

**SELF-HELP/MUTUAL AID IN NORDIC COUNTRIES:
INTRODUCTION TO SPECIAL NORDIC ISSUE**

CAROL MUNN-GIDDINGS

*Faculty of Health & Social Care, William Harvey Building,
Anglia Ruskin University, Chelmsford, England*

ROAR STOKKEN

*Møre and Romsdal Hospital Trust,
Patient Education Resource Centre, Volda, Norway; and
Norwegian University of Science and Technology,
Department of Industrial Economics and Technology Management,
Trondheim, Norway*

We are delighted to introduce you to our Special Issue on Nordic perspectives on self-help/mutual aid. The articles in this issue will give readers an insight into both the types of self-help groups and activities that occur in some of the Nordic countries as well as the policies and support structures that are a feature of their welfare landscape

Health care and welfare systems provide a context that shapes and responds to the contours of self-help/mutual aid, making the country context very relevant (Borkman & Munn-Giddings, 2008; Dill & Coury, 2008). The issue contains articles concerning Norway, Denmark, and Sweden, but all the Nordic countries (Denmark, Faroe Islands, Finland, Greenland, Iceland, Norway, Sweden, and Åland) are hallmarked by a strong and homogenous welfare state built on similar core ideas and are quite similar to each other by comparison with welfare states in other countries. Even though the articles investigate activities in only three countries, the influence of the “Scandinavian Welfare Model” can be seen as threads in each of the articles.

The Nordic welfare state is funded through taxation that redistributes wealth between the citizens in terms of providing general social insurance with universal and individual social benefits through well-developed and governmental-run social service institutions. The state plays a key role in the promotion and protection of the economic as well as the social well-being of its citizens. The Swedish welfare state is often referred to as “Folkhemmet,” which literally translates into “the folk home,” signifying the role of the state in the Nordic countries.

The health care systems in the Nordic countries are based on unified national policies operating at all levels—local, regional, and national. As in some European countries such as England, health policies have developed a mandate for service users (consumers) to be involved in planning, providing, and evaluating services. Professionals within the social, health, and care fields are in general employed through public services. Most facilities are publicly owned, and the private market plays an insignificant role.

Literature often emphasizes that strong welfare societies coincide with strong voluntary sectors (Salamon, 1987). In all the Nordic countries public provision is dominant, non-profit organizations flourish, and the size of the voluntary sector in many aspects is comparable to that in the United States and England (Lundström & Wijkström, 1997; Salamon, Sokolowski, & List, 2003). However, according to Lundström and Svedberg (1998, 2003), the typical Nordic non-profit organization differs from its Anglo-Saxon voluntary counterpart by being more focussed upon mutual support and functioning less on a philanthropic basis.

This context is therefore quite different from North America and although it shares some welfare features with other European states, particularly the UK, the Nordic welfare system is rather unique and raises some thought-provoking questions about the relationship between professional services and self-help groups and organisations and their position in relation to government policies and systems. As such, this issue is therefore both a compliment and a challenge to our current understandings and helps us to appreciate the core similarities and differences in that most fundamental of human practices: that of helping ourselves and others when we are facing a similar situation together.

This special issue has been made possible thanks to the self-help research grants provided by the Norwegian Directorate of Health. The way these grants came into being is typical of how self-help related issues have entered the sphere of Norwegian policy: They were promised by the Norwegian Minister of Health on a visit to the national self-help resource centre (Norwegian Nodal Point for Self-Help). In the same way, the Nodal Point itself was instigated as a result of the National Plan for Self-Help, which in turn came into being due to a determined and vigorous struggle to get self-help recognised by the Ministry as a viable means for health promotion by the self-help organisation “Self-Help Norway,” which now operates the Nodal Point. This demonstrates a key feature of the Nordic countries; an open dialogue between the government and the public that can often lead to changes in government policies.

The Special Issue was initiated as a means for cooperation and exchange of knowledge between self-help researchers in the Nordic countries. As such, the issue is a joint initiative between Møre and Romsdal Hospital Trust, North-Trøndelag University College and the Norwegian Institute for Urban and Regional Research, which have all received funding for self-help research from the Directorate of Health. Two Nordic self-help seminars have been hosted, where researchers from Denmark, Sweden and Finland participated along with the Norwegian researchers, presenting and critiquing draft manuscripts for potential publication in this and other journals. In addition to feedback provided by Nordic researchers, invited researchers from the UK and United States provided keynotes and feedback on the work in progress. The articles to be found in this special issue are a result of that process and provide just a glimpse of the research publications resulting from this cooperation. The articles in this issue have all been peer-reviewed by one Nordic and one non-Nordic researcher in the field.

In the first article of this issue, Linda Örvulv outlines a fascinating study she undertook with a self-help group for people with dementia in Sweden. The account raises and illuminates a number of issues pertinent to the self-help field. As well as illuminating the agency that people with cognition-limiting conditions can have despite the limitations of their situation, the particular benefits of mutual aid for stigmatised groups are reinforced. The article grapples with the relevance and limitations of current theories on developing shared meaning and liberating meaning systems for groups of people who have a degenerative disease that affects their memory. The narrative includes a description of the sensitive and facilitative role a professional can play in the background of such a group, as well as the valuable learning for practice that come from engaging seriously with groups of this nature.

In the next article, Kjeld Høgsbro traces the change in understanding of self-help activities as represented in public and political discussions in Denmark from 1948 up to contemporary times. Informed by the French philosopher Foucault, he explores the role of discourses in illuminating how and why peers form self-help groups and how these groups are positioned in the welfare spectrum by self-helpers, politicians and the public. In so doing he explores the inter-related discourses on welfare policy, professional forms of welfare intervention, social movements as well as the role of applied social science in supporting or challenging the dominant discourse. The article illuminates how in the Danish context notions about “help” and “adequate support” for citizens are constantly being defined and re-defined as part of a cultural process and as a consequence the understanding and positioning of self-help groups in the welfare spectrum. In so doing the impact (both direct and subtle) of global debates on nation states becomes clear.

In the third article, Marianne Hedlund and Bodil Landstad scrutinize the ideology and policy arguments used to legitimize self-help as public health promotion strategy in Norway. The positioning of self-help in Norwegian policy is

different from the other Nordic countries, but it builds upon the same discourses, policy and governmental structures, and as such it demonstrates important facets of the policy discourse in the Nordic countries. Also this article is informed by Foucault. The authors analyse public documents and search for intertextual elements to establish relationships between concepts related to self-help. Through the analysis they demonstrate that in the process of establishing self-help as a promotion strategy, legitimising experienced-based knowledge as part of health promotion strategy, and modelling how self-help should be undertaken, more responsibility is placed on the individual. As such, they show that the global neo-liberal discourses have found their way into the Norwegian health policies.

In the fourth article Roar Stokken and Johan Barstad investigate self-help projects funded by the Norwegian Directorate of Health to find out what makes such projects flourish or face challenges at the boundary between public and voluntary sectors. In the Nordic context, project funding often follows National areas of commitment. This is a way to develop and sustain grassroots initiatives that are in accordance with the National commitment. Self-help projects that are flexible and communicative/negotiative are in the article found to be more likely to flourish than those attuning to a more instrumental project-strategy, where one is seeking to optimize concrete outcomes listed in the project plans. This reflects the Nordic way of governing society through the need for merging the interests of the government and the citizens in harmonic processes. If such harmonic processes take place, project funding is argued to be a viable way to promote self-help as a grassroots phenomenon. On the contrary, when projects are not negotiating and distributing power across the boundary between public and voluntary sectors, the projects “just seem to” fail. This reflects another Nordic typicality; that of rather few conflict-oriented initiatives.

Finally, this issue, like all others, depends on the contributions of a wide range of individuals. As the process for the issue outlined above suggests, aside from the formal peer review process that resulted in the final published articles, many others from the Nordic Self Help Network contributed to the development of these papers. We would like to thank them for their comments and contributions and acknowledge the time that they have given to supporting this Special Issue of the journal.

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Direct reprint requests to:

Prof. Carol Munn-Giddings
Anglia Ruskin University
Faculty of Health, Social Care and Education
Dept. of Family and Community Studies
William Harvey Building, 2nd Floor
Chelmsford Campus
Bishop Hall Lane
Chelmsford
CM1 1SQ

e-mail: carol.munn-giddings@anglia.ac.uk