

From Awkwardness to Action Christian Voluntarism in Denmark Beyond the Sector Model of Civil Society

Sevelsted, Anders

Document Version
Accepted author manuscript

Published in:
International Journal of Politics, Culture, and Society

DOI:
[10.1007/s10767-020-09378-0](https://doi.org/10.1007/s10767-020-09378-0)

Publication date:
2021

License
Unspecified

Citation for published version (APA):
Sevelsted, A. (2021). From Awkwardness to Action Christian Voluntarism in Denmark Beyond the Sector Model of Civil Society. *International Journal of Politics, Culture, and Society*, 34(2), 191-215.
<https://doi.org/10.1007/s10767-020-09378-0>

[Link to publication in CBS Research Portal](#)

General rights

Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

Take down policy

If you believe that this document breaches copyright please contact us (research.lib@cbs.dk) providing details, and we will remove access to the work immediately and investigate your claim.

Download date: 19. May. 2024



From awkwardness to action: Christian voluntarism in Denmark beyond the sector model of civil society

Abstract

Introduction: The article challenges the theoretical “sectoral model” of civil society through a historical case study and offers an alternative actor-centered approach inspired by American pragmatism. **Methods:** First, three separate strands of research are identified that each conceptualize civil society as a sector with institutional independence, a single normative logic, and fixed roles. Building on archival material on the Danish temperance organization the Blue Cross, the article then compares the theory to the empirical case. **Results:** It is argued that the CSO exposes three types of “awkwardness” in the sector model, as the Blue Cross 1) de-differentiated and became part of the public system of treatment for alcoholism, 2) applied multiple logics depending on the audience it addressed, and 3) acted in the role of “interpreter” rather than “antenna”—and specifically interpreted the needs of alcoholics in mutual understanding with state authorities. **Conclusion:** Finally, an alternative approach to the study of CSOs is proposed: A historically sensitive approach that, differently from an ahistorical model, analyzes collective actors historically, affirmatively, and situationally through their application of contentious and non-contentious repertoires of civic action.

KEYWORDS: Civil Society, Voluntarism, Collective Action, Temperance Movement, American Pragmatism

Introduction

A common conceptualization of civil society builds on the sector model: Civil society is a separate sector “between” other sectors—typically the state, market, and/or family—governed by a specific communicative or altruistic logic that is in opposition to the logics of power, money, and intimacy (Anheier & Knapp, 1990; Kocka, 2004b; Salamon, 1987; Smith, 1972; Somers, 1993). While this model has been criticized for neglecting the way civil society and non-profit has actively been “invented” by the state (Hall, 1992), for operating with a too diffuse notion of what the “sector” is (Lichterman & Eliasoph, 2014), as well as ignoring questions of inequality and power in the economy (Wright, 2011), it remains a prominent way of understanding civil society.

Thinking beyond the sector model is important mainly for two reasons: Civil society scholars tend to “select on the dependent variable” both empirically and normatively. Empirically, scholars tend to focus on civil society organizations (CSOs) either as “contentious” or “non-contentious”—either as part of social movements that make claims on the state or as voluntary associations that solve problems and contribute to social coherence and trust. In fact, many organizations do both. Normatively, scholars tend to focus on what is viewed as positive outcomes for society or groups that lack power and influence. CSOs that are considered to be “reactionary” or that, in other respects, do not match the values and convictions of the researcher tend to be neglected. In order to avoid this, I argue that civil society scholars should start by seeing CSOs as collective actors that make use of both contentious and non-contentious repertoires of action and rely on normative principles that must be evaluated in an “affirmative” manner.

I develop this argument first by identifying three strands of civil society research that views civil society as a separate sector governed by a logic distinct from other sectors, such as market, state, and family.

The literature review reveals that while each strand presents itself as an ahistorical general theory, each actually emerged in response to particular historical problems and events.

I then introduce the case of the Danish temperance organization the Blue Cross. This CSO will work in the analysis part as a “test” of three key aspects of the theories related to specific types of “awkwardness.” I argue that such CSOs as the Blue Cross put the sector model in an “awkward” position, since they do not fit the roles prescribed by sectoral boundaries.¹ They challenge the sector models of civil society, since they do not adhere to the idea of institutional differentiation, do not apply a distinct “logic,” and do not follow the normative ideals of the model.

In the first part of the analysis, I focus on the process of “de-differentiation,” which the Blue Cross underwent as they experienced a mission drift, shifting from being a central actor in relation to moral reform and treatment to being primarily a service provider for the state. This change showed the contingency of the shape and content of the “sectors” at any given time and illustrated how organizations often do not adhere to the theoretical boundaries of the sector model. The second part focuses on the different logics that the Blue Cross applied when approaching the public sector and their member base, respectively. This shows how CSOs often do not adhere exclusively to one logic, as in this case, the Blue Cross constructed and framed the issue of alcoholism according to the distinct “scene styles” of state authorities and adherers, respectively. The third part analyzes ideological similarities between the Conservative Blue Cross and the mostly secular social democracy in the interwar period—similarities that are “awkward” for the sector model.

¹ It has been suggested that certain social movements are “awkward” to many researchers, since they do not fit the established view of what a movement “ought to be,” e.g. terrorist movements or religious conservative movements (Polletta, 2006).

The final section of the article suggests an alternative approach to the study of CSOs inspired by American pragmatism: A historically sensitive, actor-centered way of analyzing the contentious and non-contentious repertoires of action that CSOs may apply in specific action situations.

Three strands of civil society research

The use of the concept of civil society took off in the 1990s on the backdrop of changing views regarding the role of the state in welfare provision, the decline in membership of associations, as well as the peaceful revolutions in central and eastern Europe. I argue in this brief review that while these theories of civil society claim to be general, they are in fact responses to specific historical junctures.

In short, three academic “spaces of discussion” on civil society can be identified as the most influential: 1) A discussion centered on service provision related to such names as David Horton Smith, Jon van Til, Lester M. Salamon, Helmut K. Anheier, and Volker Heins. 2) A discussion related to political civil society, overwhelmingly dominated by Jürgen Habermas and Jean Cohen & Andrew Arato. 3) Finally, a separate discussion has ensued, spurred by Robert D. Putnam’s social capital approach, leading to “neo-Tocquevillean” quantitative studies as well as “civic” approaches from such scholars as Theda Skocpol, Sid Verba, and Margaret Somers. I will briefly introduce the three research traditions and show how they emerged as responses to specific historical situations.

1 “Voluntary society” and “voluntary sector”

In 1972, the first issue of the journal *Voluntary Action Research* (or VAR, changed to *Nonprofit and Voluntary Sector Quarterly* in 1989) was published. The driving force behind the journal was David Horton Smith, who took the name for what was intended to be an interdisciplinary journal from Lord Beveridge’s report from 1948. The year before, Horton Smith had founded AVAS² (ARNOVA³ from 1990/1991) with some colleagues. Both initiatives were the result of efforts to create an interdisciplinary forum for

² Association of Voluntary Action Scholars

³ Association for Research on Nonprofit Organizations and Voluntary Action

discussions and research on issues related to voluntarism (Smith, 2003). In a VAR article from 1972, Horton Smith points to 15 “major analytical topics” of voluntary action theory and research. Besides pointing to issues that seem to have become “perennial” within the field, relating to definitions, change, and scope of voluntarism, the article has a clearly activist and utopian aim; in the section on “the futures of voluntary action,” he imagines the possibilities of a future “voluntary society” that seems to denote a highly self-organized society with less involvement of state and bureaucracy (Smith, 1972). This intention was reflected in the setup of the AVAS as an association that was democratically controlled by its members. According to Horton Smith, AVAS/ARNOVA and VAR/NVSQ became models for other national associations and journals in the decades that followed (Smith, 2013, p. 640). Horton Smith recently coined the term “altruistics” to designate a research field that seems to reflect these utopian ambitions (Smith, 2013).

The change of the journal to include “sector” in the title, under the editor Jon van Til in 1989, reflected a wider change in the research landscape, where the utopian elements of a “voluntary society” were toned down in order to focus on non-profit and voluntary organizations and associations as one sector among others with its advantages and disadvantages.

Tellingly, Lester M. Salamon was the author of the first article in the relaunch of the journal under the name of NVSQ. Since the early 1980s, Salamon had argued that rather than seeing state and voluntary sectors as opposites, they should be viewed as *partners* (Salamon, 1989). Salamon can thus be considered part of what has been termed the turn to governance (Celik, 2017), coining such terms as “third-party government” and “voluntary failure” (Salamon, 1987). The latter concept refers to a reversal of traditional thinking in political theory: Rather than seeing the voluntary sector as residual in producing the “collective goods” that are not produced by state or markets because of “failures” in these mechanisms of distribution, we should view government as the derivative institution responding to voluntary failure (Ibid.:39). Salamon lists four types of voluntary failure: philanthropic insufficiency (insufficient resources),

philanthropic particularism (supplying services only for certain groups), philanthropic paternalism (the wealthy determine how resources are allocated), and philanthropic amateurism (no professional training).

While this tradition has moved towards a more nuanced conceptualization of the boundaries between civil society and, especially, the state, the premise remains that civil society constitutes a sphere of its own, based on specific values or motives (altruism) and confined to specific roles (first movers, amateurs etc.).

While such general theorizing can prove fruitful for certain purposes (e.g. when measuring and comparing sectors), the shift in emphasis of this strand of research—from a self-governing ideal of society to a sector model—also shows how this research responded to two different historical situations: the ideals of the youth of the 1960s and 1970s vs. the “sobered” view of the welfare manager in the 1980s. Both the young and the matured views reveal awkwardness in individual cases that fall beyond the situation in which they emerged—for example, when state and CSO are basically equally paternalistic, as in the case of treatment of alcoholics in interwar Denmark.

2. CSOs as antennas of the lifeworld

A host of scholars rediscovered the concept of civil society on the basis of political developments in Eastern Europe, Latin America, on the “new left” in the late 1980s and early 1990s—initially around the circles of the “Second Left” in France, where the name Alain Touraine is probably best known today—and in the journal *Telos* in the United States (Arato, 1989a, p. 133).⁴ The strongest points of reference today, however, are especially Jürgen Habermas’ theory of communicative action (Habermas, 1985b, 1985a) and Jean Cohen & Andrew Arato’s subsequent development of this idea into a theory of civil society. This development is important, since it laid the theoretical foundation for perceiving voluntary associations as the carriers of a utopian project of democratization—and contributed to the tri-part model of state, economy, and civil society as the result of a historical process of differentiation among these sectors.

⁴ John Keane’s work also stems from the circles of Cohen & Arato (Keane, 1988)—controversially so, if we are to believe Arato (Arato, 1989b).

Since the beginning of the 1980s, Cohen & Arato published on civil society and social movements (Arato, 1981; Cohen, 1983). By appropriating Habermas' discourse ethics and his concepts of lifeworld and systems to the field of civil society (Arato & Cohen, 1988; Cohen & Arato, 1992), they propose an ambitious reconceptualization of civil society on the basis of the principles of discourse ethics: the "equal participation of everyone concerned in public discussions of contested political norms" (ibid., 345). They concur with Habermas in locating the proper place for a truly democratic project in the lifeworld of collective everyday experiences, and they recognize voluntary associations and the public sphere as the two key institutions of civil society (Cohen & Arato, 1992, p. 412). They add to Habermas that an important aspect of the recent developments in civil society is the process of self-limiting the movements involved. In contrast to earlier revolutionary projects, the aim is not to defeat other social groups, but to enable the growth of a pluralistic society. These groups thus come close to the ideals of discourse ethics: equal access to participation in deliberative processes that allow the "unforced force of the better argument" to work. According to Cohen & Arato, progressive social movements must have a dual purpose: a defensive aim of protecting and developing the communicative infrastructure of the lifeworld by setting up "barriers" for state intervention in the form of rights, as well as an offensive aim of collective action to mediate between systems and the lifeworld (Cohen & Arato, 1992, p. 530ff). These authors use metaphors such as antennas or sensors to characterize the role of movements and CSOs (Cohen & Arato, 1992, p. 526; Habermas, 2001, p. 300;359;365). Such antennas are supposed to amplify grievances in the lifeworld and put them on the agenda for systems to address. Cohen & Arato's prime example is the feminist movement, especially the second wave of the 1960s and 1970s. This movement had a dual strategy that targeted both the lifeworld and systems. They mobilized around issues of abortion, contraception, rape, and violence against women in order to influence the norms of the lifeworld (what is acceptable behavior, changing gender roles, etc.), and they acted as "antennas," relaying the grievances in everyday life in order to claim rights from the political system as well as to overcome inequality in the economic system—not through political violence, but through the use of arguments in the public sphere (Cohen & Arato, 1992, p. 551f).

This model is at once empirical and normative: Civil society is both the result of a historical process of differentiation into systems (economy and politics) and lifeworld (every day interactions) *and* the embodiment of the values of communicative rationality underpinned by discourse ethics. However, might it be the case that the way in which the economy, politics, and civil society was differentiated in the 1990s was not the result of a teleological historical process, but rather a historically contingent phenomenon? And do we not exclude too much, if all CSOs must align with the dual strategy of the feminist movement in order to be civil? The case I will present in this article, which studies the treatment of alcoholics in interwar Denmark, challenges both of these dimensions: First, it challenges the assumption of sector differentiation in the system-lifeworld approach. The case involves a de-differentiation process, through which the Blue Cross (along with many similar CSOs) ceases to be part of civil society “proper” in many respects and becomes more of a service provider for the state. Second, the Blue Cross challenges the perception of the role of CSOs as sensors/antennas, since the organization had a controversial interpretation of the needs of their beneficiaries, the alcoholics.

3 Civic engagement: Declensionism, community, and institutions

A third aspect of the concept of voluntarism becomes visible in the 1990s, during which, especially in the United States and Britain, there is a sense that something has changed: People are not socializing as they used to, they are not as considerate, and they do not join political parties, clubs, and associations as readily as before. The theme of the decline of associational and communal life since the 1960s is taken up first by Robert Putnam from a quasi-communitarian perspective and then by Theda Skocpol from an institutional, “federated” perspective.

In the 1990s, Robert Putnam became a household name almost overnight with his essay and later book “Bowling Alone” (Putnam, 1995, 2000). While the former carries the scholarly term “social capital” in its title, the latter flaunts the term “community.” Both are related to the thesis of a decline in participation in voluntary associations since the “civic-minded World War II generation” (Putnam, 2000, p. 17).

In his writings on the decline of American participation in voluntary organizations, Putnam builds on Coleman's concept of "social capital." In short, the argument holds that face-to-face interactions in small groups foster "social capital," which lowers transaction costs and enables the pooling of resources. Social capital takes various forms, such as trust and norms of reciprocity. The norm of generalized reciprocity, which involves exchanges where there is trust that a benefit granted now will be repaid at some time in the future, is especially useful for solving problems of collective action. "Networks of civic engagement," as seen in voluntary associations, increase the cost of "free riding" because of the risk of being banned from future winnings; they foster norms of reciprocity, facilitate communication about trustworthiness of individuals, and create templates for collaboration (173-4). Because participation in voluntary associations has seemingly decreased since the 1950s, there have been consequences for the levels of trust in civil society, as well as for the efficacy of the economy and the state. Putnam attributes the main cause for decline to "generational change," where the civic generation is followed by the less locally involved and more cynical baby boomer generation, and then by the materialistic and individualistic Generation X (Putnam, 1995, p. 284).

In contrast, Skocpol (Skocpol, 2001, 2004; Skocpol, Ganz, & Munson, 2000) emphasizes that voluntary associations in the early United States were not characterized by their local character, but by their federated character that connected local communities with state and federal levels. American voluntary membership organizations co-developed with the new nation and mirrored the three-level build of the federal state system in their organizational structures. Rather than being opposed to government, local parties, churches, and fraternal and "moral crusade" organizations were educating an active citizenry and providing information and strategies to influence the various levels of government.

While Skocpol agrees with Putnam's declensionist diagnosis of diminished membership in organizations since the "long sixties" (135), she sees the causes quite differently. Rather than a mere change in values and preferences from one generation to the next, Skocpol sees how politics have changed. Where

membership in the classic associations used to provide access to influence on every level of politics, and consequently endowed leaders of these organizations with prestige, the rights-focused movements of the 1960s and 1970s changed this dynamic. The new social movements—the heroes in Cohen & Arato’s narrative—designed strategies aimed more directly at the centers of power in Washington, the federal government and the courts; they developed new strategies for raising funds and communicating that were not primarily based on membership in organizations, but on influencing public opinion and decision makers—a virtual “advocacy explosion.” At the same time, class structures changed so that a well-educated professional class isolated themselves in the metropolises. Thus, the link between the elite and the masses was broken, and associations, which provided a channel of influence between local, state, and federal levels of politics, lost influence. Membership organizations were emptied of members and run by an activist elite based in the centers of political influence, seeking money rather than members to sustain their activities.

While the declensionist authors dutifully remember to point to “bad social capital” and the dark side of community and membership-based associations, they do so in an ad hoc way, and they tend to sample on the dependent variable—that is, only the types of social capital that lead to positive outcomes are considered. Those that lead to the infringement on rights, as in the present case, remain “awkward” in this model. Another major concern with this strand of research is that while the declensionist authors do not commit the fallacy of reading history teleologically, Putnam in particular tends to hold up one particular historical period as a “golden age” of associational and communal life—the 1950s—without an in-depth analysis of the historically contingent situation that made associations a desirable response to pressing issues at the time.

In summary: The sector model shows itself to be awkward in several ways. First of all, this is so with regard to the idea of institutional differentiation. As advocates of the model recognize themselves, the boundaries between the sectors are porous (Salamon & Sokolowski, 2016). Nonetheless, the model

assumes these boundaries, and some versions are further undergirded by a quite strong teleological conception of historical development (Cohen & Arato, 1992, p. 120 and *passim*). Second, this is so with regard to the assumption that specific types of action and motives fit neatly into these sectors. This was one of the central criticisms of Habermas' theory of communicative action (Honneth & Joas, 1991), but terms such as "altruistics" (Smith, 2013) also reveal this thinking, as does the clear statement by Jürgen Kocka: "As a specific type of social action, 'civil society' is characterized by the fact that it (1) is oriented toward non-conflict, compromise, and understanding in public (...)" (Kocka, 2004a, p. 69). Finally, the model is awkward with regard to its too one-sided concepts of representation with which almost all versions of the model operate—sensors, antennas, altruistic activity, advocacy etc.—where the needs of a constituency seem to be represented in a more or less unmediated fashion by CSOs.

I argue that much of this awkwardness can be explained by the fact that each of the three strands of research develops out of specific historical situations—the civil rights movement, the integration of the third sector into state welfare provision, the decline of traditional associational ways of organizing—that are then generalized into theory. Consequently, I will now illustrate the three types of awkwardness through a historical case study: the case of the Danish temperance movement the Blue Cross, established in 1895. At the end of the paper, I will suggest a more historically-situated approach to the study of civil society, inspired by American pragmatism.

Approach, method and data

To illustrate the three types of "awkwardness" of the sector model and foreshadow some possible solutions, I analyze a single historical case: the Danish temperance organization the Blue Cross and specific aspects of its development from 1895 to around 1938. A single case study of this organization is interesting because it represents a *deviant case* (Flyvbjerg, 2006)—that is, a case that does not fit the usual way of understanding civil society organizations. It is a "black swan" that allows us to reason that

if not all CSOs meet certain criteria, then we should potentially reconsider our definitions or our approaches to the study of such organizations. The single case study is additionally well suited for developing new theory in a developed field of research, as it can reveal new insights that may not fit existing theories (Vaughan, 1992).

I rely on existing research, but I build the central aspects of the analysis on primary sources from the Blue Cross archives.⁵ I rely on the Blue Cross members' magazine, protocols of the annual meetings, and protocols from the board meetings in the period of 1900–1938.⁶

The protocols covering the minutes for the central board and steering committee (CB) meetings reveal strategic decisions and the internal reasoning behind them. Reports of the annual meeting of representatives (AR) include the minutes from the general assembly as well as the open meetings, testifying to the extent to which specific positions were backed in the organization. The members' magazine (MM) was published bimonthly during the period in question, except for the period of 1904–1906, when it was published once a month. The magazine give insights into the diverse strands of the temperance discourse, covering statistics of alcohol-related deaths and diseases and the costs of alcohol consumption, as well as theological considerations of the relationship between the Bible and temperance.

The benefit of this “thicker” description of the material is that the empirical logics, roles, and reasons for processes of differentiation or de-differentiation become visible, instead of relying on what has been theoretically pre-established.

⁵ In this way, I follow a trend where historical sociologists are increasingly heading to the archives (Adams, Clemens, & Orloff, 2005, p. 26).

⁶ (Sevelsted, 2019) deals explicitly with the Blue Cross' involvement in the emergence of “illiberal” policies in Denmark.

The Blue Cross

In 2017, the Blue Cross Denmark had a turnover of approximately twenty-three million U.S. dollars. Today, it is involved in a range of activities related to the treatment of substance abuse: Eleven drop-in centers (*væresteder*), nine treatment facilities, seven homeless shelters, five support centers targeting children, fifty-eight second-hand shops, twenty-eight divisions offering therapy for young people, summer camps, Christmas camps, socioeconomic businesses, etc.—and it owns twenty-seven buildings.⁷ This makes it the largest service provider in Denmark in the field of alcohol and substance abuse treatment. While institutionally and financially a part of the public health care system, the organization has strong ties to the revivalist milieu of the Danish national church. The Blue Cross was founded in 1895 by Christian revivalists in Copenhagen and recruited adherers within the wider evangelical community in Denmark. The organization grew quickly to boast a membership of about 30,000 around 1917, out of a population of about three million people. In that same year, a tax on distilled spirits was dramatically increased, prompting a steady decline in followers, as many believed that the problem of alcoholism had been solved. As members withdrew, the organization started developing stronger ties to the public system. The organization's view of the alcoholic largely matched that of the public system, while its religious ideals did not prioritize the fight for individual and collective rights in opposition to the state, as the sector model would prescribe. The organization thus challenges the three assumptions in the sector model of civil society: 1) a teleological assumption of societal differentiation of sectors into state, market, and civil society; 2) the assumption that CSOs rely on a norms/motives/rationalities distinct from market and state; and 3) the assumption that CSOs take on the role of “antennas” of a lifeworld or advocates of the rights of ordinary people in opposition to state authorities.

⁷ Blue Cross Denmark annual report 2017 and <https://www.blaakors.dk/om/om-blaa-kors>.

Three moments of awkwardness: The Blue Cross as a test of key assumptions

In the following, I will present the temperance organization the Blue Cross as a CSO that puts the sector model of civil society in an awkward position by 1) de-differentiating the sectors of society, 2) sharing logics beyond those expected of a CSO, and 3) breaking from theoretically prescribed mediating roles as “antennas” between the “lifeworld” and the state in as much as the CSO acted as “interpreter” of their patients’ needs and, furthermore, shared rather than contested conservative values with state authorities.

Awkwardness 1. Institutional de-differentiation: Between moral reform and treatment

The Blue Cross was established as a “proper” civil society organization (from the perspective of the sector approach) by volunteers who sought to solve a social problem that neither the market nor the state were handling—namely, alcoholism. They would, however, soon find themselves caught between competing “moral reform movements”—mainly Christian revivalist and temperance movements that fought for a change in culture towards abstinence and temperance in alcohol consumption—and initiatives by the state and other temperance organizations that offered treatment for alcoholics. Throughout the twentieth century, as membership numbers dropped, the Blue Cross found themselves to have undergone a process of “de-differentiation,” where their independent status “in” civil society based on membership was almost gone, and they were now left almost entirely dependent on the state in the role of a “service provider.”

A proper CSO: Danish Blue Cross at its emergence

The founders of the Blue Cross were part of a well-educated urban bourgeoisie that were inspired by German, US American, and UK revivalist movements to do social work. They belonged to the circles of young entrepreneurial priests and revivalist laymen around the Copenhagen Home Mission (est. 1865), who, like the *Innere Mission* in Germany, had initiated a large social program. The fears of socialism and dechristianization of the capital and the country were combined with a critique of the national church for failing to address the social issues of the time (Schädler Andersen, 2008). These individuals were

highly educated and were oriented towards the international scene. They connected the national evangelicals with international developments as they sought direct and indirect inspiration from abroad through travels and literature. The common denominator was the search for a Christianity that was able to make itself relevant to contemporaries by actively engaging with the issues of the day.

This group of priests and laymen founded the Danish Blue Cross in Copenhagen in 1895. From the beginning, the Danish organization had a dual mission: to cure alcoholics through its religious message, and to lead people to Jesus through rehabilitation work with alcoholics. The core of the Blue Cross' work was initially carried out in local associations, where former alcoholics were supported by the other members through talk, prayer, song, and signing of the temperance declaration that priests and other members who were not alcoholics signed in sympathy. Added to this early work were educational activities, where the harmful consequences of alcohol consumption on the body, the nation, and the family were depicted through articles and talks. In the first fifteen years, the organization added such activities as outreach in known drunkards' homes, protest actions in bar districts, lobbying initiatives for a general ban on alcohol, and involvement in the treatment of chronic alcoholics in treatment facilities through the means of isolation, work, and moral (Christian) stimulation.

The organization grew slowly the first five to ten years, but during the first decade of the twentieth century, they sought out and succeeded in establishing an alliance with a rural revivalist organization called the Home Mission. This group shared with the urban evangelicals a Biblical literalism, a practical theology that emphasized moral conduct, and an emphasis on the role of laymen as preachers and missionaries. The Copenhagen entrepreneurs framed their theology and adapted their organization in ways that could win adherers from this movement and eventually overcome most of the Home Mission's initial skepticism of the organization. Until 1917, when taxes on distilled spirits were raised significantly, the organization experienced rapid growth.

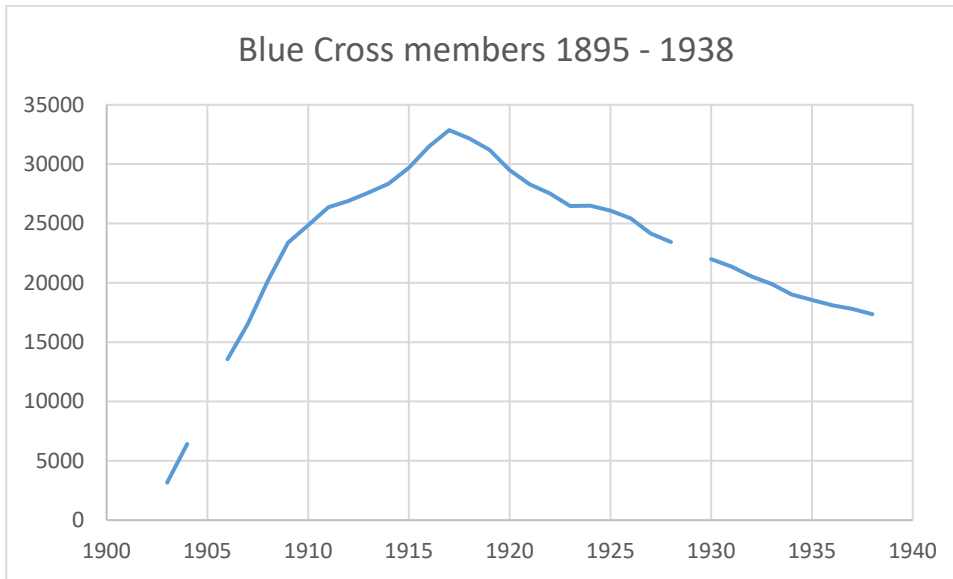


Table I: Membership development, Blue Cross 1903-1938. Data missing: 1905, 1929.

So far in its trajectory, the Blue Cross does not look awkward, but rather stays within the established model: At least institutionally, the Blue Cross has at this point established itself as a “proper” CSO “in” civil society. Based on voluntary engagement, the organization undertakes public tasks by creating self-help groups and gaining adherers through persuasion and proselytizing—that is, through “influence” rather than “power.”

However, the organization will soon start to de-differentiate, moving beyond the boundaries of the civil society “sector” and pivoting towards service provision for the state: Some ten years after its founding, the organization would start leveraging resources—gathered by its existing membership base and its conscience adherers, i.e. those invested in its moral mission—to engage in treatment activities as it converted the growth in members to financial support for treatment facilities. As I will show in the following section, this change would lead the organization to *de facto* cease to be part of the civil society “sector” and become part of the state, i.e. the public health care system.

From moral reform to treatment

Treatment of marginalized groups in society was in its initial phases when the Blue Cross was established. Since 1895, a few small treatment facilities were established by a group of priests, “temperance doctors,” and private citizens related to the Home Mission. The homes, however, were organizationally unaffiliated with the mission. These institutions followed the principles for dealing with other marginal and morally “suspect” groups, such as the insane, mentally deficient, and women deemed to be too sexually active (Koch, 1996, 2000), emphasizing isolation and discipline. They managed to obtain little financial support from the state. As these homes could not find resonance in the broader population, and enjoyed far from unequivocal support from the state, they were under constant threat of closing. In 1903, a sobriety commission was put in place, which in 1907 advised increased state funding to the treatment facilities—a recommendation that again found only little resonance (Sobriety Commission report, 1907). Treatment options were limited, as most alcoholics were simply committed to workhouses, and only a few financially vulnerable entrepreneurs had begun the work of treatment. The stakes—the cost for the individual, families, and the nation—were still disputed: Was it even worth it to engage in treatment efforts?

The Blue Cross development in income 1904 - 1938

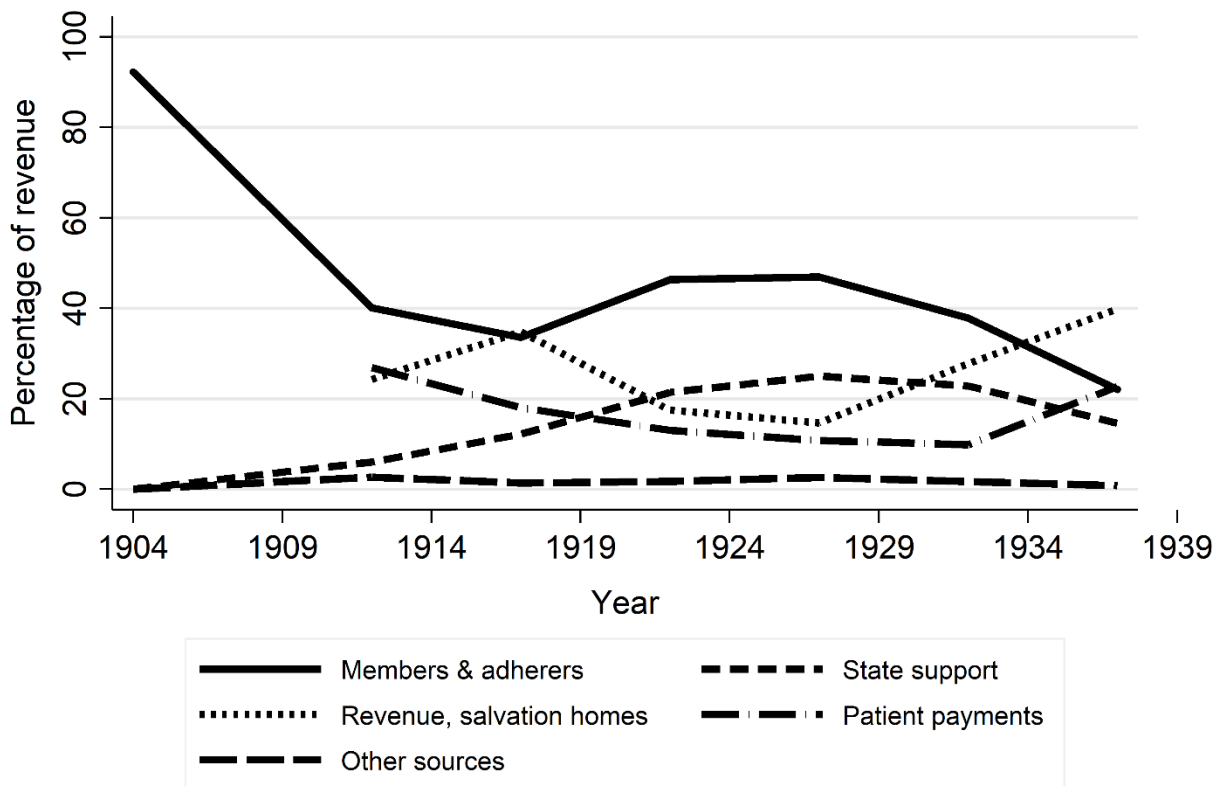


Table 2: Blue Cross development in income 1904–1938. Based on numbers from the Blue Cross’ Annual Reports. First published in Sevelsted 2019.

The Blue Cross established their first treatment facility in 1906. This was the sixth treatment facility for alcoholics to be established in Denmark, while two existed that reached broader target groups (“fallen women” and the homeless); most were founded and run by Christian philanthropists (Sobriety Commission report, 1907, p. 280). Because the existing “salvation homes” endured a troubled economy and held close ideological and network connections with the Blue Cross, it was a small stretch for the increasingly affluent Blue Cross organization to take them over.

When the Blue Cross established their first large facility in 1906, *Kærshovedgaard*, they mobilized their members to contribute directly to this cause by soliciting at their local meetings and organizing an annual nationwide charity collection. The organization's collections had a major impact on the field. In 1907, the Blue Cross collected a rather large sum for their first home through their traveling representatives, who visited in particular the "large communities in Jutland" (CB 1906, December 21), and through collection boxes at every local chapter, sales, and lotteries (CB 1906, November 1). This large collection effort for the benefit of their first facility led to a decrease in gifts for the existing Christian homes, so the Blue Cross was encouraged to take over the *Enkrateia* home (CB 1907, March 6). The following year, a more organized national collection was arranged to benefit the eight Christian homes that existed at the time (CB 1908, December 18). This event was organized by the Blue Cross, attesting to its *de facto* leadership of the Christian faction of the actors involved in treatment. The Blue Cross had successfully used the resources gathered from their constituents and conscience adherers to establish themselves as provider of treatment of alcoholics.

The state had already proven willing to contribute in some measure. A resolution from the department of justice had granted state subsidies for salvation homes for alcoholics as early as 1888 (Sobriety Commission report, 1907, p. 272); the Blue Cross homes received their share of these means, even if such support only constituted a minor part of their income during the first half of the century.

State recognition, however, was crucial in terms of gaining access to important—though, so far, limited—state subsidies, as well as a credential for the Blue Cross' salvation homes as proper treatment facilities, which would allow individuals to seek help and municipalities to make referrals. A steady flow of patients was important, since the economy of the facilities relied upon the work that was carried out there. The patients were not paid salaries, but merely small sums as tokens of "appreciation." Early on, the municipalities were close collaborators. In 1907, the municipality (*magistrat*) of Copenhagen was

approached, and it agreed to pay for patients receiving poor relief (minutes, April 19 and May 17, 1907), thus establishing a general arrangement (Granum-Jensen, 1979, p. 85). Later, the municipal child welfare committees came to be viewed as a place of recruitment of family fathers with alcohol problems (AR 1921, 56; 1924, 60). With the (in hindsight) controversial penal code of 1930 and the social reform of 1933, the forcible commitment of criminal alcoholics and the administrative commitment of alcoholic, negligent providers became possible.

These new measures meant that the organization slowly became more dependent on the state and municipalities for resources and patients. The results were evident, as the Blue Cross facilities were among the few that survived the 1917 tax increase on distilled spirits. This tax drastically reduced consumption of this type of alcohol, consequently reducing the demand for treatment of alcoholics, as well as the number of treatment homes from fourteen in 1911 to six in 1924. All of the six homes were run by Christian groups, four of these directly by the Blue Cross (Granum-Jensen, 1979, p. 86). While membership numbers continued to decline steadily, they did so somewhat more slowly than in the secular temperance movement (Eriksen, 1988, p. 253). In 1959, membership had dropped to about 13,000 (including the former colonies) (Bundesen, Henriksen, & Jørgensen, 2001, p. 156), but the members continued to contribute financially, making the Blue Cross more competitive than the public system's own facilities (started in the 1930s) (Granum-Jensen, 1979, p. 160). The continued relationship with the Home Mission secured a constant source of income: As long as the Blue Cross were endorsed by the evangelical movement, they could count on many of its adherers to contribute the Blue Cross through collections, lotteries, memberships, etc.

In 1960, then, at a time when contributions from members and adherers were dropping to a critical level, two social reforms brought the Blue Cross more firmly into the public system, ensuring that it was fully compensated for the patients it received through this system (Bundesen et al., 2001, p. 151). Some

years before, in 1951, the organization had sought and been granted permission from the leader of the Home Mission to finally join the umbrella organization of temperance organizations in Denmark, which it had resisted from the beginning (Granum-Jensen, 1979, p. 160f). The organizational structure based on local associations was later abandoned in the 1990s, while the temperance declaration in 2001 was changed to include the option of temperate consumption as an alternative to abstinence (Blå Kors, 2015).

The Blue Cross thus underwent a process of “de-differentiation” from a “proper” CSO, relying on its members, constituents, and adherers, to a “service provider,” funded and regulated by the state. The circle of Copenhagen founders had envisioned a rechristianization of Denmark based on the active engagement of the laymen of the congregations. As membership numbers dwindled, and the Home Mission lost momentum as well, the organization survived almost exclusively as a treatment organization—so involved with the state that, according to one employee, the Blue Cross volunteers today constitute a “competitive advantage” vis-à-vis other groups vying for contracts with the state and municipalities.

While the sector model does attribute names to such processes of de-differentiation—for example, voluntary failure and colonization—these concepts come off as rather coarse (or awkward) when one considers the nuances in the Blue Cross’ slow transformations related to differentiation *and* de-differentiation (cf. Elias, 1997). No unilinear development secured stable boundaries of the civil society “sector,” and this was not simply a case of voluntary failure or colonization: The Blue Cross acted strategically and normatively with and against other actors in order to survive and fulfill their mission—a mission that eventually and unintendedly drifted away. In the last sections of the article, I will propose that such processes are better understood through a historically sensitive, pragmatic approach that can show how collective actors change action repertoires over time in response to specific situations.

Awkwardness 2. One civil society logic or several?

According to the sector model, CSOs are supposed to act according to a specific form of communicative rationality (Cohen & Arato, 1992), norms of civility (Kocka, 2010) or altruistic motives (Beveridge, 1948; Smith, 2013). However, recent research has suggested that civic actors may apply different styles of action according to the “scene” in which they are acting (Lichterman & Eliasoph, 2014), just as social movement researchers have long analyzed how the message of social movements is tailored or “framed” to the specific audience being addressed (Benford & Snow, 2000; Snow & Benford, 1988; Snow, Rochford, Worden, & Benford, 1986). In the following, I will show how different—but overlapping—logics, frames, or scene styles were applied when the Blue Cross members and the authorities, respectively, were addressed by the organization. In line with the pragmatic approach to the study of collective civic action that I will present in the final sections, I prefer the term “scene styles” to “logics,” as scene styles denote “different, patterned ways in which actors coordinate civic action in a setting” (Lichterman & Eliasoph, 2014, p. 800), including the way that specific issues (such as alcoholism) are constructed in specific settings. In short, there is not one logic in civil society, but multiple styles, depending on the setting.

Scene styles: Salvation and cure

The treatment facilities established in the beginning of this period were called *redningshjem*. The Danish word *redning* carries the dual meaning of “salvation” and “rescue,” and the purpose of the homes (*hjem*) could thus take on different shades according to respective audiences: Homes for eternal salvation or for worldly rescue. For the Blue Cross, the two were one and the same; only salvation for eternity could truly secure rescue in this life, and eternal salvation was dependent on avoiding sin in this life. In this particular field at least, science and religion were not opposed, but supported the same end: The alcoholic, as part of both a moral and a medical category, was to be helped rather than blamed.

Early attempts at finding a medical cure had been undertaken as early as the 1820s, but only towards the end of the century did a discussion of possible causes and treatments begin among medical doctors, priests, and politicians (Eriksen, 2007). After an initial so-called “gold cure” had been discredited, a discussion of causes and treatments was started that would continue throughout the first half of the twentieth century. During this time, the perception of the “insane,” the mentally “retarded,” and prostitutes and alcoholics was slowly changing. These groups were increasingly understood in medical terms (Riegel, 1968), informed in part by the theories of heredity, degeneration, and eugenics developed by Mendel, Galton, Forel, Lamarck, and others (Dikötter, 1998). Alcoholics, however, did not fit easily into one type of explanation, and alcoholism would sway back and forth between religious, moral, physical, and social explanations. The state measures mirrored this ambivalence, and up until the 1960s, they continued to see the workhouse—as well as other disenfranchising and “soft” eugenic measures, such as a ban on marriage—as proper sanctions for criminals and negligent providers who were thought to be alcoholics (Thorsen, 1993, pp. 39–57). When arguing against the communists’ opposition to forced labor sentences, the influential Minister of Social Affairs (1929-1935) K. K. Steincke labeled alcoholics and similar groups as “repugnant” (Steincke, 1933, p. 60).

However, the Blue Cross, while sharing the belief in the condition’s a mixed etiology, did not find that the alcoholic should be blamed for his condition.

When the organization addressed their supporters and adherers through the members’ magazine, they argued, on the one hand, in scientific terms, explaining how alcohol affected the nervous system, organs, the GDP, and family life (MM 1900, 3; 1901, 137ff; 1902,5; 1904, 28; 1914, 21, 280); how alcoholism was a degenerative condition (MM 1900, 34-38, 97-100; 1903, 95f, 106; 905, 8f; 1912, 115); and even sought to use the local associations to document mortality rates among alcoholics (CB 1907, March 6). On the other hand, they spoke in religious terms when they referred to the alcoholics as victims or as “fallen”

(e.g. MM 1900, 107; 1901, 75; 1904, 185; 912, 175f); they relayed how the true meaning of *redning* was only realized in the Christian sense (MM 1905, 35f) and happily reported when there had been “awakenings” at the salvation homes (AR 1921, 21).

When approaching the state and municipalities for subsidies, the Blue Cross acted in only one style: They invoked scientific discourse, emphasizing their role as treatment facilities for sick people rather than their role as missionaries—which they continued to bring to the fore in their debates with the Home Mission. When in 1907 and 1908 they approached the Department of the Interior to request that municipalities cover expenses related to illness and death for patients under the poor law, they argued that they should be considered equal to the institutions for the insane, which received such reimbursements (CB 1907, December 18; 1908, January 22). When in 1913 a new settlement for state subsidies was reached (one-third of the expenses per patient paid by the state), the Blue Cross emphasized that the system was modeled on the existing system for combatting tuberculosis—and that this was proof that the state finally officially recognized alcoholism as a disease on par with other physical ailments (AR 1913, 18f).

From the perspective of the actors developing treatments for alcoholism, their work did not simply involve one overarching rationality, one motive, or one set of norms. Rather, different logics of appropriateness, or different “scene styles” as I have called them here, were adopted in order to appropriately address stakeholders in the field. Civic action entails “altruistic” as well as strategic modes of action that cannot be neatly separated in analysis without doing injustice to the empirical logics involved.

[Awkwardness 3. Normative principles and non-contentious collective action](#)

In the traditional model of civil society, CSOs are often characterized by the metaphors of sensors (Cohen & Arato, 1992, p. 526; Habermas, 2001, p. 300;359) or antennas (Habermas, 2001, p. 365) in a public

sphere, functioning as “sounding boards” (ibid.) and mediating between the individual experiences of the everyday lifeworld and the system level of politics and the economy. This mediation takes place not through direct power struggles, but through the indirect medium of “influence,” i.e. political pressure through lobbying, protests, etc. (Cohen & Arato, 1992, p. 131f;504). The organizations are thought to have an offensive function in obtaining individual and collective rights as well as a defensive function in protecting against encroachment of the “systems” into the sphere of the “lifeworld.” Interestingly, the example that Habermas provides in his original layout of the theory of communicative action is that of the state taking on the responsibilities of child rearing from the family (Habermas, 1984, p. 369ff)—a move that can also be thought of as “decommodification” and thus the emancipation of laborers in other research traditions (Esping-Andersen, 1990).⁸ This points to an inherent “awkwardness” in the sector model, as the “lifeworld” becomes reified as a site of unified “good,” when in fact there is a constant battle over what parts of the “lifeworld” should be protected and in what ways. In the case at hand, the question centers on who deserves protection, the individual alcoholic or his family? The answer put forward by the evangelical Blue Cross was not to protect the individual rights of the alcoholic, but to protect the Christian family, including the alcoholic as part of this family—and representatives of the “system” agreed. The following analysis demonstrates that CSOs are not simply “antennas,” relaying the needs of adherers to the political system, but rather interpreters, who have their own ideas about what the needs of those they claim to serve actually are.

The family in politics and religion

As argued by Sevelsted (2019), contrary to widely-held beliefs among Scandinavian eugenics researchers during the interwar period, social democratic social policy of this era in Denmark was not dominated by “progressives” who sought to intervene in the private sphere of the family and individuals in the name of a more or less utopian ideology—which was in fact the case in Sweden (the Myrdals) and Britain (the

⁸ Habermas admits as much (ibid.).

Webbs). Rather, the traditional family was still very much at the center of social democratic “population politics,” i.e. the efforts to lower the birth rate of the lower classes and raise the birth rate of the middle classes (Banke, 1999). Steincke, the influential Minister of Social Affairs mentioned above, was responsible for much of the eugenics-inspired legislation passed in the 1930s targeting not only the mentally ill, but also those thought to be of under average intelligence, “loose” women, and alcoholics. He was not a great ideologue, but more of a technical expert—essentially, a bureaucrat—who believed not in large-scale social engineering, but in the scientific evidence for negative eugenic measures in halting the degeneration of the proletariat—although, not in changing the gender roles of the nuclear family in order to support the procreation of the middle classes.

In this way, the social democratic Minister shared beliefs with the evangelical temperance organization. It is evident that the family was at the heart of the beliefs of the Blue Cross from their general assembly’s discussions of the municipal child welfare committees, which since 1905 were responsible for deciding when a child should be put into protective care. It was put forward that the Blue Cross should seek to make their voice heard in these committees, and that rather than taking the child away from a family with an alcoholic father, they should ensure that the father was forcibly committed to receive treatment (AR 1916:59; 1930:53). The primary concern of the organization was the family, not the individual rights of the alcoholic. This is especially evident in the edifying short stories that the organization published. Here, the city is depicted as a “Sodom and Gomorrah” (Garboe, 1934), complete with false friends (Christensen, 1918; Leth, 1910, 1928; Nielsen, 1938), evil innkeepers (Rasmussen, 1923), and bad drinking habits (Dahl, 1933, 1936; Rasmussen, 1921). The city is contrasted with the healthy Christian family life, often in a rural setting (Folmann, 1938; Leth, 1915).

In large part, this family ideal explains why the organization not only accepted the (in hindsight) controversial aspects of the 1930 and 1933 reforms that allowed for quasi-forcible commitment of

alcoholics to the organization's treatment facilities, but also actively lobbied, along with the rest of the temperance movement in 1916, for the possibility to forcibly commit alcoholics to treatment (AR 1916:11f). Two years before, the general assembly had in a unanimous vote decided to have the organization's central board approach the government and parliament to pass laws on the forcible commitment of alcoholics when certain criteria were met (AR 1914:57). These criteria were not specified, but one can speculate that they were similar to the criteria of the 1930s public system—namely, involving the diagnosed level of alcohol dependence as well as the predicted consequences of alcoholism in terms of criminality and negligence, which determined the ability to provide for one's family. When the national laws were passed in the early 1930s, the Blue Cross did not protest the “co-optation” of their treatment facilities. The organization seemed to have had mostly logistic concerns in relation to the influx of new patients (CB 6/7 193. AR 1934:49-52), in addition to concerns about the new unruly criminal patients (AR 1934:14,51; AR 1936:54; MM 1943:20; CB 23/05 '34). In 1943, these tasks of dealing with this patient group would be handed back to the authorities.

In Habermasian⁹ terms, the practical arrangement between the Blue Cross and the governing social democracy regarding the treatment of alcoholics was something between an *agreement* and a *mutual understanding*. That is, the parties accepted the arrangement for partly different and partly the same reasons. While the Blue Cross acted on reasons to do with their missionary—and essentially conservative—ends, and the social democracy acted on reasons related to their political visions, and in this way simply “agreed” for practical or strategic purposes. But they also acted on some of the same reasons; they had a “mutual understanding” of the value and the role of the family.

Thus, the Blue Cross case stresses the awkwardness of the sector model of civil society: If CSOs function as “antennas” that put grievances from the lifeworld on the agenda of “systems,” what grievances

⁹ (Habermas, 2003, pp. 307–342).

should be amplified? What if the CSO does not assume the theoretically prescribed—i.e. passive—role of “antenna,” but rather the more active role of interpreter? And what if this interpretation is shared across the sectors of civil society and state, as shown above?

Collective civic action: Contentious and uncontentious repertoires of action

The case of the Blue Cross in Denmark has shown three types of awkwardness in relation to the sector model of civil society: First, the boundaries between civil society and state became blurred as the organization “de-differentiated” through loss of members and increasingly became part of the public health care system. Second, the organization applied not one logic, but at least two distinct logics (or “styles”), depending on whether they addressed the state and municipalities or their members and adherers. Third, they acted to protect the family rather than the individual, begging the question of whether CSOs are actually value-based “interpreters” of the needs of their beneficiaries rather than “antennas” that passively amplify grievances of the lifeworld. As I have argued, these shortcomings of the “sector” approach stem in part from the fact that the theories themselves emerged as historically situated answers to societal developments. They stem in part, too, from the fact that theorists tend to empirically and normatively “select on the dependent variable,”—that is, choose cases and phenomena that fall squarely within their definition of the moral and empirical conditions for CSOs—rather than starting with collective action and then seeing how and to what extent actors behave in ways that may be considered part of their civil society definition.

Rather than starting from a list of preconditions that CSOs should meet in order to be considered part of “civil” society, I would suggest a historically sensitive approach based on the thinking of American pragmatists, which emphasizes contingent developments and the repertoires of action that CSOs

actually deploy. The following three sections start from the basic insights from the American pragmatists that all action is situated; that collective actors define the situation in which they find themselves to solve the problems at hand; that they do so creatively on the basis of past and new experiences; and that strategic and value-based action are not separated, but interlinked, given that preliminary “ends-in-view” are constantly revised on the basis of the available means (Dewey, 1939; Gross, 2009; Joas, 1996). Each of the following sections reflects upon the three types of awkwardness described above in relation to the questions of differentiation, logics, and interpretation.

From teleology to historical contingency

How can we understand the de-differentiation process that the Blue Cross underwent as they became engulfed in the state apparatus? Was this a case of “voluntary failure,” part of the “decline” of civic engagement, or an aberration from the ongoing rationalization and differentiation of civil society from the state? As argued above, none of these interpretations seems to be entirely adequate. Here, Skocpol presents the most historically sensitive account, while especially Habermas and Cohen & Arato present a historical meta-narrative of a sector that gains autonomy through a teleological development.¹⁰ All approaches, however, suffer from a blind spot: the inability to see the historical contingency of their own perspective. The advocates of a voluntary society were clearly influenced by the movements of the 1970s, the voluntary sector researchers experienced a more matured and established field looking more like a “sector,” the “differentiation” of civil society researchers modeled their concepts on the recent revolutions in the east and the south, and the “declensionists” clearly put the 1950s (or even earlier, in the case of Skocpol) as the baseline for the level of civic engagement. These approaches are perfectly valid, but in most cases, each contingency is not explicitly acknowledged. Instead of more or less

¹⁰ I am somewhat overstating my point here. Habermas does seek to avoid teleology through a complicated understanding of how historical evolution can be reconstructed, but not causally described (Habermas, 1975). The overall process, however, does in hindsight look suspiciously teleological.

teleological models of the development of the “sector” or research into the established boundaries of such a sector, I will advocate for the “democratization of the differentiation question” (Joas, 1996, p. 238). Rather than seeing the differentiation thesis as the master trend of societal developments, or taking historically contingent boundaries for granted, researchers should foster discussions through which such boundaries can be drawn. “Differentiation” in its teleological guise constitutes a “dangerous process concept” (Joas, 2017, pp. 355–373). Concepts such as modernization, rationalization, disenchantment, and differentiation indicate grand teleological historical developments, where the end goal of a historical process is known in advance. Such concepts are dangerous, since contemporary knowledge of historical outcomes can block an adequate understanding of historical developments, just as it tends to homogenize and simplify historical developments, rendering them less ambiguous than they actually are (see also Elias, 1997).

By not ossifying a specific historical development, the researcher can employ a more nuanced approach to see the connections between state and civil society actors. The collaboration between the Blue Cross and state authorities—and the *de facto* enrollment of the CSO in the state system—can be viewed as a *specific* case of de-differentiation. Rather than a failure, an aberration, or a teleological development, the historical study reveals what Koselleck calls a “future past” (Koselleck, 2004): The Blue Cross originally envisioned a rechristianized Denmark and an active congregation that took upon itself to lift social tasks. This never came to be, but rather than simply putting this in the past, we can reinvigorate this past so that it can once again become a possible future—which may lead to a “re-differentiation” given the right conditions and enactment of these.

[From discourse ethics and social capital to affirmative genealogy and valuations](#)

Were the efforts of the Blue Cross, then, “civil” in a normative sense? According to the social capital approach, they did foster social capital among their members, but was this “good” or “bad,” bridging or bonding? While the social capital approach is not able to provide a normative measuring stick, the

approach put forward by Habermas and Cohen & Arato argues that “discourse ethics” provides a measuring stick: Only norms that live up to the procedural requirements of symmetry, reciprocity, and reflexivity of rational discourse can be argued to have validity (Cohen & Arato, 1992, p. 348). Measured against the standards of discourse ethics, the scientific and religious reasons behind the norms and actions of the Blue Cross would not be considered “civil” because not all affected were heard (notably, the alcoholics), they relied on religious (traditional) reasons that were not publicly available, and they infringed on the basic rights that constitute civil society. Nevertheless, the Blue Cross acted on the principles *of* civil society—that is, the freedoms of association and assembly—and thus must be considered a part of the “sector.” This is not the place for an in-depth discussion of the Habermasian discourse ethics. While it is hard to disagree with the ambition that norms should be based on publicly, easily scrutinized reasons, my main objection to discourse ethics is that it cuts off too much: Collective action seldom begins with motives of rational action and need not proceed according to rational procedures. Instead, collective action springs from experiences of collective elevation or injustice (Joas, 2000; Thompson, 1971). Rather than identifying “civil” with “rational” and relegating emotions to a mere precondition for civic action, I suggest a historical and actor-centered approach that takes tradition and experiences seriously.

This approach need not, however, become mere historicism. Here, I follow Hans Joas’ proposition for an “affirmative genealogy.” Joas argues for a historical method under the heading of “Neither Kant nor Nietzsche” (Joas, 2013, p. 97): Questions of moral validity cannot be separated from questions about the context in which value commitments emerge. Importantly, this insight need not lead to moral relativism, since values may still claim validity, and even universal validity, despite or indeed because of their emergence out of contingent historical phenomena. With inspiration from Dewey and others, Joas contends that values cannot be found in a transcendental sphere or be decided upon in communication.

Rather, they owe their validity to the subjective or collective experience of self-evidence. The binding force of norms and values comes from their origins in specific action situations.

According to Joas, the appropriate method to apply based on the insight of historical contingency is “affirmative genealogy.” Such an approach on the one hand takes seriously the fact of contingency, the openness of action situations, while on the other hand avoids moral relativism by “(...) affirming the way in which historically formed ideals call upon us” (ibid., 148). It seeks to realize, in the present, values and ideals that may have faded away or that may be professed—but not adhered to—by reconstructing the context in which they first emerged and showing how “positive” or “negative” experiences were acted upon in order to give life to these values and ideals.

Such an approach would provide a more nuanced account of civil society actors like the Blue Cross that otherwise seem “awkward” when tested against the yardstick of discourse ethics. For individuals and groups who have come to value the universal integrity of the person—having inherited the world after the atrocities of WW2—the use of forcible commitment in treating alcoholics appears unjust. At the same time, for someone who values collective initiatives to alleviate suffering, the self-help groups of the Blue Cross stand out as a civic achievement—whether the religious tradition behind it stands up to the test of procedural consensus-making or not. The evaluation of historical actors should thus not depend on whether they adhered to the supposedly sole (altruistic or communicative) logic of civil society, but should instead proceed in a more situated and engaged manner.

[From “antennas” to interpretive repertoires](#)

Finally, I ask how we as civil society researchers ought to construe the relationship between civil society actors and those whom they seek to represent politically, as well as whose suffering they seek to alleviate. The Blue Cross, I have argued, proved awkward to the sector theorists, since their role was not simply to act as “antennas” and represent a constituency in a “defense of the lifeworld” vis-à-vis the

state “system,” but to uphold a much more problematic collaboration with the state on forcible commitment. Rather than using the metaphor of “antenna” that alludes to direct representation and amplification, I would argue for the use of the concepts of “interpreter” and interpretive “repertoires,” indicating a much more mediated mode of representation.

We should understand the emergence of collective action as “*creative processes in which contingent possibilities are idealized*” (Joas, 2000, p. 114) (Joas’ italic). Such processes should be seen not simply as the accomplishment of individuals, but also as collective experiences of emotional intensity and elevation (Durkheim, 2008; Sewell, 1996, p. 865)—just as communicative processes hold moments of self-transcendence, of perspective-taking and enjoyment of shared experience (Joas, 2000, p. 118f). Here, participants “coordinate the ongoing interaction together” and “implicitly act as members of a larger, imagined community” (Lichterman & Eliasoph, 2014, p. 810).

By emphasizing moments of creativity and the vision of a larger community, CSOs stand out not as representatives, but as interpreters that actively shape a collective “we” as well as contentious and non-contentious modes of intervention. This collective “we” often refers to an active in-group, while there is an out-group on the receiving end of the action taken by the in-group; the in-group thus interprets and acts upon the needs of the out-group. Contentious repertoires of protest and non-contentious repertoires of philanthropy, charity, and social work help to set the boundaries and define the relations across the boundaries between in- and out-groups—that is, between givers and receivers. The interpretation of the “larger society” or community of which actors are members already establishes some understanding of who is part of the community and how those in need inside the community ought to be helped. A reborn evangelical and a temperance adherer relate to those who are not “awakened” and not temperate in specific ways. Different types of collective action with distinct ideational inspirations also set the boundaries of the community in different ways. Some may deem the

alcoholic to be outside the sphere of responsibility, while others may extend that responsibility to even the most hopeless. The concrete means of collective action, however, also establish specific relations among those deemed within the boundaries of obligation. Deploying repertoires related to self-help associations, as well as repertoires of “going to the streets” or petitioning, creates distinct relations between the actor and the constituents being represented. Each community includes specific visions of mutual obligations or ways of understanding reciprocal relations. The identity of the in-group and their vision of community is clearly linked to expectations about what kinds of action is expected to be taken and on behalf of whom, while at the same time, specific expectations are held for those receiving—expectations of moral change, gratitude, or participation.

Means of action Giver-receiver relation	Contentious	Non-contentious
Symmetrical (By and for in-group)	<p>Action repertoires: Public protest, petitioning, public debate: Advocacy of Christianity as the solution to social problems.</p> <p>Ideological repertoires: Revivalist Christianity</p>	<p>Action repertoires: Self-organization: Local temperance associations for alcoholics</p> <p>Ideological repertoires: Revivalist Christianity</p>
Asymmetrical (By in-group, for out-group)	<p>Action repertoires: Public protest, civil disobedience: Advocating municipal and national prohibition measures</p> <p>Ideological repertoires: Revivalist Christianity, medical science</p>	<p>Action repertoires: Philanthropy, direct action, treatment</p> <p>Ideological repertoires: Revivalist Christianity, medical science</p>

Table 3: Types of action and target groups, Blue Cross

Table 3 shows a simple typology of the action and ideological repertoires that the Blue Cross has invoked historically.¹¹ The four squares show different combinations of repertoires and group-orientations. The Blue Cross invoked both contentious repertoires (targeting the state) and non-contentious repertoires (direct problem-solving), just as they promoted symmetrical (for and by the concerned group: alcoholics) and asymmetrical (for, but not by, the concerned group) forms of action. The top left square covers the symmetrical and contentious repertoires—that is, the targeting of the state based on the self-interests of the in-group revivalist priests and laymen that led the organization. From the beginning, this group had an ideological interest in “rechristianizing” the country as well as promoting Christianity as a means for curing alcoholism and other types of social problems. However, they also applied symmetrical action repertoires in their non-contentious problem-solving (top right square), where (ideally) alcoholics themselves would help each other maintain their sobriety. The organization also applied more asymmetrical action repertoires for problem-solving (bottom right), namely the treatment facilities, and most asymmetrically, the forcible commitment to such facilities. Finally, the bottom left square accounts for asymmetrical contentious repertoires, where the temperance organization advocated for the state to take prohibition measures for the benefit of alcoholics and groups affected by the dangers of alcohol (in particular, the youth). I have also added the ideological repertoires on which the Blue Cross based their actions. The schema obviously does not do justice to all nuances, but it does indicate the ways in which revivalist and medical schemas were invoked. Paying attention to the different schemas of action and ideology that the Blue Cross have applied allows the researcher to bring to the fore the various ways that the organization has interpreted its interests, as well as those of the alcoholics—thus enabling the researcher to make a nuanced judgment according to the principles set out by the affirmative

¹¹ For the sake of completeness, it should be noted that collective civic action can also be what you might call “un-contentious,” i.e. where the CSO becomes a mere service provider operating on the market or for the state.

genealogical approach described above. This approach furthermore proposes an alternative to a linear process towards differentiation and a specialized civil society “logic.” Instead, one would follow the processes by which certain organizations and movements moved from one set of repertoires to the other.

From awkwardness to action situations

By abandoning the sector model and avoiding the bias of *sampling on the dependent variable* (form of action repertoire), civil society actors are freed from conforming to expected ways of behaving, both normatively and empirically. The approach laid out here has the advantage of overcoming the split in civil society research between social movement scholars and third sector scholars—who publish in different journals, go to different conferences, and apply different concepts, even if their subject matter is highly related. Social movements are typically thought to deploy types of *contentious* social action (e.g. Tilly, 1993), while voluntary associations are thought to rely on *non-contentious* types of action (e.g. Lichterman & Eliasoph, 2014)—that is, the former targets the state to gain resources or rights, while the latter organizes self-help, treatment, and self-organized problem-solving “beyond” the state. However, this distinction does not hold up empirically: Social movements regularly apply “voluntary” means of action, while voluntary associations also often take up some type of contentious activity. Using the schema above, we can group different forms of civil society action in an ideal-typical fashion (Table 4).

Means of action	Contentious	Non-contentious
Giver-receiver relation		

Symmetrical (By and for in-group)	Action repertoires: Public protest CSOs: Labor movement orgs. Women’s movement orgs. Ideological repertoires: Leninism	Action repertoires: Self-organization CSOs: Alcoholics Anonymous Prefigurative politics groups Ideological repertoires: Anarchism
Asymmetrical (By in-group, for out-group)	Action repertoires: Public protest, civil disobedience CSOs: Anti-slavery movement orgs. Animal rights movement orgs. Ideological repertoires: Human rights	Action repertoires: Philanthropy, direct action, treatment CSOs: Moral reform movement orgs. Refugees Welcome Ideological repertoires: Christian socialism

Table 4: Ideal-types of action and target groups

While placing specific organizations in specific boxes admittedly somewhat defeats the purpose of my argument that CSOs invoke different types of repertoires at the same time or over time, these organizations can in this context be considered “ideal types” not to be found in real life. AA and Refugees Welcome are types of action that rely primarily on non-contentious repertoires of action, i.e. do not target the state. They differ, however, in that the first is organized by and for the same group, namely alcoholics, whereas in the second organization, the organizing and receiving groups are (primarily) different due to a discrepancy in resources and rights. Conversely, the labor movement and the anti-slavery movement can be said to be (primarily) contentious movements, addressing the state in order

to gain rights for workers and the victims of slavery, respectively. Whereas the former (perhaps too ideal-typically here) is thought to be “by workers, for workers,” the anti-slavery movement of the eighteenth and nineteenth centuries was primarily spearheaded by people of European descent, as slaves did not have the liberties to protest. The table further shows typical repertoires of action and ideologies that ideal-typically match four generic types, if not the specific types of action listed in the table. Each possible combination is illustrated by an extreme case ideology that could underpin such types of action.

I believe it a fruitful approach to analyze collective action situationally rather than through its economic or political function in society, as individuals and organizations interact flexibly and creatively to solve problems. In this way, researchers are able to open their eyes to types of movements that may otherwise seem “awkward” compared to the intuitive or established ideal types of social movements. Even more, they are able to evaluate the actions and effects of their collective efforts in a more situated manner. These considerations can serve as a preliminary definition of collective civic action:

Collective civic action is a type of collective action based on flexible interaction and creative adaption of contentious or non-contentious repertoires of action and ideas that give rise to symmetrical and asymmetrical relations between envisioned in-group and out-group communities.

Although very brief, such a definition of collective civic action may help to overcome some of the awkwardness of the sector model: First, it allows for processes of differentiation and de-differentiation based on the normative and strategic considerations of the actors involved; there is no teleology in the model. Second, it allows researchers to be sensitive to how actors situationally apply multiple logics and various contentious or non-contentious repertoires of action depending on the audience they address, rather than theoretically presuming that only one logic, motive, or norm can be considered “civil.” Third, the model allows for a more nuanced view of the roles that collective actors may take—beyond simply an

“antenna” or “advocate” function for the lifeworld vis-à-vis the state. Ideological divides do not recognize sector boundaries, but rather cut across the divides of state, market, civil society, family, and whatever other imaginable sectors, just as the dividing lines between these “sectors” are themselves matters of contention.

References

- Adams, J., Clemens, E. S., & Orloff, A. S. (Eds.). (2005). *Remaking modernity: Politics, history, and sociology*. Durham: Duke University Press.
- Anheier, H., & Knapp, M. (1990). Voluntas: An editorial statement. *Voluntas: International Journal of Voluntary and Nonprofit Organizations*, 1(1), 1–12.
- Arato, A. (1981). Civil Society Against the State: Poland 1980-81. *Telos*, 1981(47), 23–47.
- Arato, A. (1989a). Civil Society, History and Socialism: Reply to John Keane. *Praxis International*, 9(1+2), 133–151.
- Arato, A. (1989b). Civil Society, History and Socialism: Reply to John Keane. *Praxis International*, 9(1+2), 133–151.
- Arato, A., & Cohen, J. L. (1988). Civil Society And Social Theory. *Thesis Eleven*, 21(1), 40–64.
- Banke, C. F. S. (1999). *Den sociale ingeniørkunst i Danmark: Familie, stat og politik fra 1900 til 1945: Ph.d.-afhandling*. Roskilde: Institut for Historie og Samfundsforhold, Roskilde Universitetscenter.
- Benford, R. D., & Snow, D. A. (2000). Framing Processes and Social Movements: An Overview and Assessment. *Annual Review of Sociology*, 26, 611–639.
- Beveridge, W. (1948). *Voluntary Action: A report on method of social advance*. London: Routledge.
- Blå Kors. (2015). *+120—Blå Kors 120 år i Danmark*. Silkeborg: Blå Kors.
- Bundesen, P., Henriksen, L. S., & Jørgensen, A. (2001). *Filantropi, selvhjælp og interesseorganisering: Frivillige organisationer i dansk socialpolitik 1849-1990'erne*. Odense: Odense Universitetsforlag.
- Celik, T. H. (2017). *Tension-filled Governance?: Exploring the Emergence, Consolidation and Reconfiguration of Legitimatory and Fiscal State-crafting*. Frederiksberg: Copenhagen Business School.
- Christensen, C. (1918). *Udenlands*. Det Blå Kors.
- Cohen, J. L. (1983). RETHINKING SOCIAL MOVEMENTS. *Berkeley Journal of Sociology*, 28, 97–113.
- Cohen, J. L., & Arato, A. (1992). *Civil Society and Political Theory* (1. Aufl). Cambridge: The MIT Press.
- Dahl, H. (1933). *Livets Skole*. Det Blå Kors.

- Dahl, H. (1936). *Mors Dreng*. Det Blå Kors.
- Dewey, J. (1939). Theory of Valuation. In *International Encyclopedia of Unified Science, Volume II, Number 4* (Vol. 2, pp. 1–66). Chicago, Ill: The University of Chicago Press.
- Dikötter, F. (1998). Race Culture: Recent Perspectives on the History of Eugenics. *The American Historical Review*, 103(2), 467–478.
- Durkheim, É. (2008). *The Elementary Forms of Religious Life* (M. S. Cladis, Ed.; C. Cosman, Trans.). Oxford: Oxford University Press.
- Elias, N. (1997). Towards a Theory of Social Processes: A Translation (R. van Krieken & E. Dunning, Trans.). *The British Journal of Sociology*, 48(3), 355.
- Eriksen, S. (1988). Vækkelse og afholdsbevægelse. *Scandia: Tidsskrift För Historisk Forskning*, 54(2), 251–295.
- Eriksen, S. (2007). From Gold Cure to Antabuse: Danish Treatment Traditions in a Liberal Drinking Culture. In K. Stenius (Ed.), *On the Margins: Nordic Alcohol and Drug Treatment 1885-2007* (pp. 48–74). Helsinki: NAD.
- Esping-Andersen, G. (1990). *The three worlds of welfare capitalism*. Princeton, N.J: Princeton University Press.
- Flyvbjerg, B. (2006). Five Misunderstandings About Case-Study Research. *Qualitative Inquiry*, 12(2), 219–245.
- Folmann, E. (1938). *Familien Hammer*. Det Blå Kors.
- Garboe, A. (1934). *Landsbypigen. En Skildring fra det virkelige Liv*. Det Blå Kors.
- Granum-Jensen, A. R. (1979). *Baggrund og glimt fra Blå Kors' historie i 100 år*. Silkeborg: Blå Kors.
- Gross, N. (2009). A Pragmatist Theory of Social Mechanisms. *American Sociological Review*, 74(3), 358–379.
- Habermas, J. (1975). Towards a Reconstruction of Historical Materialism. *Theory and Society*, 2(3), 287–300.
- Retrieved from JSTOR.

- Habermas, J. (1984). *Lifeworld and system: A critique of functionalist reason* (T. MacCarthy, Trans.). Boston: Beacon Press.
- Habermas, J. (1985a). *Lifeworld and system: A critique of functionalist reason* (T. MacCarthy, Trans.). Boston: Beacon.
- Habermas, J. (1985b). *The theory of communicative action vol 1: Reason and the rationalization of society* (T. MacCarthy, Trans.). Boston: Beacon Press.
- Habermas, J. (2001). *Between facts and norms: Contributions to a discourse theory of law and democracy* (1 MIT Press paperback ed., 4. printing; W. Rehg, Trans.). Cambridge, Mass.: MIT Press.
- Habermas, J. (2003). *On the pragmatics of communication* (M. Cooke, Trans.). Oxford: Polity.
- Hall, P. D. (1992). *Inventing the nonprofit sector and other essays on philanthropy, voluntarism, and nonprofit organizations*. Baltimore, Md. [u.a.]: Johns Hopkins Univ. Press.
- Honneth, A., & Joas, H. (Eds.). (1991). *Communicative action: Essays on Jürgen Habermas's The theory of communicative action* (1st MIT Press ed). Cambridge, Mass: MIT Press.
- Joas, H. (1996). *The creativity of action*. Chicago, Ill: The University of Chicago Press.
- Joas, H. (2000). *The genesis of values*. Chicago: University of Chicago Press.
- Joas, H. (2013). *The Sacredness of the Person: A New Genealogy of Human Rights*. Washington, D.C: Georgetown University Press.
- Joas, H. (2017). *Die Macht des Heiligen: Eine Alternative zur Geschichte von der Entzauberung* (Erste Auflage). Berlin: Suhrkamp.
- Keane, J. (1988). *Democracy and civil society: On the predicaments of European socialism, the prospects for democracy, and the problem of controlling social and political power*. London ; New York: Verso.
- Koch, L. (1996). *Racehygiejne i Danmark 1920-56*. Copenhagen: Gyldendal.
- Koch, L. (2000). *Tvangssterilisation i Danmark 1929-67*. København: Gyldendal.
- Kocka, J. (2004a). Civil society from a historical perspective. *European Review*, 12(1), 65–79. Retrieved from Cambridge Core.

- Kocka, J. (2004b). Zivilgesellschaft in historischer Perspektive. In R. Jessen, S. Reichardt, & A. Klein (Eds.), *Zivilgesellschaft als Geschichte* (pp. 29–42). VS Verlag für Sozialwissenschaften.
- Kocka, J. (2010). *Civil society and dictatorship in modern German history*. Hanover [N.H.]: Published by University Press of New England.
- Koselleck, R. (2004). *Futures past: On the semantics of historical time* (K. Tribe, Trans.). New York: Columbia University Press.
- Leth, M. (1910). *Ved Gudenaas*. Det Blå Kors.
- Leth, M. (1915). *Et Firkløver*. Det Blå Kors.
- Leth, M. (1928). *Livets Kompas*. Det Blå Kors.
- Lichterhan, P., & Eliasoph, N. (2014). Civic Action. *American Journal of Sociology*, *120*(3), 798–863.
- Nielsen, M. Th. (1938). *Holger Borgstrøm—Et ungdomsliv*. Det Blaa Kors Forlag.
- Polletta, F. (2006). Mobilization Forum: Awkward Movements. *Mobilization: An International Quarterly*, *11*(4), 475–500.
- Putnam, R. D. (1995). Bowling Alone: America's Declining Social Capital. *Journal of Democracy*, *6*(1), 65–78.
- Putnam, R. D. (2000). *Bowling alone: The collapse and revival of American community*. New York: Simon & Schuster.
- Rasmussen, M. (1921). *Den Skyldige*. Det Blå Kors.
- Rasmussen, M. (1923). *Værtshusholderens Peter*. Det Blå Kors.
- Riegel, R. E. (1968). Changing American attitudes toward prostitution (1800-1920). *Journal of the History of Ideas*, *29*(3), 437–452.
- Salamon, L. M. (1987). Of Market Failure, Voluntary Failure, and Third-Party Government: Toward a Theory of Government-Nonprofit Relations in the Modern Welfare State. *Nonprofit and Voluntary Sector Quarterly*, *16*(1–2), 29–49.
- Salamon, L. M. (1989). The Voluntary Sector and the Future of the Welfare State. *Nonprofit and Voluntary Sector Quarterly*, *18*(1), 11–24.

- Salamon, L. M., & Sokolowski, S. W. (2016). Beyond Nonprofits: Re-conceptualizing the Third Sector. *VOLUNTAS: International Journal of Voluntary and Nonprofit Organizations*, 27(4), 1515–1545.
- Schädler Andersen, L. (2008). Folkekirkens entreprenører: Striden om Det københavnske Kirkefond 1896–1907. *Historie*, 2008(1), 35–86.
- Sevelsted, A. (2019). Degeneration, Protestantism, and Social Democracy: The Case of Alcoholism and “Illiberal” Policies and Practices in Denmark 1900–43. *Social Science History*, 43(1), 87–111.
- Sewell, W. H. (1996). Historical Events as Transformations of Structures: Inventing Revolution at the Bastille. *Theory and Society*, 25(6), 841–881.
- Skocpol, T. (2001). Das bürgergesellschaftliche Amerika—Gestern und heute. In R. D. Putnam, *Gesellschaft und Gemeinsinn* (pp. 593–654). Gütersloh: Verlag Bertelsmann Stiftung.
- Skocpol, T. (2004). *Diminished democracy: From membership to management in American civic life* (1. paperback publ). Norman: Univ. of Oklahoma Press.
- Skocpol, T., Ganz, M., & Munson, Z. (2000). A Nation of Organizers: The Institutional Origins of Civic Voluntarism in the United States. *The American Political Science Review*, 94(3), 527.
- Smith, D. H. (1972). Major Analytical Topics of Voluntary Action Theory and Research: Version 2. *Nonprofit and Voluntary Sector Quarterly*, 1(1), 6–19.
- Smith, D. H. (2003). A History of ARNOVA. *Nonprofit and Voluntary Sector Quarterly*, 32(3), 458–472.
- Smith, D. H. (2013). Growth of Research Associations and Journals in the Emerging Discipline of Altruistics. *Nonprofit and Voluntary Sector Quarterly*.
- Snow, D. A., & Benford, R. D. (1988). Ideology, frame resonance, and participant mobilization. *International Social Movement Research*, 1(1), 197–217.
- Snow, D. A., Rochford, E. B., Worden, S. K., & Benford, R. D. (1986). Frame Alignment Processes, Micromobilization, and Movement Participation. *American Sociological Review*, 51(4), 464–481.
- Sobriety Commission report. (1907). *Betænkning afgiven af den af Indenrigsministeriet den 25. Juni 1903 nedsatte Kommission til overvejelse af Foranstaltninger til Ædruelighedens Fremme*.

- Somers, M. R. (1993). Citizenship and the Place of the Public Sphere: Law, Community, and Political Culture in the Transition to Democracy. *American Sociological Review*, 58(5), 587–620.
- Steincke, K. K. (1933). *Socialreformen: En kortfattet Oversigt*. Fremad.
- Thompson, E. P. (1971). The Moral Economy of the English Crowd in the Eighteenth Century. *Past & Present*, (50), 76–136.
- Thorsen, T. (1993). *Dansk alkoholpolitik efter 1950*. Holte: Socpol.
- Tilly, C. (1993). Contentious Repertoires in Great Britain, 1758-1834. *Social Science History*, 17(2), 253–280.
- Vaughan, D. (1992). Theory elaboration: The heuristics of case analysis. In C. C. Ragin & H. S. Becker (Eds.), *What is a case?: Exploring the foundations of social inquiry* (pp. 173–202). Cambridge [England] ; New York, NY, USA: Cambridge University Press.
- Wright, E. O. (2011). The “triadic” model of society in Somers’ Genealogies of Citizenship. *Socio-Economic Review*, (9), 405–418.