Frontline workers and community organizers are a broad stakeholder group that includes frontline staff and volunteers of social service organizations, young people and residents developing and implementing community health strategies, and artists implementing community arts projects within specific neighbourhoods or communities (FPYN, 2009). These are individuals who are often living within the communities they are working, drawing from their own lived experiences to provide immediate and relevant supports to their communities. While there exists general recognition that people involved in 'helping' professions can experience vicarious trauma (Richardson, 2001), there is little research that explores vicarious trauma in place-based work (FPYN, 2009), where the 'helper' lives and works within the same communities or draws from similar personal experiences as those they are supporting.

In their report on Systems of Support for frontline workers, The Frontline Partners with Youth Network identifies significant opportunities for increased supports, collective advocacy and recognition of the roles frontline workers play in supporting community healing (FPYN, 2009). Key findings from focus groups and interviews with frontline workers identify (FPYN, 2009:11):

- Lack of understanding that grief and trauma in frontline workers is an important issue
- Existing supports are short-term, with little follow-up or aftercare (ie. crisis response)
- Lack of consistent group addressing the grief and trauma needs of frontline workers
- Precariously employed workers, and those with less status in organizations have far fewer supports

FPYN (2009) further outlines elements of broader systems of support to address trauma including: long-term initiatives, with trusting relationships; changes in organizational policy to better support staff; communication amongst frontline workers to identify collective experiences, reduce isolation/ sense of being alone in facing trauma; resources, workshops and trainers that are free; secondments/leave to be refreshed; ongoing, consistent space for people to come together and connect. FPYN, as a social infrastructure hub representing hundreds of frontline workers in Toronto, offers significant reflections on where and how frontline workers can be supported as they work for broader community health. This research will build from these lived experiences and identify actionable ways to strengthen social infrastructure to enable frontline workers to continue to create healing geographies.

APPENDIX B: RESEARCH QUESTIONS

Questions

The primer/factsheet that was circulated to you identifies some experiences and challenges frontline organizers face in doing their work. Do these resonate with you?

What do you feel are the strategies and supports that have helped?

What do you feel are things funders, larger community organizations and policy makers could do to better support frontline workers and community organizers?

Is there anything else that you would add?

What questions do you have for funder?

APPENDIX C: RESEARCH PARTICIPANT RECRUITMENT EMAIL

Dear (Participants Name),

I am currently conducting research as part of my Master's work in the Department of Geography and Planning at the University of Toronto. This research focuses on identifying strategies and supports that work to address and prevent experiences of stress, burnout and vicarious trauma in community organizers, frontline workers and residents running projects that focus on improving community health in Toronto. I am writing to you today because I feel that you have much to contribute to this discussion.

As someone who has been involved in community organizing and/or frontline work in Toronto and who is already reflecting on and observing experiences of stress, burnout and vicarious trauma in the communities in which you live or work, I wanted to invite you to participate in a consultation session with other people involved in this work. The focus of this community consultation is on identifying priorities and recommendations for strategies and resources that would better support frontline community organizers in doing their work.

I play multiple roles in the community this research focuses on. You may know me as staff of the Laidlaw Foundation, a private philanthropic foundation that funds and supports grassroots, youth-led groups in running social change projects. **While you consider whether you would be able to/interested in participating in this consultation, it is important for you to know that:**

- My academic research is not associated with the Laidlaw Foundation and is my own independent project.
- **While in my professional capacity I support groups to develop funding applications and provide ongoing support to funded groups, volunteer advisory committees appointed by the Foundations Board of Directors make the decisions about which projects receive funding.**
- Your involvement in this research will have no impact on you based on my professional activities within the communities in which we work. You can choose to participate or not participate in this research project and it will have no negative consequence for you or your ability to connect with me in my professional capacity as a program manager with the Laidlaw Foundation.

If in your professional networks, you know people that might contribute to this consultation based on their work in the sector and reflections on strategies that are working to support frontline workers and community organizers health and wellness, please feel free to send me their professional contact information. If it is not possible to share professional contact information, then you could circulate my contact information to them so that they can contact me if they are interested in more information.

I would be happy to answer any questions you might have about this research project. I have also attached a consent form with this email that provides more information about the project.

Be well,
Ana

APPENDIX D: INFORMED CONSENT FORM FOR RESEARCH PARTICIPANTS

I am currently conducting research as part of my Master's work in the Department of Geography and Planning at the University of Toronto. This research focuses on identifying strategies and supports that work to address and prevent experiences of stress, burnout and vicarious trauma in community organizers, frontline workers and residents running projects that focus on improving community health in Toronto. I am writing to you today because I feel that you have much to contribute to this discussion.

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- Your involvement in this research will have no impact on you based on my professional activities within the communities in which we work. You can choose to participate or not participate in this research project and it will have no negative consequence for you or your ability to connect with me in my professional capacity as a program manager with the Laidlaw Foundation.

If you have any questions, please feel free to contact my supervisor Dr. Sarah Wakefield sarah.wakefield@utoronto.ca, 416-978-3658 and/or Office of Research Ethics, ethics.review@utoronto.ca, 416-946-3273. You can also contact me at any time to ask questions. I can be reached at: ana.skinner@utoronto.ca/ 647 637 8501.

Be well,
Ana Skinner

Consent details

Background

This research focuses on identifying strategies and supports that work to address and prevent experiences of stress, burnout and vicarious trauma in community organizers, frontline workers and residents running projects that focus on improving community health in Toronto.

Process

If you choose to consent and participate in a community consultation session, you will be involved in a group discussion that focuses on strategies and supports that are helping frontline workers and community organizers to be more supported to do their work.

How will information be collected?

- During the consultation session I will be taking detailed notes. You will also be breaking up into smaller discussion groups and capturing notes on flip charts or electronically.
- The consultations will not be audio or video recorded.

What will happen with the information collected?

- Notes from this consultation session will be analyzed and a short primer/fact sheet will be produced. These notes will also be used in my longer thesis report.
- The notes from this consultation session will be kept in a secured cabinet at my home indefinitely. This is in case they can be used for future research projects. These notes will not include any personal information about you.

What will not be included reports?

- Your name and/or any information that could identify you will not be included in reports or discussions.

What may be included in reports?

- Direct quotes may be included in reports with any identifying information removed. You would be identified under a generic title such as “a frontline worker” or “a community organizer”

Will people know that you participated in this consultation?

- Your name or any information about you will not be included in the research notes and any reports that developed from this consultation.

- While I will not be using revealing information about you in reports, because this is a group discussion it will not be possible to guarantee that other participants will maintain confidentiality.
- Everyone who participates will be asked to maintain each other privacy and not discuss individual people contributions outside the consultation session.

What happens if I no longer want to participate?

- You will have the ability to leave the consultation sessions at any point in the discussion. Because it is a group discussion it may not be possible to remove your ideas from the discussion if they resonate with other people in the room.
- If you choose not to participate there will be no negative consequences to you in terms of our ability to work together and connect around my work with the Laidlaw Foundation.

What if I want to participate in the research project, but not as part of the group consultation?

- If you are interested in this research project, but would prefer to be involved in a one-on-one interview instead of the group discussion, we can organize that at a time that is convenient for you.

How can I suggest other people to participate in this research project?

If you know other people that you feel would be interested in participating in this research project, you can:

- Share their professional contact information with me (sorry, I won't be able to contact them through personal contact information that you might have)
- Tell them about this project and provide them with my contact information so that they can contact me directly to hear more.

Who do I contact if I have questions or concerns about this research project?

If you have questions or concerns about this research project you can contact:

- Researcher: Ana Skinner at ana.skinner@utoronto.ca or 647-637-8501
- Research Supervisor: Dr. Sarah Wakefield at sarah.wakefield@utoronto or 416-978-3653
- Office of Research Ethics, ethics.review@utoronto.ca, 416-946-3273

Consent Form

Name of Informant:

Date:

Consent:

Has this research process been explained to you, have you had a chance to ask any questions and receive adequate information?

Yes

No

Are you comfortable to participate in the community consultation?

Yes

No

I have had reviewed the information above, have had the chance to ask any questions, identify concerns. I am comfortable to participate in this research project by sharing an previously conducted interview.

Signed:

Date:

APPENDIX E: TOOLS FROM THE FRONTLINES: STRATEGIES AND SUPPORTS THAT COULD IMPROVE HEALTH AND WELLNESS

Strategies frontline community organizers are using to help improve their health and wellness, as well as that of their peers

Strategy	Grassroots insight
Livable wages/adequate pay and benefits	<i>“People are used to getting paid nothing and then have to keep adding on more projects and contracts to be able to basically survive. There is a need to ask for more/demand more/ not just do everything for honorariums”</i>
Professional Development	<i>“We had budgets for professional development. This included using dollars and aeroplan miles. We wanted to invest in people’s development. People are happier when the feel they are learning and growing. We had always believed in investing in people.”</i>
Boundary Training	“We have mentors in our group. They were involved in the program, have good connections with the participants because they are the same age. They have harder times with boundaries than me because of how age works, as well as power and privilege. We have conversations about things like how you can’t flirt with someone in a workshop. A workshop is a one-time thing so if you run into someone outside the workshop you can talk to them.”
Saying ‘no’	<i>“Being able to say no when you’re being asked to take more on and you know you can’t do it. Or wouldn’t be able to do it without it taking too much from you. Stressing you out, burning you out or stretching you too thin.”</i>

<p>Access to political discourse/ anti-oppression analyses</p>	<p><i>“learning about and being exposed to broader context analysis is protective and sustaining for frontline workers”.</i></p> <p><i>“The idea of being able to see yourself and that your work is bigger than the sea that you currently think you’re swimming in can enable people to connect to their spirit, feel less isolate and alone”.</i></p>
<p>Values alignment between individuals and the organizations they work for</p>	<p><i>“As a frontline worker, when you are in an organization where the leadership is taking responsibility in naming systemic issues, a certain relaxation can happen on the frontline. There is a clearer context to the work and a sense that a certain responsibility is happening at the right level. Naming systemic issues helps frontline workers contextualize their work and roles. You can feel more belonging to these organizations and you believe in it. This enables frontline workers to not feel like they have split their loyalty between the organization and the community”.</i></p>
<p>Bringing creativity into workspaces</p>	<p><i>“The role of imagination is part to reclaim our identities as humans, creationists, entrepreneurs. It sounds ethereal, but there is huge proof of it here. When people are nourished in their imagination they work better.”</i></p>
<p>Creating dedicated/ intentional space to name struggles with burnout and trauma</p>	<p><i>“What these times represented was a time for staff to sit together, to share. The trauma’s we were managing are vicarious because of what is coming up in the community. People being shot, struggling on social welfare, someone’s house burning down. Things happen to people in life, but people who don’t have a wider social support network. Questions like: ‘how do we help people?’ ‘Where do we draw a line?’ The personal relationships we have developed with community members in times of trouble means you can’t just say ‘no we can’t help’ and step outside of your job.”</i></p>
<p>Accessing Counselors</p>	<p><i>“It seems kind of bandaid, but being able to access counselor services would be really helpful. But there is a need to find the right people, people who understand what it is like, and can connect.”</i></p>
<p>Integrating counselling/therapy tools into community-based work</p>	<p><i>“We can’t say art for art sake anymore. It’s not about adding more money, its adding more value. How do therapeutic agencies start to explore how they can work with youth groups/community groups? These agencies aren’t in the community. Therapy is assumed to be an individual piece. But they could be supporting community work”.</i></p>

<p>Having a point person to address triggers if they come up in a project</p>	<p><i>“A strategy to address this is to bring in a supervisor, someone who’s clear role is to deal with triggers. It doesn’t have to be a therapist. Therapists are sometime seen as magical, like they can fix everything.”</i></p>
<p>Connecting to peers and a community support network</p>	<p><i>“One strategy FPYN uses is naming things so that they are in the room (eg. explicitly naming constraints that people involved in frontline work are facing allows them to feel more relaxed in the space). FPYN is strategically placed to take risks, validate and bring attention to issues facing frontline workers that individual workers often don’t feel they can name because there are vulnerable. FPYN deliberately and explicitly names constraints and realities facing frontline workers</i></p>
<p>Focus on systemic change</p>	<p><i>“Burnout and vicarious trauma are systemic, organizational, community and personal. It’s on us all to figure out what are the areas that help deal with the daily and personal stuff that comes up”</i></p>

APPENDIX F: FRONTLINE COMMUNITY ORGANIZERS QUESTIONS FOR FUNDERS

Questions from the Frontline:

Frontline community workers had the following questions for funders.

Acknowledging systemic racism and systemic oppression:

- “Embedded in the language of priority neighbourhoods are streams of unspoken and spoken racism. Funding has colonial, racist and particular models of ‘charity’ that have top-down, colonial, ‘I am helping you’ embedded in it. How do funders reflect on this? I have never seen a funder step up to the plate and say that they are doing the best they can in a context that is colonial and racist.
- Do funders understand how fundamentally oppressive our society is? and how the hell do they expect groups to really change things...I mean I see change happens all the time, but sometimes it can feel like you’re going in circles and working against funding arrangements to make things happen.
- Do you believe that there are systemic issues affecting our communities and marginalized communities?

Critiquing what is and Doing things differently:

- If funders had their ideal way of funding, what would it be? How do they see themselves being part of the long-term community?
- What constraints do funders face? What is getting in the way of working differently with communities?
- Change is hard and we are asking people to be part of difficult conversations about unintended outcomes; walking into the unknown; occupying that space that is really uncomfortable for everybody. How do we continue to keep space open for the unknown and for tensions? What are funders willing to give up? What are they willing to sacrifice to be part of this change process?
- If funders are hopeless, then why?
- What does it mean to fund creative people that are not artists? Have funders thought about how to be in relationship with extremely creative people that are not creative in art? How can you fund creative people?
- Do you find that funding initiatives that are short-term, or issue focussed (not multifaceted) that are trying to respond to some of the issues affecting our community is

enough to tackle the problems that our communities are experiencing?

- Do funders think this model is working? That it is healthy? That it is producing the results they want? Or is it just the only way they know how? A funding model based on a business.
- Are we making the world a better place through this model? And how is it working and at what cost?
- I have questions around the non-profit industrial complex. Do funders see the links? How do we work to overcome it?
- How do we move forward in the not for-profit sector within the current landscape and arrangement where government is stripping away investments in education, health, organisations that work with communities and vulnerable people? how do we actually do it?
- Do you want to build cohesion in the sector? Do you see how the current approach leads to lack of trust in the sector? When groups feel insecure, it contributes to lack of trust and collaboration. Reducing the precariousness of individual organizations can strengthen the sector as a whole because people can share more and can invest more in helping new and emerging groups.
- What is the end goal of your funding organization? Do you want to build sustainable groups? or do you just want to build new groups to get to a certain point and then move on to the next round?
- How do you decide the focus of your granting streams? Is it the hot button issue of the day? It seems short-term. Funders are setting short-term agendas. This has implications for organizations trying to do systemic and structural work. Culture transformation doesn't happen through hot button reactions. It feels arbitrary.
- Do we need changes in a systemic way?
- How important is it for a funder to be really close(meeting regularly, providing feedback, trying to add ideas, being more present in the development and implementation of the initiatives they are funding) to the initiatives they are funding?

APPENDIX G: EXAMPLE OF SELF-CARE INTEGRATED INTO A PROJECT BUDGET

ADMINISTRATION				
Printing, admin supplies (markers, flip chart, pens, etc.)	\$100			\$100
LIFT Organizational membership	\$120	\$120	Toronto Arts Council (unconfirmed)	
Admin Fee for Accountant Services (2.5%)	\$1179	\$1179	Toronto Arts Council & Ontario Arts Council (unconfirmed)	
Self-Care and Community Mental healthcare activities for SFA participants, staff and volunteers i.e. group outing to a theme park, staff spa day, etc. (2.5%)	\$1179			\$1179
Total	\$49,509	\$24,819		\$24,690

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Embedding self-care into our work

May 9, 2013

by Ana Skinner, youth organizing manager

The groups the Foundation works with are at the frontlines of community transformation, innovation and change. While you'll see descriptions of our grantees across our website, you won't necessarily see the people behind these projects or know the depth of their commitment to this work. The Foundation works with groups that reflect and live the experiences they are working to change. These are young people who are often from the communities they work in, and honestly, would be doing these projects no matter what (with or without funding) because they see that there are gaps that need filling and new ways of approaching problems that need testing.

It feels like the nature of this work means that boundaries in any conventional sense can't exist. I hear about grantees running into their program participants in the grocery store, on the bus, and how this makes them feel like they need to be 'on' and act as role models 24/7. I know that people are called on at all hours and that in many cases if they don't answer the phone, there isn't someone else out there for that young person to reach out to. Our partners are working in communities that experience the impacts of systemic issues in very real ways- communities facing criminalization, economic marginalization, racism and structural violence. To say this is stressful is a gross understatement.

When the Foundation brought its grantees together in April 2013 to help inform our strategic plan, the prevalence of burnout across their groups and the sector was named.

The need to ‘help the helper’ and ‘heal the healer’ was also [shared](#). There is no one fit self-care or community-care strategy. Some groups I work with build in group retreats and field trips while others access counselors and therapists. Some participate in networks like the [Frontline Partners with Youth Network](#), and others spend time debriefing over good food when it’s been a really hard day. These are all important activities. Real, sustained change can’t happen if the people behind it are stressed and burnt out. Creating vibrant, empowering community spaces can’t come at the expense of your own health and wellness.

Self-care and community-care strategies are not separate from running an effective community project-they are essential to it. And as funders, we need to intentionally invest in the people behind the projects we support.

Available online: <http://laidlawfdn.org/2013/05/09/embedding-self-care-into-our-work/>

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