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# SOCIAL INNOVATIONS IN GENEVA, SWITZERLAND

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# 1. WELFARE INNOVATIONS IN GENEVA

## 1.1. The Unités d'Action Communautaire
### 1.1.1. A general overview

The *Unités d'Action Communautaire* are structures created by the Municipality of Geneva and they were implemented ten years ago. Located in eight neighbourhoods, they are managed by the social services of the city of Geneva. Their goals are diverse:

> - UAC are in charge of collecting information about the eight areas where they are located. Proximity is a keyword of their action. They map resident's needs, urban problems in safety, housing or public facilities. Diagnoses are made through everyday observation, involvement with residents and local statistics. This expertise aims to support the shaping of social policy and public decision at the end.
> - UAC are in charge of giving residents information about the city services and opportunities they offer. UAC are rooted in the making of a new conception of social services in which social workers try to reach out people in the areas where they live.
> - UAC are in charge of facilitating contacts between the associations/participants involved in the neighbourhood. They aim to reinforce the collective action in the area through a better coordination between participants.
> - UAC try to improve the density and quality of neighbourly relationships through coordination and networking (directly related to the above goals).

### 1.1.2. Conception and ways of addressing users

The UAC target individuals and NGO's involved in the area (in solidarity, in organization of cultural activities etc.) and does not directly works with vulnerable populations: in the UAC perspective, users are members of the civil society and the latter is a welfare producer. The UAC aims to support the making and the organization of this civil society through a better coordination of participants. Building a greater consistency of the diverse programmes, encouraging meetings and common projects and making the spreading of information easier are the main tasks of the UAC.

Moreover, this project is based on the idea that community work has to be based on a great knowledge of urban areas. Each UAC has a specific approach of the neighbourhood according to its characteristics. The UAC of *Champel*, a wealthy neighbourhood located outside the city centre, develops an approach different from that in the *Jonction* area. Doing so, the UAC acknowledge the diversity of the populations' needs and communities located in the neighbourhood.

> *Intensity of the NGO's and individuals' involvement in collective action varies according to the neighbourhoods. In some of them, individuals such as caretakers for instance do a fantastic work while it is less the case in other areas. One of the main strength of the UAC is that they look at the micro level (V. S, Head of social services in the City of Geneva).*

The UAC participants thus develop a significant expertise of the neighbourhood dynamics and this is helpful further in the making of social policy. In a report for the managers of the social services, the UAC of the neighbourhood *Jonction* mentions the changes in the neighbourhood and especially the progressive gentrification in the north of the area: they also give information about how residents perceive these changes.

The UAC focus on the strengths and weaknesses of neighbourhoods in a matter of collective action and go with a policy aiming at fighting social isolation of vulnerable populations. The policy framework emphasizes that collective action creates communities that favour the embeddedness of individuals into dense networks. To some extent, we find again the idea of stabilizing communities that we highlighted in the ULT project.

### 1.1.3. Internal organisation and modes of working

The UAC is managed by the Department for Social Cohesion and Solidarity of the city of Geneva. They comprise 40 workers in the city as a whole and each UAC has a specific budget. The global budget of the UAC is quite important showing that they have been greatly supported by the city of Geneva. For instance, the salary of an employee of the UAC represents 120 000 Swiss francs per year (roughly 98 000 euros taxes included). Moreover, between 2004 and 2007, the city of Geneva founded an important research about the work of the UAC. In Jonction, the team comprises four community workers. Finally, most of the UAC workers previously worked in another sector and they followed a specific certified training of 300 hours.

A first mode of working is the making of diagnoses of the *neighbourhood dynamics* such as the use of public spaces, housing maintenance, childcare offer, public facilities, safety problems and evolution of the local population regarding socio-economic status. This expertise may support public decision and relationships between politicians/policy makers and residents. Thus, in 2010, the UAC was in charge of preparing a report before a meeting organized in the neighbourhood. UAC participants used diverse methods: questionnaires, everyday observation (a strong side of the UAC), conversation with NGO's participants and residents, local statistics.

A second mode of working is related to the improvement of coordination between the diverse participants and NGO's involved in community action in the area. For doing so, the UAC workers collect information about collective action in the area, study the diverse emerging projects, they meet people and they favour contacts between all participants (NGO's and individuals) involved in the area. For instance, the UAC may support a group of inhabitants wishing to improve the quality of relationships in their building.

A third basic principle of the working culture in the UAC is that social workers should be more proactive to meet populations needing assistance. Proximity is a key word in the UAC working culture as the head of social services argues:

> *People working in the UAC are very different from social workers working in their offices and waiting for people who need their help. The main idea is that UAC professionals walk around to map the issues and the key-points of a neighbourhood. And then, they give people the information they need and they favour the making of social interrelations.*

The UAC tries to develop new methods in order to be in touch with hard-to-reach groups. When the UAC were created, this approach - state workers on the ground - was definitely innovative in the local welfare context.

At the same time, the modes of working of the UAC are embedded in the Geneva tradition of subsidiarity in which initiatives from civil society are largely encouraged. Civil society put ideas forward and policy makers support them shaping a bottom-up process. The UAC appear as a tool enabling to develop and make concrete this principle of subsidiarity.

*1.1.4. Interaction with the local welfare system*

The UAC are directly related to a 2002 law on the reorganization of social policy in the canton of Geneva. According to this law, the canton is in charge of individual measures (benefits, individualized support, home care etc.) while the cities have to develop a community social policy. Following the law, the city of Geneva implemented the UAC, an original approach which contrasts with the dominant individualized support of people and families. The UAC look at individuals in the urban environment and networks and clearly favour the shaping of stabilizing communities able to improve social integration of individuals, which contrasts with the view of communities in some other welfare states: either their significance is underestimated, either they are associated with social segregation and withdrawal in one's small circle.

Nevertheless, implementation of the UAC in the local welfare state was quite difficult at the beginning. Although they have been clearly supported by the higher city management, local participants in the neighbourhoods were sometimes destabilized by the implementation of the UAC: some social workers were reluctant with respect to interventions differing from an individualized approach and some NGO's defending similar community values perceived the UAC as an attempt of policy makers to make their work more bureaucratic (Rossiaud 2007). Consequently, the UAC both have to prove their value added and make their goals clearer.

Another interaction with the local welfare system is also one of the limits of the UAC. Through this project, the city of Geneva encourages civil society self-organization and offers significant subsidies to the NGO's. Thus, the UAC action significantly contributes to the proliferation of organizations in a specific field –isolation of elderly, assistance to migrants etc. The more the participants are numerous, the more they get trouble to coordinate and work together. According to the Head of social Services, this is one the limits of the Geneva welfare system:

> *We have a very important number of participants in social policies. For instance, in a matter of assistance to the elderly, we roughly have 250 participants in Geneva – state workers, NGO's and so on. This is one of the features of the Geneva welfare. And it's difficult because people do not always know each other... This situation is clearly linked to a large amount of money offered to the diverse organizations. When one of them needed money, the state supported it and we built a kind of "yarrow" with multiple layers. We forgot to develop a global vision of the whole.*

One the one hand, the UAC works to improve the level of coordination and has helped the city of Geneva to get a clearer perception of what the NGO's do and how they work together. The State of Geneva thus tries to get out from a single logic of welfare benefits provider based on an instrumental rationality. Likewise, they also contribute to the proliferation of NGO's and their dependence towards the local government.

## 1.2. The ORIF project

### 1.2.1. ORIF: a general overview

The ORIF (non-profit private organization for integration into employment and professional training) addresses the reintegration into employment of people suffering from health problems. Marginalized young adults are part of the target group: due to medical conditions, some of them cannot get back to the labour market with the job they previously had while the others experience difficulties at the early stage of their entrance

into the labour market. Training in companies and various shadowing modules are organized in order to enable individuals to be aware of what they can do, with respect to the types of jobs and tasks. Finally, ORIF tackles the diverse dimensions of social vulnerability –not only health but also lack of qualification, marginalization, missing professional project and distance from the labour market.

The ORIF marks a contrast with other programmes that focus on the (re)integration of young people into employment with less attention to the multiple dimensions of social trajectories and vulnerability. On the one hand, ORIF offers professional training that takes into account people's health problems; services in charge of integration into employment develop a significant network of companies likely to hire young adults once period of training is completed. On the other hand, ORIF helps to develop autonomy and self-responsibility. In the ORIF facilities, people are involved into the community through activities and exchanges with other people. ORIF wishes to develop employability of people but differing from other structures, we have been observing an interactive employability frame (Bonvin, Farvaque 2007) in which developing self-responsibility goes with real social opportunities for recipients.

### 1.2.2. Conception and ways of addressing users

Many early young adults welcome at the ORIF meet heavy learning difficulties related to intellectual, motoric and behavioural disabilities. Traditional learning processes were challenging for them and the ORIF is in charge of implementing programmes enabling them to integrate into jobs while taking into account their individual difficulties. The Office for Disability Insurance funds and follows these young people.

The first innovative dimension of the ORIF programmes is the global approach of individuals: assessment takes into account health status and its evolution as well as diverse problems of socialization. The head of ORIF says: "these young people have failed and they are not self-confident. Our role is enabling them to be self-confident so that they develop their abilities and enter the labour market". To perform the global approach, a multidisciplinary team, comprising a psychologist, experts in special education and teachers, supports people. "Each individual is supported by two people: the first one is an expert in training while the second one is a social adviser in charge of working on social skills in relation to the young's' family environment." Conception of users considers social trajectory (learning difficulties, school paths) but also the type of social *milieu* in which people move.

A second significant dimension is the long-term support, from the beginning to the end: in other words, measures start with assessment, continue with training and conclude when people are back to work. This support marks a significant contrast with other programmes, which are only in charge of one dimension (skills assessment or training or job search strategies). The ORIF support lasts three years. The first one focuses on the career choice. The NGO offers training in ten professional sectors and young people are involved in diverse job experiences to be able to choose further a type of job. At the end, young people have to argue their choice in front of the ORIF managers. The first year also focuses on a school upgrade and on a specific course on social skills. The second and third years are about training in various places: in the ORIF facilities, in private companies and in classic vocational schools.

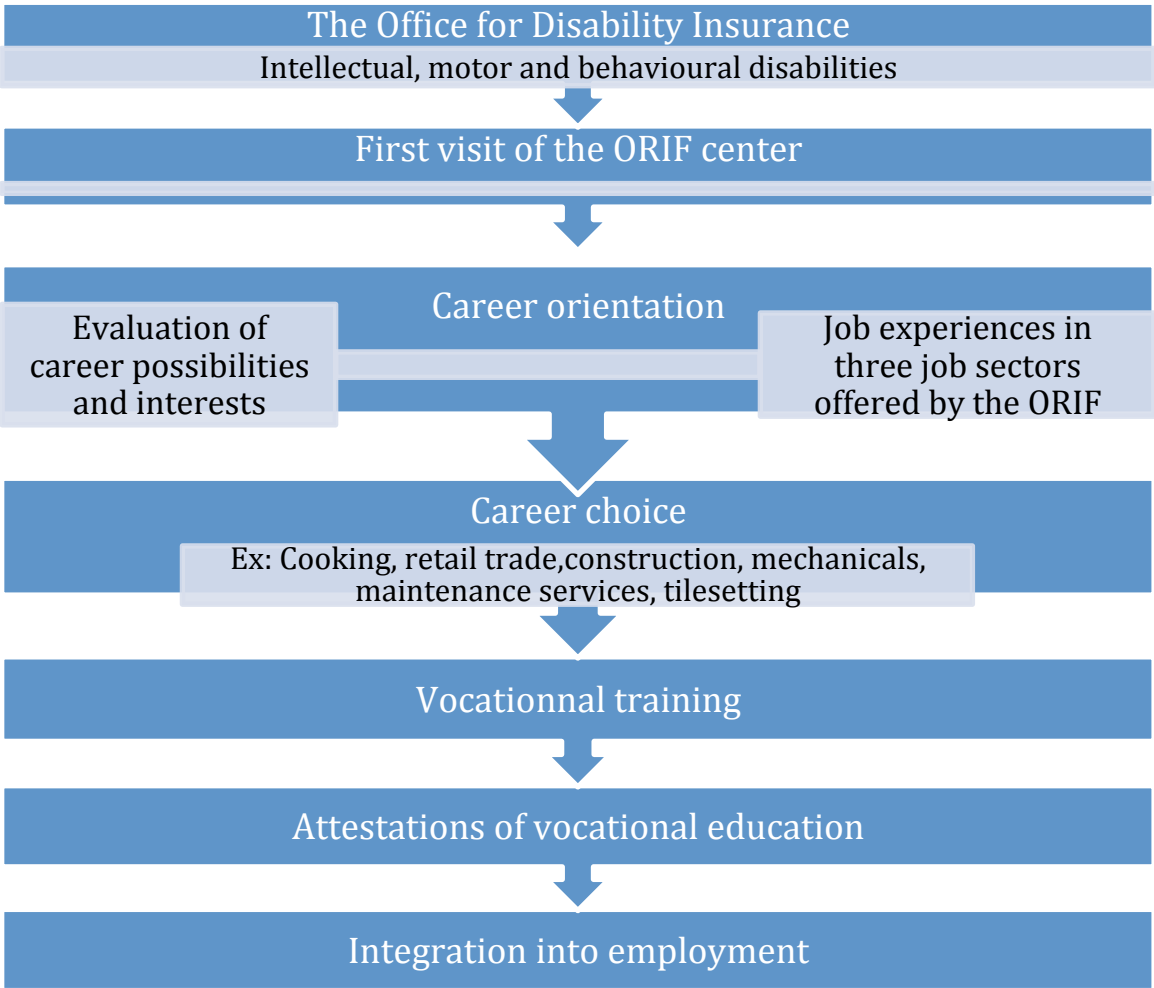### 1.2.3. Internal organization and modes of working

The ORIF is a Swiss NGO with nine offices/training centres among which one is located in the Canton of Geneva. The ORIF as a whole has 400 workers. Each ORIF centres has its own

director and team. The Geneva ORIF may welcome 90 trainees in diverse job sectors: cooking, masonry, landscaping, parquet flooring, mechanics, and sales among others.

The ORIF only welcomes early young adults who are sent there by the Office For Disability Insurance. The project is based on the idea that disabled people have remaining/residual working abilities that enable them to integrate into the labour market. Modes of working consist in supporting people in the diverse steps of professional integration:

- offering people opportunities to be aware of their working abilities through observation modules and job experiences;
- placing people in a working situation in order to explore their abilities in relation to employers' needs;
- implementing working projects that take into account trainee's health situation

Figure 1 - Organization of the three years training:

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┌─────────────────────────────────────────────────────┐
│            The Office for Disability Insurance        │
│        Intellectual, motor and behavioural disabilities│
└─────────────────────────────────────────────────────┘
                          ↓
┌─────────────────────────────────────────────────────┐
│              First visit of the ORIF center           │
└─────────────────────────────────────────────────────┘
                          ↓
┌─────────────────────────────────────────────────────┐
│                  Career orientation                   │
│  ┌──────────────┐                  ┌──────────────┐   │
│  │ Evaluation of│                  │Job experiences│   │
│  │career possib.│                  │in three job   │   │
│  │and interests │                  │sectors offered│   │
│  └──────────────┘                  │by the ORIF    │   │
└─────────────────────────────────────────────────────┘
                          ↓
┌─────────────────────────────────────────────────────┐
│                    Career choice                      │
│  Ex: Cooking, retail trade,construction, mechanicals, │
│          maintenance services, tilesetting            │
└─────────────────────────────────────────────────────┘
                          ↓
┌─────────────────────────────────────────────────────┐
│                 Vocationnal training                  │
└─────────────────────────────────────────────────────┘
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┌─────────────────────────────────────────────────────┐
│            Attestations of vocational education        │
└─────────────────────────────────────────────────────┘
                          ↓
┌─────────────────────────────────────────────────────┐
│                Integration into employment            │
└─────────────────────────────────────────────────────┘
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On the one hand, ORIF contributes to a process in which each individual has to participate to the labour market: we have been witnessing a workfare regime with an "activation" of social expenditures. Disability benefits should not prevent people from being integrated into the labour market. In this perspective, the welfare goes with a contract involving obligations and responsibilities on both hands. The contract refers to the liberal perspective meaning that social assistance should not be mechanical and universal but rather tied to formal arrangements between participants involved. But on the other hand, we have been witnessing an empowerment of people because they are not reduced to their

disabilities, are encouraged to develop their abilities and to become full members of society (see for instance Jacques Donzelot in *Un Etat qui rend capable*, 2007) .

### 1.2.4. Interaction with the local welfare system

The impact of the ORIF is less about governance than about the conception of how young people enter adulthood. Within the local welfare system, we find divergent views of instruments and policies targeting young people. Debates about the *Emplois de Solidarité* are a significant example. This programme offers long term jobs to people who cannot integrate into the primary labour market. Within the working group implementing this programme, there were debates about whether young adults may have benefited from the *emplois de solidarité*. To the manager of the project as to the head of the Department of Employment and Solidarity, young adults were not considered as relevant recipients. The manager says:

> The emplois de solidarité *should not be the beginning of a career. Starting with this type of job would not be great. Most of recipients are more than 55 years old. People under 30 years old must follow training and get a qualification. The* emplois de solidarité *are not for this category of people but for those who are likely to dissocialize. Young people are not as a risky population as older people from this point of view.*

In this perspective, youth and early adulthood are defined in a normative way: they are associated with training and the latter is supposed to lead people to employment. Youth appears as a life cycle organized around traditional markers –going to school, choosing a career path and getting a job, all occurring in a linear way.

Still, research brought out that this representation of youth is much less relevant than it was before. Scholars have underscored a highly fragmented life transition focusing on how employment and extended school course have meant that many traditional markers of adulthood have occurred later, sometimes not until the early thirties or beyond. Some researchers even assert that defining youth as a process of transition is not relevant any longer. According to these scholars, the youth is fundamentally a process of individualization, a long life stage both uncertain and unfinished (Van de Velde 2008). It goes hand in hand with risk biographies. To some extent, we may think that changes into the entrance into adulthood and its fragmented features have been overlooked in some debates within the local welfare.

The ORIF project is innovative because it takes into account *the diversity of youth* and how intellectual, motor but also behavioural disabilities impede integration into training and participation to the labour market. Going to school, access to training and getting a job do not occur in a linear way and sometimes, they need to be supported through public programmes. In a general manner, Nicolas Frossard, the head of the NGO Realise[1], disapproved strict rules in a matter of selection of target groups. He says that, "too precise rules immediately imply logics of exclusion. With another head of an NGO, we have defended flexible measures enabling stakeholders to have more freedom in how they combine means and goals". The ORIF project concurs to this more flexible approach of populations.

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[1] All names were anonymised.

## 1.3. The Unit for Temporary Housing (ULT)

### 1.3.1. A general overview

This municipal service offers temporary subsidized housing to vulnerable populations: foreign households in a challenging housing situation, people who become homeless and sometimes seriously depressed following a separation, households with massive employment and debts problems. The project aims to counterbalance the effects of the Geneva very limited housing market (very low rate of available dwellings) on marginalized people's housing conditions and opportunities. This building (called *Michel Simon*) was inhabited by elderly people thirty years ago but populations have changed since the 1990's through policy effects.

The municipality of Geneva turned this building into a place offering 157 temporary subsidized flats. What is specific in the ULT is that residents may be supported by a team employed by the Municipality, i.e. a building manager and two nurses. Indeed, the health dimension of social vulnerability has been taken into account and is, as a matter of fact, a key-feature of many users living there. The maximum stay is officially six months but it may be longer and many residents have been living there for one and even two years. Rent varies according to the tenants' resources. This service takes into account *risk biographies* and how life accidents overlap with health, employment, family status and housing situation.

Roughly, tenants may be divided in two parts: first of all, we find people who are excluded from the labour market for several years and cannot have an autonomous flat. Most of the times, lack of qualification, heavy social problems and the health condition are the key elements explaining that their lack of jobs for a very long time. The case of Christine exemplifies this type of trajectory: Christine had a very serious car accident in 1995. "I was waiting for the bus and suddenly a car hit me violently. I was completely squeezed. I had multiple injuries and I stayed one year in re-education and skin transplants". Her life completely changed from this moment. Some years after, she got separated from her third husband who "threw her out". She was not able to find an apartment again as she had no income (she is affiliated to the Disability Insurance since 1986-1987 because she was previously a drug user and addict with long term consequences). Some tenants of this category are not likely to go back to the labour market, except perhaps in subsidized jobs.

A second category of tenants that is not insignificant do not have heavy health problems but family problems such as a divorce or/and an erratic job career with precarious jobs do not enable them to get a flat in an autonomous way. Most of them lived in hotels and other people's flats before accessing to these subsidized apartments. Men who got divorced and whose previous wives remained in the family apartment are numerous in this category.

### 1.3.2. Conception and ways of addressing users

The ULT contrasts with a traditional pattern of social assistance: indeed, it is not only concerned with populations' basic needs (food, housing, clothes etc.) but it also deals with their social isolation. Some people get very few contacts with other people and some weeks, they only meet the building manager and nurses. At the end, one of the innovative aspects of the ULT is that it takes into account diverse dimensions of social marginalization: housing, health and especially psychological troubles, social isolation, lack of autonomy. From this point of views, it contrasts with the compartmentalization of social policy programmes and with traditional social housing projects.

Ways of addressing users contribute to make the ULT a place of trust and support which supports, explains and informs people in the city. These places help newcomers to become

more familiar with the city and to appropriate it (Cattacin 2009; 2011). It is even more relevant for tenants who recently arrived in Geneva and are not necessarily migrants. Thus, Martine lived in a rural area, Dardilly, for a long time. She was not used to live in the city and she was quite reluctant for going out. She only went outside with her dog. Although she did not like the area *Jonction*, Martine had good neighbourly relationships with the other people living in the building Michel Simon. She took part in a Christmas event there, she regularly talked to her neighbours and she invited a man living on the same floor him for a talk and a tea because he was depressed due to an undergoing divorce. To Martine as to many others, the ULT is one of these small communities providing support and a feeling to belong to the city even though this process should not be overestimated.

The way public policy has concentrated vulnerable populations in the building has some effects on individuals and neighbourly relationships. The ULT is located in the area *La Jonction,* a neighbourhood with a low/average rate of socio-economic segregation. There is an over representation of disadvantaged populations with respect to the other areas of the city of Geneva but we also find there intermediary groups, university students and even quite wealthy families. But on the other hand, the ULT displays a pattern of socio-economic segregation at a micro-level (the building) as we only find very disadvantaged households there. It is actually a place of socio economic segregation within a mixed area.

We found that the concentration of low-income households and high residential proximity shape solidarity practices between neighbours and help them to find diverse strategies and arrangements to deal with problematic situations. Numerous examples might be mentioned: hours of childcare, loan of money (50 or 100 euros), short repairs, discussions between neighbours etc. Consequently, we observed that concentration of vulnerable populations provides tenants some resources. To some extent, we consider that the ULT is a small stabilizing community where people can find a support (from the ULT workers and neighbours) to facilitate daily life. One of the tenants, Catherine, who was homeless and lived in a squat for many months has suggestive words saying that: "I have been relieved and moved by how Geneva welcomes me. I am very grateful for this flower they offered me. Since I live here, I always receive presents... from the Red Cross, places for events, I said to someone it is a permanent Advent time here (...). I am in a transitory time with the protection of the city of Geneva".

The ULT contributes to make the city more inclusive to precarious and marginalized populations trying to recover. This research outcome sheds light on aspects of segregation differing from those often studied. Indeed, what is commonly called "social mixing of populations" has been at the core of many urban policies as it would enable a better integration of disadvantaged groups - immigrant or low income populations while socio economic segregation is commonly associated with public disorders, delinquency and increasing of social and urban marginalization (Bolt 2009, Charmes 2009, Bacqué 2011). Research shows that concentration of vulnerable populations may also become a resource for residents (Small 2004). This innovation is characterized by both closure and openness with respect to the city. On the one hand, closure is related to protection (an intercom is a boundary between outdoor spaces and the interior of the building; nurses and a manager take care of residents). On the other hand, it is opened with respect to the city to the extent that it supports integration of residents into the urban fabric.

It does not mean, however, that conflicts do not occur in the social life of the building. Some residents try to distance themselves from the others as they want to avoid labelling and self-identification as "populations with social problems" (Lapeyronnie, 2008). Representations of the building vary according to residents: some who have experienced massive social problems for a long time do not "frame" the place where they live as

residents who have experienced a quite sudden social decline following a separation or a loss of job. Brice, for instance, is very critical about his neighbours and it seems that it is highly related to his feeling of social decline (*déclassement*). Indeed, Brice experienced a social fall following his bankruptcy as an entrepreneur and his recent separation from his wife. The diverse cognitive frames impact upon residents' practices and relationships with their neighbours.

### 1.3.3. Internal organisation and modes of working

The ULT is owned and managed by the City of Geneva (Department for Social Cohesion and Solidarity). The manager and the three nurses have been employed by the city for several years. The building comprises 170 small apartments. People are generally sent there by social workers and NGO's; they have to apply to get a flat. The ULT is part of a large network of emergency housing offered by NGO's and the city services. Flats are supposed to welcome people for up to six months but most of people have been living there for one, two or three years due to the housing situation in Geneva. The rate of turnover in the rented housing market and the number of available dwellings are very low (0.2%) explaining that people who are evicted from their flats have many difficulties to find a new flat, even a much smaller one. Each year, only 30 residents are able to leave the ULT because they find a   flat.

The ULT does not only offer subsidized housing but also diverse kinds of supports to tenants as the modes of working show. Three nurses are in charge of visiting tenants: they provide medication and control evolution of health. Many tenants need medication for depression. Secondly, the building manager has not only a single role i.e. managing common spaces; he is also regularly in touch with tenants and may help them for diverse stuff. Maria, a single mother tenant, mentioned that she appreciated the manager of the building: one day, her daughter Evelyne who is disabled, escaped from the flat. The manager found her and brings her back to Maria's apartment. Investigation in the building showed that he contributes to make the Unit for Temporary Housing more welcoming and secure. The city of Geneva is also present through the *Unité d'Action Communautaire* of the neighbourhood *Jonction*, which is located at the ground floor. Modes of working build up a solidarity network around residents.

We may wonder however to what extent the modes of working enable people to become more autonomous. Although we may consider that ULT acknowledges risk biographies and the diverse dimensions of vulnerability (health, social isolation), the team working with residents is not multidisciplinary and the health approach is dominant with three nurses employed. As we said, they provide medication and welcome residents who have health problems. There is a contrast between the statement of a global approach and the management team. To some extent, all happens as if social problems were, to some extent, reduced to health problems. We do not witness, as in the ORIF team, a social adviser who would meet people, discuss their expectations and helps them to become more autonomous through training and employment. Still, our investigation showed that residents are a quite heterogeneous group: some of them have health problems and have not been working for a long time but the others, who also receive a medical treatment for depression at the ULT, have experimented a marginalization process only recently due to unemployment, a family breach or a bankruptcy. In the latter case, it seems that a medical approach is not sufficient and does not really meet their needs. We may consider that "a psychiatrisation" of social processes is at work to some extent.

*1.3.4. Interaction with the local welfare system*

The ULT occupies a specific segment of the housing policy for very low income populations. In Geneva, the canton is in charge of the social housing policy: allowances, access to subsidized dwellings and emergency housing for people evicted from their flats (most of the times, the canton pays nights at hotel till three months). Numbers of NGO's (The Salvation army, Emmaus, Carrefour-Rue) offer marginalized populations an emergency housing. The ULT deals with people and households who lost their flats following biographic events ( loss a job, bankruptcy, divorce, heavy debts and expulsion ): some of them still have an income but it does not enable us to access to a subsidized flat. Differing from people living in the flats offered by most of the NGO's, residents have to pay a rent (in proportion to their income). To some extent, the ULT policy takes into account this particular segment of vulnerable populations: they have not experienced a process of marginalization for a long time but a biographic event dramatically changed social circumstances under with they live.

In addition, most of measures in a matter of social housing policy are individualized and focus on the allocation of a flat to low-income populations: adopting a different perspective, the ULT offers not only a flat but also a secure and stabilizing environment. As we said above, ways of addressing users contribute to make the ULT a place of trust, support and information for people in the city. The ULT contributes to shape a more welcoming city, for migrants, for instance, who have suffered from low-standards patterns of housing conditions (Schaerer, Baranzini 2008, see the Geneva WP2 report).

## CONCLUSION

The three innovations we studied have grown and stabilized. A first critical factor explaining this stabilization is certainly the significant public funds invested in social policy in Geneva. They enable innovations to stabilize on time. For instance, the UAC were created ten years ago and they have progressively grown till 40 workers: wages represent a yearly budget of almost 4 million of euros. The key role of public funding in the stabilization of innovations is perhaps a limit to their diffusion in other contexts. Indeed, UAC encourages organization of civil society and plays a key-role in the contacts between the diverse participants involved in neighbourhoods but also in the interrelations between organizations and the local government. Therefore, their legitimacy and their efficiency (perceived by participants) are strongly related to the financial and material support provided by the city of Geneva. In a less favourable financial context, the UAC would have to reshape their actions and their goals, at least partly.

A second critical factor favouring stabilization of innovation is that they agree with the current interpretation of solidarity according to which the latter involves a contract with obligations and responsibilities on both hands. The current orientation of the local welfare system has been enabling people depending on social assistance to access measures to reintegrate the labour market, which was much less the case before. Legal norms were changed as well as the general representation of people on benefits as we have showed in the WP4 report (see the reform of the Minimum Cantonal Income for Social assistance). One considered that they had to work in one way or another. The ORIF project, for instance, concurs with this vision because it is clearly focused on the participation of disabled people into the labour market. This orientation agrees with the current orientation of social policy regarding people suffering health problems as the head of the *Hospice Général* explains: "

*Previously, many people were able to receive the Invalidity allowance but it is currently much less the case. The Invalidity Insurance is reducing the number of recipients and people are much less recognized through their health problems. We now have to work with them on their professional reintegration. Those who already receive an invalidity allowance have seen the amount of benefits reducing. The question for us is how can we support them and support their economic participation?*

This orientation is relatively new but the ORIF organization has already developed significant know-how and relevant tools in a matter of participation of people suffering from health problems and motor/intellectual disabilities. This feature contributes to the stabilization and the growing of this innovation. This is much less the case of the ULT because we see a discrepancy between the current policy orientation towards ill populations and the approach of people in the Unit For Temporary Housing. Indeed, the working team comprises three nurses and a caretaker. They tackle resident's health problems and social isolation but they are not likely to favour their professional integration in a significant way. All happens as if the architecture and modes of working of the ULT were, to some extent, a legacy of the previous orientation towards ill populations which does not mean that it is not innovative in many ways (stabilizing community, housing going with an everyday support to residents etc.).

In addition, we may consider that the Geneva context favours diffusion of innovations to some extent. Many people with responsibilities in the field of social policy have known each other for a long time and some of them are used to working together. These routines of collective work favour diffusion of innovation to the extent that workers are aware of what the other organizations do; circulation of information is easy. This context favours the shaping of coalitions and these coalitions may further be involved in the "mainstreaming" of the respective organized projects through lobbying and social marketing for instance. Thus ORIF has been in touch with other organizations such as Realise and OSEO. They all agree with the idea that improvement of reintegration of people into the labour market requires that the sector of employment and that of social assistance should open to each other rather than being referred to antagonistic principles. These organizations, shaping a coalition, have developed a significant lobbying practise, on their own part and sometimes together, to spread this idea. We may therefore consider that development of routines of collective work favours diffusion of innovation.

However, a weak point concerning diffusion of innovation in the Geneva context is related to the lack of relevant assessment of innovations. Assessment concern modes of working or the governance but they remain weak with respect to the impact of innovations upon populations. Thus, the city of Geneva has funded an assessment of the UAC but the latter is about the architecture and modes of working of social services including the UAC. The ULT has not been assessed. In both cases, impact of innovation upon vulnerable populations is relatively unknown. This feature is likely to hamper diffusion of innovation.

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