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The Moving Frontier in Denmark: Voluntary-State Relationships since 1850

LARS SKOV HENRIKSEN* **and PETER BUNDESEN****

**Associate Professor, Department of Social Studies, Aalborg University, Kroghstraede 5, 9220 Aalborg Ø, Denmark*
email: larsskov@socsci.aau.dk
***Associate Professor, School of Social Work, Tolderlundsvej, 5000 Odense C, Denmark*
email: peter.bundesen@dsh-o.dk

Abstract

This article explores the interplay between state formation and voluntary action in order to describe and understand the changing scope and type of voluntary activities and the varying role of the voluntary sector. It does so by following voluntary human service organisations within the sector of social welfare in Denmark over a period of 150 years. Four different phases of voluntary-state relationships are identified. 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 spaces for voluntary organisations to assume civil obligations.

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 and Selle, 1992a: 2, 3).

As observed by Jane Lewis (1999: 256), the relationship between state and voluntary action has long been at the forefront of thinking on voluntary organisations. Historically there has always been a 'partnership' between the state and the voluntary sector, but the nature of this relationship, in terms of the 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. We think that voluntary action is deeply embedded in wider social, political and economic realities (Seibel, 1990: 46).

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Voluntary organisations have deep historical roots, and there has never been a 'golden age' in which they floated freely in social space (Salamon and Anheier, 1998: 227). Therefore, empirically based historical knowledge is crucial in order to understand present problems and challenges. In opposition to much popular thinking which treats voluntary action as the independent variable – often arguing that voluntary action represents particular 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 and Anheier, 1998: 215; Kuhnle and Selle, 1992a: 2). In order to understand the role and position of the voluntary sector we need to shift 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 organisations at a given point in time presupposes a simultaneous understanding of government. In other countries, such as the USA, the market institution would be equally (or even more) important (Grønbjerg, 1987). There is also reason to believe that within the Nordic countries the ideology of the market will become stronger in the future (Repstad, 1998; Selle, 1998). However, in retrospect 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 article – is that we need to examine 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 roles 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[1], at the same time as it could be argued that 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 and Selle, 1992a: 4).

In the remainder of this article we will explore the history of the voluntary–state relationship in Denmark and limit ourselves to the sector of social welfare. Our study is based on two different kinds of sources. First, in order to explore the history of the relationship from the organisational point of

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Box 1. The 13 voluntary social organisations included in the study

(A) *Mutual benefit societies*

1. The Danish Health Insurance Societies (*De danske sygekasser*). The first societies were founded in 1841.

(B) *Philanthropic organisations*

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.
5. The Christian Association for Social Assistance to Children and Youngsters (*Kristelig Forening til Bistand for Børn og Unge*). Founded 1898.
6. The National Council for the Unmarried Mother and her Child (*Mødrehjælpen*). Founded 1924.
7. The Settlement Movement of Christian Students (*Kristeligt Studenter Settelement*). Founded 1911.

(C) *Membership-based interest organisations*

8. National Association for Improved Hearing (*Landsforeningen for Bedre Hørelse*). Founded 1912.
9. The Danish National League for the Deaf (*Danske Døves Landsforbund*). Founded 1866.
10. The Elderly People's Movement (*Ældre Sagen*). Founded as the Solitary Elderly League (*Ensomme Gamles Værn*) in 1910.
11. The National League MIND (*Landsforeningen SIND*). Founded 1960.
12. The Mad-Movement (*Galebevægelsen*). Founded 1979.
13. The Danish DAMP Association (*DAMP-foreningen*) Founded 1982.

view, in depth case studies of 13 different voluntary social welfare organisations were carried out. The organisations were divided into the historically three most important types: mutual benefit societies, philanthropic organisations, and membership-based interest organisations (see Box 1). Detailed case studies of each of these organisations are reported in Bundesen *et al.* (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 along 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 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

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TABLE 1. Models of government-third sector relations.

FUNCTION	Model 1 Dual model	Model 2 Collaborative model	Model 3 Government dominant model	Model 4 Third sector dominant model
Finance	Government/ Third sector	Government	Government	Third sector
Service provision	Government/ Third sector	Third sector	Government	Third sector

Source: Gidron *et al.* (1992: 18).

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 in particular ways. To guide and structure this discussion, Gidron *et al.* (1992: 16–20) have offered the following typology of government–voluntary relations (see Table 1). They distinguish between four basic models on the basis of two dimensions: first, the financing and authorising of services and, second, the provision of services:

- The dual model in which both government and voluntary organisations are involved in both financing and provision of services, but each in its own separately defined sphere.
- The collaborative model in which government and voluntary organisations work together, often in a form where government provides the financing and voluntary organisations act as service providers.
- The government-dominant model in which government plays the dominant role in both the financing and the provision of human services.
- The third-sector-dominant model in which voluntary organisations play the dominant role in both the financing and provision of services.

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

Phase 1: Unorganised liberal social policy: the parallel bars of public poor relief, mutual aid and philanthropy

The first phase roughly from 1850 to 1890 is characterised by a classical liberal political context in which many different mutual benefit societies and philanthropic organisations start to flourish. Two factors were decisive in this process: one was the passing of the Free Constitution in 1849 which enabled the formation of organisations and mutual associations as parts of social movements for religion, peasants, workers, teetotalism, national defence, and the like. The other was the passing of the Freedom of Trade Act in 1857, which left the early

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working class literally without any social protection. This situation necessitated philanthropic initiatives to combat poverty and other social problems.

The assembly that 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 one's eligibility for democratic assemblies such as parish councils. In order to be a genuine citizen one had to be able to support oneself. 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' which 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 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 participate fully in society via the labour market (Lewis, 1999: 259).

It is therefore characteristic for this period that in between an individual's 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 organisations, 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': that is, homogeneous social groups (for example, workers) pooled resources in order to compensate themselves for lack of income in the case of sickness, unemployment, and so on. A good example of this type of organisation is the Danish Health Insurance Societies (*De danske sygekasser*), which had as their purpose to compensate members during periods of ill health. At least 36 societies were established before 1851, but already in 1867 their number had grown to 335. The societies were built on the principle of voluntary mutual insurance: that is, subscriptions were pooled and used when individual members suffered from ill health or accidents and thus were unable to earn a living for themselves. Right from the beginning these societies were looked on favourably by public authorities. Especially in the greater industrialised cities, local government supported the societies financially on certain conditions. In some cases municipalities were even the co-initiators 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' – that is, national – solution based on tax financing). During

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the formative years government set 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 systematised in the so-called 'Health Insurance Societies Act' (*sygekasseloven*). This Act fixed governmental support at a maximum of one-fifth of the total membership subscription, and laid down certain rules for the societies if they were to be approved by the state (for example, 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 over the age of 15). The total number of state approved mutual societies at that time was 1548.

Another important support system was the so-called 'free poor relief funds' (*de frie fattigkasser*). These funds originated from 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 of 1856, according to which the funds were obliged to support the deserving poor without them losing the 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 were authorised 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 organisations. It was, however, only in Copenhagen that this kind of philanthropy amounted to 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 of 2.6 million Danish kroner in 1876 whereas public poor relief had only 1 million Danish kroner at its disposal in the same year (Mogensen, 1924). 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, was support provided.

Under the label 'pioneer philanthropy' we include those initiatives that aimed to improve conditions for different kinds of disabled groups in society: deaf people, blind people, people with physical handicaps and people with learning difficulties. Often these initiatives built upon a more or less secular basis and

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often a skilled person – such as 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 aid system but to gain public recognition and support for the particular group in question.

The first phase in the history of Danish social welfare from about 1850 to 1890 corresponds to what Gidron *et al.* (1992) 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, 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 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.

Phase 2: The idea of social rights and the public–private partnership

The second phase from 1890 to 1930/40 is characterised by the gradual crumbling of the distinction between the deserving and non-deserving poor. The right to social assistance and social services increasingly came to be identified with particular situations in a person's life (growing old, for example) rather than the moral qualities of the person. At the same time the sanctions that hitherto had followed public poor relief were gradually removed. Increasing public responsibility created a new context for voluntary organisations 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 larger cities led by local social democratic mayors at the beginning of the new century. They took a pioneering role in developing services such as school dental clinics, school doctors, local hospitals, and homes for the elderly (Kolstrup, 1996).

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The new context, however, did not put an end to philanthropic initiatives in general. Already, the 1870s and 1880s had witnessed a growth in a different kind of philanthropic organisation, namely Christian organisations, which 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 and so on. In Copenhagen the local branch of the Inner Mission, established in 1861, was particularly important for the formation of such organisations. Around the turn of the century many organisations, 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 organising social services such as food, clothes, homes, shelters and, of course, the word of God. In contrast to the benevolent societies, these organisations 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. For example, 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. Homes for alcoholics had received public support since the 1890s, and in 1913 such homes could be officially approved by the state and obtain regular financial support. In general, we can say that government recognised and supported the work of these organisations. We can even say that a new *partnership* between government and organisations emerged at the beginning of the twentieth century in which government paid for services provided by voluntary organisations. This partnership no longer rested upon the ideology of the previous century, according to which philanthropic organisations should pay special attention to the deserving poor. Rather, the new partnership rested upon the conviction that the Christian humanity of these organisations made them particularly well suited to cope with the new social problems.

Another important change took place within 'pioneer philanthropy'. Gradually, different groups of disabled people began to represent themselves through membership-based organisations, 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 was established, and in 1925 the National Association for the Physically Disabled was founded. 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 when the social democratic government tried to form a coordinated national social policy. In general, central governmental

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initiatives should outweigh 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 organisations for disabled people 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 of and a contributor to the common public pool. State responsibility was directed towards not only particular groups at risk, but also to the wider population. The majority 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 means-tested. In stark contrast to the earlier period, the spokesmen of the new social democratic ideology saw the right to social assistance as a prerequisite for upholding one's moral dignity. This did not, however, mean that government saw no future role for the voluntary sector (Steincke, 1934). 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 formalised and institutionalised the public–private partnership, which had begun earlier in the century. For certain voluntary organisations the reform even expanded the possibilities of providing services, because government was in need of voluntary organisations to implement its policies, simply because no other options existed. With this reform a new era began in which voluntary organisations gradually became instruments of the state. In the 1930s, there still existed a relatively balanced partnership in which government recognised voluntary action as an essential part of social policy. One leading philanthropist of the early twentieth 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 was, therefore, necessary (Jørgensen, 1934, 1939).

The period from about 1890 up to the Second World War, consequently, can be characterised as a collaborative epoch, corresponding to Gidron *et al.*'s (1992) second model, in which private and voluntary organisations worked in tandem with government. The new urban and industrial order characterising this phase increased the scale, complexity, and visibility of social problems. 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 sanctions that previously had been tied to public assistance were slowly removed in the first decades of the twentieth century. State and voluntary actors seem to have been relatively equal partners, but it is clear that the emerging

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public responsibility and social democratic visions of social policy formed a 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, means test, and discretion) and the coming post-war social democratic era (built upon the principles of public responsibility, universalism, and individual rights).

Phase 3: The idea of universalism and the marginalisation of the voluntary sector as service providers

The idea of government and voluntary organisations as complementary actors 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 organisations ceased to be seen as the first line of defence. This line of thinking had already begun in the second phase with respect to particular groups of disabled people. The social democratic-led governments in the 1930s also developed ideas of a coordinated social policy in order to prevent the rise of social problems in general. Not only were particular at risk groups the targets of social policy, but rather the whole population. We can illustrate this idea by referring to one of the two problems, which dominated the agenda of the 1930s: fear of a decline in the population (the other problem was, of course, mass unemployment).

In relation to the population problem, coordinated government 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 nationwide public service for the protection of mothers and expectant mothers. What the commission in fact suggested was to take a local voluntary organisation 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 seven institutions were established in the larger Danish cities to work as the local organisation had done in Copenhagen. The following years another seven institutions were set up. These institutions were directly prescribed by the Act, as were the aims of the institutions: they should organise 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 and so on, 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 that employees should have a formal education, which particularly qualified them for social work. Consequently, employees were

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recruited mainly from the School of Social Work in Copenhagen, which had been established in 1937. Other government 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 professionalisation. We will illustrate this by focusing on 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. Within health insurance and unemployment insurance, changes were made in the 1960s 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) – that is, 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, with the tendency to focus on particular groups 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.[2]

Second, *professional expertise* came to dominate social policy. Within most of the areas of social policy such as childcare, problems with drugs and alcohol, mental illness, ageing, and so on, professional groups such as doctors, teachers, social workers and psychologists set the agenda. Instead of the amateurish approach of the voluntary organisations, services were now demanded which built upon professional knowledge and expertise. We have already mentioned the call in the 1930s for professional groups to tackle the population problem. Other areas which were thoroughly professionalised in the 1950s were the treatment of alcoholics and people with mental health problems. After the Second World War doctors came to dominate these areas because medical treatment was found which could help both abusers and the 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 organisations, this meant that they had to

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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 organisations that were running institutions could chose either to 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 radicalised 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 organisations. A survey from 1988 indicated a 6 per cent decrease from 1980 to 1986 in the voluntary social service sector's share of institutions (Parsby, 1988).

The third element is *specialisation*. As a consequence of both professionalisation and growing public responsibility, the social welfare system became extremely specialised 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 people, such as the blind, the deaf, and the mentally ill, were given their own laws in this period. From the perspective of social services this could be seen by the many specialised institutions which emerged in the post-war period. One example is the institutions for the protection of mothers and expectant mothers 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 specialisation trend had the effect that especially the latter part of the period was characterised by a growth of membership-based interest and pressure group organisations: the prime example would be the specialisation of so-called diagnosis-based associations and organisations for disabled people which took place from the 1960s and intensified in the 1970s and 1980s. Many of these organisations tried to draw public attention to particular problems, improve treatment capacities for their members and stimulate research (Lorentzen, 2000: 14). A survey of national voluntary social organisations showed that about 30 per cent of the total population of organisations were formed in the period from 1964 to 1983. The study also showed that the area with the highest organisational growth rate was organisations for handicapped people and people with ill health (Anker, 1995: 32–34). These findings are in accordance with other Danish (Ibsen, 1996; Torpe and Kjeldgaard, 2003) and Nordic studies (Selle and Øymyr, 1995).

Increasing state responsibility and professional control, together with specialisation, did not mean, however, that no space was allowed for voluntary service provision. In fact, many voluntary organisations in particular fields specialised in running self-governing institutions in conjunction with public authorities in the 1950s and 1960s. A survey of 20 major national social welfare organisations indicated that the period from 1934 to 1950 was characterised by growth. Government's share of these organisations' total income rose from about

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6 per cent in 1934 to 38 per cent around 1950. Whereas these organisations in 1934 received a total of 500,000 Danish kroner in public support, this figure had risen to 15 million Danish kroner in 1950 (Rudfeld, 1957: 160). For the voluntary social organisations aiming at the least privileged parts of the population, another survey indicated that the government's share of total income even rose to 60–70 per cent around 1970 (Scheuer, 1981: 213).

Gradually specialisation and segmentation became a problem and a political issue. 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 decentralisation of the social welfare system, which should turn local and regional municipalities controlled by elected councils into a multi-purpose, unified system of public support. The fourth element is therefore the '*municipalisation*' of social welfare. This took effect in the 1970s, when both a new division of labour between state and local authorities was implemented (1970), and another social reform was implemented (1976). The new Social Assistance Act 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 governmental responsibility and transparency were combined with coordination and expertise.

For many former voluntary organised services these reforms were the 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, and their roles were transferred to local and regional governments. For other organisations the reforms meant that new partners were introduced. Instead of the central state, voluntary organisations now had to cooperate with local and regional governments. 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.

Post-war voluntary social welfare thus shows divergent trends. In general, we can say that with the expansion of the social democratic welfare state 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 determined by the state. Obviously, this phase corresponds to the government-dominant model in Gidron *et al.*'s (1992) typology. The ideal became a universalistic welfare state in which public organisations 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 organisation.

One should not, however, interpret this as a period of general decline for the voluntary social sector. In some fields, such as shelters and services for the homeless and the poor, treatment for alcoholics, and juvenile homes and

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institutions, the voluntary sector continued to play an important role as service providers. But the funding of this work became heavily subsidised by public sources, and the work often regulated by a standardised set of rules. In other areas, such as day care and homes for the elderly, the voluntary sector was almost totally marginalised as service providers.

The most significant change, however, may be the growth in the number of interest organisations, which started in this phase. The growth of the universal welfare state did not lead to a crowding out of the voluntary social organisations, but to a redirection of the sector's primary goal. The parallel growth in both welfare state activities and voluntary organised activities in the post-war epoch, which has been reported for many countries, also applies to Denmark (Salamon, 1987; Selle and Øymyr, 1995; Buksti, 1980). Many new voluntary organisations were formed in this period in order to put pressure on the welfare state to take responsibility for increasingly more specialised 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 a multitude of membership-based organisations representing the interests of specialised 'problem groups'.

Phase 4: Voluntary action reconstructed as civil society

The idea of an all-encompassing public system, which characterised the former period, quickly came under attack. From the beginning of the 1980s ideas began to flourish which attributed positive qualities to voluntary organisations. Once again the shift in political and ideological context changed the position of the voluntary sector. In a way this part of the 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 organisations, self-help movements, private companies, and so on, 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 professionalised and standardised 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 (1982), in a

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speech given 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 meet clients' needs and reduce conflicts between the 'haves' and the 'have nots', had been replaced by a tendency to expand the number of social workers, consultants, researchers as well as 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 lose 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-roots' initiatives, informal networks, and organised 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 maximising interests or the function of providing services, the role of the voluntary sector was to restore civil engagement. 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 securing 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 1970s and 1980s is part of the explanation of this change, but it is difficult to estimate the importance of this factor relative to other ones, such as the above-mentioned shifts in political and ideological climate (not to mention how these are related). Another factor, which has to be taken into consideration, is the role of professional experts. It is obvious that part of the change could be explained by the fact that the Social Assistance Act of 1976 did not come up to expectations. It was not possible to create a comprehensive public system in which all needs of the population were met. There were limits to professional help, and there were limits to coordination and policy planning.

Instead of more planning, from the mid-1980s the Danish government initiated a number of social development programmes. The aims and the grant policy of these programmes were directed towards local and decentralised initiatives such as those mentioned above by Ritt Bjerregaard. Many of the grants were given to local initiatives run by voluntary organisations, and many grants were given to projects strengthening the joint task solving between local/regional government and voluntary organisations. To further support and strengthen the role and function of the voluntary sector, in 1983 the Minister of Social Affairs

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established a National Board on Voluntary Action in order to secure contact and communication between state and voluntary organisations, and later in 1992 a Centre for Voluntary Social Work was established to 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 step with the times. New and more complex social problems had arisen and a more flexible legal framework for dealing with them was necessary. At the same time simplifications and more coordination between the different parts of the Act were needed. More emphasis was put on the individual responsibility, just as users' influence on services and a readjustment of the 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 notes 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, to 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 possibility of closer cooperation between government and voluntary organisations: '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 organised social services paved the way for some interesting provisions in the new Social Assistance Act (now called the 'Social Service Act'), which took effect from summer 1998. The Act laid down that local and regional government should cooperate with voluntary social organisations. Obviously, the intention was to encourage cooperation and the building of partnerships in order to coordinate activities and services. It also stated that local and regional governments should earmark a certain amount of money for the support of these organisations' activities. Here, the intention was to extend voluntary organisations' abilities to offer social services. Finally, it stated that local and regional authorities should report every year on cooperation to the Ministry of social affairs. This provision has intended to ensure central control of 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 until the 1930s. 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

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voluntary sector has been – to borrow a phrase from Steinberg and Young (1998: 256) – fuelled by the creation of opportunities by government, notably the state development funds. Public financial support for voluntary social organisations thus rose from 132 million Danish kroner in 1991 to 245 million Danish kroner in 1995 (Ibsen, 1997). Second, it is clear that the ideal picture of the voluntary sector is no longer solely that of service provision or interest representation, but also the new communitarian vision of a stronger civil society.

However, one needs to balance the official rhetoric with the actual size, scope, and composition of the Danish voluntary sector. There are great difficulties in obtaining reliable data about this at present, but some indicators can be found. First, it is important to recognise that, compared with the whole voluntary sector, the field of social services is among the smallest. Measured by its share of organisations, social services (dealing with illness, disease, handicap, humanitarian work, self-help, advocacy, and clubs for elderly people) only accounts for about 15 per cent of the total organisational population, whereas about 50–60 per cent are found within sports, culture, and recreation (Ibsen, 1996: 166; Torpe and Kjeldgaard, 2003: 72). The same picture emerges if we look at volunteering. The total share of the population who regularly volunteer is estimated at 35–40 per cent. However, only about 10 per cent of the population volunteer within the field of social services, and an even smaller proportion work in direct contact with people in need. Most volunteers are found within sports, culture, and recreation (Koch-Nielsen and Clausen, 2001).

These scarce indicators are in line with data from Nordic countries such as Norway and Sweden (Sivesind *et al.*, 2002; Helander and Sivesind, 2001). There seems to be evidence that the voluntary sector in the Nordic countries has a particular size and composition, which match the social democratic welfare state of these countries. Measured by employment, the voluntary sector is relatively small compared with other European countries, whereas the sector is relatively large when it comes to the number of volunteers and the amount of volunteering. When it comes to the core areas of welfare provision (social services, health, education) the contribution of the voluntary sector is relatively small, which is explained by the fact that these areas are dominated by central and local governmental provision. In Denmark, total turnover for the population of national voluntary social organisations was estimated at about 1.8 billion Danish kroner in 1997. In comparison, total public expenditure on social services was estimated at more than 50 billion Danish kroner the same year (Ibsen, 1997). Thus, one should be careful not to raise expectations too high. The structure of the Danish voluntary sector does not support the view that the actual problem-solving capacity matches political and ideological ambitions.

We have argued that the period from the beginning of the 1980s and onwards represents another turn in the voluntary-statutory relationship. However, this phase does not fit easily into any of Gidron *et al.*'s (1992) models. Although

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the new situation bears a resemblance to the collaborative epoch of the 1920s and 1930s – especially mirrored in governmental claims for more partnership and a new welfare mix – it is obvious that voluntary organisations still act in a government dominant environment. Tax-financed public services are still the rule, and professional expertise still holds a strong position. Moreover, one should notice that the call for voluntary organisations to assume civil responsibilities has come from entrepreneurs rooted not least within governmental organisations and institutions. The balance of power between state and voluntary organisations is thus very different today compared with the earlier collaborative epoch. Consequently, many commentators (for example, Lewis, 1999; Lorentzen, 2000; Selle, 2001) have pointed to the danger of turning voluntary organisations into instruments or tools for realising public goals. We may see more voluntary social organisations acting as contract partners in the future, but more money, more ideological support and more space for voluntary action does not necessarily bring about more civil society, if by this term we refer to opinion-forming associations, around which autonomous public spheres can be built up (Habermas, 1992: 454). Besides, recent empirical research calls for further investigation of the actual strength of the voluntary sector in combating social problems.

Discussion

By following a limited number of voluntary social organisations over a long period of time, we have been able to identify and describe four very different voluntary–state relationships in the history of Danish social welfare, each 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 were gradually 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 organisations to assume civil obligations.

But how does one explain these changes with respect to the function and role of the voluntary social sector? Our first conclusion is that throughout the period voluntary social welfare organisations in Denmark have been structurally tied to government and have adapted to the changing contexts of welfare policies. Our analysis seems to give strong support to the thesis that in order to understand the role and position of the voluntary sector we need to look at both social forces (such as social movements) and social institutions (such as the state and the market) (Sivesind *et al.*, 2002: 77). As social actors, voluntary organisations are

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embedded in these structures and tend to react to or follow changes in social, political and economic realities. In this respect, to study organisational change is to study the wider transformations of society (Selle and Øymyr, 1995). Many of the organisations we have studied have acted as 'carriers of modernisation'. This is true not only for the mutual benefit societies, who responded to the new context of industrialisation by inventing new types of social security, but also for the Christian welfare organisations, who developed services and institutions for children, single mothers, or elderly people, as well as the interest organisations that fought to expand the rights of particular disadvantaged groups. This does not mean that voluntary organisations are mere empty vessels, but that they act within a specific context, which enables certain activities, while others are ruled out. Thus, the main impression is that within the field of social policy, in which the social democratic welfare state has played such a predominant role, change has taken place as a consequence of external rather than internal pressure.

As a second conclusion we argue that our data point to at least four external sources, which shape voluntary social organisations and thereby the size, role and function of the voluntary social sector. First, the environment of social problems is important, because we have seen that voluntary social organisations redirect their activities in the light of changing needs for combating social problems. Second, human and financial resources, such as the amount of central and local governmental funding, as well as the obligation and willingness to volunteer, play a decisive role in the sector's capacity to act. Third, changing rules and regulations as part of social policy reforms enable particular types of voluntary action, while others are seriously constrained. Fourth, societal legitimacy is important as regards the kinds of social problems that are looked upon seriously by society and the solutions that are seen as appropriate to combat them. Consequently, the degree to which voluntary organisations are seen as an important and necessary part of society changes over time in accordance with shifting societal goals and values.

These factors help us explain why the voluntary–state relationship, rather than being static, is a complex and dynamic phenomenon which is constantly being challenged and reinterpreted.

Notes

1 In Norway, Kuhnle, and 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 and Ibsen (1997) have gone into more detail in the sectors of sport and social welfare.

2 Behind these reflections one can easily recognise Lester Salamon's idea of voluntary failure (Salamon, 1987: 39 ff.).

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