

Article

# The user's perspective: Rethinking the concept of work in the context of the Norwegian welfare state

by

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## **Abstract**

This article deals with issues of work inclusion, with a particular focus on the user's perspective on work, and the work inclusion policy in Norway. An expanded concept of work is applied, which includes all human activities that contribute social value to society, and not only paid work. However, work is typically seen as activities that *are* valued in society. One consequence of this is that some activities are hidden and devalued as work, although they contribute socially valuable means. This is the case for a range of activities performed by clients in the welfare state who contribute to fulfilling the objectives of welfare policy. The article argues that the user's perspective is important to understand how work inclusion comprises several activities that can be seen as work. Based on data from 14 in-depth interviews with young adults currently outside the labour market due to health problems, the study elucidates how being ill and part of work inclusion programmes are not a passive existence, but rather demanding work. The overarching question addresses how the young adults perceive their situation. They wanted to enter working life, in line with hegemonic norms, but health challenges meant that they did not always succeed. Mental and physical health problems affected their everyday lives in many ways. Pain, anxiety and fatigue made their days variable and unpredictable, and limited their level of activity and pace, both in daily chores and due to work inclusion. The article discusses some implications for policy-making, as well as for social work in the front line of the welfare state. Key factors involve the need for time, understanding and counselling to establish tasks and a workload that are sustainable over time.

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## **Introduction**

In welfare policy, as in society in general, the concept of work is largely synonymous with paid work. This article<sup>1</sup> argues that a variety of activities people undertake when ill and outside the labour market should be seen as work, and discusses how a concept of work as more than paid work may have importance for policy and social work in the front line of the welfare state.

Work inclusion is a core activity in the Norwegian Labour and Welfare Administration (NAV), and concerns inclusion in the labour market. This is in line with a basic premise in the welfare state<sup>2</sup>; that is, citizens must provide for themselves through paid work, as true as they can, and the state is obliged to facilitate their opportunities to do so. On the other hand, citizens have a constitutional right to public income security when, for various reasons, they are not able to provide for their livelihood. This is about how duties and rights are distributed between state and citizens, and can be considered as 'a compressed expression of our time's social contract on work and welfare' (Aasen, 2018, p. 86). Political contexts, as well as hegemonic discourses, matter when the contract is to be realised.

In the first decades after World War II, an active labour market policy was combined with growth in universal benefits. In the 1970s, there was a normative turn with emerging discourses about how generous benefits weakened both the economy and the social morale in society and became central, with arguments for stricter conditions needed for the sustainability of the welfare state (Kildal, 2012; Kuhnle & Kildal, 2018; van der Wel, 2012). Whereas the discourses in the 1970s were about which needs society should be responsible for in the form of rights, those in the 1980s–1990s were increasingly about how rights depend on fulfilling specific individual obligations (Kildal, 2012 p. 180). In considering the social contract on work and welfare, the duty to provide for ourselves through paid work was sharpened, while the right to income security when we are not able to do so was tightened.

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<sup>1</sup> The article is based on the PhD thesis, *The work being ill and during work clarification. A critical cultural analysis of how young people experience the situation being ill and during work clarification* (Innjord, 2021).

<sup>2</sup> Section 110 in the Norwegian Constitution.

Since the 1990s, in Norway, as in most OECD<sup>3</sup> countries, forms of political rhetoric and policy-making are evident, in which the right to income security is linked to obligations to participate in activity programmes (Hagelund et al., 2016; Lødemel & Trickey, 2001; Van Berkel et al., 2017). Some social science researchers see these phenomena as part of a neoliberal turn in social policy, as well as in social work (Kamali & Jönsson, 2018; Lorenz, 2016; Spolander et al., 2014). The concept of neoliberalism is associated with economic reforms, implemented in the 1980s, characterised by privatisation and market management, where the role of the state is 'to create and preserve an institutional framework appropriate to such practices' (Harvey, 2005, p. 2). Lorenz (2016) argues that neoliberal policies, in addition to the privatisation of welfare services, are part of discourses about the individual's independence and responsibility, and make it difficult to focus on social conditions in social work practices. This is in line with several studies in a Norwegian context that problematise social work as activities in the cross-pressure of current policy, institutional conditions and values in social work as a profession (Hansen, 2018; Kjørstad, 2019; Skjefstad et al., 2018; Solstad, 2022; Øvreid, 2018).

In a comparative perspective, Caswell et al. (2017) point to how a variety of welfare-to-work policies are implemented in the front line of welfare states in European countries. Such policies may be defined as 'those programmes and services that are aimed at strengthening the employability, labour market or social participation of unemployed benefit recipients of working age, usually by combining enforcing/obligatory/disciplining and enabling/supportive measures in varying extents' (Caswell et al., 2017, p. 3). In the Norwegian context, welfare-to-work policies were strengthened through the NAV reform, implemented from 2006. Rather than a security system outside the labour market, the welfare state should be an instrument to include the population in paid work, even those who were distant from the labour market (Andreassen et al., 2009). The work orientation was sharpened by organisational changes, as well as services and benefits (Andreassen & Fossetøl, 2011; Caswell & Innjord, 2011). In 2010, the work assessment allowance (known as AAP in Norway) was introduced as a new overall benefit, affecting the right to public income security for people with health problems. In addition to stricter activity

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<sup>3</sup> Organization for Economic Cooperation and Development.

obligations, the most important change was the introduction of a limit of four years for the right to receive AAP.

However, there is a gap between policy and lived experiences, and the political objectives in the NAV reform were not met. No more people came into employment, nor did they come to work faster (Andreassen & Aars, 2015; Galaasen, 2017; Mandal et al., 2015; Strand & Nielsen, 2015). In particular, many young people below 30 years of age received the benefit over a long period, often due to mental health problems. Analyses from NAV revealed a connection between health conditions and the need for time in work inclusion processes (Bragstad, 2017; Lande, 2017). For some of the users, no adequate cure was available, or they were waiting for medical investigations and treatments. Despite incomplete results for AAP, a strict policy continued, and from 2018, the right to receive AAP was further tightened to a limit of three years (Ministry of Labour and Social Affairs, 2017).

The ineffectiveness of such tighter conditions for people with health problems is in accordance with international research. Although stricter conditions may have positive effects when people are close to the labour market, this does not apply to people living in more complex situations (Van Berkel et al., 2018). For them, stricter conditions of income security instead worsen the health situation, and make the path to working life even longer (Barr et al., 2016; Dwyer et al., 2019; Wright & Patrick, 2019). Strict conditionality does not get them into work; it makes it difficult to balance several aspects of everyday life, and even prevents them from getting access to support and follow-up because of the fear of sanctions. Wright and Patrick (2019) argue that there is a need for analyses that take people's experiences as a starting point, that go beyond the individual level to find some *typical features of the situation* and 'foreground subjectivities of harsh conditionality as a social phenomenon' (p. 69).

Several studies note that health challenges have a significant impact on the connection to working life. Lundberg's (2012) study of user experiences with NAV emphasises the complex links between health and work. People want to participate in working life, but those with health problems must balance participating in the labour market with their overall life situation. Such findings are substantiated by those based on young people's experiences while receiving AAP (Wik & Tøssebro, 2013; Wik,

2019; Åsheim, 2018; Bakken, 2020). Furthermore, comparative research on inequality in health emphasises the importance of health for labour market attachment (Heggebø & Elstad, 2017; van der Wel et al., 2018). Heggebø and Elstad (2017)<sup>4</sup> found support for the hypothesis that high unemployment leads to a lower level of perceived negative health effects. They also found that countries with particularly low unemployment, as is the case in Norway, stand out with a high degree of self-reported health problems. The findings are not explained by the fact that it is less *stigmatising* to be unemployed when there is high unemployment, but by the *composition* of the unemployment population. In Norway, and other countries with low unemployment rates, 'selective processes in the labour market could contribute to a population of unemployed who has less satisfactory health and less coping resources' (Heggebø & Elstad, 2017, p. 32).

In this article, I highlight the user's perspective as being crucial for analysing a variety of activities when ill, and part of work inclusion processes, as *work*. Here, users refer to the informants in the present study, namely young people 20–30 years old who are outside the labour market due to health problems and receiving AAP. The key research question is: *How do they perceive their situation?*

The remainder of the article proceeds as follows. First, how the concept of work is socially constructed as a result of discourses about work is outlined. Second, the methodological procedures and analysis process are described. Third, the findings are reported. The data are based on in-depth interviews, and the main finding is that the situation in which AAP is received is no passive existence. Lastly, I discuss the need to challenge discourses of life outside the labour market as passive, and raise some implications for policy and social work.

### **The concept of work as socially constructed**

From a social constructivist perspective, the social world is renewable, and could be different. Categories and categorisations that appear as a matter of course can with further examination turn out to be more diverse, and even quite new in a historical

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<sup>4</sup> The study is based on data from 25 European countries in the wake of the financial crisis in 2008–2009.

perspective. The concept of work is then not given but (re)produced, and may be challenged and changed through language and competitive discourses about work (Grint, 2005).

In what we call traditional societies, work is seen as an integral part of the way of living, where the household sphere relates to the economic sphere (Heen, 2008). On entering an industrial society, these spheres were separated, and the household sphere was subordinated to the market sphere. The concept of work became abstract, linked to the actual production of goods and services, and to paid work (Heen, 2008; Kildal, 2005). As an abstract concept, work includes all activities organised as paid work, regardless of what the activities entail. However, to see activities outside the labour market as work depends on other qualitative criteria; are the activities useful, necessary or performed for others? 'It thus appears that there is a type of asymmetry here which is rooted in the fact that paid work in our society has a hegemonic position as work' (Heen, 2008, p. 35). The hegemonic position of work as paid work is produced and reproduced in many ways in society. In the context of the Norwegian welfare state, discourses about life outside the labour market as non-active or passive—quite different from an active and productive working life—contribute to (re)producing this position.

### *Discourses about life outside the labour market as passive*

As a result of welfare-to-work policies, introduced in the 1990s, social rights in the 'intersection between work and welfare' have been weakened by an increasing number of conditions and individual obligations (Kuhnle & Kildal, 2018, p. 26), and discourses about life outside the labour market as passive are evident in political documents and rhetoric.

Concern, particularly for young people outside the labour market, arose from evaluation of the NAV reform, and designations as passive periods and passive existence were used to describe their situation. 'Passive periods in adolescence increase the risk of long and recurring periods of unemployment or permanent exclusion from working life' (Meld. St. 33 (2015-2016), p.33). Further, in the legislative proposal to tighten the right to AAP from four to three years, life outside

the labour market as passive was highlighted. 'It's especially important that young people, who may have a long working life ahead of them, get out of a passive existence and into education and work' (Prop.74 L (2016-2017), p.5). Shortening the period for receiving the AAP was seen as an incentive to hurry up the work inclusion process. 'Shorter duration will put pressure on both recipient and the Labour and Welfare Administration to use the benefit period more effectively' (Prop.74 L (2016-2017), p.28).

Throughout history, attempts to define work as more than simply paid work can be seen as expressions of a need to expand the framework for activities valued in society (Christensen & Syltevik, 2013).

### *Discourses about activities outside the labour market as work*

Although most social scientists agree that it is too narrow to equate work and paid work, Heen (2008, p. 42) points to a distinction between those who primarily link the concept of work to economics in a substantial sense (such as Glucksmann, 1995), and those who see work as activities in many areas in society (such as Wadel, 1977). Glucksmann (1995) argues that seeing work in a narrow sense as paid work implies a lack of understanding of the relationships of which paid work is a part, or of the total organisation of work.<sup>5</sup> While Glucksmann delineates the concept of work by linking it to activities with a relationship to paid work, and hence to society's material self-maintenance, Wadel challenges the economic hegemony by including a range of activities and use of time that broadly have socially valuable consequences.

Wadel (1977) argues that the concept of work, as an active notion, is potent in capturing the creation of values across sectors in society. The theoretical basis is rooted in social science and theories about social institutions, where work is primarily seen as institutional, as part of the organisation of society. Work then is 'human activities that can be demonstrated to maintain, establish, or change generally valued social institutions, whether the activities have these as an objective or not' (Wadel, 1977, p. 409).

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<sup>5</sup> In line with Norwegian social scientists who, inspired by feminist perspectives, challenged the prevailing position of paid work in the 1970s by highlighting the value of women's unpaid work at home (such as Wærness, 1978).



What work is about must be examined from below, as activities that make up people's daily lives. While many activities in local communities, social networks and voluntary work have generally been overlooked as work, Wadel points to an area—especially relevant in the context of welfare policy and social work—where a range of activities are more actively defined as non-work. This applies to all contexts in which people are considered as clients<sup>6</sup> in the welfare state (Wadel, 1977, p. 406).

Those activities not considered as work, despite having several characteristics of work, are what Wadel (1984) calls hidden work. Although the status as client in the welfare state involves time, action and effort, this is seldom referred to as work. This indicates that what we consider as work does not depend on certain activities, but on who performs the activities. Simply the status of being a client appears to be an element that makes the 'client's business something that does not deserve the term work' (Wadel, 1984, p. 112). This may be because the activities involved are perceived as something they do only for themselves, and ignore the exchange relationship between clients and professionals. Still, clients build expertise in interaction with professionals, which contributes to an increased insight on the part of professionals.

## **Method**

The study uses a qualitative research design, with data based on in-depth interviews with 14 young adults aged 20–30 years receiving AAP. Rather than mapping the informants' living conditions, I asked about their experiences of being ill and during work inclusion processes. A scientific premise is that cultural meaning is constructed in social and discursive practices, in ways of thinking and talking (Jørgensen & Philips, 1999). The analytical work then goes beyond the individual level and, theoretically informed by an expanded concept of work, I analysed the notion of *work* as a typical feature in the informants' ways of thinking and talking about their situation.

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<sup>6</sup> In the 1990s, the term 'client' was replaced with 'user' when referring to people receiving benefits and services from the welfare state.

Although the methodological and analytical work overlap, it is appropriate to distinguish the different parts of the research process. First, I describe the access to- and selection of informants, followed by the interview process and the analysis process. Finally, I consider some issues relating to ethics and reliability.

### *Access to and selection of informants*

Public and political concerns about young people outside of education and the labour market made me curious about how they experienced their situation.<sup>7</sup> The informants were recruited via NAV, and meetings with NAV at the county level helped to identify local offices that were relevant to recruiting informants. Over three months, I had access to a space in one of these offices, which meant I had access to NAV's intranet, lunch meetings and informal talks with employees. From access to internal forms, information and guidance documents, I gained insight into the institutional context, which was relevant for interpretation.

An information letter was prepared and disseminated to potential informants by the employees in the local offices. The letter briefly informed about the project and my intention to talk with young people about their situation and experiences while receiving AAP. To guarantee informed consent, I noted that participation had no consequences for their relationship with NAV, and that as individuals they would be anonymised and could withdraw from the project at any time. If they wanted to participate, they responded by SMS or email with, "YES, I want to join!", and after this I contacted them.

The recruitment of informants took more than one year<sup>8</sup>, and the deadline was set when 14 people accepted the invitation to participate (nine women, five men). Informants were characterised by a high proportion with mental health problems, and half of them received AAP for more than three years.<sup>9</sup> The majority performed some form of activity, such as medical treatment or work-oriented activities. Beyond what

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<sup>7</sup> In the official statistics, people under the age of 30 receiving AAP are established as a distinct group.

<sup>8</sup> Late in the process, NAV at the county level distributed the letter to 110 potential informants, and four accepted the invitation.

<sup>9</sup> One criterion was that informants had received AAP for at least one year.

they communicated themselves, I did not have access to any individual documentation, such as plans or a diagnostic basis for receiving AAP.

### *Interviews*

The interviews were conducted individually, face-to-face, and all except one took place outside the NAV office in a shielded meeting-room.<sup>10</sup> The interviews were open and non-structured, although I used a rough interview guide in the form of a topic list with keywords to draw on in conversations (Fog, 2004). Initially, the purpose and framework for the interview were introduced before I encouraged informants to say something about when and how they contacted NAV, and how the work inclusion process had taken place so far. Without asking directly about diagnosis, the backgrounds for contact with NAV were touched upon followed by descriptions of the health situation, and what this meant to them. My follow-up questions were guided by the need to obtain a certain chronology, but overall, the conversations dealt with the multitude of consequences of daily life when ill and part of the work inclusion process. For complementary descriptions of their everyday life, I asked what a random week or day might be like, and at the end of the interviews I could ask: Where do you see yourself in one year? In five years? How do you think you can get there? The interviews lasted one–two hours, and were recorded and transcribed verbatim.

### *Analytical process*

The analytical process was divided into three levels, which to some degree were integrated (Alvesson & Sköldbberg, 2017). At the first level, the informants' descriptions, using concepts close to their experiences, gave access to their interpretation of the situation. How informants talked about their situation was of course affected by the actual context and their interaction with me as a researcher. The second level of analysis was a thematic interpretation of informants' comments. Quite early on in this process, I noticed rich descriptions of what health problems meant in everyday life. As a third level of analysis, where more hidden and implied meanings and discourses are interpreted, I discovered how the meaning of health problems in everyday life fit into an extended concept of work. This analytical turn

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<sup>10</sup> At a hotel or an official building.

was theoretically inspired by Gullestad (1989, 1990), who advocates a cultural analysis that explores taken-for-granted categories in the descriptions of everyday life.

As an analytical tool, cultural categories accommodate the complex, ambiguous and contradictory aspects of cultural meaning, and of particular interest are ‘the categories that are used as justification without requiring justification themselves’ (Gullestad, 1989, p. 124). I discovered that questions about being ready for work appeared in several of the interviews, and I was curious about what being ready or not being ready entailed according to work inclusion processes. When all the interviews were completed, transcribed and thematically analysed, I found that the concept of work as paid work was taken for granted in the interviews, as it was for me as researcher. This contributed to the third level of analysis, where an extended concept of work (Wadel, 1977) became an analytical key. Several activities outside the labour market that were described by the informants were then analysed as work. Throughout the research process, and for the presentation of this study, some considerations about ethics and reliability were needed.

### *Considerations about ethics and reliability*

A qualitative project, in which people are invited to talk about their own experiences, is challenging in many ways, especially regarding the consequences of participation (Silverman, 2011).<sup>11</sup>

First, questions about ethics and reliability arise concerning the recruitment and selection of informants. Did the young people feel pressure to participate? How did the NAV employees convey the content of the project to the informants? How was their relationship with the young people? What significance could their relationship have for participation in the project? Was it easier for employees to ask the young people to participate if they had a good relationship, and more difficult for the young people to say no to participation if they had a good relationship with NAV employees? Or the opposite? The answers may well have had consequences for the

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<sup>11</sup> The study is approved by the Norwegian Social Science Data Services.

selection of informants, and it is also reasonable to assume that the users who were most ill did not respond to the invitation to participate.

Second, for the presentation of this study, both the informants' right to confidentiality and the scientific ideal of transparency must be considered. To make the analysis transparent, I provide direct quotes from the interviews, including dialogue between the informants and myself as researcher. This highlights the informants' own interpretation of their situation, as a first level of analysis, and makes visible how I, as a researcher, contributed to the interpretations. At the same time, the idea of transparency is challenged by the requirement for confidentiality, regarding both interview excerpts and the characterisation of the informants. including information about their household and family situation. For ethical reasons, no specific diagnoses are used, and only general categories of mental and physical health problems are mentioned, as well as broad subcategories such as anxiety, fatigue and rheumatic disorders. The informants were given fictive names and extracts from the interviews are presented in standard language. Neither local communities nor counties are named, although the inclusion of social, geographical and cultural contexts as part of the interpretive framework can help strengthen a study's reliability.

### **Findings: Being ill and taking part in work inclusion processes is *work***

According to Wadel (1977), the question about what comprises work must be examined from below, as activities contributing to societal coherence. Across diagnoses, gender, age, life situation, follow-up in NAV and time under the scheme, all of the informants wanted to enter the labour market, in line with hegemonic norms in society. However, they did not always know when and to what extent they would succeed. Based on the entire data, I categorised two closely interlinked forms of work: the work of living with health problems in everyday life and the work of balancing perceived health problems and work inclusion processes.

#### *The work of living with health problems*

Mental or physical health problems, or combinations of these, were the basis for the right to AAP. Informants perceived pain, anxiety, exhaustion and other forms of

discomfort that affected their everyday life in several ways, and two interrelated features characterised their experiences: 1) an *extraordinary use of time and energy* in doing everyday activities such as cooking, housecleaning, shopping or being sociable, 2) the *unpredictability* of everyday life due to an unstable, variable and often unclear state of health that affected being able to carry out planned activities.

Eva, who lived with a rheumatic disorder, where pain and fatigue were significant symptoms, explained the use of time and energy in everyday activities:

E: ... you are not really just tired... but you are physically exhausted from doing things. Maybe not normal, but ... [...] you can take an example like this: If someone, someone healthy is going to cook, for example, then it can take ... varying how long it takes 20–30 minutes ... maybe longer. But for me it takes at least five times as long. And that is how it is with absolutely everything.

The extraordinary use of time and energy may be seen as an effect of several adaptations required. Marit received AAP due to chronic fatigue, and talked about her morning rituals, and the need to plan most everyday tasks:

A (researcher): No, so it is not just rushing out the door.

M: No, it doesn't work ... must pull myself together. And when I am going to start, I must take it easy. Calm movements and spend a long time. Preferably sitting if I am going to put on make-up or something like that. So, everything must be planned ... such incredibly small details ... just getting a glass of water. Then I [...] must think if I have something more in the kitchen, I do not have to get up again. That's how it will be.

Marit emphasised that the use of time and energy varied, and that this can be seen as an effect of a variable and unclear state of health. For some persons, the symptoms of illness varied from one day to the next, which meant an unpredictable situation. Nils experienced chronic pain, fatigue and concentration problems due to physical illness. However, the outcomes of the problems varied, and activities that were easy to conduct one day could be impossible the next. It was not easy to predict whether it was too much activity or no activity that triggered the pain; he did not know:

N: So about how much pain I have that day. Because sometimes I can do an incredible number of things without feeling any pain and ... so, these are lovely days. But these days are also scary when you are ill. Because you can do a lot that is not good too, which can turn out to be ... then suddenly it is an insanely good day, one day [...] enjoy yourself and run around the house and clean and go out and ... then you lie down three days later.

A: Yes, exactly

N: But so, it is not certain that I will be lying there three days later. Suddenly you are lying there or suddenly you are not lying there. I don't know. Do you understand?

Nevertheless, the unpredictability was linked to more than variable health conditions; for Berit, it also was about social situations. Concerning anxiety, she talked about a constant underlying feeling that something *could* go wrong, and specific social situations triggered this feeling: 'That's one thing a lot of people do not realise ... that different situations call for different things.' Sitting in the classroom during the evening course was a predictable situation for her, and required less energy than shopping or a family party where you do not know what could happen, or who you will meet and must interact with.

This unpredictability was also linked to an uncertain and unclear state of health, with medical treatments and investigations. This was the situation for Kari who had been receiving AAP for a long time due to mental and physical health problems. Regular outbreaks of physical illness were exhausting and entailed hospital stays:

A: Now you are going to some sort of investigation [...]

K: Yes, I am going to.

A: ... simply find out more about it. But it has been a form that they have been able to treat well then, in a way?

K: Yes, they have. But they never know [...] there is so much back and forth. Those I have met have said that they have not come across it before. So, just must take it as it comes each time.

A: Yes, exactly. I understand that. So, there are things that assume space and time in everyday life, so to speak.

K: Yes, it does. Each time it has taken between two and three months to recover from it. The body gets so tired from that process.

Kari's ambition was to gain a bachelor's degree, and then get into working life. However, plans often failed, and had to be postponed, changed and postponed again; that is, it involved a work of balancing when combining work inclusion processes with the rest of everyday life in a sustainable way.

### *The work of balancing*

As part of work inclusion processes, the individual's opportunities to get into paid work, completely or partly, must be clarified. These processes refer to activities such as work practices, completing upper secondary education, undertaking higher education or undergoing medical treatments. However, everyday life is more than work inclusion, including social life, family life and caring obligations. A typical feature in the data material is the need for a suitable pace and progression in the work inclusion processes that implies flexibility, advice and guidance from professionals.

Kari, who wanted to complete upper secondary school, had met with several interruptions due to her health situation and age restrictions in the secondary school system. At the time of the interview, she was happy about a labour market course where she had been working to strengthen her self-confidence. Unfortunately, an outbreak of illness prevented a planned part-time job. Talking about all the obstacles of getting into work, Kari summarised what can be seen as part of her work during the work inclusion process:

K: After [...] the course last year ... I was so ready to go out and submit applications and CVs, yes just show my face in the hope of getting a job on the site then. So, it was a letdown ... that was a thing. But then I didn't get into school either, which was what I was supposed to work at until then again ... then ... and now when I sit and talk about it, I realise how much trouble it has been.

Tom described the work inclusion process, with various labour market initiatives and work trials, as a roundabout. He lived with anxiety and depression, and was caring for a relative with health problems. Tom had tried full-time work, but could not manage this. Like the other informants, it was important for him to find a sustainable workload, considering the totality of his situation:

T: I must find something affordable. But I always try to say that my goal is not to become disabled or to only be two hours somewhere or ... I try to find something that works for me. Because I must balance the home situation [with caring duties] ... I must balance it with work, create a future and then I must ... everything that has to do with me ... and those three things there ... If there are a lot of imbalances ... then it crashes ... and then it ends up all over again with that roundabout ... to a psychologist, treatment, back again to [employment market company] and around ... so I now hope that we will find an arrangement where I can find an internship that can lead to a job that [...] that is manageable.

Several of the informants wanted to manage more than their capacity allowed, and had experienced that this often worsened their state of health and lengthened the work inclusion process. To not crash once more, but rather achieve a sustainable balance, they needed advice and guidance. Kari described how her psychologist had been supportive in terms of her efforts not to overestimate her capacity:

K: My psychologist, she has helped me in a way and managed this about work ... to what degree can I do what, and things like that. And there has been a lot of mental work to do. So, she has been good at managing ... helping me with that. Because I have wanted to do everything ... jump into everything at once. But she has been the one who has slowed me down a bit ... and I needed that in order not to overestimate my capacity and go for another crash.

Like Kari, many informants experienced support from psychologists, doctors and NAV supervisors, and several pointed to supervisors at labour market companies



who followed up closely during work placements. The informants emphasised that it was crucial to have a working practice where the daily schedule was flexible, and where they could withdraw and take breaks. For Berit, a sustainable workload meant being at her work practice for only a few hours a week. She had worked hard to find the balance, small adjustments in workload were significant, and the supervisors at the labour market company were supportive regarding the workload and pace during the work inclusion process:

B: They are concerned with building solidly, not just as high as possible.

A: [...] Yes, because that ... it is so important, the point you make ... if you move forwards too quickly, you will go back, then you will be back to zero and must build up again.

B: Mm. Yes, then you are back in the basement again.

A: ... that balance then ...

B: Very fine ...

A: ... it is very fine. And then there is something about them seeing you more in everyday life then, those supervisors at [the labour market company]?

B: I know them. I don't do that with NAV.

Berit touches on two linked features in the data material with regard to work inclusion processes. First, the importance of not pushing, or being pushed, *too much*, and second, the meaning of to know and be known in the systems following up. Kari emphasises how these needs are linked together in the co-operation with professionals concerning her progress in completing upper secondary school:

K: And then I sit, consider, and intend to ask for a meeting both with my doctor and my psychologist and she [supervisor in NAV] to ... in a way not overestimate my capacity. Because I have done that before ... when I have gone to work, I have dealt with it in such a way that ... I cannot continue somehow ... that it has ruined me, and I feel that every time I have tried, I have failed. Then get to talk to them in teams so that one understands the other and to hear whether I should take everything ... whether I should take the entire year in one [year] or whether I should split it up.

The work of balancing then includes users' activities as part of the co-operation with professionals (Wadel, 1984). The need to not be pushed *too much*, and of knowing and being known, seems to be a need for understanding how health problems affect everyday life in substantial ways.

## Discussion

Much has changed in local communities, and in the field of welfare policy, since Wadel's empirical studies in the 1970s. However, there appears to be a continuity with respect to the hegemonic position of work as paid work, and since the 1990s, this position has been consolidated in welfare-to-work policies (Caswell et al., 2017;

Hagelund et al., 2016; Kuhnle & Kildal, 2018; Lødemel & Trickey, 2001). From a social constructivist position, talking about something as work is at the same time an expression of specific perspectives and values (Grint, 2005). Then, although work as paid work is taken for granted in current welfare policy, it *could* be different.

In the context of the Norwegian welfare state, many user activities are devalued when seeing life outside the labour market as passive, although such activities contribute to fulfilling the objectives of welfare policy. The aim of this article is not to discount the obvious value of paid work according to individuals and society. Instead, the article argues for the need to *broaden* the view of activities seen as valuable in society. With a focus on work inclusion processes, seeing work as *more* than paid work is about appreciating users' activities as part of the social contract on work and welfare (Aasen, 2018).

### *The need to challenge discourses about users' life as passive*

An expanded concept of work, as Wadel (1977) introduced, was criticised at the time for being difficult to apply analytically because most activities can be considered as work, and because the productive aspects of work are underplayed (Ringen, 1979). The critique only emphasises a social constructivist premise; what we see as work is (re)produced, and may be challenged and changed, through language and competitive discourses about work (Grint, 2005).

Seeing work as more than paid work still challenges prevailing opinions that societal values are equal to economic values, and thus the hegemonic position of work as paid work. Studying the official report about work and benefits from 2019<sup>12</sup>, Heggebø (2020) finds that the concept of work is neither thematised nor defined and that work as paid work is taken for granted in welfare policy. The report advocates that less generous benefits, both in terms of shorter duration and lower payments, can contribute to more people entering working life and Heggebø (2020, p. 41) points out that the argumentation is close to the prevailing political discourses in which all recipients of income security schemes are seen as passive.

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<sup>12</sup> NOU 2019:7. Work and benefits – Measures to increase employment

Discourses about life outside the labour market as passive contrast with research-based knowledge about people's motivation to participate in working life and consequences of the harsh conditionality of welfare policy. First, the motivation to participate in the labour market is at a high level in Norway and other generous welfare states (Barth et al., 2015; Esser, 2012; van der Wehl & Halvorsen, 2015). Second, strict conditionality does not bring people living with extensive health problems closer to working life, quite the contrary (Barr et al. 2016; Wright & Patrick, 2019). To make these inconsistencies in welfare policy visible, Wright and Patrick (2019) stress the need to take people's experiences as a starting point when analysing typical features that characterise their situation. In my study, *work* rather than a *passive existence* characterised the situation of being ill and taking part in work inclusion processes (Innjord, 2021). A range of socially valuable activities made up informants' everyday lives and should be seen as work. As perceived by informants, their situation can even be described as double work, where the work of being ill is inextricably linked to the work of balancing when trying to get into paid work.

An expanded concept of work challenges discourses about users' life as passive, not only by making visible those activities that take up much time and energy, but primarily by naming them as work. This may have implications for social policy and social work in the front line of the welfare state.

### *Implications for policy and social work*

Discourses about work matter when the social contract on work and welfare is realised in work inclusion processes. Naming users' activities as work, whether these are inside or outside the labour market, leads to an appreciation of those activities as part of the contract. An expanded concept of work then is a theoretical framework to thematise users' activities as productive.

### *The need to appreciate users' activities as productive*

The social contract on work and welfare is based on ideas of solidarity, where the state is obliged to secure worthy living conditions, irrespective of the connection to the labour market (Aasen & Kildal, 2014). On the other hand, citizens are obliged to

enter the labour market if they *can*, and the state is obliged to facilitate this process. Fulfilling the contract is about the regulation of rights to benefits and services, as well as social processes to highlight users' situations and needs. To name users' activities as work is primarily incompatible with talking about life outside the labour market as passive, as seen in political arguments for stricter conditions relating to benefits and work activities. Then, as Heen (2008) points out, it may be of 'crucial interest for users in the welfare state, as individuals and groups, to have their activities recognised as work' (p. 47). Appreciating users' activities in work inclusion processes as productive means to take these activities into account when welfare policy is designed and implemented.

In every welfare policy context, an expanded concept of work may help to direct attention to activities and tasks that take up time and space in users' lives, and particularly to those that are not thematised as productive (Wadel, 1984). In the current Norwegian welfare state context, such activities involve meetings with NAV and other services, making a phone call and waiting for an answer, writing an application, or obtaining digital information, but also all the time and energy spent on activities in everyday life, and on balancing these with work inclusion processes (Innjord, 2021). To appreciate users' activities as productive then means taking into account complexity as a typical feature of users' situations.

#### *The need to take the complexity of users' situations into account*

Perceived health is closely connected to labour market attachment (Heggebø & Elstad, 2017; van der Wel et al., 2018), and for young people receiving AAP health problems are seen as an explanation for their need for time in work inclusion processes (Bragstad, 2017; Lande, 2017). This is in line with comparative research showing that the situation for users under welfare-to-work regimes is characterised by a greater *complexity*, many far from the labour market with health problems (Van Berkel et al., 2018). In the years after AAP was introduced, an increasing number of young recipients were granted disability benefits, with a tightening of the duration provisions seen as a main reason for this development (Bragstad, 2023; Lande, 2023). In my study (Innjord, 2021), variable, insecure and unclear facets characterised the situation of living with health problems and meant the need for sufficient time, but also support, during work inclusion processes. First, this implies

not hurrying up the processes by tightening material rights, and second, the possibilities of knowing and being known concerning the professional relationships in the front line of the welfare state.

However, a strict policy also leaves social work in the front line of the welfare state with many challenges. In addition to large caseloads and pressure on resources, a policy with increasing activity obligations and a reduction in benefits places these practices under further pressure (Van Berkel et al., 2018; Hansen, 2018; Kamali & Jönsson, 2018, Lorentz, 2016, Skjefstad et al., 2018). As a result, less attention is paid to users' needs, and to the totality of their situation.

To see the professional relationship as an exchange relationship (Wadel, 1984), where both parts are *working*, may take the complexity of users' situations into account. Just as the welfare state professions contribute to maintaining the objectives of welfare policy through their work, users do so through various activities in everyday life. Although the professional relationship is changing, in step with hegemonic knowledge, institutional contexts and users' rights to participate, a distinction persists between those who have their activity recognised as work and those who do not. The user's need for knowing and being known (Innjord, 2021) is about a need to have their use of time and energy appreciated; indeed, several of the informants experienced supervisors at NAV as flexible, contributing to the adaptation needed. In such situations, the users' work was *seen* by the supervisors, without *naming* this as work.

Then, an expanded concept of work may be a theoretical framework in social work to thematise a lot of users' everyday activities as productive in work-inclusion processes, while on the other hand highlighting the need for competence, time and authority on the part of professionals as the other side of the exchange relationship.

## **Conclusion**

Hegemonic discourses about life outside the labour market as *passive* contribute to a devaluing of many users' activities during work inclusion processes. To name something as work is about valuing, and for users in the welfare state, it is of crucial

interest to have their activities recognised as *productive* according to the social contract on work and welfare.

An expanded concept of work is a potent theoretical framework to thematise the complexity in users' situations, and highlights challenges in current policy and social work in the front line of the welfare state. First, seeing work as a typical feature that characterises the situation from the user's perspective make visible inconsistencies between a strict conditionality policy and users' lived experiences. Second, as part of an exchange relationship, users and professionals are working to fulfil the objectives of welfare policy. Then, users' need for time, flexibility and support during work inclusion processes means, at least on the part of professionals, a need for competence to thematise the complexity in users' situation, as well as the authority and time to take these situations into account in social work practices.

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