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Voluntary-Statutory Relationships in the History of Danish Social Welfare

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List of Content

Introduction ................................................................................................................................. 4

A History of Danish Social Welfare ............................................................................................ 6

*Phase 1:* Unorganized, Liberal Social Policy: The Parallel Bars of Public Poor Relief, Mutual Aid and Philanthropy ................................................................. 7

*Phase 2:* The Idea of Social Rights and the Public-Private Partnership .............................. 9

*Phase 3:* The Idea of Universalism and the Marginalisation of the Voluntary Sector as Service Providers ......................................................................................... 11

*Phase 4:* Voluntary Action Reconstructed as Civil Society ................................................... 15

Discussion .................................................................................................................................. 18

References ..................................................................................................................................... 23
Voluntary-statutory relationships in the history of Danish social welfare

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Introduction

“There is an expressed and strong need for more knowledge about historical relationships between the two sectors at a time when the voluntary or third sector is receiving renewed political attention and interest in both Western and Central-Eastern Europe, and the kind of role voluntary organizations can play in the 1990s and beyond seems to be taken for granted” (Kuhnle & Selle 1992a:2,3).

As observed by Jane Lewis (1999:256) the relationship between state and voluntary action has been at the forefront of thinking on voluntary organizations for long. Historically there has always been a “partnership” between the state and the voluntary sector, but the nature of this relationship, in terms of expectations and conditions of voluntary action, has changed over time. Unfortunately, the Scandinavian body of literature on the voluntary sector has only to a very limited extent rooted its research in a historical understanding of the evolution of this relationship. This paper is written out of the conviction that voluntary action is deeply embedded in wider social, political and economic realities (Seibel 1990:46) and that empirically based historical knowledge therefore is crucial in order to understand present problems and challenges. Voluntary organisations have deep historical roots, and there has never been a “golden age” where they floated freely in social space (Salamon & Anheier 1998:227). In opposition to much popular thinking which treats voluntary action as the independent variable - often arguing that voluntary action represents particular sacred values different from that of government, such as flexibility, autonomy, honesty and pluralism - it is now more common within the international research community to treat the voluntary sector as the dependent variable (Lewis 1999:257; Salamon & Anheier 1998:215; Kuhnle & Selle 1992a:2). In order to understand the role and position of the voluntary sector we

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need to shift the attention to the external environment which - following Anthony Giddens (1984) - both enables and constrains voluntary action.

Within the Scandinavian countries probably the single most important structure in this respect has been that of the welfare state. As stated by Kuhnle and Selle (1992b:5), an understanding of the characteristics of voluntary organizations at a given point in time presupposes a simultaneous understanding of government. In other countries, such as the US, the market institution would be equally (or even more) important (Grønbjerg 1987). There is reason to believe that also within the Nordic countries the ideology of the market will become stronger in the future (Repstad 1998; Selle 1998). However, looking back there can be no doubt that the history of the voluntary sector is closely related to that of the modern welfare state. In more broad and general terms this is also obvious considering the fact that the formation of a (democratic) welfare state presupposes a strong civil society just as a vital civil society needs governmental support and protection (Habermas 1992; Lefort 1988). Consequently, rather than treating the two sectors or institutions as separate domains one needs historical accounts that explicitly take a relational position. Our point of departure - which is simultaneously the aim of this paper - is that we need to go into the history of the complex and dynamic interplay between state formation and voluntary action in order to understand the changing scope and type of voluntary activities as well as the varying role of the voluntary sector.

This seems especially important in a situation where too few attempts have been made to give an empirically based account of this history within the Scandinavian context,³ at the same time as it could be argued that exactly the experience of these countries is of crucial importance in the overall understanding of the voluntary sector because of its vitality within a state-dominated welfare system (Kuhnle & Selle 1992a:4).

In the remainder of this paper we shall try to give an account of the history of the voluntary-statutory relationship in Denmark and limit ourselves to the subsector of social welfare. Our study is based on two different kinds of sources. First, in order to explore the history from the organizational point of view in depth case studies of 13 different voluntary social welfare organizations were carried out. The organizations were divided into the historically three most important types: mutual benefit societies, philanthropic organizations, and

³ In Norway Kuhnle & Selle (1990; 1992a; 1992b) and Lorentzen (1996; 2000) have worked on the problem; in Sweden Lundström (1995) has offered a brief but very helpful description of the history of social welfare; and in Denmark Klausen (1995) has given a broad and general overview of the history of the third sector, whereas Habermann & Ibsen (1997) have gone into more detail with the subsectors of sport and social welfare.
membership based interest organizations. Detailed case studies of each of these organizations are reported in Bundesen, Henriksen & Jørgensen (2001). Second, in order to explore the general historical transformation of welfare arrangements and social policy, studies of the main social policy reforms were undertaken together with readings of some of the most important Danish works on the philosophy of welfare and social policy.

A History of Danish Social Welfare

Because we pursue a relational or contextual thinking we pay special attention in the following to what one author has termed the “moving frontier” (Finlayson cited in Lewis, 1999:257) between the voluntary sector and government. There has always been some sort of mix between private and public providers of social welfare, so the interesting question is how this partnership has evolved and changed (and why it has changed the way it has).

On the basis of our study we think it is possible to divide the history of Danish social welfare from 1850's to 1990's into four phases:

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4 The 13 voluntary social organizations included in the study were:

A) Mutual benefit societies:
1) The Danish Health Insurance Societies (De danske sygekasser). The first societies were founded in 1841.

B) Philanthropic organizations:
2) The Copenhagen Benevolent Society (Kjøbenhavns Understøttelsesforening). Founded 1874.
3) The Church Army (Kirkens Korshær). Founded 1912.
4) The Blue Cross (Blå Kors). Founded 1895.
6) The National Council for the Unmarried Mother and her Child (Mødrehjælpen). Founded 1924.

C) Membership based interest organizations:
8) National Association for Improved Hearing (Landsforeningen for Bedre Hørelse). Founded 1912.
Phase 1: Unorganized, Liberal Social Policy: The Parallel Bars of Public Poor Relief, Mutual Aid and Philanthropy:

The first phase from roughly 1850 to 1890 is characterized by a classical liberal political context in which many different mutual benefit societies and philanthropic organizations start to flourish. The passing of the free constitution in 1849 sparked off the formation of popular movements and organizations. The assembly who had voted for the free constitution also discussed social provision. A majority voted for the adherence to the old absolutist principle that the state was responsible for those who were not able to support themselves or their families. But the majority also thought that such dependency upon public poor relief should have the consequence that one lost the right to vote as well as ones eligibility. In order to be a genuine citizen one had to be able to support one self. As late as 1871 this division of the population into the deserving citizens and the non-deserving poor was confirmed by the “Public Assistance Committee” who suggested a separated two-tier system of poor relief: one private for the deserving and one, residualist, public for the non-deserving. In accordance with the liberal ideology society should be able to run itself without interference, and state activity should be as limited as possible. Instead it was the duty of the community of citizens through private and philanthropic initiatives to support the deserving among the needy and dependent people (Nielsen 1877). In contrast to this “bourgeois society” public poor relief functioned as a deterrent system of last resort for those who were not able to fully participate in society via the labour market (Lewis 1999:259).

It is therefore characteristic for this period that in between individuals’ self support via the labour market on the one hand and public poor relief on the other a field emerged in which various forms of self help associations and initiatives as well as philanthropic organizations flourished. Three types of arrangements were common.

First, the second half of the century witnessed an impressive growth in voluntary benefit societies for mutual insurance. These societies built upon the principle of “horizontal solidarity”, i.e. homogeneous social groups (e.g. workers) pooled resources in order to compensate for lack of income in the case of sickness, unemployment and the like. A good example of this type of organization is The Danish Health Insurance Societies (De danske sygekasser) who had as their purpose the insurance of citizens during periods of sickness. At least 36 societies were established before 1851, but already in 1867 their number had grown to 335. The societies were build on the principle of voluntary mutual insurance, i.e. subscriptions were pooled and used when individual members
suffered from sickness or accidents and thus were unable to earn life for themselves. Right from the beginning these societies were in the good graces of the public authorities. Especially in the greater industrialized cities local government supported the societies financially on certain conditions. In some cases municipalities were even the co-initiator of mutual insurance societies. The liberal idea of self-help thus had a strong hold both within the state and in the societies (some of the latter, however, opted for a more ‘socialist’, i.e. national, solution based on tax financing). During the formative years government sat up a series of commissions to reflect on how the state best supported the societies. It was not until 1892, however, that these considerations were systematized in the so-called ‘Act of Health Insurance Societies’ (sygekasseloven). This act fixed governmental support to a maximum of 1/5 of the total membership subscription, and laid down certain rules for the societies if they were to be approved by the state, e.g. the maximum amount of money they were allowed to offer, and the maximum period of support for individual members. Services primarily included free medical help, free hospital treatment and financial benefits. In the period following the implementation of the act almost every citizen of limited means was included in some kind of mutual society. The total membership rose from 115,000 in 1893 to 1,234,000 in 1920 (close to half of the population beyond the age of 15). The total number of state approved mutual societies at that time was 1548.

Another important helping system was the so-called “free poor relief funds” (“de frie fattigkasser”). These funds originated out of the recognition that not all dependent people were at the same time non-deserving. The funds which were led by a committee of local citizens built upon an act from 1856 according to which the funds were obliged to support deserving poor without the loss of their right to vote. In order to make such support legitimate the funds should financially build upon private subscriptions and donations. However, it quickly proved impossible to finance the funds through private means only, and already in 1867 local authorities was authorized to support the funds. After a few years public support became the most important financial source.

The third element was private philanthropy, which we divide into two different kinds: “benevolent philanthropic societies” and “pioneer philanthropy”. The benevolent societies had as their main purpose the financial support of the deserving poor and most of them were Christian organizations. It was, however, only in Copenhagen that this kind of philanthropy mounted into some kind of concerted action. In the other parts of the country the free poor relief funds dominated. In Copenhagen private charity disposed of a total amount of 2, 6 mill Danish c. in 1876 whereas public poor relief only had 1 mill Danish c. at its disposal the same year. The distribution of financial support to the deserving poor called for a close investigation performed by voluntary “welfare officers”
in order to decide who among the applicants really deserved the support. To a large extent this decision rested upon a judgement of the “moral qualities” of the individual. Only in those cases where it could be expected that the individual would work hard to improve his or her situation support was decided.

Under the label “pioneer philanthropy” we include those initiatives, which were aiming at improving the conditions for different kinds of disabled groups in society: the deaf, the blind, the physically handicapped and the mentally retarded. Often these initiatives build upon a more or less secular basis and often a skilled person, e.g. a doctor or a teacher who wanted to improve the life chances of the disabled groups through training and teaching, initiated them. The aim was seldom to establish a separate private helping system but to gain public recognition and support for the particular group in question.

Phase 2: The Idea of Social Rights and the Public-Private Partnership:

The second phase from 1890 to 1930/40 is characterized by the gradual crumbling of the distinction between deserving and non-deserving poor. The right to social assistance and social services more and more came to be identified with particular situations in a person’s life (growing old e.g.) rather than the moral qualities of the person. At the same time the sanctions that hitherto had followed public poor relief gradually was removed. Increasing public responsibility created a new context for voluntary organizations in which public and private initiatives began to work in tandem rather than as “parallel bars”.

One of the first signs of the new times was the old age pension reform in 1891 according to which old people could receive public pensions without sanctions. Most notably the system was financed through taxes, which is why this pension reform has been looked upon as a breakthrough in the making of the Scandinavian welfare regime (Baldwin 1990). It was also important that the free poor relief funds were abolished in 1907 and replaced by “municipal relief funds”. Together with the insurance system for the unemployed run by the unions (“A-kasserne”) these municipal funds became the dominant institutions for financial support in this period. This increasing public responsibility undermined the work of the benevolent philanthropic societies and left them with very little legitimacy.

Another sign of change was the leading role in developing social policy, which was taken by some of the greater cities lead by local social democratic mayors in the beginning of the new century. They took a pioneering role in developing such services as school dental clinics, school doctors, local hospitals, and homes for the elderly etc. (Kolstrup 1996).
The new context, however, did not put an end to philanthropic initiatives in general. Already the 1870's and 1880's had witnessed a growth in a different kind of philanthropic organization, namely Christian organizations who worked for the benefit (and saving) of those marginal groups which became more and more visible with the new urban and industrial order: prostitutes, alcoholics, criminals, orphans, homeless, single mothers, widows etc. In Copenhagen the local branch of the Inner Mission, established in 1861, was particular important for the formation of such organizations. Around the turn of the century many organizations, such as The Salvation Army, The Church Army, The Blue Cross, YMCA, parish charities (menighedsplejer), The Christian Association for Social Assistance to Children and Youngsters, The Settlement Movement of Christian Students and many more responded to the new social problems by inventing and organizing social services such as food, clothes, homes, shelters - and, of course, a word of God. In contrast to the benevolent societies these organizations did not cooperate directly with the public authorities in order to investigate individuals’ circumstances. However, they often received public financial support, especially to run their institutions. E.g. within the area of child care “The Children Act” of 1905 laid down that children who were removed from their parents and sent to private institutions should be paid for by the local authorities. Likewise homes for alcoholics received public support already in the 1890's, and in 1913 such homes could be officially approved by the state and obtain regular financial support. In general we can say that government recognized and supported the work of these organizations. We can even say that a new partnership between government and organizations emerged in the beginning of the 20th century in which government paid for services provided by voluntary organizations. This partnership did not any longer rest upon the ideology of the former century according to which philanthropic organizations should pay special attention to the deserving poor. Rather, the new partnership rested upon the conviction that the Christian humanity of these organizations made them particular well suited to cope with the new social problems.

Another important change took place within “pioneer philanthropy”. Gradually different groups of disabled began to represent themselves through membership based organizations, and very often they were supported in this effort by professional groups such as doctors and teachers. In 1911 The Danish Society for the Blind became established, and in 1925 The National Association for the Physically Disabled was put up. Perhaps the most prominent example of this interest representation was the formation in 1934 of an umbrella organisation for national organisations in the disability field called The Danish Council of Organisations of Disabled People (“De Samvirkende Invalideorganisationer”).
Such collective interest representation developed especially around the years of the great social reform in 1933 in which the social democratic government tried to form a coordinated national social policy. In general central governmental initiatives should out weight local (private and public) initiatives. As formulated by the main architect of the reform, K. K. Steincke (1920; 1934), central government should be “the skeleton of the welfare building”. Therefore, it was only logical that organizations for disabled also coordinated their interest representation towards government.

With this reform one could now speak of a horizontal solidarity mediated by government. Instead of the former solidarity where homogeneous groups pooled resources, the individual citizen gradually came to be seen as both a recipient and a contributor to the common public pool. State responsibility was gradually directed towards not only particular groups at risk, but also the population as such. The main part of the working class population was lifted out of the former public poor relief, and most forms of social assistance were now established as a right - although some of them were still needs tested. In stark contrast to the former period the spokesmen of the new social democratic ideology saw the right to social assistance as a prerequisite for upholding ones moral dignity. This did not, however, mean that government saw no future role for the voluntary sector. Quite the contrary, the reform explicitly laid down that services could be contracted out to private and voluntary associations who could perform tasks, which were financed and controlled by government. In this respect the reform formalized and institutionalized the public-private partnership, which had begun earlier in the century. For certain voluntary organizations the reform even expanded the possibilities of providing services, because government was in need of voluntary organizations to implement its policies, simply because no other options existed. With this reform a new era begun in which voluntary organizations gradually was to become instruments of the state. Still, in the 1930's, there existed a relatively balanced partnership in which government recognized voluntary action as an essential part of social policy. One leading philanthropist of the early 20th century, Alfred Th. Jørgensen, also gave his full support to this division of labour: The strength of the state was its capacity to collect and distribute economic resources, whereas the strength of philanthropy was its sense of duty and commitment to help and support the individual in need. In Jørgensen’s eyes cooperation and partnership, therefore, was necessary (Jørgensen 1934; 1939).

The idea of government and voluntary organizations as complementary actors, however, came under attack after the Second World War. The increasing willingness and insistence of government to be responsible for solving social problems as well as providing services created a new context in which voluntary organizations at the end of the phase ceased to be seen as the first line of defence. This line of thinking already began in the second phase with respect to particular groups of disabled. The social democratic lead governments in the 1930's also developed ideas of a coordinated social policy that should prevent the rise of social problems in general. Not only particular groups at risk were the targets of social policy - rather, it was the population as such. We can illustrate this idea by referring to one of the two problems, which dominated the agenda of the 1930s: fear of a decline of the population (the other problem was, of course, mass unemployment).

In relation to the population problem coordinated governmental action had an illustrative effect upon voluntary action. In order to cope with the problem the Danish government appointed a population commission in 1935 with the purpose of providing a basis for decision-making in parliament. One of the commission’s suggestions was to create a nation wide public service for the protection of mothers and expectant mothers. What the commission in fact suggested was to take a local voluntary organization in Copenhagen, founded in 1924, as a model for a national service. With the passing of the “act for institutions for the protection of mothers and expectant mothers” (“Lov om mødrehjælpsinstitutioner”) in 1939 7 institutions were established in the larger Danish cities to work the way the local organization had done in Copenhagen until then. The following years another 7 institutions were sat up. These institutions were directly prescribed by the act, as were also the aims of the institutions: They should organize and provide personal, social and judicial aid and information to expectant mothers. Accordingly different kinds of advisory centres as well as institutions and homes for children, mothers, expectant mothers, mothers with infants and so on were established. The Ministry of social affairs decided Numbers, location etc., and the institutions were led by a board whose members represented the county council, the city council and the local hospital. Furthermore, for the first time in Denmark, the act prescribed the employees to have a formal education, which qualified particularly to social work. Consequently, employees were mainly recruited from the public educational system, mainly social workers from the School of social work in Copenhagen, which had been established in 1937.
Other governmental initiatives in relation to the population problem included financial support from central government to local municipalities to employ visiting nurses, and public schemes for housing subsidies.

The case of the population problem is indicative of two important interdependent trends which came to dominate Danish post war social policy - and thereby the context of voluntary action: growing (central and later local) state involvement and responsibility, and growing professionalization. In the following we will illustrate this by introducing four key elements in post war social policy.

First, it was important that the Danish system became a universalistic welfare state. That is, a type of welfare state in which all citizens by virtue of their citizenship are entitled to services and benefits (Andersen 1999:51). Of utmost importance was the national pension scheme (“folkepension”), which was introduced in 1956 and fully implemented in 1964. As for services it was important that the municipalities in 1964 were made responsible for supplying the necessary amount of childcare institutions as well as certain services for the elderly. Also within health insurance and unemployment insurance changes were made in the 1960's which took the Danish system in the direction of a citizenship state: These areas now became partly tax financed and coverage was made universal (except for unemployment insurance which was still dependent upon prior occupation) (Nørgaard 1999:23,24). The gradual introduction and implementation of a universalistic welfare system in which all citizens (to a certain degree) are dependent, all benefit and all pay (Esping-Andersen 1990:28) - i.e. a system in which all citizens have social rights to services and benefits - naturally stood in sharp contrast to the paternalism of earlier philanthropy. The principle also stood in contrast to the particularism of the earlier period, i.e. the tendency to focus on particular subgroups of the population leaving others behind, as well as the inadequacy of this system to generate enough resources to secure a general coverage of the population as such.5

Second, professional expertise came to dominate social policy. Within most of the sub areas of social policy such as childcare, problems with drugs and alcohol, mental illness, aging etc. professional groups such as doctors, teachers, social workers, psychologists and pedagogues sat the agenda. Instead of the amateuristic approach of the voluntary organizations, services were now demanded which built upon professional knowledge and expertise. We have already mentioned the call in the 1930's for specially trained social workers to tackle the population problem. Other areas, which were thoroughly professionalized in the 1950’s, were treatment of alcoholics and the mentally ill.

5 Behind these reflections one can easily recognize Lester Salamon’s idea of voluntary failure (Salamon 1987:39 ff.).
After World War II doctors came to dominate these areas because medical treatment was found which could help both abusers and mentally ill. Professional groups from within the public system clearly had taken the lead as pioneers in developing social welfare. With respect to the voluntary organizations, this meant that they had to adapt their worldviews as well as their activities and institutions to professional norms and standards. Håkon Lorentzen (1994) has termed this “the doctrine of integration”: voluntary organizations that were running institutions could chose to either adapt to the norms and standards (in many cases this was done by employing professional staff) or close down. Especially in the latter part of this period this trend was radicalized when many institutions were taken over by local or regional authorities, or turned into so called self-governing (“selvejende”) institutions because they were no longer allowed to be owned by private organizations. With reference to the Swedish case Tommy Lundström (1995) has labelled this period “the years of takeover”, a term that could also apply to the Danish case.

The third element is specialization. As a consequence of both professionalization and growing public responsibility, the social welfare system also became extremely specialized and segmented in the post war period. From a legal perspective this could be seen by the fact that laws applying to particular groups governed more and more areas. Different groups of disabled, such as the blind, the deaf, and the mentally ill, got their own laws in this period. From the perspective of social services this could be seen by the many specialized institutions, which shot up in the post war period. One example is the institutions for the protection of mothers and expectant mothers we have mentioned previously, another is the rehabilitation institutions through which the state was responsible for restoring citizens’ ability to work. With respect to the voluntary social welfare sector the specialization trend had the effect that especially the latter part of the period was characterized by a massive growth of membership based interest and pressure group organizations - the prime example would be the extreme specialization of so called diagnosis based associations and organizations for the disabled which took place from the 1960's and onwards (Selle & Øymyr 1995; Ibsen 1996; Anker 1995). Many of these organizations tried to draw public attention to particular problems, improve treatment capacities for their members and stimulate research (Lorentzen 2000:14).

Increasing state responsibility and professional control together with specialization did not mean, however, that no space was allowed for voluntary service provision. In fact many voluntary organizations specialized in running self-governing institutions on contract with public authorities in the 1950's and 1960's. But it is clear that they in many respects lost control over these institutions. With respect to service provision it is obvious that the voluntary
sector became marginalised during this period. It is also obvious that the
dominant societal values and goals of this period increasingly turned the
religious value basis of many organizations into a problem. What was earlier
perceived as the strength of these organizations was now perceived as an
obstacle to secure equal access for all citizens to welfare services.

But gradually specialization and segmentation became a problem and a
political issue. Already in 1964 a reform commission was established to reflect
on how the system could be made simpler and more effective. The commission
looked for the solution in a decentralization of the social welfare system, which
should turn the local and regional municipalities into the first line of defence.
The fourth element is therefore the “municipalization” of social welfare. This
took effect in the 1970's where both a new division of labour between state and
local authorities was implemented (1970) and another social reform was
implemented (1976). The new act of social assistance made the local and
regional municipalities responsible for both administration and provision of
almost all social services. With this so-called “one-string system” local
responsibility and transparency was combined with coordination and expertise.

For many former voluntary organized services these reforms became the
final end. Both The National Health Insurance Societies and the national
Council for the Unmarried Mother and her Child were abolished as a
consequence of the changes. These tasks were transferred to the local public
authorities. For other organizations the reforms meant that new partners were
introduced. Instead of the central state, voluntary organizations now had to
cooperate with local and regional municipalities. Most institutions run by
voluntary organizations (e.g. within the field of child care, care for the elderly,
treatment for alcoholics or mentally ill) were now self-governing institutions
that were both fully publicly financed and regulated by a very tight and
standardized set of rules. Ultimately the municipalities could now denounce
contracts with self-governing and private institutions if the authorities were not
satisfied with the quality of the work.

Jane Lewis (1995:14) has convincingly argued with reference to post war
Britain, that there is “little evidence that the state set out to erode voluntarism”.
We think the same is true for Denmark. Nonetheless, it appears that this is (more
or less intentionally) what happened at the end of the phase, in which voluntary
organizations as service providers to a large extent had to adapt their activities to
public norms and standards.

Phase 4: Voluntary Action Reconstructed as Civil Society:

The idea of an all-encompassing public system, however, quickly came under
attack. From the beginning of the 1980's ideas began to flourish which attributed
positive qualities to voluntary organizations. And once again the shift in political and ideological context changed the position of the voluntary sector.

In a way this story is better known. Denmark became part of a larger international movement in which the ideology of the welfare state was replaced by an ideology of a welfare society. Not only the state but also other societal actors such as local communities, voluntary organizations, self-help movements, private companies etc. were responsible for the provision of welfare and the welfare of the citizen.

One could argue that this development could be interpreted as a further differentiation of the voluntary social welfare sector, namely a construction of a new sphere for civil commitment. It was argued that the drawbacks of the professionalized and standardized public system, besides the financial burdens, were the loss of spontaneous networks for mutual help and feelings of duty and commitment because the state had taken over the responsibilities which formerly belonged to the family and the community (Wolfe 1989; Lorentzen 2000). This sense of duty and responsibility therefore had to be reinvented in order to secure the cohesion of society. One of the first to promote this kind of criticism was the Danish Minister of social affairs, Ritt Bjerregaard (1992), in a speech held at an OECD conference in 1980 on social policy. She was primarily worried about the expansion of the social welfare bureaucracy which she thought represented a goal displacement of social policy: The original function of social policy, namely to secure clients’ needs and reduce conflicts between “the have-nots” and “the haves”, had been replaced by a tendency to expand the number of social workers, consultants, researchers and to expand the number of institutions and treatment facilities in order to secure the growth of “the system” itself. This had two consequences: first, clients were turned into passive objects from which nothing was expected, and second, in a longer perspective, the system would loose its legitimacy. Slowly the welfare state came to be seen not as a part of the solution but as a part of the problem.

In order to change this situation, clients and people in general had to be looked upon not as passive objects but as active citizens. Resources therefore had to be directed to popular movements, grass root initiatives, informal networks and organized groups of different kinds of clients instead of the public bureaucracy. The rebuilding of local communities should be the new goal of social policy. Rather than the function of maximizing interests or the function of providing services, the role of the voluntary sector was to restore civil engagement. All in all voluntary action came to be portrayed as the antithesis of the bureaucratically and paternalistically organised social services of the Danish welfare state. Indeed this represented a remarkable shift in the perceptions of voluntary action: what formerly had been interpreted as an obstacle to secure adequate, reliable and professional services for all, now came to be interpreted
as a necessary challenge and a resource in the building of a future welfare society.

Of course the fiscal pressure, which confronted the welfare state in the late 1970’s and 1980’s, is part of the explanation of this change. But it is difficult to estimate how much this factor explains relative to other factors such as the above mentioned shifts in political and ideological climate (not to talk about how these are related). Another factor, which also has to be taken into consideration, is the role of the professional experts. It is obvious that part of the change also could be explained by the fact that the social assistance act of 1976 did not come up to expectations. At the end of the day it was not possible to create a comprehensive public system in which all needs of the population was met. There were limits to professional help, and there were limits to coordination and policy planning.

Instead of more planning the Danish government from the mid 1980's initiated a number of social development programmes. The aims and the grant policy of these programmes were directed towards local and decentralized initiatives such as those mentioned above by Ritt Bjerregaard. Many of the grants were given to local initiatives run by voluntary organizations, and many grants were given to projects strengthening the joint task solving between local/regional government and voluntary organizations. To further support and strengthen the role and function of the voluntary sector the Minister of social affairs in 1983 established a National Board on Voluntary Effort in order to secure contact and communication between state and voluntary organizations, and later in 1992 a Centre for Voluntary Social Work was established which should offer advice and information to the voluntary sector.

In the summer of 1995 the social democratic government launched a revision of the famous “Social assistance act” (“bistandsloven”) of 1976 motivated by the impression that it was out of joint with times. New and more complex social problems had arisen and a more flexible legal frame for dealing with them was necessary. At the same time simplifications and more coordination between the different parts of the act was wanted. More emphasis was put on individual responsibility, just as users’ influence on services and a readjustment of division of tasks and responsibilities had to be considered. In particular, the latter part of the sentence reflected the by now well-established positive governmental attitude towards private and voluntary organisations. In the preparatory work to the act it was stated, “Voluntary social action is not just a supplement to public efforts, it is an important original contribution to the welfare society” (Socialministeriet 1996:14).

Parallel to the preparatory work the Ministry of social affairs also established a committee, which should report on the role and position of voluntary organised services in future “welfare society”. Here special attention
was given to future conditions of voluntary action, notably the possibilities of a closer cooperation between government and voluntary organisations. Here the tone was no less solemn: “... voluntary action holds potentials which can contribute and inspire to the making of new communities and new forms of task solving” (Socialministeriet 1997:174).

The positive political attitudes towards voluntary organized social services paved the way for some interesting provisions in the new social assistance act (now called the “act of social service”), which took effect from the summer 1998. In the act it is established by law that local and regional government shall cooperate with voluntary social organizations. Obviously, the intention is to encourage the cooperation and building of partnerships in order to coordinate activities and services. It is also established that local and regional governments shall earmark a certain amount of money for the support of these organizations’ activities. Here the intention is to extend voluntary organizations’ possibilities of offering social services. Finally it is established that local and regional authorities each year shall report to the Ministry of social affairs about the cooperation. This provision intends to provide for central control with the local initiatives (Socialministeriet 1998).

This re-opening of space for voluntary action seems to draw on old as well as new ideas and goals. On the one hand, it is obvious that voluntary action has again come to be seen as part of the fabric of the state. In this respect we see a return to the idea of a public-private partnership, which had a strong hold up, to the 1930's. On the other hand, it is obvious that this partnership is not the same as the old one. First, it is clear that much of the new entrepreneurial effort in the voluntary sector has been - to borrow a phrase from Steinberg & Young (1998:256) - fuelled by the creation of opportunities by government, notably the state development funds. Public financial support for voluntary social organizations thus rose from 132 million Danish c. in 1991 to 245 million Danish c. in 1995 (Ibsen 1997). Second, it is clear that the ideal picture of the voluntary sector is not any longer solely the old ones of service provision or interest representation, but rather the new communitarian vision of a stronger civil society. The interesting conclusion seems to be that it is governmental insistence upon and support for this “spirit of voluntarism” that has played a major role in the reconstruction of what seems to be a stronger Danish voluntary social sector.

Discussion

Gidron, Kramer & Salamon (1992:16-20) have offered the following typology of government-voluntary relations, which we find valuable for a final discussion of our findings. They distinguish between four basic models on the basis of two
dimensions, first, the financing and authorizing of services and, second, the provision of services: 1) The dual model in which both government and voluntary organizations are involved in both financing and provision of services, but each in its own separately defined sphere. 2) The collaborative model in which government and voluntary organizations work together, often in a form where government provides the financing and voluntary organizations act as service providers. 3) The government-dominant model in which government plays the dominant role in both the financing and the provision of human services. 4) The third-sector-dominant model in which voluntary organizations play the dominant role in both the financing and provision of services.

Figure 1: Models of Government-Third Sector Relations

<table>
<thead>
<tr>
<th>FUNCTION:</th>
<th>Model 1: Dual model</th>
<th>Model 2: Collaborative model</th>
<th>Model 3: Government dominant model</th>
<th>Model 4: Third Sector dominant model</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Finance</td>
<td>Government/Third sector</td>
<td>Government</td>
<td>Government</td>
<td>Third sector</td>
</tr>
<tr>
<td>- Service provision</td>
<td>Government/Third sector</td>
<td>Third sector</td>
<td>Government</td>
<td>Third sector</td>
</tr>
<tr>
<td>PHASE</td>
<td>1849 - 1890</td>
<td>1890 – 1945</td>
<td>1945 - 1980</td>
<td></td>
</tr>
</tbody>
</table>

Gidron, Kramer & Salamon 1992:18

The first phase in the history of Danish social welfare from about 1850 to about 1890 corresponds to what Gidron, Kramer & Salamon term the dual model. The distinction between the deserving and the undeserving poor served as a guideline for a system consisting of two mutually exclusive sectors: Through private and philanthropic initiatives it was the duty of citizens to support the deserving and the helpable, while the hopeless and undeserving were assigned to the residualist public poor relief system. This division of labour was a logical consequence of the liberal ideology of those days according to which one had to be able to support oneself in order to be a genuine citizen. Limited state activity and the spirit of self-help - supported by the passing of the free constitution in 1849 - therefore defined a space in which voluntary and private initiatives such as mutual benefit societies and philanthropic societies could flourish and act as the first line of defence.
The new urban and industrial order in the latter part of the century increased the scale, complexity and visibility of social problems and gradually the sharp distinction between the two helping systems disappeared. Public funds began to play an increasing role in the financing of voluntary organised services, government had to take increasing responsibility in order to tackle social problems, and the distinction between deserving and undeserving poor gradually was undermined. Sanctions that previously had been tied to public assistance were slowly removed in the first decades of the 20th century and a new division of labour appeared. The second phase from about 1890 up to the Second World War can be characterized as a collaborative epoch, corresponding to Gidron, Kramer & Salamon’s second model, in which private and voluntary organizations worked in tandem with government. In general the new partnership built upon the conviction that the strength of the state was its capacity to collect and distribute resources, whereas the strength of philanthropy was its sense of duty and commitment to help. Services, which were financed and authorized by government, therefore, could be contracted out to private and voluntary organizations. Still, state and voluntary actors were relatively equal partners, but it is rather clear that the emerging public responsibility and social democratic visions of social policy formed an emerging context in which voluntary action came to find a less prominent place. This phase, therefore, could be seen as building a bridge between the former liberal period (built upon the principles of deservingness, needs test and discretion) and the post war social democratic era (built upon the principles of public responsibility, universalism and individual rights).

With the expansion of the social democratic welfare state after the Second World War traditional philanthropy came to be heavily constrained. Gradually government became the dominant actor as regards both the financing and the provision of welfare services, and voluntary organised services now had to follow standards and procedures put up by the state. Obviously, this phase corresponds to the government-dominant model in which many activities formerly run by voluntary organizations were - especially in the latter part of the period - either overtaken by central or local government, or turned into self-governing institutions because they were no longer allowed to be owned by private organizations. In particular the religious organizations experienced heavy constraints because it became more and more difficult to uphold their value base and autonomy in the new ideological climate. The ideal was now a universalistic welfare state in which public organizations run by professional experts should act as the first line of defence. Thus, the guiding principle behind the social reform of 1976 was a coordinated public system in which any social problem could be handled effectively by the same organization.
One should not, however, interpret this as a period of general decline for the voluntary social sector. While the role of voluntary organizations as service providers was weakened, the role as pressure groups and interest mediators was strengthened. The growth of the universal welfare state did not lead to a crowding out of the voluntary social organizations, but to a redirection of the sector’s primary goal. The parallel growth in both welfare state activities and voluntary organized activities in the post war epoch, which has been reported for many countries, also applies to Denmark (Salamon 1987; Selle & Øymyr 1995; Buksti 1980). Many new voluntary organizations were formed in this period in order to put pressure on the welfare state to take responsibility for more and more specialized problems. In this process a constantly expanding inclusion of needs and interests of the population in the domain of possible political themes took place which over time shifted the ideology of the welfare state from “help” to “claims” (Luhmann 1990:27, 37). As for the voluntary social sector the consequence was the creation of a context which, ironically, enabled (rather than constrained) the formation of an enormous multitude of membership based organizations representing the interests of specialized “problem groups”.

We have argued that the period from the beginning of the 1980’s and onwards represent another turn in the voluntary-statutory relationship. It is important, however, to underline that this does not mean that the older roles of interest representation and service provision was left behind. Voluntary organizations still perform important functions with respect to these roles. What we have argued is that the change of ideological climate, which took place, not only in Denmark but also throughout the western world, once again created a new context in which voluntary action now came to be valued for its contribution to restore civil society.

This phase does not easily fit into one of the models of Gidron, Kramer & Salamon. Although the new situation bears resemblance to the collaborative epoch of the 1920's and 1930's, especially mirrored in governmental claims for more partnership and a new welfare mix, it is obvious that voluntary organizations still act in a government dominant environment. Tax financed public services is still the rule and professional expertise still holds a strong position. Moreover, one should notice that the call for voluntary organizations to assume civil responsibilities has come from entrepreneurs rooted not least within governmental organizations and institutions. The balance of power between state and voluntary organizations is thus very different today as compared to the earlier collaborative epoch. Consequently, many commentators (e.g. Lewis 1999; Lorentzen 2000; Selle 2001) have pointed to the danger of turning voluntary organizations into instruments or tools for realising public goals.

With respect to the last phase identified in this study, it seems fair to conclude that public discourse during the last 15 - 20 years has reinterpreted
voluntary social organizations as central actors of civil society. One can even say that this process has helped the voluntary sector to identify itself, as a distinct and coherent sector representing values that present society demands. On the one hand this has enabled voluntary organizations to take on more and new tasks, not least locally - on the other hand the tight structural coupling to central and local government in terms of finance and ideological legitimacy, puts serious constraints on the autonomy of many organizations. More money, more ideological support and more space for voluntary social action, therefore, does not necessarily bring about more civil society - if we follow the German thinker Jürgen Habermas (1992:454) whose conception of civil society refers to opinion-forming associations, around which autonomous public spheres can be built up.

With respect to the whole study we would like to conclude with the following reflections. By following voluntary human service organizations over a long period of time we have been able to identify four very different voluntary-statutory relationships in the history of Danish social welfare, each phase representing different institutional orders. The first phase of liberal social policy supported a dual model with a strong call for self-help and philanthropic initiatives. The next phase in which social rights and public responsibility gradually were introduced and expanded, supported a collaborative model with a strong public-private partnership. The third phase in which the idea of a universalistic welfare state dominated tended to marginalise voluntary service production but strengthen interest representation. Finally, the fourth phase in which heavy critique was thrust upon the welfare state, opened up new space for voluntary organizations as bearers of civil obligations.

Throughout the period voluntary social welfare organizations in Denmark have been structurally tied to government. They have been so, however, in different ways in the different phases we have identified. Consequently, the role and function of voluntary organizations have also changed over time in accordance with shifting societal goals and values. Rather than being static, the voluntary-statutory relationship is a complex and dynamic phenomenon, which constantly is being challenged and reinterpreted. Wider societal transformations, and especially those of the welfare state, thus seems to be of great importance as to understand how (and why) voluntary social action has been enabled and constrained differently over time.
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