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RESEARCH PROCEEDING

Participatory Governance: Comparing Cooperatives in Different Sectors, Settings and Cultures

ABSTRACT

The hybrid nature of cooperatives and their pursuit of multiple goals make them interesting for economics, political science and sociology. This contribution explores their ability to enter the space left by a retreating state by cooperativizing, rather than privatizing the provision of social and welfare services. It compares three books on cooperatives in different sectors, settings and cultures. In spite of major differences between them, where and how they operate, they show some notable similarities. This helps identify some unique institutional structures and characteristics that comprise a model for future development of cooperatives.

KEY-WORDS

COOPERATIVES, HYBRID, WORK ENVIRONMENT, DEMOCRACY, CHILDCARE AND HEALTHCARE, SWEDEN AND JAPAN

1. Introduction

The International Co-operative Alliance (ICA), defines cooperatives as “*people-centred enterprises* jointly owned and democratically controlled by and for their members to realise their *common economic, social and cultural needs* and aspirations. As enterprises based on values and principles, they put fairness and equality first, allowing people to create sustainable enterprises that *generate long-term jobs and prosperity*. Managed by producers, users or workers, cooperatives are run according to the ‘one member, one vote’ rule” (*emphasis in the original*¹).

The ICA definition of cooperatives clearly emphasizes their hybrid nature since most of them, no matter what they produce or where they operate, attempt to combine several different goals, i.e., economic, social and cultural. In fact, the ICA definition implies that their very *raison d'être* is to pursue a variety of goals, not just a single one like maximizing a profit or making a surplus. The latter is necessary for achieving its goals, but it remains a means, not an end in and of itself. It is, therefore, natural for cooperatives to attract the attention of various academic disciplines. However, given the differences between disciplines, economists quite naturally ask different questions than political scientists or sociologists when they study cooperatives. Thus, the sociology or political science interest in cooperatives does not question their economic rationale or why they exist, but rather asks how or what cooperatives can contribute to society or the functioning of democracy?

There are two main schools concerning the development and future of cooperatives that reflect the dilemma of hybrid organizations. According to the associational or democratic school (see Pestoff, 1991; 2012; Böök, 1992; Craig, 1993; among others), cooperatives are primarily seen as associations that pursue social goals by economic means. It focuses on the role of cooperatives in a rapidly changing world, responding to their members' vastly changing needs and demands, as well as the need to strategically balance various stakeholders and goals in order to remain sustainable (Pestoff, 2012). In the business school (see Birchall, 1999; Birchall and Simons, 2001; 2004; Gijssels, 2012; among others), cooperatives are mainly regarded as business firms that have some unique social and associational features. It considers cooperatives as “member-owned businesses” that need to modernize and professionalize in order to meet the growing competition from private firms (Birchall, 2012).

The founder of the Grameen Bank warns against putting too much faith in hybrids that combine an interest in producing social value with the goals of enterprises in the mainstream market economy: “In the real world, it will be very difficult to operate businesses with the two conflicting goals of profit maximization and social benefits. The executives of these hybrid businesses will gradually inch toward the profit-maximization goal, no matter how the company's mission is designed” (Yunus, 2007: 13). Yet, the unique capacity of cooperatives to combine

¹ <https://ica.coop> [Accessed: 17 November 2023].

social and economic goals is seen as their main advantage by many observers. Cooperatives can combine their members' interest and good employment conditions, with sound economic practices and democratic control by members. Thus, they comprise a clear alternative to private firms competing on the market and the public sector organizations that provide social and welfare services (Pestoff, 1992). Focusing on their key institutional strengths allows us to shift our perspective from cooperatives as novel utopian experiments to recognizing them as a best practice, particularly for providing social and welfare services.

2. New challenges and opportunities in the 21st century social and welfare services

Dr. Laidlaw presented a seminal report, *Cooperatives in the Year 2000* at the 1980 ICA World Congress in Moscow. He identified two major challenges that threatened the future of cooperatives worldwide and emphasized some opportunities to help rectify them. The first regards threats to their democratic character and the growing concentration of decision-making. He argued that “when cooperative democracy vanished, the cooperative movement would be finished” (Ibid.), thus expressing a warning that will be found in the ICA report on *Making Membership Meaningful* (1995). The second challenge concerned their relations with government. While the state still played a key role in providing services at the close of the 20th century, it also needed to recognize its limits and work more closely with the third sector and cooperatives. In order to meet these challenges in a changing world, he argued, cooperatives needed to focus on four main things by 2000—food safety and security, promoting worker cooperatives, reinvigorating consumer cooperatives and building community. All four of these issues are still highly relevant today, more than 40 years after Laidlaw's report, and they comprise important opportunities for cooperatives.

Scholars have underlined these new opportunities for cooperatives and social enterprises in the changing landscape of the welfare state in recent decades. Borzaga (2011) argued that this opened up new spaces of action for cooperatives around the world, particularly as providers of welfare and social services. Yet, he laments that cooperatives in most countries were not able to meet these new challenges and opportunities in the past three decades, in spite of Laidlaw's clear analysis (Ibid.). Nevertheless, he provided several examples of how the Italian cooperatives and social enterprises successfully adapted to changing circumstances and were therefore able to develop many new welfare services not available from either the state or market (Ibid.). Elsewhere, Pestoff provides examples of cooperatives developing childcare services in Scandinavia (1992; 1998; 2009; 2012) and healthcare in Japan (2017; 2021).

These services express the social and political dimensions of cooperatives more clearly than traditional commercial efforts by agricultural, consumer, credit, or housing cooperatives. Perhaps these social and political dimensions can provide a road map for the future of cooperatives, as suggested by Laidlaw and Borzaga. Identifying certain key institutional characteristics of cooperatives can help overcome the challenges discussed by Laidlaw and Borzaga. In fact, my

own research on cooperatives in different sectors, settings and cultures isolates two institutional characteristics that are unique to cooperatives. They are their capacity to pursue multiple goals in a balanced fashion and the promotion of democratic decision making. Neither private for-profit firms nor the public sector share these characteristics, though they should perhaps consider trying to emulate some aspects of them.

More recently, theoretical research emphasizes that multi-stakeholder cooperatives provide a framework for sustainability and social responsibility (Altman, forthcoming). Cooperative research usually focuses on single stakeholder organizations, like worker, consumer, agricultural, credit or housing cooperatives. Yet, he argues that there is no reason to expect single purpose cooperatives will be socially responsible. Rather, he maintains that multi-stakeholder cooperatives will be more likely to assume social responsibility, since they are closer aligned with the interest of other stakeholders who are not usually members of a single stakeholder cooperative. More inclusive democratic forms of governance allow them to internalize the interest of the broader community (*ibid.*). Following this lead, we provide some evidence that supports his theoretical contention.

3. Comparing three books on cooperatives in different sectors, settings and cultures

I have published three separate books on cooperatives that operate in different sectors, settings and cultures. The first one, *Between Markets and Politics* (in short *BMP*, 1991), compares the traditional forms of cooperatives in Sweden; i.e., the agricultural, consumer and housing cooperatives, in terms of membership participation and organizational structure. The second one, *Beyond the Market and State* (in short *BMS*, 1998), focuses on the contribution of social service cooperatives to renewing the welfare state by enriching the staff's work environment, augmenting parental influence and fulfilling public goals of providing high quality childcare in Sweden. Finally, the most recent one, *Co-Production and Japanese Healthcare* (in short *CP&JHC*, 2021), contrasts Japanese healthcare cooperatives with public healthcare service providers, both from a staff and client perspective, in terms of work environment, governance, service quality and social values. Going a step further and comparing these three studies would permit us to undertake a limited meta-study of cooperatives in quite different sectors, settings and cultures. This, in turn, allows us to identify some unique structures and characteristics that can help make sense of cooperatives and provide a model for their future developments. That is what this contribution proposes to do.

4. Methods and data for a meta study of cooperatives

As a professor of political science, I recognize that knowledge can be gained by comparing and contrasting different organizational forms in order to illustrate their strengths and weaknesses.

Two basic strategies are employed in comparative politics: comparing similar organizations, institutions or states and looking for differences between them or comparing different organizations, institutions and states and looking for similarities. My study of cooperative organizations combines both of these strategies at different times. This allowed me to explore the importance of organization size and member participation for the established cooperatives in Sweden; to emphasize the benefits of parent and worker cooperative childcare for both the staff and clients, compared with municipal services; and more recently to compare consumer and agricultural cooperative healthcare in Japan with public services in terms of work environment, governance and service quality. A comparative approach that focuses on the strength and weakness of cooperatives underlines the core values and essence of cooperative movements in various fields and countries. As a result, this can create greater appreciation and acclaim for cooperatives from researchers and practitioners worldwide and from society in general.

Table 1 below lists the survey data collected for these three books. The data analyzed in these volumes share some similarities yet demonstrate some differences. A brief description of the empirical materials that provide the base for each volume follows. The *BMP* study involved interviews and survey data, and visiting organizational archives to collect written documents, including histories and annual general reports for several years. It began with a secondary analysis of the Swedish Organizational Life Study, based on a nationwide random sample of adults between 18-80 years old. There were more than 1,200 members of established Swedish cooperative organizations, such as KF, LRF and HSB². It compared and contrasted them with each other and with 15 other types of voluntary organizations. However, few clear leads were provided by the socio-economic background of cooperative members that could explain their unusually low level of participation. Attention then shifted to an archive study of the three main types of Swedish cooperatives to explore how changes in their organizational structure might have opened or closed opportunities for their members to participate. This part of the research provided clearer results that are discussed below.

The *BMS* study focuses on new social service cooperatives in the early 1990s, employing original data collected exclusively for this study of alternative provision of childcare in Sweden. Fifty-seven childcare providers in six different parts of Sweden agreed to participate in our study. There were three different types of alternative providers of childcare services: parent cooperatives, worker cooperatives and third sector providers with special pedagogics, like Montessori, Reggio Emilia and Waldorf. We visited each one on site, interviewed the manager, observed their facilities and activities, and collected relevant documents, including recent annual general reports. Later we distributed a questionnaire to the staff and parents at each childcare center. The Staff Study focused on work environment, while the Parent Study explored client participation, influence and satisfaction. In all we collected 244 staff and 580 parent questionnaires. We compared and

² More information on the cooperatives studied is available in Table 1.

contrasted each type of provider with the others and also with municipal providers, through a retrospective comparison. This allowed us to develop a unique profile for each provider based on their strength and weakness and contrasted them with municipal childcare services through a retrospective study.

The *CP&JHC* study was undertaken in a different service sector, healthcare, nearly three decades later and in very different cultural context than the two previous studies. It was done in collaboration with Professor Yayoi Saito, our Japanese colleague from Osaka University, and with the assistance of a reference group of cooperative healthcare providers. According to a United Nations' report (1997), Japan has two nonprofit healthcare providers and both are classified as user cooperatives. The first provides healthcare mostly in urban areas and its national organization, the Health and Welfare Federation (HeW CO-OP), is affiliated with the Japanese Consumer Cooperative Union (JCCU). They are referred to as Medical Co-ops in this research. The second is the Federation of Agricultural Cooperatives for Health and Welfare, known as Koseiren. It is part of the agricultural cooperative movement and it operates mainly in rural areas. Together, these two healthcare cooperatives, manage almost 190 hospitals with nearly 45,000 hospital beds, which is more hospital beds than all of Denmark and Sweden combined.

This project is comprised of four separate studies, an Organizational Study, a Staff Study and a Patient and Volunteer Study. The Organizational Study conducted open-ended, on-site, interviews with the leaders of nine Medical Co-op hospitals and collected relevant documents from them. The Staff Study collected survey data with a work environment questionnaire completed by nearly 7,000 employees at ten Japanese hospitals in different parts of the country. There were four Medical Co-ops and four Koseiren hospitals plus two municipal hospitals. The Patient and Volunteer Studies relied on a much smaller sample of 632 patients and 236 volunteers from two Medical Co-op and two Koseiren hospitals.

Thus, major survey data and document collections were conducted in different sectors, situations and cultures. They provided the basis for comparing the various types of cooperatives and reaching our conclusions. Each of these studies was published by reputable international publishers and numerous peer-reviewed articles based on them were also published. These three cooperative studies will now be compared to reach some overarching insights into and conclusions from a mini meta-study of cooperatives in the next section of this contribution. This will underline the main conclusion of each study that helps to identify key institutional characteristics of cooperatives across sectors, settings and cultures.

Table 1. Name or type, sector and location of the cooperatives studied in three cooperative books

Book	Cooperatives	Respondents	Sector	Focus, location
BMP	Swedish Cooperative Union and Wholesale Society/Kooperativa förbundet (KF)	34% of sample together with HSB	Commerce	National and local
BMP	Swedish Farmers Supply and Cooperative Marketing Association/Svenska lantmännens riksförbund (SLR)	Only 4% of sample	Agriculture	National and local
BMP	National Tennants' Building and Savings Society/Hyresgästernas spar och bostadsförening (HSB)	34% of sample together with KF	Housing	National and local
Total	Swedish Organizational Life Study, total respondents	3,451		
BMS	Parent co-ops (föräldrar kooperativ)	88/190*	Childcare	23 local daycare centers
BMS	Worker co-ops (arbetskooperativ)	97/ 201*	Childcare	17 local daycare centers
BMS	Third sector providers (föreningsdrivna)	59/ 189*	Childcare	16 local daycare centers
Total	Total of 57 daycare centers in six counties**	244/ 580*		
CP&JHC	4 Japanese Health and Welfare Federation hospitals/HeW CO-OP hospitals***	2,852****	Healthcare	5 prefectures
CP&JHC	4 Federation of Agricultural Co-ops for Health and Welfare/JA-Koseiren hospitals****	2,562****	Healthcare	5 prefectures
Total	10 hospitals (+2 municipal hospitals)****	6,859****		

Source: Author's own elaboration.

Notes:

BMP = *Between Markets & Politics*.

BMS = *Beyond the Market & State*.

CP&JHC = *Co-Production and Japanese Healthcare*.

*Number of staff/ parents.

**Counties included: Stockholm, Gothenburg, Malmö, Uppsala, Jämtland and Västerbotten.

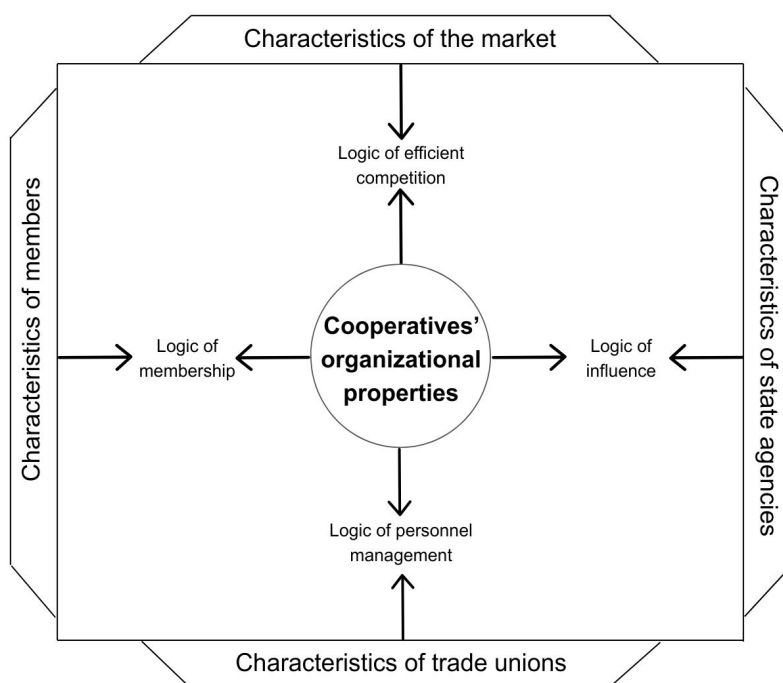
***Prefectures included: Aichi, Fukushima, Himeji, Nagano, Osaka and Saitama.

**** Only number of respondents in the Staff Study are shown here. There were also 631 and 236 respondents in the Patient Study and Volunteer Study respectively.

5. Comparing cooperatives: different sectors, settings and cultures

Between Markets and Politics (BMP) compares and contrasts membership participation in the three established forms of cooperatives in Sweden during the post-World War II period, i.e., the consumer cooperatives, the agricultural cooperatives and the building and tenant cooperatives. The first part employs survey data and standard social economic background factors in order to study member participation in more than a dozen different types of voluntary organizations and contrast them with cooperatives. It documents a unique pattern of participation for cooperative members. The second part shifts attention to the growth of cooperative organizations over several decades to better understand the implications of these structural developments. Then, it introduces a dynamic model of cooperative development in relation to larger societal changes. See Figure 1.

Figure 1. The competing “logics” of Swedish cooperatives



Source: Author's own elaboration.

Both the consumer and agricultural cooperatives promoted major structural reforms that resulted in much larger and more centralized organizations. However, this resulted in rapidly declining opportunities for member participation in ways that closed opportunities for their participation in or chance to gain a voluntary office. The building and tenant cooperatives, by contrast, were limited by law from doing this, so they retained much stronger membership structures and higher levels of

participation. This study documents the importance of organizational size. Smaller local cooperative organizations facilitate membership participation that help make cooperative membership meaningful. Cooperative leaders should stop merely viewing their members' behavioral changes as a reflection of societal changes and instead consider how best to harness such changes by maintaining organizational structures that facilitate or encourage member participation.

Thus, two clear patterns were found that helped explain the differences between these three cooperative movements after World War II. Structural rationalization and amalgamations resulted in bigger and bigger central organizations and fewer and fewer local branches where members normally participate or can serve as an elected officer. This was evident in both the consumer and agricultural cooperatives, but not the building and tenant cooperatives. Legal restrictions prevented the amalgamation of two or more local building and tenant cooperatives, thus preserving their local democratic structure. A dynamic model of social and organizational change was presented that helped balance a cooperative's strategic goals. This study emphasizes the importance of changes in a cooperative's organizational structure and the need for balancing multiple goals so that no single one dominates for too long. Thus, *BMP* emphasizes the need for cooperatives to balance several goals, rather than pursue a single one like maximizing profit or a surplus. While this clearly is a challenge, it also opens unique opportunities. Members, markets, employees and the state all comprise important environments for cooperatives to promote multiple goals. Focusing on a single one at the expense of the others is highly detrimental and cooperatives will not thrive in the long run. Poor work environment results in staff burnout, difficulties with staff recruitment and retention that in turn lead to poor quality goods and/or services. Membership loyalty determines a cooperative's economic performance but also reflects their attachment to and ability to influence their local cooperative.

Beyond the Market and State (BMS) reports the findings of a research project called Work Environment and Cooperative Social Services (WECSS), undertaken in the early 1990s, at the outset of New Public Management and privatizing the Swedish welfare state. It employed survey techniques to explore the potential contribution of social enterprises to enrich the staff's work environment and empower the clients. After introducing several key concepts, e.g., co-production, multi-stakeholder organizations and social auditing, it contrasts the experience of the staff and parents at different types of social enterprises that provide childcare in Sweden. That includes parent cooperatives, worker cooperatives and nonprofit organizations. It explores parents' motives for choosing one type of provider rather than another. Some parents emphasize the importance of having a feeling of belonging and influence, while others are motivated by the proximity of a service provider. This finding underlines the fact that one size does not fit all, so parents should have more choices than simply between public and for-profit services. Cooperative and third sector services should be facilitated. Then it compares their evaluation of the services to derive a service profile for each type of provider.

It also contrasts the staff's experience of their work environment from the perspective of the Karasek and Theorell (1990) Demand & Control model. This study showed both the staff and

parents deemed that alternative providers of childcare were “better”, “much better” or “very much better” than municipal services in terms of 20 different dimensions. Thus, both the staff and parents at parent cooperatives, worker cooperatives and voluntary organizations, overwhelmingly prefer them to public services. This is particularly notable for staff and parents with experience from both municipal and cooperative services, i.e., they have worked at both forms or had a child at both forms. These findings suggest that there are clear benefits for the staff, clients and society from cooperatizing public services rather than simply privatizing them.

Healthcare in most developed countries faces a complex and partly contradictory mix of financial, social and political challenges. *Co-Production and Japanese Healthcare (CP&JHC)* explores a possibility to address these challenges from a new perspective that emphasizes greater collaboration between the staff and patients. It is one where professionals and patients/clients act as partners to co-produce healthcare through their mutual contributions. Japan has a unique system of two user-owned or cooperative healthcare providers that together manage nearly 190 hospitals, 500 clinics with a total of 45,000 beds together. This volume compares cooperative and public healthcare providers at 10 hospitals across Japan with survey data from the staff, as well as data from the patients and volunteers at four of them. It documents how and why these three providers differ from one another in terms of their work environment, service quality, governance models and the social values they promote.

The Staff Study provides valuable insight to various aspects of work life in Japanese hospitals and the impact cooperatives can make on it. It employed the classical Karasek and Theorell (1990) work life Demand & Control model to analyze the data where the staff was divided into four work life categories. About one third of the staff fell in the “low strain” category, another third were found in the “high strain” category, while the remainder were divided between the “active” and “passive” categories. The Medical Co-ops are rated best across the board in terms of their work life, the municipal hospitals are rated worst, while Koseiren falls in between them. The “low strain” category fares much better than the “high strain category” in all of the key work life indices used by this project and also in terms of the staff’s personal health. The proportion of “high” answers concerning indices of work satisfaction, influence, and service, etc. is often two or three times greater in the “low strain” category than that noted for the “high strain” category. Thus, it appears that more staff control over their daily work tasks promotes greater work satisfaction, and more satisfied staff will in turn, provide better quality services than dissatisfied staff. Moreover, the “low strain” category not only gets more support from their colleagues and supervisors, but they also have more interactions with their patients than staff in the “high strain” category.

A healthcare provider’s governance model comprises a key intervening variable that helps explain these differences. We considered three models for governing healthcare, as illustrated in Figure 2: a more traditional “command and control” model, a “stewardship” model and a “democratic, multi-stakeholder” model. A healthcare provider position was determined by its location at the intersection of two variables: staff autonomy and control (vertical) with stakeholder inclusion

(horizontal). The lowest ranking was noted for municipal healthcare providers with a “command and control” governance model, the Koseiren hospitals came in between with a Stewardship model, while the Medical Co-ops’ democratic, multi-stakeholder model allows for greater staff control, while also promoting a multi-stakeholder dialogue and greater stakeholder inclusiveness.

The Patient Study corroborates the main findings from the Staff Study. It also sheds light on how healthcare providers can develop models to facilitate, foster and institutionalize user/patient participation. Inclusive governance models provide a path for achieving greater participation from, and collaboration between, key stakeholders that are not normally consulted or included by traditional public sector or market approaches to healthcare. Thus, cooperative healthcare in Japan is not merely a small-scale utopian experiment; it provides a best practice that could be emulated by public and for-profit healthcare providers in Japan and elsewhere. Thus, medium scale cooperative healthcare functions, and has functioned well for more than 75 years in Japan. Neither public nor for-profit providers have a monopoly on service quality in social and/or healthcare services. Both the Stewardship model and the democratic, multi-stakeholder model provide a best practice that other healthcare providers could learn from and should perhaps emulate.

Figure 2. Three governance models

			Democratic,
	Stewardship		multi-stakeholder
Command			
& control			

Source: Author’s own elaboration.

6. Bulwark against nihilism

The re-election of Donald Trump in 2024 as President of the USA ushered in the collapse of the Post WWII, globalized world order. Liberalism, the rule of law and a democratic system based on “checks and balances” were severely undermined. They were rapidly replaced by a Nihilistic, authoritarian order based on executive orders, mass deportation of immigrants, high tariffs and a heavy-handed America first approach. Similar right-wing, anti-immigrant movements have been noted elsewhere in several liberal, democratic countries.

Ostrom (1993) lamented the disappearance of civics studies in American schools and argued

that citizenship was often limited to voting and consuming public services. This constrained them to a passive role, left them in the hands of others and provided them with few resources and little control over many crucial aspects of their daily life. Attributing citizens a more active role as co-producers of key social services and engaging civil society, nonprofit organizations and co-operatives in the delivery of such social services could perhaps erode or maybe reverse this trend (Pestoff, 2009) and, thereby, contribute to a bulwark against nihilism and authoritarianism.

The study of *Co-production and Japanese Healthcare* comprises an in-depth analysis of the potential contribution of cooperatives to active citizenry and outlines some key elements of establishing a bulwark against nihilism and authoritarianism. It emphasizes the importance of core groups of society traditionally ignored by market models, i.e., the lower echelon staff who provide essential social services and the clients of major service providers. The *CP & JHC* study demonstrates that participatory governance and multi-stakeholder cooperatives can enrich the staff's work environment, improve healthcare providers' service quality, create a partnership between the professionals and clients by engaging the service users as co-producers, and help achieve other major social goals.

7. Conclusions

There are two main schools concerning the development and future of cooperatives and this fact reflects their dilemma as hybrid organizations. The associational school sees cooperatives as organizations that pursue social and cultural goals by economic means. It focuses on their role in a rapidly changing world by responding to members' vastly changing needs and demands in a fashion that balances various stakeholders and goals. The business school regards cooperatives as business firms that have some unique social and associational features. It considers them as "member-owned" businesses that need to modernize and professionalize in order to meet growing competition from private firms. Yunus (2007: 33) warned that competition and isometric forces will gradually force hybrid organizations to "inch toward the profit maximization goal, no matter how the company's mission is designed".

The comparison of three books on cooperatives in different sectors, settings and cultures shows that indeed, there is a real risk of inching toward the goal of profit maximization, particularly if they abandon the hybrid logic noted in the ICA's definition. We found a clear expression of this in the first volume, where both the Swedish consumer cooperatives and agriculture cooperatives pursued a policy of amalgamations based on the logics of the market and influence at the expense of the logics of membership and of human resource management. Quite simply, they failed to balance the competing interests that cooperatives need to observe, lest they gradually become ordinary business firms. Yet, this appears to be the mantra of the business school.

The associational school, by contrast, attempts to provide cooperatives and their leaders with a compass necessary to maintain their hybrid nature, regardless of sector, setting or culture. Balancing

competing and at times conflicting interests is imperative for cooperative success and sustainability. Moreover, providing members with the possibility to participate and influence the development and direction of their local cooperative is essential. However, this comparison shows that cooperatives demonstrate a unique capacity for enriching the work environment of the staff, empowering the clients as co-producers of high-quality services and promoting democratic models for governing essential human services. This was clearly demonstrated in both the 1990 study of cooperative childcare in Sweden and once again, nearly 30 years later, in the study of cooperative healthcare in Japan. This unique capacity of cooperatives to become more than just utopian experiments has allowed them to truly embody a best practice both in Swedish childcare in the 1990s and Japanese healthcare in the 2020s. Cooperatives have a similar possibility in many other areas, particularly other enduring social services, like education, care for older adults and persons with disabilities, etc. that are in high demand given the retreat of the welfare state.

Thus, in spite of the clear difference in size, sector, times and culture, there are several noteworthy similarities between cooperative childcare in Sweden in the early 1990s and cooperative healthcare in Japan in the late 2010s. Cooperatives providing social services are able to pursue more than one goal. This suggests cooperatives have some unique institutional characteristics that allow them to enrich the work environment of their staff, empower their clients as co-producers, provide high quality services and promote democratic models for governing essential social services. These unique institutional characteristics not only include their capacity to pursue more than one goal at a time, when properly balanced, but also their democratic decision-making structures that make it possible. However, these institutions are not found in either public or for-profit social service providers. So, cooperativize, do not privatize social and welfare services.

Finally, multi-stakeholder organizations, like Japanese cooperative healthcare providers, can also provide an antidote to right-wing populism by offering citizens the opportunity to engage as co-producers of enduring social services that they depend on for their life opportunities and standing. This research demonstrates that cooperative members can gain a sense of belonging and crucial insights into the operations of such services through co-production. This can help provide a bulwark against the growing social isolation where right-wing populism thrives.

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