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providing care: a collaborative affair

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POLITICAL RESPONSIBILITY

Marie-Claude Ouellet

COORDINATION

Michelle Poirier

WRITING

Marc-Antoine Durand-Allard, Union Consultant,
Task and Organization of Work Sector

Julie Rioux, Union Consultant,
Labour Relations Sector

TRANSLATION

Jennifer Banks, Union Consultant,
Communication-Information-Web-Translation
Service

REVISION

Myrna Karamanoukian, Union Consultant,
Communication-Information-Web-Translation
Service

SECRETARIAT

Luce Dessureault, Secretary,
Communication-Information-Web-Translation
Service

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INTRODUCTION

Since its founding in 1987, the Federation has stayed true to its mission: giving a strong voice to healthcare professionals. It also works at the heart of public health care for the benefit of citizens. The Federation's very mission embodies this dual responsibility toward patients and its members. For 30 years, the FIQ has continuously spoken up against threats to the Quebec public health system and taken a strong stance against those who support the commodification of healthcare services and oppose social justice. And more recently, the Federation embraced innovation by adopting proposal-oriented unionism.

This enabled the organization in 2014 to decide on a few possible courses of action for working toward “new models”. The new models were meant to renew public services by proposing solutions that would bridge the gap between what the public health service offers and communities' actual healthcare needs. The Federation also broadened its notion of the new models in order to revitalize its union democracy, improve member participation and rethink its alliances.

The Federation is on the lookout for the ideal conditions to support the creation of a new union force in health care; implementing the FIQ | Secteur privé was the first step. In an effort to renew public services, the Federation also became invested in starting local initiatives to open neighbourhood clinics and develop alternative long-term care centres for seniors in partnership with the community. However, these new models began as pilot projects and couldn't be standardized and implemented on a large scale. As a result, they have been carried out in various ways since 2014. The FIQ still feels the general idea behind this initiative is relevant: to make room for creativity and dare to do things differently.

It is therefore a good time to review the ground we have covered over the last ten years to inspire the organization's project. Consequently, the idea behind the 2017 Convention is that the “new models approach” will be relaunched on a broader scale and integrated into the daily management of the collective work contract.

RENEWING OUR UNION: A CONTEMPORARY ISSUE

“The health system reform is already drastically changing the landscape of Quebec unionism. That is why there is an urgent need for debate on what needs to be done to ensure strong mobilization against opposition to social justice.”

Christian Nadeau

“Agir ensemble : penser la démocratie syndicale” (2017)

Right-wing commentators have been proclaiming the end of unionism for a long time. Remember that in the [post-truth](#) eraⁱ in the U.S., Canada and Quebec, the rate of union membership decreased on average by about 1% between 2006 and 2015.¹ When the Federation was founded in 1987, the rate of union membership in Quebec was 40.7% compared to 39.6% in 2015. That said, we mustn't go thinking that the union movement is fine and that there's nothing to worry about. On the contrary!

Next, the current of renewal emerged following what has been described as a period of crisis of legitimacy and decline. Unions had to start questioning their methods and extend their action to broaden their influence. Some called it “social movement unionism”²; others “proposal-oriented unionism,”³ concepts that were addressed at previous conventions. Today, we are still in a period of renewal and making room for creativity. Any ideas that can “[save](#)” unions from their conservative and paralyzing habits are welcome.

Closer to home, the category “Health care and social assistance” accounts for the majority of jobs with a 14% rate of unionism in Quebec. This category alone represents almost a quarter of the overall union membership in our province! And in 2017, the classic symbol of a unionized labourer—a male factory worker⁴—is being replaced by a more diversified vision where women have a stronger presence and the public sector is the established centre of union action.⁵ As such, it is only natural that the Federation acknowledge this state of affairs and play a pivotal role in the social and political battles of our time.

Collective action in the era of social networks

The advent of the Internet and, above all, social networks, in the last ten years is another important factor to consider. Clearly email has made communication easier and we now have an unprecedented wealth of information at our fingertips. What's more, smartphones and networks like Facebook (2004), YouTube (2005) and Twitter (2006) have completely changed

i. The expression “post-truth era” cropped back up in the media with *Brexit*, the referendum on June 23, 2016, in which the United Kingdom voted to leave the European Union, and Donald J. Trump's presidential campaign between 2015 and 2016. The post-truth era can be described as “the dangerous tendency of western democracies to believe less in facts in political debate, and more in lies told with conviction.”

the playing field. In just a few years, social networks have become a key virtual platform where anyone's ideas, opinions and emotions can become the subject of public debate—to the extent that one might think that political or collective action had gone digital. However, recent experience tends to disprove this theory.

For example, *Arab Spring* events were labelled as *Revolution 2.0*. Social networks like Facebook provided a platform for those involved to demand more freedom and rights. *Revolution 2.0* is a catchy name but the reality is a bit different. One way or another, this [experience](#) teaches us a lot about what social networks can and cannot do. First, they gave us a platform to expose and share situations that were unjust or unacceptable.⁶ Next, and most importantly, social networks quickly became the revolution's eyes and ears, letting people know where to go, when, and what was happening on the ground. The revolution was really happening in the streets! It was a rallying point for activists, whether they were connected or not. This underestimated logistical support played a crucial role in the *Arab Spring*.

Social networks did not create these mass protests. However, these new tools supported the movement by giving activists and their supporters varied points of views live from the ground (as opposed to updates from public TV).⁷ But with or without *Revolution 2.0*, we know that social networks were a strategic tool for *Arab Spring* activists and that we can learn from how they were used. We saw the same thing with the student strike in the spring of 2012. Student activists could follow police interventions live and find protest itineraries on Twitter under the *#manifencours* hashtag. Social networks served as an efficient way to coordinate events and a valuable source of information from on the ground, mostly in the form of [citizen journalism](#).⁸

Social and protest movements can definitely benefit from social networks. And they aren't the only ones exploiting these platforms; politicians use them increasingly to shape their image and send messages to a target audience. For example, Canadian Prime Minister [Justin Trudeau](#) has 5 million followers on Facebook and over 3 million on Twitter. His selfies with public figures and “everyday people” get him coverage in traditional media.⁹ One of Justin's father's famous quotes was “Just watch me,”ⁱⁱ whereas Justin's might as well be “Just watch my selfies.”

All the same, Canada's and Quebec's use of social media in politics is nothing compared to their American counterparts. American President [Donald Trump](#) continues to make waves on Twitter in North America. At 70 years old, he's not your typical social media user. He shamelessly tweets supposedly original, raw messages that reflect his personal emotions on current situations.¹⁰ What's more, his short, ambiguous messages leave ample room for interpretation, leaving his supporters to take away what they'd like. This is surely one of the keys to his success. He knows how to get traditional print and broadcast media to talk about his online antics.¹¹

ii. That was Pierre Elliott Trudeau's reply to the journalists on Parliament Hill about his strategy for dealing with the October Crisis in 1970. Soon after, his government invoked the *War Measures Act*.

The candidate received an estimated [2 billion dollars](#) of free broadcast time on traditional American media,ⁱⁱⁱ in reaction to his tweets, and that was only during the race to win the Republican nomination (2015-2016).

His rivals (Democrats and Republicans) could never outshine him online. Only Vermont Senator, Bernie Sanders (at 75 he's not your typical social media user) became the social media [king](#) in the eyes of a small group of young, urban, university graduates.¹² On a smaller scale, he used social networks to gather support from a very specific group of electors who shared ideas using hashtag *#feeltheBern*, popular across American campuses.

Despite the positive depiction supporters were creating online in favour of Senator Sanders in the Democratic nomination race, Hilary Clinton won.

As for staying informed, today, even the most conscientious user cannot get news in a neutral way on the Internet because of [algorithms](#) which select content based on user navigation. This makes it almost impossible to have a real debate on the Internet. In other words: there are no real debates online. Philosopher Christian Nadeau warns labour organizations about it. "On the Internet, instead of choosing exposure to diversity, people tend to seek out ideas and values that mirror their own."¹³ By giving a voice to a type of poorly informed dissent, social media creates a huge challenge for labour organizations, which are more used to consensus when making decisions. Even during the student strike in spring of 2012 in Quebec, everything suggested that on social media "there was a tendency toward avoidance rather than ideological confrontation. (...) It is with caution, restraint, and care that one challenges others' ideas."¹⁴ Deference among users makes it difficult to have a real debate, while leaving the floor open to trolls (users who sew discord online).

Moreover, one of the main drawbacks of social networks is the lack of offline social interaction, [real face-to-face meetings](#).¹⁵ Online activity does not directly transfer to users' daily life. As we mentioned, the strength of the *Arab Spring* came from the activists' perseverance on the ground, from physically occupying spaces and chanting slogans. In the same way, Donald Trump and Bernie Sanders always tweeted in response to a public appearance or while participating at a supporter meeting, where real connections could be made between supporters.

The strength of a social movement still stems from the close relationships between activists and their supporters. People have to socialize, get to know each other and build trust before

iii. By the end of his run as Republican nominee, Donald Trump had only invested a mere \$2 per vote, that's 120 times less than his adversary Jeb Bush (\$241/vote) and 129 times less than Chris Christie (\$257/vote).

taking risky action to bring about social change. Consequently, “e-activism” or “slacktivism”, requires minimal risks, and is often confined to sharing viral videos, with adaptable and resilient operating, but is not enough to organize structured and sustainable action. By definition, a network is the opposite of a structure.

Social networks are therefore useful for educating the public on issues and keeping people up to date on what’s going on. However, political action and real social change do not happen through the web alone. We saw it during the last round of negotiations of the provincial collective agreement when our members across the province followed the FIQ’s union reps’ actions in real time on our Facebook newsfeed. An idea will only have a real impact if it is properly coordinated with offline action on the ground and online activism on social media. Social media will only have made an impact on the outcome of these movements because of the combination of groundwork and strategic use of social media. In all likelihood, history will continue to be made in the street.

RAISING EXPECTATIONS FOR MORE RELEVANT UNIONISM

We have seen that Quebec unionism has managed to keep its head above water up until today. Despite how the global economy has changed, unions still exist. Meanwhile, as a labour organization, the FIQ is usually in a constant cycle of periods of calm followed by periods of resistance. However, there has been a rapid succession of periods of unrest over the last years forcing the Federation to continuously test its capacity to fulfil its union role.

As every struggle revolves around specific objectives, unions generally promote realistic expectations in order to keep prospective negotiated agreements within reach. This pragmatic approach channels action toward achievable collective objectives. However, such pragmatism largely restricts what members demand and expect of their union. Requests that are bold and perfectly in line with their main demands will likely rile them up. In such a case, there’s a risk of losing control of the members’ combative drive, which is why the unions tend to organize their struggles around elements that lead to a negotiated conclusion.¹⁶ That said, we must admit that reconciling interests which in turn leads to making weaker demands, ultimately depletes the build-up around actions that members get involved in. Although there is a very real risk of losing control over members’ enthusiasm in a struggle, we must not underestimate the risk of members’ altogether losing interest in their union.

From the moment a union is no longer able to channel the expectations and demands of its members, its relevance is at stake. The situation becomes even more risky when a union acts as a third party, isolated from its members and merely acting as a pressure valve between workers and their employer.¹⁷ Acting as a third party means that the union respects all of the rules the parties agreed to. However, depoliticizing union action can reduce a union’s role to one where

it dispenses services *à la carte* and provides technical or legal representation, like an insurance company.¹⁸ Then, activism and the political aspect of union action, which involve a certain type of rebelliousness, audacity and rule-breaking, come into stark contrast with reality, bringing things to a standstill.

The Federation's union relevance, to some extent, lies in its capacity to improve its members' economic conditions. To become even more relevant, a union must broaden the scope of its demands beyond the economic sphere and management of the collective work contract. Over the last few years at the FIQ we started making an effort to go beyond fighting for better financial conditions for healthcare professionals and striving for demands that are highly meaningful in their day-to-day through the promotion of a culture of advocacy.^{iv}

That said, it is sometimes difficult to see exactly how individual demands will come together to achieve a common objective."¹⁹ All the same, we are able to reconcile our members' individual and collective interests around [fundamental issues](#). We feel that two key topics could be brought even further to the forefront in contemporary union action: defending the health of our members and their professional integrity.²⁰

The first topic, our members' health (physical, mental and well-being), refers to promoting a more comprehensive health and occupational safety approach. Although there are laws that protect workers from extremely dangerous work conditions that were prevalent at the beginning of the century, that doesn't mean that healthcare professionals aren't currently working in [conditions that endanger their health](#). Today, occupational diseases (that are directly related to or characteristic of a job) account for almost 1% of all common work-related injuries among our members. And the high rate of disability among healthcare professionals indicate that there is a real problem: our members' work puts their physical and mental integrity at risk.^v

Defending our members' physical and mental integrity means "no longer accepting that workers be subject to an environment and work conditions that are harmful to their health for the benefit of capitalism—profitability and productivity."²¹ Compulsory overtime is imposed on a majority of our members and serves as a prime example to illustrate this issue. Despite all of the denunciations and promises made by employers' representatives to end this practice, it never seems to get resolved. For healthcare professionals, compulsory overtime constitutes a double-edged sword—someone will suffer whether they work it or not, whether it's patients, colleagues, the organization or the health professional herself. This "obstacle to practising their profession competently"²² generates suffering among our members which often translates into work dissatisfaction and moral distress. It creates an untenable situation where suffering "puts the relationship between caregiver and patient in jeopardy and creates imbalance in the

iv. A culture of advocacy refers to defending patients' interests through the activism of healthcare professionals. A good example of this is promoting safe care. Quality and safe care depends as much on care outcomes and organizational structures as healthcare professionals' conditions of practice. Fighting to improve these conditions is what the culture of advocacy is all about.

v. What's more, the CNESST identified the *Health care and social assistance* sector as a priority for inspections between 2017 and 2019. The CNESST wants to get to the bottom of the main causes of work-related injuries in this sector, including musculoskeletal disorders, falls and workplace violence. (CNESST (2017) *Santé et sécurité au travail : Planification pluriannuelle en prévention-inspection 2017-2019*)

nurse's life, eventually damaging his or her health."²³ This is just one example, and healthcare professionals clearly have the right to expect their union to formulate a coherent and efficient answer in response to their legitimate demand to practice their profession without putting their health at risk.

The second topic is professional integrity and refers to the power our members have in their profession. A union that represents professionals has a duty not only to work to achieve good working conditions, but also to enhance good jobs, i.e., [enriching professions](#). By defending their professional integrity, it becomes possible to break with the reigning mediocrity, a key component of the technocracy that governs society. The latter is characterized by the central role played by productivity and efficiency experts and pseudo-scientific methods that tend to legitimize decision-making processes.²⁴ This rigid rationality leaves next to no room for any form of democracy in the workplace. These experts have specific traits that are easy to recognize in many managers in the health network. Their philosophy encourages people to respect rules and authority without questioning it, puts value on the vocation and self-sacrifice to the detriment of critical thinking, expects healthcare professionals to only propose objective ideas and condemn anything that resembles conscientious objection.

This technocratic drift is seen in Quebec health care settings where, behind the shiny luster of the "best-practice optimization" hide [administrative and budget constraints](#) which in turn require new protocols, new forms and the compilation of new statistics. Multiplying these seemingly ethical requirements is a way of de-professionalizing care, which goes hand in hand with employers' increased monitoring capacity. The more supposedly "objective" management technology is used, the less healthcare professionals are expected to use their intelligence in the performance of their duties and work organization. It's as if [professional judgement](#) must give way to care automatization and standardization. That is why it is so important to defend the professional integrity of the union and its members.

The drift is so great that many healthcare professionals feel that they are no longer allowed to provide care. To fight for their professional integrity, we need to think critically and act as a catalyst to stimulate critical thinking among our members. Former labour organizer Jane McAlevey from the American Federation of Labor - Congress of Industrial Organizations (AFL - CIO) says that to mobilize people, unions must [create conditions](#) that will enable most people to see the existing connections between decisions made by the economic and political elite that govern us (which are often hard to distinguish) and their professional context. They also need support in order to oppose elements that constrain their professional judgement, which is not limited to assessing their patients' medical condition.

In addition to enduring multiple external constraints, healthcare professionals must deal with [constraints due to their status as women](#). For one thing, they are often deeply invested in invisible work because they are mothers or caregivers. We naturally turn to healthcare professionals to take care of others. As such, the line between their paid and non-paid work is particularly fuzzy. It is important to acknowledge this aspect of their job so that they can deepen their demands regarding their experience not only as workers and healthcare professionals but also as women and citizens.

The first step toward change is for our members to recognize and expose problematic situations. The second is to recognize their power to change things and take action. When women and healthcare professionals speak up and stand up, we need to recognize them and celebrate their true value. Not only will this recognition give courage to and inspire those who would instinctively be driven to play this role, but celebrating their boldness sends a clear, symbolic message. The sheer energy that goes into disciplining healthcare professionals is equal only to the often unexpected power that they possess.

Recognition and peer solidarity should be officially integrated into the Federation's processes. Since the FIQ encourages its members to speak up, it should promptly show support, without fail, to those who, after reporting a situation, making a conscientious objection, or advocating for others are [penalized by their employer](#).

The Federation must dare to raise its members' expectations. To do this, we need to be able to shake them up by showing an accurate depiction of the conditions they often tacitly accept but shouldn't. Next, we need to train them to recognize and accept the power they have over their immediate situation. Finally, it is key that we have them build solidarity around their goals and desire to improve their living and practice conditions. We believe that mobilization around this FIQ-led initiative will come naturally if we remain focused on aspects that are deeply inherent in their experience as healthcare professionals. Ultimately, the union should only fuel and channel its members' energy and power toward the appropriate bodies.

Recommendation 1

Amend the Union Defence Fund regulations to include defending our members' when they are penalized for exercising advocacy.

Recommendation 2

Create two prizes (one individual, one collective) that will be awarded at each convention to recognize a member's or group of members or union reps' exceptional union work.

Recommendation 3

Develop an action strategy that aims to fight to improve the physical, mental and professional integrity of our members and raise their expectations thereof.

OUR UNION PROJECT: TAKING A STANCE

“And one of the first steps is to dispel the suspicions that extreme democratic parties still use to delude people.”

Jean Jaurès

“*Question de méthode*” (1901)

In order to move forward with our union demands, we must frame the issues that affect us in a coherent and strategic way. Let’s take social inequality for example, which is often calculated injustice. A “[desert of care and services](#)” is not a random occurrence.²⁵ It is more so the result of the political distribution of resources and distributive justice: care inequalities are created and can be fought at the source. The strength behind our message will come from our ability to overturn the fatalism that feeds certain rhetoric.

Regarding our own initiative, care is the smallest common denominator that unites the Federation’s members. It is through care that we are connected to a community’s fate. Care represents an action as much as a relationship with others. The French word for care, *soins*, is a bit limiting in meaning, which is why many francophone authors instead use the English word “care.”²⁶ The French word *soin* describes a very specific action, while the word “care” allows for much broader interpretation. To *care about* does not mean to *provide care*. That is why the English word is commonly used in French. Pointing out this distinction may seem redundant to some but “educating about politics is always a lesson in language.”²⁷

Care is political

The philosophy of care presents feminist principles that are inseparable from the identity of healthcare professionals. These principles are also in line with the values the Federation promotes. To put it simply, to adopt a care ethic means recognizing that one’s interdependence is essential to one’s independence. No one can be completely independent or untouchable. Care can therefore be described as a dialectic between independence and vulnerability. According to the philosophy of care, to be thorough, all analyses must take one’s independence and vulnerability into account.²⁸ As such, *care* highlights the role of the caregiver, which is so often invisible.

Human relationships must serve as a foundation for reflection rather than individual action. These relationships may very well be partial, invisible or uneven, but they are always present. Logically speaking, a positive resistance movement should take action, but its oppositional strength will lie in the relationships between its activists.

The philosophy of care prompts us to reframe our demands in order to make care political. Only then can healthcare professionals pull away from healthcare techniques, tasks and institutions and propose major change.

In our view, the state of our healthcare system reflects the state of society. So we need to question those in power and denounce their lack of social responsibility. Our health system's capacity to provide safe, quality care, which depends on healthcare professionals' conditions of practice, must go beyond what's written in the collective agreement. Real care comes from the standards that we collectively agree to, based on real experience: "To be *for* relationships is to abandon moral certainty for ethical concern."²⁹ In short, true care comes from experience and the relationships between those involved. This notion of *care* includes important players in the discussion who are normally left out of the social dialogue. That is our counter-speech.

Small alternative projects

With the convention in 2008 and in 2011, the Federation made a major change in how it conceptualizes its union action. The recommendation to practice social movement unionism evolved toward proposal-oriented unionism which challenged us to propose alternative, independent and promising union projects. The challenge of proposal-oriented unionism is in mediating between proactive and defence strategies which allow us to respond to our members' goals. That is how the Federation entered the public debate on not only protecting but [renewing the health network](#). Proposing a project that shakes the dominant power structures and consolidates the collective's strength: "offering alternatives is a fundamental aspect of unionism and the oppositional force it embodies."³⁰ Furthermore, strong proposals can also encourage members to positively identify with their organization.

Starting in 2014, the Federation's proposal-oriented unionism led us to fight for [alternative projects which received a lot of media attention](#). We now regularly refer to them as "the new models." The Federation gave a significant amount of support to the [SABSA^{vi} neighbourhood health clinic](#), to demonstrate how Quebec's public health system can renew itself by tearing down certain unjustified barriers to the professional practice of specialty nurse practitioners. The project also served as a reminder that the renewal cannot be reduced to market-plus-State antagonism; communities can also play a role. The Federation went on to support additional alternative projects in [Outaouais](#) and [Montréal-Nord](#). The approach was the same for each project: demonstrate that the inequality of care stems from the irresponsibility of those in power. This results in healthcare professionals being confined to mediocre organization where "professions give way to function, practices to techniques and competence to execution."³¹

A clear initiative to steer action

This state of affairs is also present in the rest of society, which seems to be marked by inaction. The social progress made in Quebec in the '60s and '70s dates back to a bygone era when workers' struggles were settled with major gains. The few social battles waged since then have led to a rather bleak contemporary political offering. The subsequent result seems to be citizens' chronic disinterest in the political process. The only other option available to traditional parties seems to be right-wing populism or radicalism. Indeed, the rise in right-wing populism could very well be due to the slump in support for politics across the spectrum, thus making this electorate appear to be a [social majority](#). All evidence points to a political crisis due to

vi. La coopérative de solidarité de Services à bas seuil d'accessibilité (S.A.B.S.A.)

“the lack of a dominant social block” to support a large-scale collective initiative.³² Montreal philosopher Alain Denault says that we are living in an *extreme-centre* political regime, “the extremism is translated into an intolerance of anything that doesn’t fit into a middle ground arbitrarily chosen” by decision-makers.³³ In the end, this political centre imposes [technocratic government management](#) and sinks us into the status quo under the pretext of economic vitality and good governance.³⁴

In response to this, we believe that we need to extend the “new models” approach, mentioned earlier, and promote a major alternative initiative, as much in the workplace as in our communities. Faced with decision-makers’ lack of productive imagination, it’s up to us to take action! That’s how we can make care political and care for the world we live in.

To achieve this, the Federation must create a healthcare platform that is accessible to everyone and which reflects the values and objectives of healthcare professionals across all areas of healthcare and social determinants. Healthcare professionals are already acutely aware that health (physical, mental, psychosocial and general well-being) is determined by individual characteristics, life circumstances, the social system and the environment we live in.³⁵ Logically, the conceptual framework of our platform will be inspired by social [health determinants](#). To defend care ethics and, moreover, prevention ethics, is to acknowledge that health cannot merely be summed up as not being sick.

A project of this scope cannot be undertaken absentmindedly. It will require a group debate between the union representatives and healthcare professionals that we represent. First, we will need to launch a major training campaign in the institutions, just as we did with the training series on patient advocacy. These training sessions will allow us to raise awareness and keep our members informed on their social health determinants as well as those of the people they provide care to every day. It will also be an opportunity to discuss and present the Federation’s proposals and hear our members’ proposals. Once a sufficient number of our members have received the training, the local union teams should then lead actions to inform even more of our members and ensure that those who took the training participate in spreading the ideas behind the project. After this period of activity, we will be in a position to start a healthcare platform that will translate the values and objectives of healthcare professionals into “bringing public constraints to the attention of those in power, driven by a collective will.”³⁶ In time, the basis and conclusions of this reflection should be posted on our website. This platform will enable the Federation to play the role of a healthcare think tank, to reaffirm its leadership as an organization at the heart of health care, and to consolidate its union strategies throughout the organization.

Recommendation 4

Continue promoting a culture of advocacy, taking a stance in favour of care.

Recommendation 5

Start a collective debate among our members in order to create a healthcare platform.

RENEWING OURSELVES THROUGH OUR REGIONAL BASE (SPATIAL FOUNDATION) AND SOCIAL CAPITAL

“Citizens must have the opportunity to talk to each other, to express themselves and innovate. At every meeting the brain multiplies the association of ideas and the eye discovers a wider human panorama.”

Frantz Fanon
“*The Wretched of the Earth*” (1961)

The recent major reform of the health and social services network posed a great challenge to renewing the public sector unions. The [Barrette reform](#),^{vii} which no one had seen as necessary before, implemented the private industry’s major principles of optimization while first focusing on the [centralization of government](#).

For unions, this reform led to the merging of certification units and an allegiance vote of unprecedented size (over 200,000 unionized workers were affected). The Federation fared well during this intensely challenging and emotional time.

Establishing your regional base

The Barrette reform resulted in the merging of certification units, creating massive unions representing, for the most part, thousands of members over vast regions. This reform unified union strengths in the healthcare field in a way that they never could have done on their own!

The Federation’s affiliated unions have become *de facto* regional forces and, in future, our bargaining power should be planned from a geographical standpoint.³⁷ Our regional base (spatial foundation) must become a priority. We are now working with union structures that can build their demands regionally. To put it in manufacturing lingo, the *point of production* of care is already woven into the social fabric of each community and region.³⁸ Healthcare professionals are in continuous contact with patients and their families, in hospitals and residential long-term care centres, both in the community and in their homes. However, the pressure tactics that healthcare professionals can use in the workplace are limited. It would be unthinkable to use a tactic that would pass on more of the network’s responsibility to patients and their families when healthcare quality and accessibility has decreased over the last several years. Using such a tactic would have quickly turned public opinion against our demands. Moreover, many healthcare professionals also act as caregivers after they leave work. It would mean asking more of the same people.³⁹ By reading between the lines, we know that healthcare professionals harbour great potential to mobilize the communities in which they work. This power could compensate in large part for limited opportunities to use traditional union pressure

vii. Bill 10, an Act to modify the organization and governance of the health and social services network, in particular by abolishing the regional agencies, came into effect on April 1, 2015.

tactics. However, this power is currently dormant and largely underused. We should begin to structure our action around it.

More now than ever, it is crucial that we push the boundaries in order to become more relevant. To insist on practising business unionism would confine us to a distorted agenda, limited to the collective work contract matters and the walls of health institutions.

In order to continue practising proposal-oriented unionism, we must first mobilize our members' knowledge and expertise in the field. They know what the consequences of care inequalities are and we need to make voices heard. We must then [create alliances with citizen or community organizations](#) that pursue similar objectives. These people experience care inequalities at different levels and can enrich our union initiative. What's more, many of our members are already involved in their communities. It would be a good idea to meet them and foster connections with them. The challenge of a spatial foundation lies in presenting joint demands rather than assuming that both sides' demands will work together naturally. We need to work to systematically dismantle issues in the workplace and those related to community care;⁴⁰ this is how we will be able to promote care through our union action.

No public relations campaign could ever replace developing a strong social fabric in communities. Logically, regional union strategies should be tested out in the new environment created by the last health network reform. We would like to underline the inherent social or interpersonal nature of these strategies. They can sharpen our bargaining power and broaden the scope of our union demands, all key conditions to ensuring the viability of proposal-oriented unionism.

Building strong relationships in the workplace

There's no shortcut to union victories. We cannot claim to have won, which means we need to build our power. It's the capacity to create a crisis that can generate positive change and this capacity is how our power is channelled. The government has power—we have felt it as we've dealt with the crisis generated after the major restructuring of the health and social services network. Another crisis, which occurred for the same reasons almost 10 years ago, when the current Premier of Quebec was the Minister of Health, is another example. These crises, though not of our doing, forced us to adapt.

Now, we would like to put forward the idea that union power is, in part, generated in dense social networks between members and members and their union representatives. "It is necessary to gain a deeper understanding of workers' goals and concerns to establish strong relationships between members and between members and their unions."⁴¹

In order for the FIQ to develop the means to achieve its goals with regard to its orientations over the next few years, it must dedicate energy to growing the social capital of its unions. This refers to relationship networking.⁴² Social capital is more or less tangible but nonetheless crucial to building the kind of union power we're talking about.

To generate social capital, unions need to organize themselves around people (their demands) by creating dense social networks through a wide variety of activities.⁴³ It has been shown that building relationships with members in this way is correlated with increased union participation and community and political engagement.⁴⁴ So, “with varying degrees of agreement, from basic temporary involvement to strong consensus, a group gradually forms and develops a cohesion based on interactions between members. If interaction is weak or superficial, the group will behave passively when issues arise and will be easily divided. If interactions are strong, the group will thrive.”⁴⁵

Our members already have the opportunity to express their views and join in debates that steer the union’s decisions. However, general assemblies usually follow a strict framework and discussions often revolve around options that aren’t very flexible.⁴⁶ In order to mobilize greater social capital to increase member participation, we need to provide “informal spaces where they can simply take the time to come up with and debate ideas that inspire them and then communicate them to their executive committee.” We are not suggesting that we discard all of our democratic habits passed down from union traditions, but rather for the union to multiply parallel channels so that people will build relationships based on trust, a key element of political action. We can invest in members’ current areas of socialization or create new ones to encourage participation in union, citizen and political activity.

We must see these opportunities for informal contact between members as a learning process and a kind of training that happens day by day through sharing ideas and holding discussions. For many, these exchanges will be their first taste of union participation. To do this, union teams need to show strong leadership that will send a clear message: your union team is solid and capable of fulfilling its mandate. We need to be aware that part of the reason members lose interest in union action is that they feel powerless. This feeling “increases along with the size of the chasm that separates them from places of decision-making.”⁴⁷ Working to increase a union’s social capital helps to bridge this gap and ensure that union actions incorporate members’ demands.

Unions can take simple steps to foster strong social capital by creating networking opportunities for their members. The greater the variety of activities, the more members will want to participate and in turn contribute to enlivening their union’s democratic life. To stay up to speed on what’s going on and on members’ demands, we don’t need to systematically hold assemblies, but rather to increase opportunities to meet. Possibilities are endless and should be combined: posting important information on social networks, holding social activities like workplace lunches, rounds during all shifts, setting up information booths, conducting online surveys, holding “5 à 7” discussions, conferences and meetings that bring together specific centres of activities or local units, sending out information capsules^{viii}, etc.

viii. The advocacy training is promising because it acts as a catalyst that promotes awareness, showcases the union’s services in a positive light (beyond disputes), and encourages growing strong social capital.

Identifying natural leaders

Social capital is built on recognizing and using natural leaders in the community. A natural leader is someone who has credibility and recognition in their workplace. It is someone who is able to stir her colleagues to action, especially if the action involves risks.⁴⁸ Natural leaders constitute precious assets used to broaden mobilization movements that will prompt members to participate in collective action.

Over the long-term, if the union has successfully identified the community's natural leaders, it will be able to quickly initiate important actions and generate the mobilization needed to make positive changes in the workplace. One must not assume that a natural leader is automatically a union activist and vice versa. On one hand, union activists have access to resources, teams and structures that enable them to develop a vision and keep union action alive over time, as well as conduct the necessary follow-ups. Due to the union restructuring over the last few years, it is key that we ensure the new union structures enable us to bring together our disconnected members, regardless of their age. A dense social network could be *the* decisive factor that will guarantee the union's future ability to take action as an agent of change. Furthermore, one mustn't be too quick to correlate certain individual attitudes with the breaking down of union solidarity. Cynicism, individualism, egocentricity and passivity might be more related to structural limits rather than a lack of collective efforts.⁴⁹

On the other hand, natural leaders are a key ingredient to union structures; they constitute the core of the social network which drives mobilization in centres of activities. Moreover, it is natural to question our approach with regard to some of our more demanding members. If they have strong influence over their colleagues, we should not attempt to neutralize their views or ignore them. They often end up reporting how their teams are unsatisfied and may even be the natural leaders. Rather than trying to temper their enthusiasm and demands, it would be good to leave them room to take action to change things and guide them in the process. Their main advantage lies in their solid foundation in the workplace and the fact that they work in the field. Unions would do well to develop a keen eye for spotting people with large social networks and the professional credibility and respect to mobilize their colleagues.

It is the synergy between union activists' and natural leaders' roles that makes union action efficient. The union needs to foster and value this interdependence. We have had to pick our way through a very thick fog since the upheaval brought about by the merging of the health-care institutions in spring 2015. To clearly assert our intention to build a better power base, in

the coming months we may need to give a few pushes in order to invest in the social capital of our members' work sites. Recognizing natural leaders does not necessarily mean recruiting them as union reps. Regardless, recruiting them could be a challenge since natural leaders are not always willing to risk their social status by getting involved in action they will have little control over.⁵⁰ However, one foreseeable union strategy would be to spot young healthcare professionals who have large networks (e.g., through their float team position) and recruit them as a resource person. Union executive committee members also, through the social relationships they have with certain members, have the capacity to seek out and recognize natural leaders. This approach gives members a role and reinforces the idea that the union's work is not solely done by the union reps: members should be encouraged to contribute to collective strategies.

In short, we need to identify and broaden existing networks in our membership while leveraging natural leaders working throughout the health care field. To do this, each union will need to invest in growing its social capital. By organizing activities inside and outside the workplace, we will be able to connect the various networks to new resources and to better promote their collective demands and goals at the regional level.

Recommendation 6

Set up an interdisciplinary committee composed of employees and union reps responsible for following up on the recommendations adopted at the 2017 Convention.

This committee will (among other things) focus on:

- Fuelling reflection on the social capital and spatial foundation for all of the organization's components;
- Encouraging reflection on the various ways to implement spatial foundation and grow social capital, for example, by redefining the TRACs' mandate, the use of social networks and member training.

CONCLUSION

Over the next few years, we would like to focus on three areas of action, including our spatial foundation, member networking and capacity to broaden the scope of our struggles. Moreover, issues in public health and working and practice conditions for healthcare professionals should be presented as two sides of the same coin. With this approach, we believe we can build stronger bargaining power and make major gains for our members in terms of their health at work and their professional integrity. These gains will of course have a direct effect on the public. We must take the time to fight for enriching professions while working to enhance our working conditions.

Our recommendations support these ideas. A union that asks its members and representatives to step out of their comfort zone and refuse to accept the confining role assigned by their employer, while demanding better working conditions, must be able to provide support and recognition. The Federation must provide prompt and unfailing support to bold healthcare professionals. Consequently, we must make our collective recognition official and public.

We believe we must continue to strive for a culture of advocacy in order to adopt a stance that supports healthcare professionals and patients. As we mentioned, this culture should not be confined to healthcare institutions and we need to take the time to plan a broad initiative. Through debates and discussions, we will be able to define our expectations of our collective project.

As an ambitious labour organization that isn't afraid of a challenge, the FIQ will make the most of any obstacles put in its way by the government. We know that a small group that is passionate and mobilized can exert great influence and sway elected officials. Therefore, shouldn't we use these powerful voices, turn this situation around and prove to those who thought we would lose our footing with the new union structures that they were wrong?

Let's be bold and vocal healthcare spokespeople as well as guardians of our collective well-being! Let's proudly fulfil our role and exert our full power—the power to provide care!

RECOMMENDATIONS

The Executive Committee's recommendations:

Recommendation 1

Amend the Union Defence Fund regulations to include defending our members' when they are penalized for exercising advocacy.

Recommendation 2

Create two prizes (one individual, one collective) that will be awarded at each Convention to recognize a member's or group of members or union reps' exceptional union work.

Recommendation 3

Develop an action strategy that aims to fight to improve the physical, mental and professional integrity of our members and raise their expectations thereof.

Recommendation 4

Continue promoting a culture of advocacy, taking a stance in favour of care.

Recommendation 5

Start a collective debate among our members in order to create a healthcare platform.

Recommendation 6

Set up an interdisciplinary committee composed of employees and union reps responsible for following up on the recommendations adopted at the 2017 Convention.

This committee will (among other things) focus on:

- Fuelling reflection on the social capital and spatial foundation for all of the organization's components;
- Encouraging reflection on the various ways to implement spatial foundation and grow social capital, for example, by redefining the TRACs' mandate, the use of social networks and member training.

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FIQ | SECTEUR PRIVÉ

REGROUPEMENT
DES FIQ

FIQ Montréal | Head Office

1234, avenue Papineau, Montréal (Québec) H2K 0A4 |
514-987-1141 | 1-800-363-6541 | Fax 514-987-7273 | 1-877-987-7273 |

FIQ Québec

1260, rue du Blizzard, Québec (Québec) G2K 0J1 |
418-626-2226 | 1-800-463-6770 | Fax 418-626-2111 | 1-866-626-2111 |

fiqsante.qc.ca | info@fiqsante.qc.ca   