

# Frontline Implementation of Welfare Conditionality in Norway:

## A Maternalistic Practice

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## ABSTRACT

Welfare conditionality is both ambitious and ambiguous for the frontline workers who put policy into practice. Since January 2017, the Norwegian frontline service should require social assistance benefit recipients under the age of 30 to participate in some sort of work-related activation, so-called mandatory activation. Drawing on qualitative interviews with frontline workers at local offices in the Norwegian Public Welfare Service (NAV), we investigate how the requirement is implemented in a context of a professionalised social welfare service. Mandatory activation is arguably a paternalistic measure. Drawing on Bernardo Zacka's concept of moral dispositions (Zacka, 2017, p. 90-91) and Laura Specker Sullivan's concepts of maternalism (Sullivan, 2016, p. 439), our findings indicate that at the

frontline, mandatory activation policies are implemented by maternalistic decision-making, emphasising the interpersonal relation between trained caseworkers and clients. The caseworkers use their discretionary powers in the implementation of conditionality and sanctions by emphasising care and support as embedded in the strict rules.

**Key words:** Activation, Maternalism, Norway, Social Assistance, Street-Level work, Welfare Conditionality, Youth

## **1 INTRODUCTION**

Requiring welfare beneficiaries to act in prescribed ways to make them self-reliant, such as mandatory work training, entails state regulation of their behaviour (Watts & Fitzpatrick, 2018). At the same time, work training can be helpful for gaining a foothold in the labour market. Thus, welfare conditionality can be regarded both as a threat and an offer - a so-called “thoffer” (Molander & Torsvik, 2015, p. 373). The changes of social policies in today’s democratic welfare states towards more conditionality can therefore create ambivalence and tension at the front line level of policy delivery (Senghaas et al., 2018). Front line workers continuously need to take decisions with consequences for the clients, which represents a responsibility that may subject them to heavy pressure. Bernardo Zacka (2017, p. 100) argues that it is impossible to balance the core values in frontline work of efficiency, responsiveness, fairness and respect into all cases in the daily practice. Frontline staff therefore develop certain moral dispositions that form their decisions to make it possible to handle the ethical challenges of implementing conditionality.

In this article, we study frontline implementation of welfare conditionality in the Norwegian municipal social assistance service (NAV) that constitutes the welfare state's last safety net. Although there are common aspects concerning the disciplinary character of activation of marginalised citizens that has been prominent in other countries such as in the US, the Norwegian frontline service is distinguished by social work professionalisation and a considerable amount of discretionary assessments (Soss, Fording & Schram, 2011; Terum, 1996). Moreover, in general, the social services typically emphasise relational work and taking the client's perspective into account in decision-making processes. From 2017, the Norwegian social assistance service must implement so-called *mandatory activation* for all claimants under 30 years old. Mandatory activation means that benefit receipt is conditioned by participation in some sort of work-related measures. This can include: 1) direct work placement for training purposes (with benefit or as ordinary employment with a wage subsidy), 2) mandatory participation at municipal activation centres where the claimant is provided guidance in job-seeking, or 3) "work for the benefit", i.e. the claimant carries out various municipal, practical tasks (Lidén & Trætteberg, 2019).

Professional practice is characterised by making knowledge-based decisions for the benefit or improvement of a client's life situation (Abbott, 1988). In order to be able to make professional decisions on the best outcome in individual cases, discretion is required (Molander, 2016). Professional service provision is arguably in-compatible with the individual monitoring and sanctioning of benefit recipients that is inherent in welfare conditionality (Caswell & Innjord, 2011; Marston, 2005; Røysum, 2009; Thorén, 2008; Van Berkel & Van der Aa, 2012). However, although activation policies imply restrictive and disciplining elements, the policies and measures can also have elements of individual support and enablement (Eichhorst et al., 2008). Nevertheless, coercive elements and

sanctioning practices of activation policies have received broader attention in social policy research than studies that pay attention to support and counselling of clients (van Berkel et al., 2017; Senghaas et al., 2018). One exception is a study of successful client trajectories, stressing the importance of two of Zicka's four proposed basic values - respect and responsiveness in working with vulnerable unemployed in Denmark (Danneris & Caswell, 2019).

In this study we aim to contribute to the literature by studying *how caseworkers in a professionalised frontline service balance core values when implementing the disciplining and enabling elements of mandatory activation*. Situating our study within a wider socio-cultural context, we seek to contribute to a broader understanding of local implementation of welfare conditionality.

## **2 WELFARE CONDITIONALITY IN THE NORWEGIAN SOCIAL ASSISTANCE SERVICE**

The municipal social assistance service in local NAV offices implement the Social Welfare Act. The statutory objective of the Act is to improve living conditions for people in a disadvantaged position and to contribute to self-reliance and social integration. A central task for the social assistance service is to provide information, counselling and guidance to solve or prevent social problems (Social Welfare Act provision § 17). The social assistance benefit should be a mean and not an end in the professional frontline efforts to contribute to social integration for individuals in a disadvantaged situation. Nevertheless, in practice, granting benefits have become a central part of the service provision (Terum, 1996). The service has a high degree of trained social workers who have professional autonomy to fulfill the ends of the service.

The Norwegian social work education emphasises counselling and therapeutic social work activities, and the educational programs seek to develop future social workers with critical and self-reflective attitudes (Campanini, 2010, pp. 689-690). The main object is to work for prevention, reduction and overcoming social and health related problems (Norwegian Regulations on National Guidelines for Social Work Education § 1). Because the public social welfare offices are linked to professional social work, there is a tension between the educational programs that encourages independent professional practice, and the bureaucratic rules of public service (Messel, 2013).

Since 1991, the social assistance service has allowed imposition of a work requirement in return for a benefit – typical workfare conditionality (Lødemel, 2001). However, conditionality has been enforced to a varied extent by municipalities or individual caseworkers (Kane & Köhler-Olsen, 2015; Proba Samfunnsanalyse, 2012; 2015). In January 2017, the Norwegian authorities amended the Social Welfare Act with Provision § 20a, which states: “Activation requirements shall be made upon granting economic support to persons under 30 years old, unless there are strong reasons against it.” Further it is stated that the conditions “must not be disproportionately burdensome to the benefit recipient or restrict his or her freedom of choice in an unreasonable way. (...) In cases of non-compliance it may be decided that the benefit shall be reduced, provided the recipient has been informed”.

The statutory provision of 1991 and 2017 differs in the sense that the first stated that conditions *may* be imposed, whereas the latter states that conditions *must* be imposed. Considerable discretionary assessments remain however when deciding the actual content of the activation as well as exceptions to the rule. The statutory provision further allows for discretionary assessments of in which cases sanctions should be imposed.

The statutory provision on mandatory activation falls into what Clasen and Clegg (2007, p. 175) classify as conduct, that is, requiring certain behaviour as an ongoing conditionality. The mandatory activation legislation commits the municipal welfare service to provide, and mandate, young benefit recipients with activation support services. This could be interpreted as a step away from the primary role of the social assistance benefit as the welfare state's safety net – supporting individuals to tackle the risks associated with social problems– and shifting its focus towards changing individual behaviour.

The law amendment must be seen in context of Norway's comparatively high share of so-called *inactive* youth (70 percent vs. half in the OECD average) (OECD, 2018, p. 9). Labour market conditions for youth are considered favourable and the country has a lower share of youth who are not in employment, education or training (frequently shortened to NEETs) compared to an OECD average. However, NEETs in Norway "tend to be more disadvantaged than in other OECD countries" (OECD, 2018, p. 9). Inactive NEETs means that the youth are not actively looking for employment, and hence, "they are - by definition - further from the labour market and less likely to be registered with the public employment services" (OECD, 2018, p. 36).

The Norwegian welfare state is characterised by a strong work ethic and an activist approach (Stjernø & Halvorsen, 2008) The state is not generally perceived as something citizens need to avoid, but rather as an essential part of everyone's environment (Trägårdh, 2007; Vike, 2017). In keeping with this ethos, public health rhetoric in general consists of expressions like "getting up of the sofa" that emphasise the benefits of being physically active (Journalen, 2013). Similarly, the government justifies the policy of mandatory activation for young recipients of social assistance by stressing the importance of young people quickly getting into activation to help them escape a passive lifestyle (White Paper

nr. 33, 2015–2016, p. 49). Hence, the emphasis on activation is presented not just as a political goal, but as a positive aspect of Norwegian culture.

### **3 MANDATORY ACTIVATION POLICIES AS PATERNALISTIC**

An interview study with Norwegian politicians about the 2017 provision of mandatory activation suggest that the politicians' support for activation of young social assistance clients reflect paternalistic concerns (Eriksen & Molander, 2018). Paternalism is one argument that can be used to defend mandatory activation (Molander & Torsvik, 2015). Conservatives such as Lawrence Mead (1997), promote a welfare policy, arguing that "inactive" people have failed to internalise work as a social obligation. Therefore, caseworkers should impose pedagogical tools to counteract the clients' lack of internalised work ethic (ibid.). The dependent poor, according to Mead, need to be guided towards independence through the compulsion of workfare schemes (ibid., p. 2). We argue that the Norwegian statutory provision on mandatory activation can be linked to paternalistic ideas. Admittedly, the Norwegian authorities' motivation for the rule of mandatory activation appears not to emphasise moral assumptions about individuals' internal work ethics. In the US, paternalist policies have cited "images of disorder and dysfunction in impoverished communities" (Soss, Fording & Schram, 2011, p. 2). Although young people in Norway who rely on public benefits are commonly called "benefitters" (*NAV'ere*) (The Language Council of Norway, 2012), the authorities' rhetoric appear less stigmatising. Instead, the purpose of mandatory activation is proposed as a measure for strengthening the chances of more beneficiaries returning to work or education (Proposition to the Storting 39 L [2014–2015], p. 125). More specifically, mandatory activation is based on a concern for "inactive NEETs"

being over-represented among social assistance recipients (White Paper nr. 33, 2015–2016, p. 34).

Mandatory activation is a strong requirement vis á vis the frontline services, i.e. telling the Norwegian municipal services what to do. The directive towards the professionalised frontline service is arguably a distinctive feature that seem to deviate from the emphasis on citizen/client duties and market reliance, that characterise the politics of welfare conditionality in the US and UK (Soss, Fording & Schram, 2011; Grover & Stewart, 1999). By exploring on caseworkers' experiences with the implementation of mandatory activation, the aim in this paper is to extend the understanding of mandatory activation as a complex decision-making practice including moral and ethical challenges. We continue with describing the study's theoretical perspectives, its data and method.

#### **4 MORAL DISPOSITIONS AND MATERNALISM IN PROFESSIONALISED FRONTLINE WORK**

Decision-making in frontline services is a crucial aspect of policy implementation. Michael Lipsky (2010 [1980]) argued that public policies remain an abstraction until it is carried out (ibid., p. xii). Street-level bureaucrats need discretionary powers to implement policy in the interaction with individual cases. Developing a political theory of implementation, through an ethnographic sensitive approach, Bernardo Zacka (2017) develops Lipsky's approach to street-level bureaucrats. Zacka identifies an implicit, but coherent moral structure that informs decision-making in the frontline. As agents of the democratic state, frontline workers are exposed to a plurality of normative values that frequently point in competing directions: they must be effective, fair with clients, responsive to their needs and respectful when interacting with them. Zacka says: "The proper implementation of public policy



depends on their capacity to remain sensitive to these plural demands and to balance them appropriately in light of specific situations” (ibid., p. 11). The work of street level bureaucrats is, according to Zacka shaped to varying degrees by the exercise of discretion. He differentiates between the enforcer, who rigorously uphold the rules, the indifferent who act in a person-neutral way minimising the emotional involvement with the client, and the caregiver, who is more likely to bend or break the rules if it would benefit their clients.

Zacka argues that grasping the ethical challenges faced by frontline social service bureaucrats requires to move from a focus on decisions to dispositions. In Zacka’s terminology, a moral disposition refers to a frontline worker’s personal style, formed in response to the huge number of cases s/he handles over time (ibid., p. 66). Zacka argues that these dispositions are pathological and reductionist, as they narrow and limit what bureaucrats are able to perceive, as well as the dimensions of value they are attuned to. According to Zacka, bureaucrats should be flexible enough to respond alternatively as indifferent, as caregivers and as enforcers, depending on the situation, rather than rely on only one of these moral dispositions (ibid., p. 98). In order to develop on the flexibility of Zackas’ three moral dispositions, we further introduce maternalism as an interpersonal dimension of decision-making applied by Laura Sullivan (2016).

Studies of maternalism situated within feminist theory, highlight issues such as maternalism as a political strategy (Koven & Michel, 1990) and gender equality, gender awareness and welfare reforms (Staab, 2012; Jenson, 2015). Inspired by Sullivan’s approach, and for the purpose of this study, the concept of maternalism is not meant to imply a gendered dimension to the action in question (caseworkers’ implementation of mandatory activation), just as both men and women can act paternalistically and maternalistically (Sullivan 2016, p. 442). Rather, Sullivan introduces maternalism as a better “window” into

aspects of decision-making not considered in analysis of paternalism (Sullivan, 2016).

Sullivan uses the example of Japanese physicians' non-disclosure of cancer diagnosis directly to patients, in elaborating on her argument. In Japan, the practice of non-disclosure of cancer diagnosis is restricted mainly to cases where disclosure is believed to harm the patient. This act is wrongly described as paternalistic, Sullivan claims. Although the act is intervening and the desired effect is to improve welfare and prevent harm, paternalistic and maternalistic actions are distinct as they have different motivating factors and different bases for judgement (Sullivan 2016, p. 439). More specifically, to act paternalistically disregards the other person's will because it focuses, according to Sullivan "conceptual attention on a general form of relationship that is at once the relationship of anyone and no one" (ibid., p. 439). In contrast, to act maternalistic focuses on how relational considerations might affect how the professional conceive of deciding for others beyond paternalism (ibid., p. 440). Thus, while paternalism applies to a relationship between an individual and a state, maternalism applies to interpersonal relationships (ibid., p. 442). Maternalistic decision-making is based on an understanding of the other developed through the familiarity to the other (through what Zacka describes as repeated encounters). Maternalism is defined as acting "in an autonomous person's best interests and likely in line with that person's will, but in the absence of the affected individual's expression of consent or assent. (ibid., p. 442)".

How, then, can one be sure that the physicians behave in line with the will of the client? In order to answer this question, Sullivan suggests the following two points as a 'validity check', which we think applies to professionals' decision-making in general: 1) that the professional have known the client for a sufficient length of time and 2) that the relationship is characterised by trust, although the nature of trust may differ based on the type of decision made (ibid., p. 443). Sullivan emphasises that there is no guarantee that a

maternalistic action is what a client really wants, however the professionals' sense of the client could at times be a better guide than, as in the case of Japanese physicians' non-disclosure, a pro forma signature by the patient. Hence, Sullivan considers the professionals' sensation of the clients' will, based on his or her familiarity with the client, as a 'good enough' guide assuming the clients' will. We argue that the concept of maternalism allows for a more thorough assessment of the moral justification of the kind of actions (implementing mandatory activation for young people) by staff in a professionalised service. The concept is useful to grasp the interpersonal relationship that is central in the Norwegian frontline service practice.

## **5 METHODS, DESIGN AND DATA**

The preconceptions informing our design and research interests build on our previous research experiences in social policy, social anthropology and studies of professions. This pre-understanding provides us with a framework for interpreting and exploring our findings, a *space of knowledge* (Lund, 2005). Recognising that choice of questions, precision and ability to follow-up in the interview situation are decisive in determining what kind of knowledge is produced and how detailed it is (Pawson, 1996). The next section will clarify the methodology informing this study.

We selected six medium-sized offices located in different municipalities and counties in two major regions of Norway. For this study, we interviewed 17 caseworkers. Fifteen of the caseworkers were women; two were men. 10 were trained social workers; seven had received their educational training in pedagogy or social sciences. Their tenure at NAV varied from two to 24 years.

Qualitative interviewing is an appropriate method for understanding people's experiences and understandings of a certain phenomenon (Brinkmann & Kvale, 2014). Inspired by an active interview approach (Andersen, 2006), guiding the conversation towards a specific topic - mandatory activation – we used a semi-structured interview guide. The questions were organised in two parts regarding the caseworkers: 1) background and general work experiences, 2) experiences with implementing and doing mandatory activation as well as their viewpoints on the new law change. The first part consisted of descriptive questions (Spradley, 1979). In the second part we were more actively focused on the study topic; mandatory activation.

In most instances, the interviewees gave us a short tour of their premises, providing us with a context for understanding the subsequent interviews. The insights obtained from these observations have contributed to our analysis and understanding of the interview data. The interviews were carried out between September and December 2017 at the informants' workplace and lasted 60-120 minutes. All of the interviews were recorded and transcribed. We informed the respondents about the project and research ethics concerning privacy and voluntary participation before the interview and all informants signed an informed consent form.

The analytical work is inspired by Zacka's notion of 'ethnographic sensibility' (Zacka 2017, p. 254-259); trying to grasp the interpersonal dimension (Sullivan, 2016) of decision making in mandatory activation. Our analytical procedures are abductive. Following Tavory and Timmermans (2014), we understand abduction as the combination of theoretical pluralism and empirical sensitivity, a process in which the researchers' theoretical foundations and "view" provide a perspective on how the data are understood and interpreted. Abduction allows for a wide repertoire of theories to increase the researchers'

likelihood to discover patterns and events in the data (Tavory & Timmermans, 2014, p. 5). First, all three authors read through the interview material in an effort to identify repeating themes voiced by our informants that were related to mandatory activation. These themes were systematically registered in Nvivo. Second, we drew on our analytical concepts, such as moral dispositions and maternalism, in effort to make sense of the caseworkers' interpretations of mandatory activation in their encounters with young clients. Finally, we discussed our findings critically.

## **6 CASEWORKERS IMPLEMENTING MANDATORY ACTIVATION IN ENCOUNTERS WITH CLIENTS**

In the following, we present the main findings of how caseworkers balance values when implementing the disciplining and enabling aspects of mandatory activation. We are specifically concerned with the interpersonal dimension of decision-making and how the caseworkers' moral dispositions come into play. Some of our informants evinced the moral disposition of the "indifferent", offering factual, "neutral" descriptions of how they implement mandatory activation. However, a prominent finding in the material was the high level of sensitivity to the users – expressed in *both* in the moral disposition of the 'caregiver' and the 'enforcer'. According to Zacka, when the caseworker is "'pulled out' of her bureaucratic impassivity through her encounters with the client", she easily turns into an advocate for the client and, further, into a caregiver (Zacka 2017, p. 75). This can be understood by the qualities of mandatory activation that is both a behavioural condition but in addition appears to bring into light the complexity of individual life situations and make problems more visible. In this sense, we find that mandatory activation compels caseworkers

to consider a variety of new issues when they attempt to set appropriate conditions regarding activation. The complexity makes the caseworkers liable to extend their follow-up work and insert themselves deep into their clients' private life when setting conditions regarding their behaviour.

### **6.1 They do not have anyone else**

When asked to describe their young benefit recipients, the caseworkers made it clear that implementing mandatory activation means working with young people who have a troubled background. Our informants generally detailed these young people in light of their social and cultural environment. Caseworker Randi provided the following account of her clients:<sup>1</sup>

*"You know, many, unfortunately, come from a poor social background that has led them to 'grow into' social assistance.... Some may have mentally ill parents or parents who are drug abusers. Many come from child welfare and then head straight to NAV. Some have just had a very bad upbringing and problems in childhood. Lots of bullying. Some really have - well, a diagnosis that has not been clarified before we start to grasp it, and start pulling a few threads and figure out 'what is this really?' But then you can also have Mary who comes in and has just graduated and does not have a job.... It's very normal not to go straight into a job, but applying for social assistance was never an issue for me. I would never have thought of doing that. But some people may not*

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<sup>1</sup> In translating the quotes included in this article we have made minor grammatical adjustments. All names are pseudonyms.

*have anyone else; they don't have parents who have money. So they are actually forced to.... At the end of the day, they just have to do it".*

Randi distinguished her clients in two groups; those with a troubled background and those who for various reasons are “just” unemployed. Her overall approach was nevertheless about the relation between the clients and the social assistance service (NAV) irrespective of the users’ individual needs and background. Pointing out that many clients do “not have anyone else” can be interpreted as a perception of her own role and the role of the benefit system as substitutes for absent or indigent parents. In this way, Randi showed a disposition towards her clients that was caring and sensitive in trying to understand their situation. In addition, Randi expressed a familiarity with her clients based on several encounters which enabled her to sense what they wanted.

## **6.2 Creating a safe and cozy atmosphere**

At the time the mandatory activation legislation was promulgated in January 2017, local NAV offices had developed different organisational arrangements for putting it into practice (Lidén & Trætteberg, 2019). Four of the six offices in our sample had municipal activation centres prior to the law change.

In the four offices that had already established activation centres, mandatory activation was implemented by referring clients to them. This meant the clients had to be at the centre for several hours every day – for instance, from 9 a.m. until 1 p.m. The daily activities consisted of showing up at a given time in the morning, having a meal (breakfast or lunch) together with staff members and other clients, applying for jobs online, visiting

potential employers with an application, and going to the gym. The staff attempted to counter possible negative feelings their young clients may have harbored concerning their obligation to show up, be on time and spend several hours at the centre by playing up the value of working through positive slogans and promotion of an energetic life style, using humour and laughter. Caseworkers described their efforts to create a homelike and relaxed environment for the young clients, such as setting the dining table with a tablecloth and candles. When touring the centres, we saw walls decorated with posters of house rules, help wanted notices, and client drawings of “my lifeline and dream for the future”. We interpret these efforts as a way to make the youth feel safe in the mandatory activation environment. The young clients were not required to engage in typical workfare tasks, like painting public buildings or chopping wood for the municipality. Caseworker Eva explained the reasoning:

*“When it comes to the content of the activation... after the law changed on the first of January 2017, we had politicians here who thought it was a great idea to have everybody who receives social assistance go around and clean up municipal spaces or paint buildings for the municipality. I consider this stigmatising for young clients.... We clearly state that making tasks like that compulsory is out of question for all of our youth.”*

Eva showed how the caseworkers are concerned about activating the youth according to what she considered meaningful and not stigmatising activities. Such activities were organised in the activation centres and not municipal tasks. Activation centres provided personal guidance and job-seeking and were thus less visible to the environment than carrying out work tasks for the municipality. Eva therefore took into account social norms



when assuming the interests and preferences of the clients. In this way, she balanced values of discipline with respect.

### 6.3 Going the extra mile for clients

The NAV offices that did not have an activation centre, implemented mandatory activation by referring clients to contracted providers or by doing the follow-up themselves. One of the caseworkers in an office without activation centre, Mary, explained that if she was worried about a client who did not show up for activation, she would leave the office and look for her/him at home to check if s/he was still in bed and okay. She found this more effective than contacting the client by mail or mobile. Her level of effort served to illustrate how many of the caseworkers were willing to go the extra mile for clients who struggled to comply with the activation requirements.

Similarly, Cecilie described how she went above and beyond for clients. In discussing clients who did not comply with the activation rules due to a self-reported health problem, Cecilie said:

*“I’ll stop it [the benefit] for a little while. And then I’m a little all over them. Like, ‘You know what, you have to go to the doctor’. ‘Yes, I will.’ If I don’t hear anything within a few days, I’ll call again: ‘Have you been to the doctor yet?’ And if not, ‘Yes, I’ll go’. ‘Okay, but should I help you? Should I book an appointment for you? Should I come with you?’”*

Cecilie was not only describing the lengths she was willing to go to in assisting clients, she also strived to avoid having to sanction them. Certainly, being closely followed-up in such a way could be experienced intrusive for clients. Nevertheless, as the Norwegian welfare state is generally active in relation to citizens, clients and frontline workers are familiar with the comprehensiveness of public welfare services. The frontline workers and many of the clients share the same cultural background and are socialised into a minimum of shared values in the Norwegian welfare state. Cecilie's close follow-up was a mean to avoid sanctioning, which meant that the lengths she was willing to go represented not only her interest, but also the client's interest in keeping the benefit. Thus, the caseworkers went the extra mile because the alternative to close follow-up was likely to be non-compliance with the rule of mandatory activation. The caseworkers based their practice on their familiarity with their clients and appeared to develop a sensation of their clients' will at the present time as well as a notion of what the clients wanted in the longer run if there were fewer distracting problems in their life.

#### **6.4 Rules of working life**

Although caseworkers demonstrated a caring concern with their clients when implementing mandatory activation, we found that the moral dispositions of caregiving and enforcing was combined in a particular way that was based on sensations of the clients' implicit will. When discussing non-compliance and how they explained the possibility of a benefit reduction to clients, the caseworkers commonly used working life as a reference frame. In some cases, coming five minutes late to an activation program or the activation centre could lead to a half-day reduction in the benefit. In one office, missing the bus, was not accepted as a valid

excuse, while in another it was often accepted, provided the client called in. Berit explained her centre's attendance policy this way:

*"It is like a regular workplace. You can't call at noon and say, 'I was ill today'. You have to call at half past eight to say you're ill."*

Here is Lisa on the same issue:

*"I tell my clients, 'For a valid absence,' you have to call us before nine o'clock in the morning if you are sick. It's not enough to send a text message'.... This is about preparing them for work, I have to do that when I'm sick.... I have to call him [the boss] because he has to have the opportunity to organise my workday, if possible."*

Citing her own experience and situation as an employee, Lisa hoped to help the client become integrated in work life and to learn the rules. In this way, she legitimated the "house rules" of NAV – which could be even stricter (such as a reduction in the benefit if the client came in five minutes late). In other words, norms and rules of working life functioned as a 'normative gold standard' for proper behaviour.

Caseworkers justified their strictness in terms that the requirements include 'training' and 'preparing clients' for working life. Thus, they were not just concerned about following the mandatory activation rule but also to act in the interest of the clients through a sense of their emerging interests. When describing how they implemented the mandatory activation requirement, the caseworkers did not explain their procedures by citing the rules, they rather depicted it as a means of helping clients reach a goal.

## 6.5 Making deals

Although the caseworkers required many of their clients to be engaged in activation and following the rules of working life, they also applied the law's exemption for mandatory activation. This happened in particular when clients had health issues. John explained his way of implementing policy this way:

*“Many of them are unable to meet every day, right? Mandatory activation means that you really show up every day. So we end up making a plan – ‘Okay, you meet two days or maybe one day’, and then it gradually increases as you... maybe feel better and become more comfortable and find your feet, right? So we try to adjust as well as we can, really.”*

Our overall impression was that the caseworkers were trying to accommodate client choices. They appeared attentive to their clients' situation, and showed flexibility in taking the clients' personal challenges as well as their personal potential into account. This was particularly evident when clients faced mental health issues. Here are comments from Eva and Mary:

*“Yes, occasionally we make deals like, ‘Okay, we won't cut, because he's really sick, he's so mentally ill right now that we couldn't get him to show up by reducing [the benefit]’”.*

*“Mental health is a recurring issue.... A classic is that you struggle with strong social anxiety, depression... so that to meeting up at the [activation centre] simply gets to be too tough and difficult. And if you’re in that situation, then it would be completely wrong to impose such a requirement, right? Then we have to make sure that that person is referred to the right authorities and gets help and follow-up. Then, if the condition improves eventually, we can impose a requirement to meet at [the activation centre], not necessarily every day, perhaps a gradual approach.”*

This kind of negotiation or individual tailoring for the activation requirement reduced the importance of sanctions. It reflected an attitude among the caseworkers of seeing ‘the whole’ client, and a moral disposition of caring for the other.

## **6.6 “Tough love”**

An overall finding was that the caseworkers’ primary intention was to “help people a bit more”, whether this was accomplished in a strict manner or more gently. Conditions were more emphasised than sanctions, which may signify that the caseworkers were just as oriented towards their clients as they were to the law and rules. Understanding a client’s situation were seen as of paramount importance.

The caseworkers tended to view mandatory activation as a cure for being “outside of society”. Camilla described her way of implementing mandatory activation as follows:

*“I try to talk about mandatory activation in a positive way... because they need help to get further in life, so that they don’t stay on social assistance for the rest of their*

*life.... However, I also try to say, try to be like everyone else in society and participate. Regardless of where you work, you are an important 'piece of society'. Everybody contributes.... It's like a machine in which all people are equal."*

In saying this, Camilla argued for the need of being included in society. She implied that being included in society was something the client may not yet express explicitly, but she believed that the client at some point would embrace this asserted need. For instance, the caseworkers in the study expressed a perception of clients' dreams of having an "ordinary life", i.e. with a family, house and a car.

Further, the caseworkers made it clear that they wanted to help, support, and comfort, but also felt a need to be strict, impose discipline, and insist that their clients adhere to routines. They believed that this two-track approach was needed to compensate for a lack of support, care, routines, and structures in the youths' upbringing. Karen explained her policy this way:

*"I like to be a problem solver, but the challenge here is that it's not me who should solve the problems, it's the clients themselves."*

Here, Karen was highlighting the conflict between enforcing and caring. She recognised that learning to cope on one's own was the best way to become independent, and at the same time had an urge to intervene and help solve her clients' problems to help them become independent individuals although they did not necessarily express this wish explicitly.

Per, on the other hand, favored a tougher line. He stressed the importance of "getting people out of the door". Although he agreed that youth needed follow-up, he

thought too much “comfort” could disempower the clients, rather than strengthen their motivation and willingness to work – they needed discipline to undo the damage caused by parents who had been too kind. Here is how he expressed his philosophy:

*“We need to ‘smoke them out’ – fill the room with smoke to get them out, stop sending money. And then they’ll pop up and say, ‘Hey, where’s my money?’ Turn them away at the doorstep.... You know, we are so kind to our children. We sew giant pillows under their arms. The parents tell NAV, ‘You shouldn’t cause trouble for my children by obliging them to show up at eight in the morning’”.*

Per posed a general accusation towards parents in his contemporaries who he thought were kind to fault to their young adult children. In other words, although a tough line can involve disagreements with the clients, the approach was based on the assumption that the clients had not been made ready for adult decisions in their upbringing. Both Karen and Per expressed that they knew their clients’ will, they were familiar with the clients’ habits and they had a strong sense of what would work (to smoke them out). These notions about the clients were based on repeated encounters and close follow-up.

Randi had a similar approach, yet she also clearly believed her role was to be a caring but strict “mother” to her young charges:

*“There are some that make you feel motherly (...) I give them lots of praise and encouragement, and... affirmation. They come in all depressed, and you see they are feeling better when they leave. They get a good hug and they really hug you back, and say thank you, and then they leave. Then you know they had a - and that's what's*

*so good about the job, right? However, I also tell them that 'I work hard for you, and insist and expect that you'll do as we agreed. If not, then we're stuck and will only stagnate.... To me - I consider it as help. It's like...for example, children. If we don't teach them and show them the consequences of their actions, then what happens? And here you have people who actually really need this even if they're grownups, unfortunately."*

Randi's comments indicate how the caseworkers in our study preferred to threaten clients with sanctions, rather than actually impose them. She regretted that some of the young clients needed her to be motherly, but also stern. However, she justified the strictness with the clients' gratitude as a sign of their own will. As Randi, many of the caseworkers expressed a deep-felt concern for their clients' wellbeing and went beyond their bureaucratic role when assisting the youth with a wide range of issues. They argued that mandatory activation was a form of caring. Threatening to sanction, as opposed to imposing them, can be interpreted as combining an enforcing disposition with a caregiver disposition. Moreover, the frontline workers believed they needed to push the clients hard to obtain the more or less explicit wish to become self-reliant.

## **7 DISCUSSION: WELFARE CONDITIONALITY AND MATERNALISM**

This article has explored the Norwegian caseworkers' implementation of mandatory activation for young social assistance recipients by elaborating on Zacka's framework of the moral dispositions of frontline workers and Sullivan's notion of maternalism. We found that the frontline workers view their young clients as "not having anyone else", which could be



either financially and/or emotionally. Further, activation centres emphasise a safe atmosphere. The caseworkers extend themselves to meet their clients' complex needs. Overall, they engage in interpersonal relationships. These interpersonal relations include pedagogical approaches and putting firm pressure on the clients by insisting on activity when considered appropriate, and at the same time being sensitive enough to apply the law's exemption for mandatory activation. Summed up, the caseworkers appear to be deeply committed to encouraging their clients' integration into work life and society.

### **7.1 Conditionality promotes interpersonal relations**

Our study indicates that the mandatory activation requirement for youth exposes the complex barriers that can hinder or prevent labour market participation, such as a lack of education, a social network, motivation, or family support. The caseworkers respond by trying to help the clients overcome these obstacles. Such engagement in the clients also applies to previous research that emphasises the importance of relational work in implementing activation policies (Senghaas et al., 2018). As the clients' complex problems are exposed when implementing the mandatory activation requirement, the rule produces a distinct pressure on caseworkers to resolve complex barriers, both individually and structurally. We see this pressure in the ways the caseworkers make deals by adapting the behavioural requirements to the clients' needs.

The caseworkers' practice can also be seen as a way to insert social assistance as a buffer between home life and working life. Caseworkers seem to regard social assistance as a transitional phase during which structural challenges related to other institutions can be solved. Assuming the major responsibility for clients that this approach represents, is an

example of Countant & Eideliman's (2015) observation that frontline workers devote much of their effort to compensating for the weakness of other institutions, such as the family, the educational system and the health sector.

## **7.2 Maternalism**

The frontline implementation of mandatory activation can be characterised by the frontline workers' balancing of the moral dispositions of the enforcer and the caregiver. These moral dispositions can further be seen as asserting the caseworkers' autonomy by acting in a way that they believe best serves the interests of their young clients. Enforcement of the rule could be considered paternalistic if the client's own will is not taken into account. In addition, Zacka (2017, p. 105) argues that the caregiving approach can be considered paternalistic by stating that it can easily "morph into paternalism - an unequal relationship in which the bureaucrat treats clients as if they cannot be trusted to make decisions for themselves". However, in light of our empirical findings, we interpret the moral dispositions that the caseworkers develop, slightly different. The caseworkers in this study are attuned to their clients' will, even though the clients do not explicitly "consent or assent" (Sullivan, 2016, p. 439). More specifically, the caseworkers base their decisions on an understanding of the young clients' "emerging interests", which distinguishes maternalism from paternalism (ibid., p. 442). The caseworkers sense the clients' needs through the close follow-up and face-to-face encounters that is facilitated by mandatory activation. They balance the enabling and disciplining elements of mandatory activation by emphasising the interpersonal dimension of decision-making that enables them to be responsive to the needs and will of their young clients.

The caseworkers' maternalistic practice should be understood as a way to incorporate a bureaucratic rule into a professional sphere. In the frontline service in the US, non-trained frontline workers must rely on own experiences in the realisation of the therapeutic role that welfare conditionality requires, in which leads to applying subjective assessments of clients (Soss, Fording & Schram, 2011, pp. 246-7). Using the analytical notion of maternalism in the analysis of Norwegian caseworkers allows for a broader understanding of how frontline workers can be responsive to clients' wants in the implementation of welfare conditionality without substituting their views with the clients' views.

Zacka argues that the moral dispositions of frontline workers are pathological and reductionist, as they narrow and limit what bureaucrats are able to perceive, as well as the dimensions of value they are attuned to (Zacka 2017, p. 98). Zacka concludes that bureaucrats should be flexible enough to respond alternatively as indifferent, as caregivers and as enforcers, depending on the situation, rather than relying on only one of these moral dispositions (ibid., p. 98). A maternalistic approach does not necessarily balance all four basic values in the frontline service of fairness, efficiency, responsiveness and respect. Rather, we propose that maternalism should be seen as a response that emphasises both efficient implementation of conditionality, responsiveness and respect. We argue that this balancing of values can be linked to the context of a professionalised frontline service.

## **8 CONCLUSION**

The mandatory activation legislation was enacted to fulfill a political goal: Get more young people in Norway into the workforce. However, our study suggests that this legislation's primary effect may be to make caseworkers more intimately aware of the complex barriers

that make it difficult for many of their clients to enter the labour force, and the absence of easy solutions. Mandatory activation relies on their high degree of autonomy to deliver highly personalised services to their clients. The caseworkers' response in terms of a maternalistic approach is a way to make sense of, and to adapt bureaucratic rules to encounters with vulnerable clients.

Welfare conditionality is usually not considered positive from a client's point of view as it represents interference and the weakening of social rights. However, when implemented in a context of an active welfare state and a professionalised frontline service, conditionality can be turned into meaningful service provision that reasonably assumes that people wish to be socially integrated in society. An invasive service approach should however not justify the end with the means. In other words, a maternalistic practice includes attentiveness to both ultimate goals and emerging interests to become self-reliant, as well as responsiveness to a client's present needs.

### **Conflict of interest statement**

The authors declare no conflict of interest.

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<sup>i</sup> In translating the quotes included in this article we have made minor grammatical adjustments. All names are pseudonyms.