

Voluntary Sector Organisation Public Partnerships (IOPs)

- enabling or undermining
the democratic voice of
voluntary organisations?**

Civilsamhällesstipendiet delas ut av Forum – idéburna organisationer med social inriktning, IDEELL ARENA och Famna.

Forum är en intresseorganisation för den idéburna organiseringen och samlar civilsamhällets organisationer med social inriktning.

IDEELL ARENA är ett samarbete mellan idéburna organisationer som syftar till att utveckla det strategiska ledarskapet i den ideella sektorn.

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Förord

Jag vill rikta ett särskilt tack till min handledare Moira Nelson på Statsvetenskapliga institutionen vid Lunds universitet som var till stor hjälp i mitt uppsatsskrivande. Utan hennes stundtals kritiska synpunkter och råd gällande teori och metod hade denna uppsats definitivt inte hållit den kvalitet den nu gör.

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Josefin Smedberg

Sammanfattning på svenska

Idéburna offentliga partnerskap (IOP) är en ny samverkansform för idéburna och offentliga organisationer vars syfte är att finansiera välfärdstjänster som utförs av idéburna aktörer. Traditionellt sett har civilsamhället inte varit en viktig producent av välfärdstjänster i Sverige, snarare har dess roll varit att skapa en demokratisk pluralism i samhället vid sidan av det representativa systemet och att ge röst åt svaga grupper i samhället. Som följd av ett högt tryck på välfärdssystemet orsakat av exempelvis invandring och en åldrande befolkning har idéburna organisationer kommit att få en allt viktigare roll som välfärdsproducenter. Idéburna organisationer har därmed i allt större utsträckning gått från att huvudsakligen ha en *röstfunktion* till att alltmer ha en *servicefunktion*. En svårighet när dessa organisationer säljer välfärdstjänster till offentlig sektor är dock hur självständigheten, som är en förutsättning för att kunna bedriva intressearbete och kritisera det offentliga, ska kunna bevaras. Modellen Idéburet offentligt partnerskap presenteras som en lösning på detta dilemma, en partnerskapsform som garanterar att idéburna organisationer kan bibehålla sin självständighet i samarbete med det offentliga.

Syfte med denna studie är med andra ord att undersöka till vilken grad en idéburen organisation kan förbli självständig och därmed ha fortsatt möjlighet att uttrycka egna åsikter och bedriva intressearbete som del av ett IOP. Fallet som studeras är Röda Korsets behandlingscenter för torterade och krigsskadade i Malmö. I fokus står de tre IOP som ingått mellan dem och de offentliga aktörerna Region Skåne och Malmö stad. Avtalen gäller behandling och aktiviteter för flyktingar och andra asylsökande som lider av posttraumatiskt stressyndrom (PTSD).

Som teoretiskt ramverk för studien används teori om resursberoende och isomorfism. När idéburna organisationer

finansieras av sina IOP-partners antas det att kontroll -och beroendeförhållanden till de offentliga aktörerna kan skapas. Enligt isomorfisk teori antas ett nära samarbete med offentliga aktörer skapa en professionalisering av idéburna organisationer vilket i sin tur skapar ett avstånd mellan organisationen och dess medlemmar. Då organisationens medlemsbas utgör legitimiteten för den demokratiska röstfunktionen hos civilsamhället kan IOP-inträdet teoretiskt sett då hota idéburna organisationers självständighet genom att lika stor hänsyn inte längre tas till medlemmars utan snarare till offentliga partners intressen.

För att kunna besvara frågeställningen samlades material in med hjälp av intervjuer och en dokumentstudie. Slutsatserna efter att detta material analyserats är att Röda Korset lyckats med att förbli relativt självständigt som IOP-partner. Tack vare dialogbaserade uppföljningar och ungefärliga målvärden känner sig inte organisationen särskilt styrd av de offentliga organisationerna de ingått partnerskap med. Det faktum att Röda Korset är med och samfinansierar sina IOP bidrar också till ett minskat resursberoende. Delar av organisationen är professionaliserad genom exempelvis krav på legitimerad personal och har därmed en lös koppling till organisationens medlemsbas. Det har inte påverkats av inträdet i IOP. Denna professionalisering ägde rum tidigare än så. I Röda Korsets fall verkar det som en viss grad av professionalisering har hjälpt organisationen att bibehålla sin självständighet gentemot de offentliga aktörerna genom att man fått en bra förhandlingsposition. Det faktum att Röda Korset bedriver utbildningar inom ramen för IOP-avtalen där de kunnat lära ut om målgruppens behov kan dessutom ses som ett sätt att bedriva intressearbete inom ramen för partnerskapet.

Att särkoppla en organisation och därmed låta vissa avdelningar ha en högre grad av professionalisering än andra som har en starkare medlemskoppling i stil med hur Röda korset gjort kan vara en lösning på svårigheten med att bevara självständigheten i ett Idéburet offentligt partnerskap. Ett annat intressant tillvägagångssätt är att skapa kluster-IOP med ett antal mindre organisationer som finansieras av en offentlig aktör, ett sätt för mindre, inte så etablerade organisationer att kunna bli IOP-

partners utan att riskera att förlora sitt oberoende. Både kluster-IOP och övriga samverkansformer mellan det offentliga och det idéburna är studieobjekt som förtjänar fortsatt uppmärksamhet i samhällsvetenskaplig forskning, särskild med tanke på dess snabba utbredning i svenska kommuner och landsting.

Abstract

Voluntary Sector Organisation Public Partnerships (IOPs) are a new form of collaboration for voluntary and public organisations, which aim to give financial support to a welfare service provided by the voluntary actor. The aim of this study is to examine the extent to which a voluntary organisation can be independent in order to be able to advocate as an IOP participant. The object of study is the Red Cross and their treatment centre for war wounded and tortured in Malmö; their three IOPs established with Region Skåne and The City of Malmö are in focus. Theory of resource dependence and isomorphism is used as a theoretical framework.

Through interviews with relevant actors as well as a document review, the conclusion found here is that the Red Cross has been able to retain significant independence as an IOP participant. Because of dialogue-based follow-ups and soft guidelines, Red Cross staff do not perceive themselves as excessively directed by the public actors. Parts of the organisation are professionalised and have a low member-orientation, but this process took place before the Red Cross entered into the IOPs. In the case of the Red Cross, a certain level of professionalisation seems to have helped the organisation remain independent when working closely with public actors.

Keywords: Voluntary Organisations, Public-Voluntary Sector Relations, IOP, Independence, The Red Cross

Words: 21860

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1 Introduction

An independent civil society is a prerequisite for every prospering democracy. In Sweden for instance, voluntary organisations have traditionally had the important role of promoting various political interests and thereby bringing a democratic pluralism to the system. In this way, civil society has been able to give a voice to weak groups in society. However, in contrast with systems in other European countries, the voluntary sector in Sweden has not played a major role as a provider of welfare service; instead the public sector has been the major provider.

Apart from this advocating function, voluntary organisations have also been seen as ‘democracy schools’ for Swedish citizens as a means for learning how to take part in the democratic process (Lundström – Wijkström 1997, p. 248). Since voluntary organisations have been seen as desirable for both bringing democratic pluralism and teaching citizens about democracy, they have been funded by the state through associational grants designed to support such organisations. The aim of these grants has been to facilitate organisations’ function as independent opinion-makers.

During the late 1980s and early 1990s, the emphasis for voluntary organisations changed from promoting voices and interests to producing welfare services to a larger extent. This development could be seen as challenging the traditional Swedish welfare model, in which the state has been the major provider. The result of this was that a stronger emphasis was put on remunerations for services – in other words, funding that requires performance in exchange for financing from the state. This form of funding can be perceived as more controlled than associational grants, which are intended solely to support the existence of an organisation, facilitate recruiting of new members and help maintain democratic forms of organisation (Lundström – Wijkström 2002, p.148-149).

For civil society to take on the important role of giving input to the political debate and a voice to weak groups, independence from the public sector is needed. In order to remain independent, the organisations and their members need to have control of their own resources and to implement activities as they wish, without the influence of public actors. Independence is necessary in order to be able to criticise decisions and to give expression to the ideology of an organisation, in the public debate as well as in its conduction of activities. This advocating role is desired by Swedish politicians and is stated in the Policy for Civil Society¹.

As voluntary organisations offer welfare services financed by public actors, it can lead to a situation where, through professionalisation, these organisations resemble public organisations. This in turn can lead to a focus on production of high quality in services rather than on helping and highlighting the needs of weak groups dismissed by the state. If loyalty to public actors is created and the members cannot influence the organisation's values and beliefs, it will lose its legitimacy as an actor that is independent of the state. Such legitimacy is crucial if voluntary actors are to serve as a democratic voice.

Recently, one can see a tendency towards an increased reliance on voluntary organisations as new societal challenges arise, for instance due to increased migration. In order to facilitate the collaborations with the voluntary sector, making it possible for organisations to provide services that contribute to societal development without losing their independence from public actors, a new collaboration model has been developed: Voluntary Sector Organisations Public Partnerships² (IOP). One of the main purposes with IOPs is that they should enable the voluntary actor to remain independent and free, despite collaborating with public actor organisations and receiving funding for provision of certain activities. As partner in an IOP, the organisations retain ownership of their activities, preventing these voluntary organisations from becoming a mere sub-

¹ See Section 2.2.

² In Swedish: *Idéburna offentliga partnerskap*. In the thesis, the Swedish abbreviation IOP is used because of its establishment.

contractor to the state (Forum 1). In other words, this model should make it possible for organisations to combine a voice *and* a service function, because organisations are able to retain their independence. The IOP is a new chapter in the history of public-voluntary sector relations in Sweden, and is likely to increase the number of voluntary actors in the Swedish welfare system.

1.1 Purpose

The purpose of this study is to examine how the implemented IOP model affects the capacity of voluntary organisations to remain independent when they produce services financed by the public sector. By understanding the ways in which the voluntary actors are influenced and steered by the collaborating public partner, more can be learnt about the capacity of voluntary organisations to retain their independence. With this new knowledge, analysis can move on to studying the extent to which voluntary organisations are able to use their own voice and contribute to democracy as a partner in an IOP.

IOP is promoted as a funding model for services; it is designed to facilitate the independence of voluntary organisations³. According to previous research, municipal funding that is given for provision of a certain service is more threatening to the independence of voluntary organisations than grants aimed at supporting the existence of organisations (Johansson 2005). When voluntary organisations are paid based on the condition of providing certain services for public actors, it often implies that the organisation is constrained in some way. Shocking examples can be found in countries such as the UK, where so-called ‘gagging clauses are becoming more common – that is, voluntary organisations providing services financed by the public sector are prohibited from criticising societal development (SOU 2016:13 p.160). Even though this is an extreme example,

this motivates the question whether the IOP is a funding model created to further legitimise voluntary organisations as welfare providers, but without giving them possibilities in practice to retain independence. Therefore, this study will focus on the actual possibilities that voluntary organisations have to keep their independence as participant in an IOP.

Three IOPs established between the Red Cross and The City of Malmö/Region Skåne will be in focus for the study. The three IOPs concern activities offered at the treatment centre for torture victims and war-wounded among immigrants and refugees in Malmö; the centre was started in 1988 by the Red Cross (The Red Cross 1). The partnerships in focus concern psychiatric care in different forms to war wounded and tortured refugees and immigrants – target groups not fully covered by the Swedish welfare system. Interviews are used to collect material about the different actors' perceptions of different aspects in the IOP agreements. This material is complemented with information from different documents describing the agreements of the IOPs.

A number of studies with similar research questions have been carried out, but there is a lack of research focusing on IOPs and that consequences this model has for the participating voluntary organisations. As the first IOPs were established in Gothenburg, there are a number of student theses focusing on the partnerships there, but no research has been conducted that focuses on IOPs in Malmö. This motivates a study designed to update the prevailing theory in the context of this new collaboration model. New knowledge in the field can be beneficial both for voluntary actors considering working with the IOP model, but also for political science research, as a way to understand the consequences this new development in collaboration models has for civil society in Sweden.

³ In this study, this and other collaboration models will be treated as given institutions.

1.2 Research questions

In this section, the three research questions are presented. To understand more about the possibilities for the Red Cross to act as a voice within an IOP, the main research question of this study is as follows:

- How can we understand the capacity of the Red Cross to remain independent from public actors in IOPs?

In order to answer this question, independence needs to be operationalised. Hence, this question is followed by two sub-questions that have a descriptive character. These two sub-questions are guided by two different theories that operationalise independence in different ways. With the help of these two questions, the main research question can be answered.

Independence is understood in two ways: 1) as a freedom to use resources the way an organisation wishes 2) as a freedom to do things in a way that is in line with the idea of the organisation and its members. These two understandings originate from two theories, resource dependence and isomorphism; these are explained further in the theory section.

The two sub-questions examined in this study read as:

- How are the resources and activities of the Red Cross being controlled by public actors in the three IOPs concerning a treatment centre for war wounded and tortured refugees in Malmö?
- Which homogenising processes have taken place since the Red Cross entered these three IOPs that have made the organisation resemble a public service provider?

To find out more about the control mechanisms as well as indicators of homogenising processes making the organisation resemble a professional service provider, interviews were held with relevant persons from the Red Cross as well as from Region

Skåne and the City of Malmö. Furthermore, information about funding, control routines, participation of volunteers and influence of members etc, was sought in the documents describing the IOP agreements. With help of this material, the question of whether Red Cross has capacity to remain independent as participant in IOPs can be answered. In the following chapter, a background to the major concepts of the study is given.

2 Background

To give background to the research question, this section will elaborate on the major concepts in this study: *voluntary organisations* and *IOPs*. Definitions and historical contexts of the concepts are provided as well as background information on the Red Cross, its treatment centre and the IOP agreements.

2.1 Voluntary organisations

In order to pinpoint the characteristics needed for an organisation to be classified as a voluntary organisation in this study, a definition will be presented. This definition stems from *The John Hopkins Comparative Nonprofit Sector Project*, an international research project aiming, through comparative studies, to create a definition that allows a comparison of civil society among different states.

According to this definition, a voluntary organisation is first of all formalised or institutionalised to some degree. This means for instance having a board, by-laws and regular meetings. Secondly, it is private, in the sense of being separated from the state. Thirdly, it is non-profit, which implies that economic profit is not distributed to shareholders. Fourthly, it is independent and able to control its business on its own. Finally, it is characterised by ideality, implying that the organisation is supported through donations from individuals or voluntary work (Lundström – Wijkström 2002, p.8)

Within the research on civil society, there is a range of different concepts to describe organisations. The concept chosen in this study is *voluntary organisations*. Other concepts commonly

used but not chosen here are *civil society organisations*, *social movements* or *non-profit/non-governmental organisations*.

The concept *civil society organisations* often refer to the whole range of organisations within that which is covered by civil society. For instance, Robert Putnam uses this concept in a broad sense, covering organisations such as social, civic and leisure groups, fostering civility (Putnam 2000, p.49), which thereby covers many smaller associations. For this study, this concept is too broad, as bigger organisations able to provide welfare services are in focus.

Social movement is a concept that has become more common recently, especially as social media has become a facilitator for mobilisation of new movements. In a Swedish context, the word *folkrörelse* is often used referring to the establishment of popular mass movements in the early 20th century. These movements had a certain organisational style and ideology that have had major importance for the structuring of the voluntary sector in Sweden today. Thörnberg has defined the Swedish concept as organised efforts in relation to certain values or interests (Thörnberg 1943, p.7-8). The reason for not choosing this concept is that it might capture movements with a too-informal character (Lundström – Wijkström 1997, p.26).

In international political science research, *non-governmental organisations* (NGOs) is a common concept that distinguishes these organisations from the state. Lately, the concept *non-profit organisations* (NPO) has also become more common to distinguish actors providing welfare services on a non-profit basis from private actors on the market (Johansson 2005, p.23). The main function of these concepts is to show what they are not, but otherwise these definitions do not carry that much meaning as such.

The concept chosen for this study is *voluntary organisations*, a concept that corresponds to the organisations taking part in IOPs. This concept highlights the unique nature of these organisations in that organisation members work on a voluntary basis to fulfil the purpose of the organisation. In addition, the organisation has been created ‘voluntarily’, which is not the case for public organisations. This resembles the Swedish concept ‘ideell organisation’, frequently used by Lundström & Wijkström. An

advantage with the Swedish term is that it carries a specific meaning: the organisation is built on an idea that is the driving force of the organisation.

2.2 The voluntary sector in Sweden – A historical overview

In this section, a historical overview is presented of the important stages for the role of voluntary organisations in general and their role in Swedish society. This background information facilitates the understanding of the development of the IOP model.

Historically it has been common to describe the relation between the state and civil society as a contract, a conceptualisation originating from the era of the enlightenment. Rousseau, Hobbes and Locke all recommended the establishment of a social contract between the citizens and a king, or the state, to create predictability in a society. In order to organise and represent certain common interests among the citizens, there was a need for organisations (Wijkström 2012a, p.4-6). During the 20th century, social movements in Sweden had big influence over the ‘input’ in the Swedish political system. The input role implied advocacy work in favour of weak groups in society whose voices were not getting heard. These social movements created political parties and the labour union movement (Wijkström 2012a, p.12). The close relations between the state and the civil society in Sweden at this time can be described as corporatist, which resulted in an institutionalisation of organisations within the state system (Wijkström 2012b, p. 104-106). The central role of voluntary organisations in evaluating and within the consultation on amendments is an example of how this specific role manifested itself. Since the 1990s, voluntary organisations can also be found on the ‘output’ side of the political system as welfare providers, receiving remuneration for services provided instead of grants as funding by the public sector. It seems to be emphasised to a greater extent now that voluntary organisations

have an important task in bringing welfare pluralism to the Swedish system.

As a reaction to the reliance on the voluntary sector in welfare provision and apprehensions about excessive dependence on the public sector for voluntary organisations, the right-centre alliance government then in power established the so called ‘Överenskommelsen’⁴ in 2008 together with the voluntary sector and the Swedish Association for Local Authorities and Regions (Sveriges Kommuner och Landsting). This was a formal agreement intended to strengthen the voluntary organisations’ role as independent creators of public opinion, but also to support the diversity of providers in care and health care. The independence of organisations is seen as a fundamental value in Överenskommelsen, and it is emphasised that one of the main tasks of civil society is to mobilise, activate, organise, challenge and debate. The main message in Överenskommelsen according to Reuter is that it should be possible for voluntary actors to combine the role as service provider with the role as a voice (Reuter 2012, p. 219, 229, 231).

In 2009, a new policy for civil society was initiated by the same government, promoting a similar view on the role of voluntary organisations. This replaced the *folkrörelsepolitik* introduced in 2001 (Prop. 2009/10:55 p.31). The two different roles are manifested in the new policy, as one of its stated goals is to ‘strengthen the conditions for civil society to contribute to societal development and welfare, both as *voice* and *service provider* and with a diversity of activities’ (my own translation and italics, Prop. 2009/10:55 p.44). Six principles are suggested in the document that will guide the evaluation of the goals of the civil society policy; one of them is independence (Prop. 2009/10:55 p.44).

⁴ In English: ‘the Agreement’.

2.3 Voluntary Sector Organisation Public Partnerships (IOPs)

In 2010, a collaboration model was developed that guarantees independence for voluntary organisations when providing services in cooperation with the public sector, the so-called Voluntary Sector Organisation Public Partnership⁵ (IOP). The theoretical IOP model was developed by the umbrella organisation *Forum – idéburna organisationer med social inriktning*⁶ which consists of voluntary organisations focusing on social issues. They lobby for a removal of barriers that hinder voluntary organisations' independence and development of new tools that make it easier for them to run their activities (The National Forum for Voluntary Organizations 1).

The idea with IOPs is to create a funding model for partnerships between public and voluntary actors that enables the voluntary sector to receive continuous funding for welfare services they provide. Traditionally, the alternatives for funding have been either *associational grants* or *tendered services*. The purpose of grants is solely to support the existence of organisations, as having a prospering associational life is desirable and contributes to Swedish democracy. In other words, the scope of the grants is too narrow to give voluntary organisations possibilities to provide services. Tender contracts, on the other hand, need to be done according to the Law of Public Procurement in order for municipalities to preserve free competition. As it is the organisation and not the municipality that owns the activity in the contract, this law is difficult to apply. Furthermore, the contract is commercial, which implies that the organisations have to compete with private actors on market-based values (The National Forum for Voluntary Organizations 2).

⁵ This English translation is used by The National Forum for Voluntary Organizations.

⁶ In English: 'The National Forum for Voluntary Organizations'.

The National Forum for Voluntary Organizations has constructed a model that is a mix of the grant and the tender form, IOP, which implies a mutual financing of an activity, provided by a voluntary organisation, that contributes to society. Financing can have a monetary content, but can also be provided as labour. A partnership implies that the partners should be equal and regular dialogues ensure that the agreements are created in accordance with the preferences of all actors. The voluntary organisation owns the activity and should therefore be able to maintain a certain distance from the municipality in order to guarantee independence. Continuous funding of an activity is provided as long as the agreed partnership lasts (The National Forum for Voluntary Organizations 2).

Table 1. *Funding models for governmental-nongovernmental collaborations*

	Associational Grants	Tender contracts	IOPs
Aim	To support existence of an organisation	Delivery of a welfare service	To support independence of an organisation and delivery of a welfare service
Characteristics of funding	From public actor to organisation	From public actor to organisation	Mutual funding of a welfare service
Initiator of collaboration	-	The public actor	The voluntary organisation
Desired function of voluntary organisations	Voice function	Service provider	Service provider with maintained possibilities to have a voice function

Source: The National Forum for Voluntary Organizations 2

2.4 The Red Cross

The voluntary organisation focused on in this study is the Red Cross, one of the most well-known humanitarian aid organisations in the world. In this section, further information is given on this main actor of the study.

The Red Cross helps in catastrophe areas by e.g. handing out food and carrying out preventive work in order to avoid future catastrophes. They are active in 190 countries around the world and the organisation is called the Red Crescent in Muslim countries (The Red Cross 2). The founder of the movement was Henry Dunant, a Swiss banker who had the idea to organise volunteers in order to help war wounded, after having passed by the Italian town Solferino during the battle between Austrian and French-Italian forces in 1859. In 1863, the Red Cross was founded (The Red Cross 3).

In Sweden, the Red Cross has about 1000 local chapters and engages approximately 30 000 volunteers. Especially in the period between the world wars, the Red Cross took several initiatives to improve the situation for poor people in Sweden. Many of these initiatives were later on taken over by the state, such as nursing education started in 1866 and taxi service for disabled and elderly initiated by the Red Cross in 1960 (The Red Cross 2).

The Red Cross Sweden is financed by private donations, companies, international organisations and the government. According to the annual report for 2014, 50 per cent of the incomes came from donations whereas 34 per cent of the incomes were from public financing (The Red Cross 4).

Every fourth year, the members of the Red Cross have the opportunity to influence the organisation and its activities during a national meeting, by submission of motions (Riksstämman). Moreover, the national board is elected on this occasion (The Red Cross 5).

2.5 The IOP agreements of the Red Cross' treatment centre for war wounded and tortured

The treatment centre of the Red Cross for war wounded and tortured in Malmö has three IOPs with public actors; these are described in more detail in this section. In 2013, the first IOP was established with Region Skåne that concerns funding of 270 treatment opportunities for patients suffering from posttraumatic stress disorder (PTSD). This IOP agreement has recently been prolonged until 31 December 2017. The target group comprises war wounded and tortured refugees and asylum seekers in Skåne. In addition to this service, the Red Cross provides lectures and knowledge transfer to actors within Region Skåne as part of the IOP (Region Skåne 1).

As from 1 January 2016, another two-year IOP with the City of Malmö as partner entered into force. This IOP has a focus on a target group similar to that of Region Skåne's IOP, except that the patients in focus are registered at JobbMalmö, an institution designed to facilitate jobseekers' establishment on the labour market. The target group consists of patients receiving support at the City of Malmö's PTSD centre. The IOP concerns 50 treatment opportunities for specialised care offered by the Red Cross. The responsible department within the City of Malmö for this IOP is the Administration for Labour Market, Secondary School and Adult Education (the City of Malmö).

At the same time that this IOP came into force, a three-part IOP created by the Red Cross, the City of Malmö and Region Skåne took effect. This IOP concerns activities for the children and families of war wounded and tortured patients with PTSD. The Red Cross has the capacity to welcome about 70 children and 40 parents to the activities. These activities have a social character and are not clinical treatment. Furthermore, volunteers lead most activities. This IOP agreement also lasts for two years and in contrast to the previously mentioned IOP with the City of

Malmö, the city's Administration for Social Resources is in charge of this IOP (Region Skåne 2).

For the purposes of this study, the different IOPs have been designated as IOP 1, IOP 2 and IOP 3. In next chapter, the theoretical framework applied to these three IOP agreements is presented.

Table 2. *The IOPs of the Red Cross Treatment centre for war wounded and tortured in Malmö*

IOP	Public partner	Activity	Target group	Time scope
1.	Region Skåne	Treatment of PTSD	Asylum seekers and immigrants	2013-2017 (prolonged)
2.	City of Malmö (Administration for Labour Market, Secondary School and Adult Education)	Treatment of PTSD	Asylum seekers and immigrants registered at JobbMalmö, suffering from PTSD	2016-2017
3.	Region Skåne + City of Malmö (Administration for Social Resources)	Children's activities	Children and families of asylum seekers and immigrants with PTSD	2016-2017

Source: Documents describing the three IOP agreements, (Region Skåne 1, the City of Malmö, Region Skåne 2)

3 Theory

To motivate further why a voluntary organisation needs independence from public actors, the first part in this section describes the voice function of voluntary organisations; this is followed by a presentation of earlier studies in the field that provided inspiration for the research questions of this study. In the section thereafter, two different theories that serve as the major theories in this study are described: the theory on resource dependence, first presented by Pfeffer and Salancik, and the isomorphism theory developed by DiMaggio and Powell. These theories are used to show how independence of voluntary organisations can be put at risk in governmental-nongovernmental partnerships.

3.1 The voice function of voluntary organisations

In order to build a theoretical understanding of IOPs, this section discusses the voice and service functions of organisations as well as the potential to combine the two. The importance of the voice role is then highlighted through a presentation of research from scholars describing the important contribution that voluntary organisations can make to the development of democracy.

3.1.1.1. The two functions of voluntary organisations: voice and service

To describe the two major functions of voluntary organisations in society, Wijkström has developed the dichotomy of *voice* and *service* which has become established in Swedish civil society research. The first function, *voice*, is the democratic function. It can be described in terms of an input to the political system, for instance consultation response procedures or opinion pieces in mass media. In addition to the democratic representation incorporated by elected politicians in different democratic institutions, the organisations can represent the voices of weak groups in society or criticise the way in which governmental power is being exercised in the period between elections.

The organisations can also have a *service* function, as an output in the political system, with an emphasis on the production of welfare services. By providing services, the organisations can for example contribute to welfare pluralism by creating a wider choice of employers for people working with welfare services. In addition, voluntary organisations can contribute with their unique character as non-profit, value-driven actors that can provide humanity and mobility to welfare provision.

These two functions are in turn connected to different discourses. Whereas the discourse of voice and influence in society has characteristics such as a focus on the collective, democratic ideals, membership, corporatist solutions and focus on the Swedish arena, the other discourse focusing on service and output has characteristics such as charity, the individual in focus, efficiency, professionalism, a liberal market model and a local/transnational arena (Wijkström 2012b, p. 115-116). Wijkström's observation was that Swedish voluntary organisations have moved from being characterised mostly by their 'voice' function towards a greater emphasis on the 'service' function (Lundström - Wijkström 1997, p.232-235). This is in line with the development from *government* to *governance* often discussed in research on public administration. Governance is characterised by a plural state with a number of interdependent actors providing services (Osborne 2006, p.381-382) which can

explain why voluntary actors now act as service providers to a larger extent than before. It should be mentioned that this does not apply to organisations which offer activities to their own members, such as sport or recreation clubs. Instead, services delivered to groups found outside the organisations are emphasised by Wijkström (Lundström - Wijkström 1997, p.243).

Lately, politicians have desired a combined voice and service role for voluntary organisations in Sweden. This was manifested in both Överenskommelsen and in the Policy for Civil Society, and is probably the motivation for developing a tool such as the IOP. As the voice and the service functions operate in different discourses, it is not obvious how these two roles can be combined. The voice function requires a certain degree of independence from the state and from influence of members. For the state to secure a certain quality of services and a reasonable use of tax money, control of voluntary organisations is required. If an organisation is controlled by public actors, can it be independently managed by its members?

One possible way of combining these two functions could be through an *avant-garde* role. Blennberger has described different roles of voluntary organisations when providing services in relation to the state as *avant-garde*, *complement*, *alternative* or *substitute*. These roles indicate the intentions voluntary organisations have with their service provision. The first role as an *avant-garde* for society implies a role as an observer, looking out for new problems or target groups which the welfare state does not address. The role implies provision of such a service neglected by the state and parallel to the service provision; the organisation tries to get as much attention as possible for this intervention. The intention is that the public sector should take over the intervention eventually, either by providing services to this certain neglected group or using the new methods developed by the organisation. In this way, an organisation can combine the voice and the service function by starting up a certain service delivery, after which the responsibility for the provision can be taken over by the state (Blennberger 1993, p.44). In that way, the relation to the public actors maintains a certain distance. The remaining three roles of voluntary organisations when providing services have their major emphasis solely on service provision.

Research shows that state and municipal actors in the 1990s put a stronger focus than before on services that voluntary organisations can provide and which then figure as a *complement*, *alternative* or *substitute* to publicly provided services. Less attention is devoted to the democracy aspect and the capacity of the organisations to have an avant-garde role (SOU 2001:52 p.176-177).

Other possible ways to handle the problem of combining voice and service roles could be to de-couple the organisations into different sections. Sections that cooperate tightly with the government through service provision are then separated in some way from the section doing advocacy work. This was a strategy in a study by Johansson (Johansson 2005, p.154-155) to structure the governmental-nongovernmental relation of some organisations. The aim of this study is to examine the extent to which the IOP model allows the Red Cross to combine the voice and the service role.

In conclusion, the tradition has been that voluntary organisations have mainly had a voice function in Swedish society. Performing such advocacy work requires certain independence to be able to think in new ways or to be able to represent the voice of weak societal groups not addressed by the state. As the organisations started to take on a larger service role, the financial relation to the state seemed to threaten the independence of organisations. A counter-reaction to this has been to promote possibilities of combining the voice function with the service function. IOPs are an example of such an attempt. This understanding of IOP – as a way to have both a voice and a service role, despite the fact that these roles can be difficult to combine – motivates why it is relevant to examine whether a voluntary organisation can retain the independence needed to implement the voice function, as participant in an IOP.

3.1.2 The voice function's contribution to democracy

The view of civil society as an actor with an important contribution to democracy through its voice function is not a new one. In his classical publication 'Democracy in America', de

Tocqueville emphasises the importance of associations as counterforces to government, having a certain responsibility to 'stand in lieu with those powerful private individuals whom the equality of conditions has swept away'. Associations of civil society are stated to protect against the 'tyranny of majority' and facilitate the circulation of ideas among citizens (de Tocqueville 2000, p. 632).

Another scholar who acknowledged the democratic role of civil society is Robert Putnam, who compared the democratisation process in regions of northern and southern Italy. His conclusions showed that the social capital generated when associational life bloomed helped stabilise democratic institutions (Putnam 1992). These findings motivate many states to promote civil societal engagement.

In addition, more recent research highlights the connection between civil society and democracy, such as Per-Ola Öberg's claim that the possibility to freely engage in civil society and thereby be able to influence politics in other ways than voting, is an aspect that distinguishes democracies from dictatorships (Öberg 2013).

In addition, voluntary organisations have an important task in teaching citizens how to exercise democratic rights (Lundström – Wijkström 1997, p.248). By fostering people in a school of democracy, they can learn how to raise their voice and mobilise, but also take part in the basic values of democracy, such as respect for other's opinions. Traditionally in Sweden, engagement in the political parties has also been a way to foster future politicians and to find persons suitable for political posts in decision-making bodies (SOU 2016:13 p.114).

In addition to this, the voluntary organisations have characteristics that can be seen as more democratic than the features of governmental or private actors that also might contribute to the democratising effect. Hultén and Wijkström identify internal democratic organisations with horizontal decision-making processes as a characterisation perceived as unique for voluntary organisations (Hultén – Wijkström 2006, p.27). Internal democratic structures might be a result of a value system imbued in the organisation, promoting equality as well as creating an organisation's legitimacy. The fact that organisations

in Sweden are often more member-oriented and unprofessionalised than their European counterparts could be a reason for the tradition of having a strong emphasis on promoting interests rather than providing services (Johansson 2005, p. 26). The flat organisation structure makes it possible for members to influence the ideas that the organisation should represent and advocate for.

The question of how civil societal organisations without internal democratic structures or with outspoken anti-democratic goals are contributing to democracy is out of the scope of this thesis, as a democratic structure is included in the definition of voluntary organisations. As this section has shown, the democratic voice of voluntary organisations is important for many reasons, and this motivates why it is desirable that organisations participating in IOPs keep this function.

3.2 Former studies on civil society's capacity to keep the democratic voice in public partnerships

As mentioned earlier, there are no scientific articles published yet examining IOPs. However, the research questions in this thesis and the complications arising from voluntary organisations' cooperation with the public sector have been examined in a large number of studies. A few prominent studies are presented here as well as their contributions to research field on how the democratic voice of voluntary organisations can be retained in public partnerships.

During the 1950s, the era of a growing number of interest organisations and *folkrörelser* in Sweden and their increasing consensual cooperation with public actors, Heckscher (1951) carried out an influential study that examined the relation between the 'organisational Sweden' and the state. The study was a critique of the evolution of corporatism which was posing a threat towards democracy. Heckscher asserted that the

organisations were too incorporated in the bureaucracy to be able to practice their democratic role.

About 40 years later, in 1992, Kuhnle & Selle (1992) completed a study with the ambition to combine the research field of the voluntary sector with the that of welfare studies. The point of the study was to show that it does not make sense to talk about the voluntary sector without taking into account its relation with the public sector, as there are states of dependence between them. The study wants to put an end to myths about the conflictive relation between the two sectors and the view of voluntary organisations as being fully independent. With concepts as autonomy and nearness, the authors compared the independence of the voluntary sectors in different countries.

Nonprofits for hire is a study from an American perspective (Smith & Lipsky 1993) that problematises the contracting culture resulting in an increasing participation of voluntary actors on the welfare market. Smith & Lipsky use an organisational approach and emphasise the change of management, clientele and policies of voluntary organisations as they get governmental funding. In terms of accountability, the loyalty seems to shift towards the governmental employer rather than the organisations' community of origin. The conclusions suggest that the increased efficiency created by contracts negatively affects non-profit organisations' capacity for advocacy.

A similar conclusion was made by Bergmark (1994) in his study of the distribution of associational grants to voluntary organisations in five Swedish municipalities. He concluded that the proportion of grants has decreased in favour of funding models reminiscent of tender contracts. This development, according to Bergmark, could threaten the original purposes of many voluntary organisations.

In Håkan Lorentzen's thesis *Frivillighetens integrasjon* (1993), the concept of integration is central for describing and analysing the relations between the state and organisations. He examines the cooperation between the Norwegian state and three voluntary organisations and asks how conflictive integration processes between public and voluntary actors can be explained. The thesis concludes that the civil engagement is threatened by an increased professionalisation of interest organisations. Employees lobbying

towards the state often do not treat the organisations' members as being that important.

More recently, Johansson (2005, 2001) has conducted research on the influence of municipal funding on voluntary organisations' independence and the consequences for the organisation's role in the Swedish welfare model. In *Ideella mål med offentliga medel*, the funding from Värnamo and Gothenburg's municipalities to voluntary organisations is examined. A tendency highlighted here is that associational grants from the municipalities to organisations have shifted, to be connected to a certain activity to a larger extent than before, so-called *project* or *activity grants*. These grants have features of remuneration for a service rather than being a grant solely meant to support the existence of organisations. The study concludes that more performance-based grants imply an increased steering from the state of the organisations' use of financial resources.

This thesis will use former studies as a starting point. The research of Johansson, for instance, will be very useful – because it suggests that funding related to a certain service can be at a higher risk of being controlled by the state than funding solely meant to support an organisation's existence. In contrast to traditional associational grants, the funding in IOPs is more focused on provision of services than maintenance of organisations. This fact could imply that the independence of voluntary organisations could be difficult to maintain in IOPs, even though this is not how IOPs are presented. In addition, the idea to focus on professionalism builds on the conclusions made by Lorentzen in this disputation. If the voluntary organisation's member orientation is too weak, it can result in decreased independence and instead a strengthened loyalty to public collaboration partners.

In the next section, it is further clarified how the theories on resource dependence and isomorphism can explain that independence of voluntary organisations might be at risk in IOPs.

3.3 The constraining forces of Resource Control and Isomorphism

In order to understand how partnerships between state and voluntary organisations might influence the capacity for organisations to remain independent, inter-organisational theory is used. The resource dependence theory explains how financial relations can create states of dependence and control. The isomorphism theory applied to partnerships shows how voluntary organisations can become more like public service providers, creating ties of loyalty that damage its legitimacy and independence. These two theories will be used to examine whether IOPs allows voluntary organisations to exercise their voice function to a greater extent than other collaboration forms.

These two theories have different assumptions about the world and the behaviours of agents. Whereas the resource control theory assumes that actors are acting rationally and strategically to maximise their self-interests, the isomorphism rests on the assumption that the will of actors is shaped by the behaviour of other actors and other environmental factors. This pluralistic view of actors and reasons for their behaviour enriches the study and its results. It also gives the study an interdisciplinary approach by combining ideas from rational choice and sociological quarters.

3.3.1 Resource dependence

The first theory for explaining how voluntary organisations can be constrained in an IOP emphasises resource dependence.

Voluntary organisations' survival depends on donations and voluntary work; the ready supply of these is never certain. In general, insufficient resources are a feature of the voluntary sector, which implies that governmental support is unavoidable for many organisations. If governmental financial support is conditioned in any way, the voluntary organisations can lose some freedom to manage their own activities. There could be a

fear of losing resources when expressing criticism towards public actors, so that governmental financial support results in a decreased freedom of expression (Salamon 1987, p.39-40,43).

A theory focusing on the decisive nature of environmental factors for the behaviour of organisations is the resource dependence theory developed by Pfeffer & Salancik (2003). This theory claims that as organisations are dependent on their resources, they will also be dependent on environmental factors affecting their resources, for instance, other organisations that provide them with resources. In order for the organisation to survive, it will have to negotiate the possibilities to make adjustments with the funding organisation to secure financing. This implies that the actors with resources have power to control the activities of the organisation. However, as organisations want to remain autonomous, they try to avoid external control to be able to remain independent.

This puts the organisation in a dilemma, as it must choose between autonomy and certainty. In order to get funding and stability, the organisation must give away some of its management discretion. In other words, environmental factors such as inter-organisational structures can affect the behaviour and autonomy of organisations (Pfeffer & Salancik 2003, p. 258-262).

Using this theory allows examination of the question whether the voluntary organisations in IOPs are dependent on public actors when it comes to resources, by looking at control routines and conditions for the funding. If funding to organisations is very conditioned and controlled by the public actor, this implies a control of the voluntary organisation's resources. Organisations need funding in order to assure their survival; resource dependence might compel an organisation not to dare to express criticism towards governmental actors.

A strategy for avoiding resource dependence is diversification. This is an attempt to reduce the dependence on single resource providers by finding multiple sources for funding – in other words, an organisational response to the environment. A high proportion of resources coming from the state might increase dependence, increasing the necessity of state funding

and ensuring the survival of the organisation (Pfeffer & Salancik 2003, p. 126-127).

As the funding in an IOP concerns a certain activity and is not supposed to solely support the existence of an organisation, it is relevant to apply this theory to see how the flows of resources affect the conditions of dependence within an IOP in comparison with other funding models. Since earlier research has shown that the resource dependence theory applies to other funding models, e.g. associational grants, it is of interest to apply it to IOPs and see how the partnership can affect the capacity for voluntary actors to retain their independence.

3.3.2 Isomorphism – processes of homogenisation

In this section, the isomorphism theory is presented; this theory is used to determine whether homogenising processes have taken place since the Red Cross entered into IOPs, so that the voluntary organisation deviates from the ideas of its members.

As mentioned in the description of the democratic contribution of voluntary organisations, the internal democratic structure is a distinctive aspect that manifests how voluntary organisations choose to organise. This structure is crucial in order for members to be able to influence the organisation. If the organisation becomes more steered by the state than by its members, it loses its legitimacy to do advocacy work for groups dismissed by the state. An organisation that has a strong loyalty to public actors cannot act as a counterpart to the state (Lindgren 1999, p. 223). In addition, a strong member orientation is needed in order to generate new ideas, either in an avant-garde way through new kinds of service provision or thoughts that question the politics of the government. In other words, to have the ability to act as a voice for groups dismissed by the state, a voluntary organisation needs to be steered by its member base.

DiMaggio and Powell have developed an extensive theory on homogenisation of organisations that is used here to explain how voluntary organisations can resemble public ones in IOPs. It states that as rationalisation of an organisational field takes place,

it results in a homogenisation and bureaucratisation of the actors in it. An organisational field is defined as a recognised area of institutional life – in other words, all relevant actors in a certain activity field. The field is held together by connectedness, implying transactions tying organisations to one another. In this field, powerful forces urge organisations to become more similar. The central process in this theory is *isomorphism*, defined as ‘a constraining process that forces one unit in a population to resemble other units that face the same set of environmental conditions’. The state and the professions are determined to be the main rationalisers affecting the processes of isomorphism (DiMaggio – Powell 1983, p. 147-149). The state can introduce formal laws or require financial reports, whereas professions can contribute to isomorphism through norms. These norms can be created during education or enter organisations via inter-hiring between different organisational sectors. It is important to emphasise, though, that the isomorphic process itself is irrational, and might ‘turn organisations more similar without making them more efficient’ (Lorentzen 1993, p. 339).

Three kinds of institutional isomorphism are presented by DiMaggio and Powell:

- 1) *Coercive isomorphism*. This implies laws, rules and decisions that one organisation can exert on another. The legal environment in which an organisation operates is an example of a streamlining process. It can also imply adaptation to informal rules that gives organisations legitimacy in an organisational field.
- 2) *Mimetic isomorphism*. If there is uncertainty within an organisation, a process of imitation of a successful organisation might take place.
- 3) *Normative isomorphism*. This process stems from professionalisation and occurs when professionals within an occupation want to establish a basis and legitimisation for their occupational autonomy. The result is that organisations tend to become more similar. (DiMaggio – Powell 1983, p. 150-152).

In the case of this study, coercive and normative isomorphism seem most applicable. If voluntary organisations work in a closely

connected way with public actors in IOPs, within the same areas and with extensive personal contact, it is possible that these mechanisms of isomorphism make the organisations more alike. A partnership seems to fit into the theory as an organisational field. One can imagine that when voluntary organisations act as service providers, they do perceive a certain pressure to become more alike other, professional providers in the field from the private or the public sector. As there is an expectation to deliver services with a certain quality, there might be pressure on voluntary organisations to follow certain laws or to behave in a professional capacity. Since public actors are the actors most established in the field of welfare production, it is more credible that the voluntary organisations are influenced by the public ones than the other way around.

This can imply a loss of the member base of an organisation if members get the impression that the goal of the organisation is to deliver high-quality, professionalised services to the state rather than helping weak groups in society. In this way, a professionalisation can imply that an organisation wants to please the public actors rather than fulfil the will of its members. Therefore, homogenising processes can be a sign that an organisation is dependent on public actors, which can influence its capacity to act as a democratic voice. In other words, there is a tension between the ideas of the member base and an increasing professionalism.

To sum up, the purpose of the study is to answer the question whether voluntary organisations are able to remain independent and to be able to keep their voice function as participant in an IOP, while they also produce services funded by public actors. As voluntary organisations are funded by public actors and work in the same organisational field, as participants in an IOP, the use of the theories on resource control and isomorphism can explain how independence can be influenced. Partnerships implying public-organisation control of a voluntary organisation's resources could imply a loss of autonomy but a gain in financial certainty, resulting in a less critical voice from voluntary organisations. In addition, isomorphic processes imply that a voluntary organisation resembles a public organisation and the

goals of this type of public body when it is active in the same organisational field, which could create distance to its member base that is intended to independently control the organisation. Therefore, these two theories are used to determine whether participation in IOPs can threaten the capacity of the Red Cross to remain independent.

3.4 Operationalisation of theory

In this table, the theories and their concepts are operationalised, showing features that can influence the possibilities for voluntary organisations to retain independence in partnerships with the public sector. These features guided the interview process and review of IOP agreements, addressed further in the next chapter describing the chosen methodology of the study.

Table 3. *Features affecting the capacity for voluntary organisations to remain independent in partnerships with the public sector*

	Low ability to remain independent, strong service orientation	High ability to remain independent as service provider
Resource dependence	<p>High degree of frequent control similar to a tender contract</p> <p>The conditions of the IOP were worked out mainly by the public actor</p> <p>All funding of the IOP comes from public actors</p>	<p>Low degree of control to get funding</p> <p>The conditions of the IOP were worked out in cooperation among all actors</p> <p>The IOP is co-financed by the Red Cross and the public actors</p>
Isomorphism	<p>Adaptation to legal environment, norms and rules of the public sector</p> <p>Orientation on expert knowledge, competence and efficiency</p> <p>Close personal relations to public sector partners</p> <p>High professionalism</p> <p>Lacking possibilities for members to influence activities of the treatment centre</p> <p>Advocacy work and service provision not de-coupled</p>	<p>No need of adaptation to new legal environments, norms and rules</p> <p>Orientation on avant-garde role, highlighting the need of new target groups</p> <p>Loosen personal relations to public sector partners</p> <p>Member orientation</p> <p>Good possibilities for members to influence activities of the treatment centre</p> <p>De-coupling of advocacy work and service provision</p>
Other	<p>The initiative to the IOP taken by a public actor</p> <p>More steered than during the time of being funded by grants</p>	<p>The initiative to the IOP taken by the Red Cross</p> <p>No different from being funded by grants</p>

Table compiled with inspiration from Johansson (2001,2005).

4 Methodology

To find out more about the potential of independence for voluntary organisations in IOPs, a case study was conducted on the three IOPs in which the Red Cross' treatment centre for war wounded and tortured in Malmö is a partner. To examine the ways in which the Red Cross is controlled as a participant in IOPs as well as whether homogenising processes have taken place, two different materials are used, documents and, as primary material, interviews.

To give a background about different aspects of the three IOPs, documents describing the agreements were studied. Analysing the agreements through certain aspects results in material that can guide the interview questions. In a second step, interviews are conducted with representatives from both the voluntary and the public organisations. With help from these interviews, a description was created of how the Red Cross and public actors perceive different aspects in the IOP agreements. To give an answer to whether the capacity of the voluntary organisations to exercise a voice function has changed since the establishment of IOPs, the study has a retrospective character, focusing on the time before the establishment of the IOPs as well as the development of them.

4.1 Choice of the Red Cross as a case

To answer the research questions, a case study was conducted that focused on the Red Cross treatment centre for war wounded and tortured and their three IOPs established with the City of Malmö and Region Skåne. As focus lies on the Red Cross as an actor with a preference to remain independent as opinion-maker

while producing welfare services as participant in IOPs, this state of affairs is assumed to be the case. The Red Cross was chosen as the organisation for study because it is established and well-known and therefore fits the chosen definition of voluntary organisations. To some extent, the three IOPs of the Red Cross are compared, as well as the influence from Region Skåne versus the City of Malmö, but otherwise this study does not have a comparative ambition.

Malmö is one of the biggest cities in Sweden, but no previous studies on IOPs have become available yet for this part of the country; therefore, Malmö is a relevant site for conducting this study. The fact that Region Skåne established some of the first IOPs in the country motivates this choice even more.

The partnerships chosen for the study concern the treatment centre for war wounded and tortured refugees and immigrants that was founded by the Red Cross in 1988 (Red Cross 1). In 2013, a first IOP was established between the Red Cross and Region Skåne. Since then, two more IOPs have been developed and the City of Malmö has tested the IOP model to finance activities at the centre as well. Before that, the centre was financed through associational grants from Region Skåne and the City of Malmö. This development in funding models makes the treatment centre an interesting case, and allows for a retrospective study of it. An organisation that has been part of an IOP for the longest time possible has been purposely chosen. This increases the possibility that it has been influenced by the partnership, which motivates the choice of the Red Cross treatment centre whose IOP with Region Skåne was one of the first partnerships in Skåne and in Sweden. It is also worth mentioning that the IOPs of the Red Cross have served as a role model for other similar IOPs in Sweden, for instance in Gothenburg (The Red Cross 6).

The reason for choosing a case study is to obtain rich, in-depth material that can bring a deeper understanding of IOPs. Since IOP is such a new phenomenon, and considering the absence of research in the field, a case study is suitable for developing knowledge and theory about this specific partnership model. As more partnerships are being established in Sweden and

the research field grows, it will make more sense to test theories on a larger number of cases.

4.2 Methodological approach - Interviews

To find an answer to the question of whether independence can be maintained in IOPs, material has been generated from semi-structured interviews. In this section, the choice of this particular method is explained. After that, further information about the interviewees and the interview process is given, as well as ethical aspects of the methods.

4.2.1 Semi-structured interviews

The main material has been collected using semi-structured interviews. The research questions could also have been answered by means of surveys, but it would not have equally rich material, such as information about the interviewees' experience with aspects of IOP agreements and their effect on the independence of the Red Cross. When using semi-structured interviews, the researcher has guidelines for questions and topics that should be systematically addressed during the interviews, but still has the freedom to digress from the question set. As the intention is to interview persons in different roles from both public and voluntary organisations, it is necessary to be able to adapt questions to the interviewee. Berg suggests that semi-structured interviews can reflect an awareness that individual interviewees understand the world in different ways (Berg 2009, p. 107). As this study has a qualitative character and aims to explore the field of public-voluntary partnership forms, this approach allows the interviewees to contribute new relevant information not asked for in the standard question set. This new information can contribute to development of new theory in the field.

4.2.2 Selecting interviewees⁷

Ten persons have been interviewed for the study. Four of them are representatives from the Red Cross, three represent the City of Malmö and three are from Region Skåne. These interviewees were chosen because of their knowledge about these specific IOPs. As all of them work with IOPs in their organisations on a daily basis in different ways, they were able to give good answers to the interview questions. No members of the Red Cross were selected as interviewees because of their presumable lack of knowledge regarding IOPs, even though this option was considered.

At the time of the interview, three of the interviewees were no longer working for the organisation they represented in the interview. Two of the interviewees from the Red Cross were retired, one of them in spring 2014 and another just a few weeks before the interview. One of the interviewees from Region Skåne is now working for Lund Municipality, with establishment of IOPs. Since the study has a retrospective ambition, it was necessary to use some interviewees who were no longer working with these specific IOPs. The interviewee from the Red Cross who retired in 2014 is still involved in the organisation and the interviewee working in Lund is still working with IOPs, so their knowledge is considered to be more recent; during the interviews, they gave the impression that they could still contribute useful information about the establishment of the IOPs.

The selected interviewees work either 1) specifically with one of the IOPs in focus or 2) with establishment and management of IOPs in general in their organisation. At the Red Cross, three of the interviewees had knowledge of all three IOPs, whereas one interviewee is the manager of children's activities and therefore could only answer questions about that particular IOP. Since two different administrations are in charge of the two IOPs in which

⁷ A list of the interview persons and the interview scheme can be found in the appendix.

the City of Malmö is a partner, two interviewees from the Administration for Labour Market, Secondary School and Adult Education were chosen and one from the Administration for Social Resources. All interviewees from Region Skåne had worked more generally with both IOPs and could answer questions about both IOPs in which Region Skåne is a partner.

4.2.3 The interview process

All interviewees were initially contacted via e-mail. The names of the first interviewees are mentioned as contact persons in the IOP agreements, and through the snowball effect, it was possible to find several more relevant interviewees.

Eleven interviews were conducted with ten interviewees. Nine interviews were face-to-face interviews that were conducted mostly at the interviewee's workplaces or, as in two cases, at cafés. Because two of the interviewees had busy schedules, their interviews were conducted via telephone. Telephone interviews imply a reduced level of communication between interviewer and interviewee as the interviewer cannot see the interviewee's body language or facial expressions. Nevertheless, an article by Irvine et. al. proves that in general, telephone interviewers remain more nuanced or critical to how the lack of visual cues affects the interaction (Irvine et al. 2012, p.89). To strengthen the reliability of the material from at least one of the telephone interviews, it was possible to complement this interview with a face-to-face interview at a later stage. As many other interviewees mention this certain interviewee as a person with a lot of knowledge in the IOP field, it was considered useful to interview her twice.

All interviews were recorded with either a dictation machine or a call recorder application, and transcribed. To gain rapport and make the interviewee feel at ease, every interview began by asking the interviewees to describe their role in the organisation they represent and the way in which they were involved in the establishment of the IOP. The more technical and sensitive questions, for instance about the capacity to remain independent when being funded by public actors, were asked later on in the interviews.

After the interviews, all interviewees were offered the opportunity to review and approve their responses that are cited in the thesis, and the translation of these.

4.2.4 Ethical aspects of the method

In the interview situation, it is important for the researcher to be aware of ethical issues that might arise which are related to the collection of material; therefore, this section examines a few of these ethical aspects.

There could be a risk that the interviewees who work with an IOP on a daily basis are positively biased towards it. The interview questions therefore need to be formulated in a way that does not explicitly reveal the purpose of the study, to provide answers with as little bias as possible. However, ethical research involves explaining the study to the participants (Prior 2003, p. 94), so a suitable trade-off must be made. When the interviews were conducted, the interviewees were informed about the purpose and research questions of the study at the end of the interview.

The interviewees might also have felt hesitation about expressing their opinions on the IOP, as this could endanger the collaboration and create unnecessary conflicts. Offering confidentiality to participating interviewees was a way to allay these fears and justify the study. Although anonymity of the interviewees decreases the intersubjectivity of a study, prioritising protection of the identities of the interviewees was considered more important. The interviewees were informed before the interview that they were free to refuse to answer questions or stop the interview whenever they wished, even though they had previously consented to participate in the study (Kapiszewski 2015, p.226). In accordance with the wishes of the interviewees, the names of the interviewees are not provided in connection with each quotation.

4.3 Additional material: Documents

To discover more about resource control mechanisms and homogenising processes of the three IOPs, the documents describing the IOP agreements as well as The National Forum for Voluntary Organization's description of IOPs are examined in addition to the interview material. The material from the documents is used in different ways, as is explained in this section.

Each IOP has an agreement that describes the activity in focus, the conditions for the IOP and the basic values on which it is based. As these documents constitute the nature of the partnership, they are indeed relevant material to use. However, the interviews serve as the primary material, as the agreement is assumed to describe the partnership in theory, and not its implementation.

In a first step, the information from the documents primarily feeds into the background information on IOPs in general that is presented in the background section of the thesis, especially the material from The National Forum for Voluntary Organization documents. As well, the document material guides the formulation of interview questions. In a second step after the conduction of interviews, the documents are analysed once again. In this way, the documents also make a triangulation of the interview material possible.

In this second step, the analysis of the documents is based on the two first research questions of this study: *control of resources and activities* and *homogenisation of organisations*. With these questions in mind, the agreements are searched through after aspects that might tell something about the capacity of the Red Cross to remain independent as a partner in an IOP.

When using documents, Prior recommends that the researcher should not treat the content as a static material, but be aware that the process of reading the document makes the content situated rather than fixed. The content of the document must be viewed from the perspective of both the production and the consumption of it – processes taking place in the context of

socially organised circumstances (Prior 2003 p.4, 10-11). As in analysing poems, books or scientific papers, there is also a need to view the author as a subject when analysing formal documents such as acts of legislation or reports (Prior 2003, p. 12).

With this in mind, the documents are used in a critical way; for instance, it was assumed that the IOP agreements are written in a way that does not give a picture of the Red Cross as being dependent on public actors. The reading of documents was carried out in an unbiased and transparent way as possible and the information was compared with the answers of the interviewees.

4.4 Analytical strategy

A content analysis was used to examine and analyse the interview material. This method consists of two steps: first, a *coding operation*, and then a *data interpretation process* (Prior 2003, p.339).

The first process is a coding of the content of the material; in other words, a data reduction. It is important to make a data reduction that maintains the context of a certain word or expression but that still enables creation of concepts (Lantz 1993, p.82-84). The codes are created with inspiration from the table in the theory section, showing how theoretical concepts are operationalised (see Section 3.4). The data was also observed to detect any new codes that might emerge. In a second step, these codes were transformed into dimensions that mirror the raw material in terms of how the interviewees answered the interview questions (Lantz 1993, p.84). In a final step, the data was searched to detect patterns.

The identified patterns as well as new categories of evidence resulting from the data were then interpreted in the light of theory and earlier research. With help from this interpretation, conclusions were drawn.

4.5 Limitations of the study

This section presents the limitations of the methodology of the study.

The major weakness of a case study is the limited ability to generalise. Even though the study can surely generate insights about the IOPs in focus, it is difficult to tell whether these conclusions apply to other IOPs in Sweden. Nevertheless, the study has potential to develop theory and reveal causal mechanisms through the deeper understanding about IOPs which is generated from qualitative material.

The choice of primary method, interviews, can also imply a risk of non-reliable material. As the study focuses on comparisons in time, it was crucial that the interviewees had a good memory and could give an accurate picture of the period before the establishment of the IOPs. It is hoped that the additional use of documents has alleviated this limitation to some extent.

The use of interviews also implies the risk that the material will be biased due to the specific interview situation. For instance, perceptions of the interviewer's identity and personal traits might affect the interviewees' answers and can thereby cause an interviewer effect (Kapiszewski 2015, p.222). By showing awareness of the reflexivity process when conducting the interviews and analysing the material, an attempt has been made to make this bias as small as possible.

Another limitation of this study involved the access to interviewees. Two persons from the City of Malmö, who probably could have contributed with useful information owing to their participation in the formulation of the IOP agreements, were not available for an interview in the time span earmarked for the interviews. Two other useful interviewees from the City of Malmö who have also worked with the IOPs in question were interviewed instead and the information that they could contribute is considered sufficient for making reliable conclusions.

To further track the homogenising processes, the methods used in this study could have been complemented with an ethnographic approach to examine the relations between

voluntary and public actors at the steering groups' meetings. Due to the limited time scope of this study, such an approach was not possible since these meetings take place only twice a year.

In the next chapter, the material generated from the interviews and the document review is presented and categorised in accordance with the theoretical framework, showing evidence of potential resource control and isomorphic processes.

5 Results

After the completion of the 11 interviews and the document review, the results indicated that in many ways the Red Cross has been able to maintain independence despite participation in IOPs, even though some evidence also suggests a certain resource dependence and homogenisation. The categorising of the results in this chapter mirrors the theory of the study and the way the material was coded. Each section begins with a presentation of expressions and formulations from the IOP agreements and documents from The National Forum for Voluntary Organizations. Thereafter the material from the interviews is presented.

All quotations in this section have been translated into English, as it is the language of the thesis. To increase the transparency of the study, the original formulations in Swedish have been added in the appendix.

5.1 Evidence for resource control

To collect evidence for potential resource control, the interviewees were asked questions related to co-financing, the commitments of the IOPs as well as the validation of the fulfilment of these commitments. In this section, the material related to these aspects is presented.

5.1.1 Co-financing

One way to decrease resource dependence is to diversify the sources of funding. Reviewing the documents describing the IOP agreements revealed information about the financing of the IOPs. In two of the three IOP agreements (IOP 1 & 3), there is some kind of co-financing, meaning that not only the public actors but also the Red Cross contribute in monetary terms to the activity covered by the IOP (see Table 4). In both these IOPs, the Red Cross is also expected to contribute with volunteers. In IOP 3, it is even stated that the voluntary work is part of the self-financing (Region Skåne 2). The IOP with the City of Malmö does not have a self-financing component; the city covers the entire cost of 1 500 000 SEK per year.

Table 4. Monetary co-financing of IOPs

	Total amount	Region Skåne	City of Malmö	Red Cross
IOP 1	8 150 000 SEK	6 520 000 SEK		1 630 000 SEK
IOP 2	1 500 000 SEK		1 500 000 SEK	
IOP 3	1 070 000 SEK	400 000 SEK	400 000 SEK	270 000 SEK

Source: Region Skåne 1 & 2, the City of Malmö

According to the interviewees from the Red Cross, it has been important for the Red Cross to keep a certain degree of self-financing in the IOPs. The reason for this is that public actors should not be able to make excessive demands on the Red Cross. Paying a part of the IOP cost themselves means the Red Cross is freer, for instance, to express opinions on access to health care by offering services to migrants who otherwise do not have such access. As expressed in the following quotation, the fact that the Red Cross does not require patient fees is a consequence of the independence gained from co-financing:

‘...We are not 100 % financed by the region, but the majority of the money is from the region, about 80-85 %. And that is kind of a conscious strategy from our side, because we also want a

certain freedom when it comes to the attitude we take towards the health care we provide, that we have a possibility to keep our independence. It could e.g. manifest itself through that not having to pay a patient fee at our centre...'

(Interviewee 1, the Red Cross, 2016)

In addition to that, the self-financing allows the Red Cross to run other activities parallel to the activity described in the IOP, such as advocacy and formation of public opinion. Moreover, the organisation can apply for financing through other channels, depending on the activities they wish to arrange. This is beneficial for the children's activities at the centre:

'...then I can apply for money depending on what different activities I want to arrange. And then it does not have to be that controlled. For instance, for summer camps, I can apply to funding sources that finance summer camps. Or if I want to develop something I can apply for money on that basis. So it becomes freer in some way as well.'

(Interviewee 2, the Red Cross, 2016)

Interviewees from the City of Malmö highlight the sense of participation and an aspect of interdependence rather than independence.

'I think it is more about projects as an ownership and that both partners should feel both participation and responsibility'

(Interviewee 1, the City of Malmö, 2016)

Hence, these interviewees seem to have a slightly different view on the advantages of co-financing as compared with the Red Cross.

5.1.2 Commitments and their creation

By examining the commitments of the IOP agreements and the way these were agreed upon, more can be learnt about how entering into IOPs has affected the Red Cross' independence. The

commitments can be interpreted as conditions for acquiring funding.

In the IOP agreements, the commitments of each actor are described. In IOP 1 (in addition, as mentioned earlier, to having **about** 270 patients in treatment every year), the Red Cross should offer lectures and occasions for knowledge-sharing to collaboration partners within Region Skåne (Region Skåne 1).

In IOP 2, 50 treatment opportunities should be offered by the Red Cross. Both partners in the IOP are assumed to contribute to sharing of knowledge, even though this is not further specified in the agreement (the City of Malmö). The same holds for the third IOP, but while the activities that should be conducted for **about** 70 children and 40 adults are covered here, knowledge-sharing is merely mentioned in passing (Region Skåne 2). In IOPs 1 & 3, the quotas of patients, as highlighted above, are not absolute but approximate; this implies a rather weak control of commitments.

When it comes to the formulation of goals, in IOP 3 it is stated that the agreement was worked out in cooperation with all partners. This is supported in the interviews with the Red Cross, as all respondents noted that there was a common, equal discussion with the other actors.

‘...yes, I think there was an equal discussion about that. And we had talked pretty much about it and as I said before, our cooperation had a history as well that we could base it on.’

(Interviewee 3, the Red Cross, 2016)

This picture is also confirmed by the public actors. An interviewee from the City of Malmö claims that the fact that Red Cross is such a professional organisation, with professionalised activities, facilitated an equal discussion:

‘...if we had entered into an IOP with another organisation and within an area that was not that professionalised, we could have had another situation. Now it is so professionalised that they

are under the jurisdiction of the Health and Medical Services Act⁸, and with that, and the role they have played, they have strength in what they do. So I think... so that implies that I think we were equal.'

(Interviewee 2, the City of Malmö, 2016)

An interviewee from Region Skåne pointed out that the Red Cross itself formulated the text in the IOP agreement that described their task, which indicates fewer tendencies of resource control. However, both the interviewees from Red Cross and the City of Malmö stated that it was a bit difficult to formulate the agreement for IOP 2. One of the Red Cross interviewees indicated that the civil servants tended to talk in terms of public procurement:

'...one of the IOPs with the City of Malmö [...] there I think it was pretty difficult. I think the dialogue was not as good, about what it was that should be delivered and how and which kind of follow-ups should be made. There I think the municipality touched on, at least at the beginning, and had a reasoning that was close to a tender contract'

(Interviewee 1, the Red Cross, 2016)

A representative from the City of Malmö felt that there were problems in agreeing on the targets in the creation of this IOP:

'What I perceive as different with this process, was pretty much how tough [it was], we had to work a lot with the agreement, or the writing of the IOP, for us to have the same picture...'

(Interviewee 2, the City of Malmö, 2016)

In other words, it appears to have been more difficult for the Red Cross to make an IOP with the City of Malmö than with Region Skåne.

⁸ Hereinafter HSL, the acronym for the Swedish name Hälso- och sjukvårdslagen.

5.1.3 The control of fulfilment of commitments

Control or validation of the different actors' fulfilment of stated commitments is similar in all IOPs for the treatment centre. This is an aspect that can clearly indicate any resource dependence. The Red Cross is required to produce an activity plan and an annual report every year (Region Skåne 1, the City of Malmö, Region Skåne 2). Follow-up on fulfilment also includes meetings held at least twice a year (for IOP 2 & IOP 3). In accordance with IOP 1, Region Skåne makes regular follow-up visits to the centre.

When the interviewees were asked about how they perceive these control routines, several of the Red Cross' representatives highlighted the importance of how they are not paid per hour of treatment but per treatment occasion. This enables the centre to adapt the treatment to the needs of the target group and to remain independent to a larger degree. One interviewee talks about this in a context of the trend of cognitive behavioural therapy (CBT), which might not always suit the target group of the centre:

'But it has been one type of method that has been popular, everyone should have the same number of treatment sessions, for example 10 times. And then one should run the programme and this I think it is dangerous when financiers come in and steer what kind of treatments one should use and especially in an organisation where one has that a lot of experience with this specific target group.' (Interviewee 3, the Red Cross, 2016)

Interviewees from the Red Cross also responded that the quotas are not maximised or free in form:

'We also have an agreement that says that we should give treatment to about 200 patients, it is approximately that number of treatment hours, but it is not followed up in that way... "now you only treated 197, you should have done 200".'

(Interviewee 1, the Red Cross, 2016)

The public actors interviewed agreed that the control is not very strict. One of them responded that the follow-up is based on dialogue rather than on facts.

‘...it is based on dialogue, because there are no concrete goals other than that they should fulfil more goals than just good health care [...] it can’t be based on facts so it has to be based on dialogue’.

(Interviewee 2, Region Skåne, 2016)

When comparing the follow-up and control routines of the IOP agreements in comparison to earlier funding models, a couple of actors from different organisations responded that the difference is not that great, but the requirements are a bit clearer and agreements regulate how often the participating actors should meet.

‘...yes, I would say that we have put a number of requirements related to control, transparency and follow-up that I think were well expressed in the agreement.

Interviewer: And they are a bit clearer than earlier during the time of the associational grant?

- Yes, I would say so.’

(Interviewee 2, the City of Malmö, 2016)

To sum up, the co-financing in two of the IOPs seem to have been beneficial for the independence of the Red Cross. In addition, the equal creation of commitments and a fairly soft control of these indicate low resource dependence.

5.2 Evidence for homogenisation processes

To obtain evidence of whether the Red Cross has taken on the resemblance of a public service provider, the interviewees were asked questions related to professionalism, contact and member

orientation. In this section, their answers on this theme are presented.

5.2.1 Adaptation to laws and norms

A clear indication of homogenisation in this context is whether the Red Cross has had to adapt to laws and norms of the public sector, so that the organisation begins to resemble a public organisation (coercive isomorphism). Examination of the IOP agreements revealed paragraphs describing the laws that the Red Cross is expected to follow as partner of the IOP. All three IOP agreements mention that they are under the jurisdiction of the HSL, as they are care providers (Region Skåne 1, the City of Malmö, Region Skåne 2). It is also stated in IOP 1 & IOP 3 that the Red Cross shall commit itself to following the laws, rules and norms that have been issued by the public authorities. In these two IOP agreements, the Red Cross is also expected to follow laws regulating all employer organisations (Region Skåne 1 & 2).

From the responses by interviewees from the Red Cross, it becomes evident that the Red Cross was under the jurisdiction of the HSL long before the establishment of the IOPs with public actors. The adaptation to the HSL took place about 10 years ago, according to one of the interviewees:

‘No, we had that before already. I mean, we are a care provider under the jurisdiction of the HSL, we have to follow all regulations to work as a care provider within the HSL. We write patient journals according to approved systems and we have the same kind of inspection, deviations, reporting, patient safety, everything that applies to any care provider [...] 10 years ago since the Patient Safety Act law was made stricter, so that has helped us. So from that point of view nothing changed’.

(Interviewee 1, the Red Cross, 2016)

Furthermore, according to Swedish law, the activity leader for children’s activities has an obligation to report the matter if she witnesses a threat to the wellbeing of a child. This is also not an adaptation that was made because of the IOP.

A few interviewees from both the Red Cross and Region Skåne answered that other organisations or associations might have been more influenced than the Red Cross when they became IOP partners, as they were already working with activities that required a certain professionalisation before the IOP. The Red Cross offers health care services, so it was unavoidable even before the IOP that the organisation was required to adapt to certain laws and thereby professionalise. In other words, it is the field of activity that matters when it comes to whether an adaptation needs to be made.

‘I think it can be different for other activity areas, that if it is not health care it is possible that one must undergo some kind of adaptation, but it has not affected our activities at all.’

(Interviewee 4, the Red Cross, 2016)

For instance, an interviewee from Region Skåne said that some other associations had to appoint an Operations Manager when they entered into an IOP.

‘...simultaneously there were many things that were new for some other organisations, you must have an Operations Manager, you have to follow this [kind of thing], the health care laws... you have to keep track of this [...] In that way it was revolutionary for some of the other organisations, but not for the Red Cross’.

(Interviewee 1, Region Skåne, 2016)

On the other hand, an interviewee from the City of Malmö highlighted that voluntary organisations have to allow scrutiny of their accounts when entering an IOP, and this could indicate that an adaptation process took place because of the IOP.

5.2.2 Professionality and quality

This subsection examines the question of whether normative isomorphism has taken place, by looking at perceptions of increased professionalism and quality. In the first IOP agreement signed with Region Skåne, IOP 1, the professionalism of the Red

Cross is emphasised; the IOP states that the personnel group consists of legitimised treatment providers (Region Skåne 1), but no further information on this theme could be found.

In the interviews, the interview persons from the public organisations were asked if they perceived the Red Cross as a professional actor. Interviewees from the City of Malmö answered that they perceive the Red Cross as an organisation as professional as their own:

‘I do not perceive that it is voluntary forces but it is a professional organisation that meets another professional organisation.’

(Interviewee 2, The City of Malmö, 2016)

A Region Skåne representative answered that she does not perceive the Red Cross as less professional than other organisations but also highlighted the fact that the voluntary organisations are not expected to deliver quality in the same way as private actors:

‘No, I cannot say that I think that, but maybe we do not use as strict means of control as we use for the private ones [...] I mean there are more concrete quality targets that they should fulfil and we don’t have that for the voluntary organisations, not today at least’

(Interviewee 2, Region Skåne, 2016)

Contradictory to the former quotations, the interviewees from Region Skåne also emphasise the importance of the fact that voluntary organisations in general need a certain maturity in order to participate in an IOP.

‘The voluntary sector has to become a bit more mature, they have to mature a bit more before [...] not really there yet. And I think this relates to the fact that the Swedish society does not build on this’

(Interviewee 3, Region Skåne, 2016)

This can indicate a certain pressure on voluntary actors to professionalise in order to qualify for an IOP.

When asking the Red Cross representatives to describe the way that the participation in IOP has affected the quality of their services, the interviewees all answered that it allowed them to have a long-term perspective that enabled them to develop their activities.

‘...because we have got money now from the City of Malmö and Region Skåne, we do not need to apply for funds, worry about what happens in 2017 or 2018, because we know that we have financing until 2018. And then we can develop much more and do it in a way that strengthens the activities much more.’

(Interviewee 2, the Red Cross, 2016)

Due to the increased amount of money resulting from the first IOP, more personnel could be hired that also increased the quality of services according to an interviewee; this can be interpreted as an increased professionalisation.

5.2.3 Contact and distance

According to the isomorphism theory, an organisational field is tied together by transactions between actors, making contacts an important aspect to examine. In all of the IOP agreements it is stated that the parties in the partnership shall communicate continuously. It is further specified in IOP 1 that a dialogue will be held about the needs of the target group (Region Skåne 1). In IOP 2, it is stated that the parts in the partnership are expected to participate in a collegial learning process (the City of Malmö).

IOPs 2 & 3 also further specify that steering groups with representatives from each participating organisation should meet at least twice a year (the City of Malmö, Region Skåne 2). In IOP 1, as mentioned earlier, these are replaced with two yearly visits to the treatment centre by representatives from Region Skåne (Region Skåne 1). However, it is difficult to infer from this information how extensive the contact is in practice.

When asked whether the contact with the other parties in the IOP had increased or decreased since the start of the IOP, most interviewees answered that it had increased even though it is not that extensive. The partners have most contact before an IOP is followed up or renegotiated. According to the Red Cross, the conversations focus on the need of the target group.

‘...so there is much more contact and also more reasoning about the target group and the needs of the target group. Definitely’

(Interviewee 1, the Red Cross, 2016)

It was mentioned in the interviews that in addition to the steering group meetings, IOP 2 has an operative collaboration group that meets more frequently than do the civil servants represented in the first mentioned group.

Distance was not emphasised by any person interviewed; rather the opposite. The Red Cross interviewees stated that close relations favour their target group and that they are a sufficiently established organisation so that there is no need to keep a distance in order to resist influence from public actors.

‘We have not stressed distance because we have not been afraid of being influenced [...] That would surely be a more important question for a smaller organisation, I think’

(Interviewee 4, the Red Cross, 2016)

Public actors interviewed mentioned several reasons why close relations are beneficial. One of the Region Skåne interviewees stated that it can be both essential in order to understand each other’s organisations and beneficial for the target group that might be in need of both organisations’ activities. Interviewees from the City of Malmö stated that close contact is necessary to create trust:

‘...I have tried to build close relations with the associations and the people working there, just because we have been really clear about that if there is something you want to ask [...] contact us! And for them to dare to do it and not feel like “now I have to

contact the City of Malmö again” [...] this requires a close relationship and an open dialogue.’

(Interviewee 1, The City of Malmö, 2016)

However, some of the interviewees emphasises that some distance has to remain because the organisations drive different kinds of politics, which indicates that distance is still emphasised to some extent:

‘...and then I think that in general it is good that we take care of our kind of organisation, that we have a cooperation but that it does not become blurred...There are questions where it differs a lot, for instance, when it comes to politics and where we should act as a consultation body there and express our own opinions.’

(Interviewee 3, the Red Cross, 2016)

Moreover, an interviewee from the City of Malmö highlighted that the activities are conducted on the premises of the Red Cross. This creates a clear distinction and distance between the Red Cross and (in this case) the City of Malmö.

5.2.4 Volunteers – participation and recruitment

Another way to learn more about the degree of professionalisation of the Red Cross is to examine the presence of volunteers and the requirements that they must fulfil. The extent to which volunteers deliver services is not highly specified in the IOP agreements. As mentioned earlier, voluntary work is mentioned in IOPs 1 & 3, in IOP 3 in a more defined way than in IOP 1: ‘as a part of the partnership the Red Cross supplies volunteers’, (Region Skåne 1, Region Skåne 2, my translation).

The Red Cross interviewees stated that they use volunteers only in children’s activities – in other terms, in IOP 3. These volunteers are recruited and since they commit to the Red Cross to work as a volunteer, the Red Cross can make demands on them, such as requiring their presence in the activities every week.

(About the recruitment of volunteers:) 'I interview all volunteers and then I choose the ones I consider suitable for the organisation. Sometimes, I mean many of the ones who apply are good persons, they want to do something good, but if I have only 10 spots and 20 that apply, I have to select the ones that I think can make a good group together'

(Interviewee 2, the Red Cross, 2016)

The volunteers are bound by professional secrecy. Additionally, according to one interviewee they are expected to treat people with a certain attitude and have knowledge about the Red Cross. Even though many volunteers are students of psychology or social work, which could contribute to a professionalisation of volunteers, such educational background is not a requirement. Within the children's activities the Operation Manager is the only employee; she is also a former volunteer, so in this activity, the interaction between professionals and volunteers seems to be unproblematic.

No volunteers are working in the clinical activity even though the centre has received requests from licenced psychologists. The Red Cross interviewees see difficulties with having volunteers and professionals that work in the same activity; nor is it allowed according to HSL:

'When it comes to the treatment centre there is no voluntary work at all because the HSL does not allow clinical activities to be conducted by volunteers. So it does not work. And yes, we have had clinicians, licenced clinicians who want to work on a voluntary basis. Especially last autumn when so many [migrants] came. And then I have said no to that.'

(Interviewee 4, the Red Cross, 2016)

Hence, it seems important to the Red Cross to disconnect the activities that build on voluntary work from those building on clinical work.

5.2.5 Members and their possibility to influence the centre's work

By asking the interviewees about the possibility of the members to influence the activities at the centre, it can be inferred whether the organisation has strong connections to the member base, which is important in independent control of the organisation red. No information related to this aspect could be found in any of the IOP agreements. When asking the interviewees from the Red Cross about the possibility for individual members to influence the activities at the centre, they answered that they are steered by the national board of the Red Cross. In order to influence, one must go to the national meeting every fourth year, when the organisation decides on which main priorities the Red Cross should have during the following four years.

'I mean it is a pretty long way because it is a democratic organisation, so we are managed; the members choose representatives that shape the direction in our national meetings [...] it is on overall level so we never go into the details and decide that this activity should be of a particular type here at this centre, but you make decisions on the overall level. So it is actually on that level that you can influence the content in the activities.'

(Interviewee 1, the Red Cross, 2016)

Another interviewee agreed that it is a long way to go if one wants to influence the activity, but that there are many connections to the voluntarily managed clubs. The same interviewee stated that some of the centre's local branches are housed together with the local clubs. She also highlights that volunteers can enjoy a certain level of participation by engaging in the children's activities:

'And then I think that there are possibilities to work with the children's activities and in this volunteer bank, and that's where you still get insight and participation, but you are not clinical staff'

(Interviewee 4, the Red Cross, 2016)

Another interviewee from the Red Cross stated that to work in a better way than today, the centre could pick up on the ideas and the willingness of the volunteers. This answer indicates that the member orientation could be improved at the treatment centre.

The evidence presented in this section suggests that a certain professionalisation of the centre took place before the IOPs. The contact between the Red Cross and public actors has increased since the establishment of IOPs; this might be beneficial for the target group. The member orientation seems to be quite low in certain parts of the centre's activities, but higher in some other parts. Accordingly, some evidence infers homogenisation because of the IOP establishment, and some evidence does not.

5.3 Evidence generally related to independence

A few other aspects of IOPs not directly related to resource dependence or isomorphism have also been examined, such as the ownership and initiative of IOP as well as possibilities to do advocacy work within the IOPs. These aspects and other aspects that emerged from the data are presented in this section.

5.3.1 Ownership

According to The National Forum for Voluntary Organizations, as a partner in an IOP a voluntary organisation is supposed to retain ownership of its activities. This is a way of maintaining influence. The IOP documents do not address this literally, but in IOPs 1 and 3 it is stated that the activities should be run by the Red Cross on their own premises, which can be interpreted as an expression for this (Region Skåne 1 & 2).

Some of the interviewees from the Red Cross and the City of Malmö stated that ownership should be understood to mean that the Red Cross should be running the activities:

‘...it is not the municipality that runs the activities in an IOP, this is a partnership but it is not we that run it, it is the organisations that run the activities’

(Interviewee 3, The City of Malmö, 2016)

Additionally, a representative from Region Skåne stated that is necessary that they own the activity to ensure the capacity for organisations to stay innovative.

‘...one thinks that there is some kind of innovative power and capacity that, I mean in some way it is easier to use the flexibility and think in new ways than that one lifts in something into the big organisation of the region.’

(Interviewee 2, Region Skåne, 2016)

Although most interviewed persons agreed that it is important for the ownership to belong to the voluntary organisation, one interviewee from the City of Malmö and one from the Red Cross highlighted the importance of a joint ownership rather than one that belongs solely to the voluntary organisation:

‘...It starts with a common vision and a common definition of goals where we work together to identify a societal challenge and say that we want to do this together. We have set the goals together with the organisations, so of course we feel a joint ownership.’

(Interviewee 1, The City of Malmö, 2016)

As can be inferred from the quotation, the emphasis on joint ownership is motivated by the fact that the actors have a common vision.

5.3.2 The initiative to the IOP

Although it is not stated in the separate IOP agreements, the theoretical model made by The National Forum for Voluntary Organizations emphasises that IOPs should be initiated by the

voluntary organisation. This characteristic of IOP differentiates it from a tender contract. No information about this could be found in the IOP agreements.

Almost all the interviewees agreed that the Red Cross initiated their IOPs.

‘We have suggested the form, the discussion about it, primarily when they said from the region’s side that we have to make a tender contract, then we have said “no, we don’t have to, there is another alternative”

(Interviewee 1, the Red Cross, 2016)

In IOP 2 however, the political committee steering the Administration for Labour Market, Secondary School and Adult Education was a driving force, according to the interviewees from The City of Malmö.

‘...we have a very active political committee, that is active politicians who really wanted IOPs, and as IOP was new and because there were not that many concrete experiences and examples, it was actually our politicians who said “we want to try this”. This led to a study that in turn led to a few IOPs’

(Interviewee 1, The City of Malmö, 2016)

There was also very strong political support from the politicians from Region Skåne, who contributed to the establishment of the first IOPs. Even if the Red Cross seems to have taken the initiative, the public actors appear to have been very keen on IOPs as well.

5.3.3 Knowledge transfer / Advocacy work

In addition to providing care, the Red Cross offers lectures about the specific target group and their needs, as a part of IOP 1 (Region Skåne 1). This could be seen as a kind of advocacy work because it is a chance for the Red Cross to highlight this target group.

In the other two IOPs, this part is only vaguely formulated. In IOP 2, it is stated that knowledge dispersion is part of the

agreement and that both parties to the agreement have the responsibility for it (the City of Malmö). In IOP 3, knowledge dispersion is further clarified. It focuses the need of the target group as well as structural work on local, regional, national and international levels according to the agreement (Region Skåne 2).

The interviewees from the Red Cross stated that the clinicians instruct participants at the lectures; in other words, the same staff that work with care are financed by the public actors, which could indicate a decreased independence.

‘We offer lectures, workshops or education at the PTSD centre and tomorrow I will lecture for the employees of the City of Malmö, so it is the clinical staff out there that do that as well.’

(Interviewee 4, the Red Cross, 2016)

According to the Red Cross interviewees, these lectures are not only an opportunity to spread their expert knowledge in the field to the public actors, but also to do advocacy work ‘undercover’ in terms of highlighting the needs of the target group:

‘...simultaneously as we actually have 30 years of experience no one else has. But actually they know that we come there and tell about the target group and the needs of the group, that is greater than what is met and what is being paid for’

(Interviewee 1, the Red Cross, 2016)

This becomes evident as not only clinicians working in the public sector but also civil servants participate in these lectures.

5.3.4 Other factors affecting independence

As an ending question in every interview, the interviewees were asked to mention aspects that they consider important as for a voluntary organisation to retain independence in an IOP. This open question generated different answers from the different interviewees, but two main tracks can be found.

Some interviewees, both from the Red Cross and the public actors, emphasise agreements and dialogues between voluntary and public actors as important for the voluntary sector to keep its independence. A local agreement that will strengthen and clarify cooperation between The City of Malmö and voluntary organisations is in the making according to an interviewee. This is a way to retain independence in partnerships.

An interviewee from Region Skåne highlighted trust and an open dialogue as a good way to sustain independence:

‘But it must build on some kind of mutual trust... when it comes to the Red Cross it is an organisation that we have, we trust that they see the needs and that they give attention to possible risks and shortcomings in their own activities. I mean, that builds on openness in the dialogue.’

(Interviewee 2, Region Skåne, 2016)

Another recurring theme is that the voluntary organisations have a responsibility to retain independence themselves. A strong identity and idea are necessary to remain independent, according to interviewees from several public actors and one of the representatives from the Red Cross.

‘But on the other hand I think that if you have a strong identity and a strong idea that holds, that should be enough. It should carry you in this as well, when you sit down with the public actor’

(Interviewee 3, Region Skåne, 2016)

The public actors interviewed also emphasise the fact that the IOP concerns only a limited part of the activities of an organisation and that they are free to offer other activities besides these. This is an aspect contributing to the capacity for independence, suggesting that IOP is a good model for retaining independence.

‘...so in that way one can say that the IOP is very focused on a certain area where we have a common interest. When it comes to all other interests the organisations and these other associations

have the freedom to do that themselves' (Interviewee 1, Region Skåne, 2016)

The statement that IOP is good for independence is also supported by a representative of the Red Cross, who stated that the participation in IOPs has made them more visible because of the regular follow-ups, which also have given them a stronger position in the dialogue with public actors.

The interviewees from the Red Cross also emphasised that public actors actually want them to be a voice and provide feedback on the way that they do things. This is an incentive for public actors not to exert control over voluntary organisations. In addition, another interviewee from the Red Cross claimed that strict control can imply that added values desired by the public actors get lost, as these values are non-quantifiable.

A couple of interviewees also mention clusters as a future solution for IOPs, allowing smaller organisations to join IOPs. A cluster consists of several voluntary organisations that enter into an IOP together with a public actor in a certain area. This implies that each organisation takes a different role and does not have to be very dependent on the public actor.

In summary, most interviewees answered that the Red Cross should own their activities in an IOP. The Red Cross has initiated the IOPs according to the wishes and opinions of most interviewees and the IOPs have given them opportunities to carry out advocacy work. Other aspects mentioned, which are central to keeping independence in IOPs, were also presented in this section, such as local agreements, the necessity of a strong concept on the part of voluntary organisations, and cluster IOPs.

5.4 Summary of the material and conclusions

According to the results presented in the previous sections, evidence indicates that the Red Cross has managed to maintain a certain degree of independence as an IOP participant.

The material suggested that the ways in which the Red Cross is controlled by the public actors are not that threatening to the independence of the organisation. For instance, co-financing, equal discussions on creation of commitments as well as soft guidelines and approximate quotas are evidence indicating a capacity for retaining independence.

When it comes to the presence of homogenisation, an adaptation to public laws as well as a general professionalisation of the centre seems to have taken place – but this happened before the establishment of the IOPs. On the other hand, the quality of the activities seems to have increased because of the entry into IOPs and the contacts with public actors as well.

There are volunteers who take part in some activities which are de-coupled from the more professional, clinical work, inferring a certain member orientation. In the clinical part of the centre's activities, the member orientation seems to be quite low. These factors can indicate that even though the Red Cross is quite professionalised, parts of the centre still have characteristics of a voluntary organisation, which increases its capacity to remain independent from the public sector and close to its members and ideas.

Moreover, other evidence – for example that the Red Cross is perceived to have the ownership of the activities as well as statements by most of the interviewees that the Red Cross was the initiators of the IOP, supports the idea that there is a capacity for independence. Another interesting fact is the possibility to educate public actors about the need of the target group (as in IOP 1), which is a clear way to conduct advocacy within the framework of the IOP.

Overall, despite certain professionalism, the Red Cross seems to have quite good capacity to remain independent while participating in these IOPs, at least more independently than a smaller, less professionalised organisation would have capacity to be.

In Table 5, the material from the interviews and the documents is summarised and categorised according to the source of the material. In Chapter 6, these conclusions are discussed further in the light of the theory of the study.

Table 5. Summary of material

	Category of evidence	Document review	Interviews: The Red Cross	Interviews: Public actors
Evidence for resource control	Co-financing	in 2 of 3 IOPs	Good to have a say about access to health care and to be free to start new activities with external funding	Creates a mutual feeling of participation
	Commitments and the creation of them	Certain number of treatment opportunities and lectures should be delivered	Equal discussions, a bit difficult to agree on IOP 2	Equal discussions, a bit difficult to agree on IOP 2
	The control of the undertakings	Activity plan, annual report, follow-up meetings	Good not to be paid per hour and not have maximised quotas	Dialogue-based follow-up, soft guidelines but still clearer than during the time of grants
Evidence for homogenising processes	Adaptation to laws and norms	Care provider under HSL, should follow laws issued by public authorities	Adaptation to HSL and other laws before IOP	Other smaller organisations more exposed to adaptation in IOPs than the Red Cross
	Professionalism and quality	In IOP 1: Personnel group comprises licenced treatment providers	IOPs helped to increase quality in terms of strengthened activities and more personnel	City of Malmö considers Red Cross professional, Region Skåne highlights that organisations need a certain maturity to be in an IOP
	Contact and distance	Continuous communication and collegial learning process mentioned	More contact than before, but not that extensive. Close relations good for target group, steered by different directorates though	Operative collaboration meeting quite frequently, close relations good for building trust
	Volunteers – participation and recruitment	In IOP 3: Red Cross stands for volunteers	Recruited, make commitments as volunteers, no volunteers in clinical activities	

	Categories of evidence	Document review	Interviews: The Red Cross	Interviews: Public actors
	Members and their possibility to influence the centre's work		Can influence at the national meetings, certain contact with local clubs, could be better at picking up new ideas from volunteers	

Evidence generally related to the capacity of independence	Ownership	The activities should be run by the Red Cross on their own premises	It is important that the Red Cross runs the activities	It is important that the Red Cross runs the activities to keep innovativeness. The City of Malmö emphasises joint ownership
	The initiative to the IOP		The Red Cross suggested the financing form	The Red Cross suggested the form, but according to the City of Malmö, a political committee was very keen on IOPs. Also, strong political support from Region Skåne
	Knowledge transfer / Advocacy work	Red Cross provides lectures as part of the IOP, all parties have the responsibility for knowledge dispersion	The clinicians are the ones educating, expert knowledge is generated but also occasion for advocacy	
	Other factors affecting independence		Agreements and open dialogues, IOPs have given the Red Cross a stronger position in the dialogues, strong identity, no incentives for public actors to steer them, clusters	Agreements and open dialogues, strong identity and idea

6 Discussion

To put the findings from the previous chapter, showing that the Red Cross has been able to keep a certain independence in the IOPs, in context and create a deeper understanding of these results, the results are discussed further and reflected on in this chapter.

6.1 Follow-ups characterised by dialogue

According to the interviews with the Red Cross representatives, as a participant in an IOP they do not perceive themselves as being very controlled by the public actors. Furthermore, it seems that the control mechanisms are perceived as reasonable and that the Red Cross had put its foot down, so to speak, in cases where public actors have started to talk in terms of tender contracts. The public actors also seem to be conscious of the fact that they cannot put the same kind of requirements on voluntary actors as on private actors, as this would threaten the independence of the voluntary organisations. In other words, it seems that the continuous financing gained thanks to the participation in IOPs has generated a certainty for the Red Cross, which is more important than the autonomy lost due to control by the public actor. At any rate, this control seems to be marginal.

As stated by most interviewees, the follow-ups are dialogue-based and centre on the needs of the target group. The creation of commitments was stated to have been done in an equal way with influence from all participating actors. Even though it seems as if Region Skåne was more obliging in the creation the IOP agreements than the City of Malmö – which seemed to prefer an IOP with more control – both participating actors seem to be

satisfied with the final formulation of IOP 2. This difference between Region Skåne and the City of Malmö can possibly be explained by the fact that the region has longer experience with IOPs than does the city. Therefore, they might be more aware of the desire of voluntary organisations to keep their independence, motivating them to initiate IOPs.

These equal dialogues could infer that the power structure created by resource dependence is evened out. The voluntary actors have expert knowledge about the target group in focus, which they can contribute to the IOP, so equality and reciprocity can be created. In other words, as it is not only the public actors that have resources to offer, the relation between the Red Cross and the public actors seems to be mutual.

However, one view expressed by some of the public actors is that IOP makes it possible to dictate conditions to a new extent, in terms of what is expected by the voluntary organisations in exchange for the funding. It is mentioned in the interviews that an IOP is a more regulated partnership than are associational grants. Despite the fact that dialogue is emphasised, IOP seems to be perceived as a way for the public actors to put more requirements on voluntary actors than during the previous era of grants. The fact that there was a great increase in money as the grants were turned into IOPs makes this suspicion stronger, because that could legitimise a stronger regulation. Still, the requirements seem to be less strict than in a tender contract. In addition, this view is supported by only some of the interviewees.

To further confirm how the soft guidelines affect the activities of the treatment centre, a more extensive study with an ethnographic approach would have been needed. To understand the degree to which the expressed perceptions of the interviewees are true, when they stated that the discussions have had an equal character, another study with a discursive character could have been useful. Due to the limited time scope, these approaches could not be used in this study.

6.2 The Red Cross – a professionalised organisation before the IOPs

In the material, it becomes quite clear that the Red Cross' treatment centre is a professionalised activity with employed staff and that the activities had reached a certain degree of professionalisation already before it entered into IOPs. For instance, the Red Cross had to adapt to HSL a few years before 2013, when their first IOP came into force.

Even though many of the homogenising processes happened before the IOPs, there are some signs of further professionalisation after the IOP entrance as well. The adaptation to HSL can e.g. be interpreted as coercive and the increased quality of the activities as normative isomorphism.

According to public actors, an IOP is most suitable for voluntary organisations with a professionalised character, as they want high-quality services from their IOP partners. This attitude of the public actors can promote the professionalisation of voluntary organisations even more and, for instance, make them increase the quality of their services and number of employees, as was the case for the Red Cross. The fact that the contact between the organisations is stated to have increased since the establishment of the IOPs also indicates that homogenisation might happen because of the IOPs. This might affect the connection to the member base of the Red Cross in a negative way.

Strong connections between the clinical part of the centre and the member base of the Red Cross did not exist before or after the establishment of the IOP. Although there are volunteers working with children's activities, these persons are recruited in a way reminiscent of a recruitment process for a paid job and the volunteers do not seem to have that many possibilities to influence the activities of the centre. According to theory, this loose coupling to members in some parts of the organisation could imply that the activities are more steered by Region Skåne and the City of Malmö than by the members of the Red Cross. This could result in difficulties in doing advocacy work and

criticising these actors. An excessively far-reaching professionalisation that results from stringent requirements on voluntary workers might also deter volunteers to engage.

However, one can question whether it is actually necessary for the entire organisation to be member-oriented in order for it to be independent and able to advocate. As long as certain parts of the organisation have a strong member orientation and the organisation is overall democratically governed, it could be legitimised for certain branches of the organisation to act professionally in order to exert influence. In the case of the centre, the member-oriented, voluntary-based activities are clearly de-coupled from the more professionalised, clinical activities, which require more contact with public actors.

In this study, only a few indicators showed that IOP strengthened the professionalisation of the Red Cross. One can imagine that the improvement in quality caused by the IOP contributes to a decreased member orientation, as it might decrease the influence of members and presence of volunteers in the organisation. This in combination with increased contact with public actors might result in that the Red Cross representatives shift their loyalty from their members towards colleagues in public organisations, making it more difficult to remain independent and uninfluenced by them. However, a professionalisation of parts of the organisation might contribute to the independence of the organisation by strengthening their position in negotiations with public actors. It should be mentioned that another study conducted from the perspective of the organisation's members could have generated other conclusions.

6.3 New possibilities to use the voice function in the IOPs

An interesting aspect emerging in the study is the possibility for the Red Cross to educate public actors about the target group that they have sound experience of. This is mentioned as a good way

to do advocacy work in disguise. From the perspective of the public actors, this is rather seen as a way for them to disperse and use the expert knowledge of the Red Cross in their organisation. Overall, the big focus on the need of the target group in lectures, dialogues and follow-ups must be seen as very beneficial for the Red Cross as highlighting this group's needs is the main issue that the centre advocates for. This infers that the IOPs allow the Red Cross to have an avant-garde role. Even though this advocacy activity is not that de-coupled from the provision of health care but rather treated as a service as well, the message of the lectures seems to be in line with the issues the centre wants to promote. Because of this, it probably does not affect the independence of the centre negatively that the clinical staff both provides health care services and educates.

By offering these lectures, it seems as if the Red Cross can make use of their established brand and expert knowledge as an IOP-participant to do advocacy on new arenas. They also state that an increased visibility because of the IOP have strengthened their positions in negotiations with public actors. Advocacy work is in other words done within the system with help from collaborations with public actors, in other words, the voice role can be exercised parallel as services are produced. One can question to what extent such advocacy made of the Red Cross can be progressive and how independent they are in such cooperation. The fact that there is a certain co-financing in the IOPs seems to open up for a freedom to remain independent to some degree in the advocacy work, a diversification strategy stated in the interviews. It should be mentioned though that the Red Cross indeed is in need of the public resources for the centre's survival, as a big majority of the money comes from Region Skåne and the City of Malmö, which creates certain degree of resource dependence, irrespective of the fact that the control from the public actor's side is not perceived as being so strict.

However, one can question how much independence is actually needed for a voluntary organisation to function as a voice. Is it not so that voluntary organisations should make use of the fact that they are in demand as welfare providers, and through such missions seize the opportunity to make their voice heard? On the other hand, is it really worth giving up some of

their independence in order to play in the same arena as public actors? The answer to that question depends on the organisation in question and how much its opinions differ from those of public actors.

6.4 IOP – a new way for public actors to legitimise the voluntary sector as welfare provider?

The apprehensions that IOP might be a way to legitimise the entrance of voluntary organisations in the welfare production, without in practice giving them opportunities to remain an independent voice, might be justified to some extent when taking the results of the study in consideration. Many of the interviewees highlight civil society as an important welfare provider in the future and IOP as a way to give voluntary organisations recognition in this field. According to these interviewees, the Swedish welfare model should become more like the continental one, relying on voluntary actors. Even though the Red Cross according to most interviewees was the initiator of the IOPs, there seems to have been a strong political will of both Region Skåne and The City of Malmö to establish IOPs and an eagerness to get more voluntary actors into the Swedish welfare system.

A functioning IOP should ideally not affect the voice function of voluntary organisations, but this eagerness of public actors can create a risk that independence is forgotten. A difference between the interview answers of the Red Cross and the public actors in this study is that whereas the Red Cross emphasises possibilities for independence when talking about self-financing and ownership, the public actors did not emphasise this factor to the same degree. Rather, expressions such as co-financing and joint ownership were used in the interviews. That shows that whereas voluntary organisations see IOPs as a means for independence, public actors mainly emphasise cooperation as its main advantage.

In the interviews, this ignoring of independence was indicated as some public actors emphasised that voluntary organisations need a certain degree of professionalism in order to participate in an IOP. It was also stated that professionalism could be beneficial as for voluntary actors to have a strong position in discussions with public actors, even though voluntarism was still mentioned as an important added value of the voluntary sector.

As for voluntary organisations to keep independence in IOPs, they seem to need to take a big responsibility themselves to keep their identity and idea. As some public actors seem to see them primarily as welfare providers with certain added values rather than opinion makers, the voluntary organisations in the discussion need to remind them that they need a certain degree of independence in order to be able to continue to have this role as a participant in an IOP. The Red Cross seems to have succeeded in doing so, as they have not accepted any offers that resemble tender contracts. In addition, the fact that the Red Cross is an established organisation with a good reputation has probably helped it to remain a strong party in negotiations with the public sector. The risk of losing some degree of independence definitely seems to be higher for a smaller organisation participating in an IOP than for the Red Cross.

7 Conclusion

This study has examined the capacity of voluntary organisations to remain independent when acting as service provider in IOPs with public actors. With help from interviews and a document review, it has been concluded that despite potential risks of resource dependence and isomorphism processes, created as voluntary organisations cooperate closely with public ones, the Red Cross in Malmö has been able to remain independent to a large extent as an IOP participant. As this is a case study, this result might not be generally applicable to other units, except for organisations with a similar size and degree of professionalisation cooperating with Region Skåne and the City of Malmö. Nevertheless, the study has generated new theoretical knowledge in the field of IOPs that can be used in future research.

This study shows that it is important that public actors do not treat voluntary actors in the same way as they treat private ones. For voluntary organisations to remain independent and have a voice function in cooperation with the public sector, steering and control mechanisms cannot be too strict. In 30 years, the treatment centre of the Red Cross has done an excellent job in highlighting the needs of a forgotten target group. Excessive restrictions from the public actors on funding would have made it impossible for the Red Cross to provide care to this group and develop knowledge about it. Even though the IOP agreement is a bit stricter than agreements during the time of grants, the Red Cross does not perceive it as being very controlled; the impression is instead that the IOPs allow them to keep some of their independence in comparison to what would have been the case if they had been financed through a tender contract.

The avant-garde role is essential in modern-day Sweden to spread knowledge about the needs of newly arrived groups. If a dialogue about the need for independence is held when creating IOP agreements, the IOP form can probably work as a good way

for organisations to use their voice function as a welfare provider, especially in combination with development of local/regional agreements. According to this study though, a certain measure of professionalism might be good for making voluntary organisations feel that they are on an equal footing with the public actors, or alternatively, that an IOP is made with a cluster of small organisations so that the public actor does not have too much influence over each organisation. To maintain the member orientation in the organisation, it seems to be a good solution to do as the Red Cross does, and de-couple the organisation. By separating the organisation into different parts such as treatment centres and local clubs, they can let different activities have a more or less professional character. This results in some parts of the organisation being able to have a closer relation to the public actors, whereas others can remain more distant to the state and fulfil their mission as a voice, thereby contributing to democracy.

7.1 Suggestion for further research

After having met the interviewees, who all seemed committed to the topic of IOPs, there cannot be any doubt that this is a topic of great interest for both voluntary and public organisations. The financing model is currently being tried out in a large number of municipalities and regions. This fact alone calls for a more extensive research in the field, especially as a complement to evaluations made by public actors themselves that might not take the perspective of the voluntary organisations into account. Research needs to address IOP from an external perspective and explore the consequences that the voluntary sector's entrance in welfare production will have for civil society in Sweden and its contribution to democracy.

In this thesis, it is concluded that IOPs allow, to certain extent, the Red Cross' treatment centre for war wounded and tortured to retain their capacity for independence. These conclusions contradict the research by Johansson to some degree, which asserts that grants given to organisations to support a

certain activity are more controlling than grants meant solely to support the existence of organisations. However, in these IOPs, dialogue between the actors resulted in a discussion about how to make the guidelines softer, so the Red Cross would not feel too dependent. Even though the member orientation is low in some parts of the Red Cross' activities, a certain professionalism has helped them maintain independence when working closely with public actors.

In future research, it can be discussed further how IOP constellations can be formed to keep independence in the best way. For instance, an interesting topic would be to examine further the consequences of so-called cluster IOPs with a large number of actors involved. In addition, comparative research focusing on differences in capacity to remain independent for large, established organisations compared to small, unestablished ones could surely bring further understanding to the importance of professionalism in this context. At any rate, the consequences of voluntary-public actor relations definitely comprise a growing research field that deserves stronger emphasis in political science.

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9 Appendix

9.1 Appendix 1: Interview persons

The Red Cross

Eva Hall, Care Manager of the Red Cross

Anette Carnemalm, Manager of the Treatment Centre

Elin Magnusson, Employee at the Treatment Centre

Barbro O'Connor, Former Manager of the Treatment Centre

Region Skåne

Tommy Aspegren, Civil Servant

Bim Soerich, Civil Servant

Johan Larsson Boström, Former Civil Servant

The City of Malmö

Nidal Al-Mudafar, Civil Servant at the Administration for Social Resources

Elin Ewers, Civil Servant at the Administration for Labour Market, Secondary School and Adult Education

Tommy Malmstedt, Civil Servant at Jobb Malmö

9.2 Appendix 2: Interview questions

9.2.1 Questions for the Red Cross interviewees (in English)

Introductory questions

- Can you briefly describe the role you have in your organisation and the way in which you work with IOPs?
- The initiative to establish new IOPs is supposed to come from the voluntary actors, was the Red Cross the initiating actor for these IOPs?
-If not, why not?
- As I understand it, as part of the IOP you are not only offering health care services but do also educating others about the needs of your target group. Which staff carry out this public-interest work and which carry out service production?
-Do these functions coincide to some extent and if so, in what way?
- How would you say that the IOP form differs from other funding forms when it comes to the possibilities for your organisation to remain independent?
- How does the fact that the services are co-financed by both the Red Cross and public actors affect the inter-organisational relation?
-What is the advantage with that?
- Why is it important that the Red Cross has the ownership of the services involved in IOPs? -How does this manifest itself in practice?
- What do you think are the main advantages of funding through an IOP compared to funding through an activity grant or a tender contract?

Homogenisation

- As you entered into the IOP, did the Red Cross have to adapt activities to the laws of the public sector because of the participation in IOPs?
-For instance, the public information access law or in other terms of transparency?
- In what way are the activities different from other organisations' activities? Would you say that the organisation of the Red Cross in some way has become more like a public organisation since you entered IOPs?
-If so, how?
- Are all active persons at the centre being paid? If not, how do you handle the interaction between professionals and volunteers?
-What possibilities are there for members of the Red Cross to influence the activities of the centre?
- Would you say that the quality of the activities of the centre has improved since the establishment of the IOP?
-Has the share of paid workers increased?
- Have you professionalised owing to becoming a partner in an IOP?

Control / Conditions

- Turning to the more formal parts of the agreements, what kind of commitment do the Red Cross and the public actors have in the agreement?
-How were these commitments created?
- According to the IOP agreements, the Red Cross is supposed to deliver an operational plan and an annual report every year. Beyond this, how is it verified that every actor has fulfilled the commitments?
-How does that affect your capacity to decide independently over your organisation?
- As the public actors account for about 80-85% of the funding in these IOPs, how do you work with the fact that you are that dependent on public actors when it comes to resources?

- In what ways did you have to adapt your activities when the IOP was established, in order to fulfil your commitments and the conditions from the public actors?
-For instance, did the organisational structure change?

Distance

- In addition to the dialogue meetings two times a year, how much contact do you have with Region Skåne/the City of Malmö?
- How important is it for you to maintain a distance to public actors in IOPs?
-How do you think this can affect your capacity for remaining independent?

Conclusion

- To sum up, which factors do you consider important for the Red Cross to have the possibility, as a partner in an IOP, to conduct advocacy work independently?
-How can these factors be strengthened?

9.2.2 Questions for the public actor interviewees (in English)

Introductory questions

- Can you briefly describe your role in your organisation and in the way in which you work with IOPs?
- The initiative to establish new IOPs is supposed to come from the voluntary actors, was the Red Cross the initiating actor for these IOPs? -If not, why not?
- How does the fact that the services are co-financed by both the Red Cross and public actors affect the inter-organisational relation?
-What is the advantage with that?

- Why is it important that the Red Cross has the ownership of the services involved in the IOPs?
-How does this manifest itself in practice?
- What do you think are the main advantages with funding through an IOP compared to funding through an activity grant or a tender contract?

Homogenisation

- When entering into the IOP, did the Red Cross (the voluntary organisations) have to adapt their activities to the laws of the public sector as a consequence of the participation in IOPs?
-For instance, the public information access law or in other terms of transparency?
- In what ways do the activities of the Red Cross differ from other organisations' activities?
- When working with the Red Cross, do you perceive them as being as professional as other public or private actors? Do they meet the requirements on quality in the same way as other actors do? --Has this changed since the IOPs were established?

Control / Conditions

- Turning to the more formal parts of the agreements, what kind of commitment do the Red Cross and the public actors have in the agreement?
-How were these commitments created?
- According to the IOP agreements, the Red Cross is supposed to deliver an operational plan and an annual report every year. Beyond this, how what is done to verify that every actor has fulfilled their commitments?
- As the public actors account for about 80-85% of the funding in these IOPs, how do you work with the fact that the Red Cross is dependent on you when it comes to resources?

Distance

- In addition to the dialogue meetings two times a year, how much contact does Region Skåne/the City of Malmö have with the Red Cross?
- How important is it for you to maintain a distance to the Red Cross in IOPs?
-Do you think this can affect their independence?

Conclusion

- To sum up, which factors do you think are important for voluntary organisations, as a partner in an IOP, to have the possibility to conduct independent advocacy work?
-How can these factors be strengthened?

9.2.3 Questions for the Red Cross interviewees (in Swedish)

Inledande frågor

- Kan du kort beskriva vilken roll du har i din organisation och på vilket sätt jobbar du med IOP-avtal?
- Initiativet till att etablera IOP-avtal är det tänkt ska komma från de ideella aktörerna som jag förstått det. Var det Röda korset som initierade detta/dessa IOP?
-Om inte, varför inte?
- Som jag förstår det erbjuder ni inte enbart vårdtjänster utan utbildar också om behoven hos den målgrupp ni vänder er mot. Vilka i verksamheten utför sådant intressearbete och vilka utför servicearbete?
-Sammanfaller dessa slags funktioner och i så fall hur?
- Vilka skillnader skulle du säga att finns det mellan IOP och andra finansieringsformer när det gäller möjligheterna till att bevara självständighet?
- Hur påverkar det faktum att verksamheten samfinansieras av både Röda korset och offentliga aktörer den interorganisatoriska relationen?

-Vad är fördelen med detta?

- Varför är det viktigt att Röda korset i IOP har ägandeskapet till sin verksamhet?

-Hur tar detta sig uttryck i praktiken?

- Vilka är de största fördelarna med att finansieras via ett IOP jämfört med verksamhetsbidrag eller upphandlingskontrakt enligt dig?

Homogenisering

- När detta IOP startades, behövde Röda korset anpassa sin verksamhet på något sätt till de lagar som offentliga aktörer agerar inom som följd av medverkan i IOP?

-T ex, lagen om offentlighet eller i termer av ökad transparens och insyn på andra sätt?

- Vad skiljer Röda Korsets verksamhet från andra organisationers verksamhet? Skulle du säga att Röda korset som organisation på något sätt blivit mer lik en offentlig organisation sedan ni ingick i IOP?

-I så fall, hur?

- Är alla som är aktiva vid behandlingscentret betalda? Om inte, hur hanterar ni interaktionen mellan professionella och volontärer?

-Vilka möjligheter finns det för Röda korsets medlemmar att påverka centrets verksamhet?

- Skulle du säga att verksamhetens kvalité förhöjts sedan etableringen av IOP?

-Har andelen anställda ökat?

- Har ni professionaliserats sedan ni blev en partner i IOP?

Kontroll/Villkor

- Om vi nu fortsätter med de mer formella delarna av avtalen, vilka slags åtaganden har Röda Korset respektive offentliga aktörer i avtalen?

-Hur gick det till när dessa utformades?

- Enligt IOP-avtalen ska Röda Korset rapportera hur medlen används varje år med hjälp av en verksamhetsplan och en

årsberättelse. Frånsett detta, hur kontrolleras det att alla aktörer fullföljer sina åtaganden?

-Hur påverkar detta er förmåga till självbestämmande över er verksamhet?

- Då offentliga aktörer står för ca 80-85% av finansieringen i dessa IOP, hur hanterar ni det faktum att ni är så pass beroende av offentliga aktörer när det gäller resurser?
 - På vilka sätt var ni tvungna att anpassa er verksamhet som partner i ett IOP för att fullfölja era åtaganden och villkor från offentliga aktörer?
- T ex, ändrades organisationsstrukturen?

Distans

- Förutom de två dialogmöten som sker varje år, hur mycket kontakt har ni med Region Skåne/ Malmö stad?
 - Hur viktigt är det att för er att hålla en distans till offentliga aktörer?
- Tror du detta kan påverka organisationens självständighet?

Avrundning

- Vilka faktorer är viktiga för att Röda korset ska ha möjlighet kunna bedriva ett självständigt intressearbete som partner i ett IOP?
- -Hur skulle dessa faktorer kunna stärkas?

9.2.4 Questions for the public actor interviewees (in Swedish)

Inledande frågor

- Kan du kort beskriva vilken roll du har i din organisation och på vilket sätt jobbar du med IOP-avtal?
 - Initiativet till att etablera IOP-avtal är det tänkt ska komma från de ideella aktörerna som jag förstått det. Var det Röda korset som initierade detta/dessa IOP?
- Om inte, varför inte?

- Hur påverkar det faktum att verksamheten samfinansieras av både Röda korset och offentliga aktörer den interorganisatoriska relationen?
-Vad är fördelen med detta?
- -Varför är det viktigt att Röda korset i IOP har ägandeskapet till sin verksamhet?
-Hur tar detta sig uttryck i praktiken?
- Vilka är de största fördelarna med att finansieras via ett IOP jämfört med verksamhetsbidrag eller upphandlingskontrakt enligt dig?

Homogenisering

- När detta IOP startades, behövde Röda korset anpassa sin verksamhet på något sätt till de lagar som offentliga aktörer agerar inom som följd av medverkan i IOP?
-T ex, lagen om offentlighet eller i termer av ökad transparens och insyn på andra sätt?
- Vad skiljer Röda Korsets verksamhet från andra organisationers verksamhet?
- I kontakt med Röda Korset, känner du att de lever upp till samma krav på professionalitet och kvalité som offentliga eller privata aktörer? Har detta förändrats över tid sedan IOP-avtalen etablerades?

Kontroll/Villkor

- Om vi nu fortsätter med de mer formella delarna av avtalen, vilka slags åtaganden har Röda Korset respektive offentliga aktörer i avtalen? Hur gick det till när dessa utformades?
- Enligt IOP-avtalen ska Röda Korset rapportera hur medlen används varje år med hjälp av en verksamhetsplan och en årsberättelse. Frånsett detta, hur kontrolleras det att alla aktörer fullföljer sina åtaganden?
- Då offentliga aktörer står för ca 80-85% av finansieringen i dessa IOP, hur hanterar ni det faktum att Röda korset är så pass beroende av er när det gäller resurser?

Distans

- Förutom de två dialogmöten som sker varje år, hur mycket kontakt har Region Skåne/ Malmö stad med Röda korset/ideella organisationer?
- Hur viktigt är det att för er att hålla en distans till Röda Korset?
-Tror du detta kan påverka organisationers självständighet?

Avrundning

- Vilka faktorer tror du är viktiga för att ideella organisationer ska ha möjlighet kunna bedriva ett självständigt intressearbete som partner i ett IOP?
-Hur skulle dessa faktorer kunna stärkas?

9.3 Appendix 3: Original quotations in Swedish

Interviewee 1, the Red Cross

‘...vi är inte 100 % finansierade av landstinget, utan vi är, majoriteten av pengarna är från landstinget, det ligger på cirka 85-80 % av kostnaderna finansieras av landstinget. Och det är lite grann, det är en medveten strategi från vår sida, för vi vill också ha en viss frihet när det gäller, hur vi förhåller oss till vården vi ger, att vi har en möjlighet att behålla vår självständighet. Det kan t ex visa sig genom att hos oss betalar man ingen patientavgift’

‘...det var den här ena IOP:n med Malmö stad [...] där tyckte jag det var struligt. Där tyckte jag att vi hade en sämre dialog i förhållande till alltså vad det var som skulle levereras och hur och vilka typer av uppföljningar som skulle ske, där tycker jag att det tangerade, i alla fall inledningsvis, kommunen ett resonemang som närmar sig upphandling.’

‘Vi har ju också avtal som säger vi ska behandla ungefär 200 patienter, det är ungefär det antalet behandlingstimmar, men det följs inte upp på det sättet nu gjorde ni bara 197 ni skulle göra 200.’

‘Nej, alltså det hade vi redan innan. Alltså vi är en vårdgivare under sjukvårdslagen, vi är underordnade alla regelverk om gäller för att fungera som en vårdgivare inom hälso- och sjukvårdslagen, vi skriver patientjournaler enligt godkända system och vi har alltså samma typ av tillsyn, avvikelser, rapporteringar, patientsäkerhet, allt det som gäller för vilken vårdgivare som helst [...]10 år sen sedan man skärpte upp patientsäkerhetslag och så, så har det här hjälpt oss. Så ur den aspekten ändrade sig ingenting’

‘...så att kontakterna är mycket mer och också resonemangen kring målgruppen och målgruppernas behov. Helt klart’

‘Alltså det blir ju ganska lång väg om man säger så eftersom det är en demokratisk organisation så styrs vi då liksom medlemmarna väljer ju ombud som gör inriktningen på våra stämmor [...] vi är övergripande nivå så går man aldrig in i detalj och bestämmer den här verksamheten ska se ut på det här sättet på de här premisserna utan man fattar ju ofta beslut på den övergripande nivån. Så att det är ju egentligen där du kan påverka i så fall innehållet i verksamheten.’

‘Det är också vi som har föreslagit formen alltså—diskussionerna kring, framförallt när man från landstingens sida har sagt ni måste upphandla det här, då har vi sagt, nej det måste vi inte alls, det finns ett annat alternativ’

‘...samtidigt som man då ser att det är ju faktiskt så att vi sitter på 30 års erfarenhet ingen annan har. Men så faktiskt vet de att vi kommer dit berättar om gruppen berättar om gruppens behov som är större än vad man tillgodoser och det betalar man för så att säga’

Interviewee 2, the Red Cross

‘...då kan ju jag söka pengar utifrån olika insatser som jag vill göra. Och då behöver det inte vara lika styrt t ex sommarläger, då kan jag söka pengar från fonder som ger till sommarläger. Eller om jag ska utveckla nånting så kan jag ju söka pengar därifrån. Så det är ju lite friare blir det på nåt sätt också.’

‘...eftersom vi har fått pengar nu från Malmö stad och Region Skåne inte behöva söka, oroa oss för vad som händer 2017 eller vad som händer 2018 för nu vet vi att vi har finanser till 2018 och då kan vi utveckla mkt mer och göra det så att det stärker upp verksamheten mycket mer.’

‘Jag intervjuar ju alla volontärer och sen så väljer jag de som jag anser passar bra i verksamheten. Ibland, alltså väldigt många som säker sig hit är ju bra personer, de vill ju göra någonting bra, men om jag bara har 10 platser och det är 20 som söker så måste jag ju välja ut de som jag anser kan bli en bra grupp tillsammans.’

Interviewee 3, the Red Cross

‘... ja jag tycker det var jämbördig diskussion om det. Och vi hade ju, vi hade pratat ganska mycket om det, och som sagt så fanns det ju en historia i vårt samarbete också som man kunde grunda det på.’

‘Men det har ju varit en sådan sak som har varit i ropet så, det ska alla ha och det säger man då 10 ggr. Och sen så ska man köra genom det och där tror jag är farligt när finansiärer kommer in och styr vilka behandlingsmetoder man har och särskilt i en verksamhet där man har så pass mkt erfarenhet av just den patientgruppen.’

‘Och sen så tror jag allmänt det är bra att vi är rädda om vår typ av organisation, att vi har ett samarbete men att det inte flyter ihop... Det finns ju frågor där det skiljer sig ganska så rejält, så t ex för oss är det ju, om man nu ser på politik, och så, där vi ju då ska vara remissinstanser och uttrycka våra åsikter och så.’

Interviewee 4, the Red Cross

‘Jag tror det kan vara annat för andra verksamheter och det är det jag är ute efter, att är det inte hälso- och sjukvård så är det möjligt att man får göra någon slags ackommodering, för vår verksamhet har jag inte intryck att det alls har påverkat’

‘Vi har inte betonat avstånd. Därför att vi inte har varit rädd för att påverkas. [...] Det skulle säkert vara en mer viktig fråga för en mindre organisation tror jag.’

‘När det kommer till behandlingscentret finns det ingen frivilligdel överhuvudtaget för att hälso- och sjukvårdslagen inte tillåter att klinisk verksamhet levereras av frivilliga. Så att det går inte helt enkelt. Och ja, vi har haft kliniker, legitimerade kliniker som vill jobba på volontärbasis. Speciellt i höstas när det kom så många. Och då är det jag som har sagt nej till det.’

‘Och sen tänker jag att det finns möjlighet att arbeta knutet till den här verksamheten i barnverksamheten och i den här upparbetade frivilligbanken och då får du ju fortfarande insyn och delaktighet men du är inte behandlare’

‘Vi erbjuder utbildningar, föreläsningar, workshops eller utbildning på PTSD-center eller imorgon ska jag föreläsa för Malmö stad:s medarbetare, så är det ja, det är vi kliniker där som är ute och gör det också’.

Interviewee 1, Malmö stad

‘Jag tänker snarare att det handlar om projekt som ägarskap och att båda ska känna sig både delaktiga och ansvariga’

‘...jag har nog försökt och vara mån om att verkligen skapa nära relationer med föreningarna och de som jobbar där, just också för att vi har varit väldigt tydliga med att finns det nånting ni vill fråga [...] hör av er! Och för att de ska våga göra det och inte känna åh gud nu måste jag ringa Malmö stad igen [...] då krävs det ju också en nära relation och öppen dialog och så.’

‘För oss handlar det, det utgår från en gemensam målbild och en gemensam målformulering där vi tillsammans identifierar en samhällsutmaning och säger att det här vill vi göra tillsammans. Det är ju ingenting som, vi har ju tillsammans med de här föreningarna satt målen för verksamheten, så att det är klart då känner vi ju också gemensamt ägandeskap.’

‘...vi har en väldigt aktiv nämnd, alltså dvs aktiva politiker som väldigt gärna ville ha IOP och i och med att IOP var nytt och att det inte fanns så

mkt konkreta erfarenheter och exempel att hämta ifrån så var det faktiskt våra politiker som sa nämen vi vill testa det här och drev på det och det ledde till att vi tog fram en utredning som senare ledde till att vi tog fram ett par IOP'

Interviewee 2, Malmö stad

‘...om vi hade gjort ett IOP med en annan förening och inom nåt område som inte var så professionaliserat så skulle vi kunna hamna i en annan relation. Nu är det så pass professionaliserat så de lyder under hälso- och sjukvårdslagen, om med den, alltså den rollen man har spelat så har man också en tyngd i det man gör. Så det tycker jag... så det innebär jag tycker vi var likvärdiga.’

‘Det jag uppfattar som blivit skillnaden medan den här processen, det är ganska så hur tuff, vi fick jobba en del med själva avtals-, eller IOP-skrivandet för att vi skulle ha samma bild’

‘... ja det skulle jag nog säga att vi har ju ställt ett antal krav kring, ja kring kontroll, transparens och uppföljning som jag tycker att vi har fått gehör för i överenskommelsen.

Intervjuare: Och de är lite tydligare än tidigare under föreningsbidragstiden?

-Ja, det skulle jag nog säga.’

‘Jag uppfattar inte att det är ideella krafter med utan det är en professionell verksamhet som möter en annan professionell verksamhet.’

Interviewee 3, Malmö stad

‘Att de som driver det, att det är inte kommunen som driver verksamheten i ett IOP, det är partnerskap men det är inte vi som driver det, det är föreningarna som driver verksamheten.’

Interviewee 1, Region Skåne

‘...samtidigt var det många saker där som var nytt för en del andra föreningar, så ni måste ha en verksamhetschef, ni måste följa de här, alltså sjukvårdslagarna... ni måste ha koll på detta [...] På det sättet blev

det ju, en del av de andra föreningarna blev ju omvälvande, men inte för Röda Korset’...

‘...Så på det sättet så kan man säga att IOP:n är väldigt liksom riktad kring ett område där vi har ett gemensamt intresse. Alla andra intressena är liksom fördelade på det sättet att det får föreningarna och de här samfunden ha frihet att göra själva’

Interviewee 2, Region Skåne

‘...det är dialogbaserat eftersom det inte finns liksom några konkreta mål de ska uppfylla mer än god vård och det är liksom det kan ju inte bli faktabaserat utan det måste bli dialogbaserat’

‘...nej det kan jag nog inte säga att jag tycker men vi kanske inte har lika starka styrmedel som vi har för de privata.[...] alltså det finns liksom mer konkreta kvalitetsmåttal som de ska uppfylla och de har vi inte idag i alla fall på de idéburna’

‘...man tror ju att där finns nånting typ utav innovativ kraft och förmåga som, alltså att det på nåt sätt är lättare att få ut den liksom flexibilitet och nytänkande och så att än att man lyfter in nånting i den stora landstingskolossen liksom’

‘Men alltså det måste bygga på någon typ av ömsesidigt förtroende, alltså... och vad gäller Röda Korset så är det ju en organisation som vi har alltså, vi har ju stort förtroende för att de ser behoven och att de uppmärksammar eventuella liksom risker och brister i sin egen verksamhet också. Alltså det bygger på en öppenhet i dialogen.’

Interviewee 3, Region Skåne

‘...idéburna sektorn har en liten mognadsväg att gå, de måste mogna lite till innan [...] Inte riktigt där. Och det här tror jag också hänger samman med att det svenska samhället bygger inte på det här’

‘Men å andra sidan så tror jag att om det är så att man har en stark egen identitet och stark egen bärande idé så bör det väl räcka. Så bör det väl

bära en i detta också. När man sätter sig med den offentliga företrädaren där.’