COLOMBIAN REFUGEE MIGRANT EXPERIENCES OF HEALTH SERVICES IN OTTAWA, CANADA
COLOMBIAN REFUGEE MIGRANT EXPERIENCES OF HEALTH AND
SOCIAL SERVICES IN OTTAWA, CANADA: NAVIGATING LANDSCAPES
OF LANGUAGE AND MEMORY

By:
ANDREW GALLEY, H.B.Sc, M.A.

A Thesis
Submitted to the School of Graduate Studies
in Partial Fulfillment of the Requirements
for the Degree
Doctor of Philosophy

McMaster University

© Andrew Galley, August 2011
DOCTOR OF PHILOSOPHY

McMaster University

(Anthropology)

Hamilton, Ontario

TITLE: Colombian Refugee Migrant Experiences of Health and Social Services in Ottawa, Canada: Navigating Landscapes of Language and Memory.

AUTHOR: Andrew Galley, H.B.Sc (University of Toronto), M.A. (University of Toronto).

SUPERVISOR: Dr. Ellen Badone

NUMBER OF PAGES: vii + xx (xx total)
Abstract
This thesis presents a multi-level and mixed-method analysis of the health-care experiences of predominantly Colombian migrants living in Ottawa, Canada. It incorporates survey, interview, archival and participant-observation data to answer a series of linked questions regarding health and migration under contemporary Canadian liberal governance. Specifically, the thesis elucidates connections between bodily experiences of illness and healing, linguistic and cultural fractures within communities, and the legal positioning of refugee migrants in Canadian law. In doing so it follows the "three bodies" model of medical anthropology proposed by Lock and Scheper-Hughes.

The first three chapters of the thesis provide multiple layers of context for the fourth chapter, which contains the bulk of the primary ethnographic evidence. The first chapter analyzes the positioning of the refugee subject in Canadian legislative and policy discourse, highlighting the phenomenon of the immigrant as subaltern nationalist "hero" who is denied a full voice in public affairs but whose passive qualities are considered essential for the cultural reproduction of the nation. The second chapter discusses relevant changes in the governance of health and social services in Canada, pointing out how neoliberal ideology attempts to mobilize "social capital" (that is, networks of unpaid labour) to replace withdrawals of public capital. The third chapter explores the entanglement of Colombian migrants in the language politics of the Canadian state, specifically the politics of
the Ontario-Quebec border between English- and French-speakers. The fourth chapter presents the stories of Latina/o migrants focusing on their health, illness and perspectives on Canadian state participation.

In conclusion, the thesis presents an analytical framework privileging the tie between the linguistic practices of nationalist projects and the linguistic underpinning of healing relationships. In both cases, a struggle for accurate and just recognition, conducted through linguistic practice, is a consequence of the human search for well-being.
Acknowledgements

My research has been supported in myriad ways by many people and organizations, whether motivated by commitment, curiosity or kindness. I am grateful for the support of several funding agencies, without which I could not have completed the doctoral program. The research was supported by a Social Sciences and Humanities Research Council of Canada Doctoral Fellowship, the Ronald V. Joyce Ontario Graduate Scholarship, the McMaster University Prestige Scholarship, a Field Scholars grant from the McMaster University Institute on Globalization and the Human Condition, a research budget generously provided by the McMaster University School of Graduate Studies, and last but not least by the Japanese-Mennonite Scholarship, administered by the Central Mennonite Committee of Canada for research promoting the protection of minority rights in Canada.

No less essential for the completion of the research has been the advice and support of experienced academics. My supervisory committee, Drs. Ellen Badone, Ann Herring, and Dorothy Pawluch, all of McMaster University, have been unrelentingly optimistic and encouraging as well as shouldering the unenviable burden of editing my chapters. In addition, several scholars have generously given their time and advice; I am grateful to Drs. Pilar Riaño-Alcalá of the University of British Columbia, Olive Wahoush of McMaster University, Luisa Veronis of the
University of Ottawa, and Ms. Patricia Diaz.

Needless to say, I am extremely grateful for the time and patience afforded me by all participants in this study, many of whom find their time at a premium for differing reasons, whether from overwork or economic marginality. In particular I must thank Consuela and Anya, settlement counsellors at the New Canadians Centre in Ottawa (and apologize for not thanking them using their real names and the name of their organization) for taking such an active role in abetting and encouraging my project. I would also like to thank Leila for her diligence in contacting potential participants on my behalf, as well as giving me one of my first “real” interviews.

In addition I am indebted to the services of three professional translators and illustrators without whom I would have been lost in my transcripts and unable to properly convey several important ethnographic incidents and narratives. Dr. Gloria Lopez and Ms. Maria-Victoria Cereno provided excellent, sensitive and timely translation and transcription assistance. Ms. Karen Hannah Brown is responsible for the illustrations found in this thesis.

Last but not least I am grateful to the people, primate and feline alike, who have provided emotional support and sensible advice during this program of research.
Thank you to my dear friend and partner Dr. Elizabeth Sonnenburg, who has to live with me, and to my family – Catherine, Emily and Alan Galley – who only have to live with me when I come visiting. Finally, thank you to all the cats I have known and relied upon during my doctoral program, both to build me up and tear me down: Lucrezia, Robertson, Motor, Thumper, Rufus, and Alice.
# Table of Contents

## A. Front Matter:
1. Title page.................................................................i
2. Descriptive Notes......................................................ii
3. Abstract..........................................................................iii
4. Acknowledgements.......................................................v
5. Table of Contents.........................................................viii

## B. Thesis:
1. Introduction: Stories about the Body.................................1
2. You are Number Three..................................................46
3. Chapter 1: Un/Canadian?..............................................48
4. Buzzword Bingo..........................................................105
5. Chapter 2: Governing the Social.....................................106
6. The Two Mothers.......................................................158
7. Chapter 3: Across the River..........................................159
8. Practice, Practice.......................................................205
9. Chapter 4: In the Waiting Line......................................206
10. The Headache..........................................................265
11. Conclusion: Landscapes of Memory.................................267
12. Works Cited............................................................287

## C. List of Figures, Tables and Illustrations:
Table 1: Abbreviations used for political parties in this chapter........71
Illustration 2: Durer, Albrecht, "Spleen", circa 1510.......................207
Illustration 3: Results of the free-hand graphing exercise (examples)...221
Introduction: Stories about the Body

Together, we can do it!

One morning during my fieldwork in Ottawa, I was waiting to interview the program coordinator of an NGO dedicated to improving the employment prospects of new Canadians. Canada admits “economic class” migrants on the basis of their score on a points system that evaluates job skills and education, but the federal government cannot, or will not, negotiate passage for these migrants through the privately- or provincially-managed professional organizations that guard entry to many highly skilled jobs. As a consequence, NGOs such as this one work hard to both bring new Canadians up-to-market, and advocate for their inclusion vis-à-vis employers.

I had arrived early, and settled into the centre’s waiting area. Waiting areas are a prime feature of immigrant life in Canada; new Canadians could give very rich descriptions of the different types, levels and patterns of waiting areas, and some of these descriptions surface in the stories examined in this thesis. My fieldwork gave me a taste of what it is like to move from waiting area to waiting area, the distance/familiarity of total strangers who are nonetheless closer than, say, people riding a bus together, by virtue of the similar problems they share.
But I am privileged. My migrant neighbours in the waiting area must wait for the receptionist or the nurse or the case manager to call their name and tell them where to go next; in the meantime, harried employees criss-cross in front of them without speaking or glancing. Callous people generally don’t work in the non-profit sector; this is just empathy-rationing – not letting time and compassion get out of hand. I am different, or seen as different. Like my neighbours, I am here to demand something, but my identity as a researcher indicates I may offer something too. Even if it’s only a kind of peer-to-peer professional conversation, a chance to reflect. Because I am seen as different, I am seen. My informant – at any one of the NGOs I visit – does a double-take as she crosses the area, calls my name. I am lifted out of Waiting, I leave it behind.

Today, I had to wait somewhere else first, since she was running late and had to dash off. She left me alone in a little boardroom off of the main corridor, closing the door behind her and sealing off the bustle of the rest of the institution. I was seated facing a large mural of three panels, affixed to the ochre-coloured wall. It was a kind of ethnographic revelation, a lurid document of the complex discourses I was searching for.
The mural showed bulls stampeding through a canyon, the photograph given a
digital aura that increased the impression of speed and earth-shaking power, the
closest animals blurring as they stormed past the viewer. “Together we can do it!”
read the text above the bulls, “We’ve got to race, not pause or stop! We can steer
ourselves in any direction we choose! Go, like there’s someone right behind us!”

What a mixture of terror and freedom! It makes me want to think about liberalism
and migration in a way that doesn’t reduce either new or old Canadians to pawns
in a corporate scheme, while recognizing the way we continue to reproduce – and
in some cases, aggravate – injustice and inequality in hidden ways. The chapters
in this thesis talk about health and citizenship in Canada from various angles,
tackling different sites and themes but always coming back to this relationship
between our bodily energy, our political franchise, and our relationship with
government as practice – that is, not an entity that is external to us, but as
something we practice at the same time that it is practiced upon us. In most of the
chapters that follow, the bulls are there, thundering in the background, reminding
me of the paradoxes of freedom under the liberal capitalist Canadian state.

By the practice of government I mean Foucault’s notion of “the conduct of
conduct” by way of Tania Li’s specification that government is an activity of
“rendering technical” social and political problems (2007: 263). In other words, government is a practice that requires a certain discursive expertise, and which having established that expertise reframes the behaviour of bodies under its purview using that expert discourse, in a way that renders them legible within programs that attempt to alter that behaviour. For example, an expert in nutrition may hypothesize that the low school performance (expressed in numbers) of children from poor families may be due to hunger; the solution may be to lobby for school breakfast programs, or subsidies to parents, all the while educating the parents of these children about inexpensive and nutritious breakfast foods. All of these projects require assembling various discourses of achievement, opportunity, justice, biology and economics, and then trying to make an effect on the real. While the power to govern is far from evenly distributed in Canada, when defined as a practice we can see that government extends not only downwards but sideways and upwards as well through social networks. This troubles simple notions of class and race stratification, but by following the currents along which various projects align, we often rediscover these concepts in disguised and troubling forms. The success of our nutritionist’s collage project depends in part on how easily her assemblage fits in with powerful currents already flowing; if the children are overwhelmingly part of a disliked minority, for example, her appeals to opportunity and justice are less likely to persuade. It is far from being “only
discourse”, touching as it does on hunger, one of the most primal injustices and one of the least amenable to description in speech. Yet it is through discourse we attempt to alter it, which is a modern condition, a condition of being governed and of judging the relative merit of governors.

**Thesis Objectives and Overview**

This thesis examines the changing nature of belonging and exclusion in Canada through the encounters of primarily-Colombian refugees with health and social services, in the national capital of Canada, Ottawa. Using interview, survey, documentary and observational data, the thesis situates the refugee newcomer to Canada at the nexus of unfolding ideologies of the (post)-welfare state, liberal (inter)-nationalism, and the Canadian (crisis of) identity. It is not an ethnography of Colombian-Canadian culture or identity, and attempts no generalizations about a Colombian or Latino experience; rather it seeks out the perspective of a particular diaspora on the negotiation of citizen identity under Canadian liberalism.

In doing so this thesis strongly implicates cultural speech practices as a unifying element of diverse experiences: from technical jargon, to promiscuous encounters between English, French and Spanish, to the symbolic practices of positioning
refugee migrants in legal and policy documents as well as secondary (media) reporting on those documents. The thesis is not a linguistic study but the themes of the chapters are unified by an attention to language as the material from which the core relationships under examination are built: relationships of citizen and state, healer and patient, service provider and recipient.

In her study of the Guatemalan refugee diaspora in Canada, Catherine Nolin argues that theories of transnational identity cannot be content with celebrations of a smooth-edged, post-modern cosmopolitanism, but must look for the "rupture and suture" that marks out such identity processes as struggles, implicating pre- and post-migration power relations such as those of gender, race and class (Nolin 2006: 182). Following Nolin's lead, my thesis asks: in what physical sites do these struggles take place, and with what instruments? It therefore interrogates waiting rooms, doctor's offices, settlement agencies, parent-teacher association meetings, college admissions offices, emergency departments, as well as pamphlets, posters, application forms; conversations, scripts, curricula; finally silence, boredom, patience, anger, and the somatic distress of headaches, colds and flus.

The present study is ethnographic and phenomenological: it assumes a cycling of external and internal realities, where individuals' situations within institutions and
bureaucracies inform their perception of self, and therefore their active participation in the (re)production of those institutions. In many places this participation is understood through the medium of citizenship, and citizenship is a central concept used to interpret political and national belonging.

The study adopts qualitative methods particularly suited to examining the internal iterations of this self-institution cycle; through interviews and survey-based exercises I tried to provoke reflection and response on how post-migration attitudes about nationality and Canadian society were influenced by the experience of receiving health and social services. More problematically, the study assumes the identifiability of a community of study, or a population of interest.

As Taussig has argued, in so far as ethnography attempts to convey the character of a place and the internal realities that it instils or obscures, it is an attempt to reproduce the place in miniature by capturing its “genius” through a variety of forms (2004). On the one hand, the anthropologist can never really succeed at this task. The nature of writing forever separates the reader from the object being described, or as Taussig observes, quoting Genet: "this sentence tries to hide the book, as each sentence tries to hide the one before it, leaving on the page nothing
but error" (2004: 63). At the same time, ethnographic writing is more than illusion because the experience of being in a place, and writing about it, enables the writer to say something they could not speak of otherwise: the ethnographic objects "are also foreign to him [sic] as a rank outsider and hence quite fabulous, like a stage set, allowing him to work out even more precisely what he needs to say" (2004: 273). I try to keep Taussig's paradox in mind as, through this thesis, I synthesize diverse data sets, methods, starting points and perspectives into a statement about the health of bodies, their relationship with state and national cultural practice, and the enduring necessity of speech. The unpredictable insight that Taussig identifies with ethnographic writing manifested in my thesis as an informant-driven departure from studying the bodily experiences of health and illness towards analysing a Canadian, immigrant bureaucratic subjectivity.

One of the more uncommon presentations of evidence in the thesis deserves special explanation. Included between the chapters are graphic-novel segments illustrating ethnographic anecdotes (along with one semi-fictional piece, "Buzzword Bingo!", which draws on participant-observation experiences but which has a satirical function). Ethnographic cartooning is a new and still-developing theory within anthropology, with researchers experimenting with the presentation of anthropological research in graphic-novel form (see for example
Bartoszko et al. 2011). My own interest in the genre comes from biographical-travelogue comics and their ability to communicate complex intercultural encounters in an accessible, entertaining way; I'm particularly inspired by Québécois artist Guy Delisle's Asian travelogues such as Pyongyang and Shenzhen (both 2006), and by the well-known biographical comic series by Marjane Satrapi, Persepolis (2007). In this thesis, the comics serve a double function, helping to position the author within the research (literally, as a cartoon) and reinforce the reflexivity of the work, while filling in the corners of the social "field" I am attempting to explore and analyze. On the one hand, the anecdotes that were translated into comic form don't quite fit in with the central arguments of the chapters. On the other, the picture of Ottawa's "migrant-citizen" network is inevitably incomplete, and they help suggest the broader dimensions of that world, beyond the borders of the written text. They therefore constitute an attempt to combine reflexivity and representation, a form of the "narrative ethnography" explored by Tedlock in which "both the Self and Other are presented together" (Tedlock 1991: 69). In doing so they draw attention to, and emphasize, the literary, humanist, experimental and “collage-like” character of the written text (Danforth 1989: 9, Clifford and Marcus 1986).
Bodies Politic: Theory and Intellectual Background of the Project

As an extension of the intellectual interests that fuelled my Master's research, this focused first on capturing the “health narratives” of Colombian-Canadians; that is, their ordinary and extra-ordinary accounts of illness, healing, and participation in health-promoting activities. Through these narratives, my intent is to explore the entanglement of institutions and communities on the margins of national belonging in Canada. I analyze the manoeuvres and strategies of the "entanglement" that health-seeking encounters represent, focusing on the points where actors meet, rather than upon either institutions or communities in isolation.

Navigating Landscapes is an ethnography of a contest, not necessarily antagonistic; a contest, played seriously, whose end results are alternately surveillance or recognition, respectability or security, with consequences for the health of human individuals and populations. The community, that serves as both a point of entry and a case study, consists of families and individuals of Colombian birth, living in the Canadian capital city of Ottawa due to intolerable conditions in their homeland -- whether or not they are legally recognized as refugees. The institution, on the other side of the "encounter", is the multi-layered and many-faced apparatus of the Canadian state bureaucracy which supports and is sustained by the political ideal of publicly accessible and affordable health care and social services in Canada.
My Master’s research highlighted “cultural competence” training for health care providers, examining its promise to act on both the institutional and individual levels to improve health care equality in a multicultural society by teaching cross-cultural communication skills. Anthropologists have criticized cultural competence programs for using outmoded definitions of culture and for conflating culture with ethnicity (Gregg and Saha 2006, Lee 2006). While previous critiques have tried to locate these failures in the gaps between anthropological and medical forms of knowledge, my project sought to interrogate how these policies and teaching programs are shaped in unanticipated ways by day-to-day realities, and how they produce unintended effects. However, it was limited to a textual analysis; my doctoral work not only takes the questions raised by this review into a fieldwork setting, but expands upon the political context in which narratives about health care are generated, negotiated and reproduced. In doing so it inevitably expands beyond a narrow conception of health, reflecting the ubiquity achieved by the "social determinants of health" theory throughout the Canadian domain of the "social" (see Chapter 2).

Some of these “day-to-day realities” that intervene in attempts to render health and social services culturally competent relate to the manner in which refugee
health in Canada is located at the overlapping margins of two large complexes of government policy, political debate and popular discourse. Refugee health is marginal to the complex discussion of immigration in part because refugees are seen as a public burden to be spread out as evenly as possible, rather than (as in the case of economic immigrants) new human resources to fuel the growth of the Canadian economy. Refugee health is marginal to the discussion of health-care in part because so many of their particular health needs fall under the rubric of public health and the acute control of infectious disease; these are often the first targets for budget cuts under neoliberal programs of government austerity, because of the assumption that epidemic infectious diseases, such as tuberculosis, are a thing of the past (MacDougall 2006, Ali 2004, Garrett 2003). The migration and health-care discourses are central to the formation of national identity in Canada, as a country of many nations, and as a state which recognizes the right of citizens to affordable health care. Therefore, the attempts of policy-makers and care-providers to improve refugee health care, and the experiences of those refugees toward whom these health practices are targeted, are implicated in the political struggles of refugees for recognition and belonging.

One working title of the dissertation, The Transnational Wound, evokes a psychic analogue to Paul Farmer’s observation that diseases cross borders but cures do not
Refugees carry the wounds of displacement, torture, grief and privation with them across many borders, into lands where their experiences – which are tied to memories of an ‘emplacement’ that had become untenable – are not easily translated. The right to be healed, where it still inheres to subjects rather than to capital, continues to locate itself in practice within the apparatuses of the nation-state; even the right to practice medicine does not cross borders easily. It is therefore easy to imagine that – even if the health of refugees could be disentangled from this politics of recognition – transnational wounds would be difficult to perceive and to heal. The metaphor also drew attention to the biopolitical nature of health-care systems, in particular systems of public health: under rationalities of public health, measures of human flourishing (indexed by, for example, a lack of disease) are inseparable from the subjection of human beings to state projects of counting, planning, assembly and projection.

These complexities of transnational belonging echo some of the anthropological literature that attempts a biopolitical critique of the very notion of citizenship. Mackie, studying Japanese legal precedent and constitutional law, argues that citizenship should not be understood as a binary – a quality that a subject either possesses or does not possess – but rather as a spectrum along which a subject is placed by biopolitical factors such as gender, age, sexuality, (dis)ability, and
health (Mackie 2002). Policy language that at first appears neutral can in fact encode a biopolitics that renders certain citizens invisible or unrecognizable by the law, creating and maintaining hidden inequalities; only by struggling for a more politicized legal form of belonging can marginalized citizens achieve recognition, yet this threatens the rationalist basis of the liberal state form. Cohen introduces the concept of “operability”, a more extreme version of biopolitical citizenship in which the legal belonging of some state subjects depends upon the “bioavailability” of their blood, organs or genitals to invasive medical intervention; he uses the example of poor Punjabis who are only legally recognizable to the state as a source of transplantable kidneys (Cohen 2004). Finally, Biehl explores the lethal dimension of biopolitical citizenship in his study of Brazilian hospices where old relatives or the poor are literally left to rot; here, the recognition of a subject as belonging to the political community occurs only in their destruction – they serve their purpose by dying, to remind “redeemable” citizens of the consequences of failure, and to provide the opportunity for compassionate volunteerism that can redeem others (Biehl 2005). My extrapolation from this literature is that the wounds of the body are political in a sense that goes beyond their possible origin in the various misdeeds of state actors: just as the configuration of the body “creates” the biopolitical subject in the imagination and language of policy actors, the body’s wounds and the
subject’s desire for healing are employed in the self-narration of an alternative biopolitics, a sense of belonging and personhood outside of (though perhaps reconciliable with) the legal categories of the state.

It is still my hope that the desire to be healed, both political and medical, individual and collective, may be invigorated by answering the questions raised by the proposed dissertation: how does marginal recognition within the nation state affect the experience of seeking healing and of being healed? How do policy-makers, care-providers and care-seekers interact with policy and bureaucracy in the context of health, refugee-dom and the Canadian city? Finally, how are neoliberal economic transformations and global demographic transformations affecting Canadian notions of identity with and ownership over a community in which one may be healed? The theory-based results of this academic study will be distributed among informants and may be adapted to campaigns for better access to services and greater legal recognition of the unique belonging of refugee migrants.

Although urban centres in Western countries such as Canada might be considered “non-traditional” research sites for anthropologists, they are by now relatively well-established. Research in countries from which, previous to World War II, the
academic gaze was largely directed outwards at the distant Other was developed in response to a call by feminist and post-colonial scholars for an examination of unmarked categories, such as “whiteness” (cf. Said 1978). It was not enough, these scholars argued, to critically examine the constructed categories of Other, because those categories were only sensible within the context of a simultaneous construction of Self; the colonies made the colonizers as they themselves were made (Said 1978). Both sides of the dichotomy had to be analyzed in tandem in order to achieve an accurate picture.

Mass migration, whether for economic, political or spiritual ends, has radically reconfigured this dichotomy. Demographic transformation in countries such as Canada has disrupted the geographical boundedness which once made the colonial Self-and-Other a cogent object of analysis. This does not mean, however, that ideas (including racialized ideas) of self and other have disappeared; rather, like workplace relations and germ theories, they have been reconstituted in what Emily Martin calls “flexible” terms (1994). Liberal capital has become flexible: for capitalism, flexibility means part-time work, at-will employment, just-in-time inventory, continual job retraining and the apotheosis of the transnational corporation; for liberalism, flexibility means multiculturalism, the celebration of aesthetic ethnicity. While claiming to respect and celebrate cultural difference,
however, liberal discourse also acts to circumscribe the domain of acceptable
difference, that which is not repugnant to the essentially unaltered, unmarked
subject (signified by categories such as white, male, and so on) (Povinelli 2002).
The deployment of flexibility as an ideal, and the circumscription of difference,
are discursive projects connected by the fact that the values ascribed to good
citizens in the domain of the market (self-sufficiency, flexibility, a lack of
expectations) help perform the circumscription of acceptable culture: it is
repugnant to be dependent on public resources, to be lacking in transferable job
skills, to neglect participation in the market. The concept of the refugee thus
creates a paradox for liberalism: accepting refugees is the moral duty of a liberal
state, but refugees-as-subjects present particularly undigested forms of difference
in the categories of language and ethics, while simultaneously falling short of
liberal expectations due to their high demand for public services and low (initial)
market participation. Refugee studies are therefore positioned to contribute to an
important area of current, critical anthropological theory: the deconstruction of the
notion of the Other within the global, liberal state, and the simultaneous critique
of the unspoken and unmarked norms which sustain this notion's deployment in
projects of state nationalism.

This project draws on two major bodies of existing theory in its approach to the
study of refugee health narratives in Canada. The first is “critical medical anthropology”, which theorizes human health and illness as being overdetermined by relations of economic and political inequality (cf. Baer et al. 2003, Farmer 2001). Critical medical anthropologists concern themselves with the differences in power inherent in the discursive creation of particular medical subjects, that is, the process by which certain human bodily experiences are rendered medical and therefore subject to intervention, known as “medicalization” (Baer et al. 2003). In addition, more quantitatively-inclined critical medical anthropologists have applied a political-economy framework to discuss present or historical inequalities in the burden of disease and bodily suffering, drawing correlations between the action of pathogens and the structure of economies (cf. Packard 1989). Finally, critical medical anthropologists have argued persuasively that our understanding of the body and its ailments must extend beyond the immediate phenomenological body recognized by biomedical discourse, to embrace the social and political-economic spheres in which health-promoting and health-destroying relations are negotiated (Scheper-Hughes 1993, Scheper-Hughes and Lock 1987). All these theoretical strands are relevant to the problem of refugee entanglements with the Canadian bureaucracy of health and healing. Following the argument that one’s experience of illness and healing is partly constructed through one’s position in the social-economic structure, and through the discursive trajectory by which one
is inserted into the domain of the medical gaze and intervention, the illness narratives of refugees living in Canada may reveal the shape of their entanglements with broader struggles for recognition, representation and. Likewise, examining their lived relationship with national cultures and state policies contextualizes the patterns of low-grade chronic illness that often inflect their lives. As the thesis will demonstrate, particularly in Chapter 4, these colliding planes of experience often produce a self-aware irony in the stories shared by informants, an ethnographic phenomenon explored by Lambek and Antze (2004), in an edited volume with others. In the introduction to that volume, the editors outline how irony enters into human self-narrative at the point where the limits of consciousness and agency are recognized, using illness as a prime example of life experience in which this is likely to occur; to this I add, that irony therefore unites the experiences of illness with other disturbances (such as a lack of money, employment, shelter or recognition) that place new Canadians especially at the disposal of experts.

In order to interpret the relationships and contests so illuminated I will turn to a second body of anthropological theory: the critical anthropology of public policy. Specifically I am inspired by the anthropology of policy inflected by Foucault’s notion of government as a project of the education of desires and the nurturing of
the conditions of life (Foucault 1991). This approach is reflected in anthropological work by the ethnographic description of projects and trajectories which may or may not be positively identified with the state, but which in some way seek to “render technical” social problems (Li 2007). That is to say, anthropologists of governmentality study policies and discourses which seek to transform the nature of political problems (in which a conflict of interests exists) such that they are no longer political but rather amenable to technocratic or bureaucratic resolutions (cf. Ferguson 1990). Other researchers interested in governmental policy have focused on the process by which democratic subjects, that is, freely acting citizens who are nevertheless governable, are created through the entanglement of policy with daily practice (Bourdieu 1977, Cruikshank 1999). One strength of the governmentality literature, relevant to this project, is its ability to uncover what might be called an intentionality manqué. Clear attention paid to the trajectories plotted by policy-makers and to an ethnographic description of their results reveals the ways in which the best laid plans of states, NGOs and other actors go far awry (Mosse 2005, Li 1999), and specifically how their courses are bent by cross-cutting fields of power and material limitations. Used responsibly, the governmentality literature complements the critique of political economy by averting the attribution of monolithic malevolence to state actors, and allowing a sophisticated narrative to emerge concerning the mutual entanglement
of power and persons, without neglecting the strong critique of social inequalities, racism and preventable human suffering.

These two anthropological literatures are complemented by other social research. Precedent for the Foucauldian analysis of “refugee medicine” exists in the work of Aihwa Ong with Cambodian refugees living in California (2003). Ong sees much the same paradox I do in the framing of medical surveillance as a program of power: the medical gaze is special, perhaps unique, among forms of bureaucratic discipline in that its potentially life-saving properties make it something to be invited or sought, while its repressive properties make it simultaneously something to be deflected or resisted (ibid). Refugees, moreso than other liberal state subjects, feel this paradox keenly and perform it actively because of their relative dependency upon recognition as deficient-but-deserving: attracting the medical gaze is a necessary precondition of acquiring public resources and support, but deflecting it becomes necessary when the demand to transform the self into a biomedically-recognizable subject becomes too intrusive and intense. Ong combines Foucauldian ideas regarding the disciplining effects of the clinic, with complementary analyses of resistance, in an attempt to overcome this paradox.
Elsewhere, Canadian social researchers outside of anthropology have done related work exploring the transforming relationships between state and civil society in Canada, how these relationships have been impacted by recent trends in migration, and where migrants are positioned in Canadian liberal-nationalist imaginaries, as well as in day-to-day bureaucratic practices, as a result. Nolin (2006) and Veronis (2007) have produced case studies of Latino transnational identities in Canadian cities such as Toronto; their work provocatively suggests an oscillation among marginalized immigrants between consciously embracing a reified ethnic identity for the purposes of gaining more visibility in civic affairs (in Veronis’ work) and a fragmentation of pre-migration identity as a result of traumatic memories and a loss of social trust (see chapter 3). Mountz (2004), analyzing Canadian state responses to irregular migration through the lens of feminist theory, calls attention to the necessity of "corporeal geographies" in critiquing ongoing nationalist projects, something that predates and informs my focus on medical encounters as fuelling political processes.

Other research in Canada has focused on an analysis of changes within government and civil society relevant to the political and economic life of immigrants. Ilcan and Basok (2004) provide Canadian case studies of the outsourcing of "governing" activities to non-profit and charitable organizations,
 Often ones that rely heavily on volunteer labour and the reciprocal engagement of the marginal communities they are expected to help. Significantly, the authors argue that this practice fosters an ethic of "responsibilization" under which civil society groups work to instill a liberal moral subjectivity in volunteers and communities, on top of their (not insignificant) burden of alleviating the harms of economic and social inequality within Canada. Philips (2010) by contrast characterizes the attitude of government towards the NGO sector as one of "active neglect", noting the absence of any recent government initiative in bolstering the sector, and indeed a complacent assurance that it will somehow muddle through on its own despite increasing needs and tightening resources. In this thesis, which privileges "encounter" between migrants and service-providers, both groups of agents come to those encounters with deeply divided senses of identity, and perhaps a vertiginous sense of rapidly shifting ground.

**Messy Lives: Interrogating Health means Interrogating Citizenship**

Lucy, a counsellor who works with Colombian migrants, summed up the difference between her practice and that of other counsellors by stating that migrants have "messier lives". The narratives informants told me about their messy lives are laced with themes of power and belonging, sometimes in ways unanticipated by the semi-structured interview questions, always in ways that
pushed the dimensions of inquiry outwards past the domain of health (conventionally-defined) and into that of politics. Nonetheless, the evidence of this study does not undercut the importance or interest of studying health-care experiences as a window into national and personal identity, as well as issues of economic and political justice. Through the writing process I discovered that the data was not reducible to stories about sick and healthy bodies, but rather I had to speak of political subjects. Therefore the "mess" -- a term that invokes a disordered jumble of unconnected leftovers -- forced me past the assumed limits of the project, in order to sort things out and discover the order and connections that underlie apparent confusion.

To match this challenge, I adopted multiple entry points into the data with a corresponding mix of methods. I started out with little in the way of a foothold in the community I wished to research, and realized I would need both progressive levels of engagement in the form of data instruments, as well as time to establish partnerships with trusted intermediaries. Thus, in the first “phase” of my research I distributed surveys through settlement agencies, the principle Spanish Catholic congregation in Ottawa, and through personal contacts who said they knew potential participants. This slow process of mailing out and waiting to receive back survey packages was accompanied by participant-observation and
volunteering work among the same intermediary sites, in order to meet people and make connections based on a contribution to community-defined needs. In this way I refined my research questions on the basis of more grounded knowledge, as well as built familiarity with those who had greater stakes than I in the research being done. I then moved on to recruiting interview participants, through recruitment forms distributed with the surveys as well as by "job-shadowing" settlement workers in partner agencies, while continuing participant-observation in relevant sites.

One of my strongest contacts was with the New Canadians Centre, a pseudonymized settlement agency of central importance in the Ottawa area particularly known for work with refugees and employing several Colombian professionals as settlement counsellors, health workers and volunteers. Two of these counsellors, pseudonymized in the thesis as Anya and Consuela, were particularly supportive of the project and had both a deep understanding of the issues I wanted to look at, and a willingness to direct me towards avenues they felt would be most productive. Through these connections I was able to make contacts at a local Spanish-language Catholic parish popular with Colombian-Canadians, and use an agency contact list to recruit survey participants. Of approximately 100 people contacted, 22 consented to receive a survey, and 10 surveys were returned.
The focus of my follow-up to initial research questions was also structured by the key agencies and individuals who were able to work with me. While almost everyone I had a chance to speak to about the project was encouraging and supportive, health-sector actors tended to be unable to spare time to meet with me or to incorporate the skills I could offer for volunteering purposes; when I did meet with health care practitioners, privacy and ethics concerns limited the information they could share about the health care of vulnerable patients, although they nevertheless provided an intriguing piece of the overall story. Furthermore, those new Canadians who were willing to participate in interviews generally stressed the importance of legal and employment problems in their lives over health-care concerns (with the exception of those cases where people had suffered acute health-related emergencies). This guided the investigation towards the social-services side of public investment in refugee and immigrant needs in the region. A few, lengthy interviews with professionals of Colombian background working with immigrant communities in Ottawa became extremely important and rich sources of data.

The original interest in the connection between health-care and citizenship thus
broadened into a study of the state of “citizenship” among new Canadians from Colombia, though still strongly informed by the kinds of embodied experience that are the privileged domain of health discourse. Through the difficult process of integrating and presenting the fieldwork data, I came to appreciate a classic medical-anthropological imperative in a new way. Scheper-Hughes and Lock (1987) presented, in the first issue of *Medical Anthropology Quarterly*, a “prolegomenon” for the sub-discipline in the form of a meditation on what they called the “three bodies” model. Human beings, as objects of medical anthropology, inhabit three bodies: the physio-phenomenological body of inner experience and symptomology, the social-cultural body who is the subject of intersubjective relations and ritual expectations, and the political-economic body who is figured as a subject within national and global processes of capital, labour, and power. Although a surface reading of the 1987 paper gives a clear outline for a holistic approach to social research on human health, the transformations of this thesis reveal and incorporate another side to the three bodies model. The three bodies are not just an assembly of regimes to which people are subjected, but also a map of the possibilities of self-narration, and thus a framework of agency. The idea of the medical encounter provided me with an entry point into the story that my informant felt was really important. In this way the medical encounter, and the human experience of medical subjecthood, is a *nexus* of physical, cultural and
political domains, connecting them in such a way that narratives flow over the boundaries and reveal what the teller wants them to reveal. Scheper-Hughes and Lock (1987) thus provide not only a program for medical anthropologists to follow, and a thesis about how human health “works”, but also a rational framework for interpreting the far-reaching data contained in these chapters.

The Colombian Diaspora: an Overview of its Origins and Dimensions

It is difficult to concisely summarize the historical causes for the present numbers of Colombians living in exile, whether within or beyond the borders of their country of birth. The present violence in that country can be traced to earlier forms of violence, and those to still earlier forms. In the first instance, of course – as with Canada and other nations – there was the violence of colonialism, in which indigenous American populations were decimated and in which the extraction of natural resources and their exportation to European metropoli drove the building of the state. Then, again as in other Latin American countries as well as the United States (though less so in Canada), there was the violence of rebellion against the dominance of European imperial centres, led to varying degrees by local land-owning elites. The war of independence forms part of the founding myth of the state, thus enshrining – in certain conditions – the sacredness of violence as a form of political resolution and the seeking of destiny.
Canadians may feel more familiar with another founding Colombian problematic, one identified for example by geographic historians Safford and Palacios (2002): the prevalence of regionalist economic rivalries as constitutive of political discourse. Just as Canada has the Maritimes, the West, Québec, and the Centre (sometimes identified with Ontario), so historians of Colombia identify the West (including the Pacific coast), the Caribbean coastal zone, and the East (including the highlands and the Amazon basin) – and associate these regions with gold mining, international trade, and agriculture respectively (ibid). Whereas in Canada sheer lateral distance – geography in quantity – serves to distinguish the regions in space, in Colombia it is verticality, the barriers presented by the forked cordilleras of the northern Andes, that established early “solitudes” between the country's diverse zones.

Racial tensions and nationalist aspirations along a European model contributed to historical outbreaks of violence in Colombia, as did the economic and political rivalries of well-established regional power-networks and identities (Bouvier 2009, Henderson 2001 (see especially the example of the 1946 elections)). Lastly, party ideology, eventually combined with the ideological contests of the Cold
War, contributed to a generalized breakdown of social solidarity that has affected the country throughout the latter half of the twentieth century and continues to a significant degree today (Hudson 2010, Bouvier 2009, Taussig 2004, Safford and Palacios 2002).

The late twentieth-century history of violence in Colombia, violence that has driven both internal displacement and forced international migration, can be told from the fall of the Liberal party government in 1946 due to vote-splitting by an internal, populist challenger, Jorge Eliécer Gaitán (Henderson 2001). Violent partisanship between the Conservative and Liberal parties had been delicately contained by a negotiation of elites from both parties, but this containment faltered with Liberal uprising against that same elite. Partisan violence erupted locally after the 1946 election in rural areas of the country, but exploded into an unprecedented period of terror after the 1948 assassination of Gaitán. Even today, no solid evidence exists as to the origin of the assassination conspiracy, allowing various parties at the time to project their own imperatives onto Gaitán's death. The massacres fuelled by the political crisis are referred to collectively as la Violencia, by historians and in the popular imaginary; the dates of their beginning and end are debated, but the ascent to power of a military government headed by Gustavo Rojas Pinilla in 1953 is generally agreed to have ended the most intense
period of killings (Hudson 2010, Taussig 2004, Safford and Palacios 2002, Henderson 2001, Galbraith 1966). I discuss some details of *la Violencia* in chapter 2; Taussig's (2004) work on Colombia cites it as a case of extreme social shock, a national trauma that echoes down through the following decades, and Safford and Palacios identify it as a period in which a generation of young men became “socialized to murder” (2002: 351).

The period of explicitly partisan and political killing subsided into a state of generalized criminality during the 1950s, in which networks of violent actors put their “socialization” to economic rather than ideological ends, establishing an everyday reality of what Safford and Palacios call “mafia violence” (2002: 352). Notably, Galbraith wrote in 1966 that the Violencia continues to this day (1966) in a de-politicized manner. Relative to later periods, however, this disorder represented a lull before two significant movements both elevated the incidence of violence and spread it to greater and greater extents of the country. The first of these movements was the entanglement of Colombia in the politics of the Cold War, in which capitalist and communist powers jockeyed for influence in poorer nations, or rather, renewed the imperialism of Europe and now North America over the Global South – under ideological rather than national-economic colours. In Colombia this took the double-form of a National Front in which the two
traditional political parties united to stabilize the central government, excluding all other political parties by constitutional fiat from the electoral process, and of a leftist guerilla movement inspired both by peasant self-defence organizations pursuing rural autonomy, and by the Communist revolution in Cuba (Hudson 2010, Safford and Palacios 2002). The largest and most (in)famous of these guerilla groups, the FARC, was formally incorporated from armed groups of peasants in 1966.

The second shift in the Colombian landscape was the spread of lucrative narcotics crops in the 1970s, and the organization of those that grew and profited from them, so as to defend their investment and land from attempts to enforce illegalization and interdiction. This organization overlapped with the growth of the guerilla as time went on and control over narcotics operations became a primary source of income for leftist armed groups, but it also led to the rise of apolitical criminal empires of such power as to challenge the state (Bouvier 2009). An internationally-(in)famous example of these latter empires was that of Pablo Escobar, a man who orchestrated the assassinations of presidential candidates, judges, attorneys general, and myriad figures of civil society, who seemingly could kidnap or murder anyone anywhere in the nation, and who was “brought to justice” in 1991 only on his own terms, terms which allowed him to design and
rule the “prison” in which he was then placed, and from which his economic operations could continue (Safford and Palacios 2002: 368).

By the 1980s, right-wing armed groups had begun to organize, in collusion with the armed forces, to combat the influence of the guerilla, the latter of whom by 1984 had been recognized by the state as “political protagonists” (ibid: 356) who controlled significant areas of Colombian territory. While all of the armed groups mentioned preyed on civilian populations, particularly rural ones, the paramilitaries became notorious for the sheer indiscriminate slaughter that was their stock in trade, using the terror of peasant massacres to discourage civilian support of the guerilla. Even under the generous assumption that the paramilitaries would have preferred military targets, these were generally absent due to the FARC policy of withdrawing from direct armed conflict – leaving their civilian base exposed to retribution. In addition to killings in quantity, the paramilitaries specialized in the elimination of labour leaders, educators and religious advocates associated with peasant aspirations and autonomy.

The practice of both ideological armed groups and narco-terrorists of targeting the judiciary, excluding any other arguments over the historical “weakness” of the Colombian state, severely battered the security that ordinary citizens could seek
from the state. The impunity of powerful actors was widespread and assured by violence, and the increasing secrecy employed by state justice, in an effort to protect its agents, just as often added to the real or perceived partiality and inefficacy of the law (Riaño-Alcalá 2006, Sanford 2004). As a result of this extended violence, by the end of the twentieth century “Colombians felt unprotected in life and property as at few times in the past” (Safford and Palacios 2002: 345). By 2008, 3 000 000 people had been displaced indefinitely from their homes in rural Colombia, and 260 000 were living indefinitely abroad (Riaño-Alcalá 2008).

Canada has historically had weak migration ties to Latin America (Simmons 1993), with the United States absorbing much of the northward movement of Latin American people seeking labour opportunities or sanctuary from violence. Only with the liberalization of Canadian immigration policy after 1967 did Canada become a destination for some Latina/o migrants, who nevertheless remain a relative minority of new Canadians to the present, next to South Asian and Chinese arrivals.

Prior to 1973, immigration from Latin America to Canada made up between 0.2% and 2% of the total immigrant flow into the country; as mentioned above, these
migrants tended to be Europeans previously living in Latin American countries who were generally not visibly or racially “other” (Mata 1985: 31). Mata refers to these newcomers as “thru-migrants” in that their Latin American homes were treated as intermediate steps in a migration that would eventually take them to the United States or Canada (ibid). The period between the Second World War and the 1970s was also marked by the development and entrenchment of the Cold War, a “bipolar” world system in which the United States competed with the Soviet Union for influence in the rapidly decolonizing Global South. In Latin America, post-World War II economic downturns coincided with an increasing political awareness of the poor, whether peasants with insecure land tenure or indigenous peoples long subject to paternalistic or genocidal policies. The region therefore became an arena in which Cold War contests were played out between the two “super-powers”; up until the 1970s, Canada – as a partner in the North Atlantic Treaty Organization – followed American policy very closely with respect to the need to contain and suppress socialist movements in poor countries (Abella 1993, Anderson 2003, Lemco 1991).

In 1973, Chile’s democratic socialist government under Salvador Allende was overthrown by a military coup led by General Augusto Pinochet. Chile remained under military rule for 16 years, a period marked by political killings, arrests and
disappearances, as well as substantial emigration from the country which included
many university professors, students, professionals and entrepreneurs (Mata
1985). While the exact role of the United States in the planning and execution of
the coup is still debated (cf. National Security Archive 2007), at the time some
civil groups in Canada perceived U.S. involvement as blatant interference in
Chile’s democracy and welfare (Anderson 2003: 11, Abella 1993: 92). The period
of 1973-1976 was marked by an increasingly vocal participation by civil society
in refugee issues, particularly on the part of trade unions and church groups, that
culminated in the construction of the refugee as a legally recognized and protected

During the same period, Canada experienced a large wave of Chilean migration;
from the low point 0.2% in 1955, Latin-Canadian immigration rose to 6.3% of
total in-flow in 1978, driven largely by Chilean refugees (Mata 1985: 31). Some
scholars and activists trace the origins of Canada’s political involvement with
Latin America to the establishment of a Chilean diaspora community in Canada
(Anderson 2003: 115). Although I have not found historical confirmation for this
theory, several aspects of the Chilean diaspora make it plausible. There is the
timing of the events: prior to 1973 it is impossible to locate any significant
diplomatic differences between Canada and the United States arising from Cold
War policy; afterwards the two countries disagree on an increasing number of issues, including support for Pinochet and others to be addressed in the next section (Lemco 1991). Chilean immigration began directly after the coup in significant numbers, peaked in 1975, and remained strong until around 1980; by 1985 they were the most numerous Latin American group in Canada (Mata 1985). Initially there was political resistance on the part of the government to accepting predominantly leftist political refugees (Abella 1993), but as early as 1974 specialty refugee programs for Chileans had been established (Mata 1985), including Spanish language centres in Toronto. These cultural institutions persist today. In addition to their timing, the Chilean coup refugees had the advantage of, on average, highly educated backgrounds and experience in social organizing, as the military regime specifically targeted universities and trade unions (ibid). Lastly, the Chilean diaspora was the first example of what would become a powerful pattern: those who immigrated to Canada as refugees from Latin America frequently had religious connections with Canadian churches, particularly Catholic churches, and church refugee sponsorship was easily converted into political mobilization once motivated refugees were resettled in Canada (Elbow 1992, Anderson 2003). The Chilean arrivals laid much of the groundwork for a liberalized Canadian immigration policy towards Latin America, and established a precedent of establishing minority refugee
In the 1990s, there was a new wave of refugee applicants coming from the Andean countries just south of the isthmus of Panama, in South America, in particular Colombia (Rochlin 1994, Citizenship and Immigration Canada 2009). The violence fled by these refugees was no longer the organized violence of militarized states but rather the effects of a more disorganized conflict between narcotraffickers, long-established leftist and rightist militias, and splintered but at least nominally liberal-democratic states, centred in Colombia and Peru (Rochlin 1994). These refugees do not seem to be as anthropologically well-studied, although the results of a large study conducted at UBC following Colombian refugee migration to Canada have been published in Spanish and are forthcoming in English (Patricia Diaz, personal communication).

By 2005, Colombia was the 6th largest source of new permanent residents landed in Canada, and the largest source from Central or South America (CIC 2009). Although it is not clear from the government statistics what proportion of these permanent residents are status refugees, this data should be viewed in context: Colombia also represented the 6th largest source of temporary residents granted humanitarian protection in Canada, in 2005 (ibid). A project based at the
University of British Columbia in Vancouver has funded ethnographic work with Colombian refugee communities elsewhere in Canada, significantly in the southern Ontario city of London (Dr. Riaño-Alcalá, personal communication; see also description under “Current Research Projects” at http://www.swfs.ubc.ca/index.php?id=3028); this project has created a base of knowledge concerning the dynamics of Colombian refugee communities in Canada, but focuses on memory rather than on health narratives, and to my knowledge has not yet incorporated Ottawa as one of its field sites. The Colombian community in Ottawa was therefore a strong choice for my project.

**Ottawa: Federal City / Cité Federale**

Canada is an ideal site country in which to undertake a study of the relationship between discourses of internal Otherness, government policies and human health. Since it is historically a country of great geographical size with a relatively small settler population and a more populous and powerful southern neighbour, the quantity and quality of immigration has been a great concern of policy makers and to the general public in Canada since the nineteenth century (Mackey 2002); these debates have included since that time the negotiation of racial and cultural characteristics considered desirable in new immigrants. Since the 1960s, Canada has in addition enshrined as political institutions two overarching policy goals.
relevant to this thesis; the doctrine of multiculturalism and the constitutional right of citizens to publicly-available and affordable health care. Since the 1990s, budget cuts undertaken at the federal and provincial levels of government with the stated aim of eliminating government deficits have caused reductions in many health-care services and added a note of crisis to the ongoing debates regarding the legitimacy of public versus private care. By 2001, 18% of Canada’s population were identified in the census as immigrants, the third highest proportion of immigrants in the OECD (CIC 2005a); between 2004 and 2006, Canada admitted between 32 000 and 35 000 refugees a year (CIC 2007). Because refugees are often considered suspect users of public resources (cf. Salis-Gross 2004), in a context of shrinking budgets their claims to care may be particularly bureaucratized and surveilled. Furthermore, in a Canadian field site we may expect these processes to be particularly charged with sentiments drawn from competing visions of the liberal nation-state.

In particular, I believe the city of Ottawa-Carleton, in the province of Ontario, provides an excellent municipal nexus of the factors yields interesting ethnographic data. Specifically, Ottawa is home to a large Spanish-speaking refugee population of recent arrival (Dr. Riaño-Alcalá, personal communication; Comunidad Colombiano De Ottawa: online), as well as to the legislative
The apparatus of the federal Canadian government, the archives of that same government, the civil service institutions overseeing federal health policy (Health Canada, at LeBreton Flats), and a hospital network much transformed by the neoliberal policies of the 1990s, in particular those of the Ontario Progressive Conservative Party government under Premier Mike Harris. In addition, Ottawa has a well-developed network of non-governmental organizations serving immigrant and refugee communities, such as IWSO, the Immigrant Women’s Service Organization; OCISO, the Ottawa-Carleton Immigrant Services Organization; CIS, the Catholic Immigration Service; and LASI World Skills, a non-profit organization dedicated to facilitating the recognition of professional qualifications obtained in an immigrant’s country of origin.

**Structure of the Thesis**

The original aim of the study, which included individual (interview and survey), organizational (participant-observation and interview), and policy/legal (documentary) data, is retained in the chapter division of the remainder of this thesis. Thus, the chapters are thematically organized and partly self-contained, with their own explanations of methods and results, to accommodate the wide variation in methodologies and approaches over the fieldwork period. In addition, one chapter is dedicated to some wholly unanticipated issues of Canadian
nationalisms and their impact on the structure of the Colombian diaspora community. In a small number of cases, anecdotes have been brought up twice in two different chapters; this is not an oversight but rather the product of using complex stories to play more than one role, illustrating different issues in distinct and separate arguments.

Chapter one examines the Immigrant and Refugee Protection Act of 2001 in terms of elite policy narratives, geopolitical background, and its structuring effect on the current legal position and moral imaginary of refugees in Canada. It draws on extensive quoting and narrative analysis of parliamentary Hansard transcript, House committee minutes, and selected media stories from 2000 forward.

Chapter two examines the landscape of government-, charity- and NGO-directed health and social services targeting refugees and other migrants in Ottawa. Central to my examination of this landscape is the concept of social capital as a replacement for public capital, mobilized via a valorization of civic virtue that places greater burdens of responsibility for the success of social investments on the shoulders of those considered in need of them. This is an irony not lost on those professionals who are still paid middle-class wages to administer such interventions.
Chapter three turns its focus to Ottawa-Gatineau as a place with concrete effects on the structure of migrant communities due to its position straddling the Ontario-Québec border, and thus, English and French Canadian nationalisms. I explore some of the barriers encountered in fieldwork in terms of these classic “two solitudes” in the Canadian imagination and its interaction with the identities of those Canadians born elsewhere, in the context of other national solitudes.

Chapter four synthesizes the “landscapes” explored in the first three chapters into a robust grounding for interview and survey data collected from recent Latina/o migrants to Ottawa-Gatineau, mostly Colombian, concerning their health and illness experiences as well as their impressions and analyses of Canadian health and social services. Legal, national and bureaucratic positionalities intertwine in these stories to allow some provisional, phenomenological translation of the experiences of a group of related, understudied communities.

What unites these distinct studies? Battlefields, instruments and objectives: a bird's eye view of the place of newcomers within the Canadian nationalist project, recognizing and mapping the role of conflicting interests in this project without reducing the view to a restatement of those interests. Studying the daily life of
bureaucratic encounters illuminates how newcomers to Canada see their interests entangled with some form of this nationalist project, and how they go about advancing those interests. The intention of my doctoral research is to examine the ambiguity with which people living on the margins of national belonging in Canada approach questions of surveillance, or gaze, in the context of biomedical healing: on the one hand, as undigested Others of liberal capitalism they are often subjects of surveillance that is bureaucratic, intrusive and possibly injurious to health; on the other, as persons whose health-care needs fall on the margins of a healing paradigm whose budgetary base is shrinking, being seen and recognized, fairly and accurately, is essential to continued good health (and there is evidence that refugees, despite all the bureaucratic surveillance devoted to them, are not seen in this way; see Beiser 2005). So long as the idea of public ownership of health-care in Canada is mediated through state politics, a combination of community-based and social-democratic politics is necessary to secure and improve the day-to-day access to care needed by the wounded and the ill. This dissertation will use anthropological theory and ethnographic labour to disentangle the paradox of surveillance described above, in the hopes of creating a community politics of access to health and legal belonging for all residents of Canada that simultaneously challenges state narratives of exclusion while reconciling with the pragmatics of social democracy. In the concluding chapter I
summarize the main impressions arising from my fieldwork data and argue that the empirical-philosophical exploration of human subjectivity implied by “research” is not separable from the pragmatic considerations of advocacy.
"You are number Three"

At the New Canadian Centre, the waiting area recently moved from the 5th to the 2nd floor.

Old floor - 5th

Before, people waiting could see everything.

New floor - 2nd

How much time people spend here! We/they become a knot of bored bodies, unstimulated by the wall of brochures for newcomers.

Now, the receptionist has an easier time controlling access.

Then Presto!

Someone is lifted out of the crowd.

Three days a week a lawyer donates hours; they only take names one hour before he arrives.

First come, first served. No exceptions.
Well, there are some exceptions...

Is #5 here?
Wait, I'm #3.

There's a #3.

I've been told to make him wait.
What?
He has to wait.

No, he's #3. Take him.

I don't want Mr. Grant to be mad at me. I was told he has to wait if I bring him in.

I'll talk to him.

I have a friend who is a lawyer. He works on cases like this.
He's taking a statistical right now. He needs a break.

OK? Why?

He's tired of being lied to.
Chapter 1: Un/canadian: Legislative debates and ministerial discourses surrounding the refugee subject in Canada since the Immigrant and Refugee Protection Act of 2001

Critical theories of nationalism, both academic and activist, often frame their analysis in terms of a project of generating exclusion (or “illegality”) and repressing the other, reinforcing the boundaries of belonging in the nation-state by defining that which does not belong and then acting out this rationality through schemes of surveillance, detention and deportation (Horton 2004, Ngai 2004, Hindess 2001, Walters 2002, Marx 2003; for a contrasting view see Goldring et al. 2007, Joppke 2005). If the State is anthropomorphized, then its heart (nationalist sentiment), head (legal discourse), and hand (bureaucratic and police action) are in harmony and its objectives are clear.

This chapter presents an analysis of legislative governmentality structuring the experiences of refugees living in Canada during the first decade of the twenty-first century. It problematizes the approach to critiquing nationalist projects that assumes a unified project of power that operates primarily through repression and
exclusion. The central focus is on the *Immigrant and Refugee Protection Act* [IRPA](2001), a piece of omnibus legislation introduced in 2001 and passed into law the following year. This bill of law aimed to update the immigration and asylum systems in Canada, which had last been defined in law in the *Immigration Act* of 1976.

Given the timing of the debate, it was perhaps inevitable that it became embroiled in tropes of national security and anxieties about foreign bodies moving within the state; the first debates on the bill took place shortly after the arrival of 600 Chinese immigrants by boat on Canada's western coast, and the final months of debate were those directly following the September 11th attacks in New York City and Washington, D.C. It would, however, be short-sighted to limit consideration of the debate surrounding IRPA(2002) to the xenophobic and authoritarian, for it was also an arena in which various actors, within and outside the legislature, attempted to frame the ethical imperatives demanded by the liberal values that – it went unquestioned – constituted the core of the Canadian national character. These values represented the nation itself, one might say, and that which gave justification to the sovereignty of the state.

People wishing to move to Canada from elsewhere, for various reasons, thus
became -- through the IRPA(2001) debates – subjects more spoken of than heard from, and invested with a curiously charged nationalist vitality. I argue that, much as the female subject is often simultaneously rendered silent and invested with supreme cultural value within nationalist discourses, relating her role as biological reproducer to one of cultural reproduction (cf. Yuval-Davis 1997, 1996, Bracewell 1996), immigrants and in particular refugees have not simply become – as subjects in law – suspect creatures, but passive-heroes who represent the cultural virtues inscribed in the image of the nation-state, suspect in part because their misbehaviour (real or imagined) makes a mockery of those high ideals. Their “biological” reproduction is through the entry of their bodies into the borders of the nation rather than as producers of babies (although one Afghan member of the PEN Writers-in-Exile group once commented, at a meeting at McMaster University, that he felt Canada only wanted him for his children). Nevertheless, in a low birth-rate country such as Canada the parallels between immigrants' “problematic generativity” and that of women's bodies under other nationalist regimes are intriguing. Consequently, I conclude that a critique of Canadian nationalism fails if it embraces the notion of the nation-state as an illegality-producing machine. Instead, the Canadian nationalist project constructs its “Self” not in opposition to its “Other” but at least partly in its entanglement with the “Other” and in its expectation of the “Other”’s blessing and consent.
The most obvious critique of a discourse-based approach is that politicians and policy elites may say one thing to the media or to potential supporters, and then use this friendly narrative as a cover for their true agendas\(^1\). The persistence, and indeed expansion, of detention and deportation practices, seem to argue that the focus of critiquing Canadian immigration governmentality should remain firmly upon the existence and promotion of such practices that unquestionably cause harm and disenfranchisement. I do not seek to deny or paper over the real, day to day practices of exclusion that occur under the “banner” of Canada's ongoing project of nation-building. At the same time, it seems to me that discourses and practices that are at odds do more to highlight, rather than obscure, each other. Telling easily disprovable falsehoods can test the loyalty of even the most docile media establishment, which after all has a commercial interest in scandal. Furthermore, I argue that speech acts – while they cannot directly amend or erase structural violence – are not empty of agency; to argue that the Canadian national character is based upon welcoming the stranger is to close down some avenues of rational action and open others. Since policy is a process of manufacturing rationality (cf. Weiss 1986, Shore and Wright (need date), Li 1999), it is not entirely free to betray its own, internal logic of bringing the heart, head and hand

\(^1\) An example of this discussion, from both sides, can be found in Ferguson 1990, Mosse 2005: intro, commenting on Ferguson, and Li 2007, commenting on both.
of the state into apparent harmony. Words can be twisted but not infinitely so.

It is under this logic that the following sections represent a brief sketch of the historical antecedents to IRPA[2001], followed by a discursive analysis of the elite debates over its formulation in the Canadian House of Commons and in the meetings of the Standing Committee on Immigration and Citizenship, and finally by a brief treatment of some post-legislative history of the act “in practice” using media sources. Through these three sets of evidence I will demonstrate that extant structural racism, including detention and deportation practices, are not best explained as conscious betrayals of falsely-claimed nationalist values of multiculturalism, inclusion and integration, but are the companions of the ever-incomplete rationalization of such liberal aspirations.

Not Part of the Jet Set: IRPA in the Context of Canadian Immigration history

Immigration has provoked paradoxical anxieties in Canadian policy discourse for as long as Canada has existed as a nation-state. On the one hand, from the beginnings of Canadian nationalist expansion, immigration was desirable – and in quantity. Immigrants were needed to provide a settler population that would secure Euro-Canadian sovereignty claims over the vast western territories – both against native Canadian sovereignty claims and the encroachment of rival settler
powers (which in the case of Canada's west meant more or less exclusively the United States). On the other hand, the *quality*, in particular the racial makeup and the nationalist-religious loyalties, of the immigrants, was a source of gnawing discomfort for the central-Canadian, settler elites directing immigration policy (to the extent that it existed). In order to compete with the rapidly industrializing United States for influence and power, nineteenth-century Canada needed to be “a nation of immigrants”. Indeed, given the settler nature of Euro-Canadian community it would have been an exceptional hypocrisy to embrace strict nativism. Yet at the same time, Anglo-Canadian elites feared the permeability of European racial identity that immigration implied, the mixing of peoples -- partly due to commonplace racist affect and partly due to a pragmatic desire to maintain the Canadian population's loyalty (through ethnic nationalism) to a distant, British crown (Mackey 2002: 46).

Mackey's history of racial nationalism in Canada, which forms the first part of her book *The House of Difference* (2002), argues that the appropriation of the Canadian landscape as a reflection of racial character became a powerful symbolic resource in the political demarcation of suitable and unsuitable migrants. The cold, lonely wilderness was adopted as a reflection of the intellectual yet muscular spirit of the Northern European, binding Englishmen (as majority
subjects) together with Scandinavian, German, Dutch, Scottish, and to a lesser extent Irish and French persons into an imagined community suitable for life in the “Great White North”, and for whom the untamed wilderness was itself suited. Southern Europeans, and especially migrants from India, China and other non-European origins, were thus undesirable because of their incompatibility with the climate (31). Thus one could construct a perverse but relatively stable “settler nativism” that simultaneously allowed for the European conquest of the Canadian territory while circumscribing the bounds of whiteness against subsequent (what might even otherwise seem “natural”), permeation through further colonization by further newcomers.

This discursive racialism could not, however, erase the tension between the need for settler labour and the desire of Anglo-Canadian elites to maintain ethnic majority status. Massive numbers of Chinese labourers, for example, came to Canada to work on the construction of the railroads, and despite the continuous passage of discriminatory and exclusionary measures against them\(^2\), it proved impossible to maintain the fiction of a White Canada. Canadian immigration policy lurched from crisis to crisis, each flashpoint reilluminating the essential tension at the heart of the national project between migrant-settler identity and

\(^2\) Not to mention the horrible conditions under which the railwork was conducted – cf. Hau-hon 2006.
For a full reading of this history, I will save considerable space by simply recommending Mackie's (2002) book. For the purposes of this chapter, it is enough to explore the fact that the arrival of boats often acted as the catalysts for these crises, and that the means-of-arrival gradually came to shoulder some of the nationalist burdens that racialism could no longer support (especially after its radical discreditation by the destruction of Nazi Germany and the widespread revelation of its atrocities). Nationalist circumscription of the good immigrant today still plays on and reinscribes racism, but literal whiteness is no longer a signal discourse compared to membership in, just as literally, the jet set.

Jets, can be opposed to boats (or even more lately, cars). I want to consider, as a brief sketch, four boats and four crises. In 1914, the Komagata Maru arrived off Vancouver from India, carrying 376 passengers – all British subjects – wishing to immigrate to Canada; they were barred from doing so by the “continuous journey” doctrine adopted specifically for the purpose of making Chinese and Indian immigration impossible, insisting that any ship carrying would-be migrants must travel from the migrant's home country to Canada without making any ports of call. Like the Sun Sea vessel carrying Tamil migrants from Sri Lanka that would
arrive almost a hundred years later, the Komagata Maru was especially feared for
the possibility of its passenger manifest containing dangerous political criminals,
in this case members of the Ghandar movement who advocated Indian
independence from Britain. The Komagata Maru was never allowed to dock, and
tensions culminated in a riot and the deployment of a navy vessel to force it from
the harbour. Upon its arrival back in India, 19 passengers were killed by British
guns and the remainder placed under various forms of imprisonment (Johnson

In 1939, the M.S. St. Louis, a German ocean-liner, crossed the Atlantic carrying
937 Jewish Germans fleeing the Nazi regime. Denied entry into Cuba and the
United States, they were at sea only two days from Halifax harbour, and a group
of Canadians organized to petition the government to provide the ship's
passengers with sanctuary in Canada, but anti-semitic attitudes in the cabinet and
Immigration department prevailed (Morgan-Witts and Thomas 1994).
Approximately 250 of the passengers were subsequently murdered by the Nazis
when the ship was forced to return to Europe (Ogilvie and Miller 2006). The
minister of Immigration of the time, Frederic Charles Blair, made a personal
project out of obstructing refugee migration of Jews during the War years, and an
immigration officer in 1945 infamously said of Jewish migrants to Canada: “None
is too many” (Abella and Troper 1983).

Following the Communist takeover of South Vietnam in 1975, 9,000 “boat people” crossed the Pacific to seek asylum in Canada; in the following 6 years they were followed by approximately 60,000 others, as Vietnam was further devastated by conflict with China and Cambodia (CIC 2009, Wurfel 1980). In the post World War II period, Canada’s refugee policy was heavily slanted towards assisting those oppressed by Communist regimes, and so the Vietnamese people who successfully made the journey had the “good fortune” of falling on the right side of policy prejudices. In addition, policy elites in Canada were increasingly favorable to a generous Canadian participation in an international refugee resettlement regime. In an essay reflecting upon the reception of Vietnamese refugees, one MP commented that “so far there is not anyone who has stood up in the House of Commons in the last Parliament, or in this one, to take the case for...[the] xenophobic point of view” (Kaplan 1980). Nevertheless, the large number of arrivals provoked considerable racial-cultural anxiety; newspaper columnists, and lobby groups such as the National Citizens Coalition, published alarming warnings to the populace about the “influx of Asians”, while author Doug Collins reminded Canadians of the credo of Mackenzie King that “A country should surely have the right to determine what strains of blood it wishes to have in its
population” (quoted in Adelman 1980: 88, 95). By 1979, when refugee numbers from Indo-China reached their peak, opposition to their admission polled at minimum 37% of the population, “in spite of a total media emotional appeal to the heartstrings of Canadians... including the leadership of all three major parties, religious leaders, professional leaders, [and] educational leaders” (ibid).

In the summer of 1999, in what would turn out to be one of the most direct influences on the tone and haste of the IRPA(2001) debates and passage, approximately 600 people made their way from Fujian province in China to Canada's west coast, by three separate boats (Mountz 2004). Upon arrival, they claimed refugee status and all were detained while their claims were processed. In the end, only 16 were found to qualify as refugees under the U.N. Declaration (Armstrong 2000). Largely, the arrivals from Fujian were leaving behind marginal economic circumstances in search of a better life abroad. Leaving aside the question of their exclusion, what is remarkable about the event is the rhetorical hyperbole used to describe it, in contrast with the relatively small numbers of arrivals and the absence among them of any sign of violent criminality, or any turpitude beyond their pragmatic gamble with the Canadian immigration system. The ships arrived “crammed with Asians,” delivering “a crate of China dolls” to

\[\text{During the same year Canada let in 280 000 temporary, legal immigrants, and admitted 7 000 government-assisted refugees from Kosovo (CIC 2009).}\]
the Canadian coast (Birnie 1999, *Globe and Mail* 1999a); the passengers of the ships were freely described as “illegals” or “illegal immigrants” although their status had yet to be determined by law, as well as “human cargo” (Lunman 1999, Armstrong and Lunman 1999). Chinese-language newspapers in British Columbia referred to the arrivals as “snake people” (*Globe and Mail* 1999b). One editorial in Canada's largest national newspaper warned that, unless the government suspended the constitutionally-guaranteed rights of refugee claimants, placing them beyond the reach of law, “uncontrolled economic immigration would simply overwhelm us” (*The Globe and Mail* 2000a). Immigration officials warned that the 600 number would double the following summer, implying an exponentially-rising wave of “Asians” being “dumped” on Canadian soil (*The Globe and Mail* 2000b); in fact, no significant boat arrivals followed the summer of 1999. Not every passenger, however, was unwelcome in Canada:

Canadians are welcoming with open arms a dog found aboard a smuggler's ship while the human passengers face deportation to China... A Victoria animal shelter has been inundated with calls from people across the country wanting to adopt the dog, which workers at the Society for the Prevention of Cruelty to Animals have named Breeze after its long ocean journey. “They want to know how she's doing and are worried she might be sent back,” Lynne West, SPCA executive director, said yesterday... In contrast, the people aboard the same boat were greeted by protestors, angry calls to radio phone-in shows and a local newspaper headline telling them to go home after 97 percent of more than 3000 readers polled said they favoured deportation (Lunman 1999).

Not mentioned in the story is whether the dog already had a friend among the
boat people, or had already been given a name.

Not all of these crises provoked restriction and repression, and even those that did can be read as part of a history of dissent and the unsteady rise of more liberal policies and nationalist sentiments. What the Canadian national project cannot seem to escape, however, is the form of the immigration debate as crisis. Indeed, some political theorists have argued that crisis is the seemingly inescapable nature of the whole question of a Canadian nation; national Canadian identity exists only as crisis (Mackey 2002, Kernerman 2005). The debate and final form, as well as the consequences, of IRPA(2001), should therefore first be read with an eye to the continual project of reinscribing legitimate citizenship and legitimate paths to citizenship. One of the ways in which this process is attempted is by examining the form and manner of arrival of a would-be Canadian.

**Without a Flag: Placing IRPA in the History of Refugees as Legal Subjects**

The history of exile is very long; the trope of separation from a homeland is in fact probably one of the oldest elements of human storytelling. In the matter of law governing the relationships between exiles and nation-states, however, there was a definite crystallization following the end of the Second World War. The destruction meted upon Europe, and in particular the massive Nazi system of
population displacement (whether for labour or extermination or both) had created a great mass of people separated from their homes and on the move. The summer of 1945 saw approximately seven million civilians moving through western Europe alone (Wyman 1998). Many, perhaps most, of these “displaced persons”, or DPs, eventually returned to a nation-state that recognized them as native citizens. Many others, however, declined to return home, particularly when their home had fallen under Soviet occupation during the last stages of the war (ibid: chapter 1). Some were no longer recognized as nationals by any particular state and therefore had no legal home to go back to.

The question of how to reinscribe these displaced persons into the legal order of the nation-state was one haunted by the spectre of the Holocaust and other mass killings of the period. Hannah Arendt focused upon the condition of the stateless person as the foundation for her post-war political philosophy. Whereas, she argued, it had been assumed from the period of the revolutionary Enlightenment (the American and French revolutions particularly) that certain political rights were innate to the human person, the tensions preceding the genocides of the war – as well as the climactic acts of violence themselves – showed that the exercise of those political rights was dependent upon the inscription of the subject within the nation-state as a citizen. Furthermore, state actors willing to reduce human
beings to raw animal life that could be eliminated *en masse* could form a legal basis for this elimination in the repeal of citizenship (Arendt 1958, cited in Isaac 1996). Furthermore, once a person had been stripped of their citizenship, and thus their legal humanity, by their “home state”, they had little or no power to compel another nation-state to recognize them as humans deserving of political rights (or indeed, inherently possessing those rights). The tragedy of the *MS St. Louis* was a shameful indictment of Canada but it was no crime; for no law governed the actions of a state towards the human beings that another state had declared to be non-persons. The entire structure of international law that had been built following the First World War assumed that a citizen could be protected by the rule of law outside their home state due to the fearful respect in which nation-states held each other, *contra* the threat of another Great War (*ibid*). When states chose to withdraw the umbrella of legal recognition from the political rights of unwanted populations, those rights ceased to exist; a new framework, a new understanding of rights and citizenship, was desperately needed. The huge numbers of DPs gave this project an immediate urgency in addition to the more general demand of preventing another Nazi-style extermination.

From the inter-Allied management of displaced-persons camps arose first the United Nations Relief and Rehabilitation Administration (UNRRA), and then the
United Nations High Commission on Refugees (UNHCR) (Wyman 1998). One-hundred forty-seven member nations of the United Nations eventually signed the 1954 Convention Relating to the Status of Refugees or its 1967 Protocol, which legislated a new form of international law which recognized the imperative of non-refoulement of any person who,

owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence as a result of such events, is unable or, owing to such fear, is unwilling to return to it. (Convention Relating to the Status of Refugees 1951 (as amended, 1967))

Two broad patterns in international relations shaped the initial implementation of refugee administration in Canada, as well as transformations in Canadian immigration policy more generally. The first was the emergence of NATO and the Warsaw Pact as power blocs engaged in the multi-layered conflict known as the Cold War. The second was the devolution of European imperial governance in the Global South, which entailed a reversal of colonial settlement patterns – particularly in the British sphere of influence, where transfers of power to emerging nations often entailed the maintenance of some political ties via the Commonwealth. Whereas previously people might have set off from Imperial centre to colony to seek their fortune, now people sought improved opportunities
in the other direction, moving from former colony to metropole, destabilizing colonial nationalisms in the process (Gunew 2004, Stoler and Cooper 1997). In the meantime, the destabilizing influence of the Cold War power blocs over nations in the Global South, as well as the oppressive domestic policies of Communist nations, began to generate new exiles – rendering the line between economic and political migration less and less clear.

Between Canada's signing of the Convention in 1954, and the passage of IRPA(2001), two major policy shifts helped redefine the place of refugee migrants in the nation's legal structure of subjecthood and citizenship. The first was the Official Languages Act of 1969 and the Multiculturalism regulations of 1971. This act and the subsequent regulations had nothing to do with immigration per se; rather, the primary motivation for its passage had to do with the tension between Canadian and Québécois nationalism (Mackey 2002). The Multiculturalism policies chiefly set out a “multicultural” Canadian-nationalist project in terms of “two founding nations”, plus recognition for the “first nations”, meaning native Canadians. However, the policies were the defining instance of a broad shift in Canadian policy and in its nationalist imagination⁴ that repudiated

---

⁴ I use imagination here following from Anderson's (1991) idea of the nation as an “imagined community” -- therefore, I mean the conversational process by which the borders and substance of Canada as an imagined community was continually reinscribed. Here imagination is not used as a platonic construct but to refer to novel vocabularies which, in practice, produce
the overtly racist ideology of “White Canada” that had guided immigration policy in the 19th century, and whose influence doomed the passengers of the St. Louis. The 1967 White Paper “Canadian Immigration Policy”, following the passage of the Languages Act in the same year, confirmed that Canada desired a diverse group of migrant citizens to help bolster Canada's labour force, both skilled and unskilled, and also help fulfill the imagined promise of a multi-national state (and therefore, one might speculate, dilute the tensions of the country's Anglo- and Franco-nationalisms).

The following decade saw the establishment of two migrant communities in Canada that would contribute greatly to a second major policy shift, the Immigration Act of 1976 [IA(1976)]: the Chilean- and Vietnamese- Canadians. In 1973, Pinochet's coup against the government of Chile created a Chilean diaspora of refugees endangered by the new regime. Because they were identified with the socialism of the Allende regime, they were not considered ideologically ideal refugees – up until the 1970s, the priority of refugee acceptance in Canada, as in other NATO countries, was heavily skewed towards accepting defectors and political refugees from communist countries (cf. Abella 1993, Statsny and Tynrner 1993, Elbow 1992). The Chilean exiles, however, tended to be relatively highly educated, with substantial assets and professional qualifications; they

new conceptual limits on Canadian belonging.
represented an attractive migration opportunity for the Canadian state for other reasons. By the end of 1973, 6,000 Chilean migrants had been admitted to Canada, forming politically and artistically active communities, particularly in Montreal (Hazelton 1995, Mata 1985). Today, Chilean poetry, prose and other artwork is considered by some to have had a tremendous founding role in any Latino-Canadian art tradition identified as such (Hazelton 1995, Urbanyi 1995).

Chilean exiles were also often experienced with political organization, having been politically involved to the point of personal danger in their homeland; they made alliances with Canadian trade unions, religious groups and other segments of civil society already concerned with the cynical way in which Canada's acceptance of refugees was being used to further geopolitical (Cold War) rather than strictly humanitarian ends (Simmons 1993, Abella 1993, Anderson 2003). The Chilean coup, and particularly the direct involvement of the United States in its planning and execution, provoked considerable outrage in Canada among these civil-society groups, and the political alliances formed by the Chilean exiles produced a significant lobbying force for a new refugee policy focused on non-ideological, humanitarian sanctuary.

This organizing for a broadly ethical refugee policy culminated in influence over
the form of the *Immigration Act* (1976), which established the arm’s length Immigration and Refugee Board (IRB), which among other duties handles the determination of refugee status under a quasi-judicial, adversarial framework (for vignettes describing the work of IRB refugee-status hearings, see Showler 2006). The act eliminated specific exclusion classes (such as for the physically disabled, homosexuals, subversives, etc.) in favour of a general principle that those admitted to Canada should not pose an “excessive demand” on the country’s social services (IRPA[2001] – s.38(1)(c)). It established the three main streams of immigration seen in the Canadian bureaucracy to the present: refugees, family-class migrants and independent (economic) migrants. Finally, it established graded punitive measures for non-citizens convicted of crimes or failure to follow immigration protocols, replacing deportation-only schemes of immigration discipline with a variety of tools such as 12-month exclusion orders and other temporary punishments (IRPA[2001] – s.24(4)).

Since the 1967-1976 transition period Canada has sustained a high level of immigration from a diverse number of source countries, following government-established proportions for the admission of economic migrants (who must qualify under a points-system), family-class migrants (related to Canadian permanent residents), and refugee migrants – who are either vetted through the IRB process
or selected by the government in consultation with the UNHCR.

Themes in the Hansard and Committee Minutes: The Nature of Canadian Nationalism: Are “We” the Immigrants or the Regulators?

Debate of the IRPA[2001] bill took place in two significant arenas which leave almost-complete documentary traces: the minutes of the House of Commons, where political parties and their legislators debated the bill, and those of the Standing Committee on Immigration and Citizenship (the exceptions being those sessions closed to those without secret clearance or above; in these cases the transcripts were suppressed). The Standing Committee's task was to solicit presentations from civil society groups, concerned individuals, and other branches and divisions of the government, in a series of meetings held across the country. This stage of legislation culminated in a report by the committee to Parliament, which came with a raft of recommended revisions to the bill based upon the evidence gathered in the presentations. In general the committee – which was made up of members of all the parties represented in Parliament – tended to downplay partisan positions in its proceedings and attempted to identify consensus among committee members with regards to the report to be submitted.

I reviewed eleven hundred and ninety-nine pages of double-spaced transcript text
from the Standing Committee meetings; these transcripts covered 20 meetings in 5 cities, from March 1st 2001 to May 17th 2001. In addition, I reviewed four hundred and forty-one double-spaced pages of transcript from the Parliamentary debates on the bill itself, consisting of the Second Reading, Report Stage, and Third Reading sessions. My first reading of the transcripts was not done with any coding in mind. Passages were highlighted that seemed to represent consistently repeating themes. On a second reading, these highlighted passages were culled and word- and term- searches were additionally used to identify a comprehensive sample of rhetoric that addressed two themes that seemed to me to be central to positioning IRPA[2001] within the broader discourse of law and the refugee subject. These centred first around the "genuineness", or by contrast the criminality, of refugee migrants, and second around the "Canadianess", or by contrast the illiberality and intolerance, of the bill's provisions -- or, in other words, anxieties were expressed both about the place of newcomers within the Canadian state, and the nature of the Canadian state itself as an ongoing project.

None of the speakers in the parliamentary debates, from any party, seemed willing to position themselves for or against the bill on nativist grounds. That is, it is difficult to locate in the Hansard transcript any justification of the bill in terms of

---

5 There is no substantive debate on a bill's first reading.
outright restricting immigration so as to preserve an imagined Canadian national character. In contrast to the 19th- and early 20th-century policies of “White Canada”, in which policy-makers attempted to circumscribe a Canadian national identity in terms of racial exclusion (cf. Mackey 2002), it is not at all clear from the 2001 debate about the same issue how (or if) exclusion is to be deployed in the preservation or promotion of the nation.

IRPA[2001] was introduced by a Liberal-party government, that held a strong majority through most of the 1990s after the collapse of previous Conservative-party governments led by Prime Minister Brian Mulroney. Two other large parties in Parliament at the turn of the 21st century were descendants of the collapsed Mulroney alliance: the Western-regionalist, rightist Canadian Alliance (which included American-style “movement conservatives” along with more libertarian, populist-centrist and regionally-focused politicians), and the separatist, social-democratic Bloc Québécois. Also represented were the Conservative party (at this time reduced to a very small remnant), and the New Democratic Party, a national social-democratic party. The acronyms used to indicate party affiliation of quoted speakers are indicated in Table 2. I have bolded the citations from Liberal party speakers because the Liberal Party were in government at the time of the bill’s passing, making them the authors and sponsors of the law and those planning for
its deployment upon passage.

<table>
<thead>
<tr>
<th>Political Party</th>
<th>Acronym</th>
</tr>
</thead>
<tbody>
<tr>
<td>Liberal Party (Government)</td>
<td>LP (bolded)</td>
</tr>
<tr>
<td>Canadian Alliance (Official Opposition)</td>
<td>CA</td>
</tr>
<tr>
<td>Bloc Québécois</td>
<td>BQ</td>
</tr>
<tr>
<td>New Democratic Party</td>
<td>NDP</td>
</tr>
<tr>
<td>Progressive Conservative Party</td>
<td>PC</td>
</tr>
</tbody>
</table>

Table 1: Abbreviations used for political parties in this chapter

Throughout the debate on the bill, speakers from all parties positioned themselves, before supporting or criticising the bill, as pro-immigration, and linked pro-immigration policy to Canadian national identity.

Thousands of [immigrants] took what Canada had to offer and built a country that has a distinctive label of being the greatest country on this planet. I have personally sponsored refugees and worked with many immigrant families. The Canada they see is the same Canada that beckoned my [Croatian] ancestors... we need to increase the number of immigrants because they come with such strong values and principles and are a real asset to our province (Lynne Yelich, CA).

“There are probably few countries in the world where immigration and refugee policy is as significant and as fundamental as it is in Canada... The policies and legislation enacted by the government and debated by the House go to the core of what we believe as Canadians. One of the concerns that we have expressed in the NDP is that the legislation the minister has now reintroduced is a reflection of the public mood that has become more negative about immigration and refugee policies. (Libby Davies, NDP)

As [the Committee] travelled we were impressed by the commitment of Canadians to immigration... They spoke about how Canada had been built by immigration from all parts of the world and how much
that immigration had been appreciated. [IRPA[2001]] would build upon our great tradition of inviting people from all over the world and continue our great historical tradition of being one of four countries in the world that recognizes its responsibility to protect refugees... (Joe Fontana, LP)

It is clear that the government's wish to introduce this bill is also motivated by a certain pressure from our neighbours to the south, whose view of this obligation to show solidarity towards refugees perhaps differs from that of Canadians and Québécois... A certain anxiousness on the part of the government... had less to do with public opinion in Canada or in Québec than... with what the U.S. Government wanted. (Pierre Paquette, BQ)

Having established, and in many ways agreed on, the nationalist terms of the debate, the focus of contention then was often whether the specific dictums, and overall tone, of the bill, was in line with Canadian nationalist aspirations, or working against them (as is already implied by the Bloc critic's quote above, which simultaneously separates Québec nationalism from Canadian, and also aligns both of them against American interests).

We analyzed the bill [in committee] from the point of view of several perspectives. First, was it true to Canada's traditions and set of values [sic] around openness to immigrants and refugees from around the world?... The government failed Canadians by not ensuring that we went forward with a bill that had addressed all those concerns. (Judy Wasylycia-Leis, NDP).

As Progressive Conservative Opposition critic on the immigration committee, I sat and listened to the testimony of over 150 witnesses and groups. They almost all repeated the very same serious concerns. They were concerned that parts of the bill were draconian and even
We can recognize the great worth of immigration and make sure permanent residents who want to be Canadian citizens are further protected. We all heard a term [in the draft of the bill] that was rather un-Canadian. Everyone who was not a citizen would be referred to as a foreign national. We heard loud and clear [from presentations to the committee] that this is not how we wanted to define ourselves. We have amended the bill to recognize the status of landed immigrants and permanent residents who we hope will want to be citizens. (Joe Fontana, LP).

The project of disciplining immigration through IRPA[2001], whose legacies are discussed in greater detail below, seemingly stirred up as much nationalist anxiety as the “mass” arrivals of migrants to which it was responding. Liberal Party (government) speakers spent significant speaking time defending the liberality of their proposed legislation against charges that “the party of Pearson, Trudeau and Wilfrid Laurier now seems to be the most reticent to protect the rights of refugees and immigrants” (John Herron, PC). The balancing act was delicate because the presentations heard in committee from civil society groups were largely negative and focused upon the “draconian” measures in the bill, which would expand detention, endanger the rights of migrant children to education while their parents' status was unresolved (a move that was also likely unconstitutional, given provincial jurisdiction over schooling in Canada), and reduce the number of judges hearing a refugee application from two to one⁶

⁶ The planned overhaul of the refugee arbitration system in IRPA[2001] included this workforce
Nationalist rhetoric in the parliamentary debate flowed naturally from what “Canada is...” to who “Canadians are...”, or more accurately, what Canadians want, think, and feel. In theory, the extensive meetings of the Standing Committee were intended to canvas these thoughts, desires and opinions; in practice, invocations of the popular will in Parliament were twice mediated. First, only a handful of members actually sat on the Standing Committee as it conducted its meetings, and their findings are condensed into a report for Parliament, squeezing over a hundred presentations into a spare document that lists only recommended amendments to the legal language of the bill. Second, Parliament is a space of competition between political parties, whose power and influence are formed in contests with their rivals. The articulation of what “Canadians want...” is somewhere between a positioned reading of official records of civil-society presentations and unofficial communications with constituents, and a move within an elite game of power-strategy (from which we take the colloquial phrase that a

reduction (which eliminated the “benefit of the doubt” tradition whereby if the two judges were in disagreement the applicant would be granted status. In order to “balance” this change, the creation of a Refugee Appeal Division was mandated that would allow an appeal of IRB decisions to be made on the evidence. However, successive Liberal and Conservative governments since the bill's passage have refused to enact this mandate, in violation of the law. The only other avenues for appeal are to the Federal Court, which agrees to hear only 10% of requests for a review of IRB decisions – and will also only review matters of procedure and law, not any new or misunderstood evidence; a Pre-Removal Risk Assessment that prevents deportation to a small number of countries on the basis of generalized danger; or a Minister's Permit granting Compassionate Leave to Remain, a document whose issue is at the discretion of the Minister for Citizenship and Immigration.
What do Canadians want? They want a system that works first for economic and independent immigrants. Canadians also want a system which will accept genuine refugees. (Leon Benoit, CA)

As [the Standing Committee] travelled, we were impressed by the commitment of Canadians to immigration. (Joe Fontana, LP)

Most Canadians know what a true refugee is. (Gurmant Grewal, CA)

Canadian people have a right to feel safe in their communities... Canadians have told us that they want our immigration system to be open and welcoming to immigrants and refugees who need our protection... but they no longer want to tolerate the kinds of abuses they have seen where people have been free in our society to reoffend, to commit additional crimes. (Steve Mahoney, LP)

Most Canadians know what a true refugee is. (Stockwell Day, CA)

The bill is contrary to the very values that Canadians hold so near and dear. (Judy Wasylycia-Leis, NDP)

When we talk about real life gut issues that affect people on the street and victims in the country, we are treated with a wall, a barrage, like Holocaust deniers. (Randy White, CA)

Finally, the Immigration Critic of the official opposition, Inky Mark, who travelled with the Standing Committee, gave a long speech that is sufficiently remarkable that I would love to include the whole thing. Here I settle for an

---

7 Randy White’s speech in Parliament was a significant exception to the theme being explored here (that all Canadian political parties try to position themselves as pro-immigrant). Mr. White was explicitly and vitriocially concerned with the seemingly innate and rampant criminality of foreigners, and proud of his record of aiding and encouraging deportation proceedings. The inclusion of right-wing populists like Mr. White in the CA caucus made their position especially awkward in the “game” of deflecting criticisms of racism and staking out a nationalist pro-immigration stance.
We Canadians like to think that racism and bigotry are European or American in origin and play little part in our history, tradition or psyche. We see ours as a country of vast open spaces and limitless potential which has always been open and available to the proverbial huddled masses yearning to be free. Yet as the recent history in Canadian literature has shown, the Canadian record is one of which we ought not be proud... The central problem of Canadian immigration policy is that for most of our history we did not have one... Nor has there ever been in Canada – neither now nor in the past – any clearly articulated national consensus about what immigration should be or what it would be. (Inky Mark, CA)

Although the Hansard should principally be read as an intensely positioned, wilfully biased source, a sequence of strategic power-moves, Mr. Mark – in my opinion – goes beyond partisan rhetoric to skewer the inherent chaos of nationalist “work” of which IRPA[2001] is a part. Stimulated at each instance by crisis, the elite conversations about policy as a tool for identifying those who belong and those who do not face competing demands of statecraft – from labour needs, to diplomatic considerations, to real or imagined security concerns, to the “optics” of decisions that will be reviewed by an increasingly multi-ethnic and multi-cultural electorate. And yet from this chaos emerges a strange discursive consensus under which no one sees profit in staking out an explicitly nativist, exclusionist scheme of Canadian nationalism.

Themes in the Hansard and Committee Minutes I: Who is the Good Refugee?
If strongly anti-immigrant stances are avoided in elite political rhetoric, equally
un-thinkable is the idea of relinquishing state control of human passage over the
border. All parties are operating in the reality of the last century's increasingly
sophisticated and disciplinary technologies of border control, and if anyone can,
in theory, be a member of the Canadian nation, that seemingly makes it all the
more imperative that their moral character be subject to public scrutiny.

Immigrants and refugees are thus carrying a double symbolic burden, of being the
life's blood of the nationalist project – with high expectations laid down by their
mythologized forerunners -- and at the same time a morally problematic subject
who may be concealing criminal tendencies.

Word-counting is neither my forte nor my preferred method of analysing a text,
but it is hard to escape the sheer consistency with which the term “genuine” is
attached to the word “refugee” in the Hansard transcript. This simple formulation,
found 86 times, provides one of the most critical aspects of performance that turn
a project of broad, liberal nationalism into advocacy for repressive security
policies while maintaining allegiance to that liberal project. Sorting out those
merely “putting on a show” from those who genuinely (use truly – avoids using
genuine, the same term you are analysing, unless you want to preserve the irony)
feel that these sentiments can be reconciled is, of course, well beyond the capacity
As a government, our role is to open the door to those who want to settle here, but also to protect Canadian citizens, including against certain immigrants who break the law. (Raymonde Folco, LP)

Greater attention must be paid to realistic, enforceable processes so the average immigrant's good reputation will not be jeopardized by non-citizens who engage in criminal activity. (Paul Forseth, CA)

[Canadians] know our system is failing genuine refugees. For example, fewer than 5,000 of the 23,000 refugees that we accept each year are actually chosen from camps overseas where they have been designated as refugees by the United Nations... most of the people we bring in are not actually from camps. They are brought in from overseas, but they have been rejected by the system in another country. (Leon Benoit, CA).

The government needs to recognize that individuals in refugee camps are already refugees due to something that has happened in their home nation and would therefore be candidates for protection in Canada. (Grant McNally, CA).

Canadians have a right to feel safe in their communities... To suggest the bill is flawed because we have stripped people who are on Canadian soil of their rights is ... not a fair portrayal of the bill. Canadians have told us that... they no longer want to tolerate the kinds of abuses they have seen where people have been free in our society to reoffend, to commit additional crimes. (Steve Mahoney, LP).

[IRPA] is a direct attack on legitimate refugees... subclause 3(2)(d) states that Canada is: --to offer safe haven to persons with a well-founded fear of persecution based on race, religion, nationality, political opinion or membership in a particular social group, as well as those at risk of torture or cruel and unusual treatment or punishment; This translates into meaning that every criminal or otherwise undesirable person entering Canada who claims to be a refugee would be under Canadian protection from extradition to another country if there is reason to believe they would be under a threat of harm. (Gurmant Grewal, CA).
While supporters and right-wing critics of the bill debated whether it went far enough in identifying foreign criminals, left-wing critics of the bill rejected the criminal-focused framing of the bill – while still constructing distinctions about the moral character of newcomers and the imperatives this imposed upon the state:

I think the real tragedy of the situation is that there is abuse in the system... there is abuse in every system in the country, but in this area the abuse becomes the reason for setting up very punitive barriers and rules that then deny the vast majority of convention refugees full status in Canada. (Libby Davies, NDP)

The dangerous part in this bill arises from our desire for an impenetrable border, which means we risk rejecting honest people who want to contribute to Canada's economic and social growth. (Madeleine Dalphond-Guiral, BQ)

Merely associating with known suspects, sympathizing with a national liberation struggle or doing some community organizing in Canada will be enough to get a person labeled “member of a terrorist organization,” if the cause in question happens to be on the government's informal... blacklist. By permitting such findings of guilt by association, the provisions violate international standards and principles of law... (Judy Wasylycia-Leis, NDP).

Finally, there was even an invocation of the notion of a “law of suspects” whereby evading surveillance is described as indicating a criminal nature among immigrants, in the absence of any other criminal activity:

Nobody but nobody that I know of wants to deal with criminals in the country. We do not want them here. No one wants them anywhere.
One of the definitions of criminality and illegality is that people try to evade and avoid supervision and the vigilance of authorities that are legitimate. *(Joe Volpe, LP)*

The elite positioning around the bill, seen in the patterns of language analysed in the block quotes above, reveals a dual probing where refugees are concerned: the immigration system seeks genuineness, and fears criminality. In either case this approach categorizes individuals in a way that blurs together their history and character, where and what they come from and who they are. Genuineness is associated with suffering, as per the UN Declaration (“a well-founded fear of persecution”), and further with an origin in the most naked modern form of mass suffering, the camp. It is the camp that Agamben identifies with the “space of bare life” in which political humanity is suspended (1998), complementing Arendt's (1958) comment that the stateless were dissolved into the category of “displaced persons” in order to reify them as a mass without opinions or rights, understandable as human only through their bodily deprivation and suffering. Nyers comments that the dilemma of refugee subjectivity is even more restrictive, since genuine refugees are those who display "well-founded fear", thus imposing a contradictory or "Janus-faced" condition on refugee claimants: they must simultaneously demonstrate a "fearful subjectivity" and also be able to reason that that fear is "well-founded" (2006: 45). Those on the left of the policy discourse such as Antoine Dubé (BQ) still confirm that “refugees are people who have
involuntarily left their country,” defending their worthiness by erasing their agency.

The gift through which this abject suffering is remedied is the elevation to the political through the bestowment of national belonging, of status; Povinelli, speaking of native Australians rather than refugees, comments that liberalism justifies itself partly through the contemplation of the abject. By this, she means that forms of restitution or gifting are deployed towards the abject as a way of confirming the self-critiquing progressiveness of liberal nationalism (2002).

Elsewhere, Joao Biehl comments that those reduced to the absolute extremity, by being banished to unlicensed old-age homes and death-hospices in the slums of São Paolo Brazil, can still serve to redeem the deficient citizenship (and thus humanity) of less-damaged humans who care for them (Biehl 2005).

Legislators, committee members and civil and government presenters thus wrestle with a nationalism that is predicated on inclusion, but which demands that this inclusion be disciplined, a complicated involution of the nation's borders so as to sort out the worthy from the unworthy in ever-more sophisticated ways.

As one presenter before the committee commented:

It seems to me the bill does two things. It represents a kind of fundamental conflict that Canada has with its own identity. You let
people in, but only the right type of people and only under very restrictive circumstances. We want them to come in, but we want to make sure we can monitor them in some way. We want to make sure that if they don't fit in, or if they break our laws, even though they've been here for a long time we have an out, to get rid of them. (Erica Lawson, individual presentation)

Shore and Wright, in their introduction to a volume on the anthropology of policy, argue that policy language is fundamentally about “making fragments appear coherent” (1997). At the highest level of government discourse, I would argue that this process involves a continuous attempt to harmonize sovereignty (the state), bureaucracy (the government) and nationalism (the people), such that the exercise of power does not appear to be in conflict with itself or its undergirding rationale.

The reason why, after more than a hundred years of policy discourse about immigration, Inky Mark can say that Canada “does not have” an immigration policy -- and why, I will argue in the final section of this chapter, Canada still does not have an immigration policy -- is the fundamental fragmentation of the inclusion/exclusion negotiation, its inevitable irrationality. It is therefore continually jump-started by a series of crises; I have chosen to highlight the arrival of “boatloads” of would-be Canadian residents as a significant chain of such crises. The arrival of the Sun Sea in August 2010, carrying hundreds of Tamil asylum seekers from Sri Lanka, represents a post-IRPA[2001] version of this meta-crisis, as does the contemporary Conservative government's criminalizing rhetoric on human smuggling and trafficking. Both of these show a complete
confusion (cynical or genuine?) about the lives of refugee migrants, and reveal how the passage of the 2001 bill has failed in its attempt to make the fragments of Canadian nationalism appear coherent.

Life after IRPA: Ministerial Policies, Legal Confrontations, Bureaucratic Accommodations

My friend François, an Ottawa resident in his late 30s, is nervous about bureaucracy. “I feel like the bureaucracy in this country has become sentient and it is starting to challenge its masters, and that worries me,” he told me. I argued, citing the example of a current minister we agreed was incompetent, that the professionalism of career-oriented public servants served to maintain a day-to-day operation of the country’s government through the policy-direction changes of different governments. If a minister had emperor-like power over everyone and every decision in their assigned portion of the civil service, I suggested, then one bad minister could collapse the country.

Then, replied François, people would rapidly learn to stop electing bad governments.

“Nervous about bureaucracy” describes a lot of the debate around the Immigrant
and Refugee Protection Act of 2001. The act was introduced by a majority Liberal
government under Jean Chretien in 2001. For some time the government had been
under pressure from the right to introduce immigration legislation to update the
Canadian system, which had last been defined by law in 1976. Before the
destruction of the World Trade Centre on September 11th of that year, the
emphasis of critique was on false refugee claimants and illegal immigrants, who
were said to be flouting Canadian sovereignty over its borders and taking
advantage of Canadian generosity. Observers also commented that there seemed
to be diplomatic pressure from the United States upon Canada to toughen-up its
border security (cf. Aiken 2007). The bill was given royal assent on November 1st
2001, with debate and amendments finished before the September 11th attacks on
the World Trade Center and the Pentagon, so the discourses about terrorism and
infiltration that gained traction after those events were not a significant
contributor to the IRPA[2001] process. Nevertheless, the bill was passed with
what many at the time felt was inordinate and incautious haste.

Partly, people decried the haste of this process because they had grave concerns
about the bill. The Standing Committee on Citizenship and Immigration, a body
made up of MPs from all parties in Parliament, held two months of hearings
across the country, exclusively on the bill, but still commented – sometimes
bitterly – that they were not being given the time to consider the concerns of the Canadian public seriously, or to attend fully to the proposal of amendments to the text of the bill.

The themes, discourse and politics of the bill and its passage deserve a lengthy treatment. For the moment, relevant to the conversation related above, I single out one often-repeated criticism of the bill. It was written as what is called a piece of “framework” legislation, in which the text of the law does not give away very much about its future, day-to-day operation. Instead, throughout the body of the law there are references to regulations established by the ministry of Citizenship and Immigration, regulations that had not yet been written when the bill was under debate. When regulations are written, they – like bills of parliament – must be published in the Canada Gazette and cannot remain secret. Unlike a bill, however, changes to the regulations do not need to be debated in parliament or reviewed by committee, nor are public consultations of any kind required.

IRPA 2001 thus appeared to grant substantial discretion to the Citizenship and Immigration bureaucracy, from policy workers to enforcement officers of the Canadian Border Services Agency. Powers of detention were expanded, rights of appeal reduced or complicated by the necessity of receiving permission from the
federal court to file an appeal, but more than the troubling issues that were spelled out were of course those that were not spelled out, the numerous instances where the law or regulations indicate that a decision will be made at the discretion of the minister or of one of his or her officers.

The most publicly visible fallout of passing this kind of legislation is a long and expensive quest for justice through the courts, based on the cases of individuals, more or less mediagenic, more or less sympathetic in the eyes and ears of their fellow citizens, who are abused and mistreated because of the discretion of the law. Less publically visible, but suggested by my field data, is the day to day work of bureaucratic accomodation accomplished by civil servants and non-profit sector workers, fitting the reality of immigrant cases into the law of the bill, and vice versa. Lastly, there is the ongoing reactionary discourse on immigration as displayed in the media, pointing out that not only has the IRPA[2001] bill not stilled the Canadian disquiet over immigration, but it may not represent the furthest extremity of repression towards which the country seems to be moving.

On December 5, 2002, after the passage of IRPA[2001], Canada signed a Safe Third Country agreement with the United States. The agreement was implemented in late 2004. This agreement represents an extension of the effort fostered by the
bill to prevent refugee migrants from filing claims from within Canada (rather than waiting for selection and relocation by the government in camps abroad). Specifically it forbids migrants from making refugee claims in Canada if they have passed through the United States on their journey, on the grounds that the United States is a “safe and democratic country” in which to make a claim. If the claimant has been refused asylum in the United States, they are ineligible for asylum in Canada. Subsequently, the Agreement survived a court challenge to the Federal Court of Appeal in Canada; the Supreme Court of Canada declined to hear a challenge to the agreement (Canadian Council for Refugees 2009). Initially the agreement contained certain exceptions, but these are gradually being removed. One such exception, the admissibility of claimants from Temporary Stay of Removals countries\(^8\), was removed in July of 2009. The most noticeable effect of the Safe Third-Country Agreement, however, has been to restrict the successful claims of refugees from Latin American countries, since most take a land route to North America; in the Colombian case, 97% of refugee claims were made at the land border in 2004 before the Agreement came into effect, compared with 35% of refugee claims overall (Canadian Council for Refugees 2005). There are, further, grave concerns as to the fairness and legitimacy, under the UN

---

\(^8\) These are defined as countries whose state of general disorder poses too great a danger to anyone who might be deported to them, and whose nationals who are under a deportation order therefore have that order suspended. As of July 2009, the list (maintained by the ministry) included Afghanistan, the Democratic Republic of Congo, Haiti, Iraq, and Zimbabwe (CIC 2009).
Declaration which the United States ratified, of the United States’ refugee determination process, especially as it relates to Latin American migrants (ibid, also Horton 2004).

The restriction of claims and the limitation of appeals has done little to quell the prevalence of the “abuse” and illegitimacy discourse with regards to refugee claimants. The announcement of the termination of the above exception was presaged by repeated public statements by the Minister of Immigration, now from the Conservative Party⁹, that increased claims from Haiti, Mexico and Colombia represented “an abuse of Canada's generosity”, “a violation of the integrity of our immigration system”, a “wide-scale and almost systematic abuse” (Edwards 2009). As evidence for this statement, the ministry pointed out that claims in the United States showed a slight drop over the same period of time as Canada's increase, a contrast that may have something to do with the much higher rate of jailing of refugee claimants in the former country (ibid). According to a report to Parliament in 2008, the exception for Temporary Stay of Removals Countries was granted in 3766 cases in that year, the last before it was eliminated (CIC 2008).

In June of 2009 the ministry announced plans to fingerprint and photograph all

⁹ In December 2003, the Canadian Alliance and the Progressive Conservative Parties of Canada merged into the Conservative Party of Canada, and they took over government in the 2004 election; they still hold government as of March 2011.
applicants for temporary residence permits, describing the plan as “the first line of defence against individuals who pose a threat to Canadian society and economic migrants who seek to take advantage of Canada's high standard of living” (Thompson 2009). In the ministry's view, then, native-born criminals are oddly erased from the category of “individuals who pose a threat to Canadian society”, and crime is equated with seeking a better life.

Interestingly, at the same time as Canada “struggles” to keep pace with the increasing repression of migrants in the United States, Wright argues that Canada also shows little evidence of developing the same kinds of mass protest movements around migrant rights, something she ties to the longer and more vigorous history of radical labour organization – around May Day in particular – in the United States (2009, 2003). On the other hand, the precarious but not-quite-illegal status of the failed refugee claimant in Canada – who can still attempt to access avenues of appeal – has given them space to organize and therefore become more symbolic of protest against Canada's immigration policies (ibid).

Likewise, cases of “sanctuary” have received extensive press in Canada and perform an important cultural and paralegal role. Reviewing several case studies of Christian church-based sanctuary, Rehaag argues that rather than attempting to
subvert the legal norms underpinning refugee status in Canada, religious communities generally try to reproduce a just determination of refugeedom, that is, to accept only *bona fide* claims to sanctuary when defying the immigration apparatus. Therefore, rather than challenge the legitimacy of the law they are attempting to hold the government to its legal obligations to refugees where these obligations have not been fulfilled (Rehaag 2010). In particular, Rehaag's informants cite the failure to implement the Refugee Appeal Division mandated by IRPA(2001) as a reason why sanctuary is needed (*ibid*: 45).

The administration of IRPA[2001] and its modification by court challenge has also been strongly affected by the passage of the Anti-Terrorism Act of 2002. The latter act introduced an immigration measure called a “security certificate” that could be used to detain, strip status from, and deport individuals legally in Canada against whom there were allegations of being a risk to national security, but who could not be prosecuted due to the secrecy of the evidence against them (or, just as likely, its failure to meet a legal standard of proof of guilt). Not surprisingly, the use of these certificates has resulted in a series of court challenges as well as civil suits. The first iteration of the certificates were declared unconstitutional by the Federal Court of Canada, and reintroduced with modifications by the government – allowing the use of “special advocates” who are cleared to view the secret
evidence against the defendant – but who are not allowed to communicate either with the defendant or his lawyers.

One ongoing case involving the use of security certificates involves Mohamed Harkat, a status refugee of Algerian origin and resident of Ottawa-Gatineau. Arrested in 2002, Harkat was held for three and a half years without charge, then released under severe bail conditions which included a tracking anklet and the stipulation that he must be in the company of his wife or mother-in-law (both Canadian-born citizens) at all times. He was ordered deported in 2006, with the order explicitly stating that the principle of *non-refoulement* to torture was overridden by national security concerns (CBC 2006). One lawyer involved in the case of Mohammed Harkat commented in a meeting with activists that the security-certificate law was never intended to be applied to long-settled residents with Canadian families and jobs (such as Mr. Harkat) – or at least, no one in the judicial system seemed to have anticipated the complications of trying to apply it to such people. At that time in 2009, since his legal team was winning concessions on the terms of the certificate, they ironically had no standing to challenge the constitutionality of the certificate itself. On December 9th 2010, a judgement reversed this legal processes and reinstated restrictive bail conditions on Harkat, so the ultimate outcome of the court challenge is still in doubt. In the midst of
these ongoing high-level processes, workers on either side of the strange new hybridity in governance – state and NGO – negotiate and accommodate individual cases within the framework of law and policy. I discuss these interactions and informal/semi-formal accommodations in Chapter 1, on the transformations of public services.

**Conclusion: Married to Canada?**

Citizenship is to speech what marriage is to sex, by which I mean it is a program which attempts to socialize the material of human existence. To the extent that our European-derived theory of democratic political belonging can be traced to Greek city-states, then citizenship can be theorized as an attempt to locate and formalize the “politics” of Aristotle's “political animal” (cf. Agamben 1998). It is both a recognition of an ongoing practice and a granting of protection or privilege to that practice – this duality is why I compare it to marriage/sex, with public speech acts taking the place of sexual intercourse.

An axiom of both social anthropology and human geography is that humans are *emplaced*. They draw the material of their biological and social reproduction from their *locale* (although the borders of this *place* can be challenging to define). Individuals either perform direct extractions or labour for the power to trade, ie,
Fellows-in-place are both potential cooperators and competitors, and therefore such an emplaced subject has a powerful incentive to take an interest in the discourse of their place, since this will influence their access to the means of biological and social reproduction. My line of thinking here is an abstraction of the kind of current inquiry that focuses on social capital, social trust, and similar ideas (cf. Kawachi 2000, Veenstra and Lomas 1999, Bourdieu 1983). This desire to participate in the discourse of a place, to make effective public speech acts as interventions in that discourse, is a desire for citizenship.

States which claim to be democratic seldom, if ever, hold that all subjects present within state territory have an equal right to make such interventions, in other words, to be citizens. Generally, the distinction between citizens and non-citizens is the subject of one or more technical interventions of law and bureaucracy, an attempt to make rational the discrimination between insiders and outsiders and therefore justify and maintain it. Citizen-making, as a means of determining who has the right to speak, is – like marriage, perhaps – not so much an “act of power” as an act by which power comes into being. The enactment of these rationalizing programs is the social reproduction of a regime rather than an expression of a

钱\textsuperscript{10}. 

---

\textsuperscript{10} This is a “flat” description with respect to relations of power and inequality. One can extend the acquisition of resources to activities such as rent-seeking, raiding, taxation, vassalage, etc. Nevertheless I would argue that most of these practices are still profoundly emplaced – a lord can assume the aristocratic privilege of detachment from a sense of emplacement only through the ownership of a particular set of labour-goods from particular plantations, and so forth.
platonic sovereignty. That is to say, as a state actor one goes about making distinctions not because one has the authority to do so but because it establishes one's authority (along with all the other actions undertaken by the state). Then, what is it that enables and underpins the claims of legitimately establishing such a program of citizen-making in the first place? Arguably, it is a theory of nationalism which itself is continually contested and reinforced.

In July 2006, Israel invaded southern Lebanon to eliminate Hezbollah positions from which their territory was being shelled (Myre and Erlanger 2006). The use of highly-destructive weapons in such a densely populated area predictably caused considerable casualties and panic among Lebanese residents (Human Rights Watch 2007). Some 14,370 of these requested evacuation via the Canadian embassy (out of 39,000 persons registered as Canadians living in Lebanon), holding proof of genuine Canadian citizenship and thus entitled to demand Canada's intervention in the war zone to secure their safety (Standing Senate Committee on Foreign Affairs and International Trade 2007). The subsequent evacuation of these Canadians resident in Lebanon provoked a certain amount of outrage in corners of the Canadian press and popular conversation. Many evacuees had not been resident in Canada for long periods of time, or had “logged” very little residency time at all since acquiring their Canadian
citizenship. In turn, some people – including Conservative MP Garth Turner -- termed them “citizens of convenience,” and were angered that Canada's military resources could be commandeered by people who held formal citizenship but who had demonstrated no true loyalty to the nation-state. Was their citizenship, which had been correctly and legally constructed according to the state program of discrimination, a sham?

In the meantime, others are resident in Canada, earning their means of survival here, integrated into local networks of production and profit, but outside the system of political recognition. In a particularly dramatic and recent example, 40 Thai nationals working in a chicken slaughterhouse in Bradford, Ontario were deported as illegal immigrants (Godfrey 2009). Police and immigration officers staged a raid of the slaughterhouse and arrested the workers before sending them back to Thailand. They were deported before they could bear witness against the companies who had brought them to Canada, who had hired them while fraudulently promising them legal status (ibid).

My purpose is not to argue that one party is “deserving” of citizenship and another is “undeserving”. Indeed I seek instead to underscore the inherent contradictions in establishing any system which attempts to rationalize the politics of an
inherently “political animal”. To draw one last use out of my metaphor, marriage attempts but inevitably fails to be coeval with sex; people have marriage without sex, and sex without marriage – as well as participating in all manner of “penumbral” regimes of sexual recognition operating parallel to hegemonic state-church programs. Perhaps I am thinking of the converse statement of the radical migrant activist group, No One is Illegal: Everyone is Legal! Citizenship, like marriage, is a positive action, in this case celebrating an elevation to a socially-recognized political existence, a celebration taken for granted in the case of native-born residents of a nation-state but often quite literal for migrants.

This is why I state above that, after the new Act, Canada still has no immigration policy, in the sense of a singular, rational and coherent legal philosophy, and it is perhaps why such a thing is impossible. Latour suggests that policy always creates these monsters: he argues that the modernist-rationalist project of creating mutually exclusive categories (for example, economic migrants and refugees) continually undermines itself by revealing hybrid cases (1993). To this I would add that, in the elite discursive strategizing represented by Parliamentary politics, ambiguity always leaves room for the players to manuever, recruiting support from corners today that they may censure tomorrow.
I am thinking of this paradox as an explanation, as well as a protest, of the fact that regimes of deportation and detention are always random, partial, never effective in purifying the state either of its dangerous Others or of its own bureaucratic failures and impurities. Despite the ever-increasing repression of irregular migration in the United States and Canada, the backlogs and shadow-economies never seem to shrink. Maybe the continual failure of these punitive regimes can be attributed to their being attempts – not to generate illegality, *per se* – but to deal with the wreckage of the positive regime of citizenship-creation, a wreckage which follows inevitably from the inherent contradictions of any such rational program. One way of reading the fact that “criminal” and “illegal” are so ill-defined is not that they conceal a well-articulated, but secret, regime of racism or ideological prejudice, but that they are amorphous, shadowy signifiers precisely because the subject that they signify is a bureaucratic unknown, something missed by the gaze which seeks not only to know and discipline democratic citizens but also to justify, by that being-known, their belonging in the state and their right to make effective public speech acts. This indistinction means that a policy -- a political rationality -- can not be simultaneously *secretly ideologically racist*. It can plainly speak racism, or not; it can structure racial inequities and prejudices, or not. But any starting assumption that the driving force of Canadian political rationality is an ideological racism short-circuits the attempt to dissect why policy
succeeds or fails, and who benefits and suffers from those outcomes. In the next chapter, the ongoing life of policy is examined in the circuits of social welfare provision in Ottawa-Gatineau, including health care.

In between the “citizens of convenience” and the “illegals”, refugee migrants in Canada face a difficult balancing act, and face it with considerable discursive weight on their shoulders. They fall under a variety of bureaucratic categories of belonging on the spectrum from stranger to citizen: asylum seekers, government-assisted refugees, privately-sponsored refugees, humanitarian admissions, holders of minister's permits to remain, or persons under a suspended deportation order (due to a state of generalized danger in their country of origin). These positions are unstable, in the straight-forward sense that people tend not to reside in them permanently: refugee and involuntary migrants regularly obtain permanent residency and, subsequently, citizenship, though not all groups attain these more stable statuses at equal rates (White et al. 2008, DeVoretz 2004). Others willingly or unwillingly remigrate, either back to their country of origin or to another country of asylum and settlement. From the perspective of the ongoing work of nationalism, in which actors discursively attempt to bring into a one-to-one relation state sovereignty and the population of a territory, all these statuses mark degrees of liminality – not quite an insider, not quite an outsider. Such
subjectivities, from a nationalist point of view, demand interrogation and clarification; one cannot ultimately be both a citizen and a non-citizen.

From the perspective of a liberal Canadian nationalist, it makes sense to inquire of a newcomer whether they are committed to developing a sense of identity that will tie their self-interest somewhat to the “self-interest” of the Canadian nation-state. That is, liberal nationalists do not wish to eliminate all differences of national identity, but there must be a hard core of basic loyalty to the well-being and advancement of Canada to consider someone “truly” Canadian – partly, perhaps, because ethno-racial claims to “true” belonging are so weak and troublesome in Canadian discourse. Leaving aside a more general critique of this kind of surveillance, it can still be observed that such questions are extra-problematic for refugee or involuntary migrants. Very seldom do such newcomers hold views that are assimilable to the narrative of an “American [or Canadian] Dream”, of crossing oceans and mountains to seek a better and more prosperous life in a freer society. Although the evidence shows that refugees who gain status in Canada pursue advanced education and employment at as high a rate as they can (Church 2009), nevertheless the circumstances of their migration can leave their identity open to persistent question. How does an exile answer the question, “Where does your heart live?” Never mind that this question is only ever asked by
disciplinary, bureaucratic proxies, in the form of questioning the legitimacy of marriages, kinship ties, and livelihoods.

This is only one half of the equation as far as the legal and policy discourse of refugee subjectivity goes, however. For if there is one thing certain about the popular understanding of refugee existence, it is that it is defined by suffering. Suffering and fear are literally and legally at the foundation of their (temporary?) identity as refugee migrants. Within the evidence presented in this chapter, justifications for a more permissive or social justice-centred policy on refugee migration to Canada consistently invoke the abjectivity of refugees and the moral duty of compassion and solidarity this imposes on the nation-state. Furthermore, such criticisms of the IRPA bill warn of a national dishonour rising from the mistreatment of, or callousness towards, [genuine] refugees. Canada should be proud, everyone more or less agrees, of its compassion towards refugee migrants. If this compassion is abused by criminals it is to our embarrassment and a danger to our citizens. If this compassion is inappropriately curtailed, it speaks ill of Canada – and therefore Canadians – to the rest of the world.

The purpose of this chapter was to examine the discourse surrounding the passage of Canada's current immigration legislation. In doing so, I hope to contribute to

---

11 See the quoted excerpt from the Convention, on pg. 9
the goal of understanding how individual stories, choices and perceptions are shaped by the governmental subjectivities assigned to them by elite narratives. This chapter therefore contributes a necessary context for the ethnographic material presented elsewhere. I conclude from the analysis here that newcomers to Canada who hold one of many legal or semi-legal “refugee” statuses are placed in a difficult and contradiction-filled set of expectations by the arguments of both liberal and conservative, legislative and bureaucratic state actors.

If they are “genuine” refugees, they are theorized as possessing a passive abjectivity that demands a compassionate response, but this compassion is also part of the business of justifying the liberal nationalist enterprise. Povinelli discusses this discourse of redeeming liberalism through a consideration of the abject, in the case of the Australian state and the Aboriginal people of that territory (2002). For Nyers, refugees always represent an urgent problem for statist policy-makers because they are touched by the exception, human wreckage of the limits of sovereignty, what he calls a "political excess". By this, he refers back to the genesis of the international refugee system during and after World War II: when citizenship rights are eliminated and stateless subjects created, they become an everpresent reminder of the "founding violence" of the state, in which a line is drawn between insiders and outsiders. Nyers' theory of the abject is in a
supportive tension with Povinelli’s. Nyer’s stateless refugee provides an urgent and unwelcome reminder of the relation of sovereign power at the heart of nation-state building, and Povinelli’s colonized subject provides fodder for the reproduction of moral myths about the (liberal) state.

In the case of liberal nationalists, the urgent response demanded by this radical outsider is to somehow transition them as quickly as possible to a more stable, perhaps amnesiac subjectivity, one that submerges once more the troubling reminder of naked sovereignty (Nyers 2006: xiii). Biehl, in studying the social lives of abandoned people in Brazilian hospices, makes a parallel comment that the care of the absolutely abject can be used to rescue deficient liberal subjects and restore them to citizenship (2005). I argue that liberal internationalism plays a similar role in rescuing the project of Canadian citizenship from its internal contradictions of language, race and culture, and that therefore refugee policy has a key role to play in the promotion and maintenance of “Canadian values.” Indeed, during the IRPA(2001) debates many of the legislators used those words or similar ones in their comments.

But refugees are problematic “matter” for constructing a nation, for they have fallen out of the scheme of nation-state belonging. Often they are victims of state
violence, at other times, their native state cannot or will not protect them from other forms of oppression and danger. The obsession among security-conscious commentators for discovering the true identity of refugee claimants – a pursuit enshrined in Canadian law and strengthened by IRPA[2001] – reflects the stain of criminality that attaches to subjects without a state, and without citizenship. The actions that refugee migrants must undertake to escape violence and suffering unsettle these commentators. What kind of a potential citizen fakes identity papers, smuggles themselves across borders, pays money to black-market operators? Better those that wait for years in United Nations-approved camps for rescuing. Yet this is not the way that forced migration is trending, worldwide (UNHCR 2011).

The refugee migrant in Canada, therefore, is trapped between two expectations. They are expected to be suffering, or at least have a history of suffering, and to be grateful to Canada for their rescue. They must be grateful enough to wait for the receipt of services and status, and to refrain from contradicting the liberal-nationalist narrative of generosity. And yet their performance in the economy is also scrutinized: are they a continuing burden to the country? How many can Canada “afford” to let in, as a burden to be borne? When will they get a job, get moving, get on with things? To speak up too loudly is suspicious, and to not speak
up loudly enough is to risk falling behind in the competitive arena of modern liberal citizenship in Canada. At the same time, nationalist formulas which endow refugees with value in the Canadian schema of self-definition make straightforward exclusion difficult, forcing anti-refugee state actors to move through circuitous and uncertain bureaucratic and policy routes to accomplish their aims. However, these same routes open up channels of counter-action through the court system, recognized as legitimate under the law. For the moment, to the dismay of some, those refugees who manage to set foot on Canadian territory may claim access to the course of justice.
"Buzzword Bingo"
Chapter 2: Governing the Social: Health & Settlement

Agencies, Migrant Communities, and the Management of Virtue in Ottawa.

I have two friends who work in the health care sector in Ottawa; one is an older man who works as a clinical psychologist with the mentally ill, the other a younger woman who works as a medical receptionist at one of the “campuses” of the amalgamated Ottawa Hospital. I know them through a martial arts club where the three of us train.

Lately, the young woman, Katie\textsuperscript{12}, has not been coming to class. Finally, I got a chance to see her again, and over drinks we discussed the stresses of her new position at the hospital. “Don’t you get time off?” I asked her, after she described what sounded like a seven-day-a-week work schedule. In theory she did, she told me. She was on-call almost all the time, but she had the right to refuse to come in when called. She didn’t have the impression that she would be punished in any way if she chose not to come in for at least some shifts. “But I feel guilty,” she added. For her, the job was a very fast-paced introduction to a world that was

\textsuperscript{12} Names are altered throughout the thesis, along with the acronyms of organizations unless noted otherwise.
often dramatic and visceral, wherein she was sometimes responsible for
organizing responses to code-calls that represented life-or-death moments in an
overworked, underfunded system.

Neill, the psychologist, is a veteran of the Ontario health-care system and is very
familiar with resource short-falls. In the past few years, the hospital where he
works has not provided employees with any office supplies, requiring them to
purchase and bring in their own. There have been days, according to him, where it
has been impossible to find a working pen on the floor where his office is located.
Unlike Katie, he has a more pragmatic approach to demands on his time above
and beyond the clearly spelled-out duties of his job. “We need you to do this,” he
says, pantomiming one of the hospital managers.

“Okay, that’ll take overtime, or it’ll have to wait until Monday.”

“We can’t pay you for overtime.”

“Then I can’t do it; have a nice weekend.”

Furthermore, he said in another conversation, discussing Katie’s situation, he
isn’t impressed with people who come in whenever called (even by him, for example, in his role as supervisor), and regards it as a feature of the young and inexperienced.

A lot of ink has been spilled about the instrumentalization of personal virtues under the ideology of neoliberalism, the “pick yourself up by your boostraps” mentality of “tough love” for the poor. At its best this view is an idealization of the human ability to adapt and develop solutions to seemingly intractable problems. In the more social-democratic countries of the Organization for Economic Cooperation and Development [OECD], though, where neoliberal reductions in government resources and moves towards privatization have been accompanied by a strong hesitance to unilaterally declare a “retreat” of social governance from the areas of health, education, poverty reduction and infrastructure, the deployment of virtue may serve to cover – for a while – the widening gaps in the provision of these services.

To put it more bluntly, it is possible for governments, for a time, to lean on the compassion/guilt of workers drawn to the “social governance sectors”, people like schoolteachers and care-providers, to continually adapt, refine and expend more of their personal time and energy to maintaining these systems as resources.
are cut back further, and further, and further. Ultimately, however, these positions are capitalist employments like any other, and people can tolerate only so much before “the children” or “the patients” must give ground to the need for life beyond work. Indeed, the healthcare workers at the forefront of our often-traumatic life-cycle changes are arguably those most in need of a private life beyond their identity as healer, mentor, and support. Yet this private self is becoming a resource, exploitable through guilt or inexperience.

“‘It’s the Anglo-Saxon model,’” comments Neill. “‘You cut back, and hey look! It’s still working fine. So you cut back again, and cut back, and cut back, and cut back, and oops! Someone died.’”

Introduction

In this chapter I want to describe the instrumentalization of virtue under the new liberalism in Canada. Specifically, I hope my observations will convince the reader that neoliberal reforms to social governance in Canada have not led to the abandonment of the social in government, but to its displacement into a zone of professional labour located somewhere between “state” and “civil society”, in which virtue – an investment in work, beyond professional commitment, based on one’s social and civic values – is increasingly a job requirement.
In order to argue this convincingly, I have to make some theoretical moves, alongside the presentation of evidence from my fieldwork in Ottawa in 2008 and 2009. These theoretical moves are as follows: first, I give more credit to the appeal of the new liberalism, beyond hegemony, than is common in social theory that nevertheless remains critical of its hidden harms, and conscious of its reconstruction and reinforcement of inequalities. Second, I argue based on this generous reading of neoliberal ideology that a certain “social imaginary” of government, in the sense argued by Charles Taylor (2004), circumscribes the ability of the neoliberal agenda to exclude the social from the state, at least in Canada and probably elsewhere in the Global North. Third, the social imaginary which allows the preservation and adaptation of social governance to the new liberal regime also permits an almost-certainly unintended turn in the meaning of Bourdieu’s “social capital”, dividing it from real, public capital along an axis that might also be labelled heart:mind or virtue:reason. Social capital thus takes on the soft, malleable and warm character of an epoxy meant to cover over cracks in the surface of policy; community values, embodied in the uncompensated or undercompensated labour of community members, hold the social together.

In this way, at least for a time, the social can appear to be evacuated from the
“cold”, business-like accountability of the state, increasingly reproduced by a kind of magical power that comes from the “warm” virtue of civil society. Virtue, of course, is a concept of almost limitless philosophical depth, going back to Aristotle’s arguments about how to live a good life (1976). In this case I come to the concept through anthropological thinkers such as Lambek who propose that virtue, as something that adheres to people in the form of "good character", is fundamentally incommensurable with liberal economic theories of value, but can be stitched into those systems of value through the ideal of sacrifice (Lambek 2008). In the case of this study, I argue that such a valuation of virtue is indeed occurring in the reorganization of labour within the non-profit, civil society sector today in Canada. This virtue-magic is a sibling of that old magic by which Marx proposed that more familiar types of capital appeared to reproduce themselves, by themselves, a “fetish” that concealed or mystified a substantial portion of their inputs and costs (Marx 1990[1867]). In this case, part of the labour of reproducing the new social governance is provided by professional workers who are relatively well-paid and – compared to many of the productive workers under global neoliberalism – not particularly exploited. However, this sector is supported by a body of “civil activists”, whose inputs are hard to quantify, and which are in any case not compensated monetarily. And even the privileged professional sector of social governors finds that the demands impressed upon its virtue consistently
increase over time as public resources shrink, in a manner that is unlikely to be indefinitely sustainable. The ultimate danger of virtue’s mystification of the work of social governance may be that it obscures the strain on our public systems until their collapse is imminent.

It is not practical, in a single chapter or dissertation or probably even a career, to pull apart all of the institutions, discourses, personalities and influences that make up modern governmentality in a society as complex as Canada. In my research, I focused only on the junction between the Canadian governance of health and that of immigration, and wherever possible, specifically upon the relationship between the Canadian government and the Colombian-Canadian community. This “encounter” of a particular, ethno-nationally identified component of civil society with a limited and entangled set of government policies and programs formed a kind of discursive field-site which allowed me to choose, from among the infinite avenues available, the routes of inquiry to pursue amidst Ottawa’s human and institutional geography.

So, from this field-site of encounter descend several sites of participant observation, interview, survey and volunteering-oriented research. The most relevant for this paper are two of the biggest publically-funded NGOs addressing
the needs of immigrants and refugees in Ottawa, a public healthcare clinic with a mandate to care for underserved populations including racialized minority groups and new Canadians, and two government agencies at the municipal level that have regular and sustained contact with immigrant issues. In the first section of this chapter, I devote some time to ethnographic overviews of each of these institutions, the role they played in my research activities and also the position they occupy in the landscape of immigrant/health governmentality in Ottawa. It is in this section also that I lay out one of the arguments underlying my general theme, which is that under the new liberalism government has become relatively more detached from a well-bounded notion of the state, such that the line between state action and civil agency in the daily practice of governance fades from view, and perhaps from significance.

In the second section of the chapter, I turn to the concept of virtue to explore what kinds of new governmentality are expressed and embodied as ways of adapting the social within the neoliberal, and to suggest why this adaptation is being made. This involves a potentially-confusing play between the idea of governmentality and that of governance, descending from Foucault and the anthropology “after Foucault” (cf. Li 2007, Moore 2005) by way of Taylor’s application of the idea of “social imaginary” to the relationship between people and government, nation and
state (Taylor 1998). Foucault traces a transformation in the practice of state authority, starting in the 15th century in Europe and later flowering into the liberal (including the liberal-colonial) tradition; this conception of government takes state power beyond the monitoring of passive submission to the active intervention in the bodily, linguistic, and cognitive practices of a population so as to maximize their quality, whether quality is conceived of as quasi-military utility to the state elite, or a more liberal notion of prosperous human flourishing, or a utopian-socialist ideal of liberation from the chains of history.

Tania Li identifies one of the prime motivations of this mentality of governing as “the will to improve”, capturing much of the moral force of projects, from housing developments to fertilizer subsidies, that seek to care for people’s human needs while also restructuring their capacity for action within circuits that reify and sustain local, state and global institutions (Li 2007, title). Equally important in Li’s concept of government power, however, is the recognition that the projects of the improvers cannot destroy a certain commonsense idea of “freedom” or agency. Improvement may have unintended effects or harms, but the field it occupies is so intensely competitive that if it is pure illusion it will not make much headway. If the targets of global development schemes refuse to participate and legitimate the project, it fails; therefore they must see some advancement of their
interest in the scheme in order to be induced to lend their credibility to it. Briefly,
I adapt some of these ideas to look at the promise of neoliberal programs to grant
real participatory power to people who previously felt they were voiceless within
the edifice of liberalism, while demanding that the social be governed “for free”;
in other words, through various degrees of exploitation, regularized
underemployment and volunteer labour. I conclude by suggesting some questions
that I think would be more profitably approached by taking a broad view of
neoliberalism beyond the “corporate agenda”, while maintaining a principled and
evidence-based perspective on social and economic injustice.

State and Civil Society in Social Governance: Negotiating Access to/for
Alternative Publics
In this section I explore field data collected from two bodies officially contained
within the architecture of the Canadian state, the Multicultural Health Coalition
and the No Community Left Behind\textsuperscript{13} program. The former is a body bringing
together public health and social-work officials with representatives of ethnically-
identifiable visible-minority communities in Ottawa to promote good health
within these communities. The latter is a clearing-house of civil servants and
social workers in various fields, as well as Ottawa police officers, meeting to
coordinate services and promote security in designated problem-neighbourhoods.

\textsuperscript{13} These names are unaltered, the two being state programs open to public observation.
In both cases, I argue, the broad effect of these projects is to negotiate an interface between the imagined realm of government, and “alternative public spheres” to which that government, by default, has limited access. In the process of doing so, these projects reconfigure the border between state and civil society in unexpected ways, making governors of citizens and reinforcing the citizen-interests of those officially tasked with governance.

Since around 1990, Canadian municipalities have been forced to take on more responsibilities for social governance due to “downloading” as a means of federal and provincial budget control; under this model, one level of government gives up some of its traditional programming authority to a lower level of government or to civil society, but does not pass along all the tax funds that were used to carry out that mandate (Hall and Reed 1998). City government, like other governments, is a process of “rendering [social problems] technical” (Li 2007) and a medium of power. However, city governments are even more highly dependent than larger forms of government on lateral networks with indistinct hierarchies; partly this is due to a smaller tax base and smaller professional talent pool compelling cooperation and multilateral agreement for large projects (cf. Latour 1996). These networks increasingly do not discriminate between “state” and “non-state”, “public” and “private” actors, or if they do it is to identify the latter as sources of
“social capital” that can be integrated into circuits of social government so as to replace “public capital” that has been withdrawn (more accurately, has simply never been provided to fund the new mandates given to cities like Ottawa). However, not all elements of civil society are easily absorbed; more specific problem-solving intervention becomes necessary when dealing with “alternative publics”, whether explicitly subaltern or simply cast as Included Others within the multicultural state.

During my fieldwork in Ottawa I was made aware of the existence of the Multicultural Health Coalition (MCHC) by another anthropologist who has long studied, as well as worked upon, services for immigrant women in Ottawa. The MCHC is a body open to the public, but while there is nothing secretive about the institution, it is not something with which most Canadian-born Ottawans would be familiar. The coalition represents a project of the City of Ottawa Public Health agency, and has a very modest web presence on the city government website, almost entirely made up by a descriptive paragraph quoted here:

The Multicultural Health Coalition, in partnership with Ottawa Public Health, is a group of community associations representing a variety of ethnic communities, community health and resource centers and settlement agencies. The Coalition supports training opportunities, develops resources, advocates actively on issues related to equal access and promotes activities for individual associations and the multicultural population throughout the city. It further supports community projects such as physical activity,
nutrition, tobacco prevention, adaptation and settlement of newcomers and access to public health services. The Coalition also advocates for programs and services that promote determinants of health, such as employment and education. (City of Ottawa 2010).

The enactment of this mission is coordinated through a series of monthly meetings, which take place ten months out of the year in one of the City of Ottawa’s office blocks in the suburbs. Although an agenda is provided, the atmosphere is informal and friendly. In contrast with other organizations I observed the MCHC has little in the way of a bureaucratic ethic of information control, indeed its intended purpose is to spread information as broadly as possible under a rationale of public health education. Its City of Ottawa funding is minimal but stable, and though the membership applies for other funding so as to be able to provide “seed money” to community projects, this role is considered secondary to its function as a meeting place and sounding board for ideas:

the coalition is not [a funding agency]; we don't fund programs! we support them; whatever we have, we share. ... The second aspect that we do... the money that we are providing to the community is seed money. You have to be creative enough to stretch that money as much as you can, to reach your community members. And at the same time, you have to be creative enough to draw resources from your own organization using that seed money. And at the same time, mobilize the community (MCHC Chairperson interview, June 17, 2009).

The coalition is thus somewhat free of the competitive race for core funding that, I suspect, drives the wariness of some of the other agencies I examine below. The membership focuses on hearing presentations from various public health projects,
whose contact information and educational material can thereafter be passed on by the (volunteer) community representatives to their publics. The MCHC also hears ongoing reports from community members regarding the joys and sorrows of projects undertaken by their constituents – generally interventions in the areas of encouraging physical activity and promoting social recreation. For example, one initiative considered to be quite successful was the “Never Too Late” program, aimed at encouraging physical activity among “multicultural” women (the word “multicultural” being a general stand-in term for “visible minority”). Particularly well-received in the Arabic community, according to evaluations, Never Too Late trained women as “physical activity leaders” so that they could start and maintain sports classes for their communities (meeting notes, April 7th 2009 meeting of MCHC).

I think of the work of the Coalition as “state/non-state coproduction” of a discourse of caring about community health in Ottawa, using the word discourse in the “thick” sense of Bruno Latour’s work, as a linguistic maneuver that seeks to create the real (Latour 1996). Accepting Tania Li’s definition of government as the activity of “rendering technical” social and political problems (Li 1999), the Coalition works to render technical inequalities of health and health-care access among minority groups in Ottawa.
They have their work cut out for them. Under the scarce regime of public resources we call “neoliberal” governance, it turns out that it is often as difficult to spend public capital as it is to acquire it; spending what you get also becomes crucial for maintaining one’s place in regimes of accountability (cf. Mosse 2005). At one meeting, a representative from one of the city community centres complained that they could not fill all their spaces in a summer camp established to inculcate leadership skills in immigrant youth. In another forum, a particularly active member of Ottawa’s Sikh community asked for advice on “how [to] motivate people” – he himself was motivated to attend a variety of meetings and apply to a variety of funding bodies out of a desire to help his community, yet one of his greatest obstacles was stoking people’s desire to be helped, to grab hold of the resources made available, to demand more (meeting notes; February 24th 2009 Ottawa Public Health forum). Elsewhere, naturally, interest outstrips availability, with “kids lining up outside the door” of a Boys and Girls’ Club established for low-income teens (meeting notes, September 28th 2009 NCLB meeting).

There is an urgency to promoting interest and participation: it is an irony, or a paradox, produced by the very instability of public capital. Like produce, public capital has to be used before it goes rotten; thus, it becomes a practical need to
encourage “uptake” of services, something to keep in mind when theorizing this push as a desire to extend governance or exert control. Money for health-promotion, childcare and day camps, and other social initiatives is usually given as a one-time grant, or as “seed money” in the way described by the Chairperson above, giving little ability to plan for the future once the money runs out. Ottawa has a hostel and clinic for government-assisted refugees, called Reception House, run by the Catholic immigrant-support organization in cooperation with an activist-research network of healthcare professionals called the Champlain Immigrant Health Network, providing primary and emergency care for those the Canadian state has explicitly promised to shelter. This alliance was called the “cadillac model” of refugee care by one affiliated doctor (Geller 2009). The clinic nevertheless got only one-time grants and no budget for staff. It relies to a large degree on time volunteered by socially-conscious medical students, doing the work of doctors on medical problems – such as infectious pulmonary diseases and acute vitamin deficiencies – not extensively covered by current curricula in the medical schools of rich countries (Gruner 2009). Beyond the time-limits imposed by non-renewable funding, every resource acquired by such programs can be seen as a “personal” commitment on the part of a human being on the basis of compassion, intellectual curiosity or social ties, a withdrawal of social capital from a network which may not itself be all that stable (since medical students
An extended quotation describing the origins of the Coalition serves to strengthen the impression of trying to tie loose strings into circuits of governance and capital-transfer:

When I joined Public health -- I think it was in 1995 -- one of the things that we were trying to do is trying to understand the influence of immigrants in the early 1990s... most of those organizations they didn't know what to do with these new immigrants -- language is different, culture is different -- most of them came directly from refugee camps; the difference was enormous... So, there were -- each organization were trying to find out the means of reaching out to the community, how to provide services in particular. So the first task that I was challenged [with] was how we [?] going to provide and approach public services to different communities. So after looking -- talking to the people through various letters, the first thing that I did was, sometime in 1998 or 99, was to call a meeting of different leadership of the ethnic communities ... so many of them! So I first approached them one by one, talked to them, and I asked them to talk together and think about it. So we had a very interesting discussion at that time. What I brought to them was the type of services that public health could offer to them, and see whether those services met their needs. (MCHC Chairperson interview, June 17, 2009)

The only conversation I witnessed at an MCHC meeting that came close to confrontation was about the idea that the Coalition could be a “support” agency without being a “funding” agency, and the confusion between the two. At one meeting, the program coordinator from a community centre in one of the city’s poorest neighbourhoods was delivering a status report on MCHC-fuelled projects;
as he elaborated his situation, the chairs of the meeting seemed to get uncomfortable with what they sensed in his direction. Demand was high, he said; much higher than anticipated. All of the fitness and activity classes they had offered, as planned, had filled and they had a waiting list. Participants were positive about the change the programs were making in the community. But there was no ongoing funding for the classes, and not only could the community centre not expand them, it was facing a crisis that might see the programs reduced in size. Where could more funding be acquired? Could the coalition come together to support these ventures, given their track record of success and the high demand? (meeting notes, April 7th 2009 meeting of MCHC)

This situation was awkward, because the answer in effect was no. My impression was that it was even more awkward because it had violated a certain “hidden transcript” (Scott 1985) of the organization’s processes, a trespass into the territory of “funding” which the MCHC wanted to avoid (see above). What about, suggested one of the meeting chairs, soliciting funds from the community themselves? The entire basis of the program, countered the coordinator, seemed to preclude the possibility of excluding people on the basis of cost. In fact, the current United Way and City of Ottawa funding excluded charging drop-in fees by mandate.
The chair attempted to soften the perceived obstacle to soliciting funds from within the community; even if drop-in fees were excluded, he reasoned, it would be possible to ask for voluntary donations. These donations could be targeted at particular programs rather than going into the centre’s general budget; in this way, the programs would become more community-based, because they would be community funded. This chain of reasoning culminated in a somewhat didactic reiteration of the MCHC – and Ottawa Public Health – commitment to “launching programs that are internally sustainable”, and providing seed money that “leads to community responsibility for recruitment, leadership, participation and sustainability” (meeting notes). In my interpretation, what the program coordinator saw as a crisis was being reinvented as an opportunity, for in replacing public capital with withdrawals (or investments, depending on your point of view) of social capital, he would be encouraging active and healthy citizenship in a way that MCHC/Ottawa Public Health could not. The question, unanswerable based only on this evidence is: would they if they could? Which came first, the idea of support-without-funding, or the necessity of the idea?

Again, committee founders tried to find a discursive middle road:

The downloading idea [of having smaller bodies pay for programs], I would really consider it as an ideology by government to abrogate their responsibilities to the community. I don't like it. I think that government has responsibility. You cannot give away
your responsibility and pass it to the community. The communities are taxpayers; that's how I see it. But at the same time, I do believe that citizens have responsibility. That has to be balanced out. It is not a question of downloading; if you could encourage people to be self-sufficient, by utilizing the resources that they have, and using it for their own purposes, I would consider it as encouraging them to be self-sufficient. Self-resourcing. But that does not mean that they are replacing the role of government. That's why I say that our money is seed money (June 17th 2009 interview, emphasis added).

Thus, the Coalition is a tool of government; we can detect above some fairly well-trodden tropes in the discursive creation of the liberal subject, self-governing and self-actualizing and yet following a behavioural script – making choiceless choices (Cruikshank 1999, Foucault 1991, Hindess 2001). But I cannot be satisfied with its inclusion of a model of government that focuses upon the imposition of state behaviour-modification and control upon a population whose choices are either to passively accept the interventions, or to resist them in what is essentially only another form of passivity, of “foot dragging” (Scott 1985). Its success and the success of its programs depend upon a perception among its subjects that the programs serve their interests (see Li 1999); without “uptake”, the funding will dry up, and given the presumed scarcity of time and energy among those whose socioeconomic position makes household survival a demanding activity, the fact that uptake exists strongly suggests that members of these communities perceive real value in their liberal-democratic participation. Of
course, the opposite is not totally untrue: the struggle to recruit and maintain interest in poorly capitalized community-development programs suggests that the value of these programs to the participants is not completely obvious and irrefutable.

How can we theorize this value? Some quantitative data from Canadian sociology helps get us started. According to Breton, et al. (2004), Canadians who are visible minorities are significantly more likely when surveyed to agree that “people are indebted to society / ought to give something back” than non-visible minorities. “Immigrant experience,” continue the authors, “seems to bolster a certain kind of social commitment in values even though for visible minorities social trust tends to be a bit lower or more fractured along community lines” (2004: 128).

Explaining why racialized communities display “lower or more fractured” levels of social trust deserves (and gets) whole volumes of attention, including a critical second look at the nature of the “social” in such language; however, here I take as a starting point the proposal that first and second-generation Canadians who are identified as “visible minorities” on average desire broad acceptance, but not at the cost of dignity-in-difference:

Beyond the elimination of discrimination, a basic quest of ethnic, cultural and racial communities is recognition as full participants in the society. Members of these communities resent being defined as a problem, as a burden on society. They want to be seen and
appreciated as contributors to the functioning of societal institutions and to the dynamism of economic, social and cultural life (ibid: 119)

How is this desire problematic? (Or we might ask: what is at the root of outright discrimination, the root we must pull out if we are to go “beyond [its] elimination”?) The problem of recognition is glimpsed in the language-game of “multiculturalism”, a game illustrated well I think by the Dilbert strip below.


By identifying Canada as a “multicultural” society, are we drawing attention to the unspoken assumption that society, as “we liberals” conceive it, is not multicultural? Benedict Anderson famously terms nations as “imagined communities” (Anderson 1991). Gellner, in describing the rise of nationalism, specifically calls out “culture” – the commonsense idea of dress, food, and art – as
the organizing principle of such communities:

for the first time in world history a High Culture... becomes the pervasive and operational culture of an entire society... for the average person, the limits of his culture are... the limits of his employability, social acceptability, dignity, effective participation and citizenship” (Gellner 1994).

Indeed one of the core philosophers of liberal nationalism, John Stuart Mill, made a point of arguing that “free institutions are next to impossible in a country made up of different nationalities. Among a people without fellow-feelings, especially if they read and speak different languages, the united public opinion necessary to the working of representative institutions cannot exist” (Mill 1862, [2010]). The danger of difference may then be compositional to the kind of liberal governmentality practiced in countries like Canada.

Since Canada has not collapsed into civil war or widespread xenophobic violence, Mill must have been at the very least a pessimist. This is the gist of the argument in Taylor (1998). By what mechanism, then, do racially- or culturally-marked communities in Canada navigate the terrain of “fellow-feelings”? Karim (2002) explores the notion of “public sphericules” that serve to advocate for the full inclusion described by Breton et al. (2004), vis-à-vis the mainstream of Canadian politics, while also providing a space – in particular a language space, be it Spanish or Farsi or Hindi – in which the dignity of identity remains (Karim 2002:
These spaces can be expressed in the form of “ethnic” community newspapers, radio and television stations, and recreational, religious and political societies. For those who seek to govern the social, including the social determinants of health, such a partial solution is still a fairly thorny barrier; if language is the vehicle of a discourse (of education, of program planning) that seeks to enter the real, language difference is a border-crossing that must be facilitated. Lindgren (2011) critiques Toronto-area ethnic media, for example, for justifying themselves in terms of aiding integration of newcomers, while providing minimal coverage of local news stories (as opposed to news stories concerning “homeland” countries). Speaking of South Asian-Canadians, for example, Karim notes that

the South Asian sphericules do, nevertheless, remain distinct from the dominant public sphere. Whereas non-South Asian politicians often engage with the South Asian sphericules, other Canadians remain largely cut off from these smaller spheres of discourse. Even though a significant number of South Asian print media organs publish in English, their distribution points are usually limited to the communities’ grocery and garment stores. (2002: 239)

Although this line of thought deserves a lot more expansion, I think we’ve followed it far enough to present a hypothesis about what the MCHC is for that incorporates a critical evaluation of the mechanisms of power in government with an idea of how and why culturally-marked citizens are engaging these
mechanisms. The mission of the Coalition is, in discourse and I believe in fact, a kind of technical justice: inequalities exist in the health of citizens, the inequality is correlated with culture, language and race, and this fact is offensive to liberalism and Canadian nationalist values. At the same time, public capital is declining, replaced with a discourse of “support” whose aim is to maintain social governance through talk – peer education, expert literature, participatory meetings, inspirational speech – which will provoke investments of social capital by citizens, as well as teaching them about physical health and also about recruiting capital from non-government sources for their own pro-health projects.

Where the transaction is one of speech, public sphericules represent slow zones of exchange where social capital is eroded at the border; the subjects “inside” lose ground on health, the governors “outside” lose ground on legitimacy. Language's twin roles as the glue of “warm” social life – of friendship and solidarity – and as the medium of technical communication, are both visible along the borders of sphericules that are isolated vis-à-vis public state liberalism. Where we stumble over words and translations, communication literally slows; logically it follows that at a higher level, language differences – including differential understanding of elite technical vocabularies such as those found in health promotion -- slow social governance. While it is by no means fair to suggest that MCHC planners
see racial prejudice and socioeconomic injustice only in terms of overcoming ignorance, this is, I believe, the kind of technical equation that is necessarily adopted for their expert work to show progress. They adopt a didactic stance, and challenges to the no-money model can provoke a lecturing response.

What MCHC contributes to my picture of virtue as the new face of social governance is the subversion of a classical division between “state” and “civil society” actors in liberal Canada: first, private citizens are being recruited into the task of active governing, because their social capital – imagined or real – can take the place of the public capital that is withdrawn from state agencies. Second, civil servants are – far from being disciplined by a strict, classically liberal sense of neutral disinterest – encouraged to develop microinstitutions of advocacy work within the architecture of the state. However, this discipline reappears in the ghostly form of underfunding, forcing such civil servant-activists down the path of pressuring “target” communities to contribute their own resources.

MCHC is one actor in a field of projects in social government. The model of accessing alternative publics developed from observing its practice and justification can be applied to other state/non-state collaboration. In the case of the No Community Left Behind project, race and culture may be implicated in its
“alternative publics” but the primary rubric for its interventions is one of poverty, crime and security. The high-level theory of NCLB’s creation and its place in the networked hierarchy of Ottawa city government is, bluntly, largely indecipherable to those not immersed in the language of social policy: the flash-animation slideshow available on the City’s website (South-East Ottawa Centre 2006a) is dense with coded phrases. It claims that the program “follows a social determinants of health model” without explanation as to what this might be, although the constant references to crime, victimhood, gangs, and cooperation with police implies its identification with a law and order agenda. The emphasis on the need to “leverage resources,” to “maximize impact of existing programs and services,” to maximiz[e] the return on investment” or to “reduce overlap,” (in other words, get by with less or nothing), is constant. I found particularly amusing the way in which one of the four “pillars” of the program seems to stick out like a sore thumb: “collaboration, coordination, participation, and leveraging resources” (South-East Ottawa Centre 2006b).

In practice, the NCLB consists of a steering committee that provides organizational assistance to neighbourhood groups such as tenant associations and community houses, which are located in “problem” communities, identified as such by low educational attainment and income, and high rates of crime or
insecurity. The steering committee brings together multiple partner agencies and NGOs, but its documented record also indicates heavy police involvement, especially in accountability and success metrics. Eight of thirteen programs sponsored by the project, which include physical fitness and recreation classes as well as health-education initiatives, specify increasing cooperation with the police as a metric of success (*ibid*).

Like the MCHC, the steering committee meetings are clearing-house sessions for professionals from various community agencies (such as Children's Aid, Community Health Centres, the Ottawa Police Services, and representatives of Public Housing projects), and they share many of the same joys and sorrows. Unlike MCHC, NCLB has a hierarchical relation between steering and local committees, and admission to meetings of the former body is gated. When I first asked to attend meetings of NCLB bodies I was told this was impossible unless I was a resident of one of the target communities; later, this stance was softened to a requirement that I be vetted at a meeting of the steering committee, after waiting three months for them to reconvene, before I could approach any of the community groups. There is also more of an outside-and-above attitude towards provoking investment on the part of their publics. Beyond participating in an expert discourse the steerers also shared a sense of passive dependency upon
social processes beyond the reach of their interventions. At one meeting, for example, two apartment buildings with chronic problems of drugs and disorder were contrasted, referred to by their street numbers alone as “1280” and “1450”\textsuperscript{14}. In brief, the impression was that one was coming along, whereas the other was still stagnating and facing intractable security problems. What was the difference? In the latter building, “people are not angry yet, they are still only scared”.

Interestingly, the context made it clear that the speaker did not mean only that the people had to get “angry” at criminal elements in their neighbourhood, but they also had to get angry towards the experts themselves. Heated demands and arguments at meetings held by the tenant association in the more-progressed building were seen positively. Once the residents of “1280” made demands, the character of the building changed and it became easier to make the community secure. Technocratic improvement depended here upon civic activism, in a parallel but different manner than at MCHC. These technocrats welcomed \textit{demanding} civil society, so long – presumably – as what was demanded was in their power to supply, and that the demands implied that “social capital”, that is, volunteer labour, was available.

\textsuperscript{14} pseudonumerized.
The Funding Wars: Structure, Network and Culture in the Helping Industry of Ottawa

Complementary to the agencies described in the section above are non-governmental organizations (NGOs) which seek to pick up the slack in the social. They have their work cut out for them, in Ottawa as elsewhere; 90% of the immigrant population in Ottawa is considered to be “visible minority”, and visible minority residents are four times as likely as the average to live on low incomes, with over half living in designated “deprived” neighbourhoods (Levy 2009)\(^\text{15}\). While newcomer populations in Ottawa display the well-studied “healthy immigrant effect” upon arrival, this health advantage decays greatly over time, particularly among women (Ng 2009). This deterioration represents a problem of governance as well as potentially of natural justice, one whose remediation falls heavily on the "helping industry" of the non-profit sector. At the same time, political scientists such as Phillips argue that Canada is "falling far behind other countries" in improving the capacity of its civil-society institutions through effective public governance and support, leading to a non-profit sector that spends more and more of its time on marketing and publicity in order to keep up with the material demands of its client base (Phillips 2010: 66).

\(^{15}\) All Ottawa Public Health Forum presenters are cited with their actual names, as the presentations were public and intended for dissemination.
Two of the largest migrant-oriented NGOs in Ottawa combine charitable services, advocacy work including legal assistance, and education of the type highlighted in the MCHC above. These NGOs are the Ottawa Settlement Services Network (OSSN), and the New Canadians Centre (NCC), both pseudonymized. The NCC was one of the most robust sites in my fieldwork; I worked as a volunteer there in various capacities for over a year, interviewed front-line case-workers and management, as well as clients, and had ample opportunity to observe the practices of the settlement-assistance division as they guided new Canadians through the varied minefields of immigration bureaucracy, healthcare, employment, housing and establishing new social ties. My relationship with OSSN was more ambiguous; I was able to conduct several interviews with professionals at the Network, but my volunteer duties never got into any rhythm, nor was I successful in navigating the internal bureaucracy of consent necessary to do archival work or “institutional ethnography”. Partly these problems were due to timing: OSSN was going through repeated attempts at restructuring, and may have felt particularly “vulnerable” to the gaze of an outside researcher (Interview notes).

OSSN is located in a new building outside of downtown but still accessible by public transit. Its headquarters combines housing that is a mix of subsidized and
“market rate” units, with open-concept offices with very modern design and welcoming colours. It has a fairly straightforward corporate structure with departments devoted to Counselling, Community Development, Fundraising, Volunteer work, Language Training, Administration, and so on. However, one of its persistent organizational challenges is maintaining communication and coordination – what we might think of as the corporate equivalent of Locke’s “fellow-feelings” between all these teams. Here, the barriers are not caused by language or “culture” but by the economic structure of non-profit capital. OSSN is considered, internally and externally, to be fabulously successful at building and maintaining funding networks, but the funding is apportioned by projects, programs or initiative, resulting in a very small “general fund” and comparatively rich “silos”. According to the executive director, this situation results in a tendency for teams to isolate themselves (Interview, January 16th 2009). While I had some productive conversations with people who worked at OSSN, they were always careful to emphasize their individual perspective; at this time, no one was interested in being the “voice” of the organization, not just – I inferred – because of a wariness about how it might reflect on their employment, but because of an uncertainty as to where the organization was going.

This internal uncertainty was at odds with a strategy that had made OSSN a giant
in the city’s non-profit sector, which I think of as “reproducing success”. OSSN provided help to, among others, newcomers who were in dire financial and psychological straits, but maintained a relentlessly upbeat message to potential sources of capital, as well as a form of political activism well-tuned to the economic moment: immigrants are a boon, not a burden. They are presented as successful; they are professionals and small business owners, entrepreneurs and law-abiding taxpayers. This was seen, for example, in the 2008 theme of the picnics and formal dinners organized by OSSN, which served a dual purpose of raising donations and showcasing virtuous newcomers for political purposes – no mean task at a time when border-panic seems to be on the rise (L. Taylor 2008). 

At the same time, the OSSN discourse stresses that in order to promote success, social investment is required; OSSN emphasizes individual success, including market success, without reducing such results to individual effort. The plucky-virtue of newcomers ought to be matched by the generosity-virtue of the already established.

The New Canadians Centre is located closer to downtown than OSSN, in an older building it shares with other migrant-centred NGOs. During my work the NCC, too, was undergoing restructuring, and in some ways seemed to be moving towards the corporate, professional atmosphere apparent at OSSN, but in practice
there was still a strong contrast between the two agencies, one commented on by both clients and workers in interviews, and vividly impressed in my initial observations while entering their spaces. NCC is noisier, livelier, generally more crowded and with less in the way of physical separation between waiting and working areas. It has not, or not yet, shed a feeling of bricolage and improvisation, with receptionists sometimes doubling as child supervisors while parents consult with case workers. Partly this character is due to the different focus of the Centre with regards to “mandate”, a focus which might be historically determined by the Centre’s affiliation with the Roman Catholic church, but which is now transitioning to a strategy for staking turf in the battle for funding and recognition. “We have a reputation for being good with refugees,” says the director at a public speech given in a forum hosted by the city department of public health – a speech act that both acknowledges and shapes institutional reality. Crisis is something that NCC workers are familiar with, and they tend to be more generalist than similar professionals at OSSN – handling psychological, financial, legal, educational, housing and employment concerns equally, if only as a point of contact for a network of more specialized help. For immigrants facing emergencies, rather than seeking to assemble longer-reaching schemes of self-actualization, NCC was regarded as more accessible.
Bureaucratic practice encoded competition between OSSN and NCC in the world of funding and volunteer talent. Although information about fellow NGOs percolated through public talks and professional meetings, the purpose of this discourse seemed to serve to stake out turf, rather than reinforcing common interest, and its distribution was tightly controlled. “We don’t want to know what they’re doing over there,” I was told in a volunteer orientation session, “and you can’t tell them what we’re doing over here”. The fact that, as a researcher, I was travelling between different organizations, was a cause for wariness on their part.

OSSN and NCC are part of a helping industry; given that many if not most of the highly-educated professionals who have full-time employment in this industry could seek better wages elsewhere, the industrialization or marketization of helping cannot be reduced to a profit motive, but is rather an adaptation or disciplining of an impulse that predates it. However, in this industry compassion (in the form of donations of money or time, or of professional time meted out for free to clients) has to be carefully managed as it has become, in effect, a limited (human) resource, divided up in space and time, bordered by averted gazes, silence, walls, and waiting. At NCC, the area where clients wait to be seen by case workers or by the lawyer -- who donates time, weekly, to help people with their immigration cases – was until recently open to the working area of the centre, so
employees would pass back and forth in front of those who wait, often the very people they were later slated to see. Until the time of the appointment, the waiting clients usually went unacknowledged. The newer OSSN building, having more space, has its reception area closed off by walls and glazed windows from the working areas of the building. At the same time as contact with clients, which is emotionally-draining work, is limited by more and less obvious means, other highly personalized networks are integral to the success of the “technical” part of the job – filing applications, requesting access to privileged data, being appraised of upcoming shifts in Canada’s highly mobile field of immigration regulation and law. The “helping” in the helping industry is facilitated by contact between case workers, immigration officers, politicians, donors, law and medical schools, and other academics. The flexibility of these relationships is what allows the system to carry on – or rather, what allows the perpetuation of the narrative that a system exists, since the complexities of individual cases are constantly straining the seam between the objectives of actors within the immigration regime (justice, national security, economic stability, or just a lack of trouble), and the letter of the rules. In the following two examples, drawn from fieldwork, I briefly suggest how these contrasting structures of feeling create confused or hybrid identities, between activist, advocate, technocrat and bureaucrat, in those employees and volunteers that involve themselves in the liminal state of newcomers.
As a volunteer at NCC, I assisted with casework and was asked to help decipher the tangled case of a Somali-Canadian resident I will call Awa. Awa was what might be called a “semidocumented” immigrant; in over a decade of residence, she had never managed to achieve secure status, for reasons that defy simple explanation, involving the family and criminal court systems as well as the immigration machinery. In light of her circumstances and the fact that she had Canadian children, she had up until recently been granted temporary legal status, through a series of minister’s permits; with these permits, she could continue to go through the process of attaining landed immigrant status. The NCC wanted me to write up a narrative of her case, for the purposes of advocacy and possibly fundraising as well.

Reviewing her heavy file, I read through the applications that were submitted, year after year, for the renewal of her permit. These were done with the help of an NCC caseworker who spoke Somali, for Awa spoke almost no English and no French at all. The form contained many fields that were meant to detail Awa’s life-history in Canada and build her justification to remain, a justification that could be fed into her struggle for permanent recognition of her refugee status. The forms had been submitted almost entirely blank, year after year. And year after year,
they were approved anyway; I can imagine, though I was never able to confirm, that oral networking between caseworker and Immigration reviewer bolstered the administration of her case. Under the heading asking her to justify her continued need for an exceptional permit to remain, Awa or her helper usually just wrote: “I want to.” (And why not?)

Then suddenly, one year, the application was denied. We were struggling to find out why from an Immigration bureaucracy that was either stonewalling us, or offering explanations inconsistent with their previous behaviour.

This situation revealed a contradiction in the nature of NCC’s advocacy. How strong a case could one make for a consistent and fair application of rules when the rules had clearly been marginal or ghostly all along, an abstract background to the daily reality of personal networking and sketchy translation? If situational ethics, rather than informing rule-based accountability and systematically reforming it when it fails, leave it behind entirely in the name of freedom, what do you do when the informal network you have built upon turns feral? Awa had many good reasons to remain a Canadian citizen, though the difficulty of her case was partly due to her own actions. By eliding the oversight of a systematic bureaucracy, a paper trail, her advocates had nevertheless left her at the mercy of
in essence – the virtue of the powerful, who might be compassionate one year and callous the next. This case illustrates the most negative or critical interpretation of my field-data, where the disassembly or simple starvation of regulatory governance creates a highly unstable social field where ethics are inscrutable and lack even a basic, “liberal” sense of fairness. It also calls upon activists to consider the value of instituting good rules beside the value of liberation from bad rules.

I want to add a footnote here – or maybe a contributing conclusion -- about accountability, and bureaucracy. Social scientists are sensitive to the ways that bureaucracy can limit ethical action or obscure injustice; there has been a lot of excellent critique written about the new “cultures of accountability” in academia, government and other spheres of society (Strathern 2000, Shore and Wright 1997). These critiques often focus on the use of accountability metrics to discipline broad projects of social and economic justice into tamed or non-threatening forms. My field observation, however, indicates that we may sometimes be projecting a fear of accountability-metrics that is peculiar to people with the middle-class privilege of individual activism and self-defence. When advocating for those with "messy lives" there are benefits to keeping the story straight.
The waiting room is full when I arrive. I’m going to lunch with my friend, a case worker at NCC, but when I look in on her in her cubicle she’s holding her head, gaze unfocused and distracted, not doing anything in particular.

“You look tired,” I offer awkwardly.

“The husband of one of my clients has just died.” She doesn’t know the details; this is a man she knows, she has been hosted by this family for dinner and parties. The widow has no other family in Canada; her mother died in Bolivia during the “lockout” period of the daughter's application for permanent residence, when she was not allowed to travel outside of Canada (technically one can apply for permission to do so; despite the medical documentation that her mother was near death, this permission was denied, and it is not often granted).

I give my friend her space. By the time she has sufficiently collected herself to speak with me, it is too late to go for lunch; she has another appointment coming in only half an hour. I stay until then, and we talk about whatever comes into her head. Occasionally she stops for a moment to put her hand back on her head and gaze off into the distance.
We talk about the shortcomings of the major agencies in Ottawa. I mention that I’ve been surprised by the incomplete or poorly-filled out forms that are passed on to Immigration by case workers. The bureaucracy can be random and cruel, I say, but it sometimes seems like people do not play the odds well, even professionals who should be representing their clients when they can’t represent themselves.

“Sometimes,” she says, “I walk around my office. I’m sitting here [at my desk], and I get up and go over here [by the window], and I say – I’m an immigration officer: ‘Look at this, what is going on here? this isn’t filled out, these forms are inconsistent, this case doesn’t make sense’. Then I go over here [to the visitor’s chair, leaning forward with hands clasped between knees, rocking back and forth slightly] -- I’m a client: ‘I’m scared, I’m nervous, I want to say the right thing. Maybe I lie a little’.

“I have to say to myself: Woah, stop. We have to go back to the beginning, and get everything right. The clients think I’m tough; I am tough. You have to respect the client, not make them feel small or stupid, but you have to be tough. There are three people in here.”
We agree to meet again the next week and talk more over lunch. Someone else is coming in; I ask if there is anything I can do to help; I tell her to take care of herself.

The waiting room is full when I leave.

The Doctors are Restless: Management and Upheaval in the Domain of the Clinic, in Ottawa and Abroad.

The NCLB program discussed in the first section of this chapter draws participants from many institutions, but it is fronted through an office in one of Ottawa’s fourteen Community Health Centres (CHCs). These centres, established starting in 1975, hold a mandate from the city and province to care for “underserved” populations, in a supplementary manner; they are an institutional response to the long documentation of unequal access and outcome in health care (Tanner 1999). I was able to conduct key interviews at two other CHCs, and extensive volunteer-research at one other, in a downtown and west-end neighbourhood. In the latter case, I contributed to the outcome evaluation and future planning of a program of employment mentorship for New Canadians, and visited a “simulated business” that was housed in the building. The CHCs bring together physicians, nurses, psychologists, social workers, and education
professionals, and represent another branch of government commitment in Ontario to “the social determinants of health.”

But what does that mean in terms of the day-to-day accomplishment of health governance? Why are job mentors living upstairs from doctors, and how do doctors who participate in the CHC network – doctors being the discursive kings and queens of Western health care – understand their role within the broader and perhaps broadening professional domain of the “health-social”?

Some, like Dr. Geller – a speaker on behalf of the CHCs at a City-funded health fair – sees her role as covering “gaps” in a “patchwork” system of care for newcomers (Geller 2009). She contrasts the CHC network to the “cadillac model” of settlement for government-sponsored refugees16; whereas in the latter there is (in theory) an organized and pro-active attempt to support refugee settlement, other newcomers are expected to navigate the health care system on their own, usually with fragmented knowledge. Since there is a shortage of general practitioners in Ontario, the CHCs become the source for walk-in and even

16 Official refugee migration in Canada is divided into privately-sponsored and government-sponsored categories, with the former taking up the bulk of admissions quotas (private sponsorship of refugees is separate from family-member sponsorship, and generally involves a religious, cultural, or labour organization undertaking sponsorship with a philanthropic mandate. In any one year there are about 500 government-sponsored refugees in Ottawa.
emergency care for this population. Within that framework of experience, Dr. Geller encounters the problems of transcultural healthcare that are now familiar to medical anthropologists (cf. Waxler-Morrison, et al. 2005, Spitzer 2004), including the appropriateness of psychiatric diagnosis, as well as the relative absence of physician expertise on infectious disease, and the more general political economy of scarce public goods; “Of what value is a [culturally-appropriate] diagnosis,” Dr. Geller comments, “if there is no care available?”

For Dr. Benton, one of Dr. Geller’s colleagues in the CHC network, investment in the Centre has a pragmatic as well as compassionate side. A medical consultant who works on policy, insurance and regulation, Dr. Benton sees his work at the CHC as “anchoring” his medical career in clinical practice (Interview, April 9th 2009). He also enjoys working in the team-based environment, something that he observes has become critical as CHCs moved from their historical mandate of serving particular geographical catchment areas, to addressing the needs of differently-defined populations – such as newcomers. Given that environment, I asked him, how does he relate as a doctor to the processes of settlement that his patients are going through?

“I feel like an interloper in that process,” he replies. In fact, in the continuum of
needs expressed by the population, which the Centre hopes to meet in its expert
discourse, medical care is not necessarily central. The concerns of newcomers, in
particular refugee migrants, fixate so completely on legal issues and more basic
daily matters of household reproduction that routinized, preventative use of health
care services seems unimportant (doubly so if such medical practice is alien to the
refugees’ pre-migration life experience). This disconnect could be part of why the
“healthy immigrant effect” – the observation that new Canadians are, on average,
healthier than the native-born – deteriorates rapidly in the years after resettlement
(Ng 2009, Kinnon 1999).

Interlopers or not, physicians are pushed into the moral discourse of migration as
the meaning of health-care expands around them to encompass social services. In
contemporary U.S. politics, researchers have observed that health-care reform has
become entangled with immigration reform, as the spectre of “illegals” using
public health services haunts negotiations (McLaughlin 2009). In France and
Switzerland, irregular migrants can acquire and maintain the right to remain if
they are diagnosed by medical doctors as requiring European health care; here the
balance is different, with a health-as-human-right discourse being more powerful
than that of excluding the “illegal” migrant (Larchanché 2009, Salis-Gross 2004).
On the other hand, French doctors are increasingly refusing to take on patients
who are identified as irregular migrants in need of medical rescue, since the legal generosity of the state system often does not extend to paying the bills on time, or at all (Larchanché 2009). In Germany it is illegal to provide material aid to the large population of irregular migrants, yet doctors and social workers are not only left unprosecuted but congratulated by the state for breaking the law, and thus maintaining the viability (and perhaps a little of the human dignity) of a population the state refuses to acknowledge or care for. Needless to say, the congratulations of the state do not come with funding attached, a strong example of relying on virtue to replace public investment (Castañeda 2007). Through the window of the immigrant newcomer, the moral domain of health as it affects all of us is being contested, and the “virtuous workers” are moved to stake out a claim in new moral territory that is redefining the social contract of the liberal-democratic state with reference to these two impressive magisteria: immigration, whose political-philosophical roots go back to the very origins of liberalism as such, and public health, one of the founding sciences of the socialist-democratic tradition which has ever been liberalisms partner and shadow.

Conclusion: On the Management of Virtue

often fancy ourselves rebellious critics speaking truth to power, but even when invited to take part in the process of policy formation, the mistranslation or differing interpretations of our critical work can be disheartening and alienating. Arguably, one area where Canadian social science has greatly influenced the discourse of public policy is in the domain of health; Byron Good, Morton Beiser, Nancy Waxler-Morrison, and many other intellectuals have succeeded to varying degrees in transcending disciplinary boundaries and stimulating policy discussion about the policy implications of a broad perspective on human wellness (Waxler-Morrison, et al. 2005).

The evidence presented here brings up the possibility that the social-determinants discourse is not simply transforming policy talk about health-care, but playing a significant role in reshaping the image of “governing the social”, full stop, in Ontario. Even as organizations like the MCHC, the Ottawa Community Health Centres, the OSSN and the NCLB project individualized responsibility for health through positive, “You can do it!” type education, they do the work of expanding the moral authority of “health” as a social domain to cover almost all aspects of human life. Health, as a human right and an optimizable object of “technical justice”, draws in issues of housing, security, employment, recreation, and political franchise which might previously have been considered socially-
governable domains in their own right. Why might this be?

Margaret Thatcher is quoted as saying that “society does not exist”. We might reformulate the right-wing liberal slogan as “the social is ungovernable”. In an imaginary free market, the laws of the behaviour of individuals are inherent to the system rather than being structured into it from outside; they follow natural patterns arising from internal characters and are self-optimizing, so that any attempt to restructure conduct can only lead to a worse overall outcome (here, in the sense of the total wealth produced) (cf. Hayek 1944). Government, as the “conduct of conduct,” cannot therefore act productively upon the system. As political projects seek to extend this vision into ever more domains of human life, this discursive ungovernability displaces welfare-oriented schemes that previously claimed (always partial) governance over social structures.

Why health? I do not feel I have the evidence to make a strong conclusion, but in speculating I turn to the work of Emily Martin on contemporary notions of bodily flexibility and interpenetration (Martin 1994). Martin traces the transforming popular conceptions of immunity and disease through the lens of the North American HIV epidemic in the 1980s and 1990s; while earlier conceptions of immunity featured the image of the “fortress body” excluding invasive Others by
means of a rigid structure, emerging immune-discourses emphasized the idea of a balance of forces within a body semi-permeable to the outside world. Martin ties this transforming discourse of illness and health to changes in the American cultural understanding of the working body and the economy, where the ideal of lifetime employment is replaced with one of the nimble worker, balanced on a tightrope, self-activating and moving easily between career-related domains as the economic circumstances demand. If Ilcan and Basok (2004) are correct in their argument that the non-profit sector increasingly takes up the task of "responsibilizing" marginal or deficient subjects into the moral duties of liberal citizenship, health is a powerful driving motivation where the hazards and benefits of buying in to self-care are obvious and deeply embodied.

Another, complementary explanation is suggested by Biehl’s work on AIDS therapies among the urban poor of Brazil (2007). In Biehl’s study, the occupation of an abandoned maternity ward in Bahia by indigent AIDS sufferers – many of them sex workers and drug addicts – lead to a process by which some of the abject outsiders of society could assemble “patient-citizenship”, and through that, new lives regarded by the state as valuable and valid (Biehl 2007: 282). By “patient-citizenship”, Biehl means a process by which minimal medical entitlements – made available to everyone from the public purse, in this case anti-retroviral drugs.
allow marginalized state subjects to constitute themselves as political actors with legitimate interests. In doing so, for example by pooling their entitlements in the context of an informal hospice established by squatting in an abandoned building, they are subsequently able to recruit outside support and invite a civilizing discipline that reincorporates them into the body politic. Following the same example, in Biehl's case study the informal hospice gradually acquired formal recognition by the state, which entailed both the allocation of further public resources and the institution of behavioural controls on the residents (Biehl 2007). For those on the edges of the state's imagined community, then, building citizenship can be a collaborative (though unequal) process that uses health discourse and entitlement as a solid "substrate", in moments when other public resources are scarce.

The history of Canadian nationalism shows something of this capital/immune flexibility, as well. Whereas historically Canada’s policy-makers propagated the image of the nation as a White fortress, from which the dangerous miasmas of Chinese and Italian (and Jewish, and so on, each in a different wave of panic for a different era) had to be excluded to maintain its strength and health (Mackey 1999), newer nationalist anxieties focus on the need to integrate newcomers in a balancing act between accommodation and assimilation (Séguin 2010). More
recent panics about disease have also emphasized this sense of global interpenetration: in the SARS outbreak of 2003 in Toronto, Chinese food practices, and specifically their possible or partial reproduction among Chinese-Canadians, became a flashpoint of moral anxiety (Galley 2009).

I am not the first researcher to explore the links between the management of ethnic communities in Canada and the para-state deployment of social services. Reviewing the distribution of settlement services for newcomers in Toronto, Sadiq developed a social-geography model of "two-tier dependency" (2004). In this model, large agencies -- positioned in the non-profit sector -- compete in what I have called the "funding wars" for government contracts. The larger agencies then sub-contract the provision of services to what Sadiq calls "ethno-specific" agencies too small to successfully acquire funding directly from the government (2004). In this manner, Sadiq argues, governments purchase legitimacy among marginal communities while minimizing their own responsibility for service-provision -- and incidentally creating a haphazard landscape of services that do not map efficiently onto human needs (Sadiq 2004).

I think following these lines of reasoning may lead social researchers interested in health citizenship to an understanding of why the domain of health has become a
site for the reproduction of social governance under regimes regarded as hostile to classical welfarism; as nationalist social projects such as Lyndon Johnson’s War on Poverty come to be seen as discredited (Cruikshank 1999), spaces open up for the refiguration of economic (and medical) injustice as a contagion, a meta-illness we have common cause to cure. At the same time, the ability of these “social health” projects to counter powerful paradigms of economic austerity is very limited; in general since 1985, the dominant political agenda has been to withdraw public capital from circulation, and to “download” responsibility from larger to smaller networks of government (with the accompanying shrinkage in both the tax base and the pool of expert labour to draw upon). This agenda has also been criticized for reducing the value of human beings to something that is measurable upon their “bare life” in Agamben’s term, adapting to the political disenfranchisement of citizens – particularly marginalized ones – rather than rejecting or opposing it (Paley 2001). A sufficiently severe crisis of public services is, I think, more likely to spur efforts at rejuvenation than total dismantlement, given the ongoing commitment to a form of social responsibility in Canada; on the other hand, the increasingly exploitative, illusory and unsustainable nature of the infrastructure of these services makes such a crisis more and more likely as time goes on, with serious consequences for citizens and migrants alike.
In Toronto I once saw an ad for volunteers to have conversations with recently-arrived immigrants.

Well, when you warm them up, warm them slowly! Never put your feet in hot water when they’re numb, you’ll get blisters!

Oh, this takes a lot of getting used to.

I’m proud of you!

Is this your first winter, your very first?

What are you made of?

Of what does one have to be made to give up sunlight and heat all year for the absolute darkness of Ottawa in January —

— for the hope that you will be allowed to be?
Chapter 3: Across the River: How the Canadian “Solitudes” Structure a Diaspora Community

Dead End

In this chapter, I examine some interesting problems posed by my fieldwork; specifically, the unexpected ways in which the divide between English and French Canada – which in many ways my Ottawa-Gatineau fieldsite exemplifies – structured the interview and survey data I was able to collect. It is in some senses a frustrating analysis because I do not yet have any satisfactory answers to the puzzles posed by the dead end I encountered. What I attempt to do is present the observations and pieces of interview data that are relevant, and situate them as a contribution to the academic conversation about transnationalism, minority nationalism, diaspora, and migrant identity. I speculate about what this dead-end might mean for theories of transnational community, and its relevance to protracted scenarios of diaspora-generating conflict such as the ongoing conflict in Colombia. Scholars have explored the role which diaspora communities play in reconciliation after the cessation of hostilities in situations of prolonged conflict (Hell and Kostić 2008, Bercovitch 2007, Østergaard-Nielson 2006); the divisions and silences observed in my fieldwork cast a shadow over such possibilities, though not I hope an impenetrable one.
Ottawa-Gatineau is an economic-cultural entity, rather than a legal one, a multi-urban catchment spanning both sides of the Ottawa river, and thus extending into two Canadian provinces. On the Ontario side is Ottawa-Carleton, a large amalgamation of municipalities centred on Ottawa whose population totals approximately one million people. On the Québec side is Gatineau-Hull, a similar but smaller clustering of municipalities grown into one another. Both cities house extensive federal-government employers; both cities also contain elements of the network of national museums – The Museums of Natural History, of Science and Technology, of Civilization, of War, and so on -- comparable to the Smithsonian Institute in Washington, D.C. Culturally-speaking, Ottawa is English, Gatineau French. The interprovincial border itself takes the form of a broad river, the Ottawa, crossed by several bridges and dotted with tiny, windswept islands; there are no customs posts or security checkpoints marking the gap between Ontario and Québec. The presence of public institutions on both sides of the river mandates a strong bilingualism relative to other parts of Ontario or Québec, with the possible exception of Montréal. However, this public bilingualism does not necessarily indicate a strongly-integrated cultural bilingualism, or a unified bilingual cultural life-of-the-city. While it would be an exaggeration to suggest there were any real tensions between English and French residents of “Ottawa-
Gatineau”, the proximity of what author Hugh McClennan called Canada's “two solitudes” in some ways only serves to render them more visible (1951).

Growing up in Ottawa I attended French-language public education from kindergarten while speaking English at home. Not too surprisingly, many of my teachers came from across the river, and many still lived there, commuting to work in primarily-English Ottawa to teach in French. When I was 15 years old, a referendum was held on the question of national sovereignty for Québec, promoted by the separatist party in provincial power at the time. The day before the referendum was held, my history teacher Mr. Gagnon told us not to be worried about whether class would go forward should there be a vote for sovereignty. “If they barricade the bridges,” he explained, “I will canoe across the river under cover of darkness for our class!” For context, it should be noted that Mr. Gagnon also claimed to raise dolphins at his vast estate near Trois-Rivières, and to have invented poutine. The possibility that Québécois separation from the Canadian state would result in a shooting war was remote to the point of absurdity; nevertheless Ottawa-Gatineau residents were particularly conscious of the strange contradiction between their economic interdependency and these sometimes-noisy “solitudes”.

161
My goal here is to lay out, as accurately as my field notes record, the sequence of events that forced me to consider and analyze the effect of these solitudes on a particular transnational community in Ottawa-Gatineau, and then to try to situate these events in the context of contemporary theory about both minority nationalism and transnational identity-politics. I anticipate that the evidence will seem frustratingly slim, anecdotal, and subjective, and can only offer that no reader will be more frustrated by this than I am and was; I had no method or instrument for systematically evaluating the division explored in these notes, not least because it was defined in part by the silence – and sometimes, the outright refusal – of people on one side of the division to participate in my project. Unlike other aspects of this thesis, here I can only relate what happened in the hope that others will find it as intellectually provocative as I do.

At the heart of my “dead end”, and at the heart of this chapter, is the way in which these solitudes were unexpectedly reproduced within a third-language minority; unexpected by me, in any case, but perhaps a surprise too for straight-forward theories of transnational association in which shared language and shared origins provide a basis for economic and cultural solidarity among newly Canadian minorities. Why would Colombiana/os, or other Spanish-speaking newcomers, identify either with the phantom British nationalism of English Canadians, or the
nuanced but vibrant French-language-oriented nationalism of Québécois? Colombians are a small enough community; Ottawa ranks behind several other cities for Colombian-origin population, and there are probably about 2,000 of Colombian origin in both Ottawa and Gatineau, dwarfed by the size of the Chinese-Canadian and Lebanese populations to name two. My conditional answer is in two parts: one, that for all the passionate emotion, speech and action it can provoke, identity has at its base a pragmatism of economic stability and survival; and two, it is not so easy to escape a war.

Apparently an Agent of the State: Revealing Blunders of a New Fieldworker

At first, getting an interview with the Colombian Consul in Ottawa, one of the country's senior-most diplomatic representatives in Canada, seemed like a nice little coup. Naturally my plan was to focus on immigrants, particularly refugee immigrants, as my primary source of data; given the slow speed with which my project recruitments were proceeding, however, I was eager to supplement my primary interviews with relevant testimony and associated points of view. Logic told me very clearly that many immigrants from Colombia to Canada, fleeing repression associated with the state as well as the guerilla, would prefer to have nothing to do with the Consulate, but at the time this did not seem to exclude asking the Consul for her point of view on migration and health matters in
Canada. And in fact the interview turned out to be an interesting one, both for its content and for what followed after.

The consul, Mónica Beltrán Espitia\textsuperscript{17}, is a relatively young and ambitious diplomat with a frank manner and a fascinating view of her mediatory role between the Colombian nation-state and its exiles both voluntary and involuntary. As consul, she repeatedly stated that her job was to represent “the country, not a government” to Colombian nationals, and she tried to encourage Colombian nationals in Canada to view the embassy and its services in the same way – an assembly of governmental services funded (and one imagines, controlled to some degree) by the state but not identified with the politics of the state or its crises. In this she felt she had been successful during her tenure: “People have gotten closer to the Embassy,” she said.

I also asked Ms. Espitia to elaborate on two interesting pieces of information heard from other, casual informants at this, early stage of my fieldwork. One of the very first Colombians in Ottawa I spoke to was a settlement worker at the New Canadians Centre, Consuela, who said in the course of our first meeting: “You know, Colombians here – we can only talk to each other if there's a party.”

\textsuperscript{17} As a public official whose position is easily identifiable and who consented to speak in her official capacity, I have not concealed her identity here.
When I prompted the consul with this phrase, curious about her reaction, I found she immediately agreed, indeed, situated a similar insight at the heart of her diplomatic work and even gave it a positive, nationalist spin. In Colombia, she explained, race or ethnicity could not serve as the “most important glue”; neither, despite its hypothetical, cultural dominance, could Catholicism. Colombians, in her view, were not very religious. “You can see this as bad or good,” she offered in reply to Consuela's remark. The “very strong tradition” of being noisy and partying, for her, was something that unified Colombian people who in other ways were very divided. In fact, this tradition made it possible for her to do her job, which she saw as maintaining connections of national identity despite the fact that the state, or “a president”, was sometimes the reason those nationals had fled to Canada!

After I explained my broader project and expressed interest in also meeting Colombian people living on the Québec side of the river, Ms. Espitia put me in contact with Jennifer, a young professional immigrant working as a cultural interpreter at a firm in Hull. I ended up meeting and having an excellent interview with Jennifer, mostly in French which was a fluent second language for both of us, at the end of which she promised to spread the word of my project and bona fides to a group of younger Colombians living in Gatineau-Hull who might

---

18 Jennifer provided interview and survey data included in Chapter 4 (as case #11).
also be interested in meeting me. I prepared a letter in French and English to introduce myself and my interests, based upon the research letter of information passed by the Research Ethics Board before I left the university. Jennifer felt rather confident that the issues of citizenship, exclusion, access and mutual understanding between professionals and patients would resonate with the politically-active Colombian community group she attended, and her confidence was contagious. At the time, I felt that I was opening up a new data set that would enable cross-provincial comparisons, make use of my French skills, and serve as the beginning of a snowball sample on the “far side” of the river.

Not only was I bilingual but so was my supervisor, which afforded me the chance to have an untranslated French letter of affirmation from her to send, along with a description of my project and an invitation both for participation and criticism/suggestions to the group via Jennifer, who herself was very enthusiastic. However, my project didn't catch on. The sole reply we received from the other group members explained tersely that they didn't feel any project conceived in Ontario could apply to the situation of Québécois. That was all.

Another avenue of approach was the Ottawa-based community group; I was familiar with the place of such groups in the social-service, recreation and policy
landscape of Ottawa partly from my participant-observation with the Multicultural Healthcare Coalition, a municipal government body in which ethnic community or solidarity groups were a significant player (see chapter 1). Further, linkages between researchers and community groups were a relatively common feature of graduate fieldwork among my cohort of anthropologists and related fields. Some of these groups, such as the Lebanese and Arab Social Services Agency (LASSA), or the Sudanese-Canadian Centre of Ottawa (SCAO), themselves become funding partners in multi-agency programs dedicated to helping new Canadians, mobilizing a significant base of volunteer hours and donated funds. Collectively these groups are an interesting feature of the hypothetical “communitarian liberalism” discussed by Canadian theorists like Charles Taylor, in which civil society displays overlapping fields of association beyond the level of the individual.

In the case of Colombians in Ottawa-Gatineau, however, the ethnic community organization seems to be at best an unsteady focus for communitarian feelings. Through the period of my fieldwork the website for the Ottawa group (Communidad Colombiana Canadiense de Ottawa y Gatineau) had not updated its news section since 2006\(^1\), and I was never able to secure an interview – let alone

\(^1\) As of the writing of this chapter, in January of 2011, the website has become more active, which is heartening!
a collaboration – with the group or its current chair. I would later be told that the
group's fortunes tended to rise and fall somewhat chaotically over time, and that I
had happened to be trying to contact them at a low ebb. One interesting aspect of
the group that could be gleaned simply from their virtual presence, however, was
that there was some uncertainty over its status as an *inter-provincial* community.

The name of the group specifies that it claims Ottawa *and* Gatineau as its
catchment. However, according to Ms. Espitia as well as informants affiliated
with the Spanish-language Catholic parish in Ottawa, a separate Gatineau-based
community group for Colombian-Canadians had split off from the Ottawa group
some time in the past. By the time of my 2008-2009 fieldwork, their website had
become defunct, so it remains unclear whether they had re-merged with the
Ottawa group or simply dissolved. A member of LAZO, the Latin American
Women's Organization, told me at a meeting of the Multicultural Healthcare
Coalition (MCHC, one of my participant observation sites described in chapter 1),
that the Communidad Colombiana had been a participant in the Coalition in the
past and probably would be again, but that they went through phases of
disorganization. This observation was confirmed by Barbara, a Colombian
anthropologist working for the city of Ottawa, who said at the time that the
Ottawa association was “more or less defunct”, and that its status served as a
“national marker” of “Colombian apathy”.

168
I continued to try to establish some contact with the Gatineau community while seeking an ever difficult balance between the persistence that would give my project legitimacy in the eyes of later reviewers, and the discretion that would prevent me from being seen as a nuisance by the people I hoped would engage with my research. There were forever tantalizing hints that I might be close to a breakthrough: one of my recruitment sites for survey and interview participation, a Catholic parish, had the parish secretary make a favourable announcement on my behalf regarding my research, while I was in attendance (I tried to attend Spanish-language mass whenever possible). Afterwards a number of people expressed enthusiasm for the idea and signed up to receive survey/interview packages, which I posted. Another man suggested, unprompted, that I ought also to recruit people from Gatineau and said he knew several friends who would definitely want to speak with me. He asked for my contact information as well as to take a sign-up sheet with him to pass around. Sadly, in an outcome that matched a general pattern in my fieldwork, I never saw or heard from him again – nor did any of the volunteers complete the survey or return information necessary to setting up interviews.

I explained my frustration to Anya, one of my long-running expert witnesses and
informants at the New Canadians Centre. Anya was a settlement worker with a very pragmatic, no-nonsense attitude, which I had sometimes misread: once, I approached her to chat after mass and she asked me immediately if I needed anything. When I replied that I was “just saying hello”, she nodded and moved off without another word to talk to someone else, assuming I meant literally that I had no intention of conversing with her. So I knew she wasn't fooling around when she stared at me in a considering manner after I'd told my tale, thinking for a moment before saying decisively, “It's probably because they know you were at the embassy. They think you're working for the government, now.”

Welfare Guerillas: The Role of Rumour in Structuring the Solitudes

“Many of the people living in Gatineau, they are not real refugees.” This statement was made by Pierre, a Roman Catholic priest who – though of Francophone origins himself – had long ministered to the Spanish-speaking and especially the Colombian community of Ottawa. We were discussing the merits and faults of the Canadian refugee-determination and -support system, from his perspective not only as a cleric but as a trained psychologist and counsellor.

“They're cheating; they travel first-class to Colombia and yet they're on welfare – how? That creates division in the community. Others are honest but they can't get status or were deported. The lawyers are like [birds of prey], they lack honesty.”
Pierre's bitter reflection on what he saw as the secret and possibly criminal Québec-side of the Colombian-Canadian community was part of a sub-genre of comments I heard from people who worked closely with refugee migrants. Riley, the head of community partnerships at the Ottawa Settlement Services Network (OSSN), stated during our interview that he thought 80 percent of refugees made up their stories. (It wasn't clear whether he meant 80 percent of claimants, or of those that received refugee status!). He even suggested that people “try to sneak in” to Canada by planting themselves inside refugee camps. Like Pierre, Riley attributed part of the low levels of social trust observed in refugee communities to the mixture of “good and bad” people within them, abused and abusers. Both Anya and Consuela, settlement workers at NCC, also expressed frustration at various points about lies told by their clients, though the settlement workers were careful to situate that behaviour within the context of extreme psychological uncertainty regarding the legal status-determination process and its social expectations. Anya was particularly angry that she sometimes found herself in a position of “defending assholes,” but located that conflict within the adverserial system of immigration status whereby the government agencies saw their mission primarily as one of exposing and punishing cheats: “If the immigrant community services industry did their job for them as well, all our clients would suffer”. By
taking up the role of the defence, community services workers moderate the
effects of disciplinary policies on “innocent” as well as “guilty” refugees while
assenting (do they have a choice?) to the construction of immigration as a matter
of criminal justice.

Assessing the accuracy of perceived criminality among refugees is beyond the
scope of this thesis, although the extent to which refugees are perceived as
sometimes or often dishonest by the people who choose to work with them is
intriguing (or disturbing?) More directly relevant to the problem of this chapter is
the strangely dislocated or anonymous nature of these accusations. Although four
separate “expert” informants commented that they had heard that FARCistas
(members of the leftist guerilla movement – the Armed Revolutionary Forces of
Colombia) had settled in Gatineau or funnelled money from Canada back home,
one none were willing to claim certainty or first-hand knowledge of the fact. Pierre,
for example, phrased his suspicions in the form of probing but rhetorical
questions.

“Do you believe it's true?” I asked Lucy, a professional counsellor originally from
Colombia, when she repeated the same rumours to me of guerilla in the Gatineau.
“I don't know,” she replied. “That is only what I have heard.”

Other contacts had less fear-based theories about the structure of difference between the Ottawa and Gatineau diaspora communities. Barbara said that she felt the river reconstructed class lines among Colombian immigrants: Ottawa was the settlement area of choice for most professional immigrants, who came from middle-class backgrounds and who had the fees and language competency to enter Canada through the economic stream. Once here, the bilingual education offered to immigrants in Ontario allowed them to reestablish themselves quickly; nevertheless, some of them did consider themselves “refugees” in a personal if not legal sense, in that they were fleeing severe insecurity of person and political rights. “Back home we have no rights,” Barbara added, from her own perspective as a professional and academic in exile. By contrast, her impression of those living in Gatineau was that they represented the bulk of the refugee-class immigrants in the region, living close to sponsors, as well as claimants without determined status. Not only did she perceive them as having higher rates of social assistance, but their economic flourishing seemed to her to be compromised by the exclusively French education available to them.

Other informants such as Jennifer – a professional migrant working as a translator
at a successful interpretation firm in Hull -- confirmed that the monolingual French education available to immigrants in Québec was a source of frustration, given the awareness among migrants of differential economic opportunities between French and English Canada. The education system gave rise to a feeling of being trapped in Québec – unable to compete for relatively scarce jobs and unable to move elsewhere to pursue better chances. This observation matches some of the focus group data collected by the Ottawa Project, an interdisciplinary and ongoing research initiative at the University of Ottawa that examines the effects of the Ontario-Québec border, including its perception by migrant groups such as Latin Americans (Veronis and McAloney 2010). Project researchers conducted a focus group with Latin American newcomers to Gatineau, most of whom (8 of 11) were refugee migrants from Colombia (ibid). While appreciating the shared “Latin” culture of Spanish- and French- speakers on the Québécois side of the border, participants suggested that Québécois were more hostile to immigrants than Anglo-Canadians, and less inclined to “meritocracy” in employment situations. Moreover, language politics were identified by participants as a force of exclusion in their lives. Participants were concerned about having to send their children to French schools and being pressured to learn not just one but two new languages (ibid). The corresponding focus group in Ottawa, of five Latina/o newcomers from a variety of countries, contains the
following rather oblique quote:

It was noted that housing costs are cheaper in Gatineau, as well as the fact that the Latin American community there is more visible/present and well organized. Despite these factors, participants were categorical about the fact that they would not live there (Veronis and McAloney 2010: 18).

I can't help but wonder why they were so categorical!

Ms. Espitia, the consul in Ottawa, disagreed with the assertion that class was a distinguishing marker of the Ottawa and Gatineau communities, instead highlighting her perception that age – and time of arrival in Canada – was the determining factor. She constructed a distinction between a “culturally active” population of Colombians who had spent longer in Canada, tended to live in families, and who settled in Ottawa, and a “more politically active” population of younger Colombians, more likely to be single, who settled in Gatineau. She also mentioned that the Gatineau community group had split from the Ottawa group, though as of January 2011 it is uncertain whether two viable community groups remain active. “The embassy wants to tell people,” she told me in our first meeting, “don't import the Troubles to Canada.” But in order for that message to reach all groups, “we are trying to convince the community that we are not [Colombian president] Uribe.”
In the course of my fieldwork I was told other stories, too, ones that didn't relate
directly to the notion of a split between Ottawa and Gatineau, and yet nevertheless
contributed to the sensation of muddling along the edges of a shadow-public of
rumour and urban legend. For example, there is the story of the Colombian
woman who settled in Toronto as a refugee, fleeing after having been kidnapped
for ransom; one morning she went to get coffee at Tim Horton's only to find that
one of the men implicated in her kidnapping in Colombia was standing in line
behind her\textsuperscript{20}. Or there are the rumours (although these are more like public secrets
than urban legends) about where you can get unlicensed dental care or medical
advice from fellow Colombians in Gatineau; healthcare professionals who do not
have the credentials to practice legally in Canada but who nevertheless offer
informal services to fellow Colombians in “the language [and culture?] of their
soul”, according to one informant. First, she said, you want a legal health-care
provider who also speaks Spanish and understands your culture; if you can't find

\textsuperscript{20} None of the people who repeated this story to me or recognized it when I related it to
them knew any names or details. In context even if they had known them it might have been best
that they not be shared, which leads me to note its possibly-apocryphal nature. True or fictional,
this story fuses the opening act of Ariel Dorfman’s play \textit{Death and the Maiden} (1996), in which a
woman living in post-dictatorship Chile recognizes the voice of a houseguest as that of the never-
before seen man who had her tortured in prison, with that quintessential Canadian symbol, lining
up at Tim Horton’s. If the story is fictional, perhaps it illustrates a psychological trope of exile –
that of watching the past bleed back into the present in a landscape that it never knew. If the story
is factual, perhaps it illustrates \textit{why} the exile sees this happening – because faster and faster global
connections make the past harder to escape. Another example, definitely not apocryphal, is that of
Brancko Rogan, alleged to have been a prison guard who abetted the torture of Bosnian Muslims
during the war in Yugoslavia. Having obtained refugee status in Canada, he was recognized by a
former inmate of the prison in a store in Burnaby, British Colombia and subsequently arrested; his
trial is ongoing as of June 2011 (CBC 2011).
one (50% of my survey respondents had no family doctor at all) then many people seek healing from informal sources. The secretary of the Spanish-language Catholic parish in Ottawa was offered as being another informal provider of psychological help and advice: “She has no degree, she is just wonderful.”

Other researchers in the region have heard mention in interviews of “grey” transactions in the settlement agency “industry”. Technically, the border between Ottawa and Gatineau acts as a barrier to receipt of settlement-agency services for migrants. Since Québec controls many aspects of its own immigration policy, whereas responsibility for immigration is federal in all other provinces of Canada. Not only is it legally mandated in Ontario that newcomers receive settlement assistance from only one agency, but agencies in each municipality “do not have [a] mandate” to provide services across the border (Veronis and McAloney 2010). However, in focus group interviews conducted by Veronis and McAloney, all settlement-agency informants said that they provided “secret service” to clients from the other side of the border, as well as to refugee claimants and longer-term residents (both of whom are officially ineligible for access to settlement services).

Both for new Canadians and ethnographers, informal contacts and face-to-face connections are key to understanding and navigating community. If you
communicate cultural resources and connections chiefly face-to-face, you know who is listening, and some of the limitations to the success of my 2009 fieldwork were no doubt attributable to the understandable caution on the part of those with whom I wished to converse about my identity and position.

_Fear and Joy: Methods of Communication in a Divided Linguistic Sphericule_ 21

One key to unpacking these experiences is to return to the discussion of violence, as many migrants from Colombia to Canada have direct experiences of violence in their past and most others have the experience of an acute social awareness of high levels of violence in their native country. 22 Colombia has experienced various forms of internal conflict since the 1940s at least, ranging from localized civil war between government, left-wing guerilla and right-wing paramilitary forces, to related forms of organized crime, kidnapping, blackmail, and murder. One extreme and yet diffused form of violence is known as “social cleansing”, in which death squads – primarily associated with right-wing paramilitary movements – kill “undesirable” elements of society, in particular Indigenous leaders, trade unionists, municipal politicians and law enforcement officers, feminists, and other dissenters (Riaño et al. 2008, Riaño-Alcalá 2008, Taussig

---

21 For definition see chapter 1.

22 Colombia had the highest rate of kidnapping of any country in the world in 2001, though the rate has since declined greatly (BBC 2001); over 30 000 murders were recorded in the country in 2003 (BBC 2006).
In a passage from his book *My Cocaine Museum*, Taussig vividly describes some of the “artistic” forms of violence that were practiced upon people's bodies during an earlier period of conflict in Colombia, in the 1950s:

the *corte de corbata* (the necktie cut), supposedly invented by the state's paramilitaries... leaving the tongue protruding through a hole in the neck, and *bocachiquiar*, the mode of killing by cutting slits in the surface of the body so as to slowly desanguinate the victim, the slits reminiscent of the way the *bocachico* fish is prepared for frying (2004: 278).

Working with refugees from Colombia a generation later, and herself a native of that country, Riaño-Alcalá comments that violence is “a way in which armed groups communicate with society” (2008: abstract), though to be sure, this communication is less exact than language, and reduces communication to a monologue – a shouting demand for conformity that reduces all other voices to whispers, or silences them completely.

Victoria Sanford’s work in Colombia demonstrates the effect of these indistinctions on the body: she describes the fluidity with which army officers become extra-legal paramilitaries, simply by changing clothes and thus
broadcasting new social signals: the army protects paramilitaries from guerrilla opposition, and the paramilitaries murder unwanted Colombians officially protected by the state (Sanford 2004: 263). Both paramilitaries and guerrillas displace villagers in marginal provinces through violent means, creating internalized spaces of exception in the form of overcrowded barrios. To explain how the barrios themselves are spaces of exception, Sanford cites Arendt’s argument that the very category of “displaced persons” was invented to dissolve the stateless into a generalized category of rightless people, who suffered in innocence without responsibility or opinion, and whose suffering was integral to their displaced status, rather than a result of political forces (270). In this example, the displacement of the marginal serves to depoliticize the process through which many of them are subsequently assassinated, a process known as “social cleansing” and attributed to a general violence and irrationality rather than to the instrumental interests of the paramilitaries (265).] Like “displaced persons” everywhere, the inhabitants of such barrios become, if not the canvas for the writing of blood letters, then in more sympathetic eyes nevertheless muted innocents, “bare life” robbed of political speech and marked by its capacity for suffering (Agamben 1998).

The shifting lines of a multipolar conflict, like that which gripped Colombia
through the 1990s and which generated many of the first-generation migrants now living in Ottawa, provide a baseline for examining the value placed by diasporic Colombians on a cautious, face-to-face knowing. This type of interpersonal relationship generates a form of social trust that – ironically – rapidly attenuates through social mediation, so that contacts who are not personally known are progressively veiled by a hard uncertainty, and what someone says about themselves must be weighed carefully against what is said about them. Of course, it is not necessary (or desirable) to essentialize an experience and outlook founded on violence and trauma to explain low levels of social trust. This situation is also related to the precarious position of Latin American migrants in Canada, many of whom are refugees dealing with the legal system and stained with racialized stereotypes of immigration-criminality and low-status, manual forms of labour. There is also the element of “Latin culture” -- an ethnographically-arrogant term but one that is not entirely alien or objectionable to many Colombians in Canada – which articulates a value on friendly, personalized relationships and contrasts fellow-feeling to bureaucratic formality. Yet the prevalence of anxiety and accusation in the rumors – sourced and unsourced – encountered in this fieldwork adds a sour tinge to the sweet milk of Colombian hospitality, friendliness and exuberance. Tiny things evoke this lack of social trust, frustrating in their elusiveness and laden with the possibility of misinterpretation; a bitter, rueful
smile at a question about community or “back before coming here”, a nervous tightening of the air as we skirt inadvertently along the edge of some limit of conversation.

After my fieldwork I continued to meet Colombian people in Canada, though now in Hamilton rather than Ottawa. To escape the solitude of thesis-writing I volunteered with an English-language conversation circle for newcomers to Canada, offered by a local settlement agency, and several of the younger people who attended regularly had migrated from Colombia. The idea of the circle was that it be as informal as possible, not a lesson but an opportunity simply to chat; however, since the barrier of confidence in a new language can be high, the senior volunteer would sometimes supply some starting “exercises” exploring areas of English. One such was a sheet of colloquial expressions involving metaphors relating the body: having eyes in the back of one’s head, having two left feet, and so on. We compared cultural body-metaphors, offering examples from all our homelands.

“A hair-raising experience means something scary or frightening, like when the hairs stand up on the back of your neck,” said the senior volunteer. “Have you ever had a hair-raising experience?” She went around the table asking this.
“Yes,” said a young Colombian man, and then he said nothing. A heavy silence fell over us at the sight of his body language; as he cringed, so did I.

In the winter of 2008, a massive demonstration against the FARC took place worldwide, a reminder of the ability of diaspora communities to mobilize for transnational political reasons, and of how Facebook and other internet applications have expanded this ability -- at least for those with access to the technology. The Colombian periodical *El Tiempo*, in a special issue on the protests, estimated that two million people had participated in cities across Colombia, and demonstrations by anywhere from a few hundred to a few thousand people – many though not all Colombian exiles – took place in 165 cities globally (*El Tiempo* 2008). Singling out the largest armed left-wing group in the country after the assassination of 11 municipal politicians in Valle de Cauca, the anti-FARC protests took their slogan from a Facebook group started by six young Colombian professionals: “No more kidnappings, no more lies, no more deaths, no more FARC”. The February 4th protests included demonstrations in Toronto and Ottawa. Around the margins of this event, which at the centre represent an active effort to promote a public voice against violence in Colombia, other discourses played out that contributed to the theme of hushed speech or
rumor. First there was the thesis that the protests were, in reality, organized and directed by President Alvaro Uribe's government, which had made a policy of zero negotiations with the FARC in favour of outright military victory\textsuperscript{23}. The presence of mass-produced white t-shirts bearing the slogan “Colombia Soy Yo” ["I am Colombia"] and professionally-printed banners were cited as evidence of this claim, and it is true that Uribe's government quickly moved to publically support the protests, citing them in turn as justification of its muscular policies. Opposition politicians originally objected to the one-sided nature of the protests' focus and the political capital they provided to the government, but once the scale of the developing marches became apparent several politicians agreed to join and speak at the events. Indeed, the clearly identifiable founders with no documented links to the government, as well as the sheer number of people who voluntarily participated outside as well as inside Colombia, made the “astroturfing”\textsuperscript{24} thesis seem unlikely. Nevertheless, the singular focus of the 4 Febrero protest on the FARC mingled pro-peace sentiments with more partisan politics including attacks on Venezuelan president Hugo Chavez, who – ironically – had just secured the release of a handful of hostages from the FARC, but in doing so raised suspicions about his involvement with the rebels.

\textsuperscript{23} This policy contrasted with that of amnesty for right-wing paramilitary fighters who agreed to officially disband, and added to the scandal of 2006 wherein senior officials of Uribe's government were found to be closely linked to paramilitary groups.

\textsuperscript{24} This political term refers to the funding of seemingly grassroots, populist movements by powerful monied interests.
A second transnational day of protest took place on the 6th of March 2008, similarly involving both Colombians, other Latin-Americans, and local supporters throughout the Colombian diaspora. Drawing on similar grassroots origins, it called for an end to all acts of violence in Colombia by all actors, including the government and the right-wing paramilitaries as well as the left-wing guerillas. Those who attended the Toronto march were also pointing out the international dimensions of the conflict in Colombia, including the involvement of the United States military apparatus and the War on Drugs; on the other hand, at least one young woman who chatted with me was attending the 6 Marzo march because she had been unable to attend the 4 Febrero one, and considered the two morally equivalent. Despite the moderate tone of the 4 Febrero founders in quoted interviews, and the all-embracing moral demands of the 6 Marzo marchers, there was a definite tension between the two groups. Not only had the latter protest been formed partly to correct perceived silences in the former, but vehemently “anti-6 Marzo” groups appeared on Facebook in response (both marches relied heavily on Facebook groups and messaging in order to coordinate events and recruit individual support). Again, the image of Hugo Chavez was prominent, this time with protestors wearing buttons or signs supporting his role in a future peace-process in Colombia as well as his leadership of Venezuela. It is not possible to
conclude that the interplay of narrative and counter-narrative in the transnational Colombian public sphere is any stronger or more bitter than in other diasporas, though perhaps it is comparable to that of other diasporas caused by civil wars (for example, Sri Lanka's). However, the confusion and sense of broken solidarity, and perhaps the lack of agreement on the boundaries of Colombian civil society and its interests – such as the suggestion that immigrants living in Gatineau are really guerillas, and therefore without a legitimate interest in Colombia – seems to strengthen the impression of a shadow-land of implied or hushed speech.

How (if at all) is this shadow-land abridged and what is the resulting public space like? Well, if people can only speak when there's a party, parties seem like a good idea – at least, if it's your job to get people talking. Consequently, the consul Ms. Espitia embraced this notion as a central part of her diplomatic job. She framed her self-perceived role within the diaspora community of Ottawa-Hull as “bringing people together”, which made me consider Ferguson's notion of “anti-politics” (1990). In Ferguson's formulation, devised to explain the relationship between development NGOs in Africa and illiberal state regimes, “anti-politics” describes the discursive process by which conflicts of interest between groups – such as those between economic classes or between governments and marginalized sectors of civil society – are translated into non-political terms.
amenable to technical interventions. (In the case of Lesotho in Ferguson's case study, the terms are those of international agricultural development regimes, the “Green Revolution” of fertilizer provision and upgraded farming technology). In the process of this translation, injustice and moral analysis are neutralized.

Can we speak of an antipolitics that is administered as an analgesic rather than an anaesthetic, a joyful antipolitics that provides some temporary (if inadequate) relief from alienation? The consul seemed to be trying to articulate a kind of parallel, dionysian nationalism separated from competing visions of Colombian(-Canadian) community. She agreed with Consuela that Colombians in Ottawa-Gatineau “can only talk to each other if there's a party”. “You can see this as a bad thing or a good thing,” she added herself, “something that unifies”. Celebration was “a very strong tradition,” and being noisy was more universal to Colombians than race or religion. In her view, as a result of embracing this dionysian ideal “people have grown closer to the embassy,” which now “gets both groups,” understanding that she and her office are “for the country, not the president.” This approach presents the curious paradox of obscuring internal divisions in an imagined community – but in such a way that acknowledges their ongoing existence, and even accommodates them. At the same time, another community informant, Barbara identified “embassy events” as the site of “internal power
“struggles” that directed the mercurial fortunes of community lynchpins like the
Communidad Colombiano-Canadiense in Ottawa.

For a subset of people there's also the Catholic parish. There used to be a parish in
Gatineau that also offered Spanish mass but it stopped doing so, so Spanish-
speaking Catholics either attend mass in downtown Ottawa or at a larger church in
the suburbs (but this church is too far out for people from Gatineau, according to
downtown parishioners). There is also the national holiday celebration on July
21st, which takes place in a large park by the river, on the Ottawa side. The focus
is on food and football, and family – groups gather around the edges of the green
space, partly for shade cover and to avoid obstructing the view of the football
pitch.

Lastly, during the period of my fieldwork I was privileged to observe some of the
foundation building of a sort of “craft guild” for Spanish-speaking community-
support professionals such as counsellors, social workers, engaged academics and
teachers. Breakfast meetings at the Ottawa Catholic parish mentioned above
served as networking events where ideas regarding the possible future of such a
guild could be firmed up and guiding documents inspired. Lucy, a family
counsellor and Colombian migrant as well as one of my ongoing contacts, had
taken a leadership role in organizing these working breakfasts, with her ultimate vision being a formal resource network for hispanic Ottawans, accessible from any individual point of contact – that is, any one of the assembled professionals could direct people to any of the others for help with their problems.

**Putting the Solitudes in Context: Minority and Civic Nationalism(s) in Eastern Canada**

Political communities may increasingly “transcend” or transform the nation-state, but in many ways they remain closely tied to national territories and “ecumenes” (Wax 1993). By transcendence, I refer to both the process of supra-nationalism by which entities such as the European Union or NAFTA come to colonize areas of governance traditionally monopolized by the nation-state, and the process of regionalism by which subunits of existing nation-states gain new autonomy and governance, such as Catalonia in Spain or Québec in Canada (cf. Greer 2007, Keating 2004). By ecumenes, Wax refers to a mutually-intelligible conversation or ongoing discourse, reflected here by the fact that the nation-state, in addition to retaining much of its power, also serves as an unavoidable arena in which processes of transforming identity and authority must be worked out. A national ecumene means something that might simplistically be called a national culture – a culture fostered or mediated by the presence of a state, the *daily practice* of the
nation-state. In addition to the day-to-day business of the state and government bodies, this “conversation” is mediated as well as by cultural institutions such as newspapers and television, and by the myriad arenas identified with “civil society” such as doughnut shops, religious community buildings, pubs and so forth. Like all conversations the national ecumene is bounded by language.

In many places these conversations are also about language. Canada’s political discourse frets over the theme of English and French; the two languages not only symbolize but encode in conversational practice a history of conquest, resistance and accommodation/negotiation, and through the practice of history in daily life they construct national identity. Language is also entangled with policy; arguably voters in Québec do not elect sovereigntist politicians because of a content-free ideology of identity, but because Québécois (civic) nationalism represents a style of governance or policy-dialogue that they find amenable. Canadian multiculturalism was originally conceived as a way of binding these language-nations more tightly into a single state project (Mackey 2002); only later, as the immigrant population of Canada diversified, was the multiculturalism policy adapted to a “patchwork” of many overlapping identities.

Canada today is host to many exiles, and one of the many dilemmas of the exile is
how, or whether, to engage with the unfamiliar conversations of their country of asylum. First, this conversation represents, for many, a new language, with its rules of grammar and its vocabulary. But this language-acquisition also entails learning techniques of language-practice by which this grammar and vocabulary are used to articulate a particular set of culturally-relevant contentions. These practices do not imply unity, for such contentions may stir up violently different emotions in different people. Yet sharing these practices marks Canadians as members of a body politic by their understanding of what there is to differ about.

Charlottetown, Meech Lake, St Jean-Baptiste Day, “referendum”, all have particular resonances for longtime Canadian residents who have been privileged to, and interested in, engaging with the political speech of the nation-state. Or, perhaps in the case of Canada, we should say the nations-of-the-state – a pseudo-organic (that is, generally unbounded by any single project of national identity) body identifiable as the “people” which are the subject of state policies and institutions.

Immigrants to Canada, in general, show a degree of integration into regionalist politics, and Ottawa is a fracture-point for these politics, for it is a meeting place of English and French Canada in several different ways. A study by Bilodeau et al. (2010) used survey data to assess “centripetal” and “centrifugal” attitudes among
immigrants towards levels of Canadian government, comparing those attitudes to the rates of similarly-held views among native-born Canadians. This study found that there was an attenuated regionalism among immigrants – that is, immigrant Canadians were less likely than native-born Canadians to identify with and approve of their province to a greater degree than with the federal government and the Canadian nation-state. However, although the regionalisms were attenuated they followed the same cleavages understood by Canadians: specifically, Québec and the rest of Canada, and Ontario versus the western provinces of Alberta and B.C. (ibid).

In Ottawa, these regional differences represent to some extent differences of social and economic status. It was common when I was young to teasingly tell someone to “go to Hull”, playing on the similarity between the name of Gatineau's largest municipality and Hell. Hull was regarded, by many Anglo people in Ottawa, as dirty, poor, and filled with dubious businesses such as exotic dance clubs and massage parlors. The reputation for seamy excess attached to the city across the river – which echoes old ethnic stereotypes of French Catholic decadence and backwardness – was reinforced by the habit of teenagers from Ottawa going to Hull to drink while under-aged in Ontario. Thus, the use of Hull for sheltering illicit activities by young people from theoretically more middle-
class Ottawa was seen as confirming the illicit nature of the place itself. Some of
the perceived economic differences are certainly grounded in reality: median
income for Gatineau was $46 142 compared to $52 265 for Ottawa (Census
2006), although both are above the country’s median income, and there is little
difference between the two in the rates of “low income” which varies by about
0.3% in either direction depending on the population examined. The average
monthly rents for one-bedroom apartments advertised on the popular Viewit.ca
website as of April 11th 2011 differed between the two sides of the river by $27525.
These economic differences undergird and inform the tension between English
and French senses of grievance and alienation that operate across the soft border.

When I reflect on the competing, sometimes contradictory explanations offered
for the silence between the two Colombian communities in Ottawa-Gatineau, I see
a similar pattern to the one studied by Bilodeau et al. in their survey. That is to
say, there appears to be an attenuated, or perhaps reinterpreted, regionalist
cleavage in this newcomer population that nevertheless matches in its gross
dimensions that found in the settlement culture. Barbara offered the explanation
that the split between the two sides of the river was reconstructing, or
reestablishing, a class division that existed among the Colombians who came to

25 Ottawa, of course, has its poor neighbourhoods, but interestingly while I was growing up there
the most visible and well-known of these poor areas was Vanier, east of downtown, and one of
the more francophone areas of the bilingual city.
Canada, a division that has stark political implications in a civil war defined partly by left-versus-right class ideologies; consul Espitia, aware of these painful social divisions and seeing her own political project as easing them, contradicts this explanation. Then there is the association of people living in Gatineau with illicit markets – whether benign ones such as medical advice, or malign ones such as funnelling funding to terrorist groups. What would I find if I were able to get the perspective of more people living in Gatineau, perspectives about Ottawa? Would people agree with the assessment of the differences between the two communities?

The inclusion of referents to class ideologies and armed groups that are not common in public native-born Canadian consciousness – especially with respect to inter-regional rivalries – suggests an importation and integration of pre-migration political understandings into a new environment. This is not indicative of a retrenchment or backwardness on the part of newcomers. I would argue that making use of the past is a consistent, universal function of human cultural and linguistic understanding; we look for patterns in the present that resemble things we have already encountered, and in seeking to describe those patterns we turn to words, phrases, and models we already know, established through previous experience.
Two examples can serve as analogies for this process. Eisenlohr's study of Hindu migrants living in Mauritius lays out one model of how humans employ “landscapes of memory” to familiarize and integrate new surroundings into their identity, their inner worlds that are nevertheless shared with others through idiom and ritual practice (2004). In Eisenlohr's data, Hindu religious pilgrims – unable for practical reasons to physically journey to traditional holy sites in India, recreate the Indian sacred geography by overlaying it on the physical attributes of the island of Mauritius: in the annual Shivratri pilgrimage, hundreds of thousands of devotees travel to a remote lake named Grand Bassin, reconfigured as “Ganga Talab,” a piece of the Ganges river in exile (ibid). In my case, we are not dealing with sacred geography and the analogy does not fit perfectly, but it is worth making anyway: what is significant about the kinds of social processes that Eisenlohr demonstrates is that they are related to post-migration national identity, and they straddle the border between remodelling the present in the image of the past (mythical or otherwise), and recognizing the reality of one's present circumstances. To put it another way, what is as significant as the exercise of imagination in this overlaying process is the fact that it is not wholly imaginative – it does not rely entirely, for example, on a kind of consensual mass-hypnosis, a mental “passage to India” and conversely a disconnection from Mauritius while
the physical body remains stationary. Rather, the geography of one’s physical life and presence on Earth is made familiar, and the sensations of alienation and homesickness blunted, by recognizing parallel patterns between old landscapes and new.

Another example of the persistence of landscapes of memory is the example of emotional trauma, in which many of the same cognitive faculties seem to be in play but with a reflex or involuntary character. The memories of traumatizing events can force their way into the present in the form of unwanted associations between traumatic events and ordinary objects, places, sounds or other sensations that carry no inherently terrifying or aversive quality (cf. Rubin et al. 2008). Riaño et al.’s large project on Colombian refugee migrants in Colombia, Guatemala and Canada examines these processes through the working metaphor of “landscapes of fear”, whereas the work of Salis-Gross argues that the process of South-to-North refugee migration is founded on a model of trauma-memories that further ingrains these fearful landscapes in the minds of those people who seek to escape from them, by forcing them to develop a trauma-narrative of their own life in order to secure legal migration status (Riaño et al. 2008, Salis-Gross 2004).

In Riaño's work, violence is explored as being simultaneously physical and
symbolic – that is, not symbolic in the sense of not directly disrupting bodies, property and lives, but in the sense of being designed to “send a message.” Violence is thus a means by which armed groups communicate with society and articulate their demands (see also Sanford 2003). For involuntary migrants both inside and outside Colombia's borders, the experience of violence becomes encoded in inner worlds – such as, in one example, the symbolism of the bridge as a place of death revealed in the testimony of displaced persons from Antioquia, Colombia, as well as in their artwork (Riaño-Alcalá 2008). As a natural “choke point”, bridges were convenient to armed groups for the purposes of killing, robbing or intimidating passers-by, as well as displaying the results where they would be seen. For Colombians who still live in their native land, the complex relationships between memory, place and violence force decisions between memorializing and forgetting, paying tribute to some places while trying to erase the connotations of others (Riaño-Alcalá 2006). In exile, the places are different but the memories sometimes haunt them anyway. For many displaced Colombians, such landscapes of fear are continually re-experienced as a sensation of threat embedded in the new, transient or diasporic geographies of their lives.

Due to a non-longitudinal methodology that usually allowed for minimal rapport-building (see chapter 4 for details on interview methodology), I did not solicit

26 The topic of trauma and memory is further explored in Antze and Lambek (1996).
data about individual experiences of violence that might have led to emotional distress. I therefore make no assumptions regarding any of my conversation partners regarding their individual backgrounds, with regards to “trauma”. As discussed in the introductory section on the Colombian conflict, as confirmed in sources like Sanford's 2003 paper, I nevertheless feel comfortable suggesting that violence, as a factor in the construction of an inner, social geography, is something that affects all sectors of Colombian civil society and forms a touchstone of diasporic identity – even if it is primarily, in some cases, something to be refuted: “People hear I'm Colombian and immediately they think of the *narcos* [drug-trafficking gangs],” said a translator who assisted with the study. “It's not all like that.”

The synthesis of these examples lies, not in an attempt to map Colombia *directly* on to Canada -- as if to construct a “Colombian immigrant mind” -- but in an exploration of *lexography* as human practice, but which I mean the way human beings produce and reproduce a dictionary of interpretation which they use to mediate between external and internal geographies. Part of the most general theory of human learning is the proposition that we can generalize from an experience in order to predict the consequences of future action; the experience of burning one's hand on a hot stove – or even seeing someone else burn their hand –
contributes to a predictive model that discourages touching not just hot stoves but glowing red objects. Human learning, of course, goes far beyond this simple example, partly due to the flexibility of cognition and behaviour afforded by language and meta-linguistic symbolism (semiotics). Furthermore, learning is not individualized but takes place in social context, in which both communal negotiation and relations of power play roles in structuring individual lexographies, such as the equally stereotypical example of traffic signs and rules of conduct on the road. We use the old to understand the new, consulting our lexography (as well as, of course, amending it continuously over the course of our lives) in order to interpret new experiences. Among these experiences is what human geographers call “sense of place”, a gestalt of physical and social environment that forms a major building-block in the construction of “identity”.

What the preliminary evidence of my research suggests is the importance of this lexography in reestablishing personal and collective identities in diaspora communities, adapting familiar idioms to new conversations as part of a transitional process of “lifelong learning” and “political resocialization” (Bilodeau 2008, White et al. 2008, Armony et al. 2004). There are two things that this lexographic subjectivity is not: it is not a mirage in the sense of being an

---

27 For the purposes of this thesis I settle for an empirical, undertheorized definition of identity – that is, identity is defined by the sorts of experiences and outlooks and symbolic associations that people present when asked about their “identity”.

199
illusory “crutch” laid over the “real”, natively-socialized Ottawa-Gatineau.

Colombians in Canada really are, to some degree, separated by class identity and politics as well as specific experiences of political repression, violence, privilege and discourse – and so are Canadians. The numbers of Colombians, and thus the magnitude of their impact, may be relatively small, but the resettlement and adaptation of Colombian migrants in Ottawa and Gatineau contributes to the normal dynamism of the demographic and social environment. Crudely, lexographic reinterpretation is not illusory because it recognizes reality and transforms it. The second thing it is not is static or fixed in time. To argue that people make use of the familiar in interpreting the novel does not suggest they are focused on the past or living in memories not subject to change. Rather the very engagement with reinterpretation and adaptation contradicts this idea; these deployments are in the service of the present.

That Canadian present is one in which divisions of class, language and social status are very much present, and reflected in the political geography of the Ottawa-Gatineau region. It is plausible that rents, not terror, are the most significant factor driving differential resettlement across the provincial border; but those differences are reflecting economic and social inequalities in Canada that cannot help but resonate with the parallel experiences of people born elsewhere.
Although Canada is, for the average resident, much safer than Colombia, the spectre of political violence still haunts the Ontario/Québec border, from the living memories of the FLQ crisis of 1970 in which martial law was declared, two men murdered by radical sovereigntists and snipers were stationed around Ottawa, to contemporary humour about roadblocks and smuggling. I hope I can be forgiven a certain nationalism in thinking that the Canadian approach to regional separatism is pretty civilized, yet no one could psychologically rule out the possibility of violence should the 1995 referendum have gone the other way (as it was, less than 51% of Québécois voted against sovereignty), a possibility reflected in the humour of my history teacher who vowed to canoe across the border under cover of darkness.

Transnational theory recognizes a relatively new area of social studies: diaspora communities who retain complex international ties, thus complicating the borders of nation-state identity. However, transnationalism studies have been critiqued for romanticizing bodily mobility as being symbolic of globalization, as opposed to contextualizing that movement within the movement of energy and capital that just as often leaves people stuck in place, as well as retrenching state control over borders and migration. Despite being open to the possibilities of new, hybrid identities, many studies of transnational communities have highlighted nostalgia-
influenced practices that tie diasporic identity back to a real or imagined pre-migration national unity (Eisenlohr 2004, Malkki 1995). Protracted conflict situations such as those in Colombia or Sri Lanka produce a stranger mix of aversion to pre-migration life combined with the ongoing exchange facilitated by communication and financial technology that is considered “canon” in transnationalism. This fractured, problematic hybridity is neither a classical exile, in which the homeland recedes into the mists of imagination and distorted memory, nor an open transnational identity in which old and new are seamlessly intertwined in the production of novel nationalisms. Colombian nationalism is inherently problematic for its exiles, and those who settle in the Ottawa-Gatineau region encounter the commensurate problem of Canadian nationalism face-to-face.

The evidence in this chapter does not contribute directly to an understanding of refugee health in Canada, the kind of contribution I set out to make when probing this internal, linguistic border. However, it still forms grist for the essential nexus of bodies and identities opened up in the next and final chapter, the nexus of the medical encounter. Often, attempts to redress inequalities in health outcomes between marked and unmarked ethnicities result in the identity of the Other being compressed into a static and stereotypical "model" for the purpose of educating
health professionals (cf. Gregg and Saha 2006, Kai et al. 2001). It is straightforward to argue that such a technique of modelling the Other potentially dehumanizes patients and ignores the kind of internal contradictions within labelled identities seen here. What is more subtle, I think, is the way that such "cultural competence" locates the Otherness of the Other exclusively outside the borders of the nation-state, as if difference were wholly constructed in the pre-migration period. The contradictions of Colombian identity in Canada, however, are not simply a result of people "bringing the Troubles" with them. The interaction between Colombian and Canadian class and language politics is an essential component of the "different differences" that people carry in their bodies and bring with them in the human quest for bodily well-being.
Another day, another appointment, another waiting room.

Agencies like OSSW are always very lively.

They turn out to be laboratories for Canadian ethnic and gender relations.

Women want equality, equality! Here we are, carrying everything.

Well, men always say they are the stronger sex, so practical.

Practical.
Chapter 4: In the Waiting Line: Rumour and Uncertainty in Latino Immigrant experiences of the Canadian Medical System

Introduction

This chapter presents an analysis of surveys and interviews conducted in Ottawa by the author, mostly among Colombian migrants with a few other Latino-Canadian participants. The analysis is ethnographic and phenomenological in character, exploring the connections between stories as they are told and shared; the preceding chapters on transformations in Canadian law, public services including healthcare, and national politics have set the historical and social context for these stories, leaving the present discussion to focus on their “internal matter”.

This study has ties to two different and ongoing intellectual conversations that are worth mentioning here. First, it is situated fairly comfortably inside medical anthropology, specifically, within the “three bodies” model proposed by Scheper-Hughes and Lock (1987), which encourages ethnographic study on health to recognize the interrelatedness of physiological symptomology, cognition or phenomenology, and political economy. In the context of the present study, this injunction has been played out through the themes of each successive chapter,
here, I address the phenomenological aspects of illness and healing within a particular minority community, while exploring the connections of these narratives to issues of migration, violence, and bureaucracy. Among the works that are particularly influential on the present study is Biehl’s *Vita* (2005), which examines the role of psychopharmaceuticals in the restructuring of affect and kinship under contemporary capitalism in Brazil.

The extreme conditions of some of Biehl's subjects relate to the gross mismanagement of social distress, in which "medicalization" -- the incorporation of aspects of human life into the realm of biomedical intervention and government -- is employed in its most harmful form. People suffering from both chronic physiological conditions and the effects of poverty have their symptoms misdiagnosed as insanity; they are then rendered unable to speak their body's distress, both by overmedication and by the decision of those around them not to listen (Biehl 2005). The stories explored in this thesis are rarely as tortured; they are still matters of health and illness, even in some cases life and death, but the inequalities are not so extreme.

What they share in importance with Biehl's work is an appreciation for the terrible suffocation of *not being heard*. Few things seem to be as important, within the
universal experience of illness and bodily suffering, as being able to communicate and be recognized as someone in need of, and with a claim to, healing. When contemplating the material of this thesis and in particular the stories of this chapter, I often have in mind a kind if icon, in the form of Albrecht Dürer's drawing, "Spleen".

Illustration 2: "Spleen", Albrecht Durer, 1510

This rough sketch is a self-portrait by Dürer, a master of technical drawing and anatomy. It shows him gesturing to a yellow circle on the side of his own body. It
was drawn in 1510 as part of a letter sent to a doctor whom Dürer was too ill to
visit in person, describing his own ailment with the inscription "Where the yellow
spot is, and where my finger points, there is the pain" (Russell 1967). It is
regarded by art historians as one of the most honest depictions anywhere of Dürer
in his adulthood (ibid). To me the drawing is also a sign of the gift of the artist (as
well as the literate person) to symbolize and grant an external reality to the
suffering in the body.

The subject matter of this thesis, and this chapter in particular, is also part of the
conversations on health equity and knowledge translation that are current in
public health literature (cf. Mogford et al. 2010, Straus et al. 2009, Waxler-
literature in public health, similarly to medical anthropology after Scheprer-
Hughes and Lock (1987), focuses on both structural inequalities and personal
experiences, but the latter focus often retains a problematic emphasis on
disciplining patients within the existing social structure of healing through
“translation” of medical knowledge into “culturally competent” terminology (cf.
between medical knowledge and discipline see Hindess 2001, and Biehl 2005). It
is therefore important to state at the outset that the “correctness” of the knowledge
presented in surveys and interviews from my fieldwork, concerning the functioning of the Canadian health-care system, is mostly immaterial to the analysis here. Where there seems to be a need for “disciplining” knowledge, my interest and recommendations are directed toward policy itself – making it work better for the ill, rather than the other way around.

In the next section of the chapter I review the broad details of my fieldwork experience, and describe how my method was adapted to the challenges of working with a “hard-to-reach” community (Correa-Velez and Gifford 2007, Goodkind and Deacon 2004, Jacobson and Landau 2003). Following my presentation of methods, I present the results of these inquiries organized by common themes. Finally, I return to my overall theme of the entanglement between migrant and illness experience in Canada vis-à-vis bureaucracy and the governmental legitimation of experience. Many of the problems encountered by new Canadians when they have to deal with the health-care system or other bureaucracies are not so different than those faced by Canadians whose sense of national belonging is unmarked by race or migration history. In some cases, a long wait in a hospital emergency room may provoke feelings of discrimination or alienation when it is in fact statistically average, a symptom of problems in the system as a whole rather than evidence of inequity. However, the inflection of
experience through the lens of migration generally – and fleeing violent, multipolar conflict specifically – is itself significant both as an object of study and as a factor in the debate over a just Canadian liberal nationalism (or a just alternative to that liberal nationalism).

These stories and my discussions of them are not, therefore, presented as evidence that Colombian and Latino-Canadian migrants are an especially victimized or vulnerable group. Although that in some ways is undoubtedly true, the identification of special needs is relatively well-served by the mainstream scholarly literature on health policy and economics, with its pursuit of “technical justice” within liberalism (see chapter 2). Instead, I aim to treat new Latino-Canadians as expert witnesses, reversing the Victorian anthropological assumption of an objective lens on the Other to seek a situated commentary on Canadian liberal-nationalism from liminal observers. The participants in my study are semi-willingly undergoing the initiation rituals of a mainstream society in which they are ‘marked’ as transitional outsiders or potential/partial insiders. In the process, these people are negotiating, appropriating and contesting meanings. The fact that tumours, prescription drug payments, housing repairs -- all critical material of the maintenance of life -- are called “ritual” here is not meant to abstract or diminish the former but rather to stress the life-or-death importance of
the latter. This chapter is not about how refugees (and migrants from conflict zones not considered refugees) need Canada, but about why Canadian nationalism and nationalists need them. Anthropologists build their claim to expertise on a blending of insider and outsider perspectives, a suspension of judgement and prejudice combined with an analytical, scientific reasoning. The navigation of identity required of newcomers makes them experts too, sometimes seeing facts that others miss, sometimes mis-perceiving local matters in a way that nevertheless reveals contradictions and cultural assumptions.

The Project: Dimensions and Limitations

During 2009 and 2010, I carried out fieldwork for eighteen months in Ottawa, Ontario, with an eye to investigating the relationship between immigration and healthcare policy in Canada from the point of view of new Canadians. I wanted to use this three-way entanglement of law, health-care, and immigrant communities to explore Canadian nationalism and its transforming subjectivities, as well as elicit “expert witness” narratives from the people navigating that entanglement. These interests called for a phenomenological or ethnographic perspective on migrant social adaptation: starting with some basic, relatively commonplace categories – feelings of belonging or alienation vis-à-vis Canada (as a post-migration home) -- and the relationship between those feelings and experiences
of sickness, care (or lack of care) and healing.

The field project was focused especially on Colombian migrants and refugee migrants. This choice of study community was made on the basis of Citizenship and Immigration Canada statistics from 2006 that showed a peak of refugee and humanitarian admissions from Colombian in 2004, when claims by Colombian migrants represented 14% of total claims in Canada (Citizenship and Immigration Canad 2009, Canadian Council for Refugees 2005), and the presence of about two thousand temporary residents originating from Colombia and living in Ottawa and Gatineau. My assumption was that by my fieldwork period in 2008, this population would have gone through the first, crisis-oriented stages of resettlement, and that many people who had been in Canada for three to five years would be able to spare time to speak about their settlement experiences, while having the perspective to reflect on their years immediately following migration.

Several sites were explored to recruit participants for the study. Chief among these were two of the major settlement service agencies in Ottawa, the New Canadians Centre (NCC), and the Ottawa Settlement Services for Newcomers (OSSN; see also chapter 1 on both). In both of these cases, I offered volunteer labour at the centre, interviewed key informants where possible, and negotiated for the ability
to contact clients with information regarding my study. In addition, I regularly
attended services at the largest Spanish-language Catholic congregation in
Ottawa, Sagrada Familia parish.

I anticipated that there would be a considerable trust barrier to overcome in order
to acquire interview data. The nature of the conflict in Colombia which generated
refugee migration to Canada, combined with a history of Latino-Canadian
activism that had sensitized the Canadian refugee system (to some degree) to the
need for asylum from these conflicts, meant that a broad variety of Colombians
resettled in Canada, including people who found themselves on different sides of
the conflict. Sometimes, as in the story of the Tim Horton's in chapter 3,
perpetrators and victims -- or victims of diametrically opposed crimes -- bump
into each other. As a result of experiences like these, relations among Colombians
in Canada are often characterized by silence.

My project was only partially successful in breaching this silence. My strategy
evolved several times over the course of eighteen months of fieldwork, as I
attempted to elicit participation in my study while respecting the limits of privacy
and time of my potential informants. One early strategy was to design a survey
instrument that would take up little time, be flexible in terms of when it could be
completed, and help to make potential interviewees aware of the project. The
survey was distributed with a postage-paid return envelope, and an optional
contact sheet for participants who were interested in being interviewed in addition
to, or instead of, completing the survey. Survey participation was solicited through
announcements, by myself and on my behalf, at Sunday services at Sagrada
Familia parish (which I attended), and by telephone (via a known intermediary,
without any personal information being revealed to the author) to the entire
Colombian-Canadian client base of the settlement counselling service at the NCC.
In the former case, mailing addresses were registered by hand and survey
packages mailed to those addresses; in the latter case, if the client agreed to
participate in the survey, their address was provided to the me and I mailed a
package. For those who had been phoned, a reminder phone-call was sent two
weeks after the initial consent.

Several people at Sagrada Familia expressed their enthusiasm for the project to
me, and one asked to take a registration form with him to recruit more
participants in Gatineau, since he knew people who would be interested who were
not in attendance. This form was not returned, however, and none of the surveys
sent to addresses collected at the parish were completed. Of the 80 clients
contacted via the NCC, 22 agreed to complete the survey, and 10 actually did so.
Of these, 5 indicated on the optional contact sheet that they were willing to be interviewed, but only one returned messages either by voice or email. The one individual who agreed to be interviewed, and who responded to follow-up, eventually changed their mind and declined.

After this experience, I adopted two alternative strategies to gain interviews that were more successful. First, I made efforts to contact “expert witness” informants for interviews, in this case settlement workers, social workers, and policy workers, who worked with and who were often also members of the Latino-Canadian community broadly, with Colombian origins or experience being a bonus. Those whom I interviewed, I asked for further recommendations, and thus acquired a “snowball” sample of 5 professional Latina-Canadian immigrants and some other professionals closely associated with these communities. Second, I “job shadowed” two different settlement workers at the NCC who worked with Colombian migrants. I was given a separate cubicle during the days when they were seeing clients, where I would do volunteer work editing letters and documents. When the settlement workers were finished an appointment with a client, they would briefly describe my research interests and ask if the client was interested in meeting with me. Upon introducing myself I would ask if they were

28 In fact, with the exception of a Roman Catholic priest, these informants were exclusively women.
interested in being interviewed; if they consented I would conduct a semi-structured interview. This strategy was somewhat more successful, resulting in 14 interviews. This success is partly attributable, I think, to the fact that visits to settlement agencies often result in a lot of "trapped" time, where one is not free to leave and complete other errands, but neither is one actively engaged in the activities being undertaken on one's behalf by the agency. To put it in other words, I suspect people were eager to converse with me because they were bored.

In retrospect, several factors contributed to the limitations of the present study. First was the slow language-acquisition of the fieldworker. I had taken three Spanish-language courses by the time of the interviews, but my time with the language was relatively short. My Spanish was good enough for everyday conversation but fell short of the nuance required to ask complex questions, especially when my interlocutor was not comfortable in English. Gender and age also played a role, as I was a younger man placing himself in a position where he was asking a sample of mostly middle-aged, mostly female informants about matters of health and well-being, a dynamic that could be predicted to produce considerable reticence.

“Immigrants have messier lives,” claimed Lucy, a Colombian-Canadian
psychologist and counsellor, meaning that from day to day, their schedules were constantly mutating and frequently possessed a tinge of crisis. “Be ready to be stood up,” said the leader of a volunteering orientation for those who wished to work with new Canadians. By this warning, she meant that volunteers could not expect that their new friends would be on time, or always show up at all. One factor governing the limitations of interview length and assent was the calculation of time and resources, that is to say, money. I would have liked to remunerate people for their time, and it was suggested that even a small amount would have gone a long way in encouraging participation. Sadly, remuneration of informants was not accepted as part of my proposed research budget, and I could not afford remuneration out of personal funds. In future work, I plan to make it a baseline requirement that people should be compensated, for ethical as well as practical reasons.

Lastly, there were objective rather than subjective difficulties. In general, the experience of wartime refugees with a breakdown in their sense of a social order, or community, contributes to a low level of social trust in post-resettlement refugee communities (Correa-Velez and Gifford 2007, McLellan and White 2005, Young 2001). By social trust, I am referring to a somewhat hard to circumscribe phenomenon. I suggest that social trust is imaginable as the energy that
overcomes the silence before a conversation or the space between one’s home and a public space. Where social trust is low, individuals perceive a higher risk or effort in reproducing the kind of “organic” bonds they can recognize and even theoretically value – neighbourhood, family, religious community, nation, and so forth. The danger in speaking of social trust is reification of these “organic” structures. However, to the extent that social trust deals with social-reproductive behaviours that are simultaneously attractive and repellent, valued and repressed, or attached to material systems of support which then go neglected, we are justified in suggesting that the social fictions are balanced on either side of the equation, and that comparison is possible.

It is not clear from the survey how many of the respondents came to Canada as refugee claimants. Respondents were instructed that they could check off as many boxes as they felt applied to them. However, landed immigrant status, which is the end process of a successful refugee claim, may be regarded as replacing a more stigmatized and unstable condition, cancelling out one’s identification as a refugee. The settlement worker through whom I gained access to survey participants confirmed that most of her clients were refugees or refugee claimants. However, it is also true that one person who did not claim refugee status when they came to Canada still said, in an interview, that they felt like a refugee in the
sense that they had left their home out of an urgent fear for life and property. In
general, it may be said that migration from a conflict zone blurs the line between
refugee and immigrant, or reconstructs it along the lines of class, since forced-
migrants with resources and professional education can qualify for less
stigmatized routes to what is nonetheless, subjectively, a taking of refuge. Nolin
refers to this blurring as a property of "hollow labels", whereby people are
assigned, or assign themselves, to categories that have more to do with the
internal politics of Canadian immigration policy than with their lived and
embodied experience (Nolin 2006: 85).

Results of the Survey

Of the ten people who completed the survey, all were Colombian. Eight of the ten
respondents were permanent residents of Canada, one was a government-assisted
refugee and one described themselves as an asylum seeker. All six that completed
the “gender” question on the survey identified themselves as female, with ages
ranging from 27 to 69. Most had been living in Canada for three to five years.
Only one respondent stated that they were still involved in legal proceedings
related to their immigration status, and all claimed they felt secure in their right to
remain in Canada; likewise, all respondents stated they were interested in
pursuing Canadian citizenship in the future.
Eight of the ten respondents completed the free-hand graphing exercise included on page 3 of the survey, in which the respondent was asked to draw a time-line representing their level of well-being (or lack thereof) continuously over the course of their life, with reference to a dotted line that marked their migration to Canada (see ill. 3). Three patterns were repeated: the most common single response was a V-shaped line \([V]\), with a minimum at or near the migration-line, implying a crisis that precipitated migration and a subsequent recovery. Equally common were two other patterns, either a continually increasing line from left to right (consistently increasing well-being over the life-course) \([CI]\), or the opposite, a line descending from left to right and signifying a continual decline in well-being, unremedied or aggravated by migration \([CD]\). Both of the respondents who recorded a CD response took the opportunity to comment on the page: one explained that he had moved to Canada for his family and wife’s sake, and that he felt depressed and isolated. The other stressed the lack of access to sports and recreation, particularly during the winter, as the reason they felt bored, restless and lonely. This exercise represented an attempt to stretch the limitations of a fixed-answer survey design, particularly one where the small sample size discourages quantitative analysis: as an experimental method of inquiring about well-being without the opportunity for a face-to-face conversation, the results are
only suggestive, but intriguing in their patterns.

Information returned by survey included the subject of reported chronic health problems (before and after migration), sources of health information and care, and attitude- and experience- measurement questions regarding the receipt of healthcare in Canada. One segment contained a self-reporting exercise on chronic symptoms associated with stress and trauma events (cf. Kroenke et al. 2002, Somasundaram and Sivayokan 1994, Ware and Kleinman 1992), sorted into before-migration and after-migration categories. The raw number of symptoms
reported did not show any impressive pattern: reported chronic pain, panic attacks, and nervios declined after migration to Canada, but headaches, depression and two responses which could be considered climate related (frequent cold/flus, and the write-in response “joint pain when cold”) increased. Of the six people who drew V or CI patterns in the free-drawing exercise, three reported an unambiguous improvement, one respondent reported feeling worse, and one felt the same; in addition, there is one case which could be considered an improvement or equivalent, depending on how one interprets the change from suffering panic attacks to suffering from frequent colds or flus. Of the four people who either drew a CD line, or left the exercise blank, three people reported feeling worse now than before they migrated, with one person reporting the same number of problems and none reporting an improvement.

Elsewhere respondents reported their preferred sources of health information, and some attitudes about health-care in Canada. Doctor’s offices and walk-in clinics represented the first choice for medical information for a majority of respondents, and six out of ten respondents reported consulting at least three separate sources of information. Only one person each reported using sources of health care they considered either complementary/alternative, and traditional. Emergency rooms were a popular response, but only as a last choice. The reported preferences of
respondents might be interpreted as being fairly mainstream for Canada, although they likely represent an ideal – not necessarily experiential – ordering for the respondents. Likewise the results of the attitude survey suggest a high degree of comfort with the Canadian form of biomedicine; only two of the respondents reported some nervousness when seeing the doctor, and nine of ten respondents agreed that patients ought to follow the doctor’s instructions. Paired with this latter finding, however, there was considerable disagreement as to whether a patient is “primarily responsible for his or her own health”. Alongside the willingness to grant authority to the health-care provider perhaps comes an expectation of expertise, which may be disappointed. Interestingly, while seven respondents at least partly agree (and four strongly agree) that they communicate well with their doctor, eight believe that language is at least partly a barrier for them in seeking quality care. Respondents were similarly divided on whether doctors in Canada are employees of the government (a theme that is definitely unpacked further in the interviews), and whether medical bills represent a difficulty for them.

In the last part of the survey, participants were asked about some of their experiences in Ottawa. There was broad agreement that Ottawa was a welcoming city for newcomers and that they were able to move through the city easily
Despite the three month public transit strike that had gripped the city in the previous winter of 2008. Opinion was more divided on whether it was easy to make friends in Ottawa, and half the respondents reported that most of the friends they had made were fellow immigrants. Lastly, the questions about political interests produced symmetrical results, with a small majority agreeing that they were interested both in Canadian politics and in the politics of their country of origin, and that compared to their former country of residence, people in Ottawa did not seem very interested in politics.

**Three Longer Stories and Several Shorter Ones from the Interviews**

Two major themes emerge from a close reading of interview transcripts, as well as from a combined analysis of the surveys and interviews. One is that, like health problems themselves, crises involving the navigation of the health-care system are not evenly distributed. Many people had not experienced any problems, or even had much contact with the health-care system at all, and reported good health. For others, one problem led to another. Secondly, the health-care system in Canada is the site of many conflicting rumours and theories that reflect some of the uncertainties of the community in general, and perhaps of migrants considered as a broader group.
In Chapter 2, a doctor at a Community Health Centre in Ottawa described himself as sometimes feeling like “an interloper” in the settlement process, where people’s daily concerns did not revolve so much around medical healthcare as around basic survival problems such as rent, food, language, employment and shelter; clearly, these concerns could all be subsumed under a “social determinants of health” model, but physicians and social/settlement workers tend to see their roles as distinct. Concern with healthcare is episodic for most people who are not chronically ill or disabled. Health care costs, from the provider’s perspective, are not distributed normally (with most people consuming health-care resources at or around the average per-capita value), but are rather heavily skewed downwards. Most people use far less than the per-capita healthcare expenditure reported by providers, and a small number of people with chronic or complicated health issues use far more (as Lam et al. 2010 show for the case of diabetes in Canada).

The evidence from my interviews is that consumption of resources in the Canadian system, in other words participation in it, appears to be correlated with suffering and uncertainty. The good news from my interview data is that most participants did not see their health coverage as being problematic; they never felt that their status as immigrants put them in any special health risks, or that they were treated unequally. Two interviewees made a point of commenting favourably
on the availability of interpretation services in Ottawa, to overcome language barriers between provider and patient (see transcript 11, 13). The bad news is that participants who expressed these views were generally the people who did not use the health-care system very often, and who had not had to use it during an emergency. Since the interviews were semi-structured, using an open-ended questionnaire, and since most of the interviews were spontaneous – fitted around existing schedules – they took as long as the interviewee wished to explore the various questions, and as long as they had available. The length of interviews followed the same kind of skewed distribution described for diabetes care costs above: either the migrant’s experience with Canadian health-care was occasional and satisfactory, in which case the health segment of the interview was over in minutes, or it was a nightmare, and people wanted to talk for as long as I would listen. Although I explained to collaborators that I was interested in meeting people from Colombia, they would introduce me to any Spanish-speaking clients and I did not decline any interviews. Wherever the quoted informant is not from Colombia their country of birth is noted.

*Story #1: The Pariah*

“I do have health problems. I am a pariah. Do you know what a pariah is?”
“No.”
“A person that does not have a country or flag.”
“Ok.”
“And nobody accepts them.” (Interview, July 15th, 2009).

Matthew is a middle-aged man living in Ottawa who left his native Cuba 29 years ago. He began speaking confidently, almost aggressively, as soon as we were introduced, and I did not need (or indeed, have the opportunity) to ask him any questions from my questionnaire to solicit his experiences. I settled for the occasional request for clarification as he laid out his case as a pariah.

Against the Castro regime, Matthew first migrated to the United States. Although he said that he had no flag or country, he admitted he had status in the United States, although he wouldn't specify the nature of the status. Probably he was accepted as a refugee there, although now that he has been in Canada for 13 years, it may be too late to go back to the U.S. Refugees from communist Cuba are treated relatively generously in the United States (cf. Horton 2004), but Matthew was unhappy there. Indeed, his feelings about Cuba are more complicated than simple opposition to the government:

I am against Fidel Castro but the health system in Cuba is excellent, it is the best in all Latin America. I do not know if you knew this. The best doctors of Latin America are in Cuba... The best education there is, is in Cuba. In Cuba you have to study otherwise you would go to prison. And in jail, you are obliged to study! [chuckles] The only bad thing about Cuba is the system that is communist. However, as for education and health go, it is number 1!.. In Cuba, there are the polyclinics... medical students with 1 or 2 years to finish their degrees do co-ops and help doctors. Your work here is voluntary, isn’t it
[referring to the author’s graduate research]? Why others cannot do the same? Why doctors cannot do the same?

Although Matthew would not go into details about why he had left the U.S. to come to Canada, I could imagine that he would not have fit in well with the heavily Republican Cuban ex-patriate community in places like Florida. Matthew had drifted north, first to New York. If he felt the Canadian system was “terrible, terrible,” for him the American health system had been a nightmare. He claims he saw an immigrant man hit by a car on the streets of Queens, but while the ambulance was racing to the scene, another witness to the accident suffered a heart attack. The paramedics first asked each victim if they had insurance, and upon finding that the man struck by the car had no insurance, they packed up the man with the heart attack and drove away, telling the first victim he would have to wait for the next ambulance. Similarly, Matthew asserted that triage in U.S. emergency rooms was conducted not according to the severity of the condition presented, but on the basis of whether the person could prove they had insurance or money to pay. “As I did not like the United States,” said Matthew, “I crossed the border into Canada and here in Canada I asked for refuge.”

At the NCC, our mutual contact, Consuela, was labouring to disentangle Matthew’s “very very very complicated” case, but after 13 years he has no permanent status in Canada. Most likely, since he is still in possession of “a
document in Immigration that is like the Health Card,” he – like many others – is legally resident in Canada through a sequence of ministerial permits to remain that must be reacquired every year. This permit is meant to serve as a stop-gap exception for someone who has initially been rejected by the mainline refugee determination system, but whose case appears to have some merit or is under review. In practice, I knew several clients at NCC who had been living for a decade or more under this stop-gap system.

Matthew had many health problems of a chronic nature, aggravated by physical labour and delayed or absent care. “I have kidney problems,” he reported, “I have gout, I have arthritis, I have asthma, high pressure, a hernia – here – I am an asthmatic person”. His frustration with the Canadian system arises from a complex intersection of immigration status, across-the-board resource shortfalls, and the interface between different bureaucracies. In order to receive disability support benefits, his marginal legal status in Canada must not be interrupted in the immigration bureaucracy; any gap between the expiry of one permit and the beginning of another is a grave risk, and results in an interruption of his health-care. In order to maintain his legal status, he needs to fill out forms for his social worker, but only a doctor can fill out the forms. Further, it apparently cannot be a doctor at a walk-in clinic or hospital: “It has to be the family doctor... and I live in
Orleans [Ottawa’s eastern, heavily French-speaking suburb]... in Orleans there is a
doctor for 4000 people!” Matthew is not alone in some aspects of his dilemma, for
Ontario has an ongoing shortage of general practitioners, for reasons that partly
have to do with the monetary draw of medical specialties outside family medicine.

If Matthew were not sick, he likely would not have any legal status in Canada.
The fact that his doctor must submit forms to Citizenship and Immigration Canada
suggests that Matthew's ministerial leave has been granted on health grounds. On
the other hand, if he were not sick he might be judged less of a drain on the public
purse and looked upon more favourably by the immigration authorities. If there
were more family doctors available, his forms would not go in late and his
benefits would not be interrupted. If treatment of his conditions was
uninterrupted, perhaps he would not be sick and could work more regularly – thus
fulfilling one of the market-oriented demands Canada places on prospective
citizens. If his legal condition were more stable he would not risk the constant
interruption or discontinuous availability of dietary and medical support. His case
is “very, very, very complicated”, as he explained to me.

As it is, Matthew waits, and he dwells on waiting. “I have been waiting more than
four weeks to see the doctor but they tell me I have to wait... I now have been
waiting for about one month... I am going to die and the appointment is going to arrive after I am dead... I have waited in the United States for eight or ten hours before even being seen by a doctor... next month, I have been here fourteen years!” If the clients of NCC, OSSN, and other agencies in Ottawa know about anything, it is waiting. Waiting is a constant, and they have a shared experience of waiting areas, rooms, lines, and long days without any confirmation of status. They wait for social workers, doctors, or immigration officers to appear from behind cubicle dividers. Matthew, the anti-communist who believes in strong public medicine and education, has seemingly been waiting his whole life for one of three different countries to make some sense to him. The anti-communist leftist feels like a pariah in the world of neoliberal capitalism and its enemies. Matthew does not seem comfortable wearing any of the available costumes or settling in any of the available realities. “I don’t understand,” he says to me, summing up one of the biggest contradictions in his place and time, “how come a country so developed as this one, with so many resources as there are here in Canada, can have such an old-fashioned health care [system]?”

*Story #2: The Brothers*

“The Ottawa hospital anaesthetized me without my consent, for seventy-two hours.”
“Why would they do that?”
“To find out if I’ve been using drugs.”
“How do you know this?”
“I went into the hospital and they told me I was being given a blood-test and a painkiller. I had a seventy-two hour blackout. Then, I was sent to the Royal Ottawa Hospital [a mental health inpatient facility] for thirty days of observation” (Interview, July 19th, 2009).

Sam and Max are two men from Colombia in their thirties or forties. Late in the interview, they challenge me to guess which one of them is older. Sam, I guess: he is the shorter of the two, and the lines of his craggy, dark brown face are deeper, his eyes half-lidded with fatigue.

“No,” says Sam, “my brother is eight years older than I am.”

For most of our interview, it’s Sam who does most of the talking. When did he come here? In 1992; for many years he worked in Canada and had good health, until 2005. He’s a permanent resident, and Max, who has been here even longer, is a Canadian citizen. “The health system is good,” says Sam as a prelude to a story which might be taken to indicate otherwise, “until you have to defend yourself.”

In 2005, Sam suffered torn tendons in a work-related injury. According to him, he had care through a family doctor, but his doctor refused to get involved with the legal case Sam had started to acquire redress for the injury. Specifically, his doctor stated that he would withdraw any support (presumably not including medical
care) if Sam insisted on blaming anyone for his injury. The same doctor once called the police to the office during an appointment with Sam, though Sam wouldn’t reveal why. “The doctors, lawyers and judges,” he said, “are all part of the same system.” There is no fixing the system, he says when I ask what he thinks should be done. “It is a monopoly, it is all part of the Crown.” What about using money to buy access to private doctors? “The system,” says Sam, “can buy them.” As Sam’s legal troubles went on, which seemed to incorporate charges both against him and levelled by him (though he was understandably private about the details), he increasingly came to believe that those who provided him with health-care felt more loyalty to law-enforcement than to their patients.

The black-out he described in the quote above was his most dramatic experience of this apparent confluence between the medical and criminal-justice systems. Today Sam's treatment continues but he feels harassed and surveilled; he openly admits to being addicted to drugs, and says that the addiction was a way of coping with the stress and pain that followed his injury. Again he stressed that health-care in Canada is very good, as long as the law is not involved. If legal issues arise, then all of a sudden “there is no way to defend yourself”. Because all officials take the word of other officials over yours, Sam explained, you will never get one part of the government to take another to task. “Even those who want to help
you,” he says, “face many limitations because they are part of the same system”. At the end of the interview, Sam laughed when I told him I would make sure I did not reveal his identity in my work. “I’m not afraid anymore,” he said.

Max, who had been silent for most of the interview, suddenly burst out angrily two-thirds of the way through our hour-long talk. “The government,” he said, “must check the doctors to make sure they don’t ‘sweep [under] the car[pet]’ [sic in English]; just making money and giving out the wrong medication.” He is still strong, and healthy; he hovers over his brother and myself with powerful arms folded, like a bodyguard. “Hey – guess which one of us is older?”

**Story #3: A Mother and Son**

“People come in after us. They’re seen before us. After a while, you start to wonder – [she rubs her arms, as if cold] am I being discriminated against? Is it because I have dark skin? *What is the system, here?* I wait, I wait, I wait, I wait...” (Interview, July 15, 2009).

Catherine’s son Peter is recovering now from a tumour in the brain that nearly killed him. It is fortunate for him that it was operable and appears to have been “benign”. This term seems like a peculiar one to apply to a lump of selfish tissue that tried to murder Peter. Here, though, benign means that the tumour was content to sit in place and put pressure on Peter’s brain, rather than sending seeds
of itself to take root in other parts of his body. What has less to do with fortune is the fact that Peter was rescued at what may well have been the last possible opportunity, and that other opportunities to rescue him were passed by.

Catherine was a nurse in Colombia, and like Matthew when she thinks of the Canadian healthcare system she feels a sense of puzzlement. She uses the Spanish word for “clean”, lindo, to describe Canada. To her it is a good country – but she claims no one would ever wait “three, four, five...” hours to be seen with an emergency back in Colombia.

Peter’s symptoms began in November of 2008. For two months, he was taken between a doctor working at a community health centre, and the emergency room of first one, then another hospital. His symptoms were ambiguous – strong recurring headaches and vomiting, which developed into pain in his legs, and then pain all through the left side of his body. The Community Health Centre doctor eventually seems to have been convinced that Peter needed an MRI scan, but did not forward the family to a specialist before his symptoms peaked in early January. Peter was rushed to the emergency room, where his mother’s oral report that the other doctor wanted to do a head scan did not translate into service. Diagnoses of gastritis, with accompanying prescriptions for antacids, continued.
Despite not having shown any diarrhea or constipation, Peter was given a stool test but no other treatment.

Peter and his mother live on the Québec side of the Ottawa river, and he is covered by the Québec, not the Ontario, provincial health-care service. In Ottawa, there is a well-known pediatric research hospital, the Children’s Hospital of Eastern Ontario, or CHEO. There is no specialty research hospital in the (much smaller) Québec-side municipality, and no one directed Catherine to CHEO despite months of steadily worsening symptoms and uncertain diagnoses. Like many Canadians, but like even more immigrant Canadians (Nabalamba and Millar 2007, Wang 2007, Caulford and Vali 2006, Talbot et al. 2001), Catherine lacked a family doctor, or what is called “continuity of care” in the public health community – the ability to be seen by the same physician over multiple health episodes, over multiple years of time.

Provincial borders are also somewhat mysterious for the Canadian-born when it comes to healthcare eligibility. My friend Hubert, an engineer born in Québec and living in Gatineau but working in Ottawa, was seeking a family doctor in Ottawa located closer to his work and thus easier to visit. Technically this arrangement was perfectly permissible; an Ottawa service-provider can be compensated by any
provincial health insurance scheme. But different insurers use different fee-for-service schedules, and Québec’s is known as being relatively parsimonious. For this reason, family doctors in Ontario, whose time for new patients is already a restricted commodity, informally prefer new Ontario Health Insurance Program [OHIP] patients over those holding Assurance Maladie [AM] cards from Québec. Professional pride or linguistic barriers to cross-provincial exchange between doctors (the professional associations for doctors in Canada are also separated by province) may play a role in inhibiting referrals for specialist treatment across the river.

In the week that followed Peter's last emergency room visit, there was still no word from the Community Health Centre regarding a specialist reference for an MRI scan. Peter had to be taken home from school due to incapacitating pain, and his mother was panicking. It was Consuela, the settlement worker at NCC, that encouraged a distraught Catherine to take Peter to CHEO. The same day, the doctors examining Peter at CHEO admitted him and ordered an MRI, which was performed the following morning. The scan discovered the growing brain tumour, and it was successfully removed the next day. Understandably, Catherine has no shortage of good things to say about CHEO; the people there, she said, treated them “like human beings, like a family,” helping them find on-site
accommodations while Peter was in hospital. As of July 2009, Catherine was lodging a formal complaint against the hospitals in Gatineau where her son was seen, alleging that they endangered his life through negligent standards of care. She pantomimed her impression of this standard of care for me; as the doctor, she peeked in the door with a bored expression, looked in my ear without saying anything, and then left again.

“What is the system here?” This is the question posed by Catherine, Sam, Matthew and others like them. Is it structured by race, language, culture? These factors do exist in Canada, but they are both more and less than simple bigotry, being entangled in the enforced scarcity of resources that affects all Canadian health-care organizations. For example, Spitzer’s ethnographic work with nurses in Toronto found that, under new disciplinary regimes that measured the working minutes of nurses to ensure efficiency, nurses were increasingly likely to avoid visible minority patients. These decisions were prompted by the assumption that visible racial markers correlated with cultural or linguistic barriers that would necessitate more time per patient, thus reflecting poorly on the nurse in her timesheets (Spitzer 2004). “Prejudice” here is an inaccurate word; it suggests that the hostility – to be blunt, the racist affect – that the nurses expressed was somehow primordial, that it existed before they set foot on the hospital floor.
Maybe for some people this is true, since all of us are affected by racist cultural structures.

But the racism that Spitzer documents is a particularly constructed racism and I believe it directs us to look beyond race, to the neoliberal economic measures affecting the health-care system. “Am I being discriminated against because I have dark skin?” It is possible. But life-threatening waiting times are something non-immigrants as well as new Canadians can recognize. “Cultural competency” programs that attempt to locate the unequal treatment of visible minority Canadians in prejudice or ignorance do not show promising results; that is, targeted anti-racist or anti-ethnocentric education doesn’t seem to be significantly amending unequal outcomes (Gregg and Saha 2006, Lee 2006, Hixon 2003, Peterson 2002, Kai et al. 2001). What if racialized inequity were real, but not an artifact of lingering bigotry amenable to the quick fix of a course on multicultural tolerance? What if this inequality was part of a cline in outcomes, produced by overarching structures of economic discipline that endanger all ill Canadians, though not equally? I don’t think there is any “what if” about it; the specific experience of the racialized citizen should be respected while not being reduced to simply a question of overcoming the individual racism of doctors, nurses, or other service providers. What happened to Peter did not happen because Gatineau
everyone remembers how long they’ve been in Canada, often to the day. On the wall of Carmen’s cubicle at CIC, there is a chart showing a generic timeline for the psychological adaptation of refugees after migration: six months of euphoria, followed by a sharp crash and a variable period of depression, then recovery and integration. The reason why the middle period is of variable length is because it corresponds with waiting – waiting for a bus, waiting for documents, waiting for decisions, waiting in one waiting room or another for employment help, legal advice, or health care. The length of the wait is variable because the processes are often opaque, particularly for newer speakers of English or French. This waiting is often done “alone in a crowd”. Just as nothing showcases the liberal Canadian ideal of human diversity like the waiting area of a settlement agency, nothing showcases the underlying and unresolved contradictions of this ideology. Unless they come with family or friends, the people waiting are isolated by their human specificity from the other waiters, and united by a supplicating position vis-à-vis the majority represented by the bureaucracy. The waiters are united but without solidarity because they hold no conversation amongst themselves; like riders on a commuter train the most they can expect is a glimpse of mutual recognition (Augé
2002). These waiting rooms are tense with silence. It is hard to speak. I am grateful when I am recognized by the service provider I have come to interview, plucked out of the crowd ahead of my turn, validated; I am ashamed to be grateful, but I know anyone would feel the same way.

Everyone tells me how horrible it is to wait, in Canada, for health care. It’s hard to say how much of my respondents' backwards-looking descriptions of Colombian and Peruvian health-care is nostalgia, and how much of the change in experience between here and there is due to a change in relative wealth and relative social privilege. But the change is there in their narratives. Jennifer, a young professional who came to Canada from Colombia as a non-refugee migrant, had a recurring eye infection flare up after she arrived; she spent 15 hours without seeing a doctor in a Gatineau emergency room. Jennifer finally received care at a Community Health Clinic [CHC] although the extreme pain and loss of vision in her eye certainly qualified as an emergency. It took six months after the CHC doctor gave her antibiotics before she was able to see a specialist for her eye condition, and four more months before she could begin an intensive procedure to prevent recurrence. “What did I learn from the experience?” says Jennifer. “Don’t go to the emergency room!”
For some people it seems like the only place to go. Frances, a Mexican woman living in Ottawa with her family, finally tried the ER after being given what she felt was ineffective treatment for a four-times recurring infection from a doctor at a walk-in clinic. She, too, gave up after waiting for hours in the ER; finally, she went back to Mexico for extended treatment. Lilian, from Argentina, is considering returning there for surgery to treat her endometriosis, which is getting worse as she waits months to see a specialist in Canada for tests. In fact, the same tests had already been performed in Argentina, but it seems that the results cannot be transferred or are not considered acceptable here. Lilian also tells me of her friend, a labourer who suffered from an ingrown toenail and who had to wait months for surgery to treat it; he could not walk, so how could he work? And who more than the newcomer needs to prove their capacity for work to feel accepted?

Sarah Torres, a University of Ottawa researcher on – and from – the Colombian community, reports that many Colombian landed immigrants consider returning home for medical treatments due to language barriers (personal communication). According to Torres, the refugee community from Colombia is even more poorly studied than the non-refugee community – but it would certainly be less of an option for refugees who feel they cannot receive adequate health care in Canada to return to Colombia.

---

29 Not a pseudonym
“What I don’t like,” says Elise from Colombia, about the Canadian healthcare system, “is the long waiting. But once you are seen, it is good.” But “if you do not arrive covered in blood or with a hanging limb,” says Marcine, also from Colombia, who has never had to go to a doctor in Canada but who has heard about the system from friends, “there is no urgency!”

Triage occupies the imaginations of people while they wait, in the hospital and possibly at the New Canadians Centre as well. What is the system here? asked Catherine, and part of her detailed letter of complaint includes untranslated medical codes, figures she was given without explanation when she asked the duty nurse when her son would be seen. “Your son is a 4U.” 4U? 4U. On his second emergency visit she was told that Peter was “3U” which presumably was an improvement in his chances of being seen, if not in his condition.

”Sometimes I was not treated very well... not usually, but some people thought that I couldn’t speak English, or that I am not very smart or something,” said Janis, another mother from Colombia – echoing Catherine’s concern that race may be an organizing factor in who receives care.

Frances and her husband Jim couldn’t discern any system of triage operating at
Jim: The Public Hospitals [in Mexico] work the same way as the ones here, however, in Mexico if they see you are really sick, they will see you immediately. Here, if they see you are very sick, bleeding or whatever... well, when I first arrived into Canada, within the first week I went to the hospital because I had diarrhea and vomiting, and I even fainted... I was left 3 hours on a stretcher and nobody saw me... There was a little girl beside me then; she was crying and crying and crying, a little 8 year old girl... why didn’t they take care of her?

Frances: In my country... well, health care is divided into two: emergencies, that is when you have heart problems, acute respiratory problems, when you break a foot, or when you suffer a bone fracture, when you cut yourself, when you arrive with a stab wound, bullet, or due to a fight, correct? So then, you enter first... it is like a “triage”?

Andrew: Yes, triage. We use the same word in English.

Frances: They examine you and tell you “OK, you can go in...” [or] “right now your priority can wait but I can give priority to someone else that has a broken leg... so they take care of people according to the degree of urgency that the individual has. So maybe, because I have a stomach ache, they may see first somebody else that is wounded or has a fracture, rather than me...

Jim: But here, they do not do that. (Interview, September 2, 2009).

Many people perceived priority for service to be related to money. Jim implied that health coverage is only offered to those who have jobs: “Here, if you do not work and if you get sick... you do not receive money because you are not working”. Similarly, Mary from Peru said: “If you do not have a job, unfortunately you have to pay and you have to pay a lot.” Matthew, typically, was very blunt: “Here, if you don’t have money, you are screwed. Here, the money
factor is important, because with money, there is immediately a doctor.” Often the people who reported the importance of money in determining care were either themselves in need of physiotherapy (which is poorly covered by OHIP) or knew others who were. OHIP does not cover dentistry, which is often where the discrepancies between native Canadians and subjects of forced migration are most glaring (Leake 2006, Redwood-Campbell et al. 2008, Fowler et al. 2005, Fowler 1998). Emergency dentistry is covered under the Interim Federal Health Program [IFHP], which insures government-assisted refugees (not refugee claimants) before they are enrolled in provincial health schemes, but physicians have observed that special dental needs extend well beyond the period of IFHP coverage (which is lost upon enrollment in OHIP or its equivalent) (Fowler et al. 2005). On the other hand, Frances and Lilian expressed regret that they could not purchase faster service in Canada as they could back home. Likely they would agree with the right-of-centre argument in Canada that sees more private health-care as relieving pressure on the public system and thus reducing wait times (cf. Esmail 2011). “The government pays doctors per person they see,” said Oscar, an immigrant from Colombia; “so doctors here have too many patients, they will only see you for ten minutes.”

Waiting is a time between activities or interactions; it is a negative action or the
negation of action, passivity. Most of all, waiting is boring, and the mind searches for something to fill in the gaps; in the doctor’s office we read magazines we would probably never be able to tolerate otherwise. The bar for amusement lowers steadily. If we still can’t bring ourselves to be amused by celebrity gossip or dieting news, or if even these small mercies are not provided, introspection is the last refuge of those exerting their patience. Waiting is the most mindless form of discipline in these bureaucracies, defined not by a positive program of reforming the waiter but by the chronic shortage of resources; waiting is an imposed abulia, the loss of will or the ability to make decisions, also a word that to me suggests the French word bulle, a bubble, expanding against the active life-force on either side of it, subtly distorting things with its emptiness. Laurie Bell, applying psychoanalytic theory to work with refugees, emphasizes the importance of regenerativity to adult life – the desire to prosper, lay foundations, found ventures, raise children (2008). Recovering this regenerativity after the trauma of forced migration is the greatest priority she sets for her patients. They have so much waiting to do, though, and waiting is vegetative, not regenerative. In the case of these doctor’s offices and emergency rooms (where the introspection or abulia of waiting is often combined with pain) introspection takes on the character of social analysis: wait, wait, wait, wait engenders why? why? why? why? Race, money, and medical logics are called into play in the stories recounted above as people
attempt to put their waiting into a social narrative that incorporates both learning about the nature of Canada, and their place within it as newcomers and potential citizens. The theories of waiting formulated by my respondents are theories of (in)justice. I wonder if any of the people I left behind in these waiting rooms, the ones who got there before me but who had no set appointment, no detached purpose like research, felt a pulse of warming rage as I followed the service provider out of the waiting room. How many “whys” were punctuated with a tired “oh, fuck off.”

**Vocation, Money, and the State: Locating Doctors**

Now-classic studies in medical anthropology, such as Jordan and David-Floyd’s *Birth in Four Cultures* (1993), have long gone beyond a “cross-cultural” comparison of biomedicine to other traditions of medical practice, to analyse the (multi)cultural nature of biomedical practice itself. These studies recognize that cultures of biomedicine proliferate in different areas were its common tropes hold discursive authority. Thus we can identify the symbolic potency of doctors – expert workers who have undergone rigorous biomedical education – as being a uniting feature of most “cultures of biomedicine”, while also recognizing that doctors play different social roles in different places.
As the informants whose stories form the backbone of this chapter attempted to figure out “the system” of health-care in Ottawa, they were equipped with knowledge and experience of other systems that share many of the same features: doctors, nurses, hospitals, clinics, injections, pills, plasters, prescriptions, insurance schemes, surgery, autopsy, organ donation, and a scientifically-validated theory of the body as a complex machine made of interlocking and interdependent components. Those who, like Matthew, suffered from chronic health problems, used easily translated terms for them and understood them in a way that would be readily accessible to health-care providers in their current city of residence: asthma, hernia, infection, headache, endometriosis. None of those who shared their stories with me were affected by the extremes of cross-cultural medical miscommunication represented so vividly in case studies such as Fadiman’s *The Spirit Catches You and You Fall Down*, concerning illness among Hmong refugees living in the United States (1998).

One of the common themes of the interviews was uncertainty about the location of doctors in Canada along a public/private axis, or what might otherwise be described as a “craft guild ethos” (Jefferson-Lenskyj 2009) as opposed to a market ethic, or state agency. Are Canadian doctors servants primarily of the state, of the public, or of the market? Tied in with this uncertainty is the sympathetic
frustration that immigrants-as-patients feel with immigrants-as-doctors, the latter of whom are unable to, or have great difficulty in, getting their medical credentials recognized and therefore in practicing medicine in Canada. Removal of these barriers to the recognition of credentials was the most common response offered to any question I asked about how the system might be improved.

Ambiguous understandings about the public/private role of doctors in Canada are an accurate reflection of a real liminality created by the Canadian system of single-payer insurance reimbursement for services delivered by privately-owned entities (doctor's offices), as well as a mixture of public and private hospitals operating (theoretically) on the same centralized insurance scheme. When participants had experienced negative interactions with doctors or had heard about such interactions from friends, this ambiguity was put forward as a possible explanation for the failure of compassion, for what was perceived as the inattentiveness and callousness of doctors. The mainstream Canadian discourse on the health-care system focuses on a model of dualistic opposition and (possible) synthesis between state and market forces. Either the health-care system ought to be public, or it ought to be private, or it ought to be some “balance” between the two. Even the more creative critiques of current thinking in Canadian health-care policy, like the work presented by Wranik which examines choices made by
various health-care systems across North America, Europe and Australia/New Zealand, tend to break each individual aspect of the system into binary on/off categories (2010). I analyze the responses from surveys and interviews through a different, tri-cornered model. The responses to my interviews and survey seem to demand such a model – we need two axes, or at least more than one constitutive tension. In one corner, doctors are seen as extensions of the state; in another, they are seen as market actors attempting to maximize value for their services; in a third, doctors are seen as vocational actors, driven by if not sentimental compassion then by what Jefferson-Lenskyj calls a “craft-guild ethos”\textsuperscript{30}, the impulse to excellence in care as a matter of professional pride.

In the survey questions measuring attitudes about health-care in Canada, the prompt “In Canada, doctors are employees of the government” caused widespread disagreement. Perhaps some of those respondents had had experiences like Matthew, Sam, or Salah – another woman from Colombia living in Ottawa with

\textsuperscript{30} Jefferson-Lenskyj (2009) uses this term while exploring the work practices of doctors in an Australian state-run clinic in the Torres Strait. Torres Strait Islanders, as subjects of the Australian state, have a right to health-care and the clinic serves to anchor these rights-claims in the ‘remote’ (from the centre of state power) region. However, people across the Torres Strait act not only in response to state subjecthood but also to pre-colonial laws that determine ritual duties and rights of travel. Australia permits Papuan citizens to cross into the Torres Strait islands for “ritual purposes”, but they have no right to access Australian public services. Nevertheless, the clinic is the closest medical resource for some Papuan communities, as well as Papuan citizens living semi-permanently without state-status on the Torres Strait. Therefore non-Australian subjects will arrive at the free clinic hoping for care, sometimes emergency care. Jefferson-Lenskyj invokes the notion of a “craft-guild ethos” to help explain the contestation and negotiation (and accommodation) of state policies by doctors while making decisions about care in this scenario.
her mother – where encounters with doctors ended up entangling bodily distress with immigration or criminal authorities. Matthew was dependent upon the certification of a doctor for the continuation not only of social payments but possibly of his legal right to remain in Canada as well. He placed great emphasis in his account on the necessity to have a “family doctor” relationship, to be on the rolls of a particular doctor who can claim “this is my patient”. The family doctor can thus be a patron mediating state power (and largesse), and by virtue of their current scarcity family doctors become *de facto* gatekeepers to that form of state-subject legitimation. Salah’s mother, who came to join her daughter in Canada after the latter had immigrated, faces a different kind of dilemma: she like Matthew has chronic medical problems, and she, too, holds a temporary (possibly expired) visa. Family class immigrants, however, must still apply for permanent residency after they settle in Canada, and one of the conditions of successful application is the ability to show lack of dependence on social payments – including disability payments. Salah’s mother must choose between the disability support and established legal status as a Canadian; her doctor’s opinion of her medical needs conflicts with her politico-legal aspirations, or rather the conditions imposed on her by the immigration bureaucracy. Sam was the most explicit in identifying this entanglement: “The doctors, lawyers and judges, they are all part of the same system.” He located his suffering in a nexus of legal and medical
authorities, where doctors are gatekeepers not only to physiological or bureaucratic relief, but also to a more dramatic and fundamental sort of justice, fair treatment before the apparatus of criminal law. When asked if private doctors would be the solution to the problem of doctors acting on behalf of the state, Sam dismissed the public-private dichotomy: “The system can buy them”. Money and markets, from Sam’s point of view, are orthogonal to the question of who doctors work for.

Lilian from Argentina, as noted above, was considering going home to Argentina to consult a specialist rather than wait to be referred to one in Canada. Her doctor was also acting as a gatekeeper, and she identified the shortage of doctors in Canada as a bottleneck through which those who required specialized care are squeezed. This perception leads into consideration of the second constitutive tension, that between market and public-regulatory models of doctor-patient relations. Lilian, along with Frances and Jim, miss being able to pay for access to services once they know what they need, and are grateful for the “transnational” ability to negotiate different state systems to try to secure their own good health. Lilian emphasizes that a “semi-private” system can remain affordable with government supports. Her point of view is similar to the argument that user fees in the public system, by discouraging frivolous use of services, will reduce pressure
and thus waiting times. Oscar (interview #22), who suffers from chronic back pain, agrees that overworked doctors are the problem – “they have too many patients; it is only for business” -- but rebuts the idea that more commercialized practices will solve the problem. In his opinion, it is the drive to make the most money that encourages poor standards of care in the first place: “The government pays them for each patient, so you are only seen for ten minutes at a time”. Mary and Matthew, originally from Peru and Cuba respectively, contrast the broad accessibility and restricted resources of the public health-care systems in their old countries of residence, with the apparent abundance of wealth in Canada and wonder why the public system here is so hard to access:

I think [Canada] are better organized, but if you do not have a job, unfortunately you have to pay and you have to pay a lot... So, I believe that, even though in Peru you can get free health care for all, it is difficult because it’s restricted – but you could get it. Here, you can get it at any time but you have to pay a lot. (Mary, interview #15)

Here, if you do not have money, you are screwed; here, the money factor is important... I do not understand: how come a country so developed as this one, with so many resources as there are here in Canada, can have such an old-fashioned health care [system]? (Matthew, interview #11)

Lastly, doctors are a flashpoint for the frustrations of new Canadians regarding prospects for professional employment, and feelings of dislocation (what is sometimes called “culture shock”). I consistently asked interview participants what should be done to improve the health-care system in Canada. Many did not
feel comfortable making suggestions. “It was only after I got my citizenship,” said one interviewee, speaking on a different topic, “that I felt I had the right to complain”. Among those that did offer responses, the most popular single solution proposed was to expedite the recognition of medical qualifications obtained abroad, that is to say, to allow immigrant physicians to practice medicine with fewer barriers, or faster assistance at overcoming those barriers.

Jim: If I had the opportunity [to change the system], I would accept the people that obtained their degrees from elsewhere, because they need doctors, obviously.

... Frances: In other words, [Canada] needs doctors and a lot of people are arriving every day and you do not have the capacity to help all these new people that are arriving! (Interview #12).

As far as I know, [the problem] is because they have some shortages of nurses and doctors, so, they could make it easier for immigrants to get qualified for those positions – I think that would be very helpful. (Janis, interview #17).

It should be easier for immigrant doctors to work; there aren’t enough doctors here. (Brianna, interview #22).

Although the participants quoted above structured their argument in quantitative terms (that is, they asserted that the solution was more doctors and that immigrants could help fill this gap), for others the same immigrant/native split, or their sense of dislocation, is employed to critique the quality of care available, and to describe the qualities of care that they would like to receive. Lilian gave a detached view of her position when critiquing Canadian health-care:
Andrew: Have you ever felt that being an immigrant has been a danger to your health?

Lilian: Yeah – but I think it's because the system is new [for me]. I think that if in my country we have the same system, [because] it's the same, you don't see the difference. But when you have been living all your life in one system, and you have your doctors, and then you go to a new system... I think that it's logical that you will feel that way.

Janis was more awkward about expressing her feelings:

Andrew: Do you communicate well with [your doctor]? Like, does she--
Janis: Unfortunately, I don't, like, she is from another culture, she is from India, and I found that she was kind of, I don't know, like, everything is quick. I don't know.

These statements recall how Barbara, the anthropologist, described the link between language and healing and its relation to the anxiety and ambivalence that many new Canadians feel towards doctors. “Your soul can only speak one language,” she told me, suggesting that wherever possible, Latino-Canadians in Ottawa would seek out Spanish-speaking primary caregivers, and when that was impossible, some of them accessed “grey market” practitioners – immigrant physicians or dentists who had not been re-accredited in Canada but who provided informal medical services to their communities. In Gatineau, she claimed, there were even dentists who practiced out of their homes, providing a linguistically-familiar care environment to fellow transnationals at a lower cost. Although Barbara said she would try to arrange an introduction for me to one of these
practitioners, we both understood that this would likely be very difficult and it never transpired before I completed my research. I am left trusting the veracity of her story, but also view these alleged grey-market practitioners as part of the landscape of rumour and negotiated understandings of healing in Canada that my interviewees inhabit. Other informal healers mentioned by Barbara as being important to the Colombian community included the secretary at the Catholic parish I included in my fieldwork; “She has no degree,” said Barbara, “she is just wonderful.”

It's no surprise to rediscover the importance of feeling understood to the process of physical and mental recovery we term 'healing' (Waxler-Morisson and Anderson 2005, Fadiman 1997, Kleinman 1988, Parsons 1975). However, understanding can be a limited resource, in the form of interpreter-hours, timesheets and quotas for doctors and nurses, and the “ethnic lens” which is both informed by, and reconstitutes, intersubjective solidarity along the lines of spoken language and nation-state of birth (Chernilo 2006, Spitzer 2004, Horton 2004, Wimmer and Glick Schiller 2002; see also chapter 2). The experience of migrants expecting to permanently settle in a country other than that of their birth combines the stresses and traumas of unhappy histories (as well as the transition itself, implying changes of climate, altitude, time-rhythm, and so forth) with the
negotiation of mutual comprehension with the new society of residence. In the concluding section of this chapter I briefly review the migration history particular to the participants in this study, and attempt to localize their stories in a particular mode of subjectivity, and thus a certain thematic reading.

“Moving North, Looking South”: Memory, Rumour, and Latina/o Immigration to Canada

In the classic theory of migration there are two sets of factors that govern individual decisions to pick up and move: “push” factors such as poor conditions at home, and “pull” factors such as perceived opportunities abroad (cf. Portes and Borocz 1989 for an overview; see Kline 2003 for a more contemporary use of the theory in a health-care related study). It is fairly trivial to point out that these factors must be entangled, since the conditions and opportunities of life are only in a few cases so intolerable that any destination seems preferable to home, and since the promise of a better life in a new home is predicated upon a relative difference between the old and the new. This entanglement is particularly thick in the case of migration from Central and Andean America to the United States and Canada. The first sizeable wave of Latin migration to Canada occurred after the military coup against the government of Chile in 1973, an act of political violence directly aided by the United States for economic and ideological reasons (Mata
As discussed in the Introduction, it was the Chilean-Canadian community formed in the early 1970s that laid many of the political foundations of a Canadian refugee policy that went beyond anticommunist humanitarianism to a more ideologically-neutral concern with asylum for victims of war, torture and political oppression (Anderson 2003, Corlett 2001, Etcheverry 1995, Abella 1993, Mata 1985; for the related U.S. Case see Dorfman 1999, from whose book this section is titled). Throughout the 1980s, as North American involvement continued in the “Dirty Wars” of Central America, the Chilean immigrants were followed by newcomers from El Salvador, Guatemala, and Honduras (ibid). When the conflicts ended or lowered in intensity, the drug crops and paramilitary fighters that had fuelled them transitioned to various forms of organized crime, preying on civil societies rendered fragile by war damages, the loss of authenticity in government authority, and levels of social trust drastically lowered by ideologically-motivated massacres and other forms of intracommunal violence\(^3\).

\(^3\) Anyone familiar with this history will immediately recognize how flat this accounting is, omitting the specificity of the violence against groups such as indigenous people, trade unions, and others and presenting a generalized sense of the disorder and oppression where there were, in fact, sharp distinctions and imbalances in suffering. The intent here is simply to provide a greatly foreshortened timeline of the establishment of Latina/o people in Canada, and not to comprehensively analyse the Cold War conflicts in Latin America.
The civil war in Colombia is one of the oldest in the world, and its form and intensity shifted to some degree along with the currents of ideology and economics surrounding the Andean country, positioned like a pivot between South and Central America. Colombia, too, suffered a massive spike of violence in the 1950s, memorialized simply as la Violencia and remembered as a near-total breakdown of civil trust and order, marked by brutality so elaborate as to approach art, or perhaps anti-art; Taussig (2004) describes

A Colombian artist... Juan Manuel Echavarria... who creates images inspired by the corte de florero, or flowerpot cut. This was the name of a mutilation in the early 1950s in Tolima, Colombia: cutting off a person's head and stuffing the thorax with their dismembered limbs so as to resemble a flower in a pot. In bleached black-and-white photographs, Echavarria presents his “flowers” too. They are made of human ribs, femurs, the pelvis, and vertebrae. Art and terror emerge from similar roots... quoting the terror so as to defend us from it. (278-9)

Yet this period did not provoke significant migration to Canada; both then and today, most displaced people in Colombia either move internally, or across the border into Guatemala, or choose to resettle in the United States (Riaño-Alcalá 2008, Sanford 2004).

Colombian migrants to Canada represent a diverse array of backgrounds. Despite instability and violence, Colombia has long had a relatively strong economy that produced professionally-educated migrants with similar ambitions to the older
Chilean expatriate community. These migrants are persons who may immigrate as refugees but who would also tend to score highly on Canada's class- and language-sensitive system of grading potential economic migrants. In addition, the Colombian migrant community in Canada includes people less likely to do well on this points system, whose profile is closer to that of the Central American refugee communities who came in the 1980s and who became entangled in the basic business of survival upon arrival. Both groups have generally occupied lower socioeconomic positions and flourished more slowly if at all (Armony et al. 2004, Cisneros 2003, Prilleltensky 1993, Neuwirth 1989, Mata 1985). The complex nature of the long-term conflict in Colombia unsurprisingly produces starkly differing interpretations among the plurality of people displaced by it:

These memories, in the case of Colombia’s forced migrants, are not attached to a unified national narrative but rather to dispersed, fragmented, and contested narratives of the past and to the complexities of a conflict with a plurality of agents, causes, local histories and alliances (Riaño-Alcalá 2008)

“We can only talk to each other, if there's a party.” Consuela the Colombian settlement worker said of her (non)-community, as noted earlier in this chapter. Interestingly, this was a view confirmed by the Colombian Consul at the embassy in Ottawa, who granted me two interviews. Her job, as she saw it, was explicitly one of anti-politics; Colombians were not, and could not, be united by race or religion or by allegiance to a national government. The Consul made a point of
emphasizing that she considered herself an employee of the Colombian people and not any particular regime, such as the Uribe government. Nevertheless I was told by an informant that my contact with the Consul may have permanently tainted me in the eyes of politically-active Colombian migrants in the region who would not speak to anyone associated with the government. What was left in the category of Colombian nationalism, from the Consul's perspective, was a kind of disembodied cultural forcefulness in the form of social events. Both Riaño-Alcalá and Taussig would likely locate this ghostly nationalism in the collective shock of deeply inscribed social relations of terror, through which multiple armed actors “communicate with society and regulate everyday life” (Riaño-Alcalá 2008: 1).

In studies with migrants who may have had experiences of violence in their life history, it is recommend to use a series of interviews with early contacts avoiding potentially-retraumatizing subjects and establishing trust (Dr. Olive Wahoush, personal communication). Unfortunately almost all contacts in this study were limited to a single interview; therefore the survey instrument and interview schedule avoid directly broaching the subject of violence, instead focusing on proxy questions involving family unification, and health status. It is therefore impossible to assume anything about the memories of any particular individual who participated. But it is necessary to put the body of data presented here in the context of a “collective” experience of violence. This attempt is
complicated by the fact that the collective nature of such an experience is very much called into question by the people who would be included in such a category; this is a “collective” that is fractured by mutually unrecognizable perspectives on a multipolar conflict. Taussig comments in *My Cocaine Museum* about the fictional nature of the state (2004). The artificiality of the state, he argues, is universal but particularly present in zones affected by the multidirectional terror practiced by armed groups in Colombia (2004). Following from the “soft nationalist lens” discussed in Chapter 2, we could see new Canadians whose histories incorporate experiences – near or distant – of violence as being connected to one another by a conversation. But in the Colombian case, the conversation is filled with silence and much of the speaking is done “at a party”, in an anti-political context. Latina/o-Canadian refugees thus potentially experience layers of liminality – as immigrants to a new nation/state conversation and as participants in fractured transnational conversations.

The stories that emerge from my survey and interviews convey an active commentary on Canadian health-care, including strong critique where the participant felt it was appropriate. Barbara's advice to new Canadians that “regardless of status, you have a stake, responsibility and rights” seems likely to find agreement here. Participants spoke both as the recipients of social services with a “consumer” ethic, and as civic experts with experience in more than one
bureaucratic state system, offering comparative wisdom. Their stories are entangled with the correlation between legal status, as well as indicators of mainstream “belonging” such as gainful employment, and access to good quality care. However, what emerges from carefully listening to them is that this correlation is not straightforward; status and integration do not constitute concentric, rationally-comprehensible and impermeable barriers to various levels of health-care equity. A better image might be that of a circular maze, with gaps here and there in rotating concentric rings. Navigating this maze demands more and more nimbleness the further out one is from the centre. This distance renders more urgent the adaptive quality of self-narration, and the narrative interpretation of bureaucratic experiences. These stories can approach a kind of Kafka-esque surrealism as the qualities of alienation and uncertainty become more developed. How does one interpret being told that one's status is “3U” without any further explanation? What about Sam's assertion that he was sedated without his consent and remanded to a mental health inpatient institution thereafter? What do we make of Matthew's story of the ambulance drivers in Jamaica, New York, using insurance status as a form of emergency triage? Something about these stories is connected to the feeling one gets when hearing the tale about the kidnappers in line at Tim Hortons, or when contemplating the image of the underground dentists, plying their trade like benign guerillas in the basements of Gatineau.
Likewise, how I feel when I hear the rumours about real guerillas, using the Québec welfare system to fund their networks of leftist terror.

There is no contradiction between an appreciation of the surreal qualities of a narrative and a serious appraisal of its material realities. The above comments should not be taken as a statement of disbelief. Indeed it seems like the extremes of reality clarify and colour the symbolic faculty. In Riaño-Alcalá’s study of fear among Colombian refugees, bridges become floating or symbolic signifiers of death and terror because of their real use in the Colombian conflict to trap and murder targets of “social cleansing”. (2008). Embracing critique that verges on the surreal thus represents a way out of the narrative of immigrant victimhood towards incorporating stories like those described here as part of public politics and commentary on social service policy as a whole.
I knew a guy, he was really regretting moving here. He had professional qualifications and he was working in a call centre — he thought Canada was pretty b.s. —

He saw a doctor for the head pain and was given an MRI. It was a brain tumour, and he was sent to hospital for immediate surgery.

Fortunately, the tumour was benign and his prognosis favourable.
He took six weeks of rehab, he had to relearn basic skills — at this time he was very depressed, distressed over how he was going to pay the medical bill. His wife worked as a nanny, and they had just bought a house.

He didn't really believe my reassurances until he left the hospital and didn't receive any bill.

He is still very critical of the job issue. But it was a big mental shift.

Sometimes it's that illness, and connection to care, that allows people to discover that Canada offers things not available elsewhere.

In his opinion, in the US he would have died.
Conclusion: Landscapes of Memory

Conclusions from the Fieldwork

Language ideologies are inescapably implicated in the temporality inherent in social life. On the one hand, they are the complex product of the historical contexts in which they arise, on the other hand they themselves contribute to the temporal structuring of social worlds by establishing relationships between linguistic forms, communicative practices, and sociocultural valuations. (Eisenlohr 2004: 81.)

In the first chapter, I addressed the legal framework of refugee and immigration policy that overshadowed the individual experiences of my informants. Using documentary and media sources, I focused on the Immigrant and Refugee Protection Act of 2001, the political scenarios leading to its passage, and some of its after-effects and post-passage accommodations. Central to my interpretation of the act is the language of the (il)legality of human lives, as well as the search for a defining essence of Canadian nationalism (“Canadianess”). The bill was positioned in opposition to Uncanadianess, and simultaneously critiqued as being Uncanadian; the relevance of refugee and migrant identities to the identity of the nation-state itself was both critical and unsettled. I suggested that the generic figure of the refugee was established in law as a paradoxical hero-figure, not simply a threat or piece of refuse, but a dangerously liminal potential citizen whose threat and promise are derived from a contradiction: their humanity is constructed through a liberal's empathy with their passive, undeserved suffering,
and yet their citizenship is contingent upon their active engagement with pre-existing forms of Canadian market citizenship. In other words, Canadian liberality towards and empathy for refugees is justification for nationalist pride; yet it is insufficient for refugees to suffer to assure their belonging in the nation. They must simultaneously be seen to suffer, but also to contribute, in the manner of the healthy and hale, to the upholding of “common” (axiomatic and dehistoricized) nationalist values and economic prosperity.

In the second chapter of the thesis I explored the survival of the welfare state under neoliberal governance in Canada, using the case study of Ottawa-area settlement agencies and other social-service bodies involved with the needs of new Canadians. I found that there was no straightforward eradication of social welfarism evident, but rather that public capital was to a greater or lesser degree being replaced or subsidized with social capital, in the form of the exaltation of a new civic “virtue”. This virtue-ethic recruited labour from the populations targeted by public health and social-service interventions, and encouraged multi-agency partnerships that blur welfare, health-promotion, and police work. At the extreme, the new model of cooperation and community engagement in social services leads to a “buzzword breakdown” in which programs such as No Community Left Behind attempt to be all things to all people, perhaps desperate.
for the recruitment and retention of necessary funding. Elsewhere, inter-agency 
competition prevails, with the Ottawa Settlement Services Network (OSSN) being 
a prime example of market-optimism as a strategy for recruiting community, 
government, and private investment in welfare schemes.

In the third chapter, I examined the structuring effect of the Ontario-Québec 
border on the Colombian diaspora community in Ottawa-Gatineau. The urban 
geography of the region is especially marked by this “soft” border with its 
connotations of Canadian regional politics and with the relationship between 
languages and nationalisms – including “civic nationalisms” that go beyond 
primordial identity claims and embrace styles of governance and sub-schools of 
liberal modernist values. While coming to Canada from a common source country 
and sharing a first language, Colombians living in the region are to varying 
degrees separated by the economic and social effects of this soft internal border, 
such that one could speak of English-Colombians and French-Colombians, rather 
Here, the question of language and nation is intertwined with the centrality of 
language to memory, as implied by the Eisenlohr quote at the head of this 
concluding chapter. People's theories about the division in the community linked 
Canadian politics and socioeconomic categories with experiences of economics
and identity in Colombia, using transtemporal vocabularies to accommodate and navigate the present.

The three first chapters serve in many ways as background material for the analysis of the fourth, which contains a presentation of survey and interview data from informants – mostly refugees and mostly Colombians. The empirical evidence here is at once the most rigorous and the most difficult, and the two factors are related; these stories are chaotic, resisting categorization and representative of sometimes-fragmented recollections of complex life experiences. In one sense they constitute an anti-thesis, for they disprove many of my initial working theories about oppositional or conflictual attitudes about health services among migrants in transitional states of belonging (for example, between illegality and citizenship). In short, people did not regard health-care bureaucracy, surveillance and intervention as dangerous or intrusive forms of state power. Indeed, there was considerable disagreement about the degree to which medical authority represented state authority in Canada. What these stories did represent was the uncertainty introduced into the interpretation of events by being between cultures and nations. For my respondents, it was not possible to state categorically “this is racism” or “this is inequity”. Rather, they posed questions: “is this racism?” and “is this inequity?” This uncertainty highlights the obscuring effects
of language and bureaucracy, which in the extreme can lead to the surreal, wherein alphanumerical codes are assumed to stand plainly for the bodily states of children, third-language service providers refuse to speak their native tongue to fellow immigrants, and people are passed between hospitals in drug comas – possibly self-induced and possibly not. This testimonial evidence thus supports the broader hypothesis that the uncertainty of being between nations and identities can have a dangerous, destabilizing effect on the body, as well as revealing the absurdities of the health-care system upon which native- and foreign-born Canadians alike depend.

The varied evidence and arguments presented in this thesis resist concise synthesis. I sought to understand the relationship between the experience of Colombian refugees with health and social services in Canada, and their ongoing transformations of self and community as human beings transitioning between nation-states. However, the opening epigraph to this final chapter provides what I think is a philosophical lens through which to synthesize the diverse evidence of this project. This is a thesis about language, specifically about the language of health and integrity under neoliberal welfare-ism and state internationalism, but embracing the negotiations in everyday language that connect such discourse with action. In general, language is a human means of mapping the world and
communicating those maps to others, and governmental bureaucracy and political discourse are specific instances of this process.

In transnational life, language is a factor in social fragmentation and isolation, since it serves as one of the building blocks of the pre-existing imagined nationalism of the nation-state. Indeed in cases like Canada where different languages contest state sovereignty there is often a clear public awareness of this fact. The ability of the fieldworker to speak across differences is particularly dependent on not only language ability, but also language choice on and the ever-shifting terrain of translation.

What the evidence of this thesis fieldwork tells us is that there is no strongly oppositional identity shared by Colombian refugee migrants vis-à-vis Canadian state bureaucracies, and that ideas of sub-alternity or inequity tend to be themselves highly contested and expressly uncertain. Medicine is not understood in terms of surveillance but in terms of a desirable resource; conflicts between familiar and unfamiliar “biomedicines” are conceived of as economic and political, not cultural or identitarian, or grounded in differing systems of knowledge or truth. The evidence reinforces the difficulty of saying anything clearly about “refugee experience” since a certain fragmentation of categories of
experience is a feature of the life-disruption that often leads to refugee migration. What is certain is that in attempting to "place" refugee migrants within currents of power and ideology, and especially when exploring how refugee subjectivity can present a radical political challenge to state regimes of inclusion and exclusion, research must equally grapple with the desire to be "governed" -- if not as a passive target of improvement schemes, then as some form of participant (which I gloss as "citizen") in the public distribution of services.

Professional engagement with communities heavily affected by refugee migration, in the context of this thesis, reflects this fragmentation through the maintenance of “open loops” of policy and service delivery. That is, Canadian professionals as much as new residents are engaged in a negotiation of their ethical responsibilities and legal entitlements, playing an inevitable part in interpreting the “spirit of the rules” to whatever extent the letter of the rules allows. I would turn again to Mosse’s work on development (2005), where he argues that development projects often accomplish tangible goods but that there is no necessary relation between their mandate and their real accomplishments. Rather, intermediary actors -- between funders, high-level policy-makers, and those tasked with delivery -- are constantly engaged in an exercise of translation, whereby differing languages of collective action and political rationality are reinterpreted according to the
sensibility of the audience. Thereby, forever-inadequate and rigid funding policy structures are adaptable – within limits – to real, on-the-ground conditions.

The fieldwork evidence presented in this thesis accomplishes two things. First, it shows that this work of negotiated translation occurs, with respect to refugee migrants in Canada, at multiple intersecting levels of policy, including law, nationalist contestation, settlement agencies, media, health-care institutions and informal community organizing. Second, it suggests that – to mangle Geertz' famous observation -- “power is entangled in webs that it, itself, has spun”. By this I mean that strategies of political rationality and the deployment of governance cannot simultaneously exert effects upon people, including disciplinary effects such as detention and deportation, without “touching ground” and thus acquiring the solidity necessary to be attacked or negotiated in turn. Thus it is ever-crucial to avoid the conspiratorial notion of political rationalities made of nothing but mist and fog, infinitely changeable and concealing behind them the “true” face of power. Rather, future work and advocacy in this area of research must continue to illuminate the solid points of contact between obfuscated or tangled arenas of policy-making, service-delivery and human rights, so that individual and community pressure can most equitably be applied.
Synthesis: Language-Practice and its Role in Human Well-being

In this final section, I lay out a synthesis of the thesis’ diverse sources of data to specify its contribution to the language-citizenship connection in a specifically Canadian-liberal context. That is, beyond general critiques of liberalism and liberal citizenship, what can be said about Canada as a unique nationalist or state project? What direction will future debates about citizenship in Canada take and what kind of interventions might humanist, progressive social researchers make? First I step back to a brief, abstracted thinking exercise about language itself.

At any given time we have an accumulated lexography of words and their symbolic associations, which are always themselves memory-associations tied into the methods of teaching or the circumstances of our encounter with the word. (My first word was “duck” as in the noun, and was predicated on an immediate encounter with those birds and on a sympathy with their playfulness in rain puddles). “Ducks like rain,” sang children’s songwriter Raffi, and so for me the word “duck” is doubly associated – through “empirical” experience and also the abstracted experience communicated through sung verse – with rainy weather, yellow slickers, rubber boots, puddles, wet socks, grey clouds, being small, making a splash...
There is an individual and private aspect to this journey of words and memory but it is deeply social. Without teachers a lone child may express their human instinct for language-formation but the chances of them spontaneously reproducing any particular language seem infinitesimal. Furthermore we learn language because we want to say something to another person, about our wants or in order to share our experience of the world with them. Our lexography is doubly-bounded: by a set of rules and received vocabulary we call “a language”, and a set of intercommunicated phrases and symbolic practices (again in my case: singing the Canadian national anthem every morning at school, the liturgy of the Roman Catholic church, and so on). The attempt to abstract and identify groups of these symbols is the attempt to define cultures. We have culture(s), or they have us, or both – Geertz’s (2000) observation that human beings are suspended in webs of meaning that they themselves have spun captures the cyclical relationship between people and their words – which we deploy, master, manipulate, play with, and which shape, discipline, limit and direct us.

To the dozens of extant definitions of “culture” let me add mine, which is as much an attempt to destroy the reality of the concept as to reconstitute it. Culture is a conversation; a culture is made (to the extent that one can speak of the contents of an abstraction) of an assemblage and perhaps a history of speech acts whose
enactors can understand each other and substantially agree on the subject of their exchange. It is not a thing-that-exists and the word does not refer to a thing-that-exists, but to many things that are themselves symbols (it is a second-order abstraction, or a set of abstractions). I try to avoid using the word as much as I can, because it is such a powerful signifier that it can be used to gloss many possible interpretations and therefore invite misunderstanding – in order to cushion thin bony ideas in layers of synthetic fat. For now, I want to focus on the idea of conversation.

Some of the most dramatic conversations possible between people start with a variation on the phrase: "where does it hurt?" Kleinman's seminal work in medical anthropology focused on the cultural dimensions of what he called the "illness narrative", the symbolic, linguistic and ritual renderings of sickness -- the attempt by the sick and by healers to render sensible, within a cultural matrix, the phenomenology of bodily suffering. In this theory, having one's individual illness narrative heard and understood is an important part of being healed; linguistic agency (the ability to act meaningfully within a sphere of mutual linguistic

Wax refers to a similar idea when he speaks of an "ecumene" (1993), though for him the idea is also meta-cultural, a way of talking about inter-cultural communication. The idea more generally has its roots in Bakhtin's *The Dialogic Imagination* (1982), which has been taken up by anthropologists such as Jackson (1998) or Tedlock and Mannheim (1995) to explain the way in which culture seems to come into being intersubjectively, an abstract or non-material object that is nevertheless localizable in the space between its participants -- this is a definition that could be applied to the more temporary object, "conversation", which might therefore be seen as a kind of building block or particle of "culture".
intelligibility) and medical agency (the ability to seek healing) are entwined. In states such as Canada where there is a strong public governance of medical care, national language politics are implicated in questions of equitable access to care. For example, one of the barriers to the re-accreditation of foreign-trained medical professionals in Canada is their ability to sit exams given in English or French, even if they could -- in theory -- establish a practice composed solely of underserved Canadians with whom they share a first language. I am not necessarily suggesting that this would be good policy; the problem of linguistic barriers to care will not be relieved by having minority language-speaking providers unable to provide for other minority language-speaking patients.

However, the possible existence of grey-market medical providers in Ottawa-Gatineau, along with the circulation within the Colombian community of recommendations for informal care in Spanish, underline the fundamental insight: this linguistic barrier to care establishes a link between migrant politics and patient politics.

Nations can be analyzed as conversations and this is indeed a form of popular understanding. Anderson proposed that print capitalism led to the rise of modern national consciousness (1991), and the importance of media in structuring an imaginary national conversation is hard to overestimate today (along with the
ability of that structuring to conceal differences in influence and power behind a sense of virtual or vicarious speech). To this I would add that bureaucracy is a form of mass printing, a paper voice, that is a shadow of this “public” conversation and tags along behind it, a train of application forms, queues, offices, delegated responsibilities and rationalized decisions. These twin language-forms mediate between potential, provisional or marginal citizen-subjects and the Canadian nation(s)-state.

The fundamental theme to which all the chapters of this thesis contribute is the interrelation of language, nationalism, and health, a difficult web to untangle. This thesis explores the linguistic element of health-seeking among minority language-speakers within the context of Canadian nationalist liberalism. Canada can be seen as something of a laboratory for the liberal governance of language, with its history of settler colonialism and constitutional tensions between Anglo-European and Franco-European populations. Layered on top of these founding "nations" are durable minority traditions rooted in the labour needs of the colonial state: Chinese-Canadians, Ukrainian-Canadians, Finnish-Canadians and others. A wide-angle view of Canadian migration history might look like an oscillating wave, moving back and forth between racialist discourses which continually attempt to re-inscribe (Anglo)-European borders to the nation, and polynationalist discourses
which seek to trade legitimation within the Canadian national project to minority groups in exchange for their patriotic loyalty versus rivals such as the United States -- all in the context of French-Canadian contestation of any project of English language monopoly (cf. Mackey 2002, May 2008: 224-232).

This dialectic has resulted in a rich literature of Canadian contributions to the overarching theory of liberalism. Two theorists in particular have distinguished themselves as writers of prescriptive analyses of Canadian liberalism, within a nationalist mode broadly supportive of Canadian state democracy and official multiculturalism. Charles Taylor and Will Kymlicka both address the theoretical problem of balancing liberalism's demand for social solidarity within the nation-state with the freedom to differ culturally, linguistically and ethnically within that same state (cf. May 2008, Kymlicka 1995, Taylor 1994). The roots of this debate within liberal theory go to the heart of its balancing act between individual rights and state power. It also descends from the insistence of John Stuart Mill that "fellow-feeling" between co-nationals was imperative to the functioning of a liberal society, and that such feelings could only be assured by unity in language and culture (Mill 1862).

Kymlicka and Taylor both use the Canadian model to explore the boundaries of
the liberal toleration of difference, but they recommend slightly different approaches for Canadian liberal-nationalists. Taylor proposes a "communitarian liberalism" in opposition to a dogmatic reduction of each state subject to an individual (1994). In short, he proposes a recognition within the framework of liberal nationalism that persons may hold intermediary, communal identifications (with a language or ethnic group, for example) between their individual identity and their state loyalty. Communitarian liberal theory proposes that the freedom of the individual enshrined by classical liberalism is sometimes best served by treating citizens differently depending on these intermediary identifications, and thus provides a framework for "multinational" states and autonomy for secondary national groups within states such as Canada; the clearest examples being French-Canadians and the First Nations. Taylor remains within the broad borders of liberalism by declining to displace the cultural neutrality of the state entirely, though he does not ignore the fact that state- or hegemonic- cultures exist (62): "liberalism is a fighting creed", (1994: 62). At the same time, though, liberalism must be informed by a "politics of recognition", which sees the desire to be accurately understood as a fundamental entitlement, as opposed to the colonialist practice of imposing on the colonized a distorted and diminished image of themselves (Taylor 1994). This politics recognizes the *dialogical* character of human identity, which is developed processually through interaction with others.
In addressing the politics of language, education and citizenship, Taylor incidentally provides an important commentary on the nature of healing relations, in which recognition is vital (and referred to as diagnosis in its technical, biological aspect): "Nonrecognition or misrecognition can inflict harm, can be a form of oppression, imprisoning someone in a false, distorted, and reduced mode of being" (Taylor 1994: 25).

Kymlicka contrasts a theory of "multicultural citizenship" to Taylor's communitarian liberalism. He notes that the subsuming of minority rights within frameworks of human rights has failed to address injustices between groups within the nation-state, including between the national majority and national minorities, as well as between native-born residents and migrants. Arguing that the liberalization of diverse Western nations has not resulted in a devaluation of cultural identity (as French, German, or Québécois, for example), Kymlicka suggests that liberalism must, therefore, recognize the cultural dimension of individual autonomy (1995). He distinguishes, however, between "external" protections for cultural difference that keep majoritarian states from pursuing the assimilation of minority groups, and "internal" protections that would give minority groups the authority to impose "illiberal" restrictions on their individual members (Kymlicka 1995: 152). Kymlicka also contrasts national minorities
(such as the Québécois or First Nations) with migrant communities by distinguishing individual cultural identity from the persistence of a "societal culture" (ibid: 76). A societal culture, according to Kymlicka, is more than just a shared vocabulary of words and symbols; it is a state where the vocabulary informs and ties together all levels of social life on a daily basis, in a way that echoes Bourdieu's concept of *habitus* (Kymlicka 1995, Bourdieu 1977). Migration uproots the shared cultural vocabulary from the network of *habitus* it originally integrated, and unlike national minorities migrants are generally unable to form a "homeland" in which all daily living can take place within a familiar societal culture.

Kymlicka substantially agrees with Taylor's notion of recognition as a fundamental human entitlement, but remains closer to a classical conception of liberalism in locating it within an autonomous individual subject (1995). Through their attempts to deal with the paradox of multicultural and multinational states within the context of Canadian liberalism, both theorists contribute valuable vocabulary to the task of interpreting the results of this study. Two things incline me to think harder about Kymlicka's version of the politics of recognition, despite its characterization as a "conservative" variety of multiculturalism. First, strategies of improving access to quality health care for migrants that rely on
"communitarian" ideas of culture often end up relying on static and reified concepts of cultural identity that are applied to patients without sensitivity to their individual needs (cf. Gregg and Saha 2006). Second, the Colombian diaspora seems to be a case where people still possess a vital cultural "difference" vis-à-vis English or French Canada, and where they long for public recognition of that difference when seeking healing, but where no coherent communitarian arena exists -- indeed, where the space "inside" this cultural difference is largely defined by conflict and miscommunication.

It is with that point in mind that I present some more specific conclusions arising from the chapters of the thesis. As a general proposition, I feel that what is needed is not a communitarian medicine -- which in this case encourages a collective and even stereotyped conception of patient bodies. The current approach to health-care under multicultural liberalism also displaces part of the public obligation to treat the ill onto networks of unpaid labour, under the rationale of mobilizing social capital. This is a profoundly regressive transfer, as these networks tend to be those of the already vulnerable, such as new migrants, and has the potential to further reify the ethnic circuits of support that liberals claim to critique. What we need instead is a more radical, more inquisitive and more receptive liberal "neutrality" (that old and much tattered ideal of recognizing the autonomous
individual in society). This radical and receptive neutrality, rather than assuming a non-cultural or value-free space of government, would be committed to an open-ended and ongoing *process* of recognition that invites healers and patients into a common understanding and a common labour.
Works Cited


Baer, Hans, Merrill Singer, and Ida Susser. 2003 *Medical Anthropology and the*
PhD. Thesis - Andrew Galley; McMaster University - Anthropology


Beiser, Morton. 1999. Strangers at the Gate: The Boat People’s First Ten Years in Canada. Toronto: University of Toronto Press.


Bracewell, Wendy. 1996. “Women, motherhood, and contemporary Serbian...


Church, Elizabeth. 2009. “If you're a new Canadian, 'you go to university’”. *The Globe and Mail*, October 13th: online.


Elbow, Gary S. "The Overground Railroad: Central American Refugee Flows to Canada." In *Geographical Snapshots of North America: Commemorating*


PhD. Thesis - Andrew Galley; McMaster University - Anthropology


Goldring, Luin; Berinstein, Carolina and Judith Bernhard. 2007.


http://digitalcommons.ryerson.ca/cgi/viewcontent.cgi?article=1001&context=ecce

Toronto: CERIS – Metropolis Centre.
PhD. Thesis - Andrew Galley; McMaster University - Anthropology


PhD. Thesis - Andrew Galley; McMaster University - Anthropology

University of California Press.


Jefferson-Lenskyj, Nicholas. 2009. “‘For Humanitarian Care Only’ - Legal
PhD. Thesis - Andrew Galley; McMaster University - Anthropology


PhD. Thesis - Andrew Galley; McMaster University - Anthropology


McLaughlin, Janet E. 2009. "Health of Migrants at the Margins: The Case of
PhD. Thesis - Andrew Galley; McMaster University - Anthropology


ebooks@Adelaide: Free Web Books, Online. Available online as of March 26 2010 at


Mogford, Elizabeth, Linn Gould, and Andra Devoght. 2010. “Teaching Critical health Literacy as a Means to Action on the Social Determinants of Health”.

Health Promotion International, August: 10.


Mountz, Alison. 2004. "Embodying the Nation-State: Canada's Response to


PhD. Thesis - Andrew Galley; McMaster University - Anthropology


PhD. Thesis - Andrew Galley; McMaster University - Anthropology


South-East Ottawa Centre for A Healthy Community. 2006B "Outputs and Indicators." *No Community Left Behind.* http://www.nocommunityleftbehind.ca/outputs.htm (accessed March 27, 2010).


Stastny, Charles, and Gabrielle Tyrnauer. "Sanctuary in Canada." In The
International Refugee Crisis: British and Canadian Responses, edited by

Stoler, Anne Laura and Frederick Cooper. 1997. “Between Metropole and Colony:
Rethinking a Research Agenda”. In: Cooper, Frederick, ed. Tensions of
Empire: Colonial Cultures in a Bourgeois World. University of California

Strathern, Marilyn, ed. 2000. Audit Cultures: Anthropological Studies in

Knowledge Translation”. Canadian Medical Association Journal, vol.181:
3-4.

“Canadians without Regular Medical Doctors: Who are they?” Canadian

Tanner, Frances. 1999. "Community Service Centres of Ottawa-Carleton: A
PhD. Thesis - Andrew Galley; McMaster University - Anthropology


Tedlock, Barbara. 1991. "From Participant Observation to the Observation of Participation: the Emergence of Narrative Ethnography". Journal of
Tedlock, Dennis, and Bruce Mannheim (eds.) 1995. *The Dialogic Emergence of Culture*. Champaign: University of Illinois Press.

Thompson, Elizabeth. 2009. “Feds may fingerprint temporary residents”.

*Edmonton Sun*, June 8. online.


Available online as of March 27th 2011 at


Veenstra, G and Lomas, J. 1999. "Home is where the governing is: social capital and regional health governance". *Health and Place*, vol.5: 1-12.


*Psychosomatic Medicine*, vol. 54(5): 546-560.


Wright, Cynthia. 2009. Presentation given at Carleton University, as part of the Human Rights Speaker Series.


